

**STANDARDIZED NUTRITION CARE PROCESS FOR PATIENTS WITH
CKD ON HD PRE POST URETEROLITHOTOMY IN MARWAH WARD OF
PKU MUHAMMADIYAH YOGYAKARTA HOSPITAL**

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ABSTRACT

Background : Chronic Kidney Disease (CKD) is a disorder of kidney function that leads to imbalances in body fluids, electrolytes, and metabolism. This disease is increasingly prevalent, particularly in developing countries, and contributes to the rise in global mortality rates. Patients with end-stage CKD undergoing hemodialysis are at high risk of malnutrition. Additionally, surgical procedures such as ureterolithotomy are often performed to address urolithiasis, which can worsen kidney conditions. Proper nutritional therapy is crucial in managing malnutrition in CKD patients. The implementation of a Standardized Nutritional Care Process (SNC) can aid in improving the nutritional status of patients with CKD on HD undergoing ureterolithotomy. Therefore, this research aims to evaluate the application of SNC in these patients.

Objective : To evaluate the implementation of standardized nutritional care processes in CKD patients on HD pre-post ureterolithotomy at PKU Muhammadiyah Hospital Yogyakarta.

Method : Descriptive operational assessment type with a case study. The research location is PKU Muhammadiyah Hospital Yogyakarta. The research subject is a CKD patient on HD pre-post ureterolithotomy.

Results : The patient is experiencing malnutrition based on the MNA screening form. The nutritional assessment shows that the patient's nutritional status is good based on % LILA. Biochemical examination revealed low sodium, high potassium, and normal chloride levels. Physical/clinical examination showed that pulse, temperature, and respiration were normal, while the patient's blood pressure was low. The patient complained of shortness of breath, abdominal pain, nausea, and vomiting. The food intake recall results show that the patient's intake is less than the requirement. The nutritional diagnosis established is in accordance with the dietary prescription data. Dietary provision is in accordance with hospital standards. The biochemical, physical/clinical, and food intake developments of the patient have been improving day by day, but there was a slight decline after the ureterolithotomy surgery. Nutritional counseling was conducted using a leaflet with discussion and interview methods.

Conclusion : The Standardized Nutrition Care Process for patients includes screening, nutritional assessment, nutritional diagnosis, nutritional intervention, monitoring evaluation, and nutritional counseling.

Keywords : CKD, Nutrition Care.

**PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN PENDERITA
CKD ON HD PRE POST URETEROLITOTOMI DI BANGSAL MARWAH
RS PKU MUHAMMADIYAH YOGYAKARTA**

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ABSTRAK

Latar belakang : Gagal Ginjal Kronik (GGK) adalah gangguan fungsi ginjal yang menyebabkan ketidakseimbangan cairan, elektrolit, dan metabolisme tubuh. Penyakit ini semakin prevalen, terutama di negara berkembang, dan berkontribusi pada peningkatan angka kematian global. Pasien dengan GGK stadium akhir yang menjalani hemodialisis berisiko tinggi mengalami malnutrisi. Selain itu, prosedur bedah seperti ureterolitotomi sering dilakukan untuk mengatasi urolitiasis, yang dapat memperburuk kondisi ginjal. Terapi gizi yang tepat sangat penting dalam menangani malnutrisi pada pasien GGK. (PAGT dapat membantu meningkatkan status gizi pasien CKD on HD yang menjalani ureterolitotomi. Oleh karena itu, penelitian ini bertujuan untuk mengevaluasi penerapan PAGT pada pasien tersebut.

Tujuan : Mengkaji pelaksanaan proses asuhan gizi terstandar pada pasien CKD on HD pre-post ureterolitotomi di RS PKU Muhammadiyah Yogyakarta.

Metode : Jenis penilaian deskriptif operasional dengan studi kasus. Lokasi penelitian di RS PKU Muhammadiyah Yogyakarta. Subyek penelitian adalah seorang pasien CKD on HD pre-post ureterolitotomi.

Hasil : Pasien mengalami malnutrisi berdasarkan formulir skrining MNA. Pengkajian gizi diperoleh hasil status gizi pasien baik berdasarkan %LILA. Pemeriksaan biokimia didapatkan hasil natrium rendah, kalium tinggi, dan klorida normal. Pemeriksaan fisik/klinis didapatkan hasil nadi, suhu, dan respirasi normal, sedangkan tekanan darah pasien rendah. Pasien mengeluh sesak napas, perut terasa nyeri, mual dan muntah. Hasil *recall* asupan makan pasien kurang dibandingkan dengan kebutuhan. Diagnosis gizi yang ditegakkan sesuai dengan data preskripsi diet. Pemberian diet sesuai dengan standar rumah sakit. Perkembangan biokimia, fisik/klinis, asupan makan pasien semakin hari semakin membaik, namun agak menurun pasca operasi ureterolitotomi. Konseling gizi dilakukan dengan media leaflet dengan metode diskusi dan wawancara.

Kesimpulan : Proses Asuhan Gizi Terstandar pada pasien meliputi skrining, pengkajian gizi, diagnosis gizi, intervensi gizi, monitoring evaluasi dan konseling gizi.

Kata Kunci : CKD, Asuhan Gizi