

PROSES ASUHAN GIZI TERSTANDAR PADA PASIEN BEDAH KANKER REKTUM, *ABDOMINAL PAIN EC (ET CAUSA) ILEUS OBSTRUKTIF PARSIAL, WOUND DEHISCENCE, PASCA KOLONOSKOPI DAN LAPARATOMI DI RUANG RAJAWALI 2 RSUP Dr. KARIADI SEMARANG*

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ABSTRAK

Latar Belakang : Kanker rektum merupakan salah satu jenis kanker anus dengan angka kejadian tinggi di Indonesia. Kondisi ini sering menyebabkan gangguan gizi, seperti mual, muntah atau penurunan nafsu makan. Asupan gizi yang tidak adekuat dapat memperlambat penyembuhan luka dan menurunkan kualitas hidup pasien. Oleh karena itu, penerapan Proses Asuhan Gizi Terstandar (PAGT) sangat penting untuk membantu pemulihan pasien kanker rektum pasca bedah.

Tujuan : Penelitian ini bertujuan untuk menggambarkan pelaksanaan PAGT pada pasien bedah dengan diagnosis Kanker Rektum, *Abdominal Pain ec (et causa) Ileus Obstruktif Parsial, Wound Dehiscence*, pasca Kolonoskopi dan Laparotomi di Ruang Rajawali 2 RSUP Dr. Kariadi Semarang.

Metode : Penelitian menggunakan pendekatan deskriptif kualitatif dengan rancangan studi kasus. Data diperoleh melalui observasi, wawancara, rekam medis, dan pengukuran antropometri serta biokimia. Tahapan PAGT meliputi skrining gizi, pengkajian, diagnosis, intervensi, serta monitoring dan evaluasi selama tiga hari.

Hasil : Pemberian diet Tinggi Energi Tinggi Protein (TETP) selama tiga hari, asupan energi meningkat dari 44,9% menjadi 104,1% dan protein dari 41,6% menjadi 83,3% dari kebutuhan harian walaupun mengalami fluktuasi. Kondisi klinis pasien membaik dari tanda vital, perbaikan keseimbangan elektrolit, serta toleransi makan yang meningkat.

Kesimpulan : PAGT secara tepat meningkatkan asupan gizi, memperbaiki kondisi klinis, serta mendukung penyembuhan luka pada pasien kanker rektum dengan komplikasi ileus parsial pasca operasi.

Kata Kunci : Asuhan Gizi Terstandar, Kanker Rektum, Ileus Obstruktif Parsial, *Wound Dehiscence*, Tinggi Energi Tinggi Protein

STANDARDIZED NUTRITION CARE PROCESS IN POST-SURGICAL PATIENTS WITH RECTAL CANCER, ABDOMINAL PAIN EC (ET CAUSA) ILEUS OBSTRUCTIVE PARTIAL, WOUND DEHISCENCE, COLONOSCOPY AND LAPARATOMY IN RAJAWALI 2 WARD, Dr. KARIADI GENERAL HOSPITAL, SEMARANG

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ABSTRACT

Background : Rectal cancer is one of the most common types of anal cancer in Indonesia. This condition often leads to nutritional problems such as nausea, vomiting, and loss of appetite. Inadequate nutritional intake can slow down wound healing and decrease patients' quality of life. Therefore, implementing the Standardized Nutrition Care Process (SNCP) is essential to support the recovery of rectal cancer patients after surgery.

Objective : This study aims to describe the implementation of the SNCP in a surgical patient diagnosed with Rectal Cancer, Abdominal Pain ec (et causa) Partial Obstructive Ileus, Wound Dehiscence, post Colonoscopy, and Laparotomy in Rajawali 2 Ward, Dr. Kariadi General Hospital Semarang.

Method : This research used a qualitative descriptive approach with a case study design. Data were obtained through observation, interviews, medical records, and anthropometric and biochemical assessments. The SNCP stages included nutrition screening, assessment, diagnosis, intervention, and monitoring–evaluation conducted over three days.

Results : The administration of a High Energy High Protein (HEHP) diet for three days increased the patient's energy intake from 44.9% to 104.1% and protein intake from 41.6% to 83.3% of daily requirements, although fluctuations were observed. The patient's clinical condition improved, as indicated by stabilized vital signs, better electrolyte balance, and increased eating tolerance.

Conclusion : SNCP effectively improved nutritional intake, clinical condition, and wound healing in a rectal cancer patient with partial ileus complication after surgery.

Keywords : Standardized Nutrition Care Process, Rectal Cancer, Partial Obstructive Ileus, Wound Dehiscence, High Energy High Protein