

## ABSTRAK

### **Asuhan Gizi Terstandar pada Pasien Kanker Tiroid dengan Kekambuhan Lokal Pasca Tiroidektomi Total dan Diseksi Leher Radikal di Ruang Rawat Inap Cendana RSUP Dr. Sardjito Yogyakarta**

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**Latar Belakang:** Kanker tiroid yang mengalami kekambuhan lokal memerlukan tindakan bedah lanjutan, seperti tiroidektomi total dan diseksi leher radikal, yang meningkatkan risiko malnutrisi dan komplikasi pasca operasi. Studi kasus ini menyoroti peran krusial Proses Asuhan Gizi Terstandar (PAGT) dalam mempercepat pemulihan dan mempertahankan status gizi optimal pasien pasca bedah mayor.

**Tujuan:** Mengevaluasi pelaksanaan PAGT mulai dari asesmen, diagnosis gizi, intervensi gizi, hingga monitoring dan evaluasi terhadap perubahan antropometri, biokimia, fisik klinik, dan status asupan makan pasien pasca tiroidektomi total dan diseksi leher radikal.

**Metode:** Studi kasus deskriptif dengan pendekatan PAGT pada pasien rawat inap selama 3 hari. Diagnosis gizi awal adalah asupan oral tidak adekuat. Intervensi berupa Diet Tinggi Energi Tinggi Protein (TETP) disertai edukasi dan konseling gizi. Monitoring meliputi antropometri, biokimia, fisik klinik, dan asupan makan.

**Hasil:** Di hari pertama pasca operasi, asupan energi dan karbohidrat tergolong inadeguat (<80% kebutuhan). Setelah intervensi, asupan zat gizi makro meningkat secara progresif hingga mencapai tingkat adekuat atau optimal di hari ketiga (>80% kebutuhan). Secara klinis, terjadi penurunan skala nyeri dan tanda vital stabil. Sedangkan untuk biokimia terdapat penurunan Hemoglobin dan Hematokrit post operasi. Diagnosis gizi awal dinyatakan teratasi di akhir periode monev.

**Kesimpulan:** Penerapan PAGT pada pasien kanker tiroid pasca bedah radikal efektif dalam meningkatkan asupan gizi hingga mencapai target kebutuhan anabolik dan mempercepat pemulihan klinis.

**Kata Kunci:** Proses Asuhan Gizi Terstandar, Kanker Tiroid, Tiroidektomi Total, Diseksi Leher Radikal

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### ***Standard Nutrition Care for Thyroid Cancer Patients with Local Recurrence after Total Thyroidectomy and Radical Neck Dissection in the Cendana Inpatient Ward of Dr. Sardjito General Hospital, Yogyakarta***

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**Background:** *Thyroid cancer with local recurrence requires further surgical procedures, such as total thyroidectomy and radical neck dissection, which increase the risk of malnutrition and postoperative complications. This case study highlights the crucial role of Standardized Nutrition Care (SNC) in accelerating recovery and maintaining optimal nutritional status in patients after major surgery.*

**Objective:** *Evaluating the implementation of PAGT, starting from assessment, nutritional diagnosis, nutritional intervention, to monitoring and evaluation of changes in anthropometry, biochemistry, clinical physical, and dietary intake status of patients after total thyroidectomy and radical neck dissection.*

**Methods:** *A descriptive case study using the PAGT approach in inpatients for 3 days. The initial nutritional diagnosis was inadequate oral intake. The intervention consisted of a high-energy, high-protein diet (TETP) accompanied by nutrition education and counseling. Monitoring included anthropometry, biochemistry, clinical physical examination, and food intake.*

**Results:** *On the first day after surgery, energy and carbohydrate intake was inadequate (<80% of requirements). After intervention, macro nutrient intake increased progressively until reaching adequate or optimal levels on the third day (>80% of requirements). Clinically, there was a decrease in pain scale and stable vital signs. Biochemically, there was a decrease in hemoglobin and hematocrit post-surgery. The initial nutritional diagnosis was resolved by the end of the monitoring period.*

**Conclusion:** *The application of PAGT in thyroid cancer patients after radical surgery is effective in increasing nutritional intake to meet anabolic requirements and accelerating clinical recovery.*

**Keywords:** *Standardized Nutrition Care Process, Thyroid Cancer, Total Thyroidectomy, Radical Neck Dissection*