

**ASUHAN GIZI TERSTANDAR PADA PASIEN LIMFOMA NON  
HODGKIN COLLI MULTIPLE STAGE IV B (SUSPECT METASTASE  
CAPUT PANCREAS), COMMUNITY ACQUIRED PNEUMONIA PSI  
SCORE 131 RC V, CHOLESTATIC JAUNDICE, DAN ANEMIA  
HIPOKROMIK MIKROSITIK DI RUANG PANDAN WANGI  
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**ABSTRAK**

**Latar Belakang:** Limfoma Non-Hodgkin (LNH) merupakan keganasan sistem limfatik yang pada stadium lanjut dapat menyebabkan komplikasi sistemik, penurunan asupan, dan malnutrisi. Adanya komorbiditas seperti pneumonia, gangguan hepatobilier, dan anemia semakin memperburuk kondisi gizi dan klinis pasien. Penerapan Asuhan Gizi Terstandar berperan penting dalam mendukung terapi medis dan mempertahankan status gizi.

**Tujuan:** Mengetahui proses asuhan gizi terstandar pada pasien Limfoma Non-Hodgkin colli multiple stadium IVB dengan cholestatic jaundice, anemia hipokromik mikrositik, dan community acquired pneumonia di Ruang Pandan Wangi RSUD Dr. Soetomo Surabaya.

**Metode:** Penelitian ini menggunakan rancangan kualitatif deskriptif dengan pendekatan studi kasus. Data primer dan sekunder disajikan dalam bentuk narasi dan tabel.

**Hasil:** Skrining gizi menunjukkan pasien berisiko malnutrisi dengan asupan oral tidak adekuat serta peningkatan kebutuhan energi dan protein. Data klinis dan biokimia menunjukkan adanya infeksi, gangguan hepatobilier, dan anemia. Intervensi gizi meliputi pemberian diet tinggi energi tinggi protein rendah lemak yang dikombinasikan dengan nutrisi enteral serta edukasi gizi. Monitoring menunjukkan peningkatan asupan, perbaikan toleransi makan, dan kondisi klinis yang relatif stabil.

**Kesimpulan:** Penerapan asuhan gizi terstandar membantu mempertahankan status gizi dan mendukung kestabilan kondisi klinis pasien meskipun memiliki penyakit dengan kompleksitas dan komorbiditas yang tinggi.

**Kata kunci:** Asuhan Gizi Terstandar, Limfoma Non-Hodgkin, Malnutrisi, Diet Tinggi Energi Tinggi Protein Rendah Lemak

***NUTRITION CARE FOR A PATIENT WITH STAGE IVB MULTIPLE COLLI  
NON-HODGKIN LYMPHOMA (SUSPECTED METASTASIS TO THE  
PANCREATIC HEAD), COMMUNITY-ACQUIRED PNEUMONIA WITH PSI  
SCORE 131 RISK CLASS V, CHOLESTATIC JAUNDICE, AND  
HYPOCHROMIC MICROCYTIC ANEMIA IN PANDAN WANGI WARD,  
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**ABSTRACT**

**Background:** *Non-Hodgkin Lymphoma (NHL) is a malignancy of the lymphatic system that, in advanced stages, is associated with systemic complications, decreased dietary intake, and malnutrition. The presence of comorbidities such as pneumonia, hepatobiliary disorders, and anemia further worsens nutritional and clinical conditions. Standardized nutrition care plays an important role in supporting medical therapy and maintaining nutritional status.*

**Objective:** *To describe the standardized nutrition care process in a patient with stage IVB multiple colli Non-Hodgkin Lymphoma accompanied by cholestatic jaundice, hypochromic microcytic anemia, and community-acquired pneumonia treated in the Pandan Wangi Ward of RSUD Dr. Soetomo, Surabaya.*

**Methods:** *This study used a descriptive qualitative case study design with primary and secondary data presented in narrative and tabular forms.*

**Results:** *Nutritional screening indicated a risk of malnutrition, with inadequate oral intake and increased energy and protein requirements. Clinical and biochemical findings showed infection, hepatobiliary dysfunction, and anemia. Nutritional interventions included a high-energy, high-protein, low-fat diet combined with enteral nutrition support and nutrition education. Monitoring showed improved dietary intake, better feeding tolerance, and relatively stable clinical conditions.*

**Conclusion:** *Standardized nutrition care supported the maintenance of nutritional status and clinical stability despite disease complexity and multiple comorbidities.*

**Keywords:** *Standardized Nutrition Care, Non-Hodgkin Lymphoma, Malnutrition, High-Energy High-Protein Low-Fat Diet*