STANDARDIZED NUTRITION CARE PROCESS (SNCP) FOR PATIENTS WITH FEVER AND THROMBOCYTOPENIA IN THE BOROBUDUR 2 WARD, MERAH PUTIH REGIONAL GENERAL HOSPITAL MAGELANG

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ABSTRACT

Background: Fever with thrombocytopenia is commonly encountered in hospital settings and adversely affects nutritional status through increased energy demands, reduced appetite, and bleeding risks.

Objective: To describe the implementation of the Standardized Nutrition Care Process (SNCP) in a patient with fever and thrombocytopenia at the Borobudur 2 Ward, Merah Putih Regional General Hospital, Magelang.

Methods: A descriptive case study involving Mr. S, a 61-year-old male diagnosed with fever and thrombocytopenia, hospitalized in February 2026. Data were collected via MST screening, anthropometric, biochemical, clinical, and dietary history assessments. Nutrition intervention was implemented over three days with daily monitoring.

Results: MST score was 3 (at-risk for malnutrition). BMI was 19.89 kg/m² (normal) with severe intake deficits: energy 49.7%, protein 50.8%, and oral fluid 26.69% (1,232.6 ml). Biochemical findings showed platelet count $40\times10^3/\mu L$, lymphocyte 19.5%, and temperature 39.5°C. A High Energy High Protein (HEHP) diet of 2,250 kcal/89 g protein in soft texture was provided, along with nutrition education emphasizing adequate fluid intake. Total fluid intake (oral + 500 ml/day Asering infusion) improved from 77.1% on day 1 to 82.0% on day 3. Post-intervention, platelet count rose to $106\times10^3/\mu L$, lymphocyte to 31.8%, temperature normalized to 36.6°C, and energy intake reached 101%.

Conclusion: Systematic application of the SNCP in a patient with fever and thrombocytopenia with a HEHP diet effectively improved biochemical parameters, increased dietary intake, and supported optimal clinical recovery. Early standardized nutrition intervention is an essential component of inpatient management.

Keywords: *standardized nutrition care process, fever, thrombocytopenia, HEHP diet*

PROSES ASUHAN GIZI TERSTANDAR (PAGT) PADA PASIEN DEMAM DENGAN TROMBOSITOPENIA DI BANGSAL BOROBUDUR 2 RSUD MERAH PUTIH MAGELANG

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ABSTRAK

Latar Belakang: Demam dengan trombositopenia sering ditemukan di rumah sakit dan berdampak pada peningkatan kebutuhan energi, penurunan nafsu makan, serta risiko perdarahan yang memperburuk status gizi pasien.

Tujuan: Mengetahui penatalaksanaan Proses Asuhan Gizi Terstandar (PAGT) pada pasien demam dengan trombositopenia di Bangsal Borobudur 2 RSUD Merah Putih Magelang.

Metode: Studi kasus deskriptif dengan subjek Tn. S, laki-laki 61 tahun, terdiagnosis demam dengan trombositopenia, dirawat Februari 2026. Data dikumpulkan melalui skrining MST, pengkajian antropometri, biokimia, klinis, dan riwayat makan. Intervensi gizi dilaksanakan selama 3 hari dengan monitoring harian.

Hasil: Skrining MST skor 3 (berisiko malnutrisi). IMT 19,89 kg/m² (normal), namun asupan defisit berat: energi 49,7%, protein 50,8%, dan cairan oral 26,69% (1.232,6 ml). Trombosit $40\times10^3/\mu L$, limfosit 19,5%, suhu 39,5°C. Diberikan diet TETP 2.250 kkal/89 g protein bentuk lunak, disertai edukasi gizi termasuk pentingnya pemenuhan cairan. Total asupan cairan (oral + infus Asering 500 ml/hari) meningkat dari 77,1% (hari ke-1) menjadi 82,0% (hari ke-3). Setelah intervensi, trombosit meningkat menjadi $106\times10^3/\mu L$, limfosit 31,8%, suhu normal 36,6°C, dan asupan energi mencapai 101%.

Kesimpulan: Penerapan PAGT secara sistematis pada pasien demam dengan trombositopenia dengan diet TETP mampu memperbaiki status biokimia, meningkatkan asupan makan, dan mendukung pemulihan klinis secara optimal. Intervensi gizi dini yang terstandar merupakan komponen penting dalam tatalaksana pasien di rumah sakit.

Kata Kunci: *proses asuhan gizi terstandar, demam, trombositopenia, diet TETP*