ABSTRAK

UNIVERSITAS MUHAMMADIYAH JEMBER
PROGRAM STUDI DIII KEPERAWATAN
FAKULTAS ILMU KESEHATAN

Karya Tulis Ilmiah
Stephanie Alvey Marcellia Erfandi

Implementasi Posisi Head Up 30° Sebagai Upaya Menurunkan Risiko Perfusi Serebral Tidak Efektif Pada Pasien CVA Infark Di Ruang Teratai RSUD dr. H. Koesnadi Bondowoso

xvi + 102 hal + 5 tabel + 3 gambar + 10 lampiran

Abstrak

Latar Belakang: Stroke infark dapat memicu edema serebral fokal, peningkatan tekanan intracranial (TIK), serta defisit neurologis seperti *hemiparese dextra.* Salah satu intervensi non-farmakologis untuk mengoptimalkan tekanan perfusi serebral adalah pengaturan *Head Up* 30°. **Tujuan:** Menggambarkan asuhan keperawatan melalui identifikaasi tanda klinis, pelaksanaan implementasi, dan evaluasi perkembangan status perfusi serebral setelah diberikan posisi *Head Up* 30° pada pasien stroke infark di Ruang RSUD dr. H. Koesnadi Bondowoso. **Metode:** Desain penelitian menggunakan studi kasus deskriptif kualitatif dengan pendekatan proses keperawatan. Subjek penelitian adalah 1 pasien (Tn. S.A) dengan stroke infark, *hemiparese dextra*, dan riwayat stroke berulang. Intervensi dilakukan selama 3 hari dengan pemantauan tingkat kesadaran (GCS) dan status hemodinamik (MAP). **Hasil:** Sebelum intervensi, pasien berada dalam kondisi kesadaran Apatis (GCS 11) dengan (MAP 114 mmHg). Setelah diberikan posisi *Head Up* 30° selama 3 hari berturut-turut yang dikolaborasikan dengan terapi medis (Infus Asering, Injeksi Citicoline 3x500 mg, Ticagrelor 2x1, Atorvastatin 40mg, dan Lisinopril 1x10mg), kesadaran pasien meningkat signifikan menjadi Composmenstis (GCS 15) pada hari ketiga. Status hemodinamik terjaga stabil (MAP akhir 119,6 mmHg) disertai perbaikan ringan pada kemampuan bicara dan kekuatan motorik. **Kesimpulan**: Integrasi posisi *Head Up* 30° dan terapi farmakologis efektif meningkatkan status perfusi serebral, serta mempercepat pemulihan kesadaran pada pasien stroke infark.

Kata kunci: *Head Up* 30°, Stroke Infark, Perfusi Serebral, Glasgow Coma Scale, Terapi Farmakologis.

ABSTRACT

MUHAMMADIYAH UNIVERSITY OF JEMBER
VOCATIONAL NURSING STUDY PROGRAM
FACULTY OF HEALTH SCIENCES

Scientific Paper
Stephanie Alvey Marcellia Erfandi

Implementation of Head Up 30° Position as an Effort to Reduce Intracranial Pressure in Infarction Stroke Patients at Teratai Ward dr. H. Koesnadi Bondowoso Hospital

xvi +102 pages + 5 tables + 3 picture + 10 appendices

Abstract

Background: *Infarct stroke can trigger focal cerebral edema, increased intracranial pressure (ICP), and neurological deficits such as hemiparesis dextra. One effective non-pharmacological intervention to optimize cerebral perfusion pressure is the 30° Head Up position.* ***Objective:*** *To describe nursing care throught identifying clinical signs, executing implementeation, and evaluating cerebral perfusion status after applying the 30° Head-Up position in a infarct stroke patient at Teratai Ward dr. H. Koesnadi Bondowoso Hospital.* ***Methods:*** *This study used a descriptive case study design with a nursing process approach. The subject was one patient (Mr. S.A) cinducted over 3 days, monitoring the Glasgow Coma Scale (GCS) and Mean Arterial Pressure (MAP).* ***Results:*** *Prior to the intervention, the patient`s consciousness level was Apathetic (GCS 11) with a MAP of 114 mmHg. Following the 30 Head Up position consecutiver days, integrated with medical therapy (Asering infusion, Citicoline 3x500mg, Ticagrelor 2x1, Atorvastatin 40mg, and Lisinopril 1x10mg), the patient`s consciousness significantly improved to Composmentis (GCS 15) by the third day. Hemodynamic status remained stable (final MAP 119,6 mmHg) with mild improvement in speech and motor strength.* ***Conclusion****: The integration of the 30° Head Up position and pharmacological therapy is highly effective in optimizing cerebral perfusion status and accelerating consciousness recovery in infarct stroke patients.*

Keywords: *Head Up 30°, infarction stroke, cerebral perfusion, Glasgow Coma Scale, Pharmacological Therapy.*