

ABSTRAK

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Karya Ilmiah Akhir, Juni 2026
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Evaluasi Hemodinamik Pada Pasien CVA Dengan Risiko Perfusi Serebral Tidak Efektif Di Ruang Instalasi Gawat Darurat RSUD dr. H. Koesnadi Bondowoso

ix + 54 Hal + 6 Tabel + 1 Gambar + 5 Lampiran

Pendahuluan: *Cerebrovascular Accident* (CVA) merupakan kegawatdaruratan neurologis yang memicu ketidakstabilan hemodinamik dan mengancam perfusi serebral adekuat. Penelitian ini bertujuan mengevaluasi status hemodinamik pada pasien CVA dengan risiko perfusi serebral tidak efektif di IGD RSUD dr. H. Koesnadi Bondowoso. **Metode:** Desain penelitian ini menggunakan studi kasus deskriptif pada tiga pasien CVA yang mengalami risiko perfusi serebral tidak efektif. Pengumpulan data dilakukan melalui observasi parameter hemodinamik (pre-post intervensi), wawancara, pemeriksaan fisik neurologis (*Glasgow Coma Scale*/GCS) dan rekam medis. Intervensi yang diberikan meliputi pemantauan hemodinamik berkala, posisi head-up 30°, manajemen peningkatan tekanan intrakranial dan kolaborasi medis. **Hasil:** Hasil pengkajian awal menunjukkan ketiga responden mengalami gangguan hemodinamik dan penurunan kesadaran yakni Ny. M stupor dengan TD 200/100 mmHg; Tn. S compos mentis dengan TD 149/82 mmHg; Tn. J somnolen dengan TD 170/100 mmHg disertai muntah proyektil. Hasil evaluasi akhir menunjukkan variasi klinis dimana Tn. S dan Tn. J berhasil mempertahankan stabilitas hemodinamik dengan tekanan darah terkontrol TD menjadi 129/73 mmHg; TD Tn. J menjadi 150/90 mmHg serta tingkat kesadaran stabil. Namun Ny. M mengalami penurunan kesadaran menjadi koma GCS 3 disertai penurunan tekanan darah TD 100/80 mmHg akibat luasnya lesi infark. **Kesimpulan:** Pemantauan status hemodinamik secara cepat dan berkelanjutan di IGD terbukti mampu menjaga stabilitas sirkulasi dan mengendalikan nilai MAP pada pasien yang memiliki mekanisme autoregulasi adaptif. Namun pada kasus lesi serebral yang luas, fluktuasi hemodinamik ekstrem berbanding lurus dengan perburukan status neurologis pasien.

Kata kunci: Cerebrovascular Accident (CVA), Status Hemodinamik, Perfusi Serebral, Stroke, Keperawatan Gawat Darurat.

ABSTRACT

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Final Scientific Paper, June 2026
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*Hemodynamic Evaluation in CVA Patients at Risk of Ineffective Cerebral Perfusion
in the Emergency Installation Room of dr. H. Koesnadi Bondowoso Hospital*

ix + 54 Items + 6 Tables + 1 Pictures + 5 Appendices

Introduction: Cerebrovascular Accident (CVA) was a neurological emergency that caused hemodynamic instability and threatened adequate cerebral perfusion. This study aimed to evaluate the hemodynamic status of patients with CVA who were at risk of ineffective cerebral perfusion in the Emergency Department of dr. H. Koesnadi Bondowoso Regional Hospital. **Methods:** This study employed a descriptive case study design involving three patients with CVA who were at risk of ineffective cerebral perfusion. Data were collected through observation of hemodynamic parameters (pre- and post-intervention), interviews, neurological physical examinations using the Glasgow Coma Scale (GCS), and medical record reviews. The nursing interventions included periodic hemodynamic monitoring, a 30° head-up position, management of increased intracranial pressure, and collaborative medical treatment. **Results:** The primary assessment showed that all three participants experienced hemodynamic disturbances and impaired levels of consciousness. Mrs. M presented with stupor and a blood pressure of 200/100 mmHg; Mr. S was fully conscious (*compos mentis*) with a blood pressure of 149/82 mmHg; and Mr. J presented with somnolence, a blood pressure of 170/100 mmHg, and projectile vomiting. The final evaluation demonstrated varying clinical outcomes. Mr. S and Mr. J maintained hemodynamic stability, with blood pressure improving to 129/73 mmHg and 150/90 mmHg, respectively, while maintaining stable levels of consciousness. In contrast, Mrs. M deteriorated to a comatose state with a GCS score of 3 and a blood pressure of 100/80 mmHg, which was associated with the extensive cerebral infarction. **Conclusion:** Rapid and continuous hemodynamic monitoring in the emergency department was shown to maintain circulatory stability and control Mean Arterial Pressure (MAP) in patients with preserved autoregulatory mechanisms. However, in patients with extensive cerebral lesions, extreme hemodynamic fluctuations were associated with worsening neurological status.

Keywords: Cerebrovascular Accident (CVA), Hemodynamic Status, Cerebral Perfusion, Stroke, Emergency Nursing.