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**“MENINGKATKAN REFLEKS MENELAN MELALUI LATIHAN VOKAL PADA
KLIEN DENGAN STROKE NON HEMORAGIK DI RUANG PERAWATAN
UMUM LANTAI 6 RSPAD GATOT SOEBROTO DITKESAD JAKARTA ”**

ABSTRAK

Latar Belakang: stroke infark adalah gangguan fungsi otak yang terjadi jika aliran darah ke otak terhenti karena aterosklerosis (penumpukan kolesterol pada dinding pembuluh darah) atau bekuan darah yang telah menyumbat suatu pembuluh darah ke otak sehingga pasokan darah ke otak terganggu. Angka kejadian stroke non hemoragik paling tinggi ditemukan di Amerika Serikat. Akan tetapi angka insiden ini cukup tinggi di sebagian tempat dan dipercaya faktor resiko dan akibat adanya emboli dan trombus sebagai pencetus stroke non hemoragik (Wiwit, 2010).

Tujuan Penelitian: Teridentifikasi asuhan keperawatan pada klien dengan stroke non hemoragik di ruang perawatan umum lantai 6 RSPAD Gatot Soebroto DITKESAD Jakarta Pusat 2015

Hasil Penelitian: Sebagian besar klien berusia 45-50 tahun (60%), laki-laki (100%), pendidikan SMA(80%), pekerjaan TNI AD (60%), etiologi faktor resiko dan emboli atau trombus. Manifestasi klinis stroke non hemoragik terbanyak adalah dengan tanda dan gejala mati rasa mendadak pada wajah, atau rasa lemah mendadak pada lengan, tungkai kaki, terutama pada satu sisi tubuh, mendadak sulit berjalan, kehilangan keseimbangan tubuh atau koordinasi anggota tubuh, bingung atau kesulitan berbicara, mulut mencong ke kiri atau ke kanan, lidah mencong bila dijulurkan, bicara pelo atau tidak jelas, sulit menelan atau saat makan tersedak. Pengkajian fokus berbagai sistem dengan masalah keperawatan ketidakefektifan perfusi jaringan serebral, hambatan mobilitas fisik, hambatan komunikasi verbal, gangguan menelan, defisit perawatan diri : mandi, makan, berpakaian, eliminasi, ketidakseimbangan nutrisi kurang dari kebutuhan tubuh. Evaluasi akhir 5 klien pulang. *Discharge planning* diberikan untuk melanjutkan intervensi di rumah.

Kesimpulan : Agar menjadikan latihan vokal ini sebagai salah satu Standart Operasional Prosedur (SOP) tindakan mandiri perawat yang harus dilakukan untuk mengatasi pasien stroke yang mengalami gangguan menelan, karena pelaksanaannya mudah dan efektif.

Katakunci: Meningkatkan Refleks menelan , Stroke Non Hemoragik, Latihan Vokal
Daftar Pustaka : 20 (2005-2014)

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PROFESSIONAL STUDIES PROGRAM NURSES

The case study, September 2015

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"IMPROVING SWALLOWING REFLEX VOWELS THROUGH EXERCISE OF CLIENTS WITH NON HEMORRAGIC STROKE IN ROOM FLOOR GENERAL MAINTENANCE 6 DITKESAD GATOT SOEBROTO ARMY HOSPITAL IN JAKARTA"

ABSTRACT

Background: stroke infarction is a disorder of brain function that occurs when blood flow to the brain stops because atherosclerosis (the buildup of cholesterol in the walls of blood vessels) or a blood clot that has blocked a blood vessel to the brain so that the blood supply to the brain is disrupted. The incidence of non-hemorrhagic stroke was highest in the United States. However, this incidence rate is quite high in some places and it is believed the risk factors and due to emboli and thrombi as the originator of non-hemorrhagic stroke (Wiwit, 2010).

Objective: Unidentified nursing care to clients with non-hemorrhagic stroke in the general care floor 6 DITKESAD Gatot Soebroto Army Hospital in Central Jakarta 2015

Results: The majority of clients aged 45-50 years (60%), males (100%), a high school education (80%), the work of the Army (60%), etiology and risk factors embolism or thrombus. The clinical manifestations of non hemorrhagic stroke most are the signs and symptoms of numbness suddenly on the face, or weakness suddenly on the arms, legs, especially on one side of the body, suddenly had difficulty walking, loss of balance the body or the coordination of limbs, confusion or difficulty speaking, mouth twisted to the left or to the right, oblique tongue when extended, loss of speech or unclear, difficult swallowing or choking while eating. focus assessment system with a variety of nursing problems ineffectiveness of cerebral tissue perfusion, physical mobility barriers, barriers of verbal communication, swallowing disorders, self-care deficit: bathing, eating, dressing up, elimination, nutritional imbalance is less than the body needs. The final evaluation 5 client home. Discharge planning is given to resume intervention at home.

Conclusion: In order to make this vocal training as one of the Standard Operating Procedure (SOP) self-nurses action must be taken to cope with stroke patients with impaired swallowing, because it is easy and effective implementation.

Keyword: Improving swallowing reflex, Non Haemorrhagic Stroke, Vocal Exercises
Bibliography: 20 (2005-2014)