

# **Analisis Asuhan Keperawatan pada Bayi dengan Pneumonia melalui Penerapan Fisioterapi Dada terhadap Perbaikan Status Pernapasan = Analysis of Nursing Care for Infants with Pneumonia through the Application of Chest Physiotherapy to Improve Respiratory Status**

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## **Abstrak**

Salah satu gangguan sistem pernapasan yang umum ditemukan pada bayi dan anak-anak yaitu pneumonia karena bayi belum memiliki sistem kekebalan tubuh yang matang, sehingga mudah terpapar patogen penyebab pneumonia. Masalah keperawatan utama yang dapat terjadi yaitu bersihan jalan napas tidak efektif karena kondisi pneumonia membuat alveoli diisi dengan sputum yang sulit dikeluarkan, sehingga terasa sakit saat bernapas dan membatasi asupan oksigen. Karya ilmiah ini bertujuan untuk menganalisis efektivitas penerapan terapi fisioterapi dada terhadap perbaikan status pernapasan pada bayi dengan pneumonia. By. Ny. R lahir secara sectio caesarea pada usia gestasi 36-37 minggu atas indikasi hidramnion, kondisi bayi terdengar ronkhi (+/+), gelisah dan rewel, sesak napas (+), retraksi dada (+), frekuensi napas 41x/menit, saturasi oksigen rendah yaitu 80% on high flow nasal dengan flow 4 dan FiO<sub>2</sub> 25%. Intervensi dilakukan selama 6 hari dengan penerapan intervensi fisioterapi dada. Hasil menunjukkan terdapat perbaikan status pernapasan pada bayi terutama saturasi oksigen dan frekuensi napas stabil pada rentang normal yaitu 30-60x/menit, suara ronkhi minimal, sesak minimal, produksi sekret 15-25 cc. Oleh karena itu, diperlukan terapi fisioterapi dada sesuai indikasi secara rutin untuk pengeluaran sekret sehingga meningkatkan status pernapasan pada pasien dengan pneumonia.

.....One of the common respiratory system disorders found in infants and children is pneumonia because infants do not have a mature immune system, so they are easily exposed to pathogens that causes pneumonia. The main nursing problem that can occur is ineffective airway clearance because pneumonia conditions make the alveoli filled with sputum that is difficult to remove, making it painful to breathe and limiting oxygen intake. This scientific work aims to analyze the effectiveness of the application of chest physiotherapy therapy on improving respiratory status in infants with pneumonia. By. Ny. R was born by sectio caesarea at 36-37 weeks gestation for indications of hydramnios, the infant condition was heard ronkhi (+/+), restless and fussy, shortness of breath (+), chest retraction (+), respiratory rate 41x/min (normal), low oxygen saturation which is 80% on high flow nasal with flow 4 and FiO<sub>2</sub> 25%. The intervention was carried out for 6 days with the application of chest physiotherapy interventions. The results showed that there was an improvement in the respiratory status of the infant, especially oxygen saturation and respiratory rate stabilized in the normal range of 30-60x/min, minimal ronkhi sound, minimal tightness, 15-25 cc secretion production. Therefore, chest physiotherapy is needed according to indications routinely for secretion removal so as to improve respiratory status in patients with pneumonia.