

# Asuhan Keperawatan Kritis pada Pasien Post-PCI dengan Penerapan Limb-Raising untuk Mengatasi Nyeri dan Meningkatkan Kenyamanan di ICU = Critical Nursing Care for Post-PCI Patients with the Application of Limb-Raising to Reduce Pain and Increase Comfort in the ICU

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## Abstrak

Sindrom koroner akut adalah kegawatan sirkulasi yang disebabkan oleh penurunan suplai oksigen di arteri koroner yang dapat menyebabkan infark miokard. Laporan kasus ini bertujuan untuk menganalisis asuhan keperawatan dengan metode case study dan intervensi limb-raising. Perawatan dilakukan selama 3 hari di ICU pada Tn S (61 tahun) dengan diagnosa medis perioperative MI-NSTEMI dengan post perawatan di ICU. Tatalaksana medis invasif diperlukan pada beberapa kasus SKA dengan risiko tinggi. Revaskularisasi dengan PCI merupakan salah satu yang paling populer. Masalah nyeri dan nyaman merupakan salah satu masalah keperawatan utama pasien. Nyeri yang tidak ditangani dapat menyebabkan penurunan kualitas perawatan, mengganggu hemodinamik, dan bertambahnya hari rawat. Intervensi limb-raising dilakukan pada Tn S dengan memberikan elevasi 30 pada tangan area penusukan dan kompresi. Asuhan keperawatan dilakukan secara komprehensif. Hasil implementasi yang di dapatkan yakni beberapa hemodinamik selalu stabil seperti tekanan darah, frekuensi nadi, saturasi oksigen, dan suhu tubuh. Frekuensi napas pasien selama perawatan seringkali mengalami takipnea. Skala nyeri pasien selama perawatan diukur menggunakan NRS. Intervensi limb-raising berhasil menurunkan nyeri pada lokasi penusukan post PCI dari nyeri sedang (4/10) menjadi tidak ada nyeri (0/10), hal lainnya yang dievaluasi yakni tidak adanya pembengkakan dan pasien merasa lebih nyaman dengan metode yang digunakan. Diharapkan implementasi limb raising dapat dilakukan perawat pada lebih banyak pasien Post-PCI dan penelitian selanjutnya mampu mengembangkan intervensi keperawatan mandiri lainnya untuk mengatasi nyeri pada pasien di ICU. .... Acute coronary syndrome is a circulatory emergency caused by decreased oxygen supply in the coronary arteries that can lead to myocardial infarction. This case report aims to analyze nursing care using the case study method and limb-raising intervention. Treatment was carried out for 3 days in the ICU for Mr. S (61 years old) with a perioperative medical diagnosis of MI-NSTEMI with post-treatment in the ICU. Invasive medical treatment is necessary in some high-risk ACS cases. Revascularization with PCI is one of the most popular. The problem of pain and comfort is one of the main nursing problems for patients. Untreated pain can reduce the quality of care, disrupt hemodynamics, and increase hospital days. The limb-raising intervention was carried out on Mr. S by providing an elevation of 30 to the hand in the stabbing and compression area. Nursing care is carried out comprehensively. The implementation results obtained were that several hemodynamics were always stable, such as blood pressure, pulse frequency, oxygen saturation, and body temperature. The patient's respiratory frequency during treatment often experiences tachypnea. The patient's pain scale during treatment was measured using NRS. The limb-raising intervention was successful in reducing pain at the post-PCI puncture site from moderate pain (4/10) to no pain (0/10), other things that were evaluated were the absence of swelling and the patient felt more comfortable with the method used. It is hoped that the implementation of limb raising can be carried out by nurses on more Post-PCI patients and that further

research will be able to develop other independent nursing interventions to deal with pain in patients in the ICU.