Asuhan Keperawatan pada Anak Dengue Hemorrhagic Fever dengan Masalah Hipovolemia Menggunakan Penerapan Pemantauan Fluid Chart = Nursing Care for Dengue Hemorrhagic Fever Children with Hypovolemia Problems Using Fluid Chart Monitoring Applications

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Abstrak

Demam berdarah dengue menyerang anak-anak daripada orang dewasa. Sistem kekebalan tubuh yang rentan beresiko terpapar suatu penyakit. Demam berdarah dengue menyebabkan peningkatan kapiler plasma sehingga seseorang mengalami hipovolemia. Asuhan keperawatan diperlukan dalam mengatasi hipovolemia dengan memberikan intervensi keperawatan manajemen hipovolemia dan pemantauan cairan menggunakan fluid chart. Fluid chart digunakan untuk memantau dan mencatat secara akurat intake dan output guna mencapai keseimbangan cairan tubuh. Klien usia 10 tahun mengalami kondisi demam tinggi 3 hari, keadaan lemas, mukosa kering, serta pemeriksaan laboratorium menunjukkan hematokrit menurun (39,2%) dan trombosit menurun (157 10 3 /Î¼L). Pemeriksaan hemodinamik serta pemeriksaan darah perifer lengkap rutin setiap 24 jam untuk mengevaluasi kondisi pasien selama dilakukan perawatan. Kesimpulannya, penerapan fluid chart efektif membantu memonitor cairan masuk dan keluar pasien ditandai dengan balans cairan membaik, pemeriksaan darah perifer lengkap menunjukkan proses perbaikan, serta kondisi vital yang stabil.

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Dengue hemorrhagic fever attacks children more than adults. A vulnerable immune system is at risk of exposure to disease. Dengue hemorrhagic fever causes an increase in plasma capillaries so that a person experiences hypovolemia. Nursing care is needed to treat hypovolemia by providing nursing interventions to manage hypovolemia and monitor fluids using a fluid chart. Fluid charts are used to accurately monitor and record intake and output to achieve body fluid balance. A 10 year old client experienced a high fever for 3 days, weakness, dry mucosa, and laboratory examination showed decreased hematocrit (39.2%) and decreased platelets (157 103/Î¼L). Hemodynamic examination and routine complete peripheral blood examination every 24 hours to evaluate the patient's condition during treatment. In conclusion, the application of a fluid chart is ef ective in helping monitor the patient's incoming and outgoing fluids as indicated by improved fluid balance, complete peripheral blood examination showing the improvement process, and stable vital conditions.