

# **ASUHAN KEPERAWATAN PADA PASIEN GAGAL GINJAL KRONIK DENGAN HIPERVOLEMIA DENGAN PENERAPAN ANKLE PUMP EXERCISE DAN ELEVASI KAKI**

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## **Abstrak**

Gagal Ginjal Kronik (GGK) adalah penurunan fungsi ginjal yang progresif dan irreversibel, ditandai dengan laju filtrasi glomerulus (GFR)  $<60 \text{ mL/menit}/1,73 \text{ m}^2$  selama  $\geq 3$  bulan. Salah satu komplikasi GGK adalah hipervolemia, yang ditandai dengan edema, terutama di ekstremitas bawah. Penanganan edema tidak hanya dengan terapi farmakologis, namun juga melalui intervensi non-farmakologis seperti *ankle pump exercise* dan elevasi kaki  $30^\circ$ , yang membantu meningkatkan aliran balik vena dan mengurangi akumulasi cairan. Studi ini bertujuan mengevaluasi efektivitas terapi kombinasi tersebut dalam menurunkan derajat edema. Penelitian menggunakan desain studi kasus deskriptif pada satu pasien GGK dengan hipervolemia di rumah sakit di Jakarta. Asuhan keperawatan mengacu pada SDKI, SIKI, dan SLKI, dimulai dari pengkajian hingga evaluasi. Diagnosis keperawatan yang ditegakkan yaitu hipervolemia berhubungan dengan gangguan regulasi natrium dan air, ditandai dengan edema, peningkatan berat badan, dan nyeri tekan. Intervensi dilakukan selama tiga hari, dua kali sehari, berupa *ankle pump exercise* 15 menit dan elevasi kaki  $30^\circ$  selama 30 menit. Hasil menunjukkan penurunan edema dari grade IV menjadi grade II, peningkatan kenyamanan, dan tidak ada sesak napas. Intervensi ini diharapkan menjadi strategi non-farmakologis pendamping yang efektif dalam praktik keperawatan pasien GGK.

**Kata Kunci :** *Ankle Pump Exercise*, Edema, Elevasi Kaki, Gagal Ginjal Kronik, Hipervolemia

# **NURSING CARE FOR CHRONIC KIDNEY FAILURE PATIENTS WITH HYPERVOLEMIA WITH THE APPLICATION OF ANKLE PUMP EXERCISE AND LEG ELEVATION**

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## **Abstract**

*Chronic Kidney Failure (CKD) is a progressive and irreversible decline in kidney function, characterized by a glomerular filtration rate (GFR) <60 mL/min/1.73 m<sup>2</sup> for ≥3 months. One of the complications of GGK is hypervolemia, which is characterized by edema, especially in the lower extremities. Edema is treated not only with pharmacological therapy, but also through non-pharmacological interventions such as ankle pump exercises and 30° leg elevation, which help to improve venous backflow and reduce fluid accumulation. This study aims to evaluate the effectiveness of combination therapy in reducing the degree of edema. The study used a descriptive case study design on one GGK patient with hypervolemia in a hospital in Jakarta. Nursing care refers to SDKI, SIKI, and SLKI, starting from assessment to evaluation. The established nursing diagnosis of hypervolemia is associated with impaired sodium and water regulation, characterized by edema, weight gain, and depressive pain. The intervention was carried out for three days, twice a day, in the form of an ankle pump exercise of 15 minutes and a leg elevation of 30° for 30 minutes. Results showed a decrease in edema from grade IV to grade II, increased comfort, and no shortness of breath. This intervention is expected to be an effective companion non-pharmacological strategy in the nursing practice of GGK patients.*

**Keywords :** Ankle Pump Exercise, Edema, Leg Elevation, Chronic Kidney Failure, Hypervolemia