

PENATALAKSANAAN FISIOTERAPI PADA KASUS PNEUMONIA DI RUMAH SAKIT PERSAHABATAN

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Abstrak

Latar Belakang: Pneumonia merupakan infeksi pernapasan akut yang menyerang alveoli, yang menyebabkan peradangan dan penumpukan cairan, sehingga mengganggu proses pertukaran oksigen dan karbon dioksida. Infeksi yang terjadi dapat disebabkan oleh bakteri, virus, maupun jamur, namun sering kali dijumpai pneumonia disebabkan oleh bakteri *streptococcus pneumoniae*. Pneumonia dapat diklasifikasikan menjadi 3 yaitu *Community Acquired Pneumonia* (CAP), *Hospital Acquired Pneumonia* (HAP), dan *Ventilator Associated Pneumonia* (VAP). **Metode:** Metode penelitian ini berupa studi kasus pada pasien berjenis kelamin perempuan dengan kondisi *Pneumonia ec CAP* dengan usia 72 tahun. **Hasil:** Pada pasien ini diberikan intervensi High Frequency Chest Wall Oscillation (HFCWO), Active Cycle Breathing Technique (ACBT), Static Bike Cycling dan Postural Correction sebanyak 3 kali. Evaluasi perkembangan pasien setelah intervensi dilakukan melalui penilaian sesak napas dengan instrumen Dyspnea Severity Scale (DSS), keterlambatan pengembangan ekspansi thoraks menggunakan instrumen midline, retensi sputum menggunakan instrumen stetoskop, penurunan endurance menggunakan instrumen Six Minutes Walking Test dan gangguan postur menggunakan pemeriksaan inspeksi statis. **Kesimpulan:** Setelah dilakukan 3 kali tindakan evaluasi fisioterapi dengan pemberian intervensi HFCWO, ACBT, *Static Bike Cycling* dan *Postural Correction*, didapatkan hasil penurunan sesak napas, pengembangan thoraks, peningkatan endurance, perubahan postur ke arah simetris.

Kata Kunci: *Pneumonia, High Frequency Chest Wall Oscillation, Active Cycle Breathing Technique, Static Bike Cycling, Postural Correction.*

PHYSIOTHERAPY MANAGEMENT IN A CASE OF PNEUMONIA AT PERSAHABATAN HOSPITAL

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Abstract

Background: Pneumonia is an acute respiratory infection that affects the alveoli, leading to inflammation and fluid accumulation, which disrupts the exchange of oxygen and carbon dioxide. The infection can be caused by bacteria, viruses and fungi although it is most commonly caused by streptococcus pneumoniae. Pneumonia can be classified into three categories: Community Acquired Pneumonia (CAP), Hospital Acquired Pneumonia (HAP), dan Ventilator Associated Pneumonia (VAP). **Method:** This study employed a case study design involving a 72-year-old female patient diagnosed with pneumonia of community-acquired origin (CAP). **Results:** The patient received interventions including High Frequency Chest Wall Oscillation (HFCWO), Active Cycle of Breathing Technique (ACBT), Static Bike Cycling, and Postural Correction, each administered three times. The evaluation of the patient's progress post-intervention was conducted using the Dyspnea Severity Scale (DSS) to assess breathlessness, a midline instrument to evaluate thoracic expansion delay, a stethoscope to detect sputum retention, the Six-Minute Walk Test to measure reduced endurance, and static inspection to assess postural abnormalities. **Conclusion:** After three physiotherapy treatment sessions involving HFCWO, ACBT, Static Bike Cycling, and Postural Correction, there was a decrease in shortness of breath, improved thoracic expansion, increased endurance, and postural improvement towards symmetry.

Keywords: Pneumonia, High Frequency Chest Wall Oscillation, Active Cycle Breathing Technique, Static Bike Cycling, Postural Correction.