

**Pengaruh Tindakan Fisioterapi Dada Dan Suction Terhadap Perubahan
Kadar Saturasi Oksigen Pada Pasien Gagal Nafas Di Ruang
ICU RSPAW Salatiga**

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ABSTRAK

Latar Belakang: Gagal nafas merupakan kondisi dimana sistem respirasi gagal melakukan fungsi pertukaran gas yaitu masuknya oksigen dan keluarnya karbondioksida. Pasien gagal nafas biasanya akan dipasang ventilator. Pasien yang terpasang ventilator akan mengalami penumpukan secret, untuk mengatasi hal itu akan dilakukan tindakan fisioterapi dada dan suction. Fisioterapi dada merupakan tindakan yang dilakukan pada pasien yang mengalami retensi sekresi dan gangguan oksigenasi yang memerlukan bantuan untuk mengencerkan atau mengeluarkan sekresi. Sedangkan suction adalah tindakan memasukkan selang kateter suction melalui mulut atau hidung atau *endotracheal tube* (ETT) yang tujuannya untuk mengurangi retensi sputum, membebaskan jalan nafas serta mencegah infeksi paru. Tujuan dari penelitian ini adalah untuk mengetahui perubahan kadar saturasi oksigen pada pasien gagal nafas di ruang ICU Rumah Sakit Paru dr. Ario Wirawan Salatiga setelah dilakukan intervensi fisioterapi dada dan suction.

Metode: Metode yang digunakan adalah deskriptif dan pendekatan studi kasus. Jumlah responden dalam penelitian ini adalah 4 responden.

Hasil: Hasil dalam penelitian ini adalah adanya pengaruh peningkatan saturasi oksigen setelah dilakukan tindakan fisioterapi dada dan suction. Yaitu sebelum dilakukan fisioterapi dada rata-rata kadar saturasi oksigen responden sebesar 93% setelah dilakukan fisioterapi dada selama 3 hari menjadi 97%. Sedangkan sebelum dilakukan tindakan suction kadar saturasi rata-rata responden adalah 95% setelah dilakukan tindakan suction selama 3 hari saturasi ke 4 responden menjadi 100%.

Kesimpulan: Ada peningkatan kadar saturasi oksigen setelah dilakukan tindakan fisioterapi dada dan suction pada pasien gagal nafas di Ruang ICU Rumah Sakit Paru dr. Ario Wirawan Salatiga.

Kata Kunci: Fisioterapi dada, Gagal nafas, Saturasi oksigen, dan Suction

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The Effect of Chest Physiotherapy and Suction on Changes in Oxygen Saturation Levels in Patients with Respiratory Failure in Room ICU RSPAW Salatiga

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ABSTRACT

Background: Respiratory failure is a condition where the respiratory system fails to carry out its gas exchange function, namely the entry of oxygen and the release of carbon dioxide. Patients with respiratory failure will usually be placed on a ventilator. Patients who are installed on a ventilator will experience a buildup of secretions, to overcome this, chest physiotherapy and suction will be carried out. Chest physiotherapy is an action performed on patients who experience retention of secretions and impaired oxygenation who require assistance to thin or remove secretions. Meanwhile, suction is the act of inserting a suction catheter tube through the mouth or nose or endotracheal tube (ETT) with the aim of reducing sputum retention, freeing the airway and preventing lung infections. The aim of this study was to determine changes in oxygen saturation levels in patients with respiratory failure in the ICU at Dr. Lung Hospital. Ario Wirawan Salatiga after chest physiotherapy and suction intervention.

Method: The method used is descriptive and case study approach. The number of respondents in this study was 4 respondents.

Results: The results of this study were the effect of increasing oxygen saturation after chest physiotherapy and suction. Namely, before chest physiotherapy was carried out, the average oxygen saturation level of respondents was 93%, after chest physiotherapy was carried out for 3 days it became 97%. Meanwhile, before the suction action was carried out, the average saturation level of the respondents was 95%. After the suction action was carried out for 3 days, the saturation level for the 4 respondents became 100%.

Conclusion: There was an increase in oxygen saturation levels after chest physiotherapy and suction in patients with respiratory failure in the ICU at Dr. Lung Hospital. Ario Wirawan Salatiga.

Keywords: Chest physiotherapy, respiratory failure, oxygen saturation, and suction

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