

## ABSTRAK

### **PENGARUH KOMBINASI NEBULIZER DAN FISIOTERAPI DADA TERHADAP PENINGKATAN SATURASI OKSIGEN PADA PASIEAN ANAK DENGAN BRONKOPNEUMONIA DI RSI SITI HAJAR SIDOARJO**

**Oleh :**

Kurnia Uswatun Chasanah, Tri Ratnaningsih, Siti Indatul Lalili

Bersihan jalan nafas yang tidak segera diatasi dapat menyebabkan terjadinya kekurangan oksigen dalam sel tubuh. Sel tubuh yang kekurangan oksigen akan sulit berkonsentrasi karena metabolisme terganggu akibat kurangnya suplai oksigen dalam darah atau saturasi oksigen darah menurun. Tujuan penelitian menunjukkan bahwa mengetahui pengaruh kombinasi nebulizer dan fisioterapi dada terhadap peningkatan saturasi oksigen pada pasien anak dengan bronkopneumonia Di RSI Siti Hajar Sidoarjo. Desain penelitian ini menggunakan *quasy Experimental Designs* dengan pendekatan *One-Group Pretest-Posttest Design*. Populasi penelitian ini yaitu seluruh pasien anak dengan bronkopneumonia di RSI Siti Hajar Sidoarjo pada bulan April 2023 sebanyak 47 pasien. Teknik sampling menggunakan consecutive sampling sehingga di dapatkan 38 sampel. Instrumen yang di gunakan adalah instrument observasi dan diuji dengan uji Wilcoxon. Hasil penelitian menunjukkan nilai sebelum diberikan terapi kombinasi nebulizer dan fisioterapi dada terdapat sebanyak 23 responden mempunyai saturasi oksigen dalam kategori normal dan setelah diberikan terapi kombinasi menjadi 37 responden dengan saturasi oksigen dalam kategori normal. Hasil uji wilconcon menunjukkan nilai signifikansi ( $\rho$ ) = 0,000 sehingga  $\rho < \alpha$  (0,05) maka dapat disimpulkan bahwa terdapat pengaruh terapi kombinasi nebulizer dan fisioterapi dada terhadap saturasi oksigen pada pasien anak dengan bronkopneumonia di Ruang Rawat Inap RSI Siti Hajar Sidoarjo. Terapi Inhalasi nebulizer dan fisioterapi dada dapat merubah dahak menjadi encer dan mudah dikeluarkan, dirahapkan perawat dalam setiap melakukan nebulizer selalu disertai dengan fisioterapi dada.

**Kata Kunci : Nebulizer, Fisioterapi dada, Saturasi Oksigen, Bronkopneumonia**

**ABSTRACT**  
**THE EFFECT OF A COMBINATION OF NEBULIZERS AND CHEST  
PHYSIOTHERAPY ON INCREASING OXYGEN SATURATION  
IN PEDIATRIC PATIENTS WITH BRONCHOPNEUMONIA  
AT RSI SITI HAJAR SIDOARJO**

**by :**

Kurnia Uswatun Chasanah, Tri Ratnaningsih, Siti Indatul Lalili

If the airway is not cleared immediately, it can cause a lack of oxygen in the body's cells. Body cells that lack oxygen will have difficulty concentrating because metabolism is disrupted due to a lack of oxygen supply in the blood or blood oxygen saturation decreases. The aim of the research is to determine the effect of a combination of nebulizers and chest physiotherapy on increasing oxygen saturation in pediatric patients with bronchopneumonia at RSI Siti Hajar Sidoarjo. This research design uses quasi Experimental Designs with a One-Group Pretest-Posttest Design approach. The population of this study was all pediatric patients with bronchopneumonia at RSI Siti Hajar Sidoarjo in April 2023, totaling 47 patients. The sampling technique used consecutive sampling so that 38 samples were obtained. The instrument used is an observation instrument and tested using the Wilcoxon test. The results of the study showed that before being given combination therapy with a nebulizer and chest physiotherapy, 23 respondents had oxygen saturation in the normal category and after being given combination therapy there were 37 respondents with oxygen saturation in the normal category. The results of the Wilcoxon test show a significance value ( $\rho$ ) = 0.000 so that  $\rho < \alpha$  (0.05), so it can be concluded that there is an effect of combination nebulizer therapy and chest physiotherapy on oxygen saturation in pediatric patients with bronchopneumonia in the RSI Siti Hajar Sidoarjo Inpatient Room. Nebulizer inhalation therapy and chest physiotherapy can change the phlegm to become runny and easy to expel, it is hoped that every time a nurse uses a nebulizer, it is always accompanied by chest physiotherapy.

**Key Words : Nebulizers, Chest Physiotherapy, Oxygen Saturation  
Bronchopneumonia**