

ABSTRAK

REPRESENTASI PROFIL KLINIS DAN STATUS HEMODINAMIK PADA PASIEN POST KRANIOTOMI DI *INTENSIVE CARE UNIT* RSI SAKINAH MOJOKERTO

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Kraniotomi merupakan prosedur pembedahan intrakranial yang memerlukan pemantauan ketat di ruang intensif untuk mencegah cedera otak sekunder. Penelitian ini bertujuan untuk mengetahui representasi profil klinis dan status hemodinamik pada pasien *post-kraniotomi* di Ruang *Intensive Care Unit* (ICU) RSI Sakinah Mojokerto. Desain penelitian menggunakan deskriptif kuantitatif dengan teknik *Consecutive sampling* terhadap 32 responden. Pengumpulan data menggunakan lembar observasi yang mencakup etiologi, tingkat kesadaran kualitatif dan kuantitatif (*FOUR Score*), serta parameter hemodinamik (frekuensi pernapasan, saturasi oksigen, dan *Mean Arterial Pressure* / MAP). Hasil penelitian menunjukkan bahwa etiologi terbanyak adalah CVA hemoragik sebesar (53,1%) dan Cedera Otak Traumatik sebesar (40,6%) dengan tingkat kesadaran kuantitatif terbanyak berada pada kategori penurunan kesadaran berat sebesar (37,5%). Sebaliknya, parameter status hemodinamik pasien secara keseluruhan terpantau stabil dan berada dalam rentang adekuat. sebagian besar pasien *post-kraniotomi* berada pada fase depresi neurologis sedang hingga berat yang memerlukan kewaspadaan tinggi, meskipun parameter hemodinamik sistemiknya terjaga stabil. Hasil ini diharapkan dapat menjadi acuan dalam peningkatan standar asuhan keperawatan kritis.

Kata Kunci: *Post-Kraniotomi*, Profil Klinis, *FOUR Score*, Status Hemodinamik, *Intensive Care Unit*.

ABSTRACT

REPRESENTATION OF CLINICAL PROFILE AND HEMODYNAMIC STATUS IN POST-CRANIOTOMY PATIENTS IN THE INTENSIVE CARE UNIT OF SAKINAH ISLAMIC HOSPITAL, MOJOKERTO

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Craniotomy is an intracranial surgical procedure that requires close monitoring in the intensive care unit to prevent secondary brain injury. This study aims to determine the representation of the clinical profile and hemodynamic status of post-craniotomy patients in the Intensive Care Unit (ICU) of Sakinah Islamic Hospital, Mojokerto. The study design used a quantitative descriptive method with a consecutive sampling technique for 32 respondents. Data collection used an observation sheet that included etiology, qualitative and quantitative levels of consciousness (FOUR Score), and hemodynamic parameters (respiratory rate, oxygen saturation, and Mean Arterial Pressure / MAP). The results showed that the most common etiologies were hemorrhagic CVA (53.1%) and Traumatic Brain Injury (40.6%), with the most common quantitative level of consciousness being in the category of severe decreased consciousness (37.5%). In contrast, the overall hemodynamic status parameters of patients were monitored as stable and within the adequate range. Most post-craniotomy patients were in a phase of moderate to severe neurological depression that required high alertness, although their systemic hemodynamic parameters were maintained stable. These results are expected to serve as a reference for improving critical care standards.

Keywords: Post-Craniotomy, Clinical Profile, FOUR Score, Hemodynamic Status, Intensive Care Unit.