

**ANALISIS ASUHAN KEPERAWATAN PADA PASIEN *CONGESTIVE HEART FAILURE* (CHF) DAN INTERVENSI ELEVASI KAKI 30
DERAJAT KOMBINASI KOMPRES HANGAT DI RUANG
UMAR BIN KHATAB 3 RSUD WELAS ASIH**

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ABSTRAK

Congestive Heart Failure (CHF) merupakan penyakit kardiovaskuler progresif yang sering menyebabkan hipervolemia, yaitu kelebihan volume cairan akibat sisi kanan jantung tidak mampu mengontrol aliran darah, sehingga tekanan vena meningkat dan cairan bocor ke jaringan, menimbulkan pembesaran organ, edema, hingga asites. Edema perifer terjadi pada sekitar 80% dan dapat menurunkan kemandirian, mobilitas, kualitas hidup, serta meningkatkan risiko jatuh dan lesi kulit. Pengobatan farmakologis lini pertama untuk edema adalah lasix, untuk mengoptimalkan efek dari farmakologis, dapat dilakukan intervensi nonfarmakologi seperti elevasi kaki 30 derajat dikombinasikan dengan kompres hangat diterapkan untuk meningkatkan drainase limfatik dan mengurangi penumpukan cairan kapiler. Penelitian ini menggunakan metode studi kasus pada satu pasien dengan masalah keperawatan hipervolemia di Ruang Umar Bin Khatab 3 RSUD Welas Asih. Pengumpulan data melalui wawancara, observasi, dan analisis studi kasus. Hasil intervensi menunjukkan penurunan edema ekstremitas bawah dari derajat 2 kedalaman 3–4 mm kembali 7 detik pada hari pertama menjadi derajat 1 kedalaman 2 mm kembali 3 detik pada hari ketiga. Berdasarkan hasil ini mendukung *Evidence Based Practice* (EBP) terkait elevasi kaki 30 derajat dan kompres hangat, serta mendorong pasien melakukan terapi mandiri dua kali sehari untuk menurunkan derajat edema.

Kata Kunci : CHF, Edema, Elevasi Kaki 30 Derajat, Hipervolemia

**ANALYSIS OF NURSING CARE IN PATIENTS WITH CONGESTIVE
HEART FAILURE (CHF) AND THE INTERVENTION OF 30-DEGREE
LEG ELEVATION COMBINED WITH WARM COMPRESS IN ROOM
UMAR BIN KHATTAB 3 AT RSUD WELAS ASIH**

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ABSTRACT

Congestive Heart Failure (CHF) is a progressive cardiovascular disease that often causes hypervolemia, which is excess fluid volume due to the right side of the heart being unable to control blood flow, resulting in increased venous pressure and fluid leaking into the tissues, causing organ enlargement, edema, and ascites. Peripheral edema occurs in approximately 80% of patients and can reduce independence, mobility, quality of life, and increase the risk of falls and skin lesions. The first-line pharmacological treatment for edema is lasix. To optimize the pharmacological effect, non-pharmacological interventions such as 30-degree leg elevation combined with warm compresses can be applied to increase lymphatic drainage and reduce capillary fluid buildup. This study used a case study method on one patient with hypervolemia nursing problems in Umar Bin Khatab Ward 3, Welas Asih Regional Hospital. Data collection was through interviews, observations, and case study analysis. The results of the intervention showed a decrease in lower extremity edema from grade 2 with a depth of 3–4 mm returning in 7 seconds on the first day to grade 1 with a depth of 2 mm returning in 3 seconds on the third day. Based on these results, it supports Evidence Based Practice (EBP) regarding 30-degree leg elevation and warm compresses, and encourages patients to do self-therapy twice a day to reduce the degree of edema.

Keywords: CHF, Edema, 30-Degree Leg Elevation, hypervolemia