



DOA BELAJAR

رَضِيتُ بِاللَّهِ رَبًّا وَبِالْإِسْلَامِ دِينًا وَبِمُحَمَّدٍ نَبِيًّا وَرَسُولًا
رَبِّي زِدْنِي عِلْمًا وَارْزُقْنِي فَهْمًا

“Kami ridho Allah SWT sebagai Tuhanku, Islam sebagai agamaku, dan Nabi Muhammad sebagai Nabi dan Rasul, Ya Allah, tambahkanlah kepadaku ilmu dan berikanlah aku kefahaman”



PROSES FISIOTERAPI PADA KONDISI ULCUS DECUBITUS

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Capaian Pembelajaran

Mahasiswa mampu memahami, Mengerti, dan mempraktekkan proses Fisioterapi pada kondisi ulkus dekubitus



Bahan Kajian

1. Pengertian Ulcus
2. Jenis macam letak Ulkus
3. Pemeriksaan
4. Intervensi
5. Evaluasi



DECUBITUS

- A decubitus ulcer is a condition where soft tissue or underlying tissue over a bony prominence is injured by peripheral circulatory disturbance or unrelieved pressure over a localized area, resulting in ischemic necrosis by hypoxia and nutritional deficiency. A decubitus ulcer is a typical skin damage of long-term bed-rest patients and patients with vascular disease, sensory neuron lesion, diabetes, dementia, and spinal cord injury, frequently occurring in soft tissues (Charette 2012).

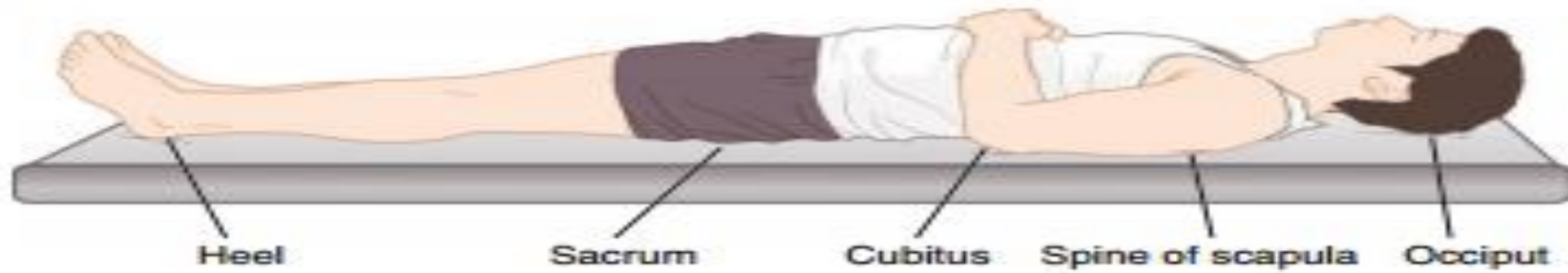


PHYSICAL THERAPISTS

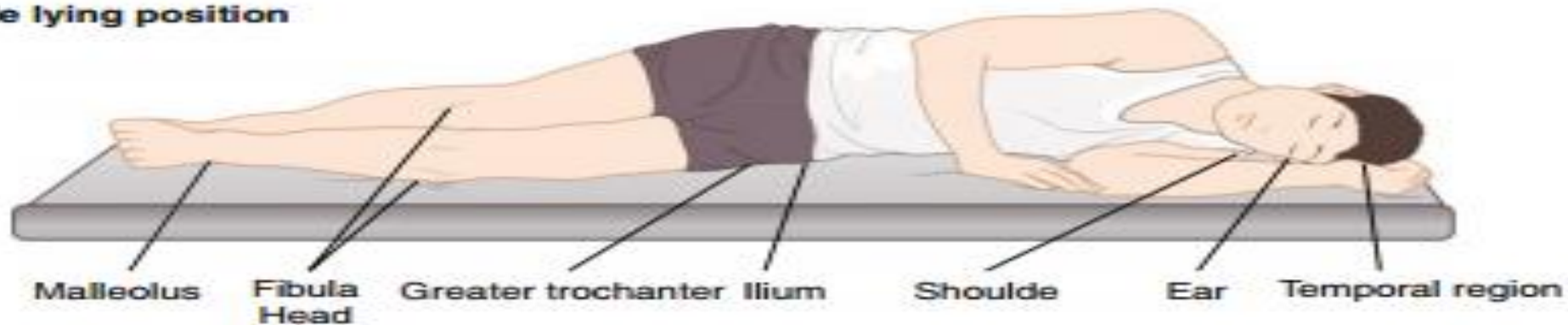
- by mastering the physical therapy interventions according to the symptoms and diagnosis of decubitus ulcer, should prevent the secondary infections or complications not to mention curing decubitus ulcer.

LETAK ARAE ULKUS DEKUBITUS

Supine position



Side lying position



Prone position



Sitting position



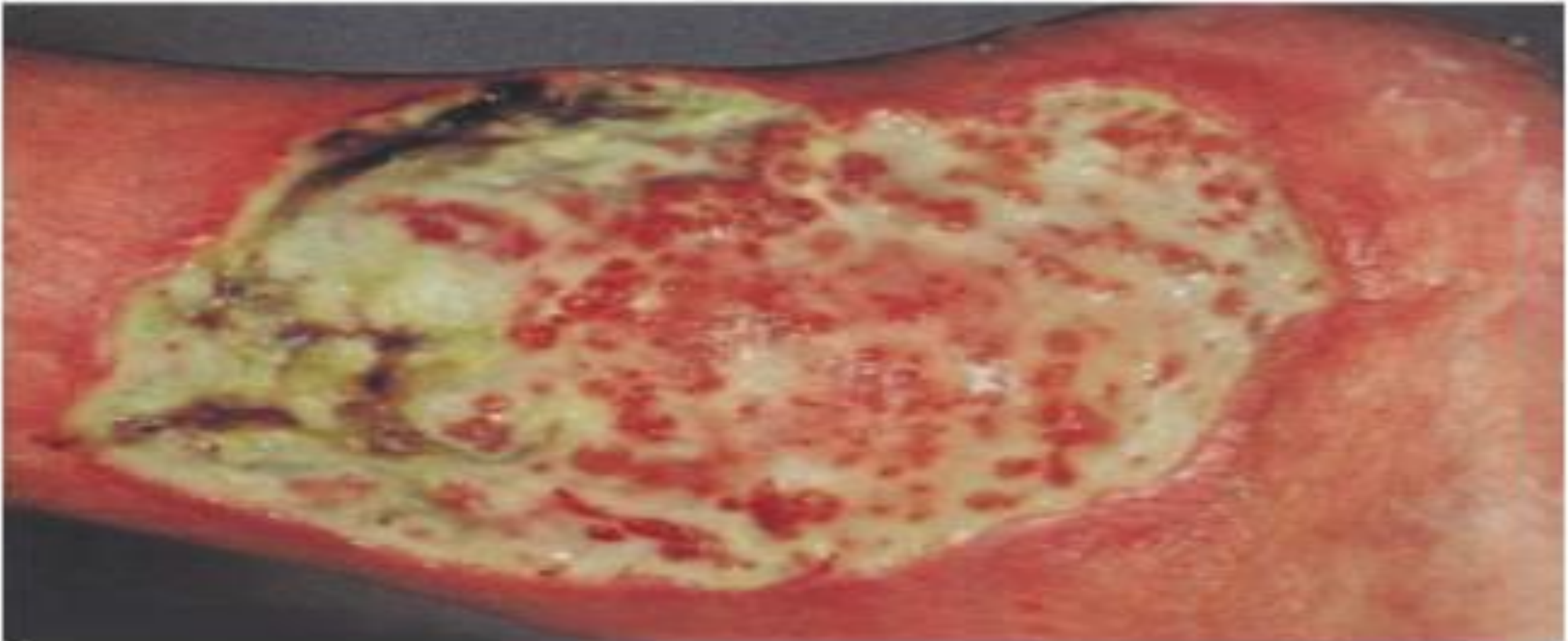


Fig. 3.2 Decubitus ulcer from vasomotor lose

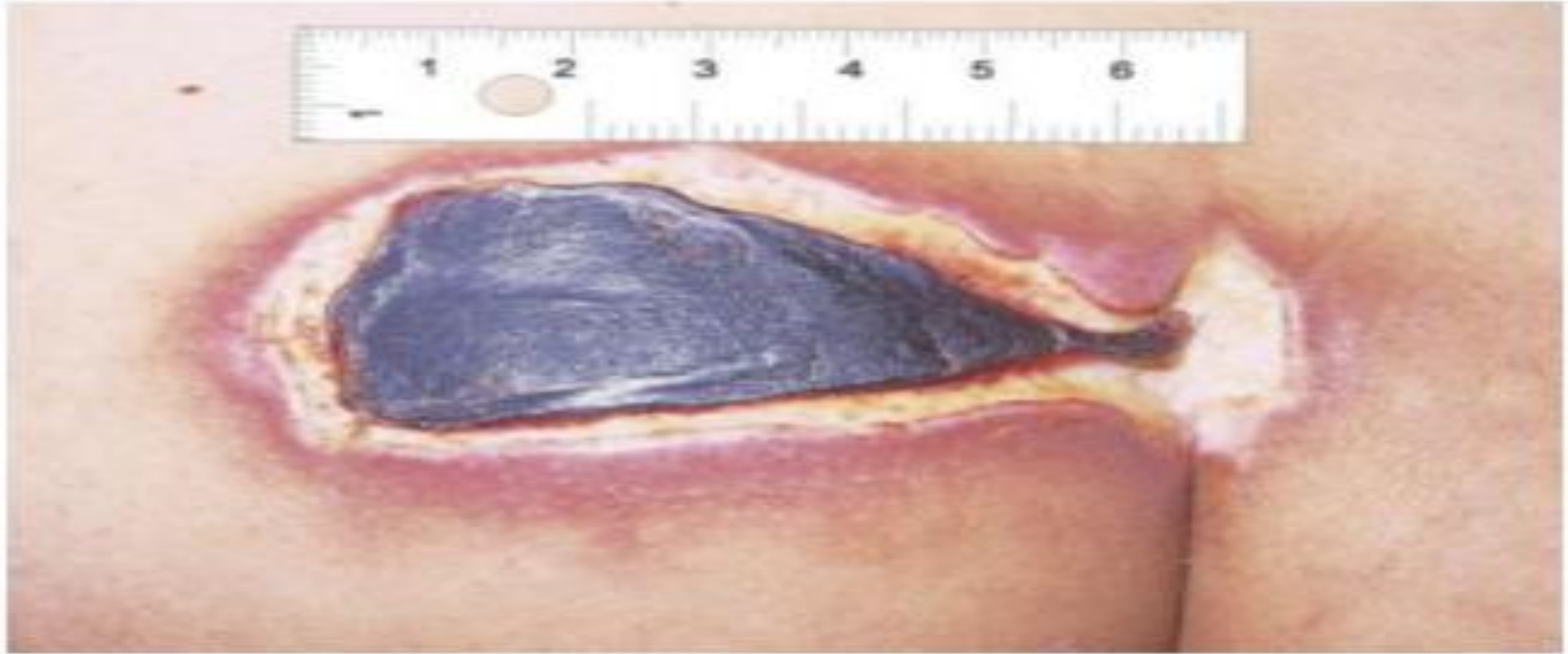


Fig. 3.3 Pressure ulcer



3.1.5.1 Assessment of Decubitus Ulcer

When physical therapists assess decubitus ulcer, they should check the following ten evaluation factors:

1. After ocular inspection and palpation, record the result.
2. Observe the shape and the color of the tissues adjacent to the decubitus ulcer and record the result.
3. Record the kinds and the amount of the exudate.
4. If it smells, figure out the kinds and the degree of the smell.
5. Check if there are symptoms of inflammation or infection.
6. Examine if there is a trace of being pressured or stimulated.
7. If there is an edema, figure out the location and the degree of it.
8. After recording the location of the decubitus ulcer, measure the size and the depth of it.
9. Take a photograph of the site of the decubitus ulcer.
10. If the decubitus ulcer is caused by a wound (abrasion, penetrating injury, laceration), figure out the kind of it.



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1. Record the site of the decubitus ulcer.
2. Record the stage of the decubitus ulcer according to NPUAP categories.
3. Measure the size and the depth of the decubitus ulcer and record the result.
4. Assess the depth of the decubitus ulcer tunnel that is under the skin and invisible to the naked eye.
5. Examine the color of the decubitus ulcer (red, yellow, black) and assess the percentage of the decubitus ulcer that is covered on the skin.
6. Record the shape (concentration, viscosity, color) and the amount of the exudate.
7. After cleansing the decubitus ulcer with saline solution, record the smell associated with necrosis.
8. Observe the edema, inflammation, or sclerosis of the tissues adjacent to the decubitus ulcer and record it.
9. Observe the condition (dry, wet, loose, tense, warm) of the skin adjacent to the decubitus ulcer.
10. If there is a pain, record its relevance to the decubitus ulcer and the pain intensity in VAS (visual analog scale).



Soal Evaluasi

TULISKAN:

1. Apakah yang di sebut dengan ulser dekubitus?
2. Dimanakah letak titik- titik tempat terjadinya Ulcer dekubitus ?
3. Bagaimanakah proses assesment fisioterapi pada ulkus dekubitus?
4. Apakah peran intervensi fisioterapi pada ulkus dekubitus?



REFERENSI

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PENUTUP BELAJAR

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

اللَّهُمَّ أَرِنَا الْحَقَّ حَقًّا وَأَرِزْنَا اتِّبَاعَهُ وَأَرِنَا الْبَاطِلَ بَاطِلًا وَأَرِزْنَا اجْتِنَابَهُ

Ya Allah Tunjukkanlah kepada kami kebenaran sehingga kami dapat mengikutinya,
Dan tunjukkanlah kepada kami keburukan sehingga kami dapat menjauhinya.



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