

**Program Studi Pendidikan Profesi Ners
Fakultas Ilmu Kesehatan
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ABSTRAK

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Penerapan Posisi Lateral Kanan Dengan Elevasi Kepala Pada Bayi Prematur Di Ruang NICU RSUD Bendan Kota Pekalongan

Latar Belakang: Bayi prematur yang dirawat di ruang Neonatal Intensive Care Unit (NICU) memerlukan ventilator mekanik dan nutrisi enteral melalui orogastric tube (OGT). Penggunaan ventilator, pemberian nutrisi enteral, serta kondisi organ yang masih imatur meningkatkan risiko aspirasi yang dapat menyebabkan gangguan respirasi, pneumonia aspirasi, dan memperburuk kondisi klinis bayi. Salah satu intervensi keperawatan nonfarmakologis yang dapat diterapkan untuk membantu menurunkan risiko aspirasi adalah posisi lateral kanan dengan elevasi kepala 30°.

Tujuan: Mengetahui efektivitas penerapan posisi lateral kanan dengan elevasi kepala 30° terhadap risiko aspirasi pada bayi prematur yang menggunakan ventilator di ruang NICU RSUD Bendan Kota Pekalongan.

Metode: Penelitian ini menggunakan pendekatan studi kasus dengan desain pretest dan post-test pada satu bayi prematur usia gestasi 32 minggu yang dirawat di ruang NICU. Intervensi berupa posisi lateral kanan dengan elevasi kepala 30° diberikan selama 3x24 jam. Pengukuran dilakukan sebelum (pre-test) dan sesudah (post-test) intervensi setiap hari dengan mengamati saturasi oksigen, bunyi napas, retraksi dinding dada, residu lambung, toleransi feeding, suhu tubuh, serta tandatanda infeksi. Data dianalisis secara deskriptif dengan membandingkan hasil pretest dan post-test selama periode observasi.

Hasil: Hasil penerapan menunjukkan adanya perbaikan kondisi klinis bayi setelah intervensi. Saturasi oksigen meningkat dari 95% menjadi 97%, bunyi napas berubah dari ronki bilateral menjadi vesikuler, retraksi dinding dada berkurang, residu lambung menurun dari 3 cc menjadi tidak ada pada hari ketiga, serta toleransi feeding meningkat sehingga pemberian ASI dapat ditingkatkan secara bertahap. Selama tindakan tidak ditemukan muntah, distensi abdomen, maupun tanda-tanda infeksi.

Simpulan: Penerapan posisi lateral kanan dengan elevasi kepala 30° menurunkan risiko aspirasi serta meningkatkan kondisi respirasi dan toleransi feeding pada bayi prematur yang menggunakan ventilator.

Kata Kunci: *Aspirasi; bayi prematur; NICU; posisi lateral kanan; ventilator*

Daftar Pustaka: 13 (2018-2026).

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ABSTRACT

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Application of Right Lateral Positioning with Head Elevation in Premature Infants in the NICU Ward of Bendan District Hospital, Pekalongan City

Background: Premature infants admitted to the Neonatal Intensive Care Unit (NICU) often require mechanical ventilation and enteral nutrition via an orogastric tube (OGT). The use of ventilators, enteral feeding, and immature organ conditions increase the risk of aspiration, which can lead to respiratory distress, aspiration pneumonia, and worsening clinical status. One non-pharmacological nursing intervention that can be applied to reduce aspiration risk is the right lateral position with 30° head elevation.

Objective: To determine the effectiveness of applying the right lateral position with 30° head elevation in reducing the risk of aspiration in premature infants on ventilators in the NICU ward of Bendan District Hospital, Pekalongan City.

Method: This study employed a case study approach with a pretest and post-test design conducted on one premature infant with a gestational age of 32 weeks admitted to the NICU. The intervention, consisting of the right lateral position with 30° head elevation, was administered for 3 × 24 hours. Measurements were taken before (pre-test) and after (post-test) the intervention each day, observing oxygen saturation, breath sounds, chest wall retractions, gastric residual, feeding tolerance, body temperature, and signs of infection. Data were analyzed descriptively by comparing pretest and post-test results during the observation period.

Results: The application results showed improvements in the infant's clinical condition following the intervention. Oxygen saturation increased from 95% to 97%, breath sounds changed from bilateral rhonchi to vesicular, chest wall retractions decreased, gastric residual decreased from 3 cc to none on the third day, and feeding tolerance improved, allowing for a gradual increase in breast milk administration. No vomiting, abdominal distension, or signs of infection were observed during the procedure.

Conclusion: The application of the right lateral position with 30° head elevation to reduce the risk of aspiration and improve respiratory conditions and feeding tolerance in premature infants on ventilators.

Keywords: *Aspiration; premature infant; NICU; right lateral position; ventilator*

References: 13 references (2018–2026).