



SCIENTIFIC WRITING ON GERIATRIC NURSING MANAGEMENT WITH SERVICE EXCELLENCE FOR MRS. Z WITH HYPERTENSION AT THE ELDERLY SOCIAL SERVICE UNIT IN BINJAI, NORTH SUMATRA PROVINCE YEAR 2025

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ABSTRACT

Hypertension is one of the most common non-communicable diseases among the elderly and a leading cause of increased morbidity and mortality. In the context of geriatric nursing care, nurses play a crucial role in providing comprehensive and continuous care to improve the quality of life of older adults. This study aims to describe geriatric nursing care that prioritizes the principles of service excellence in managing hypertension in Mrs. Z, an elderly resident at the UPTD Elderly Social Service Binjai. The method used was a descriptive case study involving assessment, diagnosis, intervention, implementation, and evaluation stages. The results showed that non-pharmacological interventions, such as deep breathing relaxation techniques and hypertension exercises, effectively reduced pain complaints, improved physical activity, and enhanced Mrs. Z's quality of life. The application of service excellence principles—professionalism, accountability, collaboration, empathy, and reliability—also strengthened the quality of nursing services provided. In conclusion, geriatric nursing care management based on service excellence is effective in addressing hypertension in the elderly and aligns with the achievement of SDGs points 3 and 4.

Keywords: *Hypertension, Elderly, Geriatric Nursing, Service Excellence, Nursing Management*

Introduction

Decision of the Minister of PPNI/Head of Bappenas No. Kep. 136/M.PPN/HK/12/2021 on the Establishment of the National Action Plan for Sustainable Development Goals (SDGs) for 2021–2024 represents Indonesia's concrete commitment to supporting the achievement of global SDGs targets,

including SDG point 3.4. Globally, there is a commitment to reduce premature deaths caused by non-communicable diseases (NCDs) by one-third by the year 2030. This goal not only highlights the importance of efforts in prevention and treatment of chronic diseases, but also emphasizes the need to improve mental health and overall well-being across all age groups, including the elderly. One of the non-communicable

diseases that is a major concern in this regard is hypertension, whose prevalence increases with age. (Indonesia, 2023)

Hypertension is a condition of increased blood pressure that affects blood flow to the body's tissues and organs. Systemic hypertension is defined as systolic blood pressure ≥ 140 mmHg or diastolic blood pressure ≥ 90 mmHg. Meanwhile, the category of prehypertension is determined when systolic blood pressure is between 120-139 mmHg or diastolic blood pressure ranges from 80-89 mmHg (Andrianto, 2022). Globally, the WHO on Hypertension in 2023 estimates that the number of people suffering from hypertension has doubled in the last three decades, from 650 million in 1990 to 1.3 billion in 2019. The health impact of this increasing trend of high blood pressure causes 10.8 million deaths that can occur each year and 235 million lives lost or lived with disabilities (Who, 2024)

When researchers conducted a survey on Mrs. Z, she complained of headaches, a heavy nape of the neck, and dizziness. The interview results showed that the hypertension experienced was related to diet. This finding is supported by the journal (Yuliana Salman, Monica Sari, 2020) which states that diet is a factor causing hypertension. When asked to the caregiver, it was found that Mrs. often complained of pain despite having regularly taken medication. Researchers applied deep breathing relaxation techniques as one of the interventions, supported by the journal (Tuti Elyta, Miming Oxyandi, 2021) which explains that this technique can reduce pain levels. The patient also experienced

difficulty in carrying out long activities. Mrs. Z also sometimes participates in routine gymnastics at the nursing home on Wednesdays and Fridays to help reduce the difficulty of activities. In overcoming this, researchers conducted hypertension gymnastics supported by the journal (Sembiring *et al.*, 2024) which states that hypertension gymnastics can help the elderly understand their disease and implement preventive efforts through physical activity and after this hypertension gymnastics can increase oxygen circulation throughout the body which increases the volume of blood pumped. (Rachmawati *et al.*, 2020)

Because it is a silent killer, hypertension is frequently referred to as "The Silent Killer." According to the Ministry of Health (2007), hypertension can also lead to a number of other organ problems, including heart disease, stroke, and decreased kidney function. Understanding how to change one's lifestyle to prevent cardiovascular disease is necessary when dealing with hypertension. When a patient is motivated, blood pressure management therapy works best. When patients have positive experiences and have faith in their physicians, health information, and education, their motivation levels rise.(Agussamad *et al.*, 2022).

A major public health issue, the high prevalence of hypertension is caused by changes in lifestyle, age, gender, heredity, stress, and obesity. Untreated hypertension can cause serious problems in important organs like the heart, brain, kidneys, and eyes. Additionally, it is a significant risk

factor for aneurysms, heart attacks, heart failure, and stroke.(Sinaga *et al.*, 2024)

Government Regulation Number 4 of 2022 concerning Functional Positions provides a strong legal basis for strengthening the professionalism of nurses and implementing a transparent and accountable personnel administration system. Through this regulation, the position of nurse is not only recognized as a strategic technical career path, but also requires the fulfillment of clear and measurable competencies, qualifications, and performance. This is in line with the Decree of the Minister of Health (KMK) Number HK.01.07/MENKES/425/2020, which contains technical instructions for the implementation of functional nurse positions, including job descriptions, job levels, and a credit point assessment system that supports career development. These two regulations are drivers for the formation of a professional performance climate, encourage improvements in the quality of nursing services, and ensure an open, structured, and competency-based personnel administration system.

Research Method

This study uses a descriptive approach with a case study method that aims to comprehensively describe the implementation of service-excellent geriatric nursing care for elderly people with hypertension. The main focus of this study is Mrs. Z, a 70-year-old elderly resident of the Binjai Elderly Social Services Unit, North Sumatra.

This research design is a single case study, in which the researcher conducts an in-depth assessment of a single subject, following the stages of the nursing process, from assessment and establishing a nursing diagnosis, planning interventions, implementing interventions, and evaluating nursing outcomes. This approach was chosen to provide a holistic understanding of the effectiveness of nursing care in managing hypertension in the elderly.

The research was conducted at the UPTD for Elderly Social Services in Binjai during the period of March 25 to 28, 2025. Subjects were selected purposively with inclusion criteria, namely elderly people aged over 60 years, diagnosed with primary hypertension, and willing to participate in the research process.

The sample used in the study was one individual with hypertension, with a BP of 160/80 mmHg. Mrs. Z agreed to participate in the study. Non-hypertensive patients and those who refused were excluded. The data collection method used structured interviews to elicit subjective data, direct observation to assess the client's physical condition and response, and a physical examination to evaluate vital signs and clinical manifestations of hypertension. Furthermore, a standard geriatric nursing assessment format was used as a supporting instrument to ensure the data obtained was systematic and comprehensive. data luka bakar di RSUP H. Adam Malik Medan tanggal 26-29 April 2025 di Ruangan Icu Bedah ada 2 orang dan fokus Peneliti hanya pada pasien dengan Tn D dengan presentase derajat luka bakar yang paling tinggi 54%.



Result

Based on an initial survey conducted at the Binjai Elderly Social Services UPTD on March 19, 2025, it was found that out of 198 elderly people, 35 of them suffered from hypertension, with a prevalence of 17.6%. Government Regulation No. 4 of 2022 concerning functional positions of nurses and Decree of the Minister of Health No. HK.01.07/MENKES/425/2020 concerning nursing professional standards are the main foundations in ensuring the quality of nursing services, including in the implementation of hypertension. This regulation supports the development of nurse professionalism through continuous improvement of competence, career, and ethics. In the context of hypertension, these standards emphasize the importance of providing professional, accountable nursing care in accordance with clinical guidelines, through screening, healthy lifestyle education, blood pressure monitoring, and efforts to prevent complications such as stroke and heart failure, in order to maintain safety and improve the quality of life of Mrs. Z.

Law Number 17 of 2023 also emphasizes that individual healthcare services must meet safety quality standards, including curative and rehabilitative aspects. This principle serves as a reference for nurses in providing holistic and standardized hypertension care. All nursing interventions in healthcare facilities, including those for hypertension patients, must follow procedures stipulated in Standard Operating Procedures (SOPs). Prior to any intervention or research,

informed consent is required as part of professional ethics, as is the case at the Binjai Elderly Social Services Unit (UPTD).

This process involves a series of steps, including data collection through assessment, establishing a nursing diagnosis, developing an intervention plan, implementing nursing actions, and evaluating the effectiveness of nursing care. The method used in this case is a case study.

Theoretical studies have shown that hypertension often lacks specific symptoms, especially in the early stages, thus making it known as the "silent killer." However, symptoms include headaches, dizziness, heart palpitations, excessive fatigue, anxiety, excessive sweating, blurred vision, and difficulty sleeping. In Mrs. Z's case, it was found that she also experienced headaches, dizziness, and fatigue.

In theory, there are several disease diagnoses that can be related to the condition of elderly patients with hypertension. These include decreased cardiac output, changes in afterload, impaired cerebral perfusion caused by impaired blood flow to the brain, activity intolerance, acute pain, risk of falls, and knowledge deficiency (Heather, n.d.).

Meanwhile, based on data obtained through interviews, physical examinations, and direct observation, the problem formulations identified in Mrs. Z include: 1. Acute pain related to physiological injury agents characterized by Mrs. Z reporting headaches, Mrs. Z reporting neck pain, Mrs. Z reporting dizziness, and a physical examination pain scale of 5. 2. Activity

intolerance related to fatigue characterized by Mrs. Z reporting fatigue easily, Mrs. Z reporting her right leg tires easily and is heavy to move during prolonged activity, Mrs. Z appears exhausted, and if Mrs. Z is active for 20 minutes, Mrs. Z rests then Mrs. Z continues her activities, and 3. The risk of decreased cardiac output is related to increased cardiac work (afterload) indicated by BP: 160/90mmHg, HR: 97 x/minute, RR: 26 x/minute, Mrs. Z complains of shortness of breath and Mrs. Z experiences an increase in body weight from 65 kg to 69 kg.

The interventions implemented in this case were in accordance with existing intervention theory. The objectives and outcome criteria were also aligned with existing theory. The author's planning was carried out in relation to the problem formulated and aligned with the Indonesian Nursing Intervention Standards (SIKI), namely:

Acute pain related to physiological injuring agents. The author's diagnosis was accompanied by the following interventions: identifying the location, characteristics, duration, frequency, quality, and intensity of pain, monitoring vital signs, assessing the pain scale, and identifying factors that aggravate and alleviate the pain. In addition, non-pharmacological therapy was administered to reduce pain, positioning Mrs. Z as comfortably as possible, providing education about the causes and triggers of pain, and explaining pain management strategies. The client was also reminded of the importance of taking medication appropriately and encouraged to use non-

pharmacological techniques for pain management (deep breathing relaxation techniques). (Deby Zulkarnain, 2022)

Activity intolerance related to fatigue and age. For the third diagnosis, the author developed interventions by monitoring the level of physical fatigue, evaluating the location of discomfort during activity, and providing calming distraction activities. Furthermore, Mrs. Mrs. Z was advised to gradually increase her activity levels and implement coping strategies to reduce fatigue. (Rachmawati *et al.*, 2020)

The risk of decreased cardiac output is related to increased cardiac workload. The author developed a nursing intervention plan with the following steps: identifying primary and secondary signs/symptoms of decreased cardiac output, monitoring vital signs, positioning Mrs. Z as comfortably as possible, and providing an appropriate cardiac diet, such as avoiding high-fat foods. Furthermore, Mrs. Z was educated about the importance of weight control through a healthy diet, including reducing consumption of foods high in fat and salt.

During the nursing intervention implementation phase, the author implemented interventions according to the previously developed plan. The interventions were administered to Mrs. Z for three days as part of an effort to address the client's problems. One of the primary interventions implemented for all three diagnoses was hypertension exercises and deep breathing techniques, which are beneficial in lowering blood pressure and increasing the client's activity tolerance.

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Discussion

Mrs. Z is a 70-year-old woman of Sundanese descent and a Muslim. Mrs. Z is married and has completed elementary school. Information regarding the patient's condition was obtained through interviews with Mrs. S and medical records. For communication or decision-making regarding treatment, the family member who can be contacted is her son-in-law.

Based on the results of the medical examination, hypertension was diagnosed.

Current medical history During the assessment, Mrs. Z complained of a headache, particularly a feeling of heaviness in the nape of the neck, accompanied by dizziness and fatigue. These complaints had been present for approximately three years. Mrs. Z stated that these complaints had been present for a long time, starting at the age of 25, and were influenced by genetic factors from her mother. To address these complaints, Mrs. Z regularly took the antihypertensive medication amlodipine.

Past medical history Based on the interview and assessment, Mrs. Z has no history of immunizations or allergies to drugs, food, animals, or the environment. Her health condition is a headache, especially in the nape of the neck which feels heavy, and dizziness. The patient has no history of previous hospitalization. To overcome the complaints felt due to hypertension, Mrs. Z regularly takes antihypertensive medication.

Family health history In the psychosocial aspect, the closest person with whom she interacts most frequently has significant psychosocial problems that affect her emotional or mental state. To overcome stress, Mrs. Z tends to use coping mechanisms by listening to music which she finds calming and comforting. Perception of her illness: Mrs. Z hopes to always be healthy. After living in the nursing home, she regularly undergoes health checks, her main hope being that her health is maintained. In the spiritual aspect, Mrs. Z has a strong belief system in



carrying out religious activities such as praying five times a day regularly, as well as actively reading the Qur'an, reciting dhikr (wirrit), and listening to sermons. In addition, Mrs. Z believes in death.

During the assessment, the patient was generally compos mentis, fully conscious and oriented to time, place, and person. Vital signs revealed a blood pressure of 160/90 mmHg, a pulse rate of 97 beats per minute, a respiratory rate of 26 breaths per minute, a temperature of 36.5°C, and a pain scale of 6.

On physical examination, the patient's hair appeared partly white and clean. His eyes were symmetrical, and he occasionally wore glasses. His nose and sinuses showed no swelling, and his nose was symmetrical. His ears were also symmetrical. An examination of his mouth and throat revealed a clear, clear complexion with no lesions or complaints. No enlarged lymph nodes were found in his neck. His chest appeared symmetrical, and his breasts were also free of any lumps or abnormal masses. His respiratory system appeared labored.

Nursing Diagnosis Acute pain related to physiological injury agents characterized by Mrs. Z said headache, Mrs. Z said the back of the head hurts, Mrs. Z said dizziness and the results of the physical examination pain scale 6, Activity intolerance related to fatigue characterized by Mrs. Z said easily tired, Mrs. Z said the right leg easily feels tired and heavy to move when doing long activities, Mrs. Z looks tired, and if Mrs. Z is active for 20 minutes Mrs. Z rests then Mrs. Z continues her activities, Risk of decreased cardiac

output related to increased heart work (afterload) characterized by BP: 160/80 mmHg, HR: 97 x / minute, RR: 26 x / minute, Mrs. Z said shortness of breath, and Mrs. Z experienced weight gain from 65 kg to 69 kg.

Acute pain related to injuring agents Identifying the location, characteristics, duration, quality, and intensity of pain felt by Mrs. Z, Observing vital signs (TTV): BP, HR, RR, Identifying the pain scale using a numeric scale of 0-10, Identifying factors that aggravate and alleviate pain, Providing non-pharmacological therapy of deep breathing relaxation for 5-10 minutes, Positioning Mrs. Z in a comfortable position, Explaining to Mrs. Z about the causes, periods, and triggers of pain, Informing strategies to relieve pain, both pharmacological and non-pharmacological, Reminding Mrs. Z to take antihypertensive medication (amlodipine) as directed by the doctor.

Risk of decreased cardiac output related to increased cardiac work (afterload) Identifying primary signs/symptoms of decreased cardiac output (dyspnea), Identifying secondary signs/symptoms of decreased cardiac output: increased body weight, blood pressure, Monitoring daily vital signs and weight, Arranging Mrs. Z's position in a semi-fowler's position to reduce the burden on the heart, Providing a heart diet as recommended by the doctor, low in saturated fat and salt, Providing education about the importance of controlling body weight, Encouraging Mrs. Z to start reducing her intake of foods high in fat and salt.



Here the researcher only took the conclusion of the evaluation of the results from the last day, namely the third day Dx1 S: Mrs. Z said that she had a headache, a heavy neck, and no dizziness, O: BP: 140/80 mmHg, HR: 95 x/minute, RR: 22 x/minute, the patient looked comfortable, actively doing deep breathing relaxation, A: Nursing problems resolved, P: Nursing interventions were stopped, Dx2 S: Mrs. Z said that she was used to being active and did not get tired easily, O: Mrs. Z is able to do activities for 30 minutes longer, the right lower extremity is lighter to move, A: The nursing problem is partially resolved, P: Nursing intervention is continued by the field nurse, Dx3 S: The patient said that the shortness of breath has decreased, he feels lighter, O: BP: 140/80 mmHg, HR: 95 x/minute, RR: 22 x/minute, A: The nursing problem is partially resolved, P: Nursing intervention is continued by the field nurse.

Conclusion and Suggestion

Assessment: Based on the results of the assessment, Mrs. Z was found to have elevated blood pressure above normal limits, accompanied by complaints of headache, dizziness, a feeling of tightness in the back of the head, and fatigue. Risk factors include family history and a diet high in salt and fat. The results of this assessment serve as an important basis for establishing nursing diagnoses and planning appropriate interventions to prevent further complications. **Nursing Diagnoses:** Acute pain related to physiological injurious agents, Activity intolerance related to fatigue, Risk of decreased cardiac output related to

increased cardiac workload, Nursing Interventions

At this stage, planning is developed based on previously prioritized nursing diagnoses. The interventions implemented are tailored to the client's needs. **Nursing Implementation:** The actions implemented at this stage are in accordance with the previously planned interventions. Nursing actions are carried out in an effort to address the nursing problems experienced by the client. **Nursing Evaluation**

The nursing diagnosis in the first case is resolved, while the nursing problems in the second and third diagnoses are partially resolved. **Nursing Documentation:** The nursing care process has been systematically and accurately documented, from the assessment stage, outlined in the data collection format, to the nursing evaluation stage.

For Researchers: This case study is expected to serve as a useful reference in the development of nursing science, specifically regarding nursing care for Mrs. Z with hypertension. It can broaden the knowledge and understanding of researchers in this field.

For the Binjai Elderly Social Services Unit (UPTD), the results of this nursing care are expected to contribute as input for efforts to improve the quality of healthcare for the elderly with hypertension at the UPTD Elderly Social Services Unit (UPTD), the Social Services Department of North Sumatra Province, in 2025.

For Institutions: Through this case study, institutions are expected to provide

more optimal nursing care for Mrs. Z with hypertension and to maintain and strengthen collaboration between nurses, doctors, nutritionists, and other medical personnel to improve the quality of care for Mrs. Z.

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