



MANAGEMENT OF EMERGENCY NURSING CARE WITH SERVICE EXCELLENT FOR MR. J FOLLOWING TOTAL THYROIDECTOMY IN THE POST-SURGICAL INTENSIVE CARE UNIT AT H. ADAM MALIK CENTRAL GENERAL HOSPITAL MEDAN 2025

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ABSTRACT

Background: Thyroid cancer is one of the most common non-communicable diseases, with a steadily increasing prevalence both globally and nationally. The standard treatment for this condition often involves total thyroidectomy as a definitive therapeutic procedure. Postoperative patients require intensive nursing care, especially during the critical phase in the ICU. **Objective:** This scientific paper aims to describe the management of emergency nursing care with a service excellence approach for Mr. J, a post-total thyroidectomy patients in the Post-Surgical ICU of H. Adam Malik General Hospital, Medan. **Method:** A descriptive method was employed using a case study approach through interviews, observations, and nursing documentation review. **Subject:** The subject of this study was a single patients diagnosed with post-total thyroidectomy due to thyroid cancer who received ICU care. **Result:** The assessment revealed key problems, including impaired gas exchange, ineffective airway clearance, and ventilator weaning difficulties. The nursing interventions focused on airway management, mechanical ventilation monitoring, and appropriate weaning strategis. The interventions were implemented over three days with close monitoring and multidisciplinary collaboration. The evaluation showed improvements in breathing patterns, reduced abnormal breath sound, and increased oxygen saturation. **Conclusion:** This scientific paper highlights the importance of applying service excellence principles in critical care nursing to enhance the quality of care, patients safety, and comfort for post-surgical patients.

Keywords: Thyroid cancer, Post-thyroidectomy, Emergency nursing care, Nursing care with service excellence

Introduction

Based on an initial survey conducted by author on April 22, 2025, in the Post-Surgical ICU at RSUP H. Adam Malik Medan, a 69-year-old male patients was identified with a diagnosis of post-total thyroidectomy due to thyroid cancer. Thyroid cancer is frequently encountered in this hospital, with 3.338 patient visits recorded in 2024, in line with national trend

of 38.650 cases over the past five years and global incidence of 586.202 new cases in 2020 (Radhi, 2021). Following the thyroid gland removal procedure, the patient developed dependence on a ventilator and required a tracheal tube due to airway obstruction. This condition highlights the need for intensive and targeted nursing interventions to prevent further complications and support the patient's recovery process.



The results of interviews with patient's indicated that they had limited understanding of Mr. J's condition prior to the thyroidectomy. Currently, Mr. J is in a critical condition and requires a comprehensive nursing care approach. In accordance with Ministry of Health Regulation No. 26 of 2019, nurses are authorized to conduct thorough assessment of postoperative patients such as Mr. J, including the independent establishment of nursing diagnose (Permenkes RI, 2019). This is further reinforced by Ministry of Health Regulation No 4 of 2022, which emphasizes the nurse's obligation in the assessment and clinical monitoring of postoperative patients as part of high-quality professional care services (Republik Indonesia, 2022).

The application of service excellence principles in the nursing management of Mr. J is essential, given his post-major surgery condition complicated by respiratory issues. In the ICU setting, nurses are expected to deliver care that is prompt, empathetic, and professional in accordance with established standards. This aligns with the vision of both the educational institution and the hospital where this study was conducted, which emphasizes high-quality, patients-centered care (STIKes Mitra Husada Medan and RSUP H. Adam Malik Medan). Therefore, the selection of Mr. J as the subject of this scientific paper serves as a clear example of the importance of effective nursing management for post-thyroidectomy patients.

Method

This study employed a descriptive method aimed at presenting factual conditions based on data obtained through observation and literature review. The research focused on emergency nursing

care management using a service excellence approach for Mr. J, a post-total thyroidectomy patient treated in the Post-Surgical ICU at RSUP H. Adam Malik Medan in 2025. The approach followed a systematic nursing process that included assessment, diagnosis, intervention, implementation, and evaluation (Mishra & Alok, 2022).

The study was conducted at RSUP H. Adam Malik Medan, a nationally accredited referral hospital and a teaching hospital since 1993. The case study was carried out in the Post-Surgical ICU from April 23 to April 27, 2025, involving a single patient who had undergone total thyroidectomy.

Data were collected from three sources: primary data through direct interviews and observations, secondary data from patient medical records, and tertiary data from publications by the WHO, the Indonesian Ministry of Health, and previous literature.

Mitra Husada Medan

Result
The subject of this scientific paper is a 69-year-old male patient who has been receiving care in the Post-Surgical ICU of RSUP H. Adam Malik Medan since April 14, 2025, with a medical diagnosis of post total thyroidectomy. A nursing assessment was conducted on April 23, 2025. Subjective data were obtained through an interview with the patient's family, specifically his son. The family reported that prior to admission, the patient complained of shortness of breath and a productive cough. Following surgery, the patient remained on mechanical ventilation and was unable to speak normally (Ferry Napitupulu, 2025).

Objective data showed the patient was *compos mentis*, appeared restless, and

was on SIMV ventilator support with a tracheal tube ETT fixed at 21 cm. his body temperature was 36,2°C, blood pressure 100/60 mmHg, heart rate 90 beats/minutes, respiratory rate 28 breaths/minute, and oxygen saturation 97%. Additional findings included adventitious breath sounds, thick sputum, use of accessory respiratory muscles, and arterial blood gas results with pH 7.547 and pCO₂ 31.2 mmHg.

Based on the assessment, three nursing diagnoses were established: (1) ineffective airway clearance, (2) impaired gas exchange, and (3) weaning failure from mechanical ventilation. Nursing interventions were carried out over three consecutive days, from April 25 to April 27, 2025. On the first day, interventions included monitoring the rate, rhythm, and depth of respiration, auscultating breath sounds, suctioning every two hours or as needed, positioning the patient in semi-Fowler's position, and collaborating in the administration of bronchodilators and mucolytics. On the second day, care focused on monitoring oxygen saturation, signs of respiratory failure, and readiness for weaning from the ventilator. On the third day, interventions included assessing respiratory mechanics, observing the use of accessory muscles, and monitoring the patient's breathing patterns.

Evaluation of the interventions showed that on the first day, adventitious breath sounds and thick secretions were still present. By the second day, breath sounds had improved and the amount of secretion had decreased. On the third day, no abnormal breath sounds were detected, secretions were minimal, and oxygen saturation was stable.

Discussion

This section describes the implementation of nursing care using a service excellence approach for Mr. J, a 69-

year-old patient undergoing post-total thyroidectomy, treated at the Post-Surgical ICU of RSUP H. Adam Malik Medan (Bab IV, 2025). The nursing care was conducted based on the Regulation of the Indonesian Minister of Health No. 26 of 2019 Article 17 Paragraphs (1)–(5), which authorizes nurses to perform assessment, establish nursing diagnoses, plan interventions, carry out implementations, and evaluate outcomes (Permenkes RI, 2019).

Three specific nursing diagnoses were determined: ineffective airway clearance, impaired gas exchange, and ineffective ventilator weaning (Bab IV.2.2, 2025). Theoretical diagnoses such as acute pain and risk of infection were adjusted to match Mr. J's clinical reality (Nguru, 2020).

Interventions were designed according to SIKI (2017), including monitoring of respiratory status, suctioning, oxygen support, ventilator settings, head elevation, and oral care. Pharmacological interventions like Ventolin, Pulmicort, NAC, Vitamin K, and Fentanyl were also included. These were supported by studies showing the effectiveness of suctioning and positioning to improve respiratory status (Marleza Oktavia et al., 2024).

Interventions for impaired gas exchange
Implementation was carried out from April 25–27, 2025. The first diagnosis showed some improvement but Mr. J remained ventilator-dependent. The second diagnosis showed stable oxygenation, though full weaning was not achieved. The third diagnosis showed minor progress in breathing control, but extubation readiness still required evaluation. (Sumarni et al., 2024) also support the effectiveness of suction in increasing SpO₂ levels in ventilated patients.

Conclusion and Suggestion

Based on the implementation of emergency nursing care for Mr. J, a post-total thyroidectomy patient in the Post-Surgical ICU of RSUP H. Adam Malik Medan in 2025, it can be concluded that the nursing process was carried out comprehensively through five structured stages: assessment, diagnosis, planning, implementation, and evaluation, all aimed at meeting the patient's bio-psychosocial needs. Three key problems were identified—ineffective airway clearance, impaired gas exchange, and ineffective ventilator weaning—linked to postoperative complications and ventilator use. Interventions included respiratory monitoring, suctioning, positioning, chest physiotherapy, and collaborative drug therapy. Evaluation showed improvement in airway clearance and gas exchange, though ventilator weaning remained incomplete and required further intervention. The care provided fulfilled the principles of service excellence, with a professional, empathetic, and patient-centered approach.

In light of these findings, it is suggested that nursing students strengthen their competencies in comprehensive assessment of post-thyroidectomy patients, particularly in recognizing early signs of complications such as hematoma, airway obstruction, and hypocalcemia, and in developing prioritized nursing interventions such as pain management, nutrition support, infection prevention, and therapeutic communication. For patients and families, health education should be conducted consistently—both verbally and in written form—on topics such as wound care, signs of complications, the importance of routine follow-ups, and therapy adherence. Lastly, this case study may serve as a valuable reference for the development of surgical nursing science, especially regarding the identification of common

postoperative problems and the evaluation of nursing interventions for post-thyroidectomy patients, which should be further supported by evidence-based research.

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