



## EXCELLENT GEREONETIC NURSING CARE MANAGEMENT FOR MRS. Y WITH HYPERTENSION AT THE SOCIAL SERVICES UPTD FOR THE ELDERLY IN BINJAI NORTH SUMATERA PROVINCE SOCIAL SERVICES DEPARTMENT 2025

Nurcahaya Sihombing<sup>1</sup>, Siti Nurmawan Sinaga<sup>2</sup>, Petra Diansari Zega<sup>3</sup>, Heppy Damayanti Br. Sitepu<sup>4</sup>, Repika Marianti Siregar<sup>5</sup>, Daniel Capah<sup>6</sup>, Nophys Nirmala Laia<sup>7</sup>

<sup>1-7</sup>STIKes MITRA HUSADA MEDAN

[cahayabrhombing04@gmail.com](mailto:cahayabrhombing04@gmail.com), [sitinurmawan@mitrahusada.ac.id](mailto:sitinurmawan@mitrahusada.ac.id),  
[petradiansari@mitrahusada.ac.id](mailto:petradiansari@mitrahusada.ac.id), [heppybrsitepu09@gmail.com](mailto:heppybrsitepu09@gmail.com), [repikasiregar24@gmail.com](mailto:repikasiregar24@gmail.com),  
[danielcapah21@gmail.com](mailto:danielcapah21@gmail.com), [nirmalalaia@gmail.com](mailto:nirmalalaia@gmail.com)

### ABSTRACT

*Hypertension is a medical condition characterized by elevated blood pressure, with systolic pressure  $\geq 140$  mmHg and diastolic pressure  $\geq 90$  mmHg based on repeated measurements. This study is a descriptive case study approach conducted at the Binjai Elderly Social Services Unit (UPTD) in 2025. The nursing process was carried out systematically, including assessment, diagnosis, planning, implementation, and evaluation. The study subject was one elderly person with hypertension. Nursing interventions in practice did not fully follow the theory, particularly in terms of detailing the objectives and methods of intervention. However, both have the same goal: maintaining blood pressure within normal limits. Furthermore, care focused on pain reduction using the PQRST technique. The program was implemented over three days, with key interventions including vital sign monitoring, pain assessment, hypertension exercises, and deep breathing relaxation. Results showed a decrease in pain from 7 to 5, improved sleep quality, decreased anxiety, and a decrease in blood pressure to 140/80 mmHg. The client was also able to perform some scheduled activities. Further nursing interventions were carried out by the Binjai Social Service for the Elderly.*

**Keywords:** Gerontic Nursing, Care Management, Hypertension, Elderly, Nursing Care

### Introduction

Hypertension is a chronic cardiovascular condition characterized by sustained elevations in arterial blood pressure, defined as systolic blood pressure greater than 140 mmHg and diastolic blood pressure exceeding 90 mmHg, confirmed through repeated measurements. According to the Writing Group of the American Society of Hypertension, hypertension is a multifactorial disorder resulting from the interaction of genetic, behavioral, and environmental factors. In the context of the Sustainable

Development Goals (SDGs), hypertension is classified as a non-communicable disease, with SDG target 3.4 aiming to reduce premature mortality from non-communicable diseases by one-third through comprehensive prevention strategies, effective clinical management, and the promotion of mental health and overall well-being.

According to the 2023 WHO Global Report on Hypertension, the global burden of hypertension among adults has almost doubled over the last thirty years, increasing from approximately 650 million individuals in 1990 to 1.3 billion in 2019.

The rising prevalence of hypertension has substantial health consequences, contributing to an estimated 10.8 million preventable deaths each year and leading to a cumulative loss or decline in quality of life equivalent to 235 million life-years. Furthermore, findings from the 2023 Indonesian Health Survey (SKI) indicate a reduction in hypertension prevalence compared to the 2018 Riskesdas data. Among individuals aged 18 years and older, the prevalence of hypertension based on blood pressure measurements declined from 34.1% in 2018 to 30.8% in 2023. However, the prevalence of hypertension among the elderly population aged 55 to 75 years and above remains high, reaching 68.6%.

In 2023, the highest hypertension prevalence based on blood pressure measurements was reported in Central Kalimantan, South Kalimantan, and West Java, while the lowest rates were observed in Aceh, Papua, and North Maluku. Despite an overall decline in prevalence, public awareness of hypertension remains low, as indicated by a nearly 20% gap between doctor-diagnosed cases (5.9%) and measurement-based prevalence (26%) among individuals aged 18–59 years. In North Sumatra, hypertension prevalence reached 5.52% of the population, with the highest rates recorded in Karo Regency (8.21%) and Sibolga City (7.85%).

In the context of hypertension control efforts in the elderly, several studies by lecturers from STIKes Mitra Husada Medan have also been conducted. Wahyuni, Batubara, & Rosmega (2024) found that several factors such as age, lifestyle, and clinical conditions were statistically associated with the incidence of hypertension in the elderly in the

Sialang Buah Community Health Center, Serdang Bedagai, demonstrating the importance of identifying risk factors in nursing care for the elderly with hypertension.

Another study by Astaria Br Ginting et al. (2017) at the Simalingkar Community Health Center in Medan stated that family history and smoking behavior are variables that influence the incidence of hypertension in adult respondents, supporting the need for health interventions based on promotion and prevention.

Supported by research by Adelina Sembiring, Mastaida Tambun, Lisbet Gurning, Rosmega Rosmega, Petra Diansari Zega, Apriliani Kristina Gulo, Deo Cristian Meliala, and Erika Adelia Turnip (2025), it shows that empowering elderly cadres through education and training in blood pressure measurement significantly improves the knowledge and skills of cadres in managing hypertension, which has implications for improving the quality of elderly blood pressure monitoring in Bangun Rejo Village. The results of this study emphasize the importance of community-based interventions in hypertension control strategies in the elderly group.

Based on the above background, the researcher is interested in further researching the management of genetic nursing care that provides excellent service to Mrs. Y with hypertension at the UPTD Elderly Social Services Office in Binjai, North Sumatra Province, in 2025.

## Research Methods

This type of case study is a descriptive study aimed at exploring the problem of hypertension in the UPTD for Elderly

Social Services in Binjai in 2025. The approach used is a nursing care approach that starts from assessment, formulation of diagnosis, making planning, implementing and implementing evaluation. The implementation of nursing care was carried out on Mrs. Y which started from March 24-29, 2025 and April 8-9, 2025. The subject of this study was one elderly person who was experiencing hypertension.

## Results

Based on an assessment of Mrs. Y's hypertension, her hypertension was caused by stressful thought patterns that led to high blood pressure. Theoretically, causes of hypertension include excessive salt consumption, genetic factors, smoking, and obesity.

The author identified several relevant factors for the nursing care process based on the research data on Mrs. Y, referring to the signs and symptoms of hypertension, such as pain in the nape of the neck, which is an indication of high blood pressure and often causes muscle tension in the neck and nape. Furthermore, Mrs. Y experienced disturbed sleep patterns, complained of sleep dissatisfaction, frequently woke up, and complained of changes in sleep patterns. She also had difficulty moving her extremities when her blood pressure rose, with muscle strength of 33+33.

Other assessments, such as functional status, evaluated Mrs. Y's ability to perform daily activities such as bathing, eating, and dressing, and provided an overview of Mrs. Y's level of dependency. The physical examination revealed that Mrs. Y had hypertension with a blood pressure of 150/80

mmHg. The interventions implemented in this case did not align with existing theoretical interventions.

In theoretical interventions, the explanation or purpose of this action is explained in more detail. In contrast, in case interventions, each diagnosis is explained individually using objectives and outcome criteria. However, both theoretical and case interventions have the same goal: to monitor blood pressure within normal limits. In case interventions, the nursing plan also monitors the pain scale to reduce it using the PQRST technique to evaluate the pain scale. During the nursing intervention implementation phase, the author followed the plan developed in the intervention section. The intervention was carried out on Mrs. Y for three days to address the client's problems. The main actions taken during the implementation phase were monitoring vital signs (TV), pain scale monitoring, hypertension exercises, and deep breathing relaxation techniques.

On the first day of the three diagnoses, the client's condition remained the same as at the beginning of the assessment. She continued to complain of pain in the nape of the neck (7 on the pain scale), and her sleep disturbance and activity intolerance remained unresolved.

On the second and third days of the three diagnoses, the client's pain had decreased to a pain scale of 5. Her insomnia had subsided, her anxiety had decreased, and her blood pressure had begun to decrease. She was able to perform scheduled activities, albeit partially. Her BP was 140/80 mmHg. his muscle strength has improved but is still partially recovered. The intervention was

continued by the Binjai Elderly Social Services Unit (UPTD).

### Conclusion

At this stage, the author conducted an evaluation based on the objectives and outcome criteria outlined in the intervention phase and the results of each nursing action taken during the three-day nursing implementation, evaluating each nursing diagnosis.

In the first nursing diagnosis, the evaluation on the final day revealed that the client was still experiencing pain and dizziness, although her blood pressure had begun to decrease and the pain scale had also decreased.

In the second nursing diagnosis, the evaluation on the final day revealed that her insomnia and anxiety had begun to decrease, but intervention was continued because the problem was still partially resolved.

In the third nursing diagnosis, the evaluation on the final day revealed that the patient's blood pressure had begun to decrease, and she was able to partially resume scheduled activities. However, her blood pressure was not yet stable, so intervention was continued because the problem was still partially resolved.

Azizah., w. (2022). Application of slow deep breathing to blood pressure in hypertensive patients. *Jurnal Cendekia Muda*, vol. 2.

Cahyono, Eko Agus. (2023). Journal of the Development of Hypertension Health Science and Practice.

Enawati, L. (2020). Medication Compliance in Hypertensive Patients: Measurement and Ways to Improve Compliance.

Erma, M. (2022). Introductory Management Textbook.

Fitri, T., Malau, B., Silitonga, S., & Hutagalung, S. A. (2023). Counseling for the Elderly: Recognizing the Characteristics of the Elderly. *ELETTRA: Journal of Christian Religious Counseling Education* in Truntung, 1(1), 47–56. <https://elettra.iakntarutung.ac.id>

Formasi. (2021). Understanding Excellent Service and Its Implementation Aspects.

Indonesia, Ministry of Health of the Republic of Indonesia. (2020). Guidelines for Minimum Health Services for the Elderly (PMKL) During a Health Crisis.

Iqbal, A. M. (2023). Essential Hypertension.

Julianty Pradono. (2020). Hypertension: A Hidden Killer in Indonesia.

Ministry of Health of the Republic of Indonesia. (2023). Indonesian Health Survey (SKI) 2023: Non-Communicable Diseases. Health Data and Information Window Bulletin.

Kurnia, A. (2021). Hypertension Self-Management, CV Jakad Media Publishing.

Kurniawati, Putri. (2017). Nursing Process. In Universitas Nusantara PGRI Kediri (Vol. 01)

Kusumo, M. P. (2020). BUKULANSIA11-2.pdf (p. 65).

Lewis. (2019). Medical-surgical nursing is Canada.

Nurul Laila. (2023). Education on managing insomnia in patients with hypertension. *Collaborative Journal of Community Service*, v3i1.181.

Oktarina, A., & Ayu, M. S. (2024). Analysis of the Risk Factors of Hypertension in Amplas Health Center Medan City. *Ibnu Sina*, 23(2), 62–70.

Raudhoh, S., & Pramudiani, D. (2021). "Lanisa Asik, Active Elderly, Productive Elderly." *Journal of Community Service*, Faculty of



Medicine, Universitas Jatim, 4(1), 126–130.  
<https://doi.org/10.22437/medicaldedication.v4i1.13458>.

Ginting, A. B., Simanjuntak, J., & Surnayanti. (2017). *Pengaruh Riwayat Keluarga dan Aktivitas Fisik Terhadap Kejadian Hipertensi pada Ibu PUS di Wilayah Kerja Puskesmas Simalingkar Medan Tahun 2017*. Repository STIKes Mitra Husada Medan

Safitri, R. (2019). Nursing Implementation as a Form of Nursing Planning to Improve Client Health Status.

Sembiring, A., Tambun, M., Gurning, L., Rosmeka, R., Zega, P. D., Gulo, A. K., Meliala, D. C., & Turnip, E. A. (2025). *Pemberdayaan kader lansia dalam upaya penatalaksanaan hipertensi di Desa Bangun Rejo tahun 2025*. ARDHI: Jurnal Pengabdian Dalam Negeri, 3(3), 1384.  
<https://doi.org/10.61132/ardhi.v3i3.1384>

Septadara.ul. (2024). The Relationship Between Hypertension Diet Knowledge and Diet Compliance in Hypertension Patients at Harapan Raya Community Health Center. 04, 1.

Thayer, Tammy J. Toney, B. J. M. (2023). Nursing Process. Treasure Island (FL): StatPearls Publishing.

Wahyudi, K. (2023). Monograph: The Relationship Between Family Support and Elderly Behavior in Hypertension Control.

WHO. (2024). World Hypertension Day 2024: Measure Your Blood Pressure Accurately, Control It, Live Longer.

Wahyuni, W., Batubara, Z., & Rosmeka, R. (2024). *Faktor Yang Berhubungan Dengan Hipertensi Pada Lansia di Puskesmas Sialang Buah Kecamatan Teluk Mengkudu, Serdang Bedagai Tahun 2023*. Termometer: Jurnal Ilmiah Ilmu Kesehatan dan Kedokteran, 2(2), 96–103.  
<https://doi.org/10.55606/termometer.v2i2.3648>

STIKes Mitra Husada Medan