CHAPTER IV

CASE STUDY RESULTS

This chapter presents the results of a case study on the application of elderly fitness exercises to a client with sleep disorders. The study was conducted on one respondent residing in the Gribig Community Health Center (Puskesmas) in Malang City. All findings are presented systematically using a nursing process framework, which includes assessment, nursing diagnosis, action planning, intervention implementation, and evaluation.

4.1 Assessment

The assessment was conducted on one client, Mrs. Y, who had a nursing problem in the form of sleep pattern disturbance. Data were collected using various information gathering techniques, including interviews, observation, physical examination, and documentation review. The information obtained included identity, medical history, daily activities, rest and sleep patterns, physical condition, and sleep quality measurements using the Pittsburgh Sleep Quality Index (PSQI). The results of the assessment process served as the basis for developing nursing care and are presented in the following section.

a. Client Identity

The results of the anamnesis conducted on April 27, 2026 at 09.00 WIB at the client's home obtained data that the client Mrs. Y is 60 years old, female, Muslim, has an elementary school education, is married, and lives with her husband. The client is a former owner of a catering business whose management has now been continued by her son. Currently, the client is

doing more household activities such as cooking, cleaning the house, and watering the plants.

b. Health History

1) Main Complaint

The client said he had been having difficulty sleeping for approximately two months.

2) Complaints Now

The client reported that it takes about 1-2 hours to fall asleep after lying in bed. She also complained of waking up frequently during the night, especially to urinate, and sometimes having difficulty falling back asleep. She reported only sleeping about 4-5 hours each night. Upon waking in the morning, she felt less refreshed, tired, and felt inadequately rested.

The client reported a habit of watching TV before bed until she felt sleepy. She stated that since she stopped actively managing her catering business, her physical activity has decreased compared to before. She reported that her blood pressure sometimes remains high, even though she is taking medication.

3) Past Medical History

The client reported a history of hypertension for the past two years. He had no history of diabetes mellitus, heart disease, stroke, or kidney disease. He also reported no drug or food allergies, and no history of alcohol consumption.

4) Family Health History

The client reported no family history of hereditary conditions such as diabetes mellitus or heart disease. However, the client reported that her mother had a history of hypertension in her later years.

c. Health Perception and Management Patterns

The client stated that she understands that hypertension is a disease that requires treatment and regular health checks. She regularly checks her blood pressure at the Elderly Community Health Post (Posyandu Lansia) and the community health center and takes medication as prescribed by her doctor. She does not smoke or consume alcohol. However, she admitted that she still enjoys salty foods like crackers and salted fish, despite having tried to reduce her salt intake since being diagnosed with hypertension.

d. Nutrition and Metabolic Patterns

The client consumes three main meals a day, consisting of rice, side dishes, and vegetables. He has a good appetite and has not experienced any nausea or vomiting. He has no difficulty chewing or swallowing. He consumes approximately 1.5–2 liters of fluid per day, consisting of water and warm tea or coffee. At the time of assessment, he weighs 58 kg and is 155 cm tall. He reports no significant weight changes in the past six months.

e. Elimination Pattern

The client reports having one bowel movement daily with a normal consistency. She is not experiencing constipation or diarrhea. She urinates approximately 5–6 times during the day and once at night. She reports

waking up frequently at night to urinate, which sometimes makes it difficult to fall back asleep.

f. Activity and Exercise Patterns

Mrs. Y stated that she had previously actively managed the family's catering business. However, since her son took over the business, Mrs. Y's physical activity has decreased, and she spends more time at home. Mrs. Y is now able to perform daily activities independently without assistance.

g. Rest and Sleep Patterns

Mrs. Y complained of difficulty sleeping for the past two months. It usually takes her 1–2 hours to fall asleep after lying down in bed. She also frequently wakes up at night, especially to urinate, and sometimes has difficulty falling back to sleep. She averages 4–5 hours of sleep per night, with an occasional 30-minute nap. She watches TV before bed. She expressed dissatisfaction with the quality of her sleep, as she wakes up feeling tired, less refreshed, and not feeling well rested.

h. Cognitive and Perceptual Patterns

The client is able to communicate well in Indonesian and understands every question asked. The client does not experience any hearing impairment that would hinder communication. The client uses reading glasses when reading small print. The client reports sometimes experiencing pain in the back of the head when her blood pressure is high. The results of the assessment using the Short Portable Mental Status Questionnaire (SPMSQ) showed a number of errors, so intellectual function is in the intact category. The results of the assessment using the

Mini Mental State Examination (MMSE) showed a score of 28, indicating normal cognitive function.

i. Perception Patterns and Self-Concept

The client stated that she accepted her current health condition and was not bothered by the change in her role after her child took over the catering business. She continued to feel a sense of belonging to the family through her daily household activities. She showed no signs of decreased self-esteem or feelings of worthlessness.

j. Coping Patterns and Stress Tolerance

The client stated that when facing problems, she usually discusses them with her husband or children. She is also actively involved in community social activities. The emotional assessment revealed no emotional disturbances. The client appeared cooperative during the interview and was able to express her feelings effectively.

k. Role and Relationship Patterns

The client lives with her husband and has a good relationship with her family. She receives support from her family in maintaining her health. She also has good relationships with her neighbors and actively participates in the Elderly Posyandu (Integrated Health Post) and Elderly School activities in her area.

l. Value and Belief Patterns

The client is Muslim and regularly practices religious practices. He believes that maintaining good health is part of his efforts to maintain a

quality of life in old age. He has no religious restrictions that would impact nursing care.

m. Physical examination

1) General Condition

The results of the physical examination showed that Mrs. Y was in good general condition, appeared clean and tidy, and was able to communicate well. Her level of consciousness was compos mentis with a Glasgow Coma Scale (GCS) score of E4V5M6. Vital signs showed a blood pressure of 148/88 mmHg, a pulse rate of 80 beats per minute, a respiratory rate of 20 breaths per minute, and a body temperature of 36.6°C. The patient appeared cooperative during the assessment process and was able to follow the instructions given.

2) Respiratory System

A respiratory examination revealed no shortness of breath or cough. Vesicular breath sounds were normal in both lung fields.

3) Cardiovascular System

Cardiovascular examination revealed regular single S1 and S2 heart sounds without any additional sounds. No extremity edema or jugular venous distention was found.

4) Vision System

Visual examination revealed that both eyes appeared symmetrical, with no anemic conjunctivae and no icteric sclerae. The pupillary reflex to light was good, with isochoric pupils. The eye bags appeared dark.

5) Musculoskeletal System

A musculoskeletal examination revealed an upright posture and no deformities in the extremities. Upper and lower extremity muscle strength was good (muscle strength scale 5/5). Full range of motion was present in all extremities. The patient was able to walk independently without assistive devices, stand from a sitting position without assistance, and perform daily activities independently. Balance was good, and no complaints of joint pain or mobility limitations that would impede physical activity were found.

n. Diagnostic Examination

- Laboratory :

Type	HB	GDP/GDS	HDL/LDL/ VLDL	Uric Acid	Widal	DLL
Result	12,05	125 mg/dl		5,7		
Date	22/01/2026	30/03/2026		30/03/2026		

- X-ray Photo :
- ECG :
- Ultrasound :
- Etc :

o. Current Treatment :

Medicine	Dose	Rute
Amlodipine	5mg	Oral (1x/hari)

p. Client Functional Assessment

1) PSQI (Pittsburgh Sleep Quality Index)

The results of a sleep quality assessment using the Pittsburgh Sleep Quality Index (PSQI) showed a total score of 13, indicating poor sleep quality. The assessment revealed disturbances in the subjective sleep quality components of sleep latency, sleep duration, sleep efficiency, and sleep disturbances. The client complained of difficulty falling asleep, frequent nighttime awakenings, sleeping only about 4–5 hours per night, and feeling dissatisfied with the quality of her sleep. Based on these results, it can be concluded that the client is experiencing a sleep pattern disorder.

2) Bartel Index

The Barthel Index assessment showed a score of 90, indicating the client is independent in performing activities of daily living (ADL). The client is able to eat, bathe, dress, transfer, walk, climb and descend stairs, and manage elimination independently without assistance. Based on these results, the client is categorized as self-sufficient.

3) Assessment of Nutrition of the Elderly

Based on the results of the assessment using the Nutritional Screening Initiative (NSI), Mrs. S did not experience any diseases that affected the amount or type of food consumed. Clients eat three meals a day with adequate intake, consume fruits, vegetables, and dairy products regularly, do not have the habit of consuming alcoholic beverages, and do not experience disorders in the teeth or mouth that can hinder the

eating process. Clients also do not experience economic limitations in meeting food needs, do not eat alone, do not undergo drug therapy three or more times a day, do not experience weight loss of 5 kg in the last six months, and are still able to shop, cook, and eat independently. Based on these results, a total NSI score of 0 was obtained, which indicates that the client is in the category of Good Nutritional Status or not at risk of developing nutritional problems.

4) Assessment of Emotional Problems

Based on the results of the Assessment of Emotional Problems study, in the first stage Mrs. S stated that she had difficulty sleeping, but did not complain of many thoughts, was not easily depressed or cried alone, and did not feel often anxious or worried. Because there is one answer "yes", the study is continued to the second stage. In the second stage, the client stated that the complaint of sleep disorders had lasted for about two months so that he had not met the criteria for complaints for more than three months, did not have many disturbing thoughts, did not experience problems with others, did not use sleeping pills or sedatives on the recommendation of the doctor, and did not have a tendency to isolate himself. Based on the results of the study, no emotional disorder was found. The sleep disorders experienced by clients are more related to poor sleep habits, decreased physical activity, and the habit of waking up at night to urinate, rather than due to emotional or psychological disturbances.

5) SPMSQ (Short Portable Mental Quisioner)

The results of the study using the Short Portable Mental Status Questionnaire (SPMSQ) showed a total of 0 errors, so that the client was included in the category of intact intellectual function. Clients are able to answer all questions correctly, including time orientation, place, self-identity, and simple calculation skills.

6) MMSE (Mini Mental Status Exam)

The results of the study using the Mini Mental State Examination (MMSE) showed a score of 29 out of 30, which is included in the category of no cognitive function impairment. Clients are able to do orientation, registration, attention and calculation, recall, and language skills well. The client is also able to understand the instructions and communicate effectively during the review process.

7) Elderly Anxiety Scale

Based on the results of the Geriatric Anxiety Scale (GAS), Mrs. S obtained a total score of 19, which is included in the category of minimal level of anxiety (minimal anxiety). The score was mainly influenced by complaints of difficulty starting sleep, frequent awakenings at night, tiredness after waking up, and slight concentration disturbances due to poor sleep quality. Meanwhile, no meaningful anxiety symptoms such as excessive worry, uncontrollable fear, feelings of loss of control, or other emotional symptoms were found. Thus, the sleep disorders experienced by Mrs. S are more likely to lead to changes in sleep patterns and poor sleep habits than as a manifestation of anxiety disorders.

8) Depression Assessment

Based on the results of the study using the Geriatric Depression Scale (GDS-15), Mrs. S obtained a score of 0, so there were no signs of depression. The client stated that he was satisfied with his current life, still had enthusiasm in carrying out daily activities, enjoyed the activities carried out, and did not feel that his life was empty or desperate. Clients also have no tendency to avoid social interactions, do not feel inferior to others, and do not complain of meaningful memory impairments.

9) APGAR Elderly Family

Based on the results of the study using Family APGAR, Mrs. S obtained a score of 10 which is included in the Good Family Function category. The client stated that he was satisfied with the support provided by the family when facing problems, felt that his family was willing to discuss in making decisions, accept and support his wishes, show good affection, and spend time with his family.

10) Balance Assessment

Based on the results of the assessment using the Tinetti Balance Assessment, Mrs. S obtained a total score of 27 out of 28, which is included in the low risk of falling category. Clients are able to sit and stand independently without assistance, maintain balance while standing, walk with a steady step, and can rotate 360° and return to sit safely. During walking, the height and length of the steps appeared symmetrical, the continuity of the step was good, and no significant

trajectory deviations or balance disturbances were found. Clients also do not use walkers and are still able to carry out daily activities independently, such as sweeping, cooking, washing, watering plants, and walking to the market with their husbands.

4.2 Data Analysis

Table 4. 1 Data Analysis of Mrs. Y with Sleep Pattern Disturbance in the Gribig Community Health Center Malang 2026

NO.	DATA	ETIOLOGY	PROBLEM
1.	Subjective Data: • The client stated that he had difficulty falling asleep for the past 2 months or so. • The client reported waking up frequently during the night and having difficulty starting again. • The client said he was dissatisfied with the quality of his sleep. • The client stated that his sleep pattern had changed to sleeping later at night. • The client said that he had not gotten enough rest, so that when he woke up in the morning his body still felt tired and less fresh. Objective Data: • The results of the PSQI assessment showed a score of 13 (poor sleep quality)	Elderly ↓ Decreased physical activity ↓ Lack of sleep control ↓ Sleep Disorders	Sleep Disorders

4.3 Nursing Diagnosis

Table 4. 2 Nursing Diagnose of Mrs. Y with Sleep Pattern Disturbance in the Working Area of Gribig Community Health Center Malang 2026

NO.	NURSING DIAGNOSIS	DATE OF APPEARANCE	DATE COMPLETED	SIGN
1.	Sleep pattern disorders (D.0055) related to lack of sleep control are characterized by: • The client stated that he had difficulty falling asleep for the past 2 months or so. • The client reported waking up frequently during the night and having difficulty starting again. • The client said he was dissatisfied with the quality of his sleep. • The client stated that his sleep pattern had changed to sleeping later at night. • The client said that he had not gotten enough rest, so that when he woke up in the morning his	April 27, 2026	May 9, 2026	

	body still felt tired and less fresh. • The results of the PSQI assessment showed a score of 13 (poor sleep quality)			

4.4 List Of Nursing Diagnoses

Table 4. 3 List of Nursing Diagnose of Mrs. Y with Sleep Pattern Disturbance in the Working Area of Gribig Community Health Center Malang 2026

Nursing Diagnosis/Collaborative Problem	**Progress Evaluation**					
	Date 04/28/2026	**Date 04/30/2026**	**Date 02/05/2026**	**Date 05/05/2026**	**Date 07/05/2026**	**Date 09/05/2026**
Sleep pattern disorders related to lack of sleep control are characterized by: • The client stated that he had difficulty falling asleep for the past 2 months or so. • The client reported waking up frequently during the night and having difficulty starting again. • The client said he was dissatisfied with the quality of his sleep. • The client stated that his sleep pattern had changed	**AS**	**AS**	**AM**	**AM**	**AM**	**TM**

Nursing Diagnosis/Collaborative Problem	Progress Evaluation					
	Date 04/28/2026	**Date 04/30/2026**	**Date 02/05/2026**	**Date 05/05/2026**	**Date 07/05/2026**	**Date 09/05/2026**
to sleeping later at night. • The client said that he had not gotten enough rest, so that when he woke up in the morning his body still felt tired and less fresh. • The results of the PSQI assessment showed a score of 8 (poor sleep quality)						
Status Code: A = Active T = Resolved D = Removed *T = No Change **Evaluation Code: S = Stable M = Improving B = Worsening K = Progress** *** TK = No progress**						

4.5 Nursing Interventions

Table 4. 4 Nursing Interventions of Mrs. Y with Sleep Pattern Disturbance in the Working Area of Gribig Community Health Center Malang 2026

No.	Date	Nursing Diagnosis	Nursing Outcomes	Intervention
1.	April 27, 2026	**Sleep Pattern Disorder (D.0055) is related to lack of sleep control.**marked by: • The client stated that he had difficulty falling asleep for the past 2 months or so. • The client reported waking up frequently during the night and having difficulty starting again. • The client said he was dissatisfied with the quality of his sleep. • The client stated that his sleep pattern had changed to sleeping later at night. • The client said that he had not gotten enough rest, so that when he woke up in the morning his body still felt tired and less fresh.	**Sleep Pattern (L.05045)** After nursing intervention for 3 x 24 hours, sleep patterns improved, with the following outcome criteria: 1. Complaints of difficulty sleeping decreased 2. Complaints of frequent awakening decreased 3. Complaints of sleep dissatisfaction decreased 4. Complaints of changing sleep patterns decreased 5. Complaints of insufficient rest decreased 6. Improved sleep quality	**Sleep Support (I.05174)** • **Observation** 1. Identify activity and sleep patterns 2. Identify factors that interfere with sleep • **Therapeutic** 3. Set a regular sleep schedule • **Education** 4. Encourage adherence to bedtime habits 5. Teach the factors that contribute to sleep pattern disturbances. 6. Teach non-pharmacological therapy for fitness exercises for the elderly **Activity and Rest Education (I.12362)** • **Observation** 1. Identify the client's usual level of physical activity on a daily basis.

No.	Date	Nursing Diagnosis	Nursing Outcomes	Intervention
		• The results of the PSQI assessment showed a score of 13 (poor sleep quality)		• **Therapeutic** 1. Provide materials and media for organizing activities and rest. 2. Schedule health education as agreed with the client. 3. Give clients and families the opportunity to ask questions. • **Education** 1. Explain the importance of doing physical activity or exercise regularly. 2. Encourage clients to participate in group activities such as elderly fitness exercises. 3. Encourage clients to develop a balanced schedule of activity and rest. 4. Teach clients to identify signs of need for rest such as fatigue, drowsiness, or decreased concentration.

4.6 Nursing Implementation

Table 4. 5 Nursing Implementation of Mrs. Y with Sleep Pattern Disturbance in the Working Area of Gribig Community Health Center Malang 2026

Date	Diagnosis	Nursing Implementation	Signature
04-28-2026	D.0055	- Identifying activity and sleep patterns using the PSQI Results: The patient reported sleeping about 4 hours per night, taking about 1–2 hours to fall asleep, and frequently waking up during the night. - Identifying factors that interfere with sleep using the PSQI Results: The patient said he often watched Chinese dramas on his cell phone before going to bed. - Identify the client's usual level of physical activity on a daily basis. Results: The patient said that daily activities include sweeping, cooking, washing, and watering plants. - Establish a regular sleep schedule together Results: Agreed sleep schedule of 21.30–22.00 WIB and wake up at 04.00 WIB. - Encourage clients to adhere to agreed-upon bedtime routines. Results: The patient stated that he was willing to try to follow the sleep schedule that had been prepared. - Teaching non-pharmacological therapy in the form of fitness exercises for the elderly. Results: The patient was able to follow most of the exercise movements with direct guidance and examples from the researcher. During some movements, the patient appeared stiff and occasionally paused to adjust her body. The patient stated that she had never participated in structured elderly fitness exercises before, but found the exercises quite easy and comfortable to follow.	

Date	Diagnosis	Nursing Implementation	Signature
		- Schedule the provision of health education as agreed with the client. Results: The patient was willing to participate in the entire series of activities for two weeks. - Providing educational materials and media via laptop regarding activities and rest. Results: Patients paid attention to the material provided and showed interest in the information presented. - Provide an opportunity for clients and families to ask questions. Results: Patients asked about the benefits of elderly fitness exercises on their sleep quality. - Teaches the factors that contribute to sleep pattern disturbances. Results: The patient reported frequently watching Chinese dramas on her cell phone before bed. She also reported reduced physical activity since her child took over the catering business. She also frequently woke up at night to urinate. - Explain the importance of doing physical activity or exercise regularly. Results: Patients said they understood the many benefits they would experience if they regularly did physical activity. - Encourage clients to participate in group activities such as elderly fitness exercises 3 times a week for 2 weeks. Results: The client stated that he was willing to follow the exercise schedule that had been mutually agreed upon. - Encourage clients to create a balanced schedule of activities and rest. Results: Patients stated that they understood the importance of managing activity and rest to help maintain physical fitness and improve sleep quality.	

Date	Diagnosis	Nursing Implementation	Signature
		- Teach clients to identify signs of the need for rest. Results: Patients understood the explanation given by the researcher regarding signs of the need for rest such as fatigue, drowsiness, or decreased concentration.	
04-30-2026	D.0055	- Identifying activity and sleep patterns using the PSQI Results: The patient said he slept for about 4 hours at night and still woke up during the night. - Identifying factors that interfere with sleep using the PSQI Results: The patient said he still watched Chinese dramas on his cell phone before going to bed. - Identify the client's usual level of physical activity on a daily basis. Results: The patient said that daily activities include sweeping, cooking, washing, and watering plants. - Encourage clients to adhere to agreed-upon bedtime routines. Results: The patient said he tried to sleep according to the schedule that had been made, although it was not consistent. - Teaching non-pharmacological therapy in the form of fitness exercises for the elderly. Results: The patient enthusiastically followed the entire exercise routine for approximately 30 minutes. The patient appeared a little stiff and tried to follow the movements demonstrated by the instructor. - Schedule the provision of health education as agreed with the client. Results: The patient remains willing to participate in all the agreed series of activities. - Providing educational materials and media via laptop regarding activities and rest.	

Date	Diagnosis	Nursing Implementation	Signature
		Results: Patients paid attention to the material provided and showed interest in the information presented. - Provide an opportunity for clients and families to ask questions. Results: Patients asked about the good duration of exercise for the elderly. - Teaches the factors that contribute to sleep pattern disturbances. Results: The patient stated that he was trying to reduce his cell phone use before bed. However, he still woke up twice a night to urinate. He also noted that he was not as physically active as when he was still actively running his catering business. - Explain the importance of doing physical activity or exercise regularly. Results: Patients said they understood the many benefits they would experience if they regularly did physical activity. - Encourage clients to participate in group activities such as elderly fitness exercises 3 times a week for 2 weeks. Results: The client stated that he was willing to follow the exercise schedule that had been mutually agreed upon. - Encourage clients to create a balanced schedule of activities and rest. Results: Patients began to try to implement the activity and rest schedule that had been created.	
02-05-2026	D.0055	- Identifying activity and sleep patterns using the PSQI Results: The patient said that he still slept for about 5 hours at night and needed 1 hour to fall asleep but the patient only woke up once during the night. - Identifying factors that interfere with sleep using the PSQI	

Date	Diagnosis	Nursing Implementation	Signature
		Results: The patient said he had reduced playing with his cell phone before bed. - Identify the client's usual level of physical activity on a daily basis. Results: The patient reported increased physical activity because she wanted to be more active on a daily basis when she wasn't exercising. For example, she started walking to the market with her husband. - Encourage clients to adhere to agreed-upon bedtime routines. Results: The patient said he tried to sleep according to the schedule that had been made. - Teaching non-pharmacological therapy in the form of fitness exercises for the elderly. Results: The patient performed the entire exercise routine smoothly for approximately 30 minutes. She began to remember some of the movements taught and only occasionally glanced at the instructor. - Schedule the provision of health education as agreed with the client. Results: The patient remains willing to participate in all the agreed series of activities. - Teaches the factors that contribute to sleep pattern disturbances. Results: The patient reported having reduced her late-night Chinese drama viewing. She still wakes up occasionally to urinate but is able to fall back asleep. She has also started regular exercise, increasing her physical activity. - Encourage clients to participate in group activities such as elderly fitness exercises 3 times a week for 2 weeks. Results: Patients follow the elderly exercise schedule regularly as scheduled. - Encourage clients to create a balanced schedule of activities and rest.	

Date	Diagnosis	Nursing Implementation	Signature
		Results: Patients said that the division of time between activities and rest had become more regular.	
05-05-2026	D.0055	- Identifying activity and sleep patterns using the PSQI Results: The patient reported sleeping for about 6 hours at night and only waking up once. - Identifying factors that interfere with sleep using the PSQI Results: The patient said he rarely played with his cell phone before bed and prepared for bed earlier. - Identify the client's usual level of physical activity on a daily basis. Results: Patients said their daily activities felt more regular, and they tried to do other physical activities when they were not exercising. - Encourage clients to adhere to agreed-upon bedtime routines. Results: The patient said he tried to start preparing for bed earlier so he could sleep on schedule. - Teaching non-pharmacological therapy in the form of fitness exercises for the elderly. Results: The patient was able to follow most of the exercise movements independently with improved coordination compared to the previous session. The patient reported feeling more refreshed in the morning and feeling sleepier at night. - Schedule the provision of health education as agreed with the client. Results: The patient remains willing to participate in all the agreed series of activities. - Teaches the factors that contribute to sleep pattern disturbances.	

Date	Diagnosis	Nursing Implementation	Signature
		Results: The patient reported that it was easier to fall asleep after reducing cell phone use before bed and engaging in regular exercise. The patient still woke up once to urinate during the night. - Encourage clients to participate in group activities such as elderly fitness exercises 3 times a week for 2 weeks. Results: Patients follow the elderly exercise schedule regularly as scheduled. - Encourage clients to create a balanced schedule of activities and rest. Results: The patient said he started to follow the activity and rest schedule that had been made.	
07-05-2026	D.0055	- Identifying activity and sleep patterns using the PSQI Results: The patient reported sleeping 6-7 hours a night and only waking once. He found it easier to fall back asleep after waking. - Identifying factors that interfere with sleep using the PSQI Results: Patients said they were used to reducing cell phone use before bed. - Identify the client's usual level of physical activity on a daily basis. Results: Patients said their bodies felt fresher when doing other physical activities. - Encourage clients to adhere to agreed-upon bedtime routines. Results: Patients started to get used to going to bed at the same time every night. - Teaching non-pharmacological therapy in the form of fitness exercises for the elderly. Results: The patient was able to complete all stages of the exercise without experiencing excessive fatigue. The patient appeared to enjoy the activity and was able to perform the movements more smoothly.	

Date	Diagnosis	Nursing Implementation	Signature
		- Schedule the provision of health education as agreed with the client. Results: The patient remains willing to participate in all the agreed series of activities. - Teaches the factors that contribute to sleep pattern disturbances. Results: The patient reported that she had become accustomed to limiting her cell phone use before bed. She only woke up once to urinate and was able to return to sleep without difficulty. She also felt more active after regularly participating in elderly fitness exercises. - Encourage clients to participate in group activities such as elderly fitness exercises 3 times a week for 2 weeks. Results: Patients follow the elderly exercise schedule regularly as scheduled. - Encourage clients to create a balanced schedule of activities and rest. Results: Patients reported that daily activities became more regular.	
05-09-2026	D.0055	- Identifying activity and sleep patterns using the PSQI Results: The patient reported sleeping 6-7 hours a night and only waking once. He found it easier to fall back asleep after waking. - Identifying factors that interfere with sleep using the PSQI Results: The patient said he was used to not playing with his cell phone before going to bed. - Identify the client's usual level of physical activity on a daily basis. Results: The patient said his body felt fresher since implementing elderly fitness exercises and other physical activities, so that the patient felt he could do useful activities even	

Date	Diagnosis	Nursing Implementation	Signature
		though he was no longer managing his catering business. - Encourage clients to adhere to agreed-upon bedtime routines. Results: The patient was able to maintain the agreed sleep schedule. - Teaching non-pharmacological therapy in the form of fitness exercises for the elderly. Results: The patient was able to perform all the exercise movements independently and correctly according to the instructions. The patient appeared enthusiastic during the activity and was able to invite other friends to join. The patient stated that the elderly fitness exercise was a fun activity and helped the body feel more relaxed at night and feel more refreshed upon waking in the morning. - Schedule the provision of health education as agreed with the client. Results: The patient remains willing to participate in all the agreed series of activities. - Teaches the factors that contribute to sleep pattern disturbances. Results: The patient stated that cell phone use before bed had decreased, physical activity had increased after regularly participating in elderly fitness exercises, and although he still woke up once to urinate at night, the client was able to fall back asleep easily. - Encourage clients to participate in group activities such as elderly fitness exercises 3 times a week for 2 weeks. Results: Patients follow the elderly exercise schedule regularly as scheduled. - Encourage clients to create a balanced schedule of activities and rest. Results: Patients continue to adhere to the activity and rest schedule that has been made.	

4.7 Nursing Evaluation

Table 4. 6 Nursing Evaluation of Mrs. Y with Sleep Pattern Disturbance in the Working Area of Gribig Community Health Center Malang 2026

No. Dx	Date: April 28, 2026	Date: April 30, 2026	Date: 02 May 2026
D.0055	**S:** - The patient said he slept about 4 hours per night, taking about 1–2 hours to fall asleep. - The patient reported waking up frequently during the night and having difficulty starting again. - The patient said he was dissatisfied with the quality of his sleep. - The patient said his sleep pattern changed to sleeping later at night. - Patients say they don't get enough rest, so when they wake up in the morning their bodies still feel tired and less fresh. **O:** - PSQI result: 13 (poor sleep quality). **A:** Sleep pattern disturbances have not been resolved. **Q:** Intervention continued: 1. Identify activity and sleep patterns.	**S:** - The patient reported sleeping about 4 hours a night and still having difficulty falling asleep. - The patient said he still woke up at night. - The patient said he was not satisfied with the quality of his sleep even though he felt a little more comfortable. - The patient said he started trying to follow the agreed sleep schedule. - The patient said that when he woke up in the morning his body still felt less fresh. **O:** - PSQI result: 13 **A:** Sleep pattern disorders have not been resolved **Q:** Intervention continued: 1. Identify activity and sleep patterns. 2. Identify factors that interfere with sleep. 3. Identify the client's usual level of physical activity on a daily basis.	**S:** - The patient reported sleeping about 5 hours a night and falling asleep more easily than before. - The patient said the frequency of waking up at night had decreased and he only woke up once. - The patient said he was not satisfied with the quality of his sleep but felt better than before. - The patient said his sleep pattern was becoming more regular. - Patients say their bodies feel a little fresher when they wake up in the morning compared to before. **O:** - PSQI result: 11 **A:** Sleep pattern disturbances partially resolved. **Q:** Intervention continued: 1. Identify activity and sleep patterns. 2. Identify factors that interfere with sleep. 3. Identify the client's usual level of physical activity on a daily basis.

	2. Identify factors that interfere with sleep. 3. Identify the client's usual level of physical activity on a daily basis. 4. Encourage clients to stick to their agreed-upon bedtime routines. 5. Teach non-pharmacological therapy in the form of fitness exercises for the elderly. 6. Schedule health education as agreed with the client. 7. Provide educational materials and media regarding activities and rest. 8. Give clients and families the opportunity to ask questions. 9. Teach the factors that contribute to disturbed sleep patterns. 10. Explain the importance of doing physical activity or exercise regularly. 11. Encourage clients to participate in group activities such as elderly fitness exercises. 12. Encourage clients to develop a balanced schedule of activity and rest.	4. Encourage clients to stick to their agreed-upon bedtime routines. 5. Teach non-pharmacological therapy in the form of fitness exercises for the elderly. 6. Schedule health education as agreed with the client. 7. Teach the factors that contribute to disturbed sleep patterns. 8. Encourage clients to participate in group activities such as elderly fitness exercises. 9. Encourage clients to develop a balanced schedule of activity and rest.	4. Encourage clients to stick to their agreed-upon bedtime routines. 5. Teach non-pharmacological therapy in the form of fitness exercises for the elderly. 6. Schedule health education as agreed with the client. 7. Teach the factors that contribute to disturbed sleep patterns. 8. Encourage clients to participate in group activities such as elderly fitness exercises. 9. Encourage clients to develop a balanced schedule of activity and rest.

No. Dx	Date: 05 May 2026	Date: 07 May 2026	Date: 09 May 2026
D.0055	**S:** - The patient reported sleeping about 6 hours a night and falling asleep more easily than before. - The patient said he only woke up once during the night. - The patient said his sleep quality was better than before. - The patient said his sleep pattern began to become regular according to the agreed schedule. - Patients say their bodies feel fresher when they wake up in the morning. **O:** - PSQI result: 7 **A:** Sleep pattern disturbance partially resolved **Q:** Intervention continued: 1. Identify activity and sleep patterns. 2. Identify factors that interfere with sleep. 3. Identify the client's usual level of physical activity on a daily basis. 4. Encourage clients to stick to their agreed-upon bedtime routines. 5. Teach non-pharmacological therapy in the form	**S:** - The patient said he slept about 6-7 hours a night and it was no longer too difficult to fall asleep. - The patient reported waking up only occasionally during the night and being able to fall back asleep more easily. - Patients reported being more satisfied with the quality of their sleep than before. - The patient said his sleep pattern was becoming more regular. - Patients say they get more rest so their bodies feel fresher when they wake up in the morning. **O:** - PSQI result: 6 **A:** Sleep pattern disturbance partially resolved **Q:** Intervention continued: 1. Identify activity and sleep patterns. 2. Identify factors that interfere with sleep. 3. Identify the client's usual level of physical activity on a daily basis. 4. Encourage clients to stick to their	**S:** - Patients reported sleeping about 7 hours a night and falling asleep more easily than before the program. - The patient reported waking up only once to urinate and was able to return to sleep easily. - The patient said he was satisfied with the quality of his sleep. - The patient said his sleep pattern was more regular than before. - Patients say they have had enough rest so their bodies feel fresh when they wake up in the morning. **O:** - PSQI result: 5 **A:** Sleep pattern disorders resolved. **Q:** - Stop the main intervention.

	of fitness exercises for the elderly. 6. Schedule health education as agreed with the client. 7. Teach the factors that contribute to disturbed sleep patterns. 8. Encourage clients to participate in group activities such as elderly fitness exercises. 9. Encourage clients to develop a balanced schedule of activity and rest.	agreed-upon bedtime routines. 5. Teach non-pharmacological therapy in the form of fitness exercises for the elderly. 6. Schedule health education as agreed with the client. 7. Teach the factors that contribute to disturbed sleep patterns. 8. Encourage clients to participate in group activities such as elderly fitness exercises. 9. Encourage clients to develop a balanced schedule of activity and rest.	