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ATTACHMENT

Attachment 1 Chest Physiotherapy SOP

	Ministry of Health Polytechnic of Health, Malang	No. Documents:
	STANDARD OPERATING PROCEDURES FOR CHEST PHYSIOTHERAPY	Revision No.: 00
		Date of issue :
		Page :
Unit: Nursing Laboratory		Officers / Implementers: Nurses, Lecturers, CI, students
Understanding	Chest physiotherapy is a series of nursing actions consisting of percussion (clapping), vibration, and postural drainage .	
Objective	a. Helps to release or expel secretions that stick to the airways by utilizing the force of gravity. b. Improve ventilation. Increase the efficiency of the respiratory muscles. c. Provides a sense of comfort	
Indication	a. There is a buildup of secretions in the respiratory tract as evidenced by physical examination, X-ray and clinical data. b. Difficulty removing secretions from the respiratory tract.	
Contraindications	a. Hemoptysis b. Heart disease c. Acute asthma attack d. Deformity of chest wall and spine structure e. Pain increases f. Headache g. Weakness	
Preparation of tools	a. Stethoscope b. Towel c. Sputum pot d. Handscoon e. Tissue f. Bent g. Stationery	

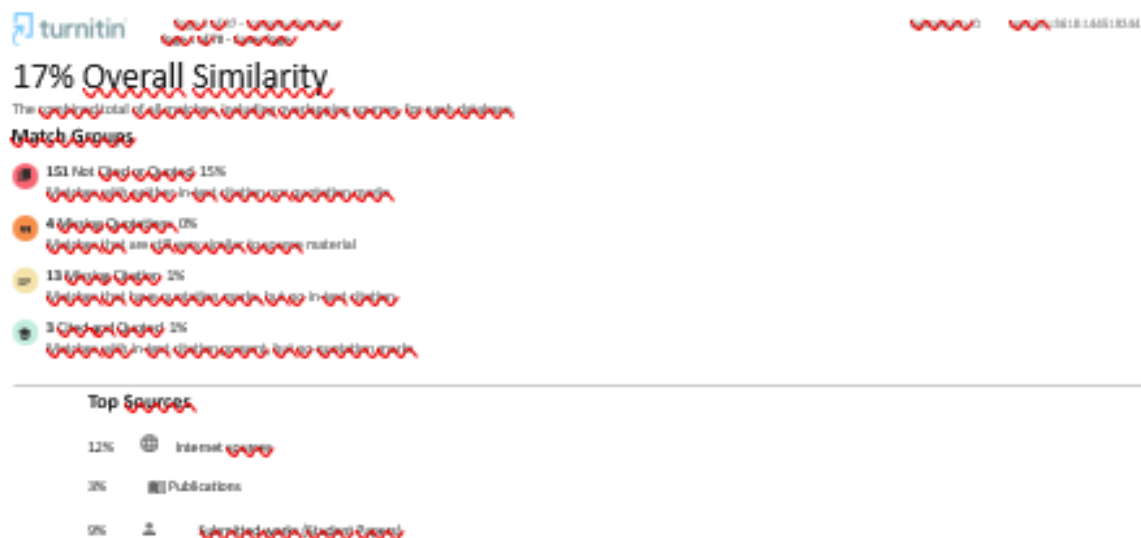
Patient preparation	a. Therapeutic greetings b. Explain procedures and objectives to respondents c. Maintaining patient privacy d. Providing information consent e. Loosen the patient's upper clothing f. Check pulse and blood pressure g. Measure oxygen saturation, respiratory rate and sputum production
Nurse preparation	a. Have knowledge of the anatomy and physiology of the respiratory system, circulatory system b. Have knowledge of physical examination
Implementation stage	1. Postural drainage a. The nurse washes her hands, then puts on gloves. b. Auscultation of the lung fields to determine the location of secretions c. Position the patient in the following positions for secretions in the target area of the lung segment/ lobe : a) Right and Left Upper Anterior Lobe Apical Bronchus Ask the patient to sit in a chair, leaning on a pillow b) Right and Left Upper Posterior Lobe Apical Bronchus Sitting bent over, both legs bent, both hands hugging the legs or pillow c) Right and Left Upper Anterior Lobe Bronchus Flat supination for target areas in the right and left upper anterior segments d) Right and left lower anterior lobes Supinated in Trendelenburg position . Knees bent on a pillow e) Right middle lobe . Supinated with the left/right chest elevated, in the Trendelenburg position (the foot of the bed is elevated) f) Anterior middle lobe Sim's right/left position with Trendelenburg position g) Anterior lower lobe Flat supine and trendelenburg position h) Posterior lower lobe Flat pronation with trendelenburg position i) lobe . Left tilt with upper arm over head accompanied by Trendelenburg position j) lobe Left tilt with upper arm over head accompanied by trendelenburg position

	2. Chest percussion (clapping) a. Place a towel on the patient's skin. b. Close your fingers together and flex them slightly to form a cupped hand. c. Perform percussion by moving the wrist joint, the procedure is correct if an echo is heard during percussion. d. Percuss the entire target area, using a systematic pattern. 3. Chest vibration a. Instruct the patient to take a deep breath and exhale slowly. b. When exhaling, perform the vibration procedure, using the following technique: a) The non-dominant hand is under the dominant hand, and is placed on the target area. b) Instruct to take a deep breath c) When exhaling , slowly shake your hands quickly without applying excessive pressure. d) Position the patient for effective coughing.
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Appendix 2. Peppermint Inhalation Therapy

	Ministry of Health Polytechnic of Health, Malang	No. Documents:
	STANDARD OPERATING PROCEDURES FOR CHEST PHYSIOTHERAPY	Revision No.: 00
		Date of issue :
		Page :
Unit: Nursing Laboratory		Officers / Implementers: Nurses, Lecturers, CI, students
Understanding	A form of non-pharmacological action that uses essential oils derived from the Mentha x piperita plant to support the healing process of post-operative nausea and vomiting with spinal anesthesia .	
Objective	Reduce nauseous vomiting in patients .	
Contraindications	Patients with respiratory disorders (flu, shortness of breath, etc.).	
Preparation of tools	1. Aromatherapy essential oil peppermint . 2. Diffuser . 3. Measuring cup. 4. Water.	
Patient preparation	1. Make sure identity patients who will done action . 2. Assess the condition patient . 3. Explain to patients and families patient about actions to be taken done	
Action Procedure	1. Wash hand . 2. Use sarong hand . 3. Arrange position client in supine position . 4. Put water in in glass measuring up to 50 ml. 5. Pour water into in the diffuser. 6. Drop 3 drops of essential oil into in the diffuser. 7. Recommend patient For inhale for 5–10 minutes with distance 50 cm from patient . 8. Tidy up patient .	
Evaluation	1. Evaluation response patient . 2. Conclude results activity . 3. Contract meeting next (if recommended For follow therapy continued). 4. End activity with good way . 5. Record the results activities inside notes nursing	

Appendix 3. Turnitin Check





**LEMBAR BIMBINGAN KARYA ILMIAH AKHIR NERS
PRODI PENDIDIKAN PROFESI NERS
JURUSAN KEPERAWATAN POLTEKKES KEMENKES
MALANG**

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NO	TANGGAL	REKOMENDASI PEMBIMBING	TANDA TANGAN	
			PEMBIMBING	MAHASISWA
1	07 November 2025	- Pengarahan KIAN		
2	12 Februari 2026	- Mencari referensi jurnal sesuai judul kasus yang diambil - Konsultasi judul dan topik		
3	12 Maret 2026	- ACC judul dan topik - Lanjutkan BAB 1		
4	09 April 2026	- Konsultasi aspek kelolaan kian - Revisi format aspek - Lanjutkan BAB 2		
5	08 Juni 2026	- Revisi BAB 1 bagian rumusan masalah - Revisi BAB 2 bagian konsep asuhan keperawatan - ACC BAB 3 - Revisi BAB 4 bagian pengkajian - Lanjutkan BAB 5 dan BAB 6		
6	26 Juni 2026	- ACC revisi BAB 1, BAB 2 dan BAB 4 - Lengkapi kelengkapan dokumen dan merapikan dokumen		
7	30 Juni 2026	Acc KIAN dan maju sidang		

Malang, 30 Juni 2026

Mengetahui,
Ketua Program Studi Pendidikan Profesi Ners

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