

**KEMENTERIAN KESEHATAN REPUBLIK INDONESIA  
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PROGRAM STUDI D III KEBIDANAN**

**LAPORAN TUGAS AKHIR, JUNI 2025  
EMERTHA NATALIA BR.KARO**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY.H DI PMB ERMA  
SURINATI KOTA PEKANBARU**

**xii ± 149 halaman + 6 tabel + 10 lampiran**

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**ABSTRAK**

Salah satu upaya yang dapat dilakukan bidan dalam menurunkan Angka Kematian Ibu (AKI) yaitu dengan asuhan kebidanan secara *Continuity of Midwifery Care* (CoMC) dari masa kehamilan, persalinan, nifas dan neonatus. Studi kasus bertujuan untuk memberikan asuhan pada masa kehamilan, persalinan, nifas, dan neonatus menggunakan asuhan model CoMC dengan pendekatan manajemen kebidanan. Asuhan kehamilan diberikan sebanyak 3 kali, asuhan persalinan 1 kali, asuhan nifas 4 kali, asuhan neonatus 3 kali. Asuhan Ny. H G<sub>2</sub>P<sub>1</sub>A<sub>0</sub>H<sub>1</sub> dimulai pada usia kehamilan 33 minggu 4 hari, dimulai pada tanggal 22 Februari 2025 – 20 Maret 2025 di PMB Erma Surianti Kota Pekanbaru . Ibu mengeluh nyeri pinggang yang dapat diatasi dengan kompres hangat dan pengaturan posisi tidur. Pertolongan persalinan dilakukan sesuai dengan standar Asuhan Persalinan Normal (APN). Diberikan asuhan birth ball untuk mempercepat kemajuan persalinan dan teknik relaksasi untuk mengurangi rasa nyeri. Bayi lahir spontan, menangis kuat, tonus otot baik, pergerakan bayi aktif, berat badan 3500 gram, panjang badan 49 cm, jenis kelamin Perempuan. Plasenta lahir spontan dan lengkap. Pada Masa nifas Ny.H berlangsung normal,Asuhan yang diberikan yaitu senam nifas, pijat oksitosin. Pada neonatus normal dilakukan pijat bayi dan bayi diberi ASI Ekslusif. Terjadi kenaikan berat badan bayi sebanyak 700 gram pada usia 16 hari. Setelah dilakukan konseling KB ibu memutuskan menggunakan KB suntik 3 bulan. Diharapkan tenaga kesehatan khusunya bidan, hendaknya dapat meningkatkan pelayanan yang komprehensif dan berkesinambungan sesuai dengan standar pelayanan kebidanan.

**Kata Kunci : Asuhan komprehensif, kehamilan, persalinan, nifas, neonatus.**  
**Referensi : 58 (2013-2024)**

**MINISTRY OF HEALTH OF THE REPUBLIC OF INDONESIA  
RIAU HEALTH POLYTECHNIC  
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DIPLOMA III MIDWIFERY**

**STUDY PROGRAM FINAL REPORT, JUNE 2025  
EMERTHA NATALIA BR.KARO**

**COMPREHENSIVE MIDWIFERY CARE FOR NY.H AT PMB ERMA  
SURIANTI PEKANBARU CITY**

**xii ±149 pages + 6 tables + 11 appendices**

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**ABSTRAK**

One of the efforts that can be made by midwives to reduce the Maternal Mortality Rate (MMR) is by providing care through the Continuity of Midwifery Care (CoMC) model, covering the periods of pregnancy, childbirth, postpartum, and neonatal care. This case study aims to provide care during pregnancy, childbirth, postpartum, and neonatal periods using the CoMC model with a midwifery management approach. Pregnancy care was provided three times, childbirth care once, postpartum care four times, and neonatal care three times. Care for Mrs. H (G2P1A0H1) began at 33 weeks and 4 days of gestation, from February 22, 2025, to March 20, 2025, at the Erma Surianti Independent Midwifery Practice (PMB) in Pekanbaru City. The mother complained of back pain, which was managed with warm compresses and sleep position adjustments. Labor assistance was carried out according to the Normal Delivery Care (APN) standards. A birth ball was used to accelerate labor progress, and relaxation techniques were applied to reduce pain. The baby was born spontaneously, cried vigorously, had good muscle tone and active movement, weighed 3500 grams, was 49 cm in length, and was female. The placenta was delivered spontaneously and was complete. During the postpartum period, Mrs. H experienced a normal recovery. The care provided included postpartum exercise and oxytocin massage. For the neonate, normal care included baby massage and exclusive breastfeeding. The baby gained 700 grams by the age of 16 days. After family planning counseling, the mother decided to use the 3-month injectable contraceptive. It is expected that healthcare workers, especially midwives, will continue to improve comprehensive and continuous services in accordance with midwifery care standards.

**Keywords:** Comprehensive care, pregnancy, childbirth, postpartum, neonate.  
**References:** 58 sources (2014–2024)