

**KEMENTERIAN KESEHATAN REPUBLIK INDONESIA  
POLITEKNIK KESEHATAN RIAU  
PROGRAM STUDI DIII KEBIDANAN**

**LAPORAN TUGAS AKHIR, JUNI 2025  
ANORAGA NUR VIRAINI**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY. S DI PMB  
LILIS SUGIANTI PEKANBARU**

**xii ± 157 Halaman + 7 Tabel +11 Lampiran**

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**ABSTRAK**

Tingginya Angka Kematian Ibu (AKI) dan Angka Kematian Bayi (AKB) di Indonesia menjadi indikator utama derajat kesehatan masyarakat. AKI mengalami penurunan namun belum mencapai target SDGs. Studi kasus ini bertujuan untuk memberikan asuhan kebidanan komprehensif dan berkesinambungan kepada Ny. S (G4P3A0H3) dimulai dari kehamilan trimester III, persalinan, nifas, dan neonatus di PMB Lilis Sugianti, Kota Pekanbaru. Asuhan yang dilakukan sesuai standar asuhan kebidanan dengan metode SOAP. Pengambilan kasus dimulai dari Januari hingga Maret 2025. Selama Trimester III dilakukan 3 kali asuhan, 1 kali asuhan saat persalinan, 4 kali asuhan saat nifas, dan 3 kali asuhan saat neonatus. Keluhan selama trimester III, seperti nyeri perut, kram kaki, dan kontraksi Braxton Hicks berhasil diatasi dengan senam hamil dan kompres hangat pada perut ibu. Asuhan persalinan dilakukan sesuai standar APN. Bayi lahir spontan, jenis kelamin laki-laki, berat badan 3.600 gram, panjang badan 53 cm, dan plasenta lahir lengkap dalam waktu 8 menit. Keluhan selama masa nifas, yaitu *afterpain*. Asuhan yang diberikan berupa kompres hangat pada perut ibu, pijat oksitosin, perawatan payudara, serta skrining *Edinburgh Postnatal Depression Scale* (EPDS) keluhan ibu dapat diatasi. Ibu menjadi akseptor KB implant. Asuhan neonatus dilakukan perawatan tali pusat dan pijat bayi. Terjadi peningkatan BB sebesar 740 gram pada hari ke 27 dari BB 3.250 gram menjadi 3.990 gram. Bidan diharapkan dapat meningkatkan pelayanan kebidanan yang berkesinambungan sesuai kebutuhan pasien dan *evidence based practice* untuk menjamin keselamatan dan mutu layanan.

- Kata Kunci** : *Asuhan Kebidanan Komprehensif hamil, besalin, nifas, neonatus*  
**Daftar Bacaan** : 88 Referensi (2015-2025)

**MINISTRY OF HEALTH REPUBLIC OF INDONESIA HEALTH  
RIAU HEALTH POLYTECHNIC  
DIII MIDWIFERY STUDY PROGRAM**

**FINAL PROJECT REPORT, JUNE 2025  
ANORAGA NUR VIRAINI**

**COMPREHENSIVE MIDWIFERY CARE FOR NY. S AT PMB LILIS  
SUGIANTI PEKANBARU**

**xii ± 157 Pages + 7 Tables +11 Lampirans**

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**ABSTRACT**

The high Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) in Indonesia are key indicators of the population's health status. Although the MMR has decreased, it has not yet met the Sustainable Development Goals (SDGs) target. This case study aims to provide comprehensive and continuous midwifery care to Mrs. S (G4P3A0H3), covering the third trimester of pregnancy, labor, postpartum, and neonatal periods at Lilis Sugianti Midwifery Clinic in Pekanbaru City. The care was provided in accordance with midwifery care standards using the SOAP method. The case was managed from January to March 2025. During the third trimester, three antenatal care visits were conducted, followed by one intrapartum care session, four postpartum visits, and three neonatal care sessions. Complaints during the third trimester—such as abdominal pain, leg cramps, and Braxton Hicks contractions—were successfully managed through pregnancy exercises and warm abdominal compresses. Intrapartum care was provided according to standard midwifery protocols. The baby was delivered spontaneously, male, with a birth weight of 3,600 grams, a body length of 53 cm, and the placenta was delivered completely within 8 minutes. The main complaint during the postpartum period was afterpains. Care provided included warm compresses on the mother's abdomen, oxytocin massage, breast care, and Edinburgh Postnatal Depression Scale (EPDS) screening, with the results indicating that the mother's complaints were resolved. The mother became an implant contraceptive acceptor. Neonatal care included umbilical cord care and infant massage. The infant's weight increased by 740 grams on day 27, from 3.250 grams to 3.990 grams. Midwives are expected to improve the continuity of midwifery care based on patient needs and evidence-based practice to ensure safety and service quality.

<b>Keywords</b>	: <i>Comprehensive Midwifery Care pregnancy, childbirth, postpartum, neonate</i>
Reading list	: 88 References (2015-2025)