

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

**LAPORAN TUGAS AKHIR, JUNI 2025
NURHAZIZAH HARAHAP**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY. S DI PMB ROSITA
PEKANBARU TAHUN 2025**

xv ± 182 Halaman, 10 tabel, 9 Lampiran, 1 Gambar

ABSTRAK

Keberhasilan Program kesehatan ibu dapat dinilai melalui indikator utama Angka Kematian Ibu. Salah satu upaya percepatan penurunan AKI dilakukan metode *Continuity of Midwifery Care*, metode ini merupakan layanan kebidanan yang berkelanjutan mulai dari kehamilan, persalinan, nifas, dan neonatus. Laporan kasus ini bertujuan untuk memberikan asuhan yang berkesinambungan pada Ny.S dari masa kehamilan, persalinan, nifas dan neonatus di mulai dari bulan November 2024 - Februari 2025. Kontak pertama dengan Ny.S G1P0A0H0 dilakukan pada usia kehamilan 33-34 minggu selanjutnya dilakukan 4 kali kunjungan kehamilan, persalinan, 4 kali pada masa nifas, serta 3 kunjungan neonatus. Selama kehamilan ditemukan keluhan ketidaknyamanan ibu yaitu kram pada kaki, nyeri perut bagian bawah dan keputihan yang fisiologis. Asuhan yang diberikan sesuai kebutuhan dan masalah dapat diatasi. Proses persalinan berlangsung secara *Sectio Caesarea* atas indikasi ketuban pecah dini, bayi lahir tanggal 5 januari pukul 23.12 WIB jenis kelamin perempuan dengan BB: 3.690 gram, PB: 51 cm. Asuhan masa nifas dilakukan 4 kali didapatkan keluhan ASI yang keluar masih sedikit dan memberitahu ibu untuk terus menyusui bayinya secara *ondeman*, dan ibu menjadi akseptor KB Implan serta melakukan skrining EPDS normal. Asuhan neonatus dilakukan berdampingan dengan asuhan nifas yaitu sebanyak 3 kali kunjungan. Asuhan yang diberikan adalah perawatan tali pusat, perawatan bayi sehari-hari dan melakukan pijat bayi. Terjadi peningkatan berat badan bayi sebanyak 410 gram pada usia 10 hari, dari 3.690 gram menjadi 4.100 gram. Diharapkan tenaga kesehatan khususnya bidan dapat lebih optimal melakukan asuhan kebidanan secara berkesinambungan dan berkelanjutan dimulai dari masa kehamilan, persalinan, nifas, dan noenatus.

Kata kunci: *Asuhan kebidanan Komprehensif, hamil, bersalin, nifas dan neonates*

Referensi: 67 (2015-2024)

**MINISTRY OF HEALTH OF THE REPUBLIC OF INDONESIA HEALTH
POLYTECHNIC OF RIAU
STUDY PROGRAM OF D III MIDWIFERY**

**FINAL PROJECT REPORT, JUNE 2025
NURHAZIZAH HARAHAP**

**COMPREHENSIVE MIDWIFERY CARES FOR NY. S IN PMB ROSITA
KOTA PEKANBARU CITY IN 2025**

xvi ± 181 Page, 10 Table, 9 Attachment, 1 Image

ABSTRACT

The success of maternal health programs can be measured through the key indicator of the Maternal Mortality Rate AKI. One of the strategies to accelerate the reduction of MMR is the Continuity of Midwifery Care (CoMC) approach, a continuous midwifery service that covers pregnancy, childbirth, postpartum, and neonatal periods. This case report aims to provide comprehensive and continuous care for Mrs. S, starting from pregnancy through to the neonatal phase, conducted between November 2024 and February 2025. The first contact with Mrs. S (G1P0A0H0) was at 33–34 weeks of gestation, followed by four antenatal visits, intrapartum care, four postpartum visits, and three neonatal visits. During the pregnancy, common discomforts such as leg cramps, lower abdominal pain, and physiological vaginal discharge were identified. All complaints were managed according to the mother's needs, and her condition improved with appropriate care. The labor process was carried out by Cesarean Section (C-section) due to Premature Rupture of Membranes (PROM). The baby girl was born on January 5, 2025, at 23:12 WIB, with a birth weight of 3,690 grams and body length of 51 cm. Postpartum care was provided in four sessions. The main complaint during this period was insufficient breast milk production, which was addressed by encouraging the mother to breastfeed on demand. Mrs. S also became a contraceptive implant user and underwent Edinburgh Postnatal Depression Scale (EPDS) screening, which showed normal results. Neonatal care was conducted alongside postpartum visits, with three neonatal visits in total. The care included umbilical cord care, daily newborn care, and infant massage. A weight gain of 410 grams was observed by day 10 of life, from 3,690 grams to 4,100 grams. It is expected that health workers, particularly midwives, can optimize the implementation of continuous and comprehensive midwifery care starting from the antenatal, intrapartum, postpartum, and neonatal periods to support maternal and newborn health outcomes.

Keywords: *Comprehensive Midwifery Care, Pregnancy, Childbirth, Postpartum, Neonatal*

References: 67 (2015–2024)