

**KEMENTERIAN KESEHATAN REPUBLIK INDONESIA
POLITEKNIK KESEHATAN KEMENKES RIAU
PRODI D-III KEBIDANAN**

**LAPORAN TUGAS AKHIR, JUNI 2025
RENI WAHYULIANA**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY.Y DI PRAKTIK MANDIRI
BIDAN ZURRAHMI KOTA PEKANBARU**

xv + 99 HALAMAN, 2 TABEL, 9 LAMPIRAN

ABSTRAK

Salah satu upaya menurunkan AKI adalah mengoptimalkan peran bidan dalam memberikan asuhan kebidanan yang menyeluruh dan berkesinambungan sehingga risiko tinggi kehamilan, persalinan, nifas dan neonatus dapat diidentifikasi lebih awal dan dapat segera ditangani. Laporan tugas akhir ini tentang asuhan kebidanan yang dilakukan pada Ny. Y G4P2A1H2, usia 39 tahun, yang dimulai pada usia kehamilan 33 - 34 minggu di Praktik Mandiri Bidan Zurrahmi Kota Pekanbaru. Asuhan yang dilanjutkan pada masa persalinan, nifas, dan pada bayi Ny. Y dengan pendekatan manajemen kebidanan. Selama masa kehamilan Ny. Y ditemukan keluhan nyeri pinggang dan perut bagian bawah terasa tegang yang diatasi melalui intervensi kompres air hangat dan istirahat cukup. Persalinan berlangsung secara normal dan tidak ada laserasi jalan lahir. Bayi lahir spontan dengan jenis kelamin laki laki, berat badan 3.000 gram dan panjang 50 cm. Pada masa nifas ditemukan masalah ASI belum lancar. Asuhan yang diberi yaitu pijat oksitosin dan edukasi nutrisi tinggi protein, dan konseling KB dan ibu memutuskan untuk menggunakan KB AKBK. Asuhan neonatus pada bayi Ny. Y dilakukan sesuai standar kunjungan neonatal (KN) 1, 2 dan 3. Asuhan yang berikan mencakup imunisasi hepatitis B dan vitamin K, perawatan tali pusat, pemantauan pertumbuhan, serta dilakukan asuhan pijat bayi. Terjadi penurunan BB sebanyak 100 gram di hari ke 7 yang masih dalam batas normal tidak melebihi 10% BB pada saat lahir yaitu 3000 gram, berat badan mengalami peningkatan kembali pada hari ke 27 sebanyak 1.100 gram. Diharapkan kepada tenaga kesehatan khususnya bidan, sebaiknya dapat mempertahankan pelayanan yang komprehensif dan berkesinambungan sesuai dengan standar pelayanan kebidanan dimulai dari masa kehamilan, persalinan, bayi baru lahir dan nifas serta keluarga berencana.

Kata Kunci : Asuhan kebidanan komprehensif, kehamilan, persalinan, masa nifas dan neonatus.

Referensi : 75 referensi (2013-2023)

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

**FINAL PROJECT REPORT, JUNE 2025
RENI WAHYULIANA**

**COMPREHENSIVE MIDWIFERY CARE ON MRS. Y IN MIDWIFE'S
INDEPENDENT PRACTICE ZURRAHMI PEKANBARU CITY**

ABSTRACT

One of the efforts to reduce the Maternal Mortality Rate (MMR) is by optimizing the role of midwives in providing comprehensive and continuous midwifery care so that high-risk conditions during pregnancy, childbirth, postpartum, and the neonatal period can be identified early and addressed promptly. This final report discusses the midwifery care provided to Mrs. Y, G4P2A1H2, aged 39, starting from 33–34 weeks of gestation at the Independent Midwife Practice of Zurrahmi in Pekanbaru City. The care was continued through labor, postpartum, and newborn care using the midwifery management approach. During her pregnancy, Mrs. Y experienced complaints of lower back pain and abdominal tightness, which were managed with warm compresses and adequate rest. Labor progressed normally with non-pharmacological pain relief methods, including relaxation techniques, and there were no birth canal lacerations. The baby was born spontaneously, male, with a birth weight of 3,000 grams and a length of 50 cm. During the postpartum period, the issue of delayed breast milk production was found. The care provided included oxytocin massage, education on high-protein nutrition, and family planning counseling. The mother chose to use an AKBK for contraception. Neonatal care for Mrs. Y's baby was carried out in accordance with standard postnatal visit guidelines (KN) 1, 2, and 3. The care included administration of HB0 and Vitamin K immunizations, umbilical cord care, growth monitoring, and infant massage. A weight loss of 100 grams was observed on day 7, which is within the normal range not exceeding 10% of the birth weight of 3,000 grams, and the baby's weight increased by 1,100 grams by day 27. It is recommended that healthcare providers, especially midwives, maintain comprehensive and continuous care services in accordance with midwifery care standards, starting from pregnancy, childbirth, newborn, postpartum, and family planning.

Keywords: Comprehensive midwifery care, pregnancy, childbirth, postpartum, and neonates.

Reverence : 75 reverence (2013-2023)