

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

**LAPORAN TUGAS AKHIR, JUNI 2025
CICI ARLITA LINGGA**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY. D DI PMB ROSITA
KOTA PEKANBARU TAHUN 2025
xii, ± 157 Halaman, 6 Tabel, 10 Lampiran**

ABSTRAK

Upaya menurunkan angka kematian ibu dan bayi di Provinsi Riau terus dilakukan melalui penguatan layanan kesehatan primer dan optimalisasi peran bidan. Laporan tugas akhir ini mendeskripsikan pengalaman asuhan kebidanan komprehensif pada Ny. D, seorang ibu G2P1A0H1, yang diberikan secara berkesinambungan di PMB Rosita Kota Pekanbaru di mulai dari 13 Oktober 2024 - 01 Januari 2025. Asuhan dimulai dari trimester III usia kehamilan 33 minggu, proses persalinan, masa nifas, hingga perawatan neonatus, dengan mengedepankan prinsip *Continuity of Midwifery Care* (CoMC). Data dikumpulkan melalui wawancara, pemeriksaan fisik, pemantauan tanda vital, dan pemeriksaan penunjang lain yang relevan. Instrumen yang digunakan meliputi KSPR, partograf, lembar observasi, skrining EPDS, buku KIA, dan leaflet edukasi. Selama asuhan, Ny. D menerima tiga kali kunjungan antenatal, pendampingan persalinan, empat kali kunjungan masa nifas, dan tiga kali kunjungan neonatus. Selama kehamilan ditemukan keluhan nyeri pinggang intervensi yang diberikan meliputi senam hamil, pijat relaksasi, senam nifas, perawatan payudara, serta konseling KB untuk mendukung kesehatan ibu dan bayi secara menyeluruh. Ny. D melahirkan pada usia kehamilan 39 minggu secara spontan, bayi lahir aterm, langsung menangis, dengan berat badan 3300 gram dan panjang badan 49 cm. Proses kehamilan dan persalinan berjalan lancar tanpa komplikasi, berat badan bayi selama asuhan terjadi peningkatan sebanyak 200 gram. Ibu memilih kontrasepsi suntik 3 bulan setelah konseling. Seluruh proses asuhan didokumentasikan secara sistematis menggunakan metode SOAP. Diharapkan tenga kesehatan khususnya bidan untuk mempertahankan mutu pelayanan asuhan kebidanan pada ibu hamil, bersalin, nifas dan neonates secara berkesinambungan sesuai standar pelayanan minimal kebidanan

Kata Kunci : Asuhan Kebidanan, Komprehensif, Kehamilan, Persalinan, Nifas, Neonatus

Referensi : 70 Referensi (2016-2025)

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

**FINAL PROJECT REPORT, JUNE 2025
CICI ARLITA LINGGA**

**COMPREHENSIVE MIDWIFERY CARE FOR NY. D AT PMB ROSITA
PEKANBARU CITY IN 2023**

xii, ± 157 Page, 6 Table, 10 Attachment

ABSTRACT

Efforts to reduce maternal and infant mortality rates in Riau Province continue through strengthening primary health services and optimizing the role of midwives. This final project report describes the experience of comprehensive midwifery care provided continuously to Mrs. D, a G2P1A0H1 mother, at PMB Rosita, Pekanbaru City, from October 13, 2024, to January 1, 2025. The care began in the third trimester at 33 weeks of gestation, continued through labor, the postpartum period, and neonatal care, emphasizing the principle of Continuity of Midwifery Care (CoMC). Data were collected through interviews, physical examinations, vital signs monitoring, and other relevant supporting examinations. The instruments used included the Antenatal Care Card (KSPR), partograph, observation sheets, EPDS screening, Maternal and Child Health (KIA) book, and educational leaflets. During the care period, Mrs. D received three antenatal visits, labor support, four postpartum visits, and three neonatal visits. During pregnancy, she experienced complaints of back pain; interventions provided included pregnancy exercises, relaxation massage, postpartum exercises, breast care, and family planning counseling to support the comprehensive health of mother and baby. Mrs. D delivered spontaneously at 39 weeks of gestation; the baby was born at term, cried immediately, weighed 3300 grams, and measured 49 cm in length. The pregnancy and delivery process proceeded smoothly without complications, and the baby's weight increased by 200 grams during the care period. The mother chose injectable contraception for three months following counseling. The entire care process was systematically documented using the SOAP method. It is hoped that health workers, especially midwives, will maintain the quality of midwifery care services for pregnant women, childbirth, postpartum, and neonates continuously in accordance with the minimum midwifery service standards.

Keywords: Midwifery Care, Comprehensive, Pregnancy, Childbirth, Postpartum, Neonates

References: 70 References (2016-2025)