

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

**LAPORAN TUGAS AKHIR, 25 MEI 2026
ROMIAN HOTMAULI SITOMPUL**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY. D DI TPMB DELIANA
KOTA PEKANBARU TAHUN 2026**

xiv + 149 Halaman + 10 Tabel + 3 Gambar + 11 Lampiran

ABSTRAK

Asuhan kebidanan komprehensif merupakan pelayanan berkesinambungan sejak masa kehamilan, persalinan, nifas, neonatus, hingga keluarga berencana untuk meningkatkan kesehatan ibu dan bayi serta mendeteksi dini komplikasi. Tujuan Laporan Tugas Akhir ini adalah melaksanakan asuhan kebidanan komprehensif pada Ny. D G2P1A0H1 di TPMB Deliana Kota Pekanbaru dan *home visit* periode November 2025– Januari 2026. Metode yang digunakan adalah studi kasus dengan pendekatan *Continuity of Midwifery Care* (CoMC) dan pendokumentasian SOAP. Asuhan dilakukan sejak usia kehamilan 33 minggu meliputi tiga kali kunjungan antenatal, pertolongan persalinan sesuai standar APN, empat kali kunjungan nifas dan tiga kali kunjungan neonatus. Selama kehamilan, ibu mengalami nyeri perut bagian bawah (Braxton Hicks) yang diatasi dengan edukasi tanda persalinan dan teknik pernapasan, kecemasan ibu menjelang persalinan diatasi melalui edukasi persiapan persalinan dan senam hamil. Pada persalinan dilakukan asuhan *gym balling*, *deep back massage*, teknik pernapasan, serta pemenuhan nutrisi dan hidrasi sehingga persalinan berlangsung normal. Bayi lahir *aterm*, menangis kuat, dengan berat badan 3.200 gram dan panjang badan 51 cm. Plasenta lahir lengkap dan kontraksi uterus baik. Pada masa nifas dilakukan asuhan *afterpain*, keluhan konstipasi teratasi melalui edukasi nutrisi tinggi serat, senam nifas serta istirahat, dan pemantauan psikologi menggunakan *Edinburgh Postnatal Depression Scale* (EPDS). Asuhan neonatus meliputi edukasi pencegahan kehilangan panas, perawatan tali pusat, pijat bayi, dan dukungan ASI eksklusif. Tali pusat puput dihari ke-5 dan berat badan bayi meningkat 500 gram pada usia 31 hari. Setelah konseling, ibu memilih kontrasepsi kondom dan *coitus interruptus*. Disimpulkan bahwa asuhan kebidanan komprehensif mampu mendukung kesehatan ibu dan bayi serta mendeteksi masalah kesehatan.

Kata Kunci : Asuhan Kebidanan Komprehensif, Hamil, Bersalin, Nifas, Neonatus

Daftar Bacaan : 120 referensi (2011 – 2026)

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

**FINAL PROJECT REPORT, 25 MAY 2026
ROMIAN HOTMAULI SITOMPUL**

**COMPREHENSIVE MIDWIFERY CARE FOR MRS.D AT TPMB DELIANA
PEKANBARU CITY ON 2026**

xiv + 149 Pages + 10 Tabels + 3 Images + 11 Attachments

ABSTRACT

Comprehensive midwifery care is a continuous service provided from pregnancy, childbirth, postpartum, neonatal care, to family planning to improve maternal and neonatal health and facilitate early detection of complications. This final project aimed to provide comprehensive midwifery care for Mrs. D (G2P1A0H1) at TPMB Deliana, Pekanbaru city, through home visits from November 2025 to January 2026. The method used was a case study with a Continuity of Midwifery Care (CoMC) model with SOAP documentation. Care was initiated at 33 weeks of gestation and included three antenatal visits, normal childbirth care based on the Normal Delivery Care (APN) standard, four postpartum visits, and three neonatal visits. During pregnancy, Braxton Hicks contractions were managed through education on childbirth preparation and breathing techniques, while maternal anxiety before childbirth was addressed through childbirth preparation education and pregnancy exercise. During labor, care included gym ball exercises, deep back massage, breathing techniques, and adequate nutrition and hydration, resulting in a normal delivery. A full-term infant was born by immediately crying with a birth weight of 3,200 g and a length of 51 cm. The placenta was delivered completely, and uterine contractions were adequate. Postpartum care addressed afterpains and constipation through education on a high-fiber diet, postpartum exercise, adequate rest, and psychological monitoring using the Edinburgh Postnatal Depression Scale (EPDS). Neonatal care included education on thermal protection, umbilical cord care, infant massage, and exclusive breastfeeding support. The umbilical cord detached on the fifth day, and the infant's weight increased by 500 g at 31 days of age. After receiving family planning counseling, the mother chose condoms and coitus interruptus as contraceptive methods. Comprehensive midwifery care contributed to maintaining maternal and neonatal health and enabled early identification and management of health problems.

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

Reading List : 120 references (2011 – 2026)