

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

**LAPORAN TUGAS AKHIR, MEI 2026
REVALINA BORU MANGUNSONG**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY. A DI TPMB
ROSITA PEKANBARU**

xv + 157 Halaman, 5 Tabel, 10 Lampiran

ABSTRAK

Transformasi layanan kesehatan primer menempatkan bidan sebagai tenaga kesehatan yang berperan dalam meningkatkan kesehatan ibu dan bayi melalui pelayanan berkesinambungan. Asuhan kebidanan komprehensif diberikan sejak kehamilan, persalinan, nifas, hingga neonatus untuk memantau kondisi, mendeteksi faktor risiko, dan mencegah komplikasi. Studi kasus ini bertujuan melaksanakan asuhan kebidanan komprehensif pada Ny. A G2P1A0H1 dengan pendekatan *Continuity of Midwifery Care* (CoMC) di TPMB Rosita Kota Pekanbaru tahun 2025–2026. Metode yang digunakan adalah asuhan kebidanan berkelanjutan dengan pendokumentasian SOAP. Data diperoleh melalui anamnesis, pemeriksaan fisik, tanda-tanda vital, pemeriksaan penunjang, serta penggunaan KSPR, partograf, Buku KIA, dan skrining EPDS. Pendampingan dimulai pada usia kehamilan 32–33 minggu, meliputi empat kali kunjungan ANC, pendampingan persalinan, empat kali kunjungan nifas, dan tiga kali kunjungan neonatus. Selama kehamilan ibu mengalami kram kaki yang membaik setelah edukasi istirahat, peregangan, dan kompres air hangat. Hasil KSPR menunjukkan skor 6 dengan kategori risiko tinggi karena usia ibu ≥ 35 tahun. Persalinan berlangsung normal pada usia kehamilan 39 minggu. Bayi lahir spontan dengan berat 3.200 gram dan panjang 51 cm. Masa nifas dan neonatus berlangsung tanpa komplikasi. Ibu memilih kontrasepsi suntik 3 bulan dan berat badan bayi meningkat 300 gram. Asuhan CoMC mendukung pemenuhan kebutuhan ibu dan bayi serta deteksi dini faktor risiko. Disarankan agar bidan mengoptimalkan penerapan CoMC melalui pemantauan berkesinambungan dan deteksi dini faktor risiko. Ibu diharapkan meningkatkan kepatuhan terhadap kunjungan dan menerapkan edukasi kesehatan. Institusi pendidikan diharapkan memperkuat kompetensi mahasiswa dalam asuhan kebidanan komprehensif sesuai standar pelayanan.

Kata Kunci: *Asuhan kebidanan, Continuity of Midwifery Care, kehamilan, persalinan, nifas, neonatus*

Referensi : 34 Referensi (2016-2026)

**KEMENTERIAN KESEHATAN REPUBLIC OF INDONESIA
RIAU HEALTH POLYTECHNIC
DIPLOMA III MIDWIFERY STUDY PROGRAM**

**FINAL PROJECT REPORT, MAY 2026
REVALINA BORU MANGUNSONG**

**COMPREHENSIVE MIDWIFERY CARE FOR MRS. A AT TPMB ROSITA
PEKANBARU**

xv + 157 Pages, 5 Tables, 10 Appendices

ABSTRACT

The transformation of primary health care services positions midwives as health professionals who play a role in improving maternal and infant health through continuous care. Comprehensive midwifery care is provided from pregnancy, childbirth, postpartum, to the neonatal period to monitor maternal and infant conditions, detect risk factors, and prevent complications. This case study aimed to provide comprehensive midwifery care to Mrs. A, G2P1A0H1, using the Continuity of Midwifery Care (CoMC) approach at TPMB Rosita, Pekanbaru City, in 2025–2026. The method used was continuous midwifery care with SOAP documentation. Data were obtained through anamnesis, physical examination, vital signs, supporting examinations, and the use of KSPR, partograph, Maternal and Child Health Book, and EPDS screening. Care began at 32–33 weeks of gestation and included four ANC visits, childbirth assistance, four postpartum visits, and three neonatal visits. During pregnancy, the mother experienced leg cramps that improved after education on rest, stretching, and warm-water compresses. KSPR screening showed a score of 6, categorized as high-risk pregnancy due to maternal age ≥ 35 years. Labor progressed normally at 39 weeks of gestation. The baby was delivered spontaneously with a birth weight of 3,200 grams and a length of 51 cm. The postpartum and neonatal periods progressed without complications. The mother chose a three-month injectable contraceptive, and the baby's weight increased by 300 grams. CoMC supported maternal and infant needs and early detection of risk factors. Midwives are expected to optimize CoMC through continuous monitoring and early risk detection. Mothers are expected to comply with scheduled visits and apply health education. Educational institutions are expected to strengthen students' competencies in comprehensive midwifery care according to service standards.

Keywords: *Midwifery care, Continuity of Midwifery Care, pregnancy, childbirth, postpartum, neonates*

References: *34 References (2016–2025)*