

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

**LAPORAN TUGAS AKHIR, JUNI 2026
ELSA CAHYA MIRANDA POS POS**

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

xii, ± 144 halaman + 5 Tabel + 10 Lampiran

ABSTRAK

Transformasi pelayanan kesehatan menempatkan bidan sebagai tenaga kesehatan yang berperan penting meningkatkan derajat kesehatan ibu dan bayi. Studi kasus ini bertujuan memberikan asuhan kebidanan komprehensif pada Ny. D G1P0A0H0 dengan pendekatan *Continuity of Midwifery Care* (CoMC) di TPMB Nila Trisnawati dimulai sejak Desember 2025 sampai Febuari 2026. Metode yang digunakan asuhan kebidanan mulai dari masa kehamilan, persalinan, nifas, hingga bayi baru lahir. Pengumpulan data dilakukan melalui wawancara, pemeriksaan fisik, pemeriksaan penunjang, dokumentasi buku KIA, partograf, serta skrining EPDS. Kunjungan kehamilan dilakukan sebanyak 4 kali, pendampingan persalinan, 4 kali kunjungan nifas, dan 3 kali kunjungan bayi baru lahir. Selama kehamilan ditemukan keluhan nyeri punggung diatasi melalui edukasi posisi tidur miring ke kiri dan kompres air hangat. Persalinan dilakukan secara *sectio caesarea* (SC) dengan indikasi inersia uteri sekunder. Bayi lahir berjenis kelamin laki-laki, menangis kuat, bergerak aktif, dengan berat badan 3.100 gram dan panjang badan 50 cm. Asuhan nifas menunjukkan kondisi ibu dalam keadaan baik tanpa komplikasi dan luka operasi tampak kering tidak ada tanda infeksi dan involusi uterus normal. Hasil skrining EPDS menunjukkan kondisi psikologis ibu tidak berisiko mengalami depresi postpartum. Asuhan neonatus menunjukkan pertumbuhan bayi optimal dengan berat badan meningkat menjadi 3.300 gram pada usia 14 hari. Asuhan kebidanan komprehensif melalui pendekatan *Continuity of Midwifery Care* dapat mendukung kesehatan ibu dan bayi secara optimal serta meningkatkan kualitas pelayanan kebidanan. Penerapan asuhan kebidanan berkesinambungan perlu dipertahankan dan ditingkatkan sebagai upaya pemantauan kesehatan ibu dan bayi secara menyeluruh. Selain itu, edukasi kesehatan dan deteksi dini terhadap kemungkinan komplikasi perlu terus dioptimalkan.

Kata Kunci : Asuhan Kebidanan Komprehensif, Inersia Uteri, *Sectio Caesarea* (SC)

Referensi : 49, (2018-2025)

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

**FINAL PROJECT REPORT, JUNE 2026
ELSA CAHYA MIRANDA POS POS**

**COMPREHENSIVE MIDWIFERY CARE FOR MRS. D AT TPMB NILA
TRISNAWATI, PEKANBARU CITY, 2026**

xii ± 144 Pages + 5 Tables + 10 Attachments

ABSTRACT

The transformation of healthcare services has positioned midwives as healthcare professionals who play an essential role in improving maternal and neonatal health. This case study aimed to provide comprehensive midwifery care for Mrs. D (G1P0A0H0) using the Continuity of Midwifery Care (CoMC) approach at TPMB Nila Trisnawati from December 2025 to February 2026. The method employed consisted of comprehensive midwifery care covering pregnancy, childbirth, the postpartum period, and newborn care. Data were collected through interviews, physical examinations, supporting examinations, documentation from the Maternal and Child Health (MCH) Handbook, partograph records, and the Edinburgh Postnatal Depression Scale (EPDS) screening. Antenatal care was provided through four visits, continuous support during childbirth, four postpartum visits, and three neonatal visits. During pregnancy, the client experienced back pain, which was managed through education on the left lateral sleeping position and warm compresses. The delivery was performed by cesarean section (CS) due to secondary uterine inertia. A male infant was born, crying vigorously, moving actively, with a birth weight of 3,100 grams and a body length of 50 cm. Postpartum care showed that the mother remained in good condition without complications; the surgical wound was dry with no signs of infection, and uterine involution was within normal limits. The EPDS screening results indicated that the mother was not at risk of postpartum depression. Neonatal care demonstrated optimal growth, with the infant's weight increasing to 3,300 grams at 14 days of age. Comprehensive midwifery care through the Continuity of Midwifery Care (CoMC) approach can effectively support optimal maternal and neonatal health while improving the quality of midwifery services. The implementation of continuous midwifery care should be maintained and strengthened to ensure comprehensive monitoring of maternal and neonatal health. Furthermore, health education and early detection of potential complications should continue to be optimized.

Keywords: Comprehensive Midwifery Care, Uterine Inertia, Sectio Caesarea (SC)

References: 49 (2018–2025)