

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

**LAPORAN TUGAS AKHIR, JUNI 2026
DWI RAMADANI**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY. P DI KLINIK
PRATAMA TAMAN SARI 1 KOTA PEKANBARU**

Xv + 144 Halaman + 3 tabel, 1 Gambar + 10 Lampiran

ABSTRAK

Keberhasilan program kesehatan ibu dapat dinilai melalui indikator utama yaitu Angka Kematian Ibu (AKI). Salah satu cara untuk mendukung percepatan penurunan Angka Kematian Ibu (AKI) adalah dengan menerapkan asuhan berkesinambungan atau *Continuity of midwife Care*.. Studi kasus ini bertujuan untuk memberikan asuhan komprehensif dari kehamilan, persalinan, nifas dan neonatus pada Ny. P G2P1A0H1 di Klinik Pratama Taman Sari 1. Asuhan dilakukan dari bulan Desember 2025 sampai dengan Maret 2026 sebanyak 4 kali kunjungan kehamilan dimulai pada usia kehamilan 32-33 minggu, 1 kali kunjungan persalinan, 4 kali kunjungan selama nifas, 3 kali kunjungan selama neonatus. Keluhan pada masa kehamilan ditemukan keluhan nyeri pinggang yang diatasi dengan senam hamil sehingga keluhan dapat berkurang. Proses persalinan berlangsung dengan normal, asuhan teknik *Deep back massage* untuk mengurangi rasa nyeri pada persalinan. bayi lahir spontan, menangis kuat, tonus otot baik, berat badan 3500 gram dan panjang badan 52 cm, jenis kelamin laki-laki. Pada kunjungan masa nifas berjalan normal asuhan yang diberikan yaitu teknik menyusui, pijat oksitosin, perawatan payudara dilakukan konseling KB dan ibu memutuskan menjadi akseptor KB Implant, serta skrining *Endinburgh Postnatal Depression Scale*(EPDS) dengan skor 3. Pada neonatus dilakukan perawatan tali pusat, pijat bayi, dan bayi diberi ASI saja. Berat badan bayi meningkat 500 gram pada usia 12 hari. Diharapkan tenaga kesehatan khususnya bidan dapat meningkatkan asuhan kebidanan sesuai standar kebidanan serta meningkatkan kualitas pelayanan kebidanan komprehensif.

Kata Kunci : *Asuhan kebidanan komprehensif, Hamil, Bersalin, Nifas, Neonatus*
Referensi : 67 Referensi (2021-2025)

MINISTRY OF HEALTH OF THE REPUBLIC OF INDONESIA
RIAU POLYTECHNIC OF HEALTH
DIII MIDWIFERY STUDY PROGRAM

FINAL PROJECT REPORT, JUNE 2026
DWI RAMADANI

**COMPREHENSIVE MIDWIFERY CARE FOR MRS. P AT TAMAN SARI
1 PRIMARY CLINIC, PEKANBARU CITY**

Xv + 144 Pages + 3 Tables, 1 Image+ 10 Appendices

ABSTRACT

The success of maternal health programs can be assessed through the main indicator, namely the Maternal Mortality Rate (MMR). One way to support the acceleration of the reduction of the Maternal Mortality Rate (MMR) is by implementing continuous care or Continuity of Midwife Care. This case study aims to provide comprehensive care from pregnancy, childbirth, postpartum, and neonatal care for Mrs. P, G2P1A0H1, at Taman Sari 1 Primary Clinic. Care was provided from December 2025 to March 2026 through 4 antenatal visits starting at 32-33 weeks of gestation, 1 delivery visit, 4 postpartum visits, and 3 neonatal visits. During pregnancy, complaints of back pain were found and managed with prenatal exercise, which resulted in a reduction of the complaints. The labor process proceeded normally, with care using the Deep Back Massage technique to reduce labor pain. The baby was born spontaneously, cried strongly, had good muscle tone, weighed 3500 grams, and measured 52 cm in length, male gender. During the postpartum visit, things progressed normally; the care provided included breastfeeding techniques, oxytocin massage, breast care, counseling on contraception, and the mother decided to become an implant contraceptive acceptor, as well as screening using the Edinburgh Postnatal Depression Scale (EPDS) with a score of 3. For the neonate, care was provided for the umbilical cord, baby massage, and the baby was given only breast milk. The baby's weight increased by 500 grams at 12 days old. It is expected that healthcare workers, especially midwives, can improve midwifery care according to midwifery standards and enhance the quality of comprehensive midwifery services.

Keywords : *Comprehensive midwifery care, Pregnancy, Childbirth, Postpartum, Neonates.*

References: 67 References (2021-2025)