

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

**LAPORAN TUGAS AKHIR, JUNI 2026  
YUVA NUR ARIFFAH BERAMPU**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY. N DI PRAKTIK  
MANDIRI BIDAN MURTINAWITA KOTA PEKANBARU TAHUN 2026**

**X + 178 Halaman, 7 Tabel, 10 Lampiran**

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**ABSTRAK**

Angka Kematian Ibu (AKI) dan Angka Kematian Bayi (AKB) masih menjadi tantangan kesehatan di Indonesia. Upaya penurunannya dilakukan melalui asuhan kebidanan komprehensif berkelanjutan (*Continuity of Midwifery Care/CoMC*). Studi kasus ini bertujuan memberikan asuhan kebidanan komprehensif pada Ny. N G<sub>1</sub>P<sub>0</sub>A<sub>0</sub>H<sub>0</sub> usia 32 tahun di TPMB Murtinawita. Asuhan diberikan pada tanggal 15 Januari–18 Maret 2026 sejak usia kehamilan 34 minggu dengan 4 kali asuhan kehamilan, asuhan persalinan, 3 kali kunjungan nifas, dan 2 kali kunjungan neonatus. Pada trimester III, ibu mengalami sering berkemih yang diatasi dengan edukasi pola minum, nyeri pinggang fisiologis diatasi dengan olahraga ringan dan pengaturan body mechanic, serta sulit tidur yang diatasi dengan mengatur posisi tidur. Persalinan berlangsung pada usia kehamilan 39 minggu secara *Section Caesarea* (SC) atas indikasi kala 2 memanjang. Bayi laki-laki lahir dengan berat 3.650 gram dan panjang 50 cm. Masa nifas berlangsung normal dengan pemantauan involusi uterus, perawatan luka pasca-SC, edukasi menyusui, serta konseling KB. Pada kunjungan neonatus diberikan edukasi menyusui on demand, ASI Eksklusif, penyimpanan ASI, pijat bayi, pemantauan pertumbuhan, dan imunisasi. Hasil asuhan menunjukkan kondisi ibu dan bayi baik, ASI lancar, refleks mengisap kuat, serta kenaikan berat badan bayi 650 gram pada hari ke-26. Diharapkan tenaga Kesehatan khususnya bidan dapat meningkatkan asuhan kebidanan sesuai standar serta meningkatkan kualitas pelayanan kebidanan komprehensif. Asuhan dilakukan secara menyeluruh melalui pemantauan kondisi ibu dan bayi, deteksi dini komplikasi, pemberian informasi kesehatan, serta pendampingan yang berkesinambungan untuk mendukung kesehatan ibu dan bayi selama masa kehamilan hingga neonatus secara optimal.

**Kata kunci : Asuhan Kebidanan Komprehensif, Kehamilan, Persalinan,  
Nifas, neonatus**

**Referensi : 86 Referensi (2016-2026)**

**MINISTRY OF HEALTH REPUBLIC INDONESIA**

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**STUDY PROGRAM DIII MIDWIFERY**

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**YUVA NUR ARIFFAH BERAMPU**

**COMPREHENSIVE MIDWIFERY CARE FOR MRS. N AT INDEPENDENT  
MIDWIFE PRACTICE MURTINAWITA, PEKANBARU CITY IN 2026**

***X + 178 pages, 7 Tables, 10 Attachments***

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### **ABSTRACT**

*Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) remain health challenges in Indonesia. Reduction efforts include comprehensive and continuous midwifery care (Continuity of Midwifery Care/CoMC). This case study aimed to provide comprehensive midwifery care to Mrs. N, G<sub>1</sub>P<sub>0</sub>A<sub>0</sub>H<sub>0</sub>, aged 32 years, at TPMB Murtinawita. Care was provided from January 15 to March 18, 2026, starting at 34 weeks of gestation, including four antenatal visits, delivery care, three postpartum visits, and two neonatal visits. In the third trimester, the mother experienced frequent urination managed through drinking-pattern education, physiological low back pain managed with light exercise and proper body mechanics, and sleep difficulties managed by adjusting sleeping positions. Delivery occurred at 39 weeks by Cesarean Section (CS) due to prolonged second-stage labor. A male infant was born weighing 3,650 grams and measuring 50 cm. The postpartum period was normal, with uterine involution monitoring, CS wound care, breastfeeding education, and family planning counseling. Neonatal care included education on on-demand breastfeeding, exclusive breastfeeding, breast milk storage, infant massage, growth monitoring, and immunization. The mother and infant remained in good condition, breastfeeding was adequate, the sucking reflex was strong, and the infant gained 650 grams by day 26. Midwives are expected to provide care according to standards and improve comprehensive midwifery services. Continuous care, early complication detection, health education, and support are essential to optimize maternal and neonatal health.*

**Keyword : Comprehensive Midwifery Care, Pregnancy, Delivery,  
Postartum, Neonate**

**Reference : 86 Reference (2016-2026)**