

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

**LAPORAN TUGAS AKHIR, JUNI 2026
DWITA CHRISTINE WARUWU**

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY. A
DI TEMPAT PRAKTIK MANDIRI BIDAN SILVI AYU KOTA
PEKANBARU TAHUN 2026**

xii ± 158 Halaman, 5 Tabel, 4 Gambar, 10 Lampiran

ABSTRAK

Asuhan kebidanan komprehensif berkesinambungan (*Continuity of Midwifery Care/CoMC*) merupakan upaya pemantauan kesehatan ibu dan bayi serta deteksi dini komplikasi. Tujuan laporan ini adalah memberikan asuhan kebidanan komprehensif pada Ny. A G1P0A0H0 mulai masa kehamilan, persalinan, nifas, hingga neonatus di TPMB Silvi Ayu Kota Pekanbaru dan kunjungan rumah. Asuhan dilaksanakan pada Februari-April 2026 dengan kontak pertama pada usia kehamilan 36 minggu 1 hari, meliputi 4 kali kunjungan kehamilan, persalinan, 4 kali kunjungan nifas, dan 4 kali kunjungan neonatus. Pendokumentasian menggunakan metode SOAP. Pada ANC ke-3 ditemukan keluhan sering buang air kecil pada malam hari yang mengganggu pola tidur. Asuhan yang diberikan berupa edukasi ketidaknyamanan fisiologis trimester III, mengurangi minum menjelang tidur, memperbanyak cairan pada siang hari, dan mengosongkan kandung kemih sebelum tidur sehingga keluhan berkurang. Persalinan berlangsung spontan pervaginam sesuai standar APN. Pada kala I fase aktif diberikan teknik Deep Back Massage sehingga nyeri persalinan berkurang. Bayi lahir cukup bulan, berjenis kelamin perempuan, berat badan 3.400 gram, panjang badan 48 cm, plasenta lahir lengkap, serta berhasil dilakukan IMD pada menit ke-30. Pada KF1 ditemukan keluhan nyeri pada luka jahitan perineum. Asuhan yang diberikan berupa edukasi perawatan luka perineum, menjaga kebersihan area perineum, serta melakukan mobilisasi dini secara bertahap sehingga nyeri berkurang. Ny. A memilih kontrasepsi pil progestin (mini pil). Pada KN2 ditemukan bintik-bintik merah pada wajah bayi. Asuhan yang diberikan berupa edukasi perawatan kulit bayi dan pemberian ASI eksklusif sehingga bintik merah berkurang. Berat badan bayi meningkat dari 3.200 gram menjadi 3.800 gram. Bidan diharapkan mempertahankan pelayanan kebidanan komprehensif sesuai standar.

Kata Kunci: *Asuhan Kebidanan Komprehensif, Kehamilan, Persalinan, Nifas, Neonatus.*

Referensi : 59 Referensi (2016-2026)

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

**FINAL PROJECT REPORT, JUNE 2026
DWITA CHRISTINE WARUWU**

**COMPREHENSIVE MIDWIFERY CARE FOR MRS. A
AT THE INDEPENDENT MIDWIFERY PRACTICE OF SILVI AYU,
PEKANBARU CITY, 2026**

xii ± 158 Pages, 5 Tables, 4 Figures, 10 Appendices

ABSTRACT

Comprehensive continuity midwifery care (*Continuity of Midwifery Care/CoMC*) is an effort to monitor maternal and infant health and detect complications early. The purpose of this report is to provide comprehensive midwifery care for Mrs. A G1P0A0H0 from pregnancy, childbirth, postpartum, to the neonatal period at TPMB Silvi Ayu, Pekanbaru City, and through home visits. The care was provided from February to April 2026, with the first contact occurring at 36 weeks and 1 day of gestation. The care included four antenatal care visits, childbirth assistance, four postpartum visits, and four neonatal visits. Documentation was carried out using the SOAP method. During the third ANC visit, the mother complained of frequent urination at night that disturbed her sleep pattern. The care provided included education about physiological discomforts in the third trimester, reducing fluid intake before bedtime, increasing fluid consumption during the day, and emptying the bladder before sleeping, resulting in reduced complaints. The delivery occurred spontaneously through vaginal birth according to the standard of Normal Childbirth Care (APN). During the active phase of the first stage of labor, the Deep Back Massage technique was provided, reducing labor pain. The baby was born at term, female, weighing 3,400 grams, with a body length of 48 cm. The placenta was delivered completely, and Early Initiation of Breastfeeding (IMD) was successfully performed at the 30th minute. During the first postpartum visit (KF1), the mother complained of pain from the perineal sutures. The care provided included education on perineal wound care, maintaining perineal hygiene, and gradual early mobilization to reduce pain. Mrs. A chose a progestin-only pill (mini pill) as contraception. During the second neonatal visit (KN2), red spots were found on the baby's face. Care was provided through education on infant skin care and exclusive breastfeeding, resulting in reduced red spots. The baby's weight increased from 3,200 grams to 3,800 grams. Midwives are expected to maintain comprehensive midwifery services according to standards.

Keywords : *Comprehensive Midwifery Care, Pregnancy, Childbirth, Postpartum, Neonate.*

References: 59 References (2016–2026)