

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

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

**ASUHAN KEBIDANAN KOMPREHENSIF PADA NY.C DI TPMB LISA
ANGGRAINI KOTA PEKANBARU**

xi, ±133 Halaman, 2 Tabel, 7 Lampiran

ABSTRAK

Asuhan Kebidanan Komprehensif merupakan pelayanan kebidanan berkesinambungan mulai dari kehamilan, persalinan, nifas, hingga neonatus untuk mendukung kesehatan ibu dan bayi serta mendeteksi dini komplikasi. Laporan Tugas Akhir ini bertujuan memberikan asuhan kebidanan komprehensif pada Ny. C G1P0A0H0 dimulai usia kehamilan 34 minggu melalui pendekatan *Continuity of Midwifery Care* (CoMC) di TPMB Lisa Anggraini Kota Pekanbaru bulan Februari hingga Maret 2026. Asuhan kebidanan dilakukan secara komprehensif dan berkesinambungan kemudian di dokumentasikan dengan metode SOAP. Asuhan kehamilan dilakukan di TPMB sebanyak 3x, asuhan nifas 4x, asuhan neonatus 3x kunjungan rumah. Selama kehamilan ibu mengalami nyeri punggung yang dapat diatasi melalui edukasi kompres air hangat. Persalinan berlangsung pada usia kehamilan 39-40 minggu dilakukan tindakan Sectio Caesarea (SC) atas indikasi *Cephalopelvic Disproportion* (CPD). Asuhan nifas dilakukan perawatan luka post operasi dengan keluhan nyeri luka dan nyeri dapat diatasi luka sembuh pada hari ke 14 dan tidak ada tanda-tanda infeksi, ASI sedikit dilakukan edukasi minum daun katu dan menyusui *on the demand*, ASI lancar pada hari ke-7. Asuhan neonatus pijat bayi dan pemantauan berat badan bayi. Keadaan umum bayi baik, tanda-tanda vital normal, serta mengalami kenaikan berat badan sebesar 560 gram pada kunjungan neonatus hari ke 28. Asuhan Kebidanan Komprehensif melalui pendekatan CoMC mulai dari kehamilan, persalinan, nifas dan neonatus mampu mendukung kesehatan ibu dan bayi secara optimal.

Kata Kunci : Asuhan komprehensif, kehamilan, persalinan, *Sectio Caesarea* (SC), *Cephalopelvic Disproportion* (CPD), nifas, neonatus.

Referensi : 51 Referensi (2016-2026)

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

**FINAL PROJECT REPORT, JUNE 2026
WINDI RAMADANI**

**COMPREHENSIVE MIDWIFERY CARE FOR NY.C AT PMB LISA
ANGGRAINI PEKANBARU**

xi, ±133 pages, 2 tables, 7 attachments

ABSTRACT

Comprehensive Midwifery Care is a continuous healthcare service spanning from pregnancy, labor, the postpartum period, to the neonatal stage, aimed at supporting maternal and infant health as well as detecting early complications. This Final Project Report aims to provide comprehensive midwifery care to Mrs. C (G1P0A0H0) starting at 34 weeks of gestation through a Continuity of Midwifery Care (CoMC) approach at the Independent Midwife Practice (TPMB) of Lisa Anggraini, Pekanbaru City, from February to March 2026. Comprehensive and continuous midwifery care was provided and documented using the SOAP method. Antenatal care was conducted three times at the clinic, postpartum care four times, and neonatal care through three home visits. During pregnancy, the mother experienced lower back pain, which was successfully managed through education on warm compress therapy. Delivery occurred at 39–40 weeks of gestation via Cesarean Section (SC) indicated by Cephalopelvic Disproportion (CPD). Postpartum care included post-operative wound management for complaints of wound pain. The pain was managed effectively, the wound fully healed by day 14 with no signs of infection, and low breast milk production was resolved by consuming katuk leaves and practicing on-demand breastfeeding, resulting in smooth lactation by the 7th day. Neonatal care included infant massage and weight monitoring. The baby's general condition was good, vital signs were normal, and there was a weight gain of 560 grams. In conclusion, Comprehensive Midwifery Care through the CoMC approach from pregnancy, labor, postpartum, to the neonatal period successfully supported optimal maternal and infant health.

Keywords: Comprehensive care, pregnancy, childbirth, Sectio Caesarea (SC), Cephalopelvic Disproportion (CPD), postpartum, neonate.

References: 61 References (2016-2026)