

RINGKASAN

ASUHAN KEBIDANAN PADA NY "C" USIA 21 TAHUN DI PUSKESMAS KEMBANGBAHU LAMONGAN

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Pelaksanaan asuhan kebidanan ini dilakukan secara holistik melalui pendekatan Continuity of Care yang mencakup fase gestasi sampai program KB, dengan pendampingan intensif sesuai kondisi pasien. Peneliti menggunakan metode observasi selama kurun waktu 42 hari, yang terdiri atas satu kali asuhan kehamilan, satu kali persalinan, empat kali masa nifas, satu kali BBL, tiga kali pemeriksaan neonatus, serta satu kali pelayanan KB. Target utama asuhan ini adalah menjamin kesinambungan pelayanan dari awal kehamilan hingga kontrasepsi dengan sistem pencatatan SOAP. Berdasarkan tinjauan kasus Ny. "C" (21 tahun), status kesehatan dari awal hingga akhir Trimester III teridentifikasi sebagai Kehamilan Risiko Rendah (KRR). Namun, ditemukan ketidaksesuaian antara teori dan praktik pada fase melahirkan karena pasien mengalami Ketuban Pecah Dini (KPD) yang memicu tindakan operasi sesar. Masa pascasalin berlangsung normal. Bayi berjenis kelamin laki-laki lahir sehat dengan berat 2550 gram serta panjang 45 cm, tanpa ada gangguan pada fase neonatal. Pasien kemudian menetapkan pilihan pada kontrasepsi suntik 3 bulan pasca konseling. Secara prinsip, pendampingan berkelanjutan yang optimal berperan krusial dalam menekan risiko komplikasi maternal maupun neonatal.

Kata Kunci: Hamil, Bersalin, Nifas, Neonatus, KB

SUMMARY

MIDWIFERY CARE FOR MRS. "D" AGED 21 YEARS AT PUSKESMAS KEMBANGBAHU LAMONGAN

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The implementation of this midwifery care is carried out holistically through a Continuity of Care (CoC) approach, spanning from the gestational phase to the family planning program, with intensive assistance tailored to the patient's condition. The researcher employed the observation method over a period of 42 days, consisting of one prenatal care session, one delivery, four postpartum visits, one newborn assessment, three neonatal examinations, and one family planning service. The primary objective of this care is to ensure seamless continuity of service from early pregnancy to contraception, utilizing the SOAP documentation system. Based on the case review of Mrs. "C" (21 years old), her health status from the beginning until the end of the third trimester was identified as a Low-Risk Pregnancy (LRP). However, a discrepancy between theory and practice was found during the labor phase, as the patient experienced Premature Rupture of Membranes (PROM), which necessitated a Cesarean section. The postpartum period proceeded normally. A healthy baby boy was born weighing 2550 grams with a length of 45 cm, showing no complications during the neonatal phase. Following counseling, the patient opted for the 3-month injectable contraceptive. In principle, optimal continuous assistance plays a crucial role in reducing the risk of both maternal and neonatal complications.

Keywords: Pregnancy, Childbirth, Postpartum, Neonate, Family Planning (KB)