RINGKASAN LAPORAN STASE CONTINUITY OF CARE
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Laporan Tugas Akhir ini mendokumentasikan asuhan kebidanan komprehensif (*Continuity of Care*) pada Ny. K (25 tahun) di periode Januari hingga Februari 2026. Metode studi kasus digunakan untuk memantau perkembangan trimester III, persalinan, nifas (40 hari), neonatus, hingga pelayanan KB. Hasil asuhan menunjukkan kehamilan berjalan fisiologis dengan 9 kali kunjungan ANC. Persalinan berlangsung spontan pada 26 Januari 2026 (bayi 2.800 g) tanpa komplikasi. Selama masa nifas, involusi uteri dan penyembuhan luka perineum berlangsung normal, didukung kondisi neonatus sehat yang telah menerima imunisasi dasar serta hasil SHK yang baik. Ibu memilih kontrasepsi suntik 3 bulan pada akhir masa nifas. Diskusi menunjukkan tidak adanya kesenjangan antara teori dan praktik; penanganan ketidaknyamanan trimester III, manajemen persalinan multigravida, hingga pemilihan KB progestin terbukti selaras dengan literatur terkini yang mendukung keberhasilan laktasi. Disimpulkan bahwa pendampingan berkelanjutan efektif dalam deteksi dini risiko komplikasi dan memastikan transisi kesehatan ibu serta bayi yang optimal secara fisiologis.

Kata Kunci: Continuity of Care, Persalinan Spontan, Asuhan Kebidanan Komprehensif.

SUMMARY OF CONTINUITY OF CARE (CoC) REPORT

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This Final Project documents comprehensive midwifery care (*Continuity of Care*) for Mrs. K (25 years old) from January to February 2026. A case study method was employed to monitor the third trimester, labor, postpartum (40 days), neonatal care, and family planning services. The results showed a physiological pregnancy with nine prenatal visits. Spontaneous delivery occurred on January 26, 2026 (infant weight 2,800 g) without complications. During the postpartum period, uterine involution and perineal wound healing proceeded normally, supported by a healthy neonate who received basic immunizations and showed favorable Congenital Hypothyroidism Screening (SHK) results. The mother chose a 3-month injectable contraceptive at the end of the postpartum period. The discussion indicates no gaps between theory and practice; the management of third-trimester discomfort, multigravida labor management, and the selection of progestin-only contraception are consistent with current literature supporting lactation success. In conclusion, continuous assistance is effective in the early detection of complications and ensures an optimal physiological health transition for both mother and infant.

Keywords: Continuity of Care, Spontaneous Delivery, Comprehensive Midwifery Care.