

RINGKASAN

ASUHAN KEBIDANAN *CONTINUITY OF CARE* PADA NY. “M” UMUR 24 TAHUN DI PUSKESMAS JATIREJO MOJOKERTO

Oleh:

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KEK menyebabkan kebutuhan zat gizi, termasuk zat besi, tidak terpenuhi secara optimal yang dapat berdampak serius menghambat pertumbuhan dan perkembangan janin. Tujuan memberikan asuhan kebidanan pada Ny. M usia 24 tahun di Puskesmas Jatirejo Mojokerto.

Metode asuhan adalah dengan *continuity of care* dengan jumlah kunjungan sebanyak 10 kali yang meliputi 1 kali kunjungan kehamilan, 1 kali kunjungan persalinan, 4 kali kunjungan nifas, 3 kali kunjungan bayi baru lahir dan 1 kali kunjungan KB.

Hasil asuhan menunjukkan bahwa Ny. “M” hamil 38 minggu dengan kondisi risiko tinggi dan KEK (LILA 21 cm, tinggi badan 144,5 cm, dan IMT kurus). Persalinan berlangsung normal spontan, kala II 15 menit, kala III 15 menit, kala IV normal. Ibu nifas mengalami nyeri luka perineum derajat II. Bayi baru lahir perempuan dengan BB 3300 gram dalam kondisi baik. Ibu memilih KB IUD.

Analisa Data masalah pada kasus Ny. “M” menunjukkan bahwa ibu hamil mengalami KEK dan risiko tinggi. Persalinan berlangsung spontan dan fisiologis. Masalah masa nifas yaitu adanya nyeri luka perineum. Neonatus lahir dalam kondisi fisiologis normal. Ibu baru KB IUD.

Penerapan *Continuity of Care* efektif dalam memantau kehamilan risiko tinggi, mendukung pemulihan nifas, serta memastikan kesehatan neonatus, sehingga pelayanan kebidanan dapat berjalan aman, optimal, dan berkesinambungan.

Kata Kunci: hamil, bersalin, nifas, neonatus, KB

SUMMARY

MIDWIFERY CONTINUITY OF CARE FOR MRS. “M” AGED 24 YEARS AT JATIREJO PUBLIC HEALTH CENTER MOJOKERTO

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Chronic Energy Deficiency (CED) caused nutritional needs, including iron requirements, to be inadequately fulfilled, which could seriously inhibit fetal growth and development. The objective of providing midwifery care to Mrs. M, aged 24 years, at Puskesmas Jatirejo Mojokerto was to deliver comprehensive maternal care.

The method of care used continuity of care with a total of 10 visits consisting of 1 antenatal visit, 1 delivery visit, 4 postpartum visits, 3 newborn visits, and 1 family planning visit.

The results of care showed that Mrs. “M” was 38 weeks pregnant with high-risk pregnancy and CED conditions (MUAC 21 cm, height 144.5 cm, and underweight BMI). The delivery occurred spontaneously and normally, with the second stage lasting 15 minutes, the third stage 15 minutes, and the fourth stage progressing normally. During the postpartum period, the mother experienced pain due to a second-degree perineal wound. The female newborn weighed 3300 grams and was in good condition. The mother chose an IUD as her contraceptive method.

The analysis of Mrs. “M”’s case indicated that the mother experienced CED and high-risk pregnancy. The delivery process occurred spontaneously and physiologically. The postpartum problem identified was pain from the perineal wound. The neonate was born in normal physiological condition. The mother became a new IUD acceptor.

The implementation of continuity of care was effective in monitoring high-risk pregnancy, supporting postpartum recovery, and ensuring neonatal health, so that midwifery care could be carried out safely, optimally, and continuously.

Keywords: pregnancy, labor, postpartum, neonate, family planning