

RINGKASAN

ASUHAN KEBIDANAN PADA Ny. C USIA 25 TAHUN

DI PMB NY. LILIK RATNASARI SST DESA MENDEK NGORO

Oleh: Indra Nuryanti

Pelayanan Continuity of Care (COC) menyajikan asuhan kebidanan secara berkelanjutan, mencakup periode kehamilan, persalinan, nifas, bayi baru lahir, neonatus, hingga layanan keluarga berencana. Pembahasan dalam laporan ini berfokus pada asuhan komprehensif bagi Ny. C (25 tahun) di TPMB Ny. Lilik Ratnasari SST, Desa Mendek, Kecamatan Ngoro. Penulis menerapkan pendekatan manajemen kebidanan 7 langkah Varney serta metode pendokumentasian SOAP guna menjamin kualitas dan kesinambungan pemantauan. Selama kehamilan, Ny. C memperoleh pemantauan antenatal berkala yang disertai edukasi mengenai adaptasi fisiologis, asupan nutrisi, tanda bahaya, serta persiapan persalinan. Bidan menangani keluhan fisiologis secara konservatif dan edukatif sesuai standar prosedur. Ibu menjalani proses persalinan spontan dan normal pada usia kehamilan aterm, di mana kondisi ibu beserta bayi terpantau sehat. Bayi lahir bugar dengan tangisan kuat, tonus otot aktif, dan tanda vital normal. Pemantauan masa nifas berlangsung melalui kunjungan rutin untuk menilai proses involusi uteri, pengeluaran lochea, keberhasilan laktasi, hingga kesiapan psikologis ibu. Hasil pemantauan menunjukkan proses pemulihan berjalan fisiologis tanpa komplikasi. Asuhan neonatus dilakukan sesuai jadwal kunjungan dengan pemantauan tanda vital, refleks, serta pertumbuhan bayi yang menunjukkan hasil normal. Pada tahap

pelayanan keluarga berencana, dilakukan konseling mengenai pilihan metode kontrasepsi yang sesuai dengan kondisi dan kebutuhan ibu.

Penerapan model COC pada Ny. C menunjukkan bahwa pelayanan kebidanan berkelanjutan mampu meningkatkan rasa aman, kenyamanan, serta kepercayaan ibu terhadap tenaga kesehatan. Pendekatan ini mendukung deteksi dini komplikasi, kesinambungan informasi, serta pengambilan keputusan yang tepat dalam kesehatan reproduksi, sehingga berkontribusi dalam upaya peningkatan kualitas pelayanan dan pencegahan morbiditas maupun mortalitas ibu dan bayi.



SUMMARY

ASUHAN KEBIDANAN PADA Ny. C USIA 25 TAHUN

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By: Indra Nuryanti

Continuity of Care (COC) midwifery care is a service provided continuously from pregnancy, childbirth, postpartum, newborn, neonate to family planning. This report discusses the comprehensive midwifery care provided to Mrs. C, 25 years old, at TPMB Ny. Lilik Ratnasari SST, Mendek Village, Ngoro District. Services were carried out comprehensively with Varney's 7-step midwifery management approach and SOAP documentation to ensure continuity and quality of care. During pregnancy, Mrs. C underwent routine antenatal monitoring and was given education about physiological changes, nutritional needs, pregnancy danger signs, and labor preparation. Physiological complaints that emerged during pregnancy were handled conservatively and educationally according to care standards. Labor took place spontaneously and normally at full term, with the condition of the mother and baby in good condition. The baby was born with a strong cry, good muscle tone, and vital signs within normal limits. Postpartum care was provided through regular visits to monitor uterine involution, lochia discharge, lactation, and the mother's psychological condition. Monitoring results indicated a physiological recovery process without complications. Neonatal care was provided according to the visit schedule, with vital signs, reflexes, and the baby's growth monitored, all of

which showed normal results. During the family planning service phase, counseling was provided regarding contraceptive method options appropriate to the mother's condition and needs.

The application of the COC model to Mrs. C demonstrated that continuous midwifery care increased the mother's sense of security, comfort, and trust in healthcare professionals. This approach supported early detection of complications, continuity of information, and informed decision-making in reproductive health, thus contributing to efforts to improve the quality of care and prevent maternal and infant morbidity and mortality.



