

# ASUHAN KEBIDANAN BERKESINAMBUNGAN PADA NY. D UMUR 28 TAHUN MULTIPARA DI PMB DIAN HERAWATI WIROBRAJAN YOGYAKARTA

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## RINGKASAN

**Latar Belakang** : penyebab tidak langsung kematian ibu yaitu abortus. Abortus insipiens, imminens, inkomplit dan komplit. Upaya pencegahannya adalah melakukan asuhan berkesinambungan (*Continuity of care*) yang berarti pelayanan kebidanan berkelanjutan pada perempuan sepanjang siklus kehamilan, kelahiran serta masa post partum.

**Tujuan** : memberikan asuhan kebidanan berkesinambungan pada Ny."D" umur 28 tahun multipara di PMB Dian Herawati Wirobrajan.

**Metode** : metode penelitian yang digunakan adalah metode penelitian deskriptif, jenis penelitian studi kasus (*Case Study*).

**Hasil** : Asuhan kebidanan yang diberikan pada Ny."D" berlangsung ± 21 minggu sejak UK 21 sampai 42 minggu, bersalin, nifas, neonatus dengan frekuensi kunjungan hamil 4 kali, persalinan 1 kali, nifas 3 kali, dan neonatus 3 kali. Persalinan dilakukan di RSUD Kota Yogyakarta dengan ketuban pecah dini (KPD). Kala I berlangsung ± 4 jam, kala II ± 10 menit, kala III 10 menit, dan Kala IV selam 2 jam. Bayi lahir pukul 23.50 WIB, BB: 3330 gram, PB: 48 cm, dengan asfiksia ringan, nilai apgar *score* 7 pada menit pertama dan 8 pada menit kelima. Pada masa nifas terdapat luka perinium diberikan terapi senam kegel, ASI tidak lancar diberikan terapi pijat oksitosin. Asuhan kebidanan neonatus bayi rewel diberikan terapi pijat bayi.

**Kesimpulan**: asuhan kebidanan berkesinambungan yang telah diberikan pada Ny."D" saat hamil, bersalin, nifas, BBL, didapatkan hasil pemeriksaan ibu mengalami KPD dan BBL mengalami asfiksia ringan, setelah dilakukan penanganan ibu dan bayi dalam kondisi normal. Diharapkan bidan selalu menerapkan manajemen kebidanan, dan meningkatkan kompetensi dalam memberikan standar pelayanan asuhan kebidanan.

**Kata Kunci** : Abortus Imminens, Ketuban Pecah Dini, Asfiksia, Asuhan Kebidanan Berkesinambungan

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**ABSTRAK**

**Background:** *the indirect cause of maternal death is abortion. Abortion insipiens, imminens, incomplete and complete. Prevention efforts are to carry out continuous care (Continuity of care) which means continuous midwifery services for women throughout the cycle of pregnancy, birth and post partum period.*

**Objective:** *provide continuous midwifery care to Mrs. "D" aged 28 years multipara at PMB Dian Herawati Wirobrajan.*

**Method:** *the research method used is descriptive research method, type of case study research.*

**Results:** *Midwifery care given to Mrs. "D" lasted ± 21 weeks from the UK 21 to 42 weeks, childbirth, childbirth, neonates with frequency of pregnancy visits 4 times, childbirth once, childbirth 3 times, and neonates 3 times. Childbirth is performed in Yogyakarta City Hospital with premature rupture of membranes (KPD). The first stage lasts ± 4 hours, the second stage ± 10 minutes, the third stage 10 minutes, and the fourth stage for 2 hours. Babies born at 23.50 WIB, BB: 3330 grams, PB: 48 cm, with mild asphyxia, apgar score 7 in the first minute and 8 in the fifth minute. During childbirth there is a perinum wound given Kegel exercises, breast milk is not smoothly given oxytocin massage therapy. Neonatal midwifery care of fussy babies is given baby massage therapy.*

**Conclusion:** *continuous midwifery care that has been given to Mrs. "D" during pregnancy, childbirth, childbirth, BBL, obtained the results of examination of women experiencing KPD and BBL experienced mild asphyxia, after handling mothers and babies under normal conditions. It is expected that midwives always implement midwifery management, and improve competence in providing standards of midwifery care services.*

**Keywords:** *Imminent Abortion, Early Rupture of Amniotic fluid, Asphyxia, Continuous Midwifery Care*

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