

**ASUHAN KEBIDANAN BERKESINAMBUNGAN PADA NY. S USIA 31
TAHUN MULTIGRAVIDA DI PMB APPI AMMELIA
KABUPATEN BANTUL YOGYAKARTA**

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ABSTRAK

Latar Belakang: Penurunan AKI dan AKB mencerminkan peningkatan kualitas kesehatan ibu dan bayi sebagai fokus utama kesehatan global. WHO menganjurkan pelayanan *Continuity Of Care* (COC) yang dilakukan bidan.

Tujuan: Melaksanakan asuhan kebidanan berkesinambungan pada kehamilan, hingga pelayanan kontrasepsi pada Ny. S di PMB Appi Ammelia.

Metode: Menggunakan data primer pengamatan, wawancara, pemeriksaan fisik dan kebidanan. Data sekunder dengan pemeriksaan laboratorium, penunjang lainnya (USG), data kesehatan kota dan provinsi, buku KIA dan studi kepustakaan.

Hasil: ANC trimester III dilakukan 8x ditemukan anemia ringan, diberikan KIE gizi tinggi protein, nyeri selangkangan diberikan *prenatal gentle yoga*, timbul ambeien yang nyeri dengan KIE nutrisi tinggi serat dan pemberian pengobatan farmakologi, keluarnya flek dan belum timbul kontraksi diberikan *birthing ball*. Persalinan kala I timbul nyeri kontraksi menjalar ke punggung bawah diberikan pijat *effleurage* dan *deep birthing*. Kala II lahir bayi spontan, kala III berlangsung 10 menit dan kala IV pemantauan selama 2 jam. Kunjungan nifas (KF) 1 ASI belum keluar lancar dengan pijat oksitosin, KF2 diberikan terapi murottal Al-Qur'an mendukung psikologis ibu untuk relaksasi membantu produksi ASI dan KF3 pelayanan kontrasepsi. Kunjungan *Neonatus* (KN) dilakukan perawatan tali pusat terbuka dan *massage baby* untuk tumbuh kembang optimal.

Kesimpulan: Asuhan kebidanan berkesinambungan melalui studi kasus *continuity of care* pada Ny. S dari hamil sampai keluarga berencana bertujuan sebagai deteksi dini untuk mengurangi faktor resiko yang terjadi selama kehamilan hingga pelayanan kontrasepsi.

Kata Kunci: Hamil, Persalinan, Nifas, Bayi Baru Lahir dan KB

**MIDWIFERY CONTINUITY OF CARE IN NY. S AGE 31 YEARS
MULTIGRAVIDA AT PMB APPI AMMELIA
BANTUL DISTRICT, YOGYAKARTA**

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ABSTRACT

Background: The decline in MMR and IMR reflects improving the quality of maternal and infant health as the main focus of global health. WHO recommends Continuity Of Care (COC) services provided by midwives.

Objective: To provide continuous midwifery care during pregnancy, including contraceptive services for Mrs. S at PMB Appi Ammelia.

Method: Using primary data from observations, interviews, physical and obstetric examinations. Secondary data with laboratory examinations, other support (USG), city and provincial health data, KIA books and literature studies.

Results: Third trimester ANC was carried out 8x, mild anemia was found, high protein nutritional IEC was given, groin pain was given prenatal gentle yoga, painful hemorrhoids appeared with high fiber nutritional IEC and pharmacological treatment was given, spots came out and contractions had not yet occurred, given a birthing ball. In the first stage of labor, pain from contractions radiates to the lower back, given effleurage massage and deep birthing. In the second stage the baby was born spontaneously, in the third stage it lasted 10 minutes and in the fourth stage the baby was monitored for 2 hours. Postpartum visit (KF) 1 breast milk has not come out smoothly with oxytocin massage, KF2 is given murottal Al-Qur'an therapy to support the mother's psychological relaxation to help produce breast milk and KF3 contraceptive services. Neonate (KN) visits include open umbilical cord care and baby massage for optimal growth and development.

Conclusion: Continuous midwifery care through a case study of continuity of care for Mrs. S from pregnancy to family planning aims at early detection to reduce risk factors that occur during pregnancy to contraceptive services.

Keywords: Pregnancy, Childbirth, Postpartum,