ASUHAN KEBIDANAN BERKESINAMBUNGAN PADA NY. Y UMUR 27 TAHUN MULTIGRAVIDA DI KLINIK PURI ADISTY YOGYAKARTA

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RINGKASAN

Latar Belakang: Kehamilan dan persalinan adalah proses fisiologis yang melibatkan pertumbuhan dan perkembangan janin sejak konsepsi hingga persalinan. Meskipun pada umumnya persalinan berjalan normal, komplikasi seperti distosia bahu dapat muncul, yang berpotensi berbahaya bagi ibu dan bayi. Distosia bahu terjadi ketika kepala bayi telah lahir, namun bahu tidak dapat keluar melalui jalan lahir secara normal, menyebabkan kesulitan dan tingginya angka kematian ibu dan bayi. Insidensi distosia bahu diperkirakan sekitar 0,2-0,3% dari total persalinan kepala, dan meskipun jarang, tetap menjadi salah satu penyebab utama cedera neonatal dan maternal. Distosia bahu, yang seringkali terjadi tanpa peringatan, memerlukan penanganan cepat melalui manuver obstetrik, seperti manuver McRoberts, untuk memastikan kelahiran yang aman bagi ibu dan bayi. Oleh karena itu, penting bagi tenaga medis, terutama bidan, untuk meningkatkan keterampilan dalam penanganan distosia bahu
Tujuan: Memberikan asuhan kebidanan secara berkesinambungan pada ibu hamil, bersalin, nifas, bayi baru lahir, neonatus dan keluarga berencana sesuai dengan standar pelayanan kebidanan.
Hasil: Pendampingan asuhan kebidanan yang dilakukan secara berkesinambungan kepada Ny. Y, mulai dari masa kehamilan $38+^{6}$ minggu dengan kehamilan normal, bersalin, nifas dan keluarga berencana, bayi baru lahir dan neonatus di Klinik Puri Adisty sudah menerapkan asuhan komplementer sesuai standar pelayanan kebidanan.
Kesimpulan: Secara keseluruhan asuhan kebidanan berkesinambungan sejak kehamilan Trimester III yang terdapat masalah dan telah mendapatkan penanganan secara tepat, pada saat persalinan sesuai dengan standar pelayanan kebidanan dan berjalan dengan baik.
Kata Kunci: Asuhan Kebidanan Berkesinambungan, Distosia Bahu, McRoberts

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UNIVERSITAS JENDERAL ACHMAD YANI YOGYAKARTA PERPUSTAKAAN

Comprehensive Midwifery Care For A 27-Year-Old Multipara At Puri Adisty Clinic, Yogyakarta

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ABSTRACT

Background: Pregnancy and childbirth are physiological processes involving the growth and development of a fetus from conception to delivery. Although most births occur normally, complications such as shoulder dystocia can arise, posing significant risks to both mother and baby. Shoulder dystocia occurs when the baby's head has been born but the shoulders cannot pass through the birth canal normally, leading to difficulties and increased maternal and infant mortality rates. The incidence of shoulder dystocia is estimated at around 0.2-0.3% of all cephalic births, and although rare, it remains one of the leading causes of neonatal and maternal injuries. Shoulder dystocia, which often occurs without warning, requires prompt management through obstetric maneuvers, such as the McRoberts maneuver, to ensure a safe birth for both mother and baby. Therefore, it is essential for healthcare professionals, especially midwives, to enhance their skills in managing shoulder dystocia.
Objective: To provide continuous midwifery care to pregnant women, postpartum women, newborns, neonates, and family planning clients in accordance with midwifery service standards.
Results: Continuous midwifery care provided to Mrs. Y, starting from 38+6 weeks of gestation with a normal pregnancy, through childbirth, postpartum, family planning, newborn, and neonatal care at Puri Adisty Clinic, has implemented complementary care according to midwifery service standards.
Conclusion: Overall, continuous midwifery care from the third trimester of pregnancy, where there were issues that were appropriately managed, during childbirth according to midwifery service standards, proceeded well.
Keywords: Continuous Midwifery Care, Shoulder Dystocia, McRoberts Maneuver

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