

GAMBARAN PERAWATAN TALI PUSAT DENGAN KASSA KERING STERIL DAN LAMA PELEPASAN TALI PUSAT DI RB AMANDA, GAMPING, SLEMAN, YOGYAKARTA

Yuraida Arifiyani¹, Alfie Ardiana Sari²

INTISARI

Latar Belakang: (WHO) menemukan jumlah kematian bayi sebesar 560.000/1000 kelahiran hidup, yang disebabkan oleh infeksi tali pusat dan setiap tahunnya ada empat juta bayi meninggal pada periode neonatal. Data Survey Demografi Kesehatan Indonesia (2012) AKB di Indonesia adalah 32/1000 kelahiran hidup, diantaranya 19/1000 kelahiran hidup terjadi pada masa neonatal. Provinsi DIY pada tahun 2011 terdapat 311 kasus kematian bayi. Pada tahun 2012 terdapat Angka Kematian Bayi sebesar 25/1000 kelahiran hidup (Dinkes DIY, 2012). Sebanyak 57,1 % disebabkan oleh tetanus, sepsis, dan infeksi. Infeksi tali pusat dapat dihindari dengan perawatan tali pusat yang baik dan benar. *World Health Organization* (WHO) merekomendasikan perawatan tali pusat berdasarkan prinsip-prinsip aseptik dan kering, serta tidak lagi dianjurkan menggunakan alkohol.

Tujuan: Mengetahui gambaran perawatan tali pusat dan lama pelepasan tali pusat di RB Amanda, Gamping, Sleman, Yogyakarta.

Metode: Penelitian ini merupakan penelitian deskriptif. Populasi dalam penelitian ini adalah ibu nifas yang bersalin pada bulan Januari-April, rata-rata berjumlah 53 orang dan selanjutnya akan menjadi responden. Analisis data dengan menggunakan data *univariate*.

Hasil: Gambaran perawatan tali pusat di RB Amanda, Gamping, Sleman, Yogyakarta sebanyak dengan kategori baik sebanyak 40 orang (75,5%), kategori cukup sebanyak 7 orang (13,2%), kategori kurang sebanyak 6 orang (11,3%). Lama pelepasan tali pusat dengan kategori cepat sebanyak 5 bayi (9,4%), normal sebanyak 34 bayi (64,2%), dan lambat sebanyak 14 bayi (26,4%).

Kesimpulan : Perawatan tali pusat dengan kassa kering steril oleh responden di RB Amanda, Gamping, Sleman, Yogyakarta adalah kategori baik sebanyak 40 orang (75,5%). Lama pelepasan tali pusat adalah kategori normal sebanyak 34 bayi (64,2%).

Kata kunci: Perawatan Tali Pusat, Kassa kering steril, Lama pelepasan Tali Pusat

¹Mahasiswa DIII Kebidanan STIKES A.Yani Yogyakarta

²Dosen Prodi DIII Kebidanan STIKES A.Yani Yogyakarta

**THE DESCRIPTION OF UMBILICAL CORD CARE WITH STERILIZED
DRY GAUZE AND LENGTH OF UMBILICAL CORD RELEASE IN
AMANDA MATERNITY HOUSE, GAMPING,
SLEMAN, YOGYAKARTA**

Yuraida Arifiyani¹, Alfie Ardiana Sari²

ABSTRACT

Background: World Health Organization (WHO) figured out fetal mortality rate as many as 560.000/1.000 live births due to umbilical cord infection. There were 4 millions babies died annually during neonatal period. Data from Indonesian Health Demographic Survey (SDKI) in 2012 discovered fetal mortality rate in Indonesia as many as 32 cases / 1.000 live births, of which 19 cases /1.000 live births occurred during neonatal period. In the Special Province of Yogyakarta in 2011, there were 311 cases of neonatal mortality, and 25 fetal mortality rate cases/1.000 live births in 2012 (Health Agency of DIY, 2012). As many as 57,1% derived from tetanus, sepsis, and infection. Umbilical cord many be prevented with appropriate and proper umbilical cor care. WHO suggested umbilical cord care according to the principles of aseptic, dry, and non alcoholic care.

Objective: To unveil the description of umbilical cord care with sterilized dry gauze and length of umbilical cord release in Amanda maternity house, Gamping, Sleman, Yogyakarta.

Method: This was the descriptive study. Population in this study was post natal mothers who delivered babies during January-April as many as 53 respondents. Data analysis applied multi variable method.

Result: The description of umbilical cord care in Amanda maternity house, Gamping, Sleman, Yogyakarta. Was presented as follows; in good category as many as 40 respondents (75,5%), in sufficient category as many as 7 respondents (13,2%), in poor category as many as 6 respondents (11,3%). The length of umbilical cord release; in short category as many as 5 respondents (9,4%), in normal category as many as 34 respondents (64,2%), and in long category as many as 14 respondents (26,4%).

Conclusion: Umbilical cord care with sterilized dry gauze by respondents in Amanda maternity house, Gamping, Sleman, Yogyakarta was in good category as many as 40 respondents. (75,5%). The length of umbilical cord release was in normal category as many as 34 babies (64,2%).

Keywords : Umbilical Cord Care, Sterilized Dry Dauze, Length of Umbilical Cord release

¹ A student of Diploma III Midwifery Study Program of A.Yani High School of Health Science Yogyakarta

²A counseling lecture of Diploma III Midwifery Study Program of A.Yani High School of Health Science Yogyakarta