

ASUHAN KEBIDANAN BERKESINAMBUNGAN

PADA NY M DI UPTD PUSKESMAS TANGEN

SRAGEN

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INTI SARI

Latar belakang : Kehamilan, persalinan, nifas dan bayi baru lahir merupakan suatu hal yang fisiologis, tetapi dalam prosesnya terkadang diiringi dengan gangguan yang dapat mengancam jiwa dan bahkan dapat mengakibatkan kematian pada ibu maupun bayi. Peran Bidan dalam menekan angka kematian pada ibu maupun bayi dengan memberikan pelayanan asuhan kebidanan berkesinambungan atau kontinyu (Continuity of Care) yang menyeluruh mulai dari kehamilan, persalinan, nifas, pelayanan bayi baru lahir, serta pelayanan keluarga berencana.

Tujuan : Menerapkan asuhan berkesinambungan pada Ny. M dari kehamilan hingga nifas sesuai standar KEPMENKES RI NO.938/MENKES/SK/VII/2007.

Metode : Jenis penelitian ini adalah studi kasus, teknik pengambilan data dengan teknik observasi dan wawancara yaitu ibu hamil umur 37^{+4} minggu, instrument yang digunakan adalah pedoman observasi, wawancara dan studi dokumentasi.

Hasil : Berdasarkan pengkajian asuhan kebidanan berkesinambungan pada Ny. M dari asuhan kehamilan dilakukan sebanyak 3 kali kunjungan, asuhan persalinan kala I sampai kala IV berjalan normal dan kemajuan persalinan tercatat dalam lembar observasi dan lembar partografi, asuhan BBL dilakukan sebanyak 3 kali kunjungan dan asuhan nifas dilakukan sebanyak 3 kali kunjungan. Tidak ada data yang mengarah kegawatdaruratan ataupun patologis serta tidak ada kesenjangan antara teori dan praktik.

Kesimpulan : Asuhan Kebidanan Berkesinambungan pada Ny.M telah dilakukan sesuai dengan KEPMENKESRINO.938/MENKES/SK/VIII/2007 tentang standar asuhan kebidanan. Dalam prosesnya tidak terdapat kesenjangan antara teori dan praktik.

Kata Kunci : Asuhan Kebidanan Berkesinambungan, Kehamilan, Persalinan, BBL, Nifas.

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MIDWIFERY CONTINUITY OF CARE FOR MRS. M

IN UPTD PUSKESMAS TANGEN

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ABSTRACT

Background: Pregnancy, childbirth, postpartum and newborn are physiological things, but in the process sometimes accompanied by disturbances that can be life-threatening and can even result in death for both mother and baby. The role of midwives in reducing maternal and infant mortality is by providing comprehensive continuity of care, starting from pregnancy, childbirth, postpartum, newborn care, and family planning services.

Objective: Implement continuous care for Mrs. M from pregnancy to postpartum according to the standard of KEPMENKES RI NO. 938/MENKES/SK/VII/2007.

Methods: This type of research is a case study, the data collection technique is observation and interview techniques, namely pregnant women aged 37+4 weeks, the instruments used are observation guidelines, interviews, and documentation studies.

Results: Based on the assessment of continuous midwifery care in NY. M from pregnancy care was carried out 3 times, delivery care for the first to the fourth stage was normal and progress of labor was recorded in observation sheets and partograph sheets, BBL care was carried out 3 times, and postpartum care was carried out 3 times. There is no emergency or pathological data and there is no gap between theory and practice.

Conclusion: Continuous midwifery care for Mrs. M has been carried out in accordance with KEPMENKESRINO.938/MENKES/SK/VIII/2007 concerning standards of midwifery care. In the process, there is no gap between theory and practice.

Keywords: Continuous Midwifery Care, Pregnancy, Childbirth, BBL, Postpartum.

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