

COMPREHENSIVE MIDWIFERY CARE TO MRS. S GIP0A0 27 YEARS OLD, 37 WEEKS
PREGNANCY IN MIDWIFE PRIVATE PRACTICE E OF SEMARANG

Aviatul Hikmah ¹⁾ Dian NintyasariMustaka²⁾,ErnaKusumawati³⁾
Alviahikmah786@gmail.com

(XII+ 6 chapters + 215pages + 5 appendices)

Background: According to WHO in 2017, there were 500,000 people of Maternal Mortality Rate due to pregnancy or childbirth. In 2017, the first semester of Maternal Mortality Rate in Indonesia reached 1712 live births from the Republic of Indonesia Ministry of Health and the Central Java Health Office, 2017. The data obtained in Central Java in 2017 included 337 live births and Semarang City 23 cases of maternal death. The highest maternal mortality is caused by bleeding, pre-eclampsia, and sepsis. In 2017 the number of IMR in Central Java reached 3,503 live births, and in Semarang, it reached 197 of 26,052 live births, so that the infant mortality rate (IMR) was 7.56 per 1,000 live births, the most common cause of IMR was low body weight.

Objective: This research was to examine midwifery care in the form of case studies at Mrs. S, 27 years old at PMB E.

Method: This research used the 7 steps of the Varney and SOAP midwifery process approach. The assessment was done by looking at the results of subjective and objective data and observing the home visit.

Result: The result of this research was GIP0A0 diagnosis of 38 weeks gestational age, with no complaints, a history of physiological labor followed by physiological puerperium with complaints of the stomach mules in the case received treatment with IEC measures, newborn baby history of babies born with BB: 3000 gr, PB : 48 cm, LD: 31 cm, LK: 33 cm male sex, there is a degree II laceration in the birth canal. The results of research on pregnancy care provided by the theory. In childbirth care there was gaps, in the use of PPE that had not yet complete and also during the help of cal II in the act of defense perineum which should used a cloth that was folded one-third under the buttocks and in the act of accelerating labor using kristeller action that was not recommended to be done. In newborn care, there is no gap, childbirth and family planning had no gap.

Conclusion: The suggestion is that the practice area can improve health services as early detection of complications and reduce MMR and IMR.

Keywords: Pregnancy Midwifery Care, Childbirth, Postpartum, newborn baby, Family Planning (KB)

Reference: 22, 2009-2019

*Student of Diploma III in Midwifery, University of Muhammadiyah Semarang