

ASUHAN KEBIDANAN DENGAN MENOMETRORAGIA DI PUSKESMAS PATI II

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ABSTRAK

Latar Belakang : Menoragia adalah istilah medis untuk perdarahan menstruasi yang berlebihan. Kejadian metroragia di Indonesia bisa menimpa wanita mulai remaja (sudah menstruasi) hingga pre-menopause (menjelang berakhirnya masa menstruasi). Sekitar 20% bisa dialami oleh wanita remaja dan wanita muda.

Metode : Metode penulisan yaitu deskriptif dengan bentuk studi kasus dengan menggunakan pendekatan manajemen kebidanan Hallen Varney yang meliputi pengumpulan data, identifikasi data, identifikasi diagnosa atau masalah potensial, menetapkan kebutuhan segera, perencanaan asuhan kebidanan, pelaksanaan asuhan kebidanan dan evaluasi asuhan kebidanan.

Hasil : Tinjauan kasus asuhan kebidanan pada Ny. P dengan diagnosa medis menometroragia di Puskesmas Pati II Pati. Berdasarkan pengkajian ada indikasi terkena menometroragia. Diagnosa pasien didiagnosis terkena Menometroragia. Melakukan pemeriksaan TTV : KU : Baik, kesadaran : composmentis, Suhu : 36,5°C, Nadi : 82 x/menit, RR : 22 x/menit, TD : 110/70, Vagina : perdarahan berlebih, Fluxus : perdarahan cair. Hasil evaluasi dengan metode SOAP (Subyek, Obyek, Assesment dan Planing) pada pasien menometroragia pada tanggal 21 Januari 2019 yaitu : S : pasien mengatakan masih perdarahan, O : KU : Baik, kesadaran : composmentis, Suhu : 36,5°C, Nadi : 82 x/menit, RR : 22 x/menit, TD : 110/70, Vagina : perdarahan berlebih, Fluxus : perdarahan cair, A : masalah belum teratasi, P : lanjutkan intervensi 1,2,3, dan 4.

Kesimpulan : Puskesmas diharapkan lebih aktif dalam melaksanakan konseling dan kunjungan rumah terhadap pasien berisiko menometroragia. Pentingnya bidan melakukan pendidikan kesehatan tentang menometroragia. Pasien diharapkan mampu mengetahui apa itu menometroragia dan cara penanganannya.

Kata Kunci : Asuhan kebidanan, menometroragia

MIDWIFERY CARE WITH MENOMETRORAGIA IN PUSKESMAS PATI II

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ABSTRACT

Background: Menorrhagia is a medical term for excessive menstrual bleeding. The occurrence of metrorragia in Indonesia can afflict women from adolescence (menstruating) to pre-menopause (towards the end of menstruation). About 20% can be experienced by teenage women and young women.

Methods: Writing method is descriptive in the form of case studies using Hallen Varney's midwifery management approach which includes data collection, identification of data, identification of diagnoses or potential problems, establishing immediate needs, midwifery care planning, implementation of midwifery care and midwifery care evaluation.

Results: Results: An overview of midwifery care cases in Ny. P with medical diagnosis of menometrorragia at Pati II Pati Health Center. Based on the assessment there were indications of menometrorragia. Diagnosis of patients diagnosed with Menometrorragia. Conduct TTV examination: KU: Good, awareness: composmentis, Temperature: 36.5 ° C, Pulse: 82 x / minute, RR: 22 x / minute, TD: 110/70, Vagina: excessive bleeding, Fluxus: liquid bleeding. The evaluation results with the SOAP method (Subject, Object, Assessment and Planing) in menometrorragia patients on January 21, 2019, namely: S: the patient said he was still bleeding, O: KU: Good, awareness: composmentis, Temperature: 36,5 ° C, Nadi : 82 x / minute, RR: 22 x / minute, TD: 110/70, Vagina: excessive bleeding, Fluxus: liquid bleeding, A: problem not resolved, P: continue intervention 1,2,3 and 4.

Conclusion: Puskesmas are expected to be more active in conducting counseling and home visits for patients at risk for menometrorragia. The importance of midwives doing health education about menometrorragia in order to become the patients are expected to be able to know what menometrorragia is and how to treat it.

Keywords: Midwifery care, menometrorragia