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COMPREHENSIVE MIDWIFERY CARE OF MRS. C AT THE AGE OF 32 YEARS OLD AT PUSKESMAS LEBDOSARI SEMARANG

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ABSTRACT

Background: A case of maternal mortality and neonatal mortality in Semarang is raised within these two years. The maternal mortality rate was 17 people in 2020 and 21 people in 2021. Meanwhile, the neonatal mortality rate increased from 112 in 2020 up to 133 in 2021. In Puskesmas Lebdosari, there was no maternal mortality during pregnancy, delivery, and post delivery. However, neonatal mortality was found in 2021 with 3 neonatal mortalities. The midwife is a medical worker who always accompanies mothers during their pregnancy, Childbirth, Puerperium, Newborn, and Family Planning period; also, the family planning program is given continually and healthcare comprehensive as early detection of maternal and neonatal complications. **Research Objective:** To perform comprehensive midwifery care of Mrs. C, at the age of 32 years old, at Puskesmas Lebdosari Semarang. **Methods:** It was a comprehensive case study that descriptively employed 7 steps of Varney and SOAP. The analysis was performed through an interview, physical check-up, and observation. **Finding:** Mrs. C, at the age of 32 years old, G1 P0 A0 pregnancy, childbirth, puerperium, newborn, and family planning ran well. **Conclusion:** Comprehensive midwifery care is a very important form of early detection of either maternal or neonatal symptoms to reduce maternal mortality and neonatal mortality rate.

Keywords: comprehensive, midwifery care.

1. INTRODUCTION

The maternal mortality rate (MMR) in Indonesia was recorded at 177 deaths per 100 thousand live births in 2017. That ratio is already better than the previous dozen years of more than 200 deaths per 100 thousand live births. However, Indonesia's MMR is still the third highest in Southeast Asia. (World Bank, (Lidwina, 2021)). AKI and AKB in Semarang City have increased in the last two years, namely from 2020 to 2021 from 17 AKI people to 21 people, and as many as 112 AKB numbers have increased to 133 [Semarang City Health Profile]. Based on the data obtained from the Lebdosari Health Center, there are no deaths in pregnant, maternity, and puerperal women. However, there have been 3 deaths of babies in the last one year, namely in 2021 (Puskesmas Lebdosari 2022). Continuous upbringing in the author's study related to obstetric services was carried out starting from the III trimester pregnancy from a minimum of 36 weeks of gestational age, childbirth, newborns for 2 weeks, and postpartum 2 weeks until Family Planning at Puskesmas Lebdosari Semarang.

2. RESEARCH METHODS

The method used in this study is descriptive research with a case study (Case Study). The research was conducted in Puskesmas Lebdosari, from May to June 2022. The sample of this study was Mrs. C aged 32 years. The instruments used are observation guidelines, interviews, and documentation studies in the form of Varney's 7-Step Obstetric Care format and SOAP, starting from the period of pregnancy, childbirth, newborns, puerperium, and birth control.

3. RESULTS AND DISCUSSION

1.1. Midwifery Care of Pregnancy

Mrs. C aged 32 years, G1 P0 A0 at the Lebdosari Health Center in Semarang is by the standards of midwifery care. The results of the study conducted on May 18, 2022, Mrs. C experienced discomfort, namely frequent urination, thus making it difficult for mothers to sleep. The overall examination is carried out, namely general examinations, vital signs, and physical examinations, within normal limits. The effort made is to educate them about the discomfort she experiences is physiological in the III trimester pregnancy. The midwife provides



counseling because the head of the fetus has begun to urge the uterus and encourages the mother to do kegel gymnastics. Providing drug therapy plus blood and how to take it. Recommends Adequate rest and sleep, that is, a day's rest of 1-2 hours and at night 6-8 hours. Then explain about the signs of childbirth.

In the third trimester visit, Mrs. C has made 3 examination visits, the care provided is the completeness of data derived from the mother (anamnesis), medical history of past obstetric history, current pregnancy history, contraceptive history, current and past maternal and past medical history and socioeconomic history), general examination, physical examination (head to toe), and obstetric/special examination, supporting examinations, laboratories.

At the time of the study during the III trimester of pregnancy care, Mrs. C complained of frequent urination, especially at night. This is a normal complaint for pregnant women in the III trimester. The care given by the Midwife is to teach how to do kegel gymnastics correctly. This is in line with the results of research from Ziya, H., & Damayanti, I. P. (2021), namely kegel gymnastics can help overcome frequent BAK at night. Kegel gymnastics can be done in as many as 3-4 sets, where in 1 set 10 contractions are carried out and held 10 seconds for each contraction then done every day (Wahyu, 2018). In addition, physiologically Mrs. C's complaints are often BAK as well as the head of the fetus that begins to decrease in pressing on the uterus.

1.2. Midwifery Care of Childbirth

Performed at the gestational age of 40 weeks. On May 31, 2022, at 04.30 WIB Mrs. C began to feel abdominal pain to the waist accompanied by the release of mucus and blood and felt anxious about the delivery process. The care provided is at the time of contraction teaches breathing relaxation techniques and encourages the husband to provide support and support, namely providing prayer, motivation, and reducing pain by giving a light massage to the waist. Encourage mothers to eat and drink to have energy when straining. Childbirth when I last for 11 hours and 30 minutes, when II lasts for 20 minutes, when III lasts for 5 minutes and Kala IV is supervised for 2 hours. The mother gives birth normally without

any complications and complications in the mother and baby. Degree 2 Laceration, The care provided is by the standards of Normal Childbirth Care (APN).

In obtaining the results of the physical examination within normal limits, there is the production of pervaginam in the form of blood and mucus, the presence of pelvic pressure, and the onset of his childbirth (Nurhayati, 2019). The upbringing given is at the time of contractions teaches breathing relaxation techniques. The upbringing given is that at the time of contraction teaches breathing relaxation techniques. Based on research (Nurmaharani, 2020) it was found that there was an influence of the LAMAZE (Respiratory Relaxation) technique on inpartu maternal pain during the active phase I. Encouraging the husband to provide support and support, namely providing prayers, and motivation to reduce anxiety (Sari, W. N. I. (2019) after giving a light massage to the waist with the counterpressure technique, this is in line with research from (Satria, M. (2018) with the results of the study obtained the results of the average decrease in the pain scale after counterpressure massage in maternity mothers during the I active phase is 5.1 (moderate pain) with a standard deviation of 1,210 and a scale of pain minimum 3 (mild pain) as well as a maximum pain scale of 7 (severe pain), Massage direct form such as counterpressure is very effective for treating back pain during labor. Counterpressure can treat sharp pain and provide a pleasant sensation that fights discomfort at the time of contractions or between contractions. The mother gives birth normally in the absence of complications or infiltration.

1.3. Newborn of Midwifery Care

Drying the baby's body while conducting a cursory assessment of skin color, breathing, and movement. Followed by cutting the umbilical cord and Early Breastfeeding Initiation (IMD). After successful supervision of Kala IV and IMD, care was carried out on newborns in the form of anthropometric examinations, physical examinations, administration of eye ointments, injection of vit. K and HB O immunization. Male sex, body weight 4300 grams, body length 50 cm, head circumference 36 cm, chest circumference 37cm, there are no signs of congenital defects and airworthiness in babies. Neonates visits were carried out three times, namely visit I (K1)



providing counseling about newborn care, umbilical cord care, and providing support so that mothers provide exclusive breastfeeding. K2's visit reminded Mrs. C of giving exclusive breastfeeding to her baby. K3's visit recommends going to the health center to obtain immunizations and monitor the growth and development of the baby. During the upbringing of neonates, the baby is in a normal state, and the umbilical cord on the 9th day is already detached.

IMD was successfully performed. After 1 hour IMD is given a dose of 1% eye ointment, Vitamin K, as well as the administration of injecting HB0 30 minutes after giving Vitamin K, this is in line with the recommendations of (IDAI 2017) namely the first HB vaccine (monovalent) is best given within 12 hours after birth and preceded by the administration of vitamin K1 injections at least 30 minutes before. The schedule for administering monovalent HB vaccines is 0.1, and 6 months of age. Another study said that mothers who have a positive attitude but give birth to babies with more weight, namely with a body weight of 4300 grams, this is because the mother's weight gain also increases a lot during pregnancy. After all, the food consumed by the mother is not controlled (Aisyah, 2018).

Followed by neonatal visits as many as 3 times, namely at 6 hours, days 6, and 2 weeks with the results of good general conditions, active movements, babies crying strongly, encouraging mothers to give exclusive breastfeeding, umbilical cords are released on the day too, drying the baby in the morning for 10-15 minutes, encouraging mothers to monitor the growth and development of the baby using each immunization schedule to the puskesmas or posyandu.

A normal newborn is a newborn at an even gestational age of 37-41 weeks, with a presentation of the back of the head or the location of the breach that passes through the vagina without wearing a device. (Tando, Naomy Marie, 2016). According to (Tando, 2016) Characteristics of Normal Newborns, namely Weight 2,500-4,000 grams, Body length 48-52, Chest circumference 30-38, Head circumference 33-35, Heart frequency 120-160 times/minute, Breathing \pm 40-60 times/minute, Skin is reddish and less because the subcutaneous tissue is sufficient, Lanugo hair is not visible, the head hair has been perfect, Nails are rather long and limp, Genitalia : in women labia, Majora already covers

the labia minora, and in males, the testicles are already down and the scrotum is already there, the suction and swallowing reflexes are well formed, the Moro Reflex or hugging motion if startled is good, the grasp or grasping reflex is good. While on By. Mrs. C was born with a body weight of more than 4300grams.

1.4. Midwifery Care of Puerperium

Performed according to obstetric care standards. At 6 hours postpartum, the mother complains of feeling a little pain and weakness after giving birth to her baby, the care provided is to advise the mother to stay in the most comfortable and rested position and recommend not to move much first. Subsequent monitoring, carried out home visits or to health centers and vital sign examinations, involution supervision through high examination of uterine fundus, contractions, and lochea then continued with counseling on patterns of fulfilling nutrition, fluids, rest, elimination, personal hygiene, exclusive breastfeeding, puerperal gymnastics, and family planning (KB). During the visit, no complications and complications were found, Mrs. C. Uterine's involution proceeded normally without any accompanying complications during the puerperium, good contractions, no abnormal bleeding, breast milk came out smoothly, lochea discharge was normal.

According to Mothe (2020), There is a linear relationship between early activity and perineal wound healing. Good initial activity leads to better healing of the perineal, but poor activity leads to poor healing of perineal wounds. Based on research from Fauzi, S. (2021) with the results that there is a relationship between cultural factors and perineal wound healing during childbirth, there is a relationship between personal hygiene and wound healing in the perineum in the puerperium, and there is a relationship between nutrition and perineal wound healing in the puerperium.

Suksesty (2018) stated that there is a relationship between personal hygiene and the wound healing process that occurs in the mother's body with poor personal hygiene is 6 times more likely to experience perineal scarring compared to mothers with good personal hygiene, in other words, mothers who lack personal hygiene are at risk of experiencing episiotomy scars longer.



1.5. Family Planning of Midwifery Care

The midwife gave an IEC about non-hormonal and toolless birth control, but in the end, Mrs. C chose 3-Month Injectable Birth Control according to the agreement with her husband. On Mrs. C the care given is by the standards of obstetric care. Mrs. C decided to use the 3 Month Birth Control Injection so as not to affect her milk and had an agreement with her husband. The care given is to give the Mother an IEC about injecting 3 Months of birth control, how it works, and side effects, with a dose of 3ml, injected im in one-third of the mother's strategy.

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4. AUTHORS CONTRIBUTIONS

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