

**POLITEKNIK KESEHATAN KEMENKES BANDUNG PROGRAM STUDI
KEBIDANAN BOGOR LAPORAN TUGAS AKHIR, JULI 2021**

Cici Sagita

NIM : P17324218051

**Asuhan Kebidanan Intranatal Pada Ny. N, 34 tahun G5P4A0 di PMB Bd S
22 Kepustakaan, VI BAB, 65 halaman, 6 lampiran, 10 gambar**

ABSTRAK

Hasil Survei Antar Sensus (SUPAS) Angka Kematian Ibu (AKI) 305 per 100.000 kelahiran hidup. Jawa barat 2019 AKI 74,19 per 100.000 kelahiran hidup, kemudian Kota Bogor 2018 AKI 56,83 per 100.000 kelahiran hidup. Menkes menyatakan faktor yang berkontribusi meningkatnya risiko angka kematian ibu yaitu 4 terlalu (4 T) terlalu hamil terlalu muda (<16 tahun),hamil terlalu tua (>35 tahun), jarak terlalu dekat (<2 tahun),terlalu banyak anak (lebih dari 4 kali). Risiko tinggi ini akan yang mengakibatkan. komplikasi pada ibu maupun janin. ibu bisa mengalami pendarahan, ruptur uteri. Janin prematur, kematian janin.Tujuan penulisan Laporan Tugas Akhir ini adalah mempelajari dan memahami serta mengaplikasikan asuhan kebidanan intranatal.

Metode yang digunakan dalam penyusunan Laporan Tugas Akhir ini adalah Laporan kasus dengan pendokumentasian secara sistematis mulai dari data Subjektif, Objektif, Analisa, dan Penatalaksanaan, Sedangkan teknik pengumpulan data diperoleh melalui wawancara, pemeriksaan fisik dan observasi, studi dokumentasi, dan studi literatur.Data subjektif yang di dapatkan Ny. N usia 34 tahun G5P4A0 Gravida 40 Minggu, HPHT 30 Juni 2021, mengeluh mulasmulas, sudah keluar lendir darah, belum ada rasa ingin mencedan. Data Objektif TFU 2 jari dibawah px (32 cm) teraba bokong di fundus, PUKA, bagian terendah kepala. Divergen 2/5. DJJ 148x/menit teratur/irregular. His 4x/10'40'' adekuat, kandung kemih kosong, vulva vagina tidak ada kelainan, terdapat pengeluaran lendir darah, portio tipis lunak, pembukaan 6 cm, selaput ketuban utuh (+), penurunan kepala Hoodge III+. Analisa Asuhan Kebidanan Intranatal Ny.N usia 34 tahun G5P4A0 gravida 40 minggu Sehingga penatalaksanaan mendampingi dan memberi dukungan,serta melakukan APN, manajemen aktif kala III, dan pemantauan Kala IV.

Kesimpulan hasil asuhan yang di dapat tidak ada komplikasi, sehingga ibu dan bayi dalam keadaan sehat. Saran yang diberikan adalah menjaga kesehatan, anjuran untuk berKB.

Kata Kunci : Asuhan Persalinan, Persalinan

Pustaka : 22 (2008-2019)

**POLYTECHNIC OF HEALTH, BANDUNG, BOGOR MIDWIFERY STUDY PROGRAM
FINAL PROJECT REPORT, JULI 2021**

Cici Sagita

NIM : P17324218051

***Intranatal Midwifery Care to Mrs. N, 34 years old G5P4A0 in PMB Bd S
22 Literatures, VI Chapters, 65 Pages, 11 Attachments.***

ABSTRAK

Results of the Intercensus Survey (SUPAS) Maternal Mortality Rate (MMR) is 305 per 100,000 live births. West Java 2019 AKI 74.19 per 100,000 live births, then Bogor City 2018 AKI 56.83 per 100,000 live births. The Minister of Health stated that the factors that contributed to the increased risk of maternal mortality were 4 too (4 T), too pregnant too young (<16 years old), too old to be pregnant (>35 years old), too close distance (<2 years), too many children (more than 4 times). This high risk will result. complications for both mother and fetus. the mother may experience bleeding, uterine rupture. Premature fetus, fetal death.

The purpose of this final report is to study, understand and apply intranatal midwifery care. The method used in the preparation of this final project is a case study with documentation systematically ranging from subjective, objective, analysis, and management. While the data collection techniques were obtained through interviews, physical examinations and observations, documentation studies, and literature studies. Subjective data obtained by Mrs. N 34 years old G5P4A0 Gravida 40 Sunday, HPHT June 30, 2021, complains of heartburn, has blood mucus, no sense of wanting to push. Objective Data TFU 2 fingers below px (32 cm) palpable buttocks at fundus, PUKA, lowest part of head. Divergent 2/5. FHR 148 beats/minute regular/irregular. His 4x/10'40" is adequate, bladder is empty, vulva vagina is not abnormal, there is blood mucus discharge, thin soft portio, 6 cm opening, membranes intact (+), decreased head of Hoodge III+. Analysis of Intranatal Midwifery Care Mrs. N aged 34 years G5P4A0 40 weeks gravida So that management assists and provides support, performs APN, active management of the third stage, and monitoring of the fourth stage.

The conclusion of the care that was obtained was that there were no complications, so that the mother and baby were in good health. The advice given is to maintain health, recommendations for family planning.

Keywords : Delivery Care, Delivery

Bibliography : 22 (2008-2019)