

POLITEKNIK KESEHATAN KEMENKES BANDUNG

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Bilqis Az Zahrah

NIM : P17324220010

Asuhan Kebidanan Kehamilan pada Ny.Y usia 29 tahun G2P1A0 hamil 35 minggu dengan Anemia Ringan dan Ketidaknyamanan Sering BAK di Puskesmas Leuwiliang

VI BAB, 60 halaman, 10 lampiran, 0 gambar, 1 tabel

ABSTRAK

Anemia dalam kehamilan adalah kondisi ibu dengan kadar Hb <11 gr% pada trimester I dan III, sedangkan pada trimester II kadar Hb <10,5 gr%. Anemia merupakan kondisi kekurangan sel darah merah. Apabila jumlah sel darah merah berkurang asupan oksigen dan aliran darah menuju otak juga semakin berkurang. Selain itu, sel darah merah juga mengandung hemoglobin (Hb) yang berfungsi membawa oksigen ke seluruh jaringan tubuh. Anemia dapat menyebabkan berbagai komplikasi pada ibu dan janin, diantaranya perdarahan, infeksi, pertumbuhan janin terhambat, dan BBLR. Pada kehamilan trimester III juga terdapat ketidaknyamanan yang terjadi seperti sering BAK. Sering BAK dapat mengganggu aktivitas dan waktu istirahat ibu. Tujuan penulisan Laporan Tugas Akhir ini adalah untuk mempelajari dan memahami asuhan kebidanan khususnya pada kehamilan dengan anemia ringan dan sering BAK.

Metode yang digunakan adalah laporan kasus. Jenis pendokumentasian SOAP (Subjektif, Objektif, Analisa, dan Penatalaksanaan). Teknik pengumpulan data melalui wawancara, pemeriksaan fisik, observasi, studi literatur, dan studi dokumentasi.

Hasil pengkajian data subjektif pada Ny.Y usia 29 tahun hamil 35 minggu dengan keluhan sering BAK, hamil anak kedua, belum pernah keguguran. Data objektif KU baik, kesadaran compos mentis, TTV dalam keadaan normal, wajah dan kongjativa tidak pucat, TFU 27 cm, TBJ 2.325 gr, DJJ 136 x/menit, teratur, Hb 10,9 gr/dl. Analisa Ny.Y usia 29 tahun G2P1A0 hamil 35 minggu dengan anemia ringan dan sering BAK. Penatalaksanaan yaitu konseling nutrisi, pemberian tablet Fe dan cara minum, mengatur pola minum, menjaga kebersihan diri, tanda bahaya kehamilan, cek ulang Hb, dan bersalin di RS.

Kesimpulan yaitu pengkajian data subjektif dan objektif sudah dilakukan sesuai teori, namun untuk penegakan analisa anemia ringan hanya melalui pemeriksaan Hb. Penatalaksanaan yang diberikan sesuai teori. Saran untuk bidan melakukan pemantauan kadar Hb serta konseling pola nutrisi. Saran untuk klien melakukan kunjungan ulang ANC dan bersalin di RS.

Kata kunci : Anemia Ringan, Sering BAK, Hb

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HEALTH POLYTECHNIC OF THE MINISTRY OF HEALTH BANDUNG
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Bilqis Az Zahrah

NIM: P17324220010

Obstetric Care of Pregnancy in Mrs.Y age 29 years G2PIA0 35 weeks of gestation with Mild Anemia and Frequent Urination at Puskesmas Leuwiliang

VI CHAPTERS, 60 pages, 10 appendices, 0 images, 1 table

ABSTRACT

Anemia in pregnancy is a maternal condition with Hb levels of <11 gr% in the first and third trimesters, while in the second trimester Hb levels <10.5 gr%. Anemia is a condition of lack of red blood cells. If the number of red blood cells decreases, oxygen intake and blood flow to the brain also decrease. In addition, red blood cells also contain hemoglobin (Hb), which carries oxygen to all body tissues. Anemia can cause various complications in the mother and fetus, including bleeding, infection, intrauterine growth restriction, and low birth weight. In the third trimester of pregnancy that occurs such as frequent urination. Frequent urination can interfere with the mother's activities and rest time. The purpose of writing this Final Project Report is to study and understand obstetric care, especially in pregnancies with mild anemia and frequent urination.

The method used is a case report. Types of SOAI documentation (Subjective, Objective, Analysis, and Implementation). Data collection techniques through interviews, physical examinations, observations, literature studies, and documentation studies.

The results of the subjective data review on Mrs.Y aged 29 years pregnant 35 weeks with complaints of frequent urination, pregnant with a second child, never miscarried. Objective data: vital signs in normal conditions, face, and conjunctiva are not pale, TFU 27 cm, TBJ 2,325 gr, DJJ 136 x / minute, regular, Hb 10.9 g / dl. Analysis of Mrs.Y age 29 years G2PIA0 pregnant 35 weeks with mild anemia and frequent urination. Management is nutritional counseling, giving Fe tablets and how to drink, regulating drinking patterns, maintaining personal hygiene, danger signs of pregnancy, re-checking Hb, and giving birth at the hospital.

The conclusion is that the study of subjective and objective data has been carried out according to theory; but for the enforcement of mild anemia analysis only through Hb. Management examination is given according to theory. Advice for midwives to monitor Hb levels and counsel nutrition patterns. Advice for clients to make ANC revisits and maternity in hospitals.

Keywords: *mild anemia, frequent urination, hb*

Bibliography: 49 (2013-2023)