

SUSTAINABLE MIDWIFE CARE MANAGEMENT (Continuity Of Care) AT NY.N WITH GRADE II PERINEUM RUPTURE AT PMB AZRI YANI KEC.DELI TUA KAB.DELI SERDANG FIELD CITY IN 2024

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ABSTRACT

According to WHO in 2019, the maternal mortality rate (MMR) in the world is 303,000, the maternal mortality rate (MMR) in ASEAN is 235 per 100,000 live births. According to the Indonesian Demographic and Health Survey Data, the Maternal Mortality Rate (MMR) is 305 per 100,000 live births and the Infant Mortality Rate is 24 per 1000 live births. The number of maternal deaths in Indonesia in 2020 was 4,627 deaths and in 2021 the number of maternal deaths increased by 7,389 deaths. Based on the data obtained in North Sumatra, the maternal mortality rate is 119 cases for infant mortality is 299 cases. To reduce MMR and IMR, midwifery care management can be carried out to solve problems from assessment, identification of problems and needs, anticipation of potential problems, immediate action, planning, implementation, and evaluation. In addition, Continuity Of Care (COC) is an effort to provide continuous care starting from pregnancy, childbirth, postpartum, newborn and family planning. This care aims to monitor the condition of mothers and babies as an effort to reduce maternal mortality rates (MMR) and infant mortality rates (IMR). The type used is a case study or Case Study, which is an observational study to obtain an overview of health phenomena or current cases related to life, especially in context boundaries and phenomena that are not clear. From the results of research conducted during pregnancy, childbirth, newborn, postpartum to family planning, there were no gaps in the provision of care. Midwifery care is carried out to overcome the patient's complaints, namely pain in the waist by providing health services, by encouraging the mother to have adequate rest patterns by resting when feeling tired, encouraging the mother to take a 1-2 hour nap and 7-8 hours of sleep at night and to reduce activities that are too heavy, during the postpartum period and after the postpartum period the mother did not experience any complaints, all normal, there were no complications during the postpartum period. Monitoring of newborns is also done to find out if there are abnormalities in the baby. the use of maternal contraceptives with the MAL method.

Keywords: *Pregnancy, childbirth, postpartum, newborn, family planning*

INTRODUCTION

Health development carried out on an ongoing basis can improve the degree of public health where the objectives of health development with health system performance have been demonstrated by improving health status, namely reducing the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR). However, health improvement indicators have not been achieved as expected, so with the Sustainable Development Goals (SDGs) where one of the goals is to reduce the

Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) according to the SDGs target in 2030. Where the Maternal Mortality Rate (MMR) reaches 70 per 100,000 live births and the Infant Mortality Rate (IMR) reaches 12 per 1000 live births (Goals, 2019).

According to the Law of the Republic of Indonesia No.4 of 2019 concerning midwifery with general provisions, midwifery is everything related to midwives in providing midwifery services to women during the period before

pregnancy, pregnancy, childbirth, postpartum period, newborns, and family planning that Health services to the community, especially women, babies, and children carried out by midwives in a responsible, accountable, quality, safe, and sustainable manner are still faced with professional constraints, competence and authority.

The standard antenatal care (ANC) service is made for pregnant women to have instructions in improving the quality of antenatal care services by complying with the 10T Antenatal Care (ANC) service standards, namely measuring weight and height, measuring blood pressure, measuring fundus height, giving complete TT (Tetanus Toxoid) immunization, giving FE (Iron) tablets at least 90 tablets during pregnancy, determining fetal presentation and fetal heart rate (DJJ), laboratory tests and case management (Kemenkes RI, 2022).

The standard for normal childbirth refers to 60 steps of normal labor care according to the standard, which is carried out in health services with at least two helpers consisting of a doctor and midwife or two midwives, or midwife and nurse. The stages in the normal or vaginal delivery process as a whole consist of 4 stages, namely kala 1 (cervical opening) starting from the time labor begins or (zero opening) until complete opening (10 cm) Kala 2 (fetal expulsion) kala 3 (placenta release) kala 4 (supervision). (Ministry of Health of the Republic of Indonesia, 2020).

Health services to postpartum women are carried out in order to detect postpartum complications early by conducting a minimum of three visits

(complete KF) as recommended by the health service, the first visit or to (KF1) at 6 hours after delivery up to the third day, the second visit or (KF2) on the fourth day up to the 28th day, the third visit or (KF3) on the 29th day up to the 42nd day after delivery (Kemenkes RI, 2021).

Indicators that describe health efforts made to reduce the risk of death in the neonatal period, newborn health services neonatal age babies are said to have received a complete neonatal visit if they have received at least three visits. Once at the age of 6 to 48 hours (KN1), once at the age of 3 to 7 days (KN2), one visit at the age of 8 to 28 days. The family planning (KB) program is an important program to improve the welfare of women with the aim of improving the health status of mothers and the reproductive quality of every mother who uses active contraception aims to delay, span, and end fertility (Kemenkes RI, 2021).

From the results of the preliminary survey that research was conducted at the Independent Practice of Midwife Azri Yani in Deli Tua sub-district, Deli Serdang Regency, Medan city in 2023 and had asked permission to conduct research at the clinic. On September 30, 2023 when the researcher conducted a research survey, the number of pregnant women who made ANC visits from January was found to be 120 pregnant women. Then the number of deliveries to date is 85 people giving birth vaginally and 9 people are referred with a diagnosis of 5 people long partus and 4 people with other indications. All women who delivered at the center had postpartum visits and LBW visits. Some postpartum women choose not to use contraceptives so the total number of women using family planning in this place is 145.

METHOD

The method used for comprehensive care on Mrs. N is descriptive research, which systematically describes a phenomenon as it is. The type used is a case study or case study, which is an observational study to obtain a description of health phenomena or current cases related to life, especially at the limit of context and unclear phenomena. In this case, the author wants to describe the management of midwifery care 7 Steps Helen Varney and SOAP on Mrs. N.

Population is the entire object of research. The population in this study were pregnant women TM III who visited the Independent Practice of Midwife Azri Yani Kec.Deli Tua Kab.Deli Serdang Medan city in 2023. The sample is part of the number and characteristics possessed by the population. So in this study the sample was pregnant women TM III.

This research was conducted at the Independent Practice of Midwives with Continuity of Care at the Independent Practice of Midwives Azri Yani, Deli Tua District, Deli Serdang Regency, Medan City in 2023. Data collection techniques are the methods used by the author in collecting his research data. This method is by questionnaire, interview, observation or observation and documentation (Hikniawati 2020).

The implementation of the research began with the study of the research title, consultation with the supervisor, data collection, research implementation and research results carried out in September 2023 - January 2024.

RESULT AND DISCUSSION

Based on the management of continuous midwifery care that has been given to Mrs.N starting from third trimester pregnancy, delivery, postpartum, newborn, to family planning which aims to improve the quality of midwifery services in Indonesia by using the approach of continuity of care. This care will also indirectly greatly affect the suppression of MMR in Indonesia so that it can be in accordance with what is expected. In this chapter the author presents a discussion by comparing the theory with midwifery care management during pregnancy, childbirth, postpartum, newborn, and family planning applied to Mrs. N in the Independent Practice of Midwife Azri Yani Kec.Deli Tua.

In the case of Mrs.N G1P0A0, her pregnancy lasted for 39 weeks, where HPHT was March 17, 2023 and TTP was December 24, 2023. During pregnancy Mrs.N did ANC examination 6 times, 2 times in TM I, 1 time in TM II and 3 times in TM III. ANC examination is in accordance with the standard of service, which is a minimum of 6 examinations during pregnancy, at least 2 examinations by a doctor at TM I and III. Twice in TM I (pregnancy up to 12 weeks), once in TM II (pregnancy above 12 weeks to 26 weeks), three times in TM III (pregnancy above 26 weeks to 40 weeks) (Latest MCH Book 2020).

This means that Mrs. N always checked her pregnancy at the health worker according to the schedule. ANC examination is very important in terms of assessing the health and well-being of the baby as well as the opportunity to obtain information and provide information for mothers and health workers. For this reason, midwives and other health workers need to carry out comprehensive midwifery care so that pregnancy and babies are born normal and there are no pathological signs. ANC visits on Mrs.N at the Independent

Practice of Midwife Azri Yani Kec.Deli Tua were carried out 3 times in TM III. The first visit was conducted on September 30, 2023 at the gestational age of 28 weeks 2 days at this visit the mother complained of low back pain. The second visit was carried out on October 21, 2023 at 32 weeks 2 days gestation, at this visit the mother had no complaints. The third visit was conducted on December 10, 2023 with a gestational age of 38 weeks 2 days at this visit the mother had no complaints the same visit as the second visit.

At the first visit on September 30, 2023 at 28 weeks 2 days gestation, the mother complained of low back pain. Low back pain experienced by pregnant women TM III is one of the physiological things, this is caused by the size of the uterus that has increased, so that the uterus enlarges towards the outside of the upper door of the pelvis towards the abdominal cavity To overcome the low back pain, the midwife has provided IEC by encouraging the mother to get enough rest by resting when she feels tired, encouraging the mother to take a 1-2 hour nap and 7-8 hours of sleep at night and to reduce activities that are too heavy. Based on the results of the assessment and examination of Mrs.N, it is concluded that Mrs.N's pregnancy is a Physiological pregnancy, things that are done starting from data collection with anamnesa, general examination including BP 110/70 mmhg, N 82x/i, temperature 36.5 °C, P 20 x/i, body weight 53 kg, LILA 25 cm and Leopold is done to determine gestational age and TFU 25 cm, right back,

DJJ 140 x/i, head presentation, has not entered PAP, the examination results are within normal limits.

At the second visit on October 21, 2023, the gestational age of 32 weeks 2 days in Mrs. N was measured at 55 kg and 150 cm height, BP 110/70 mmhg, N 80x/i, P 20x/I, temperature 36.9 °C then determined the nutritional status of pregnant women with the results of BMI 23.55 (normal category). The nutritional status of the mother before and during pregnancy can affect the growth of the fetus in the womb. If the mother's nutritional status is normal before and during pregnancy, it is likely that she will give birth to a healthy, full-term baby with a normal weight. At the third visit, an examination was carried out on pregnant women on December 10, 2023, gestational age 38 weeks 2 days at this visit the mother had no complaints, the midwife examined BB 58 kg, TB 150 cm, LILA 26 cm, BP 120/70 mmhg, N 80x/i, R 21x/i, Temperature 36.8 °C, DJJ 140x/i, TFU 33 cm, the head had entered PAP, the condition of the mother and fetus was good, there were no abnormalities, no laboratory tests were performed, so from the results of the examination there was a gap between theory and practice because no physical examination of pregnant women with 10 T.

Labor is the process of discharge of the fetus, placenta and amniotic fluid out of the uterus through the birth canal with full term gestation (more than 37 weeks) without complication. Childbirth is characterized by contractions of the uterus, discharge of mucus mixed with blood from the mother's vagina, and opening of the cervix (Walyani, 2022).The author concludes that the signs of labor experienced by Mrs.N are in accordance

with the existing theory so that there is no discrepancy between theory and practice.

The client complains of pain and pain at the bottom of the waist radiating to the stomach, which is then followed by increasingly frequent contractions. On December 20, 2023 at 05:00 pm an internal examination was performed with the results of vulva no abnormalities appearing out of mucus mixed with blood there are no wounds in the vagina, thin posio, opening 2 cm, intact / unbroken amniotic fluid, and there is a head presentation. The midwife informed the results of the examination to the patient and family, the midwife advised the patient to walk around or squat to help speed up the opening, the patient was advised to go home first.

Period 1 to period 2 experienced by Mrs. N lasted up to 12 hours, namely from 05:00 - 14:50 WIB. The length of kala 1 for primigravida lasts for approximately 12 hours while multigravida is about 8 hours (WHO). The author sees that Mrs. N's kala 1 lasted normally due to good contractions, normal fetal position in the uterus, and Mrs. N's normal birth canal. So the author concludes there is no gap between theory and practice. Period 2 experienced by Mrs. N lasted for 50 minutes in accordance with WHO theory states that in primigravida it lasts 2 hours and multigravida lasts 1 hour, it is concluded that there is no gap between theory and practice.

The baby was born normally at 2:50 pm immediately cried 3200 grams, 49 cm PB, male sex. The author argues that Mrs. N's labor process went smoothly because the client's labor process was always monitored according to the pathograph, the patient's activeness always followed the author's and midwife's suggestions as an effort to help facilitate the labor process. Mrs. N labor process the baby was born at 2:50 pm, the placenta was born at 15:05 pm so that kala 3 lasted for 15 minutes, this is in accordance with WHO the placenta is born 15 minutes to 30 minutes after the baby is born and comes out spontaneously. So there is no gap between practice and theory. The signs of placental detachment in Mrs. N are the rounded abdomen, the umbilical cord increases in length, and a sudden burst of blood.

The mother said she still felt a little nauseous and had defecated once the pain experienced was caused by uterine contractions which usually lasted 2-3 days postpartum. At the 6-hour postpartum visit to Mrs. N, the results of the physical examination were obtained, namely the mother's condition was good, uterine contractions were good, TFU 2 fingers below the center, round and hard consistency, rubra lochea. The postpartum period was visited 4 times, namely 6 hours postpartum, 6 days visit, 2 weeks visit, and 6 weeks visit. In addition to conducting physical examinations, the author also provided counseling such as personal hygiene, adequate nutrition for breastfeeding mothers, breast care and family planning information.

Mrs. N baby was born normal with the male sex crying strong, active movements good rooting reflex, normal breathing 34x/i, heart rate 120x/i. After a physical examination of the newborn, IMD is carried out for 1 hour after the baby is born to avoid hypothermia in the baby, stabilize the heart rate and breathing in the baby and create a closer affection between mother and baby. After one hour after the baby is born, give vit K injection, eye ointment and physical examination. All newborns should be immunized with vit K 1mg intramuscularly on the left thigh, the purpose is to prevent bleeding in infants, after one hour of vit K administration then continue with the administration of Hb0 on the right thigh, the purpose is to prevent hepatitis in infants.

Family planning care aims to provide an overview to clients about contraceptive methods that can be used. Choosing the right contraceptive will help married couples to avoid unwanted pregnancies, regulate pregnancy spacing, and determine the number of children in the family. In this case Mrs. N has chosen the contraceptive that she will use, namely MAL so that the care provided focuses on MAL contraception. Counseling given to mothers includes how to use, benefits and failures. Counseling is a communication process between a person (counselor) and another person (patient). The counseling given to Mrs. N aims to increase individual effectiveness in making the right decisions.

CONCLUSION

In carrying out this case study the author has provided comprehensive midwifery care to clients from pregnancy to birth control. Care that has been given to clients are: Midwifery care during pregnancy in Mrs.N has been given but not in accordance with the standard 10 T in Independent Practice Midwife Azri Yani So there is a gap between theory and practice. Midwifery care in maternity has been carried out on Mrs.N giving birth normally male sex, B 3400 grams, PB 49 cm, the baby cries strongly and moves actively. Midwifery care in the postpartum period of Mrs.N went well, the mother did not experience danger signs in the postpartum period. Mother wants to carry out the recommendations that have been given for maternal health in the puerperium.

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