MATERNITY NURSING CARE MANAGEMENT WITH EXCELLENT SERVICE FOR MRS.A WITH SECOND-TRIMESTER HYPERTENSION AT PERA CLINIC, MEDAN TUNTUNGAN DISTRICT NORTH SUMATRA PROVINCE, IN 2025

Yuniata[1], Imran Saputra Surbakti[2], Furi Estie Honez[3], Laura Fransiska Lumban Gaol[4], Listra Maretta Br Brahmana[5], Merdu Zamili[6], Toga Adi Putra Sinaga[7]

[1-7] Sekolah Tinggi Ilmu Kesehatan Mitra Husada Medan

E-mail: 2219144062@mitrahusada.ac.id, imransurbakti@mitrahusada.ac.id, furistie@mitrahusada.ac.id, 2319144045@mitrahusada.ac.id, 2419144051@mitrahusada.ac.id, 24192018402@mitrahusada.ac.id, togaputra@mitrahusada.ac.id

ABSTRACT

Background: Hypertension during pregnancy remains a major obstetric complication, contributing significantly to maternal and fetal morbidity and mortality. In the primary care setting, standardized yet empathetic care is essential for early detection and prevention. **Objective:** This case study aims to implement and analyze a maternity nursing care management model based on "Service Excellence" for Mrs. A, a pregnant woman diagnosed with hypertension during her second trimester. **Methods:** The study was conducted at Pera Clinic, Medan Tuntungan, North Sumatra, using a longitudinal nursing process approach. This included a comprehensive clinical assessment, nursing diagnosis formulation, evidence-based care planning, implementation, and systematic evaluation. The "Service Excellence" framework focused on professionalism, responsiveness, and empathetic communication. **Results:** The application of service-excellence nursing care resulted in improved clinical monitoring of blood pressure, enhanced patient health literacy, and high patient satisfaction. Furthermore, the collaborative approach helped in maintaining blood pressure stability and preventing progression toward preeclampsia. **Conclusion:** This study highlights that professional, collaborative, and responsive nursing services are vital in managing hypertensive disorders in pregnancy. Such a model directly supports the Sustainable Development Goals (SDGs) by contributing to the reduction of maternal mortality through high-quality, patient-centered care.

Keywords: *Hypertension in Pregnancy; Maternity Nursing; Service Excellence; Maternal Mortality; Second Trimester*

Introduction

One of the main goals of the Sustainable Development Goals (SDGs) related to hypertension during the second trimester of pregnancy is Goal 3: Ensure healthy lives and promote Wellbeing for all at all ages (Sinaga, SN, 2022). Target 3.1 emphasizes the importance of reducing the maternal mortality rate to less than 70 per 100,000 live births by 2030. This is highly relevant, as pregnancy-induced hypertension, including preeclampsia and eclampsia, is one of the leading causes of maternal (Kementrian Kesehatan, 2023). Complications and death. Proper management of hypertension can help

reduce these risks (Herawati et al., 2020). Target 3.2 aims to end preventable deaths of newborns and children under five. Hypertension during pregnancy can lead to fetal growth restriction and perinatal death, making its management vital to achieving this target. Target 3.3, which relates to universal health coverage, stresses the importance (F. Situmorang et al., 2021). Pregnancy is a crucial physiological phase in a woman's life cycle, yet it is often accompanied by various health complication risks (Sembiring, A, 2023). One of the most significant complications during pregnancy is hypertension. According to health profiles, hypertension remains a leading cause of maternal morbidity and mortality in Indonesia. When occurring in the second trimester, this condition requires intensive monitoring to prevent progression into preeclampsia, which can endanger both the mother and the fetus.

The management of hypertension in pregnant women requires not only precise medical intervention but also a holistic nursing approach. In the context of modern healthcare, the implementation of Excellent Service has become a primary standard. This aligns with the vision of STIKes Mitra Husada Medan to produce superior health professionals who provide high-quality, innovative services. Excellent service in maternity nursing care encompasses aspects of hospitality, responsiveness, empathy, and comprehensive education, ensuring that pregnant women feel comfortable, valued, and safe during their treatment (Simanjuntak, L, 2024).

Access to quality basic health services. Routine antenatal care (ANC), including early detection of hypertension, is part of these services. Hypertension in the second trimester is defined as a blood pressure of 140/90 mmHg or higher after 20 weeks of pregnancy. (Arikah et al., 2020). It includes four categories: gestational hypertension, preeclampsia, eclampsia, and chronic hypertension with superimposed preeclampsia. Hypertension is one of the most common pregnancy complications, contributing significantly to maternal and fetal morbidity and mortality. It can cause serious complications, such as placental abruption, preterm birth, and even death. Risk factors include maternal age, stress, lifestyle, genetic predisposition, pre-existing conditions like obesity or autoimmune diseases, and inadequate nutrition. According to (Alatas, 2019), maternal mortality is a significant indicator of a nation's health. In Indonesia, hypertensive disorders were one of the top three causes of maternal death. In North Sumatra specifically, 27.2% of pregnant women experienced hypertension, and preeclampsia accounted for 23.7% of maternal deaths. Nursing management using a "service excellence" approach includes thorough assessment, accurate nursing diagnoses, appropriate interventions, and professional, empathetic care. (F. N. S. Situmorang et al., 2025). Early data from Pera Clinic in Medan Tuntungan showed an increase in second-trimester hypertension cases from 30 in 2023 to 45 in 2024. This study focuses on the nursing care management for Mrs. A, a pregnant woman with second-trimester hypertension, following nursing standards and national health regulations. The service integrates nutrition education, vital sign monitoring, rest management, and patient satisfaction — all aligned with the 2025 graduate profile and national health policies (Dayani & Widyantari, 2023).

Mrs. A, a pregnant woman in her second trimester at the T. Pera Clinic, Medan Tuntungan District, has been diagnosed with hypertension. The Medan Tuntungan region, with its diverse demographic

characteristics, necessitates a specific care approach based on local context without compromising clinical standards. The management for Mrs. A requires comprehensive maternity nursing care management, ranging from regular blood pressure monitoring and dietary regulation to stress management through an excellent service approach.

Based on these phenomena, the author is interested in developing a final report titled: "Maternity Nursing Care Management with Excellent Service for Mrs. A with Second-Trimester Hypertension at T. Pera Clinic, Medan Tuntungan District, North Sumatra Province, in 2025." This report is expected to serve as a model for applying nursing care that prioritizes patient satisfaction alongside clinical effectiveness in reducing hypertension risks in pregnant women.

Research Method

Primary Data: Obtained directly from the patient through interviews and observation. **Secondary Data:** Obtained from family members and medical records. Study Location and Subject: This case study was conducted at Pera Clinic in Medan Tuntungan Subdistrict, North Sumatra Province, and at the patient's home (home care) from March 19 to April 28, 2025. The subject was a pregnant woman diagnosed with second-trimester hypertension.

Inclusion Criteria:

1. Diagnosed with hypertension
2. In the second trimester of pregnancy
3. Willing to participate in the study

Exclusion Criteria:

1. Not experiencing hypertension in the second trimester

2. Unwilling to participate in method data collection (survey) and data and data collected tools:

Data Collection Method:

1. Preliminary case study to identify potential subjects
2. Explain the study's purpose and obtain informed consent
3. Interview and assess the patient
4. Perform a physical examination
5. Formulate a nursing diagnosis
6. Plan and implement nursing interventions
7. Evaluate outcomes and document care
8. Compile and submit the final scientific paper

Result

The nursing care was conducted on Mrs. A, a second-trimester pregnant woman diagnosed with hypertension, at Pera Clinic, Medan Tuntungan District, North Sumatra, over three days from April 14 to 16, 2025.

During the initial assessment, the patient presented with complaints of severe headache, dizziness, heaviness in the hands and feet, and elevated blood pressure (170/90 mmHg). Other findings included disturbed sleep and signs of anxiety due to lack of understanding about her condition.

Three primary nursing diagnoses were established:

1. Ineffective peripheral perfusion related to elevated blood pressure

Anxiety related to lack of knowledge. Disturbed sleep pattern related to discomfort and psychological stress
Nursing interventions included:
Monitoring of blood pressure and signs of poor circulation. Health education and emotional support. Environmental adjustments and sleep hygiene education.

After three days of continuous nursing care. The patient's blood pressure stabilized at 140/85 mmHg. Anxiety levels decreased; the patient showed improved emotional response and better understanding of her condition. Sleep quality improved; the patient reported sleeping for 7 hours and felt refreshed upon waking.

Discussion

This discussion focuses on the implementation of Maternity Nursing Care Management with a Service Excellent Approach for Mrs. A, who experienced second-trimester hypertension, conducted at Pera Clinic, Medan Tuntungan District, North Sumatra, from April 14 to 16, 2025.

Nursing Assessment

The assessment was carried out through interviews, physical examinations, and observations. The patient's main complaints included headaches, dizziness, heaviness and weakness in the limbs, with a blood pressure reading of 170/90 mmHg. These findings are consistent with clinical symptoms of gestational hypertension.

Nursing Diagnoses

Based on the Indonesian Nursing Diagnosis Standards (SDKI, Yanti, 2025), the theoretical nursing diagnoses included: Knowledge deficit Disturbed sleep pattern Risk of ineffective cerebral perfusio. However, based on actual findings in Mrs. A, the following diagnoses were established: Ineffective peripheral perfusion related to elevated blood pressure. Anxiety due to lack of informationA disturbed sleep pattern related to discomfort from a headache

Nursing Interventions

The interventions included:

Circulatory management: Foot care, avoiding blood draws from affected extremities, education on light physical activity and hydration
Anxiety reduction: Providing education, creating a comfortable environment, and teaching relaxation techniques
Sleep support: Modifying the sleeping environment and educating the patient on the importance of adequate rest.

Nursing Implementation

All planned interventions were implemented over three consecutive days. The nursing team performed circulatory monitoring, provided emotional support, and educated the patient on lifestyle and sleep hygiene.

Nursing Evaluation

Following the interventions:
Peripheral perfusion improved, as evidenced by decreased blood pressure to 140/85 mmHg and normalized skin color and temperature
Anxiety was reduced, with the patient appearing calmer and more cooperative
Sleep pattern improved, with the patient reporting 7 hours of restful sleep and waking up refreshed
These results demonstrate that a Service Excellent-based nursing approach is effective in managing hypertensive conditions during pregnancy, improving both physiological and psychological outcomes.

References

Alatas, H. (2019). Hipertensi pada Kehamilan. *Herb-Medicine Journal*, *2*(2), 27. https://doi.org/10.30595/hmj.v2i2.4169

Arikah, T., Rahardjo, T. B. W., & Widodo, S. (2020). Kejadian Hipertensi pada

Ibu Hamil. *Jurnal Penelitian Dan Pengembangan Kesehatan Masyarakat Indonesia*, *1*(2), 115–124. https://doi.org/10.15294/jppkmi.v1i2.40329

Dayani, T. R., & Widyantari, K. Y. (2023). The Factors Related To the Incidence of Hypertension in Pregnant Women. *Journal of Language and Health*, *4*(1), 1–10.

Herawati, T., Pranaji, D. K., Pujihasvuty, R., & Latifah, E. W. (2020). Faktor-Faktor yang Memengaruhi Pelaksanaan Fungsi Keluarga di Indonesia. *Jurnal Ilmu Keluarga Dan Konsumen*, *13*(3), 213–227. https://doi.org/10.24156/jikk.2020.13.3.213

Kementrian Kesehatan. (2023). *Profil Kesehatan Indonesia 2023*.

Sembiring, A, et al. (2023). Terapi Akupresur Untuk Hipertensi Di Kelurahan Bangun Rejo Kecamatan Tanjung Morawa. *Jurnal Sinergitas PKM & CSR*, *7*(1), 1–11. https://doi.org/10.19166/jspc.v7i1.6189

Simanjuntak, L, et al. (2024). *Inovasi Excellent Percepatan Penurunan Tekanan Darah Pada Lansia Hipertensi Dengan Slow Deep Breathing Dan Kombinasi Bahan Alam (Apium Graveolens Dan Black Garlic) Di Desa Bangun Rejo Tahun 2024*. *10*(2), 238–246.

Sinaga, SN, et al. (2022). The Increase of Knowledge, Attitude, and Practice of Husbands toward the Prenatal Care of their Wives Using the Illustrations Having the Local Cultural Nuance. *Open Access Macedonian Journal of Medical Sciences*, *10*(E), 525–530. https://doi.org/10.3889/oamjms.2022.8092

Situmorang, F., … E. M.-J. of E., & 2021, undefined. (2021). Risk Factors of Hypertension in Reproductive Age Women in Kedai Durian Health Center, Medan, Indonesia. *Jepublichealth.Com*, *06*(01), 42–50. https://jepublichealth.com/index.php/jepublichealth/article/view/365

Situmorang, F. N. S., Fauzianty, A., Purba, H. E., Purba, P. I. B., & Zega, N. (2025). Effectiveness of Foot Soaking Therapy Using Lemongrass (Cymbopogon citratus) Decoction to Reduce Blood Pressure among Pregnant Women with Mild Hypertension. *Journal of Applied Nursing and Health*, *7*(3), 728–737. https://doi.org/10.55018/janh.v7i3.421