

**SUSTAINABLE MIDWIFERY CARE MANAGEMENT (Continuity Of Care)  
AT NY. A 28 YEARS AT FINA SEMBIRING CLINIC  
MEDAN CITY POLONIA YEAR 2023**

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**ABSTRACT**

Writing this journal is to provide continuous care (Continuity Of Care) from pregnancy to family planning at Mrs.A Age 28 years G1P0A0 at the Fina Sembiring Clinic. The case study used Case Study), Data collection techniques in the form of interviews and documentation studies were used in the form of assessment of midwifery care and SOAP starting from Pregnancy, Childbirth, Newborn Postpartum, and Family Planning. From the results of the assessment that was carried out on Mrs.A aged 28 years at the Fina Sembiring clinic, Medan Polonia, from the time of pregnancy to family planning carried out by researchers so that the care plan ran smoothly and no serious complications occurred in the mother and baby and mother and baby are normal. Based on the results of continuity of care midwifery care that has been carried out on Mrs. A, it is hoped that the patient can apply the counseling that has been given during midwifery care so that the condition of the mother and baby remains good and can prevent complications and death.

**Keywords:** Pregnancy, Childbirth, Postpartum, Family Planning

**INTRODUCTION**

One of the important aspects of national development as a whole is the development of public health which needs to get more attention because it has a major impact on the development of the health sector and improving the quality of human resources, and most importantly the issue of child health delivery, Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR), the higher the maternal and infant mortality rates in

a country, it can be concluded that the country's health is poor, this is a measure of public health (Kemenkes RI 2018).

One form of concern for working mothers is Health (RI Ministry of Health 2019). The number of maternal deaths during pregnancy, labor and delivery, is used as an indicator of women's health, reducing the Maternal Mortality Rate to 70/100,000 births is the Goal of Sustainable Development (SDGs).

Based on the data obtained, the Maternal Mortality Rate (MMR) in 2021 shows 7,389 deaths in Indonesia. This number shows an increase compared to 2020 of 4,627 deaths, and causes, most of the maternal deaths in 2021 are related to COVID-19 of 2,982 cases, 1,330 cases of bleeding, and 1,077 cases of hypertension in pregnancy. The success of maternal health, among others, can be seen from survey results Maternal mortality rate is the number of maternal deaths during pregnancy, childbirth and childbirth, not per 100,000 live births. The maternal mortality rate that has been reported in North Sumatra province in 2019 is 202 people with a distribution of 530 pregnant women deaths, 87 maternity deaths and 62 post partum deaths.

Health profile data for the Province of North Sumatra in 2019 shows that the AKN of the Province of North Sumatra in 2019 was 2.9 per 1000 live births. The cause of neonatal death (0-28 days) in North Sumatra was asphyxia (218 cases), other cases (172 cases), LBW (184 cases), congenital abnormalities (70 cases), sepsis (29 cases) and neonatal tetanus (3 cases). The causes of death for toddlers (12-59 months) are fever (17 cases), others (48 cases), diarrhea (6 cases), pneumonia (12 cases) and Diphtheria (1 case) (Health Profile 2019).

The success of maternal health, among others, can be seen from the survey results. The maternal mortality rate is the number of maternal deaths during pregnancy, childbirth and childbirth, not in every 100,000 live births. The maternal mortality rate that has been reported in North Sumatra province in 2019 is 202 people with a distribution of 530 pregnant women deaths, 87 maternity deaths and 62 post partum deaths.

The results of a survey that I carried out during field practice at the Fina Sembiring clinic, district. Medan Polonia in 2022 there are 650 pregnant women visiting ANC, and 450 women who have normal births, 450 postpartum women, 450 newborn babies, and 810 family planning visits using different contraceptives, so one of the clients who became a continuous patient (Continuity Of Care) which I carried out at the Fina Sembiring Clinic, kec. Medan Polonia in 2022.

## **METHOD**

The method used is a case study (Case Study) is an observational study to obtain an overview of current health phenomena or cases related to life, especially in terms of context and unclear phenomena. This research was conducted in a clinic, from November 17 2022 to March 6 2023. Describe midwifery care for Mrs. A, 28 years old.

The data collection technique in the form of interviews and using a documentation study used is the format for assessing midwifery care and SOAP starting from pregnancy to family planning which was carried out at the Fina Sembiring Clinic, Medan Polonia, Medan City, North Sumatra in 2022.

## RESULT AND DISCUSSION

1. Midwifery care for Mrs.A aged 28 years G1POA0 gestational age 30 mg 3 days at the FinaSembiring clinic was in accordance with midwifery care standards and the results of a study conducted on November 17 2022 at 19.20 WIB with HPHT April 14 2022, Mrs.A visited the Fina Sembiring clinic, the patient wanted to check her pregnancy and complained that she experienced discomfort from frequent urination at night and back pain which made it difficult for the mother to sleep. An overall examination was carried out, namely a general examination, examination of vital signs, and a physical examination within normal limits and an examination was carried out on the abdomen L1: Fundal height 30 cm L2: Left back L3: Prescript L4: Divergent (not yet entered the pelvic inlet). Efforts made are education about the discomfort they experience is a physiological thing in the third trimester of pregnancy. Midwives provide counseling to reduce drinking at night and increase during the day. Get enough rest and sleep, meet nutritional needs, namely reducing foods that contain carbohydrates, fats and consuming foods high in protein, and encourage the mother to make a repeat visit in 4 weeks or if the mother has complaints about her pregnancy.
2. Midwifery care for Mrs A on January 24, 2023 At 06.00 WIB. gestational age 40 mg with a term or full-term pregnancy Mrs. A comes with complaints of repeated pain and discharge of mucus mixed with blood from the genitals and there is water seeping, mules and pain radiating to the waist the client says contractions (his) are felt from the date January 23, 2023 at 11.00 WIB, then vital signs were examined with results within normal limits and data collection was carried out then the client was advised to lie in bed to do uterine palpation and check the fetal heart rate then proceed with (VT ) get a 7 cm opening, and ask the husband to accompany or provide support to the patient then give the mother nutrition then do an internal examination once per 4 hours and at 15.35 WIB do an internal examination get the results of the opening (10) complete then see the sign - signs of labor pressure on the anus, the vulva opens, the perineum protrudes, the mother says she can't stand the pain and wants to defecate, the midwife prepares a parturition device, after that the midwife informs the family/client that the baby will be born soon, the slipper is placed on the mother's buttocks, the towel is placed on top abdomen, midwives began to use personal protective equipment. the mother is given a lithotomy position to be ready to give birth by leading the mother to strain, here the mother is taught to strain, it seems that the waters have broken, so that a normal delivery can be carried out, led to straining and given support by the family or health care so that the client is more enthusiastic and confident then encourages the patient to eat and drink so that you have energy while straining and pay attention to personal hygiene.

The first stage of labor lasted for  $\pm$  10 hours, the second stage lasted 15 minutes, the third stage lasted 12 minutes and the fourth stage was supervised for 2 hours. The mother gave birth normally without any complications and complications for the mother and baby. The care provided is in accordance with the standards of Normal Childbirth Care

3. Midwifery care for post partum mothers starting on January 24, 2023 1 hour after the placenta was born, Mrs A P1A0 carried out initial monitoring and taught breastfeeding techniques, and on January 27, 2023 made a home visit to monitor the postpartum period to find out the condition of the mother and the process breastfeeding, the mother complains that the baby does not want to breastfeed, then pain and swelling in the breast, from these complaints that the mother has breast milk to help overcome this problem I provide care and health education about continuing to give exclusive breastfeeding to babies and carry out breast care measures to prevent blockages help facilitate breastfeeding, and encourage mothers to do breast care at home, which can be done independently or by their husbands.
4. Midwifery care for newborns On January 24, 2023 at 16.00 WIB By.Ny.A was born normally, weighing was carried out with the result that the body weight was 3100 gr, had a body length of 51 cm and 1 hour after the baby was born, received a vitamin k injection and was given thesecond hour was given an HB 0 injection. then a home visit was made on January 27, 2023 At:10.35 WIB made a home visit to carry out care for the baby by washing and caring for the umbilical cord until it broke and giving the mother counseling on how to care for the umbilical cord for babies, exclusive breastfeeding until the age of 6 months, give breast milk in increments/2 hours and tell them that solid food is not

recommended for 6 months, then recommend basic immunization for babies to the Health Facility.

5. Midwifery care for family planning On March 5, 2023 a visit was made to Mrs. A P1A0's house aged 28 to monitor the mother's condition after going through the puerperium, then explained the purpose of making a home visit, counseling the mother in choosing contraception, after that a TTV examination was carried out to find out the general condition of the mother, asking the client whether she has used contraception, after listening to the types and side effects of contraceptives, the mother chooses to use birth control pills, which are pills that are consumed every day and are safe for breast feeding mothers.

## DISCUSSION

1. Pregnancy Midwifery Care In the case of Mrs.A G1P0A0 her pregnancy lasted 30 weeks 3 days. Based on expert opinion (Mayasari Dian 2023). Term pregnancy (continuation) is a pregnancy that lasts approximately 40 weeks (280 days) to a maximum of 43 weeks (300 days) and gives birth to a premature baby. This means NY pregnancy. A is term pregnancy and normal delivery can occur. During NY pregnancy. A conducted pregnancy checks 11 times, 2 times in the first trimester, 4 times in the second trimester, and 9 times in the third trimester. The latest prenatal checks meet performance standards, ie. a minimum of 6 examinations during pregnancy and a minimum of 2 examinations in the first and third trimesters. 2 times in the first trimester (up to 12 weeks of gestation), 1 time in the second trimester (more than 12 to 26 weeks of gestation), 3 times in the third trimester (more than 24 to 40 weeks of gestation) (According to the latest MCH 2020) Pregnancy education is very important for assessing the health and

well-being of the baby, as well as the ability to obtain information and provide information to mothers and medical personnel. Therefore, midwives and other health workers must provide comprehensive midwifery care so that pregnancies and babies are born normally and without pathological symptoms. The mother's visit at the Fina Sembiring Akhir Clinic was carried out 1 time in the third trimester. This visit was carried out on 17/11/2022 with a gestational age of 29 mg, during this visit the mother complained of frequent back pain. mothers not to stand too long, avoid using high heels, recommend mothers to do pregnancy exercises (Handyani & Sugiarsih, 2021). Based on the results of Mrs.A's evaluation and examination, it was concluded that pregnancy A was a physiological pregnancy. The operation begins by collecting anamnesis data for each complaint, starting from a general examination including vital signs, weight and physical pregnancy. Examination to determine the presentation of the fetal head and heartbeat, all under normal conditions. According to (Ministry of Health of the Republic of Indonesia, 2020), ANC service standards must meet the 10T criteria, namely. H. Weighing and measuring, measuring blood pressure, measuring LILA, measuring upper uterine size, determining tetanus immunization status and giving tetanus toxoid vaccination depending on vaccination, taking blood booster tablets of at least 90 tablets during pregnancy, determining fetal presentation and fetal heart rate (DJJ), conduct interviews (interpersonal communication and counseling including family planning), simple laboratory services, minimum hemoglobin (Hb) blood tests, urine protein examination and blood group examination, case management. In Ny A, measurements of body weight and height were carried

out, followed by determining the nutritional status of pregnant women with a BMI result of 24.21 (normal category). (RI Health, 2020).

## 2. Childbirth Midwifery Care

Delivery care for Mrs.A, the mother came to the Fina Sembiring clinic on January 24, 2023 with a full-term pregnancy. The first child came in the morning, with complaints of repeated pain and discharge of mucus mixed with blood from the genitals and seeping water, mules and pain radiating to the waist, the client arrives at 06.00 WIB the client says contractions (his) are felt from January 23, 2023 at 11.00 WIB, then checks vital signs with results within normal limits and data collection is carried out then the client is advised to lie down on the bed to do uterine palpation and check the fetal heart rate then proceed with (VT) get a 7 cm opening, then ask the husband to accompany or provide support to the patient then give the mother nutrition then do a deep examination once every 4 hours and at 15.35 WIB an internal examination was carried out to get the results of the opening (10) complete then look at the signs of labor pressure on the anus, the vulva opens, the perineum protrudes the mother says she can't stand the pain and wants to defecate, the midwife prepares a parturition device, after that the midwife tell the family/client that the baby will be born soon, the slipper is placed on the mother's buttocks, the towel is placed over the abdomen, the midwife begins to use personal protective equipment. the mother is given the lithotomy position to be ready to give birth by leading the mother to strain, here the mother is taught to strain it seems that her waters have broken, the mother is led to push and is given encouragement/support by the family or health care so that the client is more enthusiastic and confident, after being led to push, the head birth, after that cleaning,

airway then checking the umbilical cord winding and waiting until the head rotates the outer axis, then bifurcated is done so that the baby's shoulders can be born followed by support, at 16.00 WIB the baby is born normally, and puts the baby on the mother's abdomen. After that, it is dried, then it is carried out by checking the second fetus, telling the mother that an oxytocin injection will be carried out in the mother's thigh to stimulate contractions so that it helps to give birth to the placenta, the injection is carried out, after that the umbilical cord is cut, after that the umbilical cord is given and the baby is given IMD.

Management of active stage III by doing (PTT) before stretching. Look for signs of placental abruption with sudden bleeding and cord lengthening. Once the placenta is visible, stretch, rotate the vulva clockwise and remove the placenta, place it on the placenta plate and check the completeness of the cotyledons with gauze to make sure no placenta remains. Active management of stage IV checks the perineum for bleeding or tears in the perineum where there are grade II tears, then it is done by health workers. In the actions that have been taken there are no gaps in theory and practice, all in accordance with the procedures that have been implemented by health workers in providing quality services so that mothers and babies are healthy and safe.

2. Postpartum Midwifery Care Care during the postpartum period was carried out. Starting on January 24, 1 hour after the placenta was born, Mrs. A P1A0 carried out initial monitoring to home visits to find out the condition of the mother and the breastfeeding process, and at 15.00 WIT mothers were encouraged to practice breastfeeding besides that it could stimulate milk production. and the

mother is advised not to sleep for 2 hours so that it

is easy to monitor her mother's condition. the mother is told to rest after 2 hours have passed, after which the TTV is examined and the mother's general condition is found and everything is within normal limits, until lochia is released from the birth canal looks normal, then on January 25, 2023 the client can go home and be given counseling about proper cord care, personal hygiene, and exclusive breastfeeding. And the midwife told her not to let the baby's umbilical cord get damp or wet and then clean the mother's vulva/vagina using clean water and change her underwear and pads regularly so as to prevent infection from occurring in the mother, after that during breastfeeding the baby tell the mother that Breast milk is very useful, which encourages mothers to consume nutritious foods such as vegetables, fish, nuts, because what is consumed by the mother will become nutrition for the baby through the milk that is drunk with an explanation given by the midwife, the mother said she understood and would do it at home apart from that the role of a husband or family is very important in caring for their baby and informing them that there will be a return visit at home, and the mother agrees to do a repeat visit, On January 27, 2023 a home visit was made to see and evaluate the mother's condition and the postpartum process, the midwife asked questions by asking complaints experienced from the process of removing lochia, involution and smoothness of breast milk without any complications such as vaginal bleeding, involution, and the mother said feeling that the breasts are full and swollen and milk is coming out a little, due to the baby being lazy to drink breast milk, which is where milk retention occurs and the midwife provides care to the mother by doing

brescare to the mother to help overcome problems in mothers who experience breast milk retention and the midwife informs that this can be done by husbands at home to help expel breast milk and midwives. Advise the mother to continue breastfeeding to help reduce breast milk and inform the mother about family planning for the next visit.

4. Newborn Midwifery Care Care for newborns after birth, namely January 27, 2023 at 10.30 wib By.Ny.A, weight has been carried out with the result that BB 3100 grams has a body length of 51 cm. 1 hour after the baby is born, an injection of vitamin K is given to prevent bleeding in the umbilical cord, then at the 2nd hour, HB 0 is given to prevent hepatitis. And encourage mothers to give exclusive breastfeeding early to help expel breast milk, monitor the breast to make sure there are no abnormalities in the baby, then 6 hours after that the baby is born and bathed with the aim of cleaning the body and giving a pleasant feeling, improving blood circulation, preventing infection and increasing resilience in baby skin care, January 28, 2023 at 10:00 WIB: at 12:00 Home visits to complete baby care by washing and caring for the umbilical cord until it breaks Midwives give advice to mothers about baby care, proper care of the umbilical cord to prevent infection and provide counseling about exclusive breastfeeding, encourage mothers to continue breastfeeding so that the baby is full and their nutrition is fulfilled and also ask about the complaints experienced by the mother or the baby, the mother says the baby does not want to drink breast milk and recommends that she should continue to give breast milk to the baby so that it helps stimulate the milk to come out.
5. Family Planning Midwifery Care Care for Mrs.A regarding family planning On February 5, 2023 made a visit to see the mother's condition, and asked about the

client's current condition and the mother said there was no problem, breastfeeding was smooth, the baby was willing to breastfeed, the baby was in good health, the mother said want to use contraception to space out her pregnancies. Then explain and tell what contraceptives are used to prevent pregnancy. Among them are the IUD for a 5-10 year period which is placed in the uterus, AKBK which is placed under the skin of the arm for a period of 3-5 years, Pills that are taken every day and are safe for consumption by nursing mothers, injections for a period of 1 month and 3 months, Minipill is a type of oral contraceptive which, when used properly, is 99% effective in preventing pregnancy and can be used by all women, including those who are breastfeeding, those who cannot get pregnant again in women, fascectomy in men. and latex condoms, and clients can choose according to their wishes. After the mother found out about this, the mother said she wanted to try the mini birth control pill which is safe for breastfeeding mothers, and the content of this mini pill is progestin, the progestin hormone is a hormone similar to the progesterone that breastfeeding mothers have. body produces. and can be stopped at any time, does not affect marital relations, good for spacing pregnancies and this mini pill is consumed every day orally.

## CONCLUSION

Based on the results of continuing care (Continuity Of Care) as a final project report, especially for midwifery students who monitor the process of pregnancy TM III to family planning, especially for Mrs. A during the third trimester of pregnancy starting on 17 November 2022 – 06 March 2023, researchers carry out continuing care with the aim of successful careContinuity

Of Care. From the results of the study that was carried out on Mrs.A aged 28 at the Fina Sembiring clinic, Medan Polonia, from the time she was pregnant until the birth control was carried out by researchers so that the care plan ran smoothly and there were no serious complications occurring in the mother and baby. In the studies that have been carried out, there is a gap between theory and practice or the real things that I found in the field, starting from the process of pregnancy to family planning, not all examinations or care are carried out, especially during pregnancy.

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