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MIDWIFERY CARE FOR MRS. A, 27 YEARS OLD, WITH BREAST CANCER (CA MAMMAE) AT HAJI GENERAL HOSPITAL MEDAN IN 2025

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ABSTRACT

Background: Breast cancer (Carcinoma Mammae) is one of the most common malignancies affecting women and remains a leading cause of cancer-related mortality worldwide. Patients diagnosed with breast cancer often experience physical and psychological problems, especially anxiety before undergoing surgical procedures. Comprehensive midwifery care is needed to support patients physically and emotionally before surgery. **Objective:** This case study aimed to describe the implementation of midwifery care for a 27-year-old woman with Carcinoma Mammae through the application of the PACER principles (Professional, Accountable, Collaborative, Empathy, and Reliability) in preparing the patient for Modified Radical Mastectomy (MRM) surgery at RSU Haji Medan. **Methods:** This study used a descriptive case study approach. Data were collected through interviews, observation, physical examination, medical record review, and documentation using the Varney Midwifery Management Process and SOAP documentation. The patient was observed during the preoperative period in the Shafa Marwah ward of RSU Haji Medan in December 2025. **Results:** Assessment findings revealed that the patient had a breast lump in the left breast and experienced anxiety related to the upcoming MRM procedure. Vital signs were within normal limits, indicating stable physical condition. Midwifery interventions included therapeutic communication, psychological support, health education regarding the surgical procedure, monitoring of vital signs, and collaboration with the multidisciplinary healthcare team. Following the interventions, the patient demonstrated improved understanding of her condition, reduced anxiety, increased confidence, and readiness to undergo surgery. **Conclusion:** The implementation of comprehensive midwifery care based on the PACER approach effectively supported the physical and psychological preparation of a patient with Carcinoma Mammae before surgery. Professional, accountable, collaborative, empathetic, and reliable care contributed to reducing anxiety and improving patient readiness for surgical treatment.
Keywords: Breast Cancer, Midwifery Care, PACER, Preoperative Anxiety, Modified Radical Mastectomy (MRM).

INTRODUCTION

Carcinoma mammae, commonly known as breast cancer, is a malignant condition of the breast tissue characterized by abnormal and invasive cell growth. To date, this disease remains the cancer with the highest incidence rate among women both globally and in Indonesia. Given its high incidence and mortality rates, *carcinoma mammae* is still categorized as a major health problem that demands serious attention, particularly within the scope of women's reproductive healthcare services.(Fasya Amanda *et al.*, 2026)

The clinical challenges of this disease become far more complex when *carcinoma mammae* occurs during the reproductive age and coincides with pregnancy, a medical condition identified as pregnancy-associated breast cancer. Although this concurrent case is relatively rare, its management presents a distinct dilemma as healthcare providers are required to simultaneously consider the safety of both the mother and the fetus. Furthermore, physiological changes in the breast during pregnancy often mask the early signs and symptoms of the malignancy. Consequently, many new cases are diagnosed only after reaching advanced stages, which ultimately worsens the mother's prognosis and increases the risk of various complications during pregnancy and childbirth.(Fasya Amanda *et al.*, 2026)

Carcinoma mammae (breast cancer) is a malignancy of the breast tissue arising from genetic mutations in the epithelial cells of the ducts or lobules, characterized by abnormal, invasive, and uncontrolled cell growth. This disease represents one of the most serious reproductive health challenges for women both globally and nationally. Epidemiologically, *carcinoma mammae* ranks first as the leading cause of cancer-related mortality among women.(Sri *et al.*, 2025)

The development of these cancer cells is triggered by a complex interaction between internal and external factors, including genetic predisposition (family history), excessive estrogen exposure, obesity, long-term use of hormonal contraceptives, and unhealthy lifestyle patterns. A major issue in managing this disease in Indonesia remains the low awareness regarding the importance of early detection, such as the Breast Self-Examination (BSE) technique. Consequently, most patients seek medical intervention only after the disease has reached advanced stages, where the cancer cells have already metastasized to the lymph nodes or other distant organs. This significantly complicates the treatment process and reduces the chances of therapeutic success. Therefore, comprehensive care, accurate early detection, and a multidisciplinary approach are imperative to improve the patient's quality of life and survival outcomes.(Sri *et al.*, 2025)

The management of breast cancer requires a multidisciplinary approach involving surgery, chemotherapy, radiotherapy, hormonal therapy, and supportive care. One of the most common surgical treatments for operable breast cancer is Modified Radical Mastectomy (MRM), which involves removal of the affected breast tissue and axillary lymph nodes. Although surgery is an effective treatment modality, patients often experience significant psychological distress before the procedure, particularly anxiety related to the diagnosis, surgical intervention, body image changes, and treatment outcomes.(Jamil, Hadi and Munandar, no date)

Preoperative anxiety is frequently observed among patients with breast cancer and may affect physiological stability, treatment compliance, and postoperative recovery. Anxiety before surgery can increase stress responses and negatively impact the patient's readiness for treatment. Therefore, comprehensive healthcare services are needed to address both physical and psychological aspects of patient care.(Rizka, Akbar and Putri, 2022)

Midwives have an important role in providing holistic care for patients with breast cancer. Their responsibilities include conducting comprehensive assessments, monitoring

health conditions, providing health education, offering emotional support, and collaborating with other healthcare professionals to ensure optimal patient outcomes. Comprehensive midwifery care is essential to help patients adapt to their condition, reduce anxiety, and improve readiness for surgical intervention.(2025)

This case study presents the implementation of comprehensive midwifery care for Mrs. A, a 27-year-old woman diagnosed with Carcinoma Mammae who was admitted to the Shafa Marwah Ward of RSU Haji Medan and scheduled for Modified Radical Mastectomy (MRM). The patient experienced anxiety regarding the upcoming surgery and required both physical and psychological preparation before the procedure. Therefore, appropriate midwifery care was provided to support the patient's condition and enhance readiness for surgery.(Sikaping, no date)

PACER VALUES IMPLEMENTATION IN MIDWIFERY CARE FOR MRS. A WITH CA MAMMAE

P (Professional)

In providing midwifery care to Mrs. A, a 27-year-old patient diagnosed with Ca Mammae, the midwife applied the principle of Professionalism by delivering care in accordance with professional standards, the midwifery code of ethics, and established competencies. Professional behavior was demonstrated through the ability to conduct a comprehensive assessment, systematically collect subjective and objective data, perform physical examinations, and identify the patient's problems and needs based on her condition. The midwife also ensured patient safety by emphasizing accuracy in assessment, careful clinical judgment, and appropriate care planning. Furthermore, professional relationships were maintained through effective communication, respect for patient rights, protection of privacy and confidentiality, and the provision of non-discriminatory care regardless of the patient's social, economic, cultural, or religious background. The application of professionalism throughout the care process aimed to improve the quality of healthcare services and provide a sense of security and trust for the patient during treatment.(Jamil, Hadi and Munandar, no date)

A (Accountable)

The principle of Accountability was applied by ensuring that all actions and decisions made throughout the midwifery care process were scientifically, ethically, and legally justifiable. The midwife performed all interventions based on assessment findings and in accordance with established midwifery care standards. Every stage of care, including data collection, data interpretation, problem identification, planning, implementation, and evaluation, was documented completely and systematically in the patient's records. Proper documentation represents professional responsibility and serves as evidence that care has been delivered according to required standards. In Mrs. A's case, the midwife was responsible for ensuring that the patient received accurate information regarding her diagnosis, the planned surgical procedure, and all interventions provided during the preoperative period. By applying accountability, the care provided became more transparent, reliable, and professionally responsible to the patient, healthcare institution, and midwifery profession.(Rizka, Akbar and Putri, 2022)

C (Collaborative)

The management of patients with Ca Mammae requires a multidisciplinary approach; therefore, the principle of Collaboration played a crucial role. The midwife did not work independently but collaborated with various healthcare professionals, including surgeons, anesthesiologists, nurses, laboratory personnel, radiology staff, and other healthcare providers involved in the patient's care. This collaboration ensured that all patient needs were addressed

comprehensively, covering both physical and psychological aspects. In this case, the midwife contributed by preparing the patient for surgery through education, monitoring of general condition, and psychological support, while the physician was responsible for establishing the medical diagnosis and performing the surgical intervention. Effective interprofessional collaboration enhances the quality and efficiency of healthcare services, reduces the risk of errors, and supports better patient outcomes. Through optimal collaboration, the patient received comprehensive and continuous care tailored to her healthcare needs.(Faktor and Kanker, 2024)

E (Empathy)

The principle of Empathy is an essential component of midwifery care, particularly for patients with chronic illnesses such as Ca Mammae, who often experience psychological distress, including anxiety, fear, and uncertainty about their condition. In Mrs. A's case, the midwife demonstrated empathy by giving full attention to the patient's concerns and emotions, listening carefully to her worries, and providing opportunities for her to express her feelings and ask questions. The midwife sought to understand the patient's emotional state as she prepared for surgery and provided support that met her individual needs. Empathy was reflected through therapeutic communication, the use of language that was clear and understandable, and the provision of motivation and emotional encouragement to help the patient feel calmer and more confident. The presence of empathy from healthcare professionals helped the patient feel respected, valued, and supported throughout the care process, thereby reducing her level of anxiety.(Tira *et al.*, 2025)

R (Reliability)

The principle of Reliability was applied by delivering care that was consistent, accurate, safe, and trustworthy according to the patient's needs. The midwife demonstrated reliability through continuous monitoring of the patient's condition, providing accurate and understandable information, and implementing interventions in accordance with established standards. In Mrs. A's case, the midwife regularly monitored vital signs, assessed the patient's physical and psychological status, and ensured that all preoperative preparations were completed appropriately. Reliability was also demonstrated through responsiveness to the patient's needs, effective problem-solving, and the maintenance of high-quality care throughout the treatment period. Reliable healthcare services help strengthen patient trust in healthcare providers and promote a positive therapeutic relationship. As a result, the patient felt safer and more comfortable during her treatment and gained confidence that the care provided was appropriate for her condition and healthcare needs.(Belakang *et al.*, 2023)

METHODS

This study employed a descriptive case study design to describe the implementation of comprehensive midwifery care for a patient diagnosed with Carcinoma Mammae during the preoperative period. The case study was conducted in the Shafa Marwah Ward of RSU Haji Medan, North Sumatra, Indonesia, in December 2025. This approach was chosen to provide an in-depth understanding of the patient's condition, the midwifery management process, and the outcomes of care provided before surgery.(Di *et al.*, 2026)

The subject of this case study was Mrs. A, a 27-year-old woman diagnosed with Carcinoma Mammae who was admitted to the hospital for preoperative preparation before undergoing Modified Radical Mastectomy (MRM). The patient was selected because she met the criteria for receiving comprehensive midwifery care and agreed to participate in the case study. The focus of care was directed toward the patient's physical and psychological readiness before surgery.(Nurul *et al.*, 2024)

Data collection was carried out using primary and secondary data sources. Primary data were obtained through direct interviews with the patient, observation of her condition, therapeutic communication, and comprehensive physical examinations. Secondary data were collected from medical records, laboratory examination results, nursing documentation, and other supporting clinical records. The collected data included demographic information, health history, chief complaints, psychosocial status, physical examination findings, vital signs, and preoperative preparation status.(Sitompul *et al.*, 2024)

The midwifery care process was implemented using the Varney Midwifery Management Process, which consists of seven systematic steps: data collection, data interpretation, identification of actual and potential problems, identification of immediate needs, planning of care, implementation of interventions, and evaluation of outcomes. This management approach was used to ensure that care was delivered comprehensively and according to the patient's individual needs.(Mammae *et al.*, 2023)

The interventions provided included monitoring vital signs, assessing the patient's physical condition, providing health education regarding Carcinoma Mammae and the planned MRM procedure, delivering psychological support through therapeutic communication, reducing preoperative anxiety, and facilitating collaboration with physicians and other healthcare professionals. Continuous support was provided to improve the patient's understanding of her condition and to enhance readiness for surgery.(2023)

Documentation of care was performed using the SOAP format, consisting of Subjective, Objective, Assessment, and Planning components. This documentation method facilitated systematic recording of patient progress and ensured continuity of care throughout the preoperative period.(Fasya Amanda *et al.*, 2026)

Data analysis was conducted descriptively by comparing the assessment findings, interventions, and evaluation outcomes with relevant theories and literature regarding breast cancer management and comprehensive midwifery care. The results were then presented narratively to illustrate the effectiveness of the midwifery interventions in supporting the patient's physical and psychological preparation before undergoing Modified Radical Mastectomy (MRM).(Nur, Afriani and Pratiwi, 2025)

RESULTS AND DISCUSSIONS

Mrs. A, a 27-year-old woman, was admitted to the Shafa Marwah Ward of RSU Haji Medan with a medical diagnosis of Carcinoma Mammae. The patient complained of a lump in her left breast and was scheduled to undergo Modified Radical Mastectomy (MRM). During the assessment, the patient expressed anxiety regarding the upcoming surgical procedure. Physical examination revealed that the patient's general condition was stable, with blood pressure of 107/81 mmHg, pulse rate of 86 beats/minute, respiratory rate of 20 breaths/minute, body temperature of 36.5°C, and oxygen saturation of 98%. These findings indicated that the patient was physically prepared for surgery. However, psychological assessment showed that the patient experienced anxiety related to the diagnosis and the planned surgical intervention.(Nomor, 2024)

Breast cancer is one of the most common malignancies among women and often requires surgical treatment as part of its management. In this case, the patient was scheduled for Modified Radical Mastectomy (MRM), which is a standard surgical procedure for breast cancer involving the removal of breast tissue and axillary lymph nodes. The presence of a breast lump and the need for surgery can cause significant emotional distress, especially among young women who may have concerns regarding body image, treatment outcomes, and recovery.(Dokter *et al.*, no date)

The assessment findings demonstrated that the patient's physiological condition was stable before surgery. Normal vital signs are important indicators of surgical readiness and suggest that the patient was in adequate physical condition to undergo the planned procedure. These findings are consistent with the theory that preoperative assessment should evaluate both physical and psychological conditions to ensure patient safety and optimize surgical outcomes.(Merawat, Kanker and Studi, 2025)

One of the major problems identified in this case was preoperative anxiety. Anxiety is a common psychological response among patients diagnosed with cancer, particularly those awaiting surgery. Previous studies have shown that anxiety may increase stress responses, affect physiological stability, interfere with sleep quality, and negatively influence postoperative recovery. Therefore, addressing anxiety is an essential component of comprehensive patient care.(Berencana, no date)

To overcome this problem, midwifery interventions focused on therapeutic communication, psychological support, patient education, and continuous monitoring. The patient was encouraged to express her concerns and feelings regarding the upcoming surgery. Clear explanations about the disease condition, surgical procedure, and expected outcomes were provided to improve understanding and reduce uncertainty. Emotional support was also given to help the patient develop confidence and a positive attitude toward treatment.(Payudara *et al.*, 2020)

The implementation of these interventions resulted in positive outcomes. The patient demonstrated improved understanding of her condition and the planned surgical procedure. She was able to repeat the information provided, expressed reduced anxiety, appeared calmer, and showed willingness to follow all preoperative instructions. These findings indicate that appropriate education and emotional support can effectively improve patient preparedness before surgery.(Nauli *et al.*, 2026)

Furthermore, collaboration among healthcare professionals played an important role in ensuring comprehensive patient care. Coordination between midwives, physicians, nurses, and other healthcare providers contributed to the patient's physical and psychological readiness. This multidisciplinary approach is essential in managing patients with Carcinoma Mammae, as it promotes holistic care and improves overall treatment outcomes.(Sipayung, Lumbanraja and Fitria, 2022)

The findings of this case study suggest that comprehensive midwifery care has a significant role in supporting patients with breast cancer during the preoperative period. Through assessment, education, emotional support, monitoring, and collaboration, midwives can help reduce anxiety, enhance patient understanding, and improve readiness for surgery. Therefore, comprehensive and patient-centered care should be maintained as an integral component of breast cancer management to achieve optimal health outcomes and improve patient well-being.(Mamae *et al.*, 2026)

VARNEY'S SEVEN STEPS :

1. Data Collection

- Subjective Data
  Mrs. A, 27 years old, came to the Shafa Marwah Ward at 08:15 AM with a complaint of a lump in her left breast. The patient stated that she was scheduled to undergo a Modified Radical Mastectomy (MRM) on December 3, 2025. She also expressed feelings of anxiety and worry about the upcoming surgical procedure. At present, the patient is undergoing preoperative preparation and supporting examinations according to the physician's instructions.

- Objective Data
  The physical examination showed that the patient was in good general condition and fully conscious (compos mentis). Vital signs were within normal limits, with a blood pressure of 107/81 mmHg, pulse rate of 86 beats per minute, respiratory rate of 20 breaths per minute, body temperature of 36.5°C, and oxygen saturation (SpO_2) of 98%. A lump was observed in the left breast. The patient appeared anxious about the planned surgery and was currently undergoing preoperative preparation and diagnostic examinations as prescribed by the physician.

2. Data Interpretation
   - Diagnosis:
     Mrs. A, 27 years old, with Breast Cancer (Ca Mammae) and scheduled to undergo Modified Radical Mastectomy (MRM).
   - Problems:
     The patient experiences anxiety related to the upcoming surgical procedure. The presence of a lump in the left breast requires surgical intervention. The patient is currently in the preoperative phase, which places her at risk of increased anxiety and psychological stress. In addition, the patient requires adequate physical and psychological preparation before surgery to support optimal surgical outcomes.
   - Needs:
     The patient requires psychological support to help reduce anxiety before surgery. Health education should be provided regarding the MRM procedure, its purpose, benefits, and preoperative and postoperative care. Regular monitoring of vital signs is needed during the preoperative period to ensure the patient's condition remains stable. The patient also requires comprehensive preoperative preparation according to the physician's instructions, including supporting examinations and administrative readiness. Therapeutic communication and continuous emotional support are needed to enhance the patient's sense of security, comfort, and confidence in undergoing the surgical procedure.
3. Anticipation of Potential Problems/Potential Diagnosis
   1. The patient is at risk of increased anxiety that may progress to severe stress, which can affect her psychological readiness for the surgical procedure.
   2. There is a potential for physiological responses such as increased blood pressure, elevated pulse rate, and increased respiratory rate, which may disturb preoperative hemodynamic stability.
   3. The patient may show decreased cooperation in undergoing preoperative preparations and supporting examinations.
   4. There is a risk of sleep disturbances and fatigue, which can reduce physical endurance before surgery.
   5. There is a possibility of postponement or cancellation of the surgical procedure if the patient's psychological condition is not adequately prepared.
4. Immediate Actions
   1. Provide therapeutic communication to reduce the patient's anxiety level.
   2. Briefly explain the surgical plan and purpose of the Modified Radical Mastectomy (MRM) procedure.
   3. Monitor vital signs and assess preoperative readiness according to the physician's instructions.

5.Interventions

1. Inform the patient that her vital signs are within normal limits.
   Rationale: To help the patient understand that her current physical condition is stable.
2. Explain that her current condition is adequate to continue preoperative preparation.
   Rationale: To provide reassurance regarding her physical readiness for surgery.
3. Deliver information using simple and easily understandable language.
   Rationale: To ensure the patient clearly understands the information provided.
4. Allow the patient to ask questions regarding her condition and procedure.
   Rationale: To reduce anxiety and improve patient understanding.

6.Implementation

1. Reaffirm that the patient's general condition is stable and well monitored.
   Rationale: To strengthen the patient's sense of safety and trust.
2. Relate the stable condition to the likelihood of a successful surgical outcome.
   Rationale: To improve the patient's mental readiness for surgery.
3. Inform the patient that the healthcare team will continuously monitor her condition.
   Rationale: To reduce fear and anxiety.
4. Encourage the patient to follow all preoperative instructions carefully.
   Rationale: To support the smooth preparation and execution of the surgical procedure.

7.Evaluation

1. The patient stated that she understands her general condition.
2. The patient was able to repeat the explanation regarding her condition.
3. The patient appeared calmer, and her anxiety had decreased.
4. The patient is willing to follow further instructions and continue with preoperative preparations.

CONCLUSIONS

This case study demonstrated that comprehensive midwifery care plays an important role in supporting patients with Carcinoma Mammae during the preoperative period. Mrs. A, a 27-year-old woman diagnosed with breast cancer and scheduled for Modified Radical Mastectomy (MRM), experienced anxiety related to the upcoming surgical procedure despite having a stable physical condition. Comprehensive assessment enabled the identification of both physical and psychological needs, which became the basis for individualized midwifery interventions.(Nurul *et al.*, 2024)

The provision of health education, therapeutic communication, emotional support, continuous monitoring, and collaboration with healthcare professionals contributed positively to the patient's preparation for surgery. Following the implementation of care, the patient demonstrated improved understanding of her condition and treatment plan, reduced anxiety, increased confidence, and greater readiness to undergo the planned surgical intervention.(Medan *et al.*, 2025)

The findings of this case highlight the importance of holistic and patient-centered midwifery care in addressing not only the physical aspects of illness but also the psychological responses experienced by patients with breast cancer. Comprehensive midwifery care can enhance patient preparedness, improve the quality of care, and support better treatment outcomes for women undergoing surgical management of Carcinoma Mammae.(Sitompul *et al.*, 2024)

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CONFLICT OF INTEREST AND FUNDING DISCLOSURE

The author declares that there are no conflicts of interest associated with the publication of this case study. The study was conducted solely for academic and educational purposes as part of the implementation of comprehensive midwifery care. The author confirms that there are no financial, professional, institutional, or personal relationships that could inappropriately influence the conduct, analysis, interpretation, or presentation of the findings reported in this article.

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The author maintained objectivity, confidentiality, and professional responsibility throughout the study process. All information presented in this article was obtained and reported ethically while respecting the patient's privacy and rights. The author is fully responsible for the content, accuracy, and integrity of this manuscript.

AUTHOR CONTRIBUTIONS

The author was responsible for all aspects of this case study, including conceptualization, patient assessment, data collection, implementation of comprehensive midwifery care, data analysis, interpretation of findings, manuscript preparation, and final approval of the article. The author also conducted literature review, documentation, and coordination with healthcare professionals involved in the patient's care to ensure the accuracy and completeness of the

information presented. All stages of the study were carried out by the author in accordance with academic, ethical, and professional standards.

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