

**ASUHAN KEBIDANAN *CONTINUITY OF CARE* (COC) PADA NY. “I”
DI WILAYAH KERJA PUSKESMAS PATRANG
KABUPATEN JEMBER**

CONTINUITY OF CARE (COC)



**Oleh :
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**PROGRAM STUDI PENDIDIKAN PROFESI BIDAN PROGRAM PROFESI
FAKULTAS ILMU KESEHATAN
UNIVERSITAS dr. SOEBANDI
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LEMBAR PENGESAHAN

Laporan Tugas Akhir dengan judul "Asuhan Kebidanan *Continuity Of Care* (COC) Pada Ny. "I" Di Wilayah Kerja Puskesmas Patrang" telah diperiksa dan dipertahankan dihadapan tim penguji

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SINOPSIS

Nofisatul Mukaromah, 2025. *Continuity Of Care* Pada Ny. “I” 35 Tahun di Puskesmas Patrang. Asuhan Kebidanan *Continuity Of Care*. Program Studi Profesi Kebidanan Universitas dr. Soebandi Jember : (1) Yuni Handayani, S.ST., M.Kes (2) Bd. Naisy’atul Kameilia, S.Keb.

Asuhan kebidanan *Continuity Of Care* (COC) merupakan pelayanan yang berkesinambungan dan menyeluruh dimulai dari pelayanan kehamilan, persalinan, nifas, pelayanan bayi baru lahir sampai pelayanan keluarga berencana. Tujuan utama yaitu untuk memberikan asuhan kebidanan secara *continuity of care* dari masa kehamilan hingga keluarga berencana pada Ny. “I”. Laporan kasus Ny. “I” dimulai dari kehamilan trimester III, bersalin, nifas, neonatus dan KB di wilayah kerja Puskesmas Patrang dengan menggunakan metode pendokumentasian SOAP, meliputi pengkajian Subyektif, Objektif, Assessment, dan Penatalaksanaan. Asuhan kebidanan kehamilan pada Ny “I” G2P1A0 UK 38 minggu pada tanggal 30 januari 2025 dengan kehamilan resiko tinggi (KRT) karena usia ibu >35 tahun dan jarak anak terlalu jauh >10 tahun. Pada asuhan kehamilan, ibu mengalami keluhan sering buang air kecil (BAK) dan nyeri perut bagian bawah. Keluhan tersebut merupakan kondisi fisiologis. Persalinan kala I berlangsung selama 3 jam, lama kala II 20 menit, kala III lamanya 10 menit, plasenta lahir lengkap dan tidak ada robekan perineum. Bayi lahir spontan, menangis kuat, kulit kemerahan, gerakan aktif, dengan jenis kelamin perempuan, BB: 2600 gram, PB: 47 cm, IMD 1 jam. Kunjungan nifas 1 sampai 4 diperoleh hasil bahwa pemulihan ibu berjalan normal. Kunjungan neonatus 1 sampai 3 menunjukkan hasil normal dan kebutuhan ASI tercukupi. Ibu akan menggunakan KB suntik 3 bulan

Setelah dilakukan asuhan pada Ny “I” dapat disimpulkan bahwa proses kehamilan, persalinan, bayi baru lahir, nifas, dan KB berlangsung normal tanpa adanya komplikasi. Diharapkan setelah diberikan asuhan, Ny. “I” dapat menerapkan kepada diri dan bayinya secara mandiri.

SYNOPSIS

Nofisatul Mukaromah, 2025. *Continuity of Care for Mrs. 'I', 35 years old at the Patrang Health Center, Keb Jember. Midwifery Care Continuity of Care. Midwifery Profession Study Program, dr. Soebandi University, Jember: (1) Yuni Handayani, S.ST.,M.Kes (2) Bd. Naisy'atul Kameilia, S.Keb.*

Continuity of Care (COC) in midwifery is a continuous and comprehensive service that begins with pregnancy care, childbirth, postpartum care, newborn care, and family planning services. The main goal is to provide continuous midwifery care from pregnancy to family planning for Mrs. "I". The case report for Mrs. "I" begins with her third trimester pregnancy, childbirth, postpartum, neonatus, and contraception in the working area of the Patrang Community Health Center, using the SOAP documentation method, which includes Subjective assessment, Objective assessment, Assessment, and Management. The midwifery care for Mrs. "I", G2P1A0 at 38 weeks of gestation on January 30, 2025, is classified as high-risk pregnancy (KRT) due to the mother's age being over 35 years and a long interval between children of more than 10 years. During pregnancy care, the mother reported frequent urination and lower abdominal pain. These complaints are physiological conditions. The first stage of labor lasted for 3 hours. The first stage of labor lasted for 3 hours, the second stage lasted for 20 minutes, the third stage lasted for 10 minutes, the placenta was delivered completely, and there were no perineal tears. The baby was born spontaneously, cried loudly, had reddish skin, showed active movements, was female, weighed 2600 grams, measured 47 cm in length, and underwent skin-to-skin contact for 1 hour. Postpartum visits 1 to 4 indicated that the mother's recovery was normal. Neonatal visits 1 to 3 showed normal results, and the need for breast milk was met. The mother will use 3-month injectable contraception.

After care was provided to Mrs. 'I,' it can be concluded that the processes of pregnancy, childbirth, newborn care, postpartum care, and contraception proceeded normally without any complications. It is hoped that after receiving care, Mrs. 'I' can apply it to herself and her baby independently.