

Early Life Continuity of Care in New York State Pregnancy Till Family Planning is the Only Method Used

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ABSTRACT

Although it can be abnormal, pregnancy is a physiological process. To lower the rate of problems or difficulties during pregnancy in order to improve the mother's health and lower the death rate for both mothers and infants. The East Java Health Dinkes reported that in 2018, there were 522 maternal deaths for every 100,000 live births. The purpose of this research is to assign maternity guardianship to Teimester III expectant moms who are 37 weeks along to Ms. S at PMB Suprihatin, SST. With a case study approach, the research methodology is qualitative and descriptive in nature. It entails gathering both objective and subjective data, analyzing it, developing a diagnosis, organizing an orphanage, evaluating it, and documenting it.

Keywords: childbirth, family planning, newborn baby, nipples, pregnant mother

BACKGROUND

Pregnancy begins with a conception with the encounter of the egg and sperm. The process of pregnancy to breathing is a very long process. So will man see from what he was created? He was created out of the water that sprang out between the thoracic bone and the chest bone. Pregnancy, childbirth is a physiological process but a normal pregnancy can turn into a pathological one. So it's very important to have an orphanage done so that the pregnancy runs normally, one of them by performing at least 4x during pregnancies, i.e. in trimester I 1x, trimester II 1x and in Trimester III 2x (Walyani, 2015). I, or what can be called a mother's death rate, is very high in the world. Mother deaths are an indicator of women's well-being. The number of female deaths is very high in the world, with 800 women dying every day from complications of pregnancy and childbirth. From 2016 to 2030, part of the Sustainable Development Goals (SDG's) target is to reduce the global maternal mortality rate to 70/100,000 live births (WHO, 2016). According to the 2017 Indonesian Demographic and Health Survey (SDKI), the maternal death rate reached 305 per 100,000 living births with a total of 14,623. The majority of mother deaths are caused by preeclampsia and bleeding. AKB recorded 24 per 1,000 live births with the number of cases of 151,200. (Kemenkes RI, 2017). The high level of AKI and AKB in Indonesia is also due to the emergence of a birth complicator that cannot be immediately referred to a more capable health care facility (Saifudin, 2011).

According to SUPAS (Inter-Census Population Survey) in 2017, East Java Province the number of AKIs reached 91.92 per 100,000 live births. The coverage of maternity assistance by the health services for East Java province in 2016 was 95.10%.

The services provided to mothers are such as caring for children based on a program already established by the Ministry of Health to deal with problems in pregnancy, such as doing ANC at

least 4x in her pregnancies in trimester I 1x, trimester II 1x and trimester III 2x. Based on the urine, the author wants to carry out Caring in continuity of care in pregnant mothers starting from the age of 36 weeks pregnant, mothers, neonates, and Planned Families (KB) with the implementation of the pregnancy management approach documented using the SOAP method. The general objective of this research is to be carried out by the maternity guardians in Continuity of Care during the process of pregnancy in the third trimester due to pregnant age (36-40 weeks), mothers giving birth, neonates, neon and planned families (KB), with the use of maternity management.

METHODS

The methods used are qualitative and descriptive with a case study approach, whereas the designs employed are field observational methods, using observations, interviews, tests, and documentation analysis. Data analysis is obtained by making a narration of an observation, interview, and analysis of maternity orphanage, examination, formulation of diagnosis, planning, implementation, and evaluation of maternal orphanage, as well as documentation using the SOAP method.

RESULTS

Based on the Continuity of Care maternity care granted to NY.S by doing an ANC visit once on March 18, 2020. Visiting the mother with this second pregnancy, at the age of 37 weeks pregnant, the mother complains frequently of BAMS and gossip. General condition: good, consciousness: composmental, blood pressure: 120/80 mmHg, pulse: 82x/min, temperature: 37 C, breathing: 24x/ min. Palpation examination: Leopold I: TFU 3 fingers under the procyphoideus, in the bottom of the abdomen round, soft, non-slippery (bubble), Leopoldo II: on the right abdome terebent small part of the fetus (extremity), on the left terebinth hard part flat and elongated like a board (back), Leoldo III: in the belly the lower part is round, hard (head), has not entered PAP (convergence). Mc Donald: 30 cm, TBJ: $(30-12) \times 155 = 2790$ grams. DJJ: (+) 136 x/min. The maximum puctum is 4 fingers left below the center. The action given to the sensitivity felt by the mother who is frequently BACK and BACK is by telling the cause of BACK & BACK. Provide health education (PENKES) about discomfort in pregnancy TM III such as: numbness, frequent BAC, insomnia, cramps, false contact (Barkton Hiks). Urge the mother to avoid drinking poisoned drinks such as tea, coffee and soda, urge her to take a breath when it's choking, give the mother a 500 mg 1x1 etabion therapy, 500 mg calcifor 1x1, urge the mom to visit again for another 2 weeks or if there's a complaint.

The next orphanage is not done face-to-face because of the presence of covid-19 so adhering to the health protocol by doing online orphanage. With the result: on April 4, 2020, Mother gave birth at PMB Suprihatin with 38 weeks of pregnancy with male sex BB: 3200 grams, PB: 49 cm. When I was on routine visits and my condition was normal, I complained of pain in the perineum wound. To alleviate the pain recommended mother to eat foods that contain protein and should not rub food. By the time the baby was one month old, it was discovered that there was a crust on the baby's head. (Seborrhea). Tell the cause of seborrhea and encourage the mother to wash the baby's head by massage slowly using shampoo.

DISCUSSION

On March 18, 2020, at the age of 37 weeks of pregnancy, Ms. S. conducted one visit to the ANC and obtained the results: General condition: well, consciousness: composmentis, blood pressure: 120/80 mmHg, pulse rate: 82x/min, temperature: 37 C, respiration: 24x/ min, normal physical

examination. The author visited the ANC once on a 28-year-old Mrs. G2P100001 with 37 weeks of pregnancy. Based on the secondary data obtained from the KIA book, the mother performed anc visits 9 times i.e. 1 times in trimester I, 4x trimester II, 4X trimester III. According to WHO and Depkes RI, the ANC visits should be performed 4 times during pregnancy i. e. 1x in Trimester I. 1 time in trimster II, and 2 times in III. By doing so, the visit of the ANC regularly can detect risk factors that accompany the pregnant mother so that the process of maternal pregnancies can go well. At the first visit, the mother was informed of her general condition: well, consciousness: composmentis, blood pressure: 120/80 mmHg, pulse: 82x/min, temperature: 37 C, breathing: 24x/ min, physical examination normal. And at the time of the examination it was found that the discomfort is often Nocturia and Barkton Hicks. (Hani,2011). The solution given to the complaint is to encourage the mother to avoid drinking dry drinks such as tea, coffee, and soda, encourage her to drink more in the morning and reduce drinking in the evening, whereas according to Manuaba (2010) it is due to a contraction in the uterus caused by stimulation in the womb. The solution is to encourage the mother to breathe at the time of the joke.

This is only done until the third trimester due to the limitation of the presence of covid-19 so that the next childbirth is done online. With results: on April 4, 2020, Mother gave birth in PMB Suprihatin with pregnancy age 38 weeks male, BB: 3200 grams, PB: 49 cm.

At the time of her breathing, she was undergoing regular visits and found a pain complaint on the perineum wound. Pain after childbirth is caused by tissue rupture in the perineum (Varney et al, 2008). The solution is to encourage the mother to relax and eat foods that contain protein and should not shake foods because of the acceleration of healing.

Baby born spontaneously with BB: 3200 grams, PB: 49 cm. In this orphanage, a problem was found in a one-month-old baby, which is the presence of a crust on the baby's head. Seborrhea is an inflammation that occurs in the upper skin of the baby, causing scratches on the scalp, face and usually also occur in other parts of the body. (Sudarti, 2010). The solution is to encourage the mother to wash the baby's head with a slow massage using shampoo. After giving birth, the mother decided to use the MAL (Method of Aminorwa Lactation). MAL is a contraceptive that uses with exclusive breastfeeding. (Prawirohardjo, 2014). Then encourage the mother to give exclusive milk without giving any accompanying food until the baby is 6 months old.

CONCLUSION

The maternity care of Ms. S's pregnancy process in the third trimester is going well. It can be reviewed from the age of the pregnancy atherm, the site of the spine, the right back position, the head presentation and and the DJJ within normal limits. At this orphanage found problems with Brakton Hiks and often BAK so encouraged mom to breathe when there was a mess and encouraged mother to avoid diuretic drinks such as tea, coffee and soda. In carrying out continuity of care this is not done face-to-face because of the presence of covid-19 so follow the instructions of the government by adhering to the health protocol so this is done online to keep the safety between the patient and the author.

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