

ABSTRAK

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LAPORAN KASUS PADA IBU HAMIL PRIMIGRAVIDA DENGAN PERDARAHAN ANTEPARTUM DISERTAI FETAL DISTRESS DI PUSKESMAS KUPANG KABUPATEN MOJOKERTO

1x + 108 halaman + 3 tabel + 10 lampiran

Perdarahan antepartum yang timbul setelah usia kehamilan 20 minggu hingga menjelang persalinan merupakan salah satu pemicu utama mortalitas serta morbiditas ibu dan bayi. Plasenta previa kondisi di mana plasenta berimplantasi pada segmen bawah rahim hingga menutupi ostium uteri internum menjadi penyebab tersering dengan gejala khas berupa perdarahan vagina merah segar secara mendadak tanpa rasa nyeri di trimester III. Deteksi dini dan penanganan tepat sangat dibutuhkan guna mencegah komplikasi. Laporan kasus ini bertujuan mengulas asuhan kebidanan pada Ny. R dengan indikasi perdarahan antepartum suspek plasenta previa.

Penelitian ini menggunakan pendekatan studi kasus manajemen kebidanan berbasis dokumentasi SOAP pada Ny. R (21 tahun, G1P0A0, usia kehamilan 29/30 minggu) di Puskesmas Kupang, Kabupaten Mojokerto. Pengumpulan data dilakukan melalui anamnesis, pemeriksaan fisik, tes penunjang, observasi, serta studi dokumentasi. Hasil pengkajian mencatat pasien mengalami perdarahan vaginal mendadak berwarna merah segar tanpa nyeri abdomen.

Hasil pemeriksaan menunjukkan keadaan umum baik, TD 117/70 mmHg, DJJ 162x/menit, bagian terendah janin belum masuk PAP, dan kadar Hb awal 10,8 g/dL. Diagnosis yang ditegakkan adalah G1P0A0 usia kehamilan 29/30 minggu, janin tunggal hidup intrauterin preskep risiko tinggi dengan perdarahan antepartum dan indikasi gawat janin. Penanganan meliputi observasi kondisi klinis, pemantauan perdarahan, tirah baring, edukasi, kolaborasi medis, dan persiapan rujukan. Evaluasi menunjukkan perdarahan berhasil dihentikan serta kadar Hb naik menjadi 12,7 g/dL.

Simpulan dari studi kasus ini adalah asuhan kebidanan yang diberikan secara komprehensif dan berkesinambungan dapat membantu mencegah komplikasi lebih lanjut pada ibu dan janin serta meningkatkan kesejahteraan maternal dan fetal.

Kata Kunci : Perdarahan Antepartum, Plasenta Previa, *Fetal Distress*

ABSTRACT

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CASE REPORT ON A PRIMIGRAVIDA PREGNANT WOMAN WITH ANTEPARTUM HEMORRHAGE ACCOMPANIED BY FETAL DISTRESS AT PUSKESMAS KUPANG, MOJOKERTO REGENCY

1x + 108 pages + 3 tables + 10 appendices

Antepartum hemorrhage occurring after 20 weeks of gestation until prior to delivery is one of the leading causes of maternal and fetal mortality and morbidity. Placenta previa a condition in which the placenta implants in the lower uterine segment, covering the internal os is the most common cause, characteristically presented as sudden, painless, bright red vaginal bleeding in the third trimester. Early detection and appropriate management are crucial to prevent complications. This case report aims to review the midwifery care provided to Mrs. R with indicated antepartum hemorrhage suspected of placenta previa.

This study utilized a midwifery management case study approach based on SOAP documentation for Mrs. R (21 years old, G1P0A0, 29/30 weeks of gestation) at the Kupang Community Health Center (Puskesmas Kupang), Mojokerto Regency. Data collection was carried out through anamnesis, physical examination, diagnostic tests, clinical observation, and documentary study.

The initial assessment recorded that the patient experienced sudden, painless, bright red vaginal bleeding. Examination findings revealed a good general condition, BP 117/70 mmHg, FHR 162 bpm, the presenting part of the fetus had not entered the pelvic inlet, and the baseline Hb level was 10.8 g/dL. The established diagnosis was G1P0A0, 29/30 weeks of gestation, single live intrauterine fetus in cephalic presentation, high-risk with antepartum hemorrhage and indicated fetal distress. Management included monitoring of clinical condition, observation of bleeding, bed rest, patient education, medical collaboration, and referral preparation. Evaluation demonstrated that the bleeding was successfully arrested and the Hb level increased to 12.7 g/dL.

The conclusion of this case study is that comprehensive and continuous midwifery care can help prevent further complications in the mother and fetus and improve maternal and fetal well-being.

Keywords: Antepartum Hemorrhage, Placenta Previa, Fetal Distress