ABSTRACT

The World Health Organization (WHO) in 2014 AKI in Indonesia 214/100,000 live births. (SDKI) in 2012, maternal mortality (AKI) related to pregnancy, childbirth, and parturition of 359 per 100,000 live births. One of the causes of maternal death in Indonesia caused Kala II long by 5%. Kala II long is delivery that lasted more than 2 hours on a primigravida, and over 30 minutes to 1 hour on a multigravida (Prawirohardjo Sarwono, 2010). The purpose of study and understand the direction of midwifery in the case of kala II long in Tobelo of clinics.

The methods used are descriptive, namely by applying the management approach as well as Obstetrics Care case studies. The Subject Of Ny. "Y" aged 22 years G1P0A0 with kala II long and childbirth with induction (oxytocin drips ½ cc). The issue is resolved the old

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epoch II and mother healthy baby with no complications. The old labor is one of the direct cause of maternal death, therefore the role of health workers is essential in monitoring the labor to detect any complications and provide a sense of security when giving birth.

INTRODUCTION

Partus is a process that happened physiologically caused by the contraction of uterus regularly, so it caused cervix dilatation progressively. World Health Organization (WHO) estimated the number of death women at all the world caused by complication during pregnancy and partus was decreasing about 45% from 523,000 in 1990 and 289,000 in 2013. The decreasing level each year was needed in order to reach MDGs target.

Based on those data, one of the cause of AKI was partus with period II long, so the writer interested to study and explore mom childbirth period II long deeply as the existence of care and responsibility in giving maternity education at the intra-natal case with period II at Mrs. “Y” in 01 July to 20 July 2017 as Scientific Writing.

BASIC CONCEPT OF PARTUS

Description of Partus

Partus is an outing process of conception result (fetus and placenta) which had enough ages or was able to live out of the womb through the way born or other way with or without helping.

BASIC CONCEPT ABOUT PARTUS PERIOD II LONG

Description of period II long

Period II long was partus that going on more than 2 hours at primigravida, and more than 30 minutes until 1 hour at multigravida.

Etiology

The occurrence of period II long was multi-complex and of course it was depended at the monitoring during pregnancy, good partus helping and it’s managerial.

METHODS

This research was descriptive research where the writer only wanted to describe the midwifery education management at maternity mom with period II long at Tobelo Clinic North Halmahera Regency. The purpose of this research was to decrease Death Rate of Mom and Baby caused by the late handling.

One of the methods that writer used to get the data was interview where the writer got explanation or information spoken from someone who became the target of the research who had fulfilled the criteria (respondent), and directly interacted toward the respondent.

So, the data was taken directly from the respondent through a meeting and conversation. Interview at this research was conducted by using auto anamnesis interview that directly implemented to the patient. Therefore, the data collected was primary data got from Tobelo Clinic of from Midwifes who worked at that clinic.

Case Review

11 July 2017
At 18.20 WIT

Subjective Data (S)
1. Mother said that she was happy because her baby born safely.
2. Mother said that she felt suffer at her stomach.

Objective Data (O)
1. Mother looked pale.
2. Period II was going on 3 hours.
3. The baby born at 18.00 with gender of male.
4. TFU was as high as centre.
5. Uterus contraction was good, the uterus was touched hard and round.
6. The umbilical cord was going longer.

Assesment (A)

Inpartu Period III
Implementation (P)
1. Told to mother that she would be injected with oksitosin.
2. Injected oksitosin 10 UI by IM at 1/3 up thigh of outside.
3. Pinned the umbilical cord with first clamp 3 cm from the baby’s stomach and put on clamp 2 cm from first clamp, cut the umbilical cord and tied it with sterile yarn.
4. Changed the baby’s drapery with dry and clean one.
5. Moved clamp at the umbilical cord till the distance of 5-10 cm from vulva.
6. Put left hand on the simpisis and right hand hold the umbilical cord.
7. Waited the uterus contracted then did the umbilical cord stretching with right hand while
the left hand gave pressure on the uterus with dorsokranial, catch the placenta with both hands, rounded the placenta in line with clockwise until the placenta and its membrane born. Placenta and amniotic membrane was born completely at 18.15 WIT.

8. Did the uterus massage, the uterus was touched hard and round.
9. Sew the perineum torn.

**DISCUSSION**

This chapter discussed about data of maternity mother with Period II Long at Tobelo Clinic of North Halmahera Regency by comparing the gap between theory and practice. This discussion outlined step by step the process of midwifery education according to Varney included: assessment (data collecting), interpretation of basic data (diagnose), potential diagnose, immediate action, planning, implementation, and evaluation.

**CONCLUSION**

Based on the discussion result, it could be concluded as follow: the basic data collecting was got in 11 Juli 2017 at 22.00 WIT, Maternity Mother with Period II Long at Tobelo Clinic. The case of Mrs. “Y” caused the mom was lack of energy to strain so the partus process took more than 2 hours.

**Suggestion**

1. For the midwives/health officers, in giving midwifery education at mother with Period II should be increase good skill and competency about management of Period II Long in order to prevent infection and complication that could cause death of mom and baby.

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