



DOI:

10.22301/IJHMCR.2528-3189.1225

Article can be accessed online on:
<http://www.ijhmcr.com>

ORIGINAL ARTICLE

**INTERNATIONAL JOURNAL
OF HEALTH MEDICINE AND
CURRENT RESEARCH**

**MIDWIFERY CARE MASHED IN MEMORY PRENGNAT
NY. "I" DENGAN ABORTY IMMENENS AT AATIRAH
TOBELO CLINIC**

Rasmin Abd Mutalib^{1*}, Alfitriyanti A.Y Jam¹, Frangky mapanawang²

¹ Midwife Deparment of Akbid Makariwo Tobelo, North Halmahera, North Moluccas, Indonesia

² Nursing Department of STIKES Halmahera, Yayasan Medika Mandiri

ARTICLE INFO

Article History:

Received 24th Dec, 2018

Received in revised form

22th Jan, 2019

Accepted 25th Feb, 2019

Published online 31st Mar, 2019

Key words:

*Management Services Pregnant
Mother Abortus Imminens.*

*Correspondence to Author:

Rasmin Abd Mutalib

Midwife Deparment of Akbid
Makariwo Tobelo, North
Halmahera, North Moluccas,
Indonesia.

E-mail:

khoshidichia@gmail.com
m.godarzi@iausdj.ac.ir

ABSTRACT

Background: WHO Estimates 4.2 million Abortions performed annually, including 750 000 to 1.5 million occur in Indonesia The risk of death due to unsafe Abortion in the Asian region is estimated to be between one and 250 developed countries is only one of 3700. The figure is providing an overview of the problem of abortion in Indonesia is still quite high.

The purpose of the study : the type of research using descriptive methods by applying midwifery care management as well as the case study approach of 23-year-old Ny "I" subjects with imminent abortion data collection through interviews, physical examination observations and medical records.

Results : 23-year-old "I" was pregnant with an imminent abortion of drug-giving therapy, 3x1 phenamic acid, good general Fe 1x1 tablet, mother did not feel anxious, bleeding stopped and pregnancy could be maintained.

Case Conclusion : At Ny "I" G2P1A0 With Anonymous Abortion Imminent Tobelo By Applying Obstetric Care 7 rare varney.

Copyright © 2019, **Rasmin Abd Mutalib**. This is an open access article distributed under the creative commons attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Rasmin Abd Mutalib^{1*}, Alfitriyanti A.Y Jam¹, Frangky mapanawang², 2019 "Midwifery Care Mashed In Memory Prengnat Ny. "I" Dengan Aborty Immenens At Aatirah Tobelo Clinic", *International Journal of Health Medicine and Current Research*, 4, (01), 1225-1128.

INTRODUCTION

According to the 2014 *World Health Organization* AKI in Indonesia 214 / 100,000 live births in 2012 maternal deaths related to pregnancy, childbirth, and births of 359 per 100,000 live births ¹.

The maternal mortality rate in Indonesia has not shown a significant reduction that should have been 225 / 100,000 live births in 2000, the challenge we face is to reduce maternal mortality to 102 / 100,000 live births and infant mortality rates to 15/1000 live births in the year 2015 as achieved in the *Millennium Development Goals (MDGs)* ².

WorldHealthOrganization (WHO) estimates that 4 , 2 million abortions are carried out every year, of which 750,000 to 1.5 million occur in Indonesia. The risk of death due to unsafe abortion in the Southeast Asia region is estimated to be from one to 250, developed countries are only one of 3700. This figure illustrates that Abortion problems in Indonesia are still quite high ³.

Abortion or miscarriage is the only outcome of the conception before the person is able to live outside the womb by births <1000grams or <28 weeks' gestation. Spontaneous miscarriages are estimated to be 10 to 15%. An orthopedic bag occurs in two types, spontaneous abortion (imminens, insipis, complete, missed abortion and Habitual opportunism) and artificial abortion (indicative symptom and social indication). The final outcome of pregnancy in the mother and baby is the main concern of the obstetrician. First trimester bleeding is a common symptom of pregnancy, complicating 16% -25% of all pregnancies (1-3). The four main sources of nontraumatic bleeding in the first pregnancy are ectopic pregnancy, miscarriage (threat, inevitable, incomplete or complete), pregnancy implantation and cervical pathology ⁴.

Based on the Indonesian Demographic and Health Survey (SDKI) in 2012, maternal mortality rates (related to pregnancy, childbirth, and postpartum) amounted to 359 per 100,000 live births. This figure is still quite high, especially when compared to neighboring countries. Death and disease rates for pregnant, birth and shipping mothers still occur as a major problem in developing countries including Indonesia. One reason is Anemia. Anemia in the period of porturition is defined as a hemoglobin level of less than 10g / dl. Efforts to overcome anemia in maternal porturants nationwide are done by increasing iron supplementation. Increased Hb levels in potassium through herbs, such as the use of gedi ⁵ leaf decoction.

According to the Profile of North Halmahera Health Office, AKI in 2016 was 18 people. Whereas in 2017 starting from January to March as many as 4 people out of 702 deliveries ⁶.

According to the data from the Tobelo Aatirah Clinic in 2016, 5 people experienced 3 (6%) cases of imminence abortion, 1 (2%) complete, 1 (2%) habitual. In

2017, starting from January to May 1, people experience imminence abortion ⁷.

The higher the death rate for women in particular on Halmahera, the heavier the responsibility of health workers in each place. To prevent maternal mortality rates can be prevented by effective activities and to conduct midwifery care in a manner that is safe by examining, pregnancy, delivery and childbirth, and providing adequate nutrition.

Based on the description above, the author was interested in the case and took the title of Midwifery Care Management for mothers with imminent abortion at the Tobelo Clinic in 2018.

METHODS

This type of research uses 'Descriptive' research for case studies obtaining an overview of imminent abortion studies at the Aatirah clinic. The subject in this study was a mother with the same symptoms and there was a correlation between the research title of the mother with imminent abortion at the Tobelo Aatirah Clinic.

RESULT AND DISCUSSION

In this chapter the author will describe the discussion of the cases that have been taken about the gaps that occur in the practices carried out on the land with the existing theories. This discussion in the maximal can be drawn conclusions and problem solving from the gaps that occur so that it can be used as a follow-up in the application of effective and efficient midwifery care especially in patients with Imminent Abortion.

In accordance with Varney's theory, assessment is the collection of data relating to patients. In collecting subjective data, Ny . I with Imminent maternal Abortion complained of bleeding from the genitals for 5 days and felt mules in the abdomen. Objective data on Ny . I general condition is good, blood pressure 120/80 mmHg, pulse 80x / m, temperature 36 , 6 ° c, respiration 20x / m. 3-finger TFU above the symptom, VT without cervical opening, DJJ examination is still heard.

Data interpretation consists of obstetric diagnoses, problems and needs. In the typical imminent abortion the mother who experiences abdominal immunity always feels anxious, afraid and agitated about the condition of her fetus. For this reason, support is needed so that the mother feels calm in facing the problem. On typical Ny . I obstetrics diagnosis is G2 PI

A0, gestational age 11 weeks with threatened abortion, problems experienced by Mrs. I is out of fresh blood from the genitals, stomach mules and the mother feels anxious and upset with her pregnancy. To manage this issue, support is given so that the mother feels calm.

A potential diagnosis is carried out to determine the anticipation that should be taken in mothers with imminent abortion . Potential diagnosis that occurs in typical Ny . I G2P1A0 with imminent abortion is severe bleeding or lasts a long time, abortion incisors. At this stage there is no gap between theory and practice in the field.

In typical abortion Ny . I G2P1A0 with threatened abortion does is checks the general state of the mother, consciousness and vital signs mencega mother for a potential diagnosis, patients do tira baring selma 2 -3 days. At this stage there was no gap between theory and character.

The action plan on Ny. I G2P1A0 with imminent abortion is in accordance with the needs of the patient namely tira baring with observation of general conditions , TTV, and maternal awareness, and fetal heart rate, Vit Injection. The provision of drug therapy and recommends the mother to treat the vinegar and consume nutritious foods. So in this planning there were no gaps between theory and practice in the field.

Furthermore, the overall care plan described has been carried out efficiently and safely. This planning is carried out by midwives with client involvement. Clients and families know the health conditions and are able to make the right decisions. In theory, carry out processes in accordance with the authority of the midwife. In the field practice, implementing midwifery care in accordance with what has been planned to the client without any actions that save from the plan that has been arranged before.

Implementation carried out on mothers with imminent abortion carried out in accordance with the action plan, namely bed rest, injection of Vit. K with drug therapy : mefenamic acid, prenatal, lacktat calcium, fe tablet, TTV observation, Djj examination and maternal general condition.

After midwifery care for mothers with abortion imminens Ny . I in Klinik Aatirah Tobelo so that the author evaluates the problem with the results obtained from the results of this evaluation, the mother is quite good, on August 27, 18 at 10:00 a.m. Conclusions from the discussion of case studies on mothers with imminent abortion did not find much difference between the theory and midwifery care management with the application of the Varney Seven Rare.

CONCLUSION

Based on the results of studies that have been carried out regarding the application of midwifery care to Mrs.I with abortus imminens in Klinik Aatirah Tobelo by applying rare midwifery care to varney.

1. In the early rare authors collected data f and objective in Ny. I with the bortus imminent interview and observation and patient status.
2. Interpretation of the data obtained by the diagnosis of Midwifery Ny.I with abortus imminens, ie discharge from the birth canal of the mother and the mother feels abdominal pain, so that immediate needs are determined based on problems and immediate needs.
3. Potential problems that occur in a typical abortion can occur so that the fetus cannot be maintained.

This rarity requires immediate anticipation to be prevented while watching Ny.I's clients . Imminent abortion even in bleeding so that it can be handled if it can not cause severe bleeding so that abortion can occur.

1. Immediate action by a midwife or doctor to be dealt with together according to the client.
2. In the fifth rare, planning upbringing is rare beforehand.
3. Carrying out the plans outlined in the fifth rare is carried out efficiently and safely. By doing the planning that is already made.
4. Do an evaluation of midwifery care in Ny.I.dengan threatened abortion, general objec good mother, vital signs within normal limits. In this case there is no gap between theory and case. The author is able to make pemecan problems in pregnant women with imminent abortion.

REFERENCES

1. Suhartono Hermanus. Improved Relationship Of Skills And Knowledge And Equitable Distribution For Health Care Workers Can Reduce Maternal And Infant Mortality Rate In Indonesia Especeally, 2017 ; Vol (2) : 387-390, DOI:10.22301/IJHMCR.
2. Tamera Grace, Rasmin Hi Abd Mutalib, Frangki Mapanawang. Management Of Obstetric Care At Maternity Mother Ny. Y With Kala II Long In Tobelo Of North Halmahera Clinic, 2017 ; Vol (2) : 545-548, DOI : 10.22301/IJHMCR.
3. Word Healh Organization (WHO) Strategi Making Pregnensi Safer Tahun 2015.

4. Manuaba, IBG, Ilmu Kebidanan, Penyakit Kandungan dan Keluarga Berencana, Cetakan 1, EGC, Jakarta. 2014.
5. Rumbajan D, Mapanawan. AL, Dkk. The Effect Of Gedi Leaf Decoction (Abelmoschus Manihot) Toward Hb Increasing At Perturition Mom With Anemia, International Journal of Health Medicine And Current Research, 2016 ; Vol (1) : 7-70, DOI : 10.223010/IJHMC.R.
6. Data Dari Dinas Kesehatan Tahun 2017.
7. Data Dari Klinik Aatirah Tahun 2017.
8. Prawirohardjo S. Ilmu Kebidanan. Jakarta: Yayasan Bina Pustaka Sarwono Prawirohardjo. 2013.
9. Depkes RI, Manajemen Kebidanan, Modul Pendidikan dan Pelatihan Jarak Jauh, Jakarta. 2014.
10. Mochtar Rustam, Sinopsis Obstetri, Edisi 2, Jilid IV, EGC Jakarta. 2013.
11. Boyle M. Buku Saku Bidan. Meiliya E (penerjemah). Jakarta .EGC 2014.
12. Jensen, Bobak, Lawdermilk. Yogyakarta. Keperawatan Maternitas. Wijayariani M (Penerjemah). Jakarta: EGC. 2014.
13. Kismiyati Yuni. Perawatan Ibu Hamil. Yogyakarta: Fitramaya, 2012.
14. Prawiroharjo S. Ilmu Kebidanan Jakarta: Yayasan Bina Pustaka Sarwono Prawiroharjo. 2014.
15. Masjoer Arif DKK, Kapita Salekta Kedokteran. Jilid 1 Medika Aesculapius 2013.
16. Verney, H. at all Salma. Buku Ajaran Asuhan Kebidanan .Edisi 4. Vol. I. EGC. Jakarta: 2014.
17. Friedman dkk, Seri Skema Diagnosis dan Penatalaksanaan Obstetri, Edisi 2, Jakarta. 2013
18. Taylor Jhonson .Buku Ajaran Praktik Kebidanan .EGC. Jakarta. 2013
19. Mapanawang, A.L, Buku Riset Di bidang Kesehatan. Medika Mandiri Halmahera Utara. 2015.
