

**NURSING CARE FOR MRS. Y P1A0 WITH PRETERM PREMATURE
RUPTURE OF MEMBRANE IN THE POSTPARTUM CHAMBER
INTRA UTERINE GROWTH RESTRICTION IN RSUP
DR. SARDJITO HOSPITAL YOGYAKARTA**

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ABSTRACT

Background: The author in cases of preterm premature rupture of membrane (PPROM), obtained data on the number of cases, in 2020 there were 45 cases with the most cases in July as many as seven cases with a percentage of 15.5%, in 2021 there were 40 cases with the most cases in April as many as nine cases with the percentage of 22.5%, in 2022 from January to May there were 20 cases with the most cases in April and May as many as six cases with a percentage of 30%. The impact of KPD on mother is prolonged labor, bleeding after delivery, the uterus cannot contract again after delivery (*antonia uteri*), and delivery infections.

Objective: To obtain an overview and real experience in carrying out nursing care in patient with PPRM using the nursing process method based on evidence based practice.

Method: This nursing care uses a descriptive case study method in one managed patient with nursing process approach which includes stage of assessment, nursing diagnoses, planning, implementation, evaluation, discussion, and documentation using case analysis based on problems found in patient PPRM.

Result: After conducting the assessment and analyzing the data, nursing diagnosis of pre sectio caesarea (SC) was obtained, namely anxiety, risk of injury to the fetus, risk of bleeding, and meanwhile post sectio caesarea, namely ineffective peripheral perfusion, activity intolerance, acute pain, risk of infection.

Conclusion: After five days of nursing care, the result showed decreased anxiety, no injury to the fetus, no bleeding, increased activity, no infection, effective peripheral perfusion and decreased acute pain.

Keywords: Nursing Care, PPRM, Sectio Caesarea

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**ASUHAN KEPERAWATAN PADA NY. Y P1A0 DENGAN
KETUBAN PECAH DINI DI RUANG NIFAS MATERNAL
PERTUMBUHAN JANIN TERHAMBAT RSUP
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INTISARI

Latar belakang: Data register RSUP Dr. Sardjito yang dilakukan penulis pada kasus ketuban pecah dini (KPD) diperoleh data jumlah kasus tahun 2020 ada 45 kasus dengan kasus terbanyak pada bulan Juli sebanyak tujuh kasus dengan persentase 15.5%, tahun 2021 ada 40 kasus dengan kasus terbanyak pada bulan April sebanyak sembilan kasus dengan persentase 22.5%, tahun 2022 bulan Januari sampai Mei ada 20 kasus dengan kasus terbanyak pada bulan April dan Mei sebanyak enam kasus dengan persentase 30%. Dampak KPD terhadap ibu adalah persalinan lama, perdarahan setelah persalinan, rahim tidak bisa berkontraksi kembali setelah melahirkan (*atonia uteri*), dan infeksi persalinan.

Tujuan: Untuk memperoleh gambaran dan pengalaman nyata dalam melaksanakan asuhan keperawatan pada pasien dengan ketuban pecah dini menggunakan metode proses keperawatan berdasarkan *evidence based practice*.

Metode: Asuhan keperawatan ini menggunakan metode studi kasus deskriptif pada 1 pasien kelolaan dengan pendekatan proses keperawatan yang meliputi tahap pengkajian, perumusan diagnosa, perencanaan, implementasi, evaluasi, pembahasan, dan dokumentasi yang menggunakan analisis kasus berdasarkan permasalahan yang ditemukan pada pasien dengan ketuban pecah dini.

Hasil: Setelah dilakukan pengkajian sampai analisa data didapatkan diagnosa keperawatan *pre sectio caesarea* (SC) yaitu ansietas, risiko cedera pada janin, risiko perdarahan, dan *post SC* yaitu perfusi perifer tidak efektif, intoleransi aktivitas, nyeri akut, risiko infeksi.

Kesimpulan: Setelah dilakukan tindakan asuhan keperawatan selama lima hari didapatkan hasil ansietas menurun, tidak terdapat cedera pada janin, tidak terdapat perdarahan, aktivitas meningkat, tidak terjadi infeksi, perfusi perifer efektif dan nyeri akut menurun.

Kata Kunci: Asuhan Keperawatan, KPD, *Sectio Caesarea*

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