

POLITEKNIK KESEHATAN TANJUNG KARANG
PRODI KEPERAWATAN KOTABUMI
Laporan Tugas Akhir, 03-05 Maret 2022

Fitri Aulia Shavira,
Asuhan Keperawatan Maternitas dengan Gangguan Rasa Aman Nyaman pada
Kasus *Post Sectio Caesarea* Terhadap Ny.I di Ruang Kebidanan RSUD Handayani
Kotabumi Lampung Utara Tanggal 03-05 Maret 2022
Xv + 60 halaman, 6 tabel, 3 gambar

RINGKASAN

Salah satu cara persalinan adalah dengan *sectio caesarea*, *sectio caesarea* adalah tindakan untuk melahirkan bayi melalui pembedahan abdomen dan dinding uterus (Roslianti, 2018). Bedah *sectio caesarea* ini biasanya dilakukan saat proses persalinan normal pervaginam tidak memungkinkan dikarenakan beresiko mengalami komplikasi medis lainnya. Di Indonesia prevalensi tindakan sesar adalah sebesar 17,6 persen.

Tujuan laporan tugas akhir ini mendapat gambaran asuhan keperawatan maternitas kasus *post section caesarea* menggunakan pendekatan proses keperawatan pada tahap pengkajian keperawatan sampai dengan evaluasi keperawatan.

Pengkajian Ny. I terjadi nyeri *post sectio caesarea* terasa seperti ditusuk-tusuk, nyeri terasa pada perut bagian bawah pada luka operasi, skala nyeri 6 (0-10) kategori nyeri sedang. Nyeri hilang timbul selama \pm 30 menit, makin terasa saat klien banyak bergerak, berkurang saat istirahat dan setelah minum obat. Klien tampak meringis, bergerak secara hati-hati, tidak mampu melakukan aktivitas secara mandiri. Terdapat luka sayatan melintang \pm 10 cm dibalut verban, luka tampak kemerahan. Klien mengatakan cemas saat bergerak, mengatakan sulit tidur, mengatakan aktivitas perawatan diri dibantu oleh keluarga, tekanan darah 123/85 mmHg, nadi 78x/menit, pernafasan 20x/menit, suhu 36.5°C, saturasi oksigen 98%.

Diagnosa keperawatan yang ditegakkan yaitu nyeri akut, gangguan mobilitas fisik dan risiko infeksi. Rencana dan pelaksanaan keperawatan diantaranya adalah SLKI: tingkat nyeri, mobilitas fisik dan tingkat infeksi. SIKI : manajemen nyeri , dukungan mobilisasi, dan pencegahan infeksi. Evaluasi selama 3 hari, nyeri akut teratasi sebagian, gangguan mobilitas fisik teratasi dan risiko infeksi teratasi sebagian.

Simpulan pada kasus Ny.I didapatkan bahwa asuhan keperawatan dapat dilakukan dengan baik pada pasien maupun keluarga pasien. Saran bagi lahan praktik terutama bagi perawat ruangan yang melaksanakan asuhan keperawatan pada pasien *post sectio caesarea* dengan gangguan rasa aman nyaman agar dapat menjelaskan lebih banyak tentang teknik-teknik nonfarmakologi yang dapat dilakukan secara mandiri untuk meringankan ketidaknyamanan karena nyeri.

Kata kunci : Asuhan Keperawatan Maternitas, *Post Sectio Caesarea*, Nyeri Akut
Sumber Bacaan: 19 (2007-2019)

TANJUNGPURBA HEALTH POLYTECHNIC OF
KOTABUMI NURSING STUDY PROGRAM
Final Project Report, 03-05 March 2022

Fitri Aulia Shavira,
Maternity Nursing Care with Disruption of Comfort in the Post Sectio Caesarea
Case Against Mrs. I in the Midwifery Room of RSU Handayani Kotabumi, North
Lampung, March, 03rd-05th 2022
Xv +60 pages, 6 tables, 3 picture

ABSTRACT

One way of delivery is by *sectio caesarea*, *sectio caesarea* is an action to givebirth to a baby through abdominal and uterine wall surgery (Roslianti, 2018). *Sectio caesarea* surgery is usually performed when normal vaginal delivery is not possible due to the risk of experiencing other medical complications. In Indonesia, the prevalence of cesarean section is 17.6 percent.

The purpose of this final project report is to know and get an overview of maternity nursing care for post *sectio caesarea* cases using the nursing process approach at the stage of nursing assessment to nursing evaluation.

Assessment of Mrs. I occur post *sectio caesarea* pain feels like being stabbed stabbing pain is felt in the lower abdomen at the surgical wound, pain scale 6 (0-10) moderate pain category. Pain comes and goes for \pm 30 minutes, is more pronounced when the client moves a lot, decreases at rest and after taking medication. The client looks grimace, moves carefully, unable to perform activities independently. There is a transverse incision wound \pm 10 cm wrapped in bandage, the wound looks reddish The client says he is anxious when moving, says he has difficulty sleeping, says self-care activities are assisted by his family, blood pressure 123/85 mmHg, pulse 78x/minute, breathing 20x/minute, temperature 36.5° c, oxygen saturation 98%.

Nursing diagnoses that are enforced are acute pain, impaired physical mobility and risk of infection. Nursing plans and implementations include SLKI pain levels, physical mobility and infection rates. SIKI pain management, mobilization support, and infection prevention Evaluation for 3 days, acute pain partially resolved, impaired physical mobility resolved and risk of infection partially resolved.

The conclusion in the case of Mrs. I found that nursing care can be done well on the patient and the patient's family. Suggestions for the practice area, especially for room nurses who carry out nursing care for post *sectio caesarea* patients with comfortable feeling of security disorders in order to be able to explain more about non-pharmacological techniques that can be done independently to relieve discomfort due to pain.

Keywords: Maternity Nursing Care, Post Sectio Caesarea, Acute Pain
Reading Source : 19 (2007-2019)