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Judul Karya Tulis Ilmiah : Asuhan Keperawatan pada Nyonya J dengan pasca partum dengan tindakan *sectio caesarea* atas indikasi *oligohidramnion* di Ruang Euphorbia Rumah Sakit Mitra Keluarga Bekasi Timur
Halaman : xiii + 77 halaman + 5 tabel + 3 lampiran
Pembimbing : Lina Herida Pinem

ABSTRAK

Latar Belakang: *Oligohidramnion* adalah terjadinya kekurangan atau penurunan cairan amnion (ketuban) yang mengelilingi janin dalam rahim, sehingga dapat menyebabkan komplikasi pada ibu paska partum, diperlukan peran perawat sebagai *preventif*, *promotif*, *kuratif*, dan *rehabilitatif* untuk mengurangi kejadian *oligohidramnion* dan penanganan pada *oligohidramnion* yang sesuai.

Tujuan Umum: Laporan kasus ini adalah untuk memperoleh gambaran nyata melakukan asuhan keperawatan pada ibu postpartum dengan *sectio caesarea* indikasi *oligohidramnion* melalui pendekatan proses keperawatan secara komprehensif.

Metode Penulisan: Dalam penyusunan laporan makalah ilmiah ini menggunakan metode studi kasus, kepustakaan, dan deskriptif yaitu dengan mengungkapkan fakta-fakta sesuai dengan data-data yang didapat.

Hasil: Hasil dari pengkajian didapatkan enam diagnosa dengan tiga diagnosa prioritas yaitu: nyeri akut berhubungan dengan agen cedera fisik (prosedur operasi), risiko infeksi berhubungan dengan prosedur invasif (postpartum *sectio caesarea*), risiko perdarahan berhubungan dengan komplikasi paskapartum, Intervensi prioritas pada lima diagnosa yaitu: monitor tanda-tanda vital, ajarkan teknik relaksasi nafas dalam, identifikasi nyeri, observasi adanya respon non-verbal, berikan obat kaltrofen 1 suppositoria, dan berikan obat zaldiar 1 kapsul melalui oral. Intervensi kedua yaitu: monitor tanda-tanda vital, monitor tanda-tanda infeksi, anjurkan menjaga luka tetap kering, anjurkan makanan tinggi kalori tinggi protein, lakukan perawatan luka, ajarkan pasien dan keluarga tentang tanda-tanda infeksi, berikan obat dynacep 1gram melalui iv, dan berikan obat albusmin 1 kapsul melalui oral. Intervensi ketiga yaitu: monitor tanda-tanda vital, monitor tanda-tanda perdarahan, monitor konsistensi uterus dan kontraksi uterus, anjurkan pasien untuk meningkatkan makanan yang kaya akan vitamin K, observasi hematokrit dan hemoglobin, dan berikan obat metvell 1 mg tablet melalui oral.

Kesimpulan dan Saran: Diagnosa prioritas sesuai dengan kebutuhan dasar yang paling utama yaitu kebutuhan fisiologis dan semua intervensi yang telah disusun terencana sehingga tujuan tercapai. Perawat diharapkan bekerja sama tim agar memberikan asuhan keperawatan yang optimal kepada pasien. Tidak semua masalah dapat teratasi sesuai dengan waktu yang telah ditentukan.

Keyword: *Sectio caesarea*, *oligohidramnion*

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The Tittle of Scientific Paper : Nursing Care to Ny. Jwith post partum with cesarean with indication of oligohydramnionin Euphorbia ward in East Bekasi Mitra Keluarga Hospital.
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ABSTRACT

Background: Oligohydramnion is less or decrease amnion that surrounds the fetus inside the uterus, so that it can cause complications in postpartum mothers, so the nurse's role as preventive, promotive, curative, and rehabilitative is needed to reduce the incidence of oligohydramnios and the handling of the appropriate oligohydramnios.

Main objective: The aim of this report is to get a clear picture after giving nursing care plan to a patient with ectopic pregnancy with comprehensive nursing care.

Writing Method: In preparing this scientific paper report using case study methods, literature, and descriptive that is by disclosing facts in accordance with the data obtained.

Results: Result from the assessment found five diagnoses: acute pain associated with physical injury (surgical procedure), infection risk associated by invasive procedure, hemorrhage risk associated with postpartum complication. Intervention priority from the five diagnose is: monitor vital sign, teach deep breath relaxation, identifcaion the pain monitor nonverbal response, give kaltrofen 1 suppositoria, and zaldiar 1 capsul by oral. Second intervension: monitor vital sign, monitor infection sign, suggest patient to keep the wound dry, suggest patient to consume high protein meal, wound care, teach patient and family about infection risk, medical treatment with dyanacep 1 gram by IV, albusin 1 capsul by oral. Third intervention: monitor vital sign, monitor hemorrhage sign, monitor uterus consistency and uterus contraction, monitor fluid status, suggest patient to eat food that contained lots of vitamin K, monitor haematocrit and haemoglobin, give metvell 1 mg by oral. Fourth intervention: assessment of mobility step by step, and early mobility, help patient to fulfil everyday needs (bath and eat), involve family in helping the patient. Fifth intervention: assessment of patient knowledge of contraception. Provide information about KB, tell patient about the aim ang benefits of KB, explain to the patient the variety of contraception, sixth intervention: observation on mother's way of breast feeding, teach patient breastfeeding technique, help mother too fix suction technique on the breast.

Conclusions and recommendations: Diagnosis of priority according to the most basic needs are physiological needs and all the interventions that have been prepared accomplished that goal is reached. Nurses are expected to work closely with the team in order to provide optimal nursing care to patients. Not all problems can be resolved in accordance with the allotted time.

Keyword: *Sectio caesarea, Oligohidramnion*

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