

ABSTRAK

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Pengkajian Dan Diagnosis Keperawatan Pada Ibu *Post Sectio Caesarea* Dengan Indikasi Preeklamsia Berat (PEB) Di Ruang Mawar RSUD. dr. H. Koesnadi Bondowoso

X + 85 Halaman + 8 Tabel + 5 Lampiran

Abstrak

Introduksi : Preeklamsi adalah kehamilan yang berhubungan dengan hipertensi baru, disertai proteinuria, yang sering terjadi setelah usia kehamilan 20 minggu dan sering menjelang aterm. Preeklamsia berat berisiko menyebabkan komplikasi seperti eklamsia dan sindrom HELLP. Karena tingginya risiko komplikasi persalinan normal, ibu dengan preeklamsia berat umumnya disarankan menjalani persalinan melalui *sectio caesarea*.

Tujuan : Penelitian ini bertujuan untuk mendiskripsikan pengkajian dan diagnosis keperawatan pada ibu *Post Sectio Caesarea* dengan Indikasi Preeklamsia Berat (PEB) Di Ruang Mawar RSUD. dr. H Koesnadi Bondowoso.

Metode : Penelitian ini menggunakan desain penelitian kualitatif dengan pendekatan studi kasus.

Hasil : Hasil pengkajian terhadap tiga pasien *post sectio caesarea* dengan preeklamsia berat mengalami hipertensi kehamilan (TD 160/103 – 166/112 mmHg) dan proteinuria (+3 hingga +4). Pemeriksaan luka operasi menunjukkan inflamasi ringan tanpa rembesan, menandakan risiko infeksi. Perbedaan terlihat pada produksi ASI: satu pasien dapat menyusui langsung, sementara dua lainnya memiliki produksi ASI rendah dan harus memompa.

Diskusi : Peran perawat sangat penting dalam melakukan pengkajian pada ibu *post sectio caesarea* dengan indikasi preeklamsia berat. Tindakan ini bertujuan untuk memantau kondisi klinis ibu, mencegah komplikasi lebih lanjut, serta membantu ibu dalam proses adaptasi fisik dan psikologis pasca persalinan.

Kata kunci : Ibu *post sectio caesarea*, preeklamsia berat

ABSTRACT

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Nursing Assessment and Diagnosis of Post-Caesarean Section Mothers with Severe Preeclampsia (PEB) in the Rose Room of Dr. H. Koesnadi Bondowoso Regional Hospital

X + 85 pages + 8 Tables + 5 attachments

Abstract

Introduction: Preeclampsia is pregnancy-related hypertension accompanied by proteinuria, which often occurs after 20 weeks of gestation and often near term. Severe preeclampsia carries a risk of complications such as eclampsia and HELLP syndrome. Due to the high risk of complications during normal delivery, mothers with severe preeclampsia are generally advised to deliver by cesarean section.

Objective: This study aims to describe the assessment and nursing diagnosis of post-cesarean section mothers with severe preeclampsia (PEB) in the Mawar Ward of Dr. H. Koesnadi Bondowoso Regional Hospital.

Method: This study used a qualitative research design with a case study approach.

Results: The assessment of three post-cesarean section patients with severe preeclampsia revealed gestational hypertension (BP 160/103–166/112 mmHg) and proteinuria (+3 to +4). Examination of the surgical wound revealed mild inflammation without seepage, indicating a risk of infection. Differences were seen in breast milk production: one patient was able to breastfeed directly, while the other two had low milk production and required pumping.

Discussion: The role of nurses is crucial in assessing post-cesarean section mothers with indications of severe preeclampsia. This intervention aims to monitor the mother's clinical condition, prevent further complications, and assist the mother in the physical and psychological adaptation process after delivery.

Keywords: Post-cesarean mothers, severe preeclampsia