

Nursing Care for Post Partum Mothers with Post Section Caesarean in the Inpatient Room in Kabanjahe Regional Hospital

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Abstract. Post partum is time after labor can Also called time postpartum (puerperium) that is time afterlabor Which required For recovery return tool content Which duration 6 week.Sectio Caesarea is an artificial delivery in which the fetus is born through an incision in the front wall of the uterus. stomach And wall uterus with condition uterus in condition intact as well as heavy fetus in on 500 grams HOSPITALDr. Achmad Mochtar Bukittinggi in the last 6 months of 2019, the incidence of cesarean section was caesarean section as many as 198 people. The author's purpose in making this report is to be able to understand the concept about Mother post partum with post operation section caesarean And do care nursing on clientMrs. R in the Obstetrics inpatient room of Dr. Achmad Mochtar Hospital Bukittinggi. Post operation section caesarean is incident Which often happen in circles public Indonesia, where postpartum mothers with post-caesarean section operations are not handled properly right will cause bleeding, causing death. Therefore it is suggested to the agency House sick to conduct assessments, planning, action And evaluation in a way appropriate and true.

Keywords: Foster Care Nursing, Sect. Caesarea, Post Partum

1. INTRODUCTION

Labor is the process of opening and thinning the cervix and the fetus descending into the uterine canal. birth. Normal labor and delivery is the process of expelling a fetus that occurs in pregnancy Enough month (37-42 Sunday), born spontaneous with presentation head, without complications ok mom and the fetus (Sukarni & revelation, 2013). Postpartum is a period of time or period in which the reproductive organs return to normal. to condition No pregnant need time around 6 Sunday. Post partum is timeafter labor can Also called time postpartum (puerperium) that is time after laborWhich required For recovery return tool content Which duration 6 Sunday. Post partum is a period of 6 weeks from the time the baby is born until the reproductive organs return to normal. condition normal before pregnant (Kirana, 2015).

Post partum is time after labor can Also called time postpartum (puerperium) that is time after labor Which required For recovery return tool content Which6 weeks long. Postpartum is the 6 week period from when the baby is born until the baby's organs reproduction until return to condition normal before pregnant (Bobak, 2010). Time postpartum orpuerperium is started since 1 O'clock after birth placenta until with 6 Sunday (42day) after that (Hadijono, 2008:356). Time postpartum or time peurperium is time after parturition finished And end after think- think 6-8 Sunday (Manjoer, A et al, 2001). Will but

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all over tool genitals new recover return as previously there was a pregnancy within 3 months (Obstetrics, 2007).

Postpartum period (puerperium) is the period that begins after the placenta is delivered and ends when the reproductive organs The womb returns to its original state (before pregnancy). The postpartum period lasts forever approximately 6 Sunday, woman Which through period peurperium called pure. Postpartum in progress during 6 Sunday, is time Which required For recovery tool content on normal condition (Ambarwati, 2009). According to references from Prawirohardjo (2009:238), postpartum bleeding is divided into 3 parts, namely: puerperium early, puerperium intermediate, And remote puerperium. Period post partum is six-week period after the baby is born until the reproductive organs return to normal before pregnancy. This period is sometimes called the puerperium or the fourth trimester of pregnancy. Immediate post partum -> Ongoing in 24 O'clock First, Early post partum . Lasts until the first week, Late post partum -> Lasts until the postpartum period. partum end (Prawirohardjo, 2009).

The postpartum period is the period after delivery is complete up to 6 weeks or 42 days. day. After time postpartum, organ reproduction in a way slowly will experience change likebefore pregnant. During time postpartum need get attention more because of number death Mother 60% happen on time postpartum. In number death Mother (BATTERY) is reasonmany women die from a cause of lack of attention to women post partum (Maritalia, 2012). In developing countries like Indonesia, the postpartum period is a critical period for mothers. who after giving birth. It is estimated that 60% of maternal deaths occur after childbirth. And 50% among them happen in hose time 24 O'clock First (Prawirardjo, 2006).

The high rate of postpartum maternal mortality is a complex problem that is difficult to overcome. AKI is a measurement to assess the state of obstetric services in a country. When BATTERY Still tall means service obstetrics Still bad, so that need repair. From report WHO in Indonesia is Wrong One number death Mother is relatively high, namely 420 per 100,000 live births, when compared with other countries other ASEAN countries. Meanwhile, according to the Ministry of Health in 2009, there was a decline to 226 per 100,000 live births. From these data, a decrease in the number was obtained death Mother in Indonesia military reason death Mother post partum in Indonesiabecause of by infection and bleeding vaginally.

Caesarean section is a birthing process or surgery through an incision in the uterine wall. abdomen and the front of the uterus to give birth to the fetus. Medical indications for

surgery There are two factors that influence sectio caesarea, namely fetal factors and maternal factors. Factors fetus includes the following: the baby is too big, abnormal fetal position, threat of fetal distress, abnormal fetus, placental factors, umbilical cord abnormalities and twins. While maternal factors consists of age, number of children born, pelvic condition, obstructions to the birth canal, abnormality contraction born, amniotic fluid broken early (KPD), And before eclampsia (Hutabalian, 2011).

Number incident section caesarean in world on year 2010 based on World Health Organization (WHO) reach 10% until 15% per 1,000 process labor. In country proceed number labor section caesarean reach 15% from previously 5% on year 2010.Meanwhile, in developing countries such as Canada, the caesarean section rate reaches 21%. all over labor (Husna, 2012). In Indonesia number incident section caesarean in period the last 20 years from 5% to 20% in 2010. In Central Java, childbirth with caesarean section on 2010 by 11.8% (Ministry of Health, 2010). According to (Head of Division Planning, 2007). Number incident the amount section caesarean in HOSPITAL Dr.Moewardi Surakarta in 2006 between January-December recorded caesarean section patients caesarean who came to the hospital for in-patient care to give birth were 682 clients. According to (K Usmawan, 2008) from the results of a survey at Banda Aceh Regional Hospital, data was obtained in 2012 on SC patients. Which treated in room midwifery as much as 145 person. And on month October There is 37 Mother postpartum c-section, in November 50 mothers had postpartum c-section and in December there were 58 mothers who had post-partum c-section. partum sc.

According to (Sulaini, 1991) in West Sumatra, the incidence of caesarean sections in 2000 was around 22.46%, year 2001 around 23.33%, year 2002 around 25.7% And year 2003 around 25.24%.With increasing frequency section caesarean This, so can increase also number incident of pregnant women with a history of giving birth by caesarean section and complications experienced during childbirth. In West Sumatra, cases of childbirth in mothers with cesarean section caesarean on labor previously in the year of 2004 around 8.90%. Pregnancy Andlabor with history section caesarean previously will get risk the occurrence increased morbidity and mortality. At Kabanjahe Regional Hospital on In the last 6 months of 2020, the number of caesarean section cases was 198 people. Based on Which explained in background behind writer interested do care nursingentitled "Nursing Care for Postpartum Mothers with Post Sectio Operation" Caesarea in the Obstetrics Inpatient Room of Kabanjahe Regional Hospital Year 2020".

2. THEORETICAL STUDY

Understanding Post Partum

Postpartum is the period after childbirth, it can also be called the postpartum period (puerperium). that is time after labor Which required For recovery return tool content Which6 weeks long. Postpartum is the 6 week period from when the baby is born until the baby's organs reproduction until it returns to its normal state before pregnancy (Bobak, 2010). Postpartum period or puerperium starts from 1 hour after the birth of the placenta until 6 hours Sunday (42 days) after that (Hadijono, 2008:356). Post Partum is a period of time or period where the reproductive organs return to normal. to condition No pregnant need time around 6 Sunday. Post partum is timeafter labor can Also called time postpartum (puerperium) that is time after labor Which required For recovery return tool content Which duration 6 Sunday.Postpartum is the 6 week period from when the baby is born until the reproductive organs are return to the state normal before pregnant (Kirana, 2015).

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The postpartum period or puerperium period is the period after childbirth is complete and ends after approximately 6-8 weeks (Manjoer, A et al, 2001). However, all the genital organs have just recovered return like previously There is pregnancy in time 3 month (Knowledge midwifery, 2007). The postpartum period (puerperium) is the period that begins after the placenta is delivered and ends when the uterine organs return to their original state (before pregnancy). Postpartum period lasts for approximately 6 weeks, women who go through the puerperium period are called puerpura. Nifas lasts for 6 weeks, which is the time needed for recovery tool content on normal condition (



Understanding Sect. Caesarea

Picture 1. Section Caesarea (*Source : (Sarwono, 2009*)

Sect. caesarean is a labor artificial Where fetus born through a incisionon wall front stomach And wall uterus with condition uterus in condition intact as well asheavy fetus in on 500 grams (Sarwono, 2009). Whereas according to (Gulardi & Wiknjosastro, 2006) Sect. caesarean is action For give birth to fetus with weightbody weight above 500 grams through an incision in the intact uterine wall, and according to (Mansjoer, 2002) Sect. caesarean is surgery For give birth to fetus with open scar wall and uterine wall.

Care Assessment Nursing

On assessment client with section caesarean, data Which found coveringdistress fetus, failure For continue labor, malposition fetus, prolapse umbilical cord, abruption placenta and placenta prediction.

a. Identity or biodata client

Includes: name, age, religion, gender, address, ethnicity, occupation, education, date of hospital admission, registration number, And nursing diagnosis.

b. Complaint main

Complaint Which felt client on moment This collected For determine priority intervention nursing, complaint main on postCS operations are usually accompanied by pain in the abdomen, dizziness and pain waist.

- c. History health
 - 1) History health Now

History of fluid coming out before inpartus vaginal in a way spontaneous Then No in follow signs labor.

2) History health formerly

Got it data client Once history SC previously, pelvisnarrow, as well as location baby breech. Covering disease Which other canAlso influence disease Now.

3) History health family

Is there any disease derivative in family like heart, HT, TB,DM, sexually transmitted diseases, abortions, which may be the disease lowered to clients.

d. Inspection physique

- 1) Head
 - a) Hair

What is the shape of the head, hair color, hair cleanliness, And is there a lump?

b) Eye

Sometimes existence swelling on petals eye, conjunctiva, and sometimes a pale conjunctiva (anemia) due to the birth process which involves bleeding, sclera yellow.

c) Ear

Usually form ear symmetrical or No, How its cleanliness, is there any fluid that came out from ear.

d) Nose

Whether there are polyps or not and if post partum sometimes sometimes nostril breathing was found.

e) Mouth And tooth

Mouth clean / dirty, mucosa lips dry / moist.

2) Neck

Moment palpated found There is / No enlargement gland thyroid, because the existence of a process misinformation.

- 3) Thorax
 - a) Breast

Symmetrical left And right, No There is abnormality on breast, areolabrownish black, protruding nipples, smooth milk flow and Lots go out.

b) Lungs

I: Symmetrical / No left And right, There is / No seenswelling.

P: : Is there/isn't there any tenderness, is there/isn't there a palpable mass?Q : Dim / sonor

A: Vesicular breath sounds / rhonchi / wheezing

c) Heart

I : Ictus cordis palpable / notP : Ictus cordis palpable / notP : Dim / tympanum

- A : Sound magnifying glass heart dup
- 4) Abdomen

I : There is wound stitches post op covered verban, existence strip pregnancy

P : Pain on pressure on the wound, soft/hard uterine consistency

Q : Dim

A : Bowel sounds

5) Genitalia

Discharge of blood mixed with mucus, discharge of amniotic fluid, if there is the release of mecomium, namely feces formed by the child in content indicates the presence of abnormality location child.

6) Extremities

Inspection edema For see abnormalities Because to grow up uterus, Because before eclampsia or Because diseaseheart or kidneys.

7) Signs vital

If postpartum bleeding occurs, blood pressure drops, pulse fast, increased breathing, body temperature drops.

3. RESEARCH METHODS

Type study This is qualitative descriptive, namely by observing research directly on the object. Subject Which used in study is individual with casewhich will be studied in detail and in depth. The research subjects that will be studied, namely two clients with back pain spreading to the placenta and bleeding from the birth canal in the Emergency Room of Kabanjahe Regional Hospital. At the time conducted a review on Thursday, June 20, 2020, the client post cesarean section operation 2 days ago complained pain in scar from CS surgery, pain scale 4, client complains that his stomach feels bloated, client says it hurts felt when move, client looks grimace, there is wound stitches in abdomen, mild pain intensity (4), the client appears to occasionally hold his stomach if pain is felt, The client said that the blood coming out of the genitals was not too much, only occasionally. The client's activities are also assisted by his family.

The client's baby is cared for in the same roomwith client And heavy body born 2800 grams And breast milk client fluent. Client installedinjectpam on left hand. Results of vital signs assessment: Blood pressure Blood:110/80 mmHg, Temperature: 36, 5 °c, Breathing : 20 x/i, Pulse : 80 x/i. The client said that he had previously do Caesarean Section

operation at the time giving birth second at Kabanjahe Regional Hospital more or less around 2 years ago Then. Client family say no one suffered from infectious diseases or hereditary diseases such as: DM, Heart, Asthma, Kidney, Ht, mental illness and other diseases infection other.

History Pregnancy

No	Year labor	Helper labor	Type labor	Type sex	BB / PB	Conditi onchild Now
1.	2015	Midwife village	Normal	Woman	3200 gr / 45 cm	Life
2.	2017	Doc tor Hou se Sick	Opera tion Sect. caesar ean	Woman	3520 gr / 50 cm	Life
3.	2020	Doc tor Hou se Sick	Opera tion loyal caesar ean	Woman	2800 gr /47.5 cm	Life

Table 1. Pregnancy History

Source: Data processed by the author, 2022

Diagnosis Nursing

- a. Painful relate with agent injury physique proven with looks grimace.
- b. Risk infection relate with damage integrity skin.
- c. Intolerance activity relate with immobility proven with client feelweak.

Table 2. Interventions Nursing

No	Diagnosis Nursing	Objective And Criteria results (SLKI)	Intervention Nursing (SIKI)
1.	 Painful I relate with agent injuryphysique proven with looks grimacing DS : Client sigh painful on wound post op Sect. Caesarea Client say painful appear whenmove Client say wound stitches post 	After the action is taken nursing 1x24 O'clock expectedLevel painful decrease. Criteria Results : • Complaint painful decrease • Looks grimace decrease • Attitude protective decrease	 Observation : Identify location, characteristics, frequency, intensity painful Identification scale painful Identification factor reason painful Monitor effect side useanalgesic

	operationvery felt when walk • Client sigh stomach feel bloated DO : • Scale painful client • Once in a while client looks grimace • Client looks be careful when move • Looks wound post op in part lower abdomen approximately 10 cm which is still closed verb • TD : 110/80 mmHg • Temperature : 36.5 °c		 Therapeutic : Give technique non-pharmacological (take a deep breath, warm compress) or cold) Control environment Which aggravate flavor painful (temperature, lighting, noise) Facility Rest And Sleep Education : Explain reason And trigger painful Explain strategy reliever painful Encourage frequent pain monitoring independent Recommend technique non-pharmacological For reduce painful Collaboration : Collaboration in providing analgesics
2.	Risk of infection related to damageintegrity skin. DS : • Client say bandage bleeding wound	After performing the action nursing 1x 8 O'clock expectedLevel infection decrease. Criteria Results :	 (If need) Observation : Monitor sign And symptom infectionlocal And systemic Therapeutic :
	 Client say painful appear when move Client looks once in a while to hold wound post op Sect. Caesarea use his hand DO : Verb wound post op Sactio Caesarea looks dirty because of blood stains Looks wound post op 	 Cleanliness hand increase(5) Cleanliness body increase(5) Painful decrease (5) 	 Limit amount visitors Provide skin care to the area edema Wash hand before And aftercontact with patient And environment patient Keep it up technique aseptic on patient high risk Education :

	Sect. Caesarea start dry • Scale painful 4 • Looks wound post op in part lower abdomen approximately 10 cm which is still closed verb • TD : 110/80 mmHg • Temperature : 36.5 °c • Pulse : 80 x/i • Breathing : 20 x/i		 It's clear sign And symptom infection Teach wash hand with Correct Recommend increasing intake nutrition Recommend increasing intakefluid Collaboration : Collaboration in providing antibiotics or immunization (if necessary)
3.	Intolerance activity relate with immobility proven with client feel weak. DS : • Client say feel weak	After do action nursing 1x24 O'clock expected Tolerance activity increases.	Observation : Identification limitations function Andmotion joints
	 Client say his activities sometimes Still assisted family Client say Still Not yet biasgo too far Alone Client say Still Not yet Canbe active like normal DO : Client looks Still try train walk Looks like a wound post op Sactio Caesarea in lower abdomen approximately 10 cm Client looks Sluggish Looks Once in a while activity client looks inhelp his family TD : 110/80 mmHg Temperature : 36.5 °c Pulse : 80 x/i 	 Criteria Results : Ease of use do activity a day-day increase (5) Speed walk increase (5) Distance walk increase (5) Feeling weak decrease (5) 	 Monitor location And characteristic discomfort or flavor Sickduring move or do activities Therapeutic : Perform pain control before start exercise Give position body optimal Formovement joints passive or active Facilitation compile timetable exerciserange motion active or passive Provide positive reinforcement fordo exercises together Education : Explain to patient or family objective And plan exercise together Recommend patient Sit down in place sleeping, on the side of the bed (dangling)or in chair Recommend doing range of motion passive

•	Breathing : x/i	20	And active in a way systematic

Source: data processed by the Author, 2022

4. RESULTS AND DISCUSSION

Assessment

When the author conducted a study on Mrs. R on June 20, 2020, the data obtained through the client and the client's family. Mrs. R suffered from Post Op Sectio Caesarea, the client had own history Post Op Sect. Caesarea on child to both of them like Which experienced Now, And in family client No there is member family Which experience disease descendantsand infectious. Family Also No There is Which suffer history disease chronicle, hypertension, DM, heart, And other. On moment done inspection physique, No There is abnormality which was found writer on client Mrs. R. Client sigh painful on wound post op Sect. Caesarea, The client said the pain appeared when moving, the client said the wound stitches post operationCaesarean Section very much felt While walking, the client occasionally holds the post-op wound. Sect. Caesarea use his hands, client sigh stomach feel bloated, client said it was still difficult to move, the client said the bandage bleeding wound, client say feel weak, client say his activities sometimes Still assisted family. The client said he still couldn't walk too far on his own. ... Not yet can do activities such as normal.

Theoretical based assessment, complete client identity, good health history current health history, past health history and family health history, during the examination pregnancy history in theory, in the assessment of caesarean section clients, the data that can be obtained found to include fetal distress, failure to continue labor, fetal malposition, prolapse rope center, abruption placenta And placenta preview. History on moment before inpartuamniotic fluid was found to come out spontaneously pervaginally and then was not followed by signs labor, history health family : is there any disease descendants in family such as heart, DM, HT, TB, sexually transmitted diseases, which may be the disease lowered to the client.

From the explanation above, we can see that there are similarities and differences between the theoretical reviews.with review case on client Mrs. R. Similarities Which obtained is assessment identityWhich same, there is a history health now, past and family.

Diagnosis Nursing

In nursing problems, especially in cases of post-caesarean section surgery, in theory... there is 6 nursing diagnoses that emerged that is :

- a. Painful relate with agent injury physique proven with looks grimace.
- b. Risk infection relate with damage integrity skin.
- c. Intolerance related activities with immobility proven with feel weak.
- d. Deficit maintenance self relate with weakness physique proven with Nocapable bathe/dress independently.
- e. Disturbance mobility physique relate with effect agent pharmacological (anesthesia)proven with weak physique.
- f. The risk of fluid imbalance related to surgical procedures has been demonstrated with bleeding.

Whereas on data that is obtained on Mrs. Client R appear 3 diagnoses nursing is :

- a. Painful relate with agent injury physique proven with looked grimacing.
- b. Risk infection relate with damage integrity skin.
- c. Activity intolerance related to immobility as evidenced by the client feel weak.

In establishing a nursing diagnosis, the author did not find any difficulties or obstacles. Matter This Because supported by availability source book diagnosis nursing, data0data Whichshown by the client in accordance with the existing concept. There is good cooperation withroom nurses and families who are open in conveying everything that complained about and felt moment This, so that the author can conclude 3 diagnoses.

Intervention Nursing

Planning nursing based on priority problem. Objective Which expected from care nursing care with post-operative cases of caesarean section, namely so that the body's pregnancy history is known return increase, client not experiencing difficulty in labor.

In making planning writer Work The same with water Risk infection relatewith damage integrity skin what room For determine action Which will done. As for plan which will be made based on diagnosis nursing is :

 Pain associated with physical injury agents is evidenced by visible grimacing, namely Which done planning is do assessment painful, comprehensive Which covering location, characteristics, duration, frequency, intensity And factor reason. Observation existence instruction nonverbal about discomfort especially on they Which cancommunicate in a way effective, make sure maintenance analgesic for client done monitoring with strict, use strategy communication therapeutic For know painfuland convey the client's acceptance of pain, share knowledge about pain, such as causespain, how long the pain is felt, and the intensity of the pain, encourage the client to monitor pain and treat pain appropriately, and encourage clients to use medications. pain reliever.

- b. Risk infection relate with damage integrity skin that is Which done planning is monitor existence sign And symptom infection systematic And local, monitor provisions against infection, limit the number of visitors, provide skin care in the affected area edema, check the condition of the wound every day, recommend rest, recommend maintaining cleanliness hands, recommend slow walking exercises, recommend increasing nutritional intake, recommend increase intake fluid, wash hand before And after activity.
- c. Activity intolerance related to immobility as evidenced by the client feel weak that is Which done planning is observation identification limitations functionAnd motion joints, monitor location And characteristic discomfort or flavor Sick during moveor activity, do pain control before starting exercise, provide a comfortable position optimal body for passive or active joint movement, facilitating the preparation of an exercise schedule range motion active or passive, give strengthening positive For do exercise together, advise the patient to sit in place Sleep, on the side of the place Sleep (dangling) or on a chair, recommend do range of motion exercises motion passive and active in a way systematic.

Planning nursing Which used in review case The same like plan nursing that exists in the field of tooritis. The author did not find obstacles when doing planning for clients, because all the diagnoses found in the case are appropriate with planning what will be done to the client.

Implementation Nursing

Once the action plan has been established, the next step is to carry out the plan. in real form, before being applied to the client, first carry out an approach to the client and the client's family so that the actions taken can be approved by the client and the family. clients, so that all nursing care action plans are in accordance with the problems faced client.

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Evaluation Nursing

From 3 diagnosis nursing Which writer stand up in accordance with What Which writer findin carrying out nursing care, more or less, it has reached a certain level of development more Good And optimal. So from That, in do care nursing For reachresults Which maximum need existence cooperation between writer with client, nurse, Andteam other health.

- On diagnosis nursing painful relate with agent physical injury proven with looks grimace, problem lol Which felt client on wound used post operationsection caesarea problem solved.
- b. On diagnosis nursing risk infection relate with damage integrity skin, problem risk infection resolved.
- c. On diagnosis nursing intolerance activity relate with immobilityproven with the client feeling weak, the problem is solved.

5. CONCLUSION AND SUGGESTIONS

Conclusion

Caesarean section is a birthing process or surgery through an incision in the uterine wall. abdomen and the front of the uterus to give birth to the fetus. Medical indications for surgery There are two factors that influence sectio caesarea, namely fetal factors and maternal factors. Factors fetus includes the following: the baby is too big, abnormal fetal position, threat of fetal distress, abnormal fetus, placental factors, umbilical cord abnormalities and twins. While maternal factors consists of age, number of children born, pelvic condition, obstructions to the birth canal, abnormality contraction born, amniotic fluid broken early (KPD), And before eclampsia (Hutabalian, 2011).

- a. The author was able to conduct an assessment on client Mrs. R with post-operative section. caesarean section in the obstetrics inpatient room of Kabanjahe Regional Hospital in 2018 2020. In the study, the author did not find any differences, as well as obstacles. No there was found writer.
- b. Writer capable formulate diagnosis nursing on client Mrs. R with post operation caesarean section in the obstetrics inpatient room of Kabanjahe Regional Hospital year 2020. There are 3 nursing diagnosis that found that is :
 - 1) Painful relate with agent injury physique proven with looks grimace.
 - 2) Risk infection relate with damage integrity skin.
 - 3) Intolerance activity relate with immobility proven with client feelweak.
- c. The author is able to plan nursing interventions for client Mrs. R with post caesarean section operation in the obstetrics inpatient room of Kabanjahe Regional Hospital in 2020. The expected goals of nursing care with postpartum Caesarean section operation is to reduce acute pain, reduce the risk of infection, and intolerance activity decrease.
- d. The author is able to implement nursing care for client Mrs. R with post Caesarean

section operation in the Obstetrics inpatient room of Kabanjahe Regional Hospital in 2020. The implementation of the established plan can be carried out well this happens because of the cooperation between the client and the room nurse Which has helped in do implementation actions to clients.

e. The author is able to conduct a nursing evaluation on client Mrs. R with postoperative in the Obstetrics inpatient room of Kabanjahe Regional Hospital in 2020. All nursing problems that experienced Mrs. Client R can resolved.

Suggestion

After the speaker make conclusion about care nursing on post operation section caesarean with client Mrs. R in the room take care stay Midwifery HOSPITAL Kabanjahe year 2020. So writer consider need existence suggestion For repair And increase quality care nursing. As for suggestions asfollowing :

a. Writer

Writer must capable give And think critical in do carecomprehensive nursing care for clients, especially clients with post-operative section caesarea. The author should also use good therapeutic communication techniques again during the assessment, action and evaluation to establish good cooperation for healing client.

b. Education

Health education institutions must develop and improve quality education in the future, so that we can provide nursing care that professional especially for postsection clients caesarean.

c. House Sick

Hospital institutions must emphasize that nurses and other medical teams improve quality of health services to help client treatment and provide satisfaction client in service House Sick, especially in the room take care stay Midwifery Gingerbread man.

6. CONCLUSION

Caesarean section is a birthing process or surgery through an incision in the uterine wall. abdomen and the front of the uterus to give birth to the fetus. Medical indications for surgery There are two factors that influence sectio caesarea, namely fetal factors and maternal factors. Factors fetus includes the following: the baby is too big, abnormal fetal position, threat of fetal distress, abnormal fetus, placental factors, umbilical cord abnormalities and twins. While maternal factors consists of age, number of children

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REFERENCE

Ambarwati. (2009). Midwifery care book postpartum. Yogyakarta: Mitra Cendika Press.

Bambang, E. (2010). Book system reproduction woman. Jakarta: EGC.

Cunningham. (2006). POSSC management.

Dear, M. E. (2000). Nursing care plan guidelines for patient care planning. Jakarta: EGC.

Department of Health. (2010). Book knowledge midwifery. Jakarta.

Hadijono, M. (2008). Postpartum mother (p. 356). Jakarta: EGC.

Harif, T. G. (2018). SDKI (Diagnostic standards Indonesian nursing). Jakarta.

Hutabali. (2011). Book sect. caesarea. Jakarta: Foundation Build Library.

Ida, B. G. (2010). Obstetrics. Jakarta.

Karina. (2015). Book postpartum mother. Yogyakarta: Mitra Cendika Press.

Knowledge Midwifery. (2007). Book time postpartum. Jakarta.

Mansjoer, W., et al. (2000–2008). Book medical teaching surgery. Jakarta: EGC.

- Manuba, I., & Sarwono. (2002–2009). Postpartum reproductive organ system book. Jakarta.
- Mochtar, R. (2008). Synthesis obstetrics. Jakarta: EGC.
- Olfah, J. (2016). Material teach nursing documentation nursing.
- Prawirohardjo, S. (2002–2010). Knowledge midwifery. Jakarta: PT Build Library.
- Putramadja, P. (2013, November). Bonding-attachment paper. *Blogspot*. http://putramadja.blogspot.co.id/2013/11/bonding-attachment-paper
- Riskesdas. (2018). Report on the results of the basic health research (Riskesdas) of Indonesia 2018. Basic Health Research 2018, 182–183.
- Russel, D. (2011). Book free from 6 deadly diseases. Jakarta: Pt. Exciting Books.

Saifuddin. (2002). Basic maternity book. Jakarta: EGC.

Tarwoto. (2012). *Nursing medical surgery: Disorders system endocrine*. Makassar: Trans Information Media.

Verney. (2009). Textbook midwifery. Jakarta: EGC.

- Wandhani, I. A. (2019). Nursing care for clients diabetic ulcer patients with damage integrity skin in house care wound modern Husada Prima Mandiri Mojokerto. Journal of Chemical Information and Modeling, 53(9), 1689–1699. https://doi.org/10.1017/CBO9781107415324.004
- WHO. (2014). Healthy concept according to WHO.
- WHO. (2016). World Diabetes Day 2018. Data and Information Center Ministry Health of the Republic of Indonesia, 1–8.