

**ABSTRACT**

*Fetal distress or intrauterine asphyxia may be a result of prolonged and repeated cord compression due to reduced amniotic fluid or umbilical cord prolapse. Pregnancy may be considered prolonged at 41 weeks 'gestation as neonates mortality and mortality rates rise after 40 weeks' gestation. Larger complications both to the mother and to the fetus it contains during pregnancy, give birth or childbirth.*

*This research aimed to know the difference of incidence of asphyxia neonatorum in postdate case with aterm in RSUD dr. M. Soewandhie Surabaya in 2016. The design is the case control, the sample of 146 respondents who meet the criteria of inclusion and exclusion. Case sampling using total sampling and control sampling using random sampling. Independent variable, postdate pregnancy and dependent variable, asphyxia neonatorum. Data source from medical record. The data analysis used statistical test of Chi Square.*

*Results of the study of 146 samples consisting of 63 cases of postpartum mothers who had 46 postdate pregnancies (73.0%) had asphyxia neonatorum, while 83 cases of maternity maternity aterm 56 people (67.5%) did not have asphyxia neonatorum. Analysis using Chi Square test obtained p value  $<0.001$  ( $p < \alpha$ ), which means there is difference of incidence of asphyxia neonatorum in case of postdate with aterm.*

*The conclusion of this research, there are differences of incidence of asphyxia neonatorum in postdate and aterm cases in RSUD dr.M. Soewandhie Surabaya in 2016. The results of this study are expected to be the basis for further research on the dominant factors causing asphyxia neonatorum.*

**Keywords: *Postdate, Asphyxia Neonatorum***