

**PENYEBAB KETIDAKLENGKAPAN PENGISIAN
LEMBAR *INFORMED CONSENT* PADA KASUS BEDAH
DI RSUD TIDAR KOTA MAGELANG**

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INTISARI

Latar Belakang: Kelengkapan *informed consent* menjadi indikator pelayanan rekam medis tertuang dalam standar pelayanan minimal rumah sakit. Berdasarkan hasil studi pendahuluan masih ditemukan beberapa item-item dalam *informed consent* yang belum terisi secara lengkap.

Tujuan Penelitian: Mengetahui penyebab ketidaklengkapan pengisian lembar *informed consent* pada kasus bedah di RSUD Tidar Kota Magelang.

Metode Penelitian: Jenis Penelitian yang digunakan adalah deskriptif dengan pendekatan kualitatif dengan rancangan fenomenologis. Metode pengumpulan data adalah wawancara dan studi dokumentasi.

Hasil: Pelaksanaan pengisian *informed consent*, persetujuan tindakan kedokteran diberikan dulu kemudian dokter memberi informasi. Persentase kelengkapan pemberian informasi identitas pasien 77,30%, bukti rekaman 88,29%, keabsahan rekaman 94,93%, dan tata cara pencatatan 35,55%. Persentase kelengkapan persetujuan tindakan kedokteran identitas pasien 77,04%, bukti rekaman 20,27%, keabsahan rekaman 60,14%, dan tata cara pencatatan 86,94%. Penyebab ketidaklengkapan adalah jumlah pasien bedah banyak, dokter bedah hanya ada 2 orang. Waktu dokter tidak cukup untuk mengisi rekam medis. Pasien atau wali pasien tidak bisa menulis, tidak bisa tanda tangan dapat dengan cap jempol. Adanya perbedaan persepsi petugas analisis terkait dengan kelengkapan *informed consent*.

Kesimpulan: Pelaksanaan pengisian *informed consent* belum sesuai dengan standar prosedur operasional. Persentase kelengkapan terendah pemberian informasi pada tata cara pencatatan 35,55% dan pada persetujuan tindakan kedokteran kelengkapan terendah pada bukti rekaman 20,27% dan keabsahan rekaman 60,14%. Penyebab ketidaklengkapan adalah dari faktor sumber daya manusia.

Kata Kunci : Ketidaklengkapan *Informed Consent*, kasus bedah

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**THE CAUSES OF INCOMPLETENESS IN FILLING OF
INFORMED CONSENT SHEET ON SURGERY CASE
IN RSUD TIDAR KOTA MAGELANG**

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ABSTRACT

Background : *Completeness of informed consent becomes an indicator of medical record services contained in minimum hospital service standards. Based on the results of the preliminary study, there were still several items in the informed consent that had not been filled completely.*

Objective : *Knowing the cause of incomplete filling in the informed consent sheet in the surgical case in RSUD Tidar Kota Magelang.*

Method : *The type of research used is descriptive with a qualitative approach with phenomenological design. Data collection methods are interviews and documentation studies.*

Result : *The Implementation of informed consent, approval of medical action is given first, then the doctor gives information. The percentage of completeness of information giving patient identity is 77.30%, the recording evidence is 88.29%, the validity of recording is 94.93%, and the procedure for recording is 35.55%. The percentage of completeness of approval for medical actions patient identity is 77.04%, the recording evidence is 20.27%, the validity of recording is 60.14%, and the procedure for recording is 86.94%. The cause of incompleteness is many surgical patients, there are only 2 surgeons. The doctor's time is not enough to fill the medical record. The patient or guardian of the patient cannot write, the signature cannot be with a thumbprint. There are differences in perceptions of analytical officers related to the completeness of informed consent.*

Conclusion : *The implementation of informed consent was not in accordance with the standard operating procedures. The percentage of the lowest completeness of information giving procedures for recording is 35.55% and the percentage of lowest of approval for medical action the recording evidence is 20.27% and the validity of recording is 60.14%. The cause of incompleteness is from the factor of human resources.*

Keywords : *Incomplete Informed Consent, Surgery Case*

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