

# PENGEMBANGAN REKAM MEDIS KONVENSIONAL MENUJU REKAM MEDIS ELEKTRONIK DI RS PKU MUHAMMADIYAH GAMPING TAHUN 2018

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## INTISARI

**Latar Belakang :** RS PKU Muhammadiyah Gamping menggunakan 2 jenis rekam medis yaitu rekam medis konvensional dan rekam medis elektronik. Pertama kali penggunaan rekam medis elektronik di mulai oleh dokter poli sjaraf pada bulan April tahun 2018. Rekam medis elektronik di rawat jalan sudah berjalan, tetapi belum sepenuhnya dilakukan oleh dokter di RS PKU Muhammadiyah Gamping karena masih dalam proses sosialisasi. Agar menjadi rekam medis elektronik seluruhnya dibutuhkan tahap pengembangan rekam medis konvensional menuju rekam medis elektronik. Tahap pengembangan rekam medis elektronik ini dilakukan oleh kepala instalasi rekam medis, dokter, perawat, dan tenaga medis lainnya.

**Tujuan:** Mengetahui alur prosedur, perencanaan, pengembangan dan implementasi rekam medis konvensional menuju rekam medis elektronik di RS PKU Muhammadiyah Gamping.

**Metode Penelitian:** Jenis penelitian yang digunakan adalah *deskriptif* dengan pendekatan *kualitatif*. Objek penelitian dibagian rekam medis RS PKU Muhammadiyah Gamping dan Subjek 5 petugas. Metode pengumpulan data dengan menggunakan wawancara dan observasi, dengan validasi data triangulasi sumber.

**Hasil:** Berdasarkan hasil wawancara dan observasi di RS PKU Muhammadiyah Gamping masih menggunakan 2 rekam medis yaitu rekam medis konvensional dan rekam medis elektronik tetapi sampai sekarang yang masih menggunakan rekam medis konvensional hanya 1 dokter saja di poli jiwa. Proses perencanaannya dengan membuat software yang dibutuhkan sesuai dengan kebutuhan akreditasi regulasi, *user* dan rumah sakit bisa terpenuhi. Di rancang format-formatnya kemudian di konsultasikan ke *user* yang bersangkutan dan uji coba, kemudian masukan dari user tersebut di tampung kemudian jika dasar permintaannya jelas kemudian di akomodasikan. Pengembangan rekam medis elektronik masih terus dilakukan. Implementasi dilakukan secara bertahap, diuji cobakan di klinik-klinik terkait dari 1 dokter kemudian bertambah semakin banyak. Implementasi secara yang sudah berjalan sudah 90% mendekati sempurna tetapi masih tinggal masalah menggambar.

**Kesimpulan:** Pengembangan rekam medis elektronik masih dilakukan dan implementasi yang sudah berjalan sudah 90% mendekati sempurna tetapi masih tinggal masalah menggambar.

**Kata Kunci:** Perencanaan RME, Pengembangan RME, Implementasi RME

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**DEVELOPMENT OF MEDICAL RECORD CONVENTION TOWARDS  
ELECTRONIC MEDICAL RECORD AT PKU MUHAMMADIYAH  
GAMPING HOSPITAL YEAR 2018**

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**ABSTRACT**

**Background:** PKU Muhammadiyah Gamping Hospital uses 2 types of medical records namely conventional medical records and electronic medical records. The first time the use of electronic medical records was started by a poly-neurologist in April 2018. Electronic medical records in outpatient care were already underway, but not yet fully done by doctors at PKU Muhammadiyah Gamping Hospital because they were still in the process of socialization. In order to become an electronic medical record all it takes is the stage of developing a conventional medical record towards an electronic medical record. The stage of development of electronic medical records is carried out by the head of the medical record installation, doctors, nurses, and other medical personnel.

**Objective:** To know the groove of procedure, planning, development, and implementation conventional medical records towards electronic medical records at PKU Muhammadiyah Gamping Hospital.

**Method of Research:** The type of research used is descriptive with a qualitative approach. The object of the study was the medical record section of PKU Muhammadiyah Gamping Hospital and the subject of 5 officers. Data collection methods using interviews and observation, with validation of source triangulation data.

**Results:** Based on the results of interviews and observations at PKU Muhammadiyah Gamping Hospital still using 2 medical records, namely conventional medical records and electronic medical records but until now still using conventional medical records only 1 doctor in psychology. The planning process by making software needed in accordance with the requirements of regulatory accreditation, users and hospitals can be fulfilled. The formats are designed and then consulted with the relevant user and trial, then input from the user is collected later if the basis of the request is clearly then accommodated. Development of electronic medical records is still ongoing. The implementation was done in stages, tested in related clinics from 1 doctor and then increased more and more. Implementation that has been running is 90% near perfect but still the problem of drawing drawings.

**Conclusion:** The development of electronic medical records is still done and the implementation that has been running is 90% near perfect but still the problem of drawing drawings.

**Keywords:** RME Planning, RME Development, RME Implementation

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