

**ANALISIS *RESPONSE TIME* PENGEMBALIAN REKAM MEDIS
RAWAT INAP PASIEN PERSALINAN
DI RS TK III 04.06.03 Dr. SOETARTO YOGYAKARTA**

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INTISARI

Latar Belakang: Rumah Sakit menyelenggarakan pelayanan kesehatan perorangan secara paripurna. Pendokumentasian yang tepat dan cepat mempengaruhi proses penyediaan dan penyimpanan rekam medis. Berdasarkan studi pendahuluan pengembalian rekam medis rawat inap pasien persalinan mengalami keterlambatan sebanyak 47.61% dari 21 rekam medis.

Tujuan Penelitian: Pada penelitian ini bertujuan untuk mengetahui penerapan peraturan SPM yang berlaku, alur pengembalian rekam medis, persentase ketepatan waktu pengembalian dan rata-rata waktu pengembalian, serta faktor penyebab terjadinya keterlambatan pengembalian rekam medis rawat inap pasien persalinan.

Metodelogi Penelitian: Penelitian ini menggunakan metode penelitian deskriptif kuantitatif dan kualitatif dengan rancangan *Cross sectional*. Subyek dalam penelitian ini berjumlah 4 orang terdiri dari 3 orang responden dan 1 orang triangulasi. Obyek dalam penelitian ini yaitu data pengembalian rekam medis rawat inap pasien persalinan sebanyak 71 sampel.

Hasil Penelitian: Penelitian ini menunjukkan standar waktu pengembalian rekam medis rawat inap 2x 24 jam setelah pasien pulang. Setelah rekam medis lengkap dicatat dalam buku kendali, disusun, dikode, dimasukkan pada SIMRS dan disimpan di *filing*. Pengembalian rekam medis yang tepat waktu pada bulan November 2019-Januari 2020 sebanyak 36 berkas dari 71 rekam medis dan rata-rata dikembalikan setelah 3 hari. Faktor penyebab yaitu *man* yang tidak melengkapi rekam medis, dan rs tidak memberikan *reward* jika petugas mengembalikan rekam medis tepat waktu.

Kesimpulan: Rumah sakit belum melakukan sosialisai terkait pembaruan peraturan pengembalian rekam medis rawat inap dalam 1x24 jam setelah pasien pulang, pengembalian rekam medis rawat inap belum dijalankan maksimal sesuai SPO yang berlaku dan masih banyak pula rekam medis pasien persalinan yang keterlambatan. Dari 71 rekam medis terdapat 36 rekam medis yang tepat waktu dan 35 rekam medis yang mengalami keterlambatan pengembalian. Faktor penyebab utama yaitu manusia (*man*) yang tidak disiplin dalam melengkapi pengisian rekam medis, dan rumah sakit tidak memberikan *reward* atau biaya intensif jika petugas mengembalikan rekam medis rawat inap tepat waktu.

Kata Kunci: Ketepatan waktu pengembalian, Rekam medis rawat inap

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**ANALYSIS OF RESPONSE TIME FOR RETURNING INPATIENT
PATIENT MEDICAL RECORD AT
TK III HOSPITAL 04.06.03 Dr. SOETARTO YOGYAKARTA**

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ABSTRACT

Background: The hospital organizes complete individual health services. Proper and fast documentation affects the process of supplying and storing medical records. Based on a preliminary study of the return of inpatient medical records in labor patients experienced a delay of 47.61% of the 21 medical records.

Objective: The aim of this study is to determine the application of applicable SPM regulations, the flow of medical records return, the percentage of timely return and average time of return, as well as the factors that cause delays in the return of medical records for hospitalized patients in labor.

Method: This research uses descriptive quantitative and qualitative research methods with cross sectional design. The subjects in this study amounted to 4 people consisting of 3 respondents and 1 person triangulation. The object in this study is the return of medical records of hospitalized patients in labor as many as 71 samples.

Result: This study shows that the standard time to return an inpatient medical record is 2x 24 hours after the patient returns. After the complete medical record is recorded in the control book, then assembled, coding, entered into SIMRS and stored in filing. Timely return of medical records from November 2019 to January 2020 as many 36 files from 71 medical records and on average returned after 3 day. The main causative factors are humans who are in completing filling medical records, and hospitals do not provide rewards or incentive costs if officers return the inpatient medical records on time.

Conclusion: The hospital has not conducted yet socialization related to the renewal of the regulation of inpatient medical record return within 1x24 hours after the patient returns, the return of the inpatient medical record has not been carried out optimally in accordance with the applicable SPO and there are still many late delivery medical records. Of 71 medical records, there were 36 medical records that were on time and 35 medical records that were delayed. The main causative factors are humans who are not disciplined in completing filling medical records, and hospitals do not provide rewards or incentive costs if officers return the inpatient medical records on time.

Keywords: Timeliness of returns, Inpatient medical records

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