



ANALYSIS OF THE COMPLETENESS OF FILLING IN ELECTRONIC MEDICAL RESUMES FOR INPATIENTS AT DHARMA YADNYA GENERAL HOSPITAL

ANALISIS KELENGKAPAN PENGISIAN RESUME MEDIS ELEKTRONIK PASIEN RAWAT INAP DI RUMAH SAKIT UMUM DHARMA YADNYA

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Abstract

People really need health services provided by hospitals, health homes and clinics. When registering for health services, each enrolling member will have his or her own medical history which must be seen at a medical clinic or health office. Hospitals must have comprehensive patient data in order to provide health services effectively. Documents regarding patient identity, examinations, treatment, procedures and other services are included in the medical record. In a health facility, implementation takes the form of an administrative order. Characteristics of medical records (General Patients or BPJS). The aim of this research is to determine the completeness of electronic medical resumes seen from fourth aspects, namely, completeness of identification, important reports, authentication and correct documentation. The method used in this research is quantitative analysis with a descriptive approach. The results of this research are that in the Identification component the percentage of completeness is 100% complete, in the Important Report component the percentage of completeness is 99%, in the Authentication component the percentage of completeness is 100%, and in the Correct Documentation component the percentage of completeness is 90%. Based on the results of research that has been carried out regarding completeness When filling out electronic medical resumes for patients in the Inpatients at RSU Dharma Yadnya, it can be concluded that there are still incompleteness in filling out





inpatient electronic medical resumes and that the electronic medical resume components are filled in completely.

Keywords: Completeness Analysis, Electronic Medical Resume, Inpatients

Abstrak

Masyarakat sangat membutuhkan pelayanan kesehatan yang disediakan oleh rumah sakit, panti kesehatan, dan klinik. Saat mendaftar untuk layanan kesehatan, setiap anggota yang mendaftar akan memiliki riwayat kesehatannya sendiri yang harus terlihat di klinik medis atau kantor kesehatan. Rumah sakit harus memiliki data pasien yang komprehensif agar dapat memberikan pelayanan kesehatan tersebut secara efektif. Dokumen mengenai identitas pasien, pemeriksaan, pengobatan, prosedur, dan pelayanan lainnya dimasukkan dalam rekam medis. Dalam suatu fasilitas kesehatan, pelaksanaannya berbentuk perintah administratif. Karakteristik rekam medis (Pasien Umum atau BPJS). Tujuan penelitian ini adalah untuk mengetahui kelengkapan pengisian resume medis elektronik pasien rawat inap di Rumah Sakit Umum Dharma Yadnya, kelengkapan resum medis elektronik yang dilihat dari aspek yaitu, kelengkapan identifikasi, laporan penting, autentifikasi dan pendokumentasian yang benar. Metode yang digunakan pada penelitian ini adalah penelitian kuantitatif dengan pendekatan deskriptif. Hasil dari penelitian ini dimana dalam komponen Identifikasi persentase kelengkapannya 100% lengkap, pada komponen Laporan penting persentase kelengkapannya 99%, komponen Autentifikasi persentase kelengkapannya 100%, serta pada komponen Pendokumentasian Yang Benar persentase kelengkapannya 90%. Berdasarkan hasil penelitian yang telah dilaksanakan tentang kelengkapan pengisian resum medis elektronik pasien rawat inap di RSU Dharma Yadnya, dapat disimpulkan bahwa masih adanya ketidaklengkapan dalam pengisian resum medis elektronik rawat inap dan sudah adanya komponen-komponen resum medis elektronik yang terisi secara lengkap.

Kata kunci: Analisis Kelengkapan, Resum Medis Elektronik, Rawat Inap.

1. INTRODUCTION

Based on the explanation above, the researcher will conduct in relation to reading especially in improving the students' comprehensibility which focuses on choral reading strategy.

The community is in great need of health services provided by hospitals, health centers, and clinics. When registering for health services, each patient who registers will have their own health history that must be seen at the hospital or health facility. Hospitals must have comprehensive patient data in order to provide these health services effectively (Hanifah et al., 2021).





Good medical record service is one of the supporting medical services in hospitals that is the basis for assessing the quality of hospital medical services. Medical record files are the main source of data for health services. These data sources can be evaluated and analyzed for the purposes of planning and improving the quality of health services (Nofitalia Sawondari et al., 2021).

Quantitative analysis is a review of certain sections of the medical record with the aim of finding deficiencies, especially those related to documentation or recording in the medical record file. Medical records can be said to be complete if they contain four main components such as identification, important reporting, authentication and correct documentation. Medical records that are not filled in completely will have an impact on the accuracy of the contents of the medical record and the legal aspect of the medical record becomes invalid. The function of quantitative analysis is to identify components that are not filled in completely so that they can be easily corrected and completed immediately (Khonsa et al., 2022).

Quality improvement is a very important factor in the field of hospital services, with a good level of service it will improve the quality of service. Currently, the quality of health services is the main focus for the community and patients. Awareness and concern for quality are indeed increasing. The level of comfort provided by the service provider greatly influences both a person's satisfaction and dissatisfaction with the service process received by him, one of which is documented through medical records (Yunlia Vidiarti et al., 2020).

The contents of the electronic medical resume are adjusted to the needs of each health facility. At Dharma Yadnya Hospital, the electronic medical resume contains the date of treatment, anamnesis, reason for treatment, diagnosis, actions, treatment given, treatment progress, control schedule, name and signature of the doctor treating the patient. The development of treatment and control schedule are often not completed by the treating doctor. The standard for completeness of medical record files at Dharma Yadnya Hospital is 100%. Files that do not meet the completeness standards cause the quality of medical records not to be achieved.

Based on the results of observations that conducted in the Inpatient Unit, it was found that there was still a lot of incomplete patient medical resume information. If the medical resume is not filled in completely, the data quality will be poor, making it difficult to provide patient services if the patient is re-hospitalized. In addition, the hospital will not be able to fulfill the patient's insurance-related care requests from official bodies. Initial research in September 2024 at the Medical Records Unit of Dharma Yadnya General Hospital, found that 13% of medical resumes were still incomplete and 87% of medical resumes were completely filled in. This causes several obstacles such as delays filling completeness of data summary





medical Which No filled in a way complete in time 24 hours after completion of service, which can lead to a lack of quality of service in the Medical Records unit.

2. RESEARCH METHOD

The type of research in this study is quantitative research using a descriptive approach. The descriptive research method is research to determine the value of an independent variable, either one variable or more (a stand-alone variable or independent variable). Quantitative research is a process that uses a lot of numbers starting from data collection, data interpretation, and the appearance of the results (Novianty, 2020). The quantitative method is used to find out more Detailed analysis of the completeness of filling in the electronic medical summary of inpatients at Dharma Yadnya General Hospital.

3. RESULTS AND DISCUSSION

Table 1 Results Analysis Characteristics Visit Patient General And BPJS Inpatient Care at Dharma Yadnya Hospital

No	Component Analysis	Amount Visit
1	General Patient	19
2	BPJS Patients	229
3	Total sample	248

Based on table 1, the results of the analysis of the characteristics of patient visits in September, October and November 2024, *a sample* of 248 patient visits was obtained, from the sample above, the number of BPJS patients was 229 more than the number of general patients, 19 visits

Table 2 Results of the Analysis of Completeness of Filling in Identification on the Resume Patient Electronic Medical Inpatient in RSU Dharma Yajna

No	Component Analysis —	Complete		Incomplete	
			%		%
1	Medical Record Number	248	100	0	0
2	Patient Name	248	100	0	0
3	Date of birth	248	100	0	0

Based on table 2, the results of the analysis of identification data from the electronic medical resume of inpatients, it was obtained that from the 248 *samples* used, the Medical Record Number component obtained complete results of 248 with a percentage of 100%.

The results of this study are also in line with the research conducted by Sawondari (2021) which states that the number of fillings for the 4 social identities in the medical resume. The results showed that all files were filled in correctly. The number of files that were not filled in was 0. The conclusion is that the medical resume forms that were sampled all contained





patient social data that was filled in completely and correctly.

According to Lutfi Rinaldi (2022), the results of the completeness of filling out the medical resume only reached 82.5% with the percentage of incomplete filling out record medical that is as big as 17.5%. Filling form resume medical records have not reached 100%, whereas according to the Minister of Health Decree 129/Menkes/SK/II/2008 concerning the minimum service standards (SPM) for hospitals, which must state the standard for the completeness of filling in medical records after providing services, including medical resumes, which must be filled in 100%. Matter the to cause completeness filling out the medical resume at dr. ramelan hospital is categorized as incomplete.

Table 3 Results Analysis Completeness Filling Report Important Electronic Medical Summary of Inpatient Care at Dharma Yadnya Hospital

No	Component Analysis -	Complete		Incomplete		
			%		%	
1	Diagnosis	245	99	3	1	
2	Date Recording	248	100	0	0	
3	O'clock Recording	248	100	0	0	
4	Results Physical examination	248	100	0	0	
5	Results Supporting investigation	236	95	12	5	
6	Action and Treatment	235	95	13	5	

Based on 3 research results completeness filling report important electronic medical resume of inpatients at Dharma Yadnya Hospital, shows the results that the highest completeness with a total of 248 patient medical resumes, with a percentage of 100%, Incompleteness is 13 patient medical resumes, with a percentage of 5%. This shows that at Dharma Yadnya Hospital, the completeness of important report components has not met the Minimum Service Standards Based on the Decree of the Minister of Health of the Republic of Indonesia No. 24 of 2022 concerning the standard for completeness of filling in medical records with a standard of 100%.

This is in line with research conducted by Dessy (2022) which stated that filling in the completeness of important reports is not in accordance with the Indonesian Minister of Health NUMBER: 129/Menkes/SK/II/2008 concerning Minimum Service Standards for Hospitals, to complete the filling of medical records given 1 x 24 hours after completion of the service must reach 100%. Completeness of Diagnosis 100%, Incompleteness of physical examination items by 48%.

According to Lestari (2022) it can be described that based on the table, it can be described that of the 62 medical resumes analyzed in the important notes component, there is an average percentage value of 73.45% complete medical resumes and 26.55% incomplete medical resumes, with the highest average percentage in the date of admission component obtained 91.93% and the lowest average percentage in the Recommended Prognosis component 50.00%. The completeness of important notes is useful for the patient's next





treatment plan.

Table 4 Results Analysis Completeness Filling Authentication Inpatient Medical Summary at Dharma Yadnya Hospital

No	Component Analysis	Complete		Incomplete		
			%		%	
1	DPJP Name	248	100	0	0	
2	Sign DPJP Hands	248	100	0	0	

Based on Table 4 Resume *Authentication* inpatient electronic medical patient inpatient at RSU Dharma Yadnya, in the clear name and signature has been filled in completely with a 100% completeness achievement.

This is in line with research conducted by Zaman (2021) which states that in the study Where component *authentication* the majority, as much as 58%, from 2 points where the documentation consists of indications for hospitalization, summary of medical history, physical examination, supporting examination, medical therapy during hospitalization, The drug reaction, diet, main diagnosis, additional diagnosis, procedure and authentication columns consist of the name of the hospital, date, month and time, signature of the patient's family, and the DPJP signature column.

According to Aji (2022) he stated that for the clear name of DPJP and DPJP signature with a completeness percentage of 83% (100 forms) and 17% (21 forms) were incomplete, while for the full name of the patient or family and the signature of the patient or family with a completeness percentage of 87% (105 forms) and 13% (16 forms) were incomplete.

Table 5 Results of Analysis of Completeness of Correct Documentation of Resume Inpatient Electronic Medical In RSU Dharma Yajna

No	Component Analysis	Complete		Incomplete		
			%		%	
1	The recording that clear	243	98	5	2	
2	There are no blank sections	223	90	25	10	
3	Do not use abbreviations	243	98	5	2	

Based on table 5, the correct documentation data on the electronic inpatient medical resume at Dharma Yadnya Hospital, completeness was 243 with a percentage of 98% and incomplete was 223 with a percentage of 90%.

This is in line with research conducted by Amalin (2023), which stated that the study found that 81% of medical records were empty, and 10% of abbreviations were used that were not in accordance with the standard operational procedures applicable at RSPAL Dr. Ramelan Surabaya.

According to Muammar (2022), from the results of his calculations, the percentage of completeness of the form, which amounted to 90 medical resumes in good records, the average completeness was 81% and the incomplete was 19%. In good records, the lowest percentage was obtained, namely in the item there are no blank sections, which was 45%, and the highest completeness percentage was in the item there is no type-x, which was 100%.





4. CONCLUSION

Based on the results of research that has been carried out on the completeness of filling in electronic medical summaries for inpatients at Dharma Yadnya Hospital, it can be concluded that:

- 1. The number of samples of the characteristics used in patient visits was 248 electronic medical summaries of inpatients at Dharma Yadnya Hospital, the number of general patients was 19 patients. and for BPJS patients as many as 229.
- 2. Completeness of identification filling in the medical resume of inpatients at Dharma Yadnya Hospital, of all the components, the most complete were 248 patient medical resumes with a percentage of 100%.
- 3. The completeness of filling in important reports has not reached 100%. Incompleteness is found in the diagnosis column, supporting examination results and treatment actions.
- 3. The completeness of the authentication filling has reached 100% of all *samples* used.
- 4. The completeness of the electronic medical summary documentation for inpatients has not reached 100%. There are still blank sections and the use of abbreviations in the electronic medical summary for inpatients.
- 5. The percentage of completeness of filling out the electronic medical resume for September, October, November 2024 was 87.5% and incompleteness was 12.5%.

6. SUGGESTION

Based on results study Which obtained so researcher propose suggestions, namely as follows:

1. To House Sick

It is advisable to conduct routine socialization regarding the completeness and timeliness of filling out electronic medical resumes to all medical personnel responsible for filling out medical resumes, so that medical resumes can be filled out completely and can improve the quality of the hospital. Conduct monitoring and evaluation of the completeness of filling out medical record files.

2 To inpatient unit in RSU Dharma Yajna because of from component quantitative analysis on electronic medical summary of inpatients at Dharma Hospital Yadnya is still not 100% complete. Nurses in the care unit hospitalization further reminds the doctor treating the patient to fill out the electronic medical resume completely.

3 To Researcher Furthermore

It is hoped that further research can be conducted on the analysis of the completeness of medical records, especially for inpatients at Dharma Yadnya Hospital, by paying attention to the factors that influence the incompleteness of filling out medical summaries.

5. REFERENCES

Ade Heryana. (2020). Metodologi Penelitian Kuantitatif. Etika Penelitian, 9. https://www.eurekapendidikan.com/2014/12/hipotesis-penelitian.html





- Aji, A. (2022). Journal Health Information Management Indonesian (JHIMI) ISSN 2829-6435 Analisis Kelengkapan Pengisian Dokumen Rekam Medis Rawat Journal Health Information Management Indonesian (JHIMI). 03(01), 37–44.
- Khonsa, S., Widjaja, L., Fannya, P., Jumiati, S., & Yenni Safitri, dan. (2022). Analisis Kuantitatif Kelengkapan Formulir Pengkajian Medis Awal Dokter Pada Rekam Medis Pasien Rawat Inap Di RS Vertikal Jakarta Timur Overview of Initial Doctor Initial Medical Assessment Form Completeness in Inpatient Medical Record at Vertical Hospital. Indonesian Journal of Health Information Management (IJHIM), 2(2)
- Neng Sari Rubiyanti. (2023). Penerapan Rekam Medis Elektronik di Rumah Sakit di Indonesia: Kajian Yuridis. AladalaH: Jurnal Politik, Sosial, Hukum Dan Humaniora, 1(1), 179–187
- Pratama Dewi et al. (2023). Manajemen Mutu Sumber Daya Manusia Di Unit Rekam Medis Rumah Sakit Khusus Paru Kabupaten Karawang Belas Kata. Jurnal EBI, 5(1), 38–49.
- Pribadi Yanuar et al. (2018). Analisis Kesiapan Penerapan Rekam Medis Elektronik di Kartini Hospital Jakarta. Jurnal Bidang Ilmu Kesehatan, 8(2), 19.
- Putri, K., Ningrum, A., & Wulandari, D. S. (2023). Studi Deskriptif Kelengkapan Pengisian Resume. 06(November), 76–84.
- Rahmadaniah Safitri, A., Rosmala Dewi, D., Yulia, N., & Aula Rumana, N. (2022). Tinjauan Kelengkapan Pengisian Rekam Medis Rawat Inap di Rumah Sakit As-Syifa Bengkulu Selatan Overview of Completeness of Inpatient Medical Record Filling in Hospitals As-Syifa South Bengkulu. Indonesian Journal of Health Information Management (IJHIM), 2(1), 1.
- Rahmadaniah Safitri, A., Rosmala Dewi, D., Yulia, N., & Aula Rumana, N. (2022). Tinjauan Kelengkapan Pengisian Rekam Medis Rawat Inap di Rumah Sakit As-Syifa Bengkulu Selatan Overview of Completeness of Inpatient Medical Record Filling in Hospitals As-Syifa South Bengkulu. Indonesian Journal of Health Information Management (IJHIM), 2(1), 1.
- Rangga, J., Syahidin, Y., & Hidayati, M. (2021). Perancangan Sistem Informasi Kelengkapan Rekam Medis Rawat. Jurnal Teknologi Informasi (JALTI) Politeknik Praktisi Bandung, 5(2).
- Rika, A., Anisah, A., Dewi, & Purnama, N. (2020). Peran Penting Kelengkapan Rekam Medik di Rumah Sakit. Baiturrahmah Medical Journal, 1(1), 69–76.
- Rika, A., Anisah, A., Dewi, & Purnama, N. (2020). Peran Penting Kelengkapan Rekam Medik di Rumah Sakit. Baiturrahmah Medical Journal, 1(1), 69–76.
- Risti Nila, et al. (2023). Analisis Pengembalian Klaim Bpjs Kesehatan Rawat Inap Di Rumah Sakit Nur Hidayah Kabupaten Bantul. Jurnal Informasi Kesehatan Indonesia, 9(2), 120–126. https://ojs.poltekkes-malang.ac.id/index.php/JIKI/article/view/4192
- Sansy Lestari et al. (2022). Tinjauan Kelengkapan Resume Medis Pasien Rawat Inap di Rumah Sakit Islam Jakarta Sukapura. SEHATMAS: Org/10.55123/Sehatmas.V1i2.130
- Saryadi et al. (n.d.). Analisis Kuantitatif Kelengkapan Resume Medis Rawat Inap Di Rumah Sakit: Studi Literatur Quantitative Analysis of Completeness of Medical Resume in Hospitals: Literature Review. Jurnal OSADHAWEDYAH, 1(1), 29–42.
- Saryadi et al. (n.d.). Analisis Kuantitatif Kelengkapan Resume Medis Rawat Inap Di Rumah Sakit: Studi Literatur Quantitative Analysis of Completeness of Medical Resume in Hospitals: Literature Review. Jurnal OSADHAWEDYAH, 1(1), 29–42.
- Sawondari, N., Alfiansyah, G., & Muflihatin, I. (2021). Analisis Kuantitatif Kelengkapan





- Pengisian Resume Medis Di Rumkital Dr. Ramelan Surabaya. J-REMI : Jurnal Rekam Medik Dan Informasi Kesehatan, 2(2), 211–220.
- Sawondari, N., Alfiansyah, G., & Muflihatin, I. (2021). Analisis Kuantitatif Kelengkapan Pengisian Resume Medis Di Rumkital Dr. Ramelan Surabaya. J-REMI: Jurnal Rekam Medik Dan Informasi Kesehatan, 2(2), 211–220.
- Setiyoargo Arief et al. (2022). Peningkatan pengetahuan masyarakat dalam penggunaan. Jurnal Pengabdian Masyarakat Berkemajuan, 6(1), 73–79.
- Setiyoargo Arief et al. (2022). Peningkatan pengetahuan masyarakat dalam penggunaan. Jurnal Pengabdian Masyarakat Berkemajuan, 6(1), 73–79.
- Sumanto, D. (2005). Presisi dan Akurasi Hasil Penelitian Kuatitatif Berdasarkan Pengambilan Sample Secara Acak. Jurnal Litbang Universitas Muhammadiyah Semarang, 2(2), 45–53. http://jurnal.unimus.ac.id
- Sumanto, D. (2005). Presisi dan Akurasi Hasil Penelitian Kuatitatif Berdasarkan Pengambilan Sample Secara Acak. Jurnal Litbang Universitas Muhammadiyah Semarang, 2(2), 45–53. http://jurnal.unimus.ac.id
- Thalib Tety et al. (2020). Kualitas Pelayanan Pasien Di Instalasi Gawat Darurat Rumah Sakit Umum Daerah Aloei Saboe. Manajemen Sumber Daya Manusia, VII(2), 119–128.
- Yunisca, F., Chalimah, E., & Sitanggang, L. O. A. (2022). Implementasi Peraturan Menteri Kesehatan Republik Indonesia Nomor 24 Tahun 2022 Tentang Rekam Medis Terhadap Hasil Pemantauan Kesehatan Pekerja Radiasi di Kawasan Nuklir Serpong. Reaktor: Buletin Pengelolaan Reaktor Nuklir, 19(2), 34
- Zaman, et al. (2021). Tinjauan Kelengkapan Resume Medis Pasien Rawat Inap Di Rsud Cililin. Jurnal Kesehatan Tambusai, 2(3), 69–74. https://doi.org/10.31004/jkt.v2i3.1958