

**GAMBARAN KEJADIAN KETERLAMBATAN PEMINJAMAN /  
PENGEMBALIAN DOKUMEN REKAM MEDIS DI FILING RAWAT  
JALAN DI RSUP DR.KARIADI SEMARANG TAHUN 2015**

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**ABSTRAK**

Berdasarkan survei awal di RSUP Dr. Kariadi Semarang sudah mempunyai kebijakan dan protap peminjaman dokumen rekam medis yang telah disahkan oleh Direktur Utama. Akan tetapi pada pelaksanaannya masih belum sesuai dengan kebijakan dan protap yang di buat oleh Rumah Sakit. Dalam SOP dijelaskan bahwa peminjaman dokumen rekam medis maksimal peminjaman 2x24 jam dimulai dari tanggal peminjaman, setiap peminjaman dokumen rekam medis harus ada bukti tertulis berupa bon pinjam atau catatan pengeluaran.

Jenis penelitian yang digunakan adalah deskriptif. Metode pengumpulan datanya adalah observasi dan wawancara. Variabel penelitian adalah Pengetahuan petugas rekam medis tentang peminjaman dan pengembalian dokumen rekam medis, Prosedur dan Kebijakan yang ada di RSUP Dr. Kariadi Semarang. Pelaksanaan Peminjaman dan Pengembalian Dokumen Rekam Medis. Subjek penelitian adalah 5 petugas filing rawat jalan, 1 petugas penanggung jawab rekam medis rawat jalan, 1 petugas rekam medis pengurusan klaim asuransi / pengadilan dan 6 petugas poliklinik. Objek penelitian adalah Dokumen rekam medis rawat jalan di bagian filing RSUP Dr. Kariadi Semarang. Instrumen penelitian menggunakan pedoman observasi dan wawancara. Metode pengolahan data dengan editing dan tabulating. Data analisis secara deskriptif, membandingkan dengan teori.

Hasil penelitian sudah ada Standart Prosedur Operasional yang ditetapkan oleh Direktur Utama dengan No.HK.00.01/IV/I/198/2015 tentang peminjaman dan pengembalian dokumen rekam medis revisi 1, akan tetapi pada pelaksanaannya belum terlaksana dengan baik, masih terjadi keterlambatan dalam pengembalian dokumen yaitu sebanyak 12% dari 1184 dokumen. Terjadinya keterlambatan pengembalian dokumen tersebut digunakan untuk keperluan penelitian, untuk keperluan konsul antar poliklinik dan keperluan klaim asuransi / pengadilan.

Saran bagi RSUP Dr. Kariadi Semarang yaitu perlunya sosialisasi mendalam terhadap Standart Prosedur Operasional untuk meminimalkan terjadinya keterlambatan pengembalian dokumen rekam medis, peningkatan mutu pelayanan rekam medis dengan evaluasi dan pengecekan kembali dokumen yang keluar dan dikembalikan.

Kata kunci : Keterlambatan, Dokumen Rekam Medis, SOP, Filing

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**DESCRIPTION INCIDENT OF DELAY RETURN / BORROWING OF  
OUTPATIENT MEDICAL RECORD DOCUMENTS TO FILING IN  
DR.KARIADI CENTRAL PUBLIC HOSPITAL SEMARANG 2015**

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**ABSTRACT**

**Background :** Based on the initial survey, Dr. Kariadi Hospital Semarang already have policies and Standard Operating Procedure of borrowing medical record documents that have been approved by the Director. But the implementation was not in accordance with the policies and Standard Operating Procedure that made by the Hospital. In Standard Operating Procedure explained that the borrowing of document medical records maximum 2x24 hours starting from the date of borrowing, there must be written evidence when borrowing medical records document in the form of borrowing card or record of document release.

**Method :** This type of research was descriptive. Data collection methods were observation and interviews. The research variables were Standard Operating Procedures, implementation of borrowing and returning medical records documents, the parties that borrowing and delay occurrence. Subjects were 5 outpatient filing officers, 1 officer in charge of outpatient medical records, 1 officer that handling insurance claims / judicial officer and six polyclinics officers. The object of research were outpatient medical record documents at the filing Hospital Dr. Kariadi Semarang. The research instrument were the observation and interview guides. Methods of data processing through stages of editing and tabulating. The data were analyzed descriptively.

**Result :** The results showed there was already Standard Operating Procedures set by the Director of the No.HK.00.01 / IV / I / 198/2015 on the borrowing and returning medical record document revisions 1, but the implementation was not done well, there were delay in returning the document as many as 12% of the 1184 document. The delays in the return of document occurred because of research purposes, consul between the clinic and insurance claims / court.

**Conclusion :** Researcher suggest the need for socialization of Standard Operating Procedures to minimize the delays in the return of the document medical records, quality improvement of medical records service, evaluation and checking an exit and return of document.

**Keywords :** Delays, Medical Record Document, Standard Operating Procedures, Filing

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