

**REVIEW OF FACTORS CAUSING INCOMPLETE OUTPATIENT
MEDICAL RECORD DOCUMENTATION USING
THE FISHBONE AND USG METHODS AT
SARAS ADYATMA BANTUL HOSPITAL**

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ABSTRACT

Background: According to the Indonesian Ministry of Health Regulation (Permenkes) No. 24 of 2022, all healthcare facilities are required to implement Electronic Medical Records. In addition, Permenkes No. 129 of 2008 states that patient medical records must be completed 100% within a maximum of 24 hours after medical services are provided. A preliminary study conducted at RSUD Saras Adyatma Bantul found that the completeness rate of outpatient medical records was only 80%, which did not meet the required standard of 100%. Therefore, this study was conducted to identify the factors causing the incomplete documentation.

Objective: To determine the percentage of outpatient medical record completeness from October to December 2025, identify the factors causing incomplete records using the Fishbone method, and determine the main priority cause of the problem using the USG method.

Methods: This study used a mixed-methods approach and was conducted from January to April 2026. The study involved three respondents, consisting of two key informants and one triangulation informant. Data were collected through Google Forms, interviews, and questionnaires.

Results: The average completeness rate of outpatient medical records was 85.33%. Fishbone analysis identified several contributing factors. Man: high workload and limited training on EMR documentation. Money: budget limitations and the absence of reward or punishment systems. Method: the lack of a standard operating procedure (SOP) for Electronic Medical Records. Machine: limited hardware availability and suboptimal Hospital Information System performance. Material: EMR formats, interface design, and features that still require further development. Based on the USG analysis, the highest-priority issue that needs immediate attention was the suboptimal implementation of the EMR system.

Conclusion: The completeness of outpatient medical records remains below the required standard. The USG analysis showed that the suboptimal Electronic Medical Record system is the main cause of the problem. Therefore, further evaluation and system development are needed to improve the quality and effectiveness of healthcare services.

Keywords: Completeness Analysis, Fishbone, USG (Urgency, Seriousness, Growth), Electronic Medical Records.

**TINJAUAN FAKTOR PENYEBAB KETIDAKLENGKAPAN PENGISIAN
REKAM MEDIS RAWAT JALAN DENGAN METODE *FISHBONE* DAN *USG*
DI RSUD SARAS ADYATMA BANTUL**

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ABSTRAK

Latar Belakang: Menurut Permenkes No. 24 Tahun 2022, mewajibkan seluruh fasilitas pelayanan kesehatan untuk menerapkan Rekam Medis Elektronik. Menurut Permenkes No. 129 Tahun 2008 rekam medis pasien harus terisi lengkap 100% maksimal 24 jam setelah pelayanan medis selesai diberikan. Berdasarkan studi pendahuluan di RSUD Saras Adyatma Bantul, diketahui bahwa kelengkapan pengisian rekam medis rawat jalan mencapai 80% dan belum memenuhi standar 100% lengkap. Hal ini mendorong untuk melakukan penelitian mengetahui faktor penyebab ketidaklengkapan tersebut.

Tujuan: Mengetahui persentase kelengkapan rekam medis rawat jalan pada Bulan Oktober-Desember 2025, mengidentifikasi faktor penyebab ketidaklengkapan menggunakan metode *Fishbone*, dan menentukan prioritas utama penyebab masalah dengan metode *USG*.

Metode: Penelitian ini menggunakan metode campuran, dilaksanakan pada Januari-April 2026. Responden penelitian berjumlah tiga orang, terdiri dari 2 informan dan 1 triangulasi. Pengambilan data melalui *Google form*, wawancara, dan kuesioner.

Hasil: Rata-rata kelengkapan pengisian rekam medis rawat jalan sebesar 88,72%. Hasil analisis *Fishbone* menunjukkan faktor *Man*: tingginya beban kerja, pelatihan pengisian RME; *Money*: keterbatasan anggaran, belum terdapat penghargaan atau sanksi; *Method*: belum tersedianya SOP Rekam Medis Elektronik; *Machine*: keterbatasan perangkat, belum optimalnya SIMRS; dan *Material*: format, tampilan, dan fitur RME yang masih perlu dikembangkan. Berdasarkan metode *USG*, prioritas utama masalah yang perlu segera ditangani adalah belum optimalnya sistem RME.

Kesimpulan: Kelengkapan pengisian rekam medis rawat jalan masih di bawah standar yang ditetapkan dan hasil analisis *USG* menunjukkan RME yang belum optimal menjadi penyebab utama permasalahan, sehingga perlu evaluasi dan pengembangan lebih lanjut untuk meningkatkan pelayanan yang optimal.

Kata Kunci: Analisis Kelengkapan, *Fishbone*, *USG* (*Urgency*, *Seriousness*, *Growth*), Rekam Medis Elektronik.