

Causal Factors in Quantitative and Qualitative Analysis of Hospital Inpatient Medical Record Documents: Literature Review

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ABSTRACT

The Regulation of Minister Health Republic Indonesia Number 129 of 2008 concerning Minimum Service Standards (SPM) for Hospitals, explains the standard for completing DRM 100% after completion service, but there're still some hospitals that've DRM completeness numbers that aren't in accordance the standards. Good/bad a service can be described by whether/not the DRM in a hospital is complete/not. Thus, all DRM must be complete and high quality, including inpatient DRM. The purpose this study was to analyze the causal factors in the quantitative and qualitative analysis the incompleteness of inpatient DRM in hospitals based on Huffman's theory. The research was conducted using the literature study method on 15 research articles in the form journals that were searched through Google Scholar and Portal Garuda. The results showed of 15 articles analyzed, the incompleteness of the DRM inpatients at the hospital was caused by the officer assuming that if the first sheet had been filled in, the incomplete filling of items on the next page wasn't a problem, the limitations of barcodes and identity labels on the forms were sometimes out of stock, there isn't hospital SOP that regulates clearly legible writing in order to create legible writing. Suggestions that can be given are the need to improve the quality of human resources by conducting outreach activities doctors, nurses, paramedics, and medical recorders regarding the importance of completeness DRM, need to increase the number/capacity patient identity labels and barcodes, as well as making permanent procedures regarding writing which must be clearly legible.

Keywords: *Quantitative Analysis, Qualitative Analysis, Incompleteness, Medical Record, Inpatient*