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The Relationship of Management Elements to the Quality of Outpatient Medical Record Documents at Nashrul Ummah Islamic Hospital Lamongan

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ABSTRACT

Introduction: The quality of medical record documents is one of the indicators of the quality of hospital services that can be seen from the completeness of a medical record document. The purpose of this study is to determine the relationship between management elements and the quality of outpatient medical record documents at Nashrul Ummah Lamongan Islamic Hospital.

Methods: The design of this study used correlation analytics with a crosssectional approach. The sample of this study was 60 respondents using random sampling techniques. The independent variable in this study is the management element, while the dependent variable in this study is the quality of medical record documents. Data was collected using a questionnaire which included knowledge, SOPs, infrastructure facilities, and then a checklist of completeness of medical record documents and observations. The analysis data used the chi-square test with a significance number of $p < 0.05$.

Results: The results showed that more than a part (63.9%) of well-informed men had complete medical records, and more than a proportion (79.2%) of poorly knowledgeable men had incompleteness of medical records. More than a part (69.0%) who comply with the SOP have complete medical records, then more than a part (74.2%) who do not comply with the SOP have incomplete medical records. More than a part (72.4%) of good infrastructure facilities have complete medical records, then more than a part (77.4%) of poor infrastructure facilities have incomplete medical records. The results of the data analysis stated that there was a relationship

between the elements of man, method, and material management to the quality of outpatient medical record documents at the Nashrul Ummah Lamongan Islamic Hospital with values of $p=0.001$ and $p=0.000 < 0.05$.

Conclusion: It is hoped that the results of this study can be material for improvements in human resources, SOPs, and infrastructure facilities related to medical record documents.

Keywords: Health worker, Knowledge, Occupational Health and Safety (K3)

INTRODUCTION

Hospitals have the task of providing complete individual health services. Hospitals have the function of providing medical and health recovery services, providing education and training of human resources. The hospital also functions as a research and refinement of technology in the health sector in order to improve health services by paying attention to the ethics of science in the health sector (Law of the Republic of Indonesia Number 44, 2009). In achieving the success of hospital functions, it is necessary to have a health care unit, one of which is the Medical Record unit.

According to (Minister of Health Regulation No. 24, 2022), medical records are files that contain records and documents about the patient's identity, examinations, treatments, actions and other services that have been provided to patients. Medical records are both written and recorded information about identity, anamnesis of laboratory physical determination, diagnosis of all services and medical actions provided to patients and treatment both inpatient, outpatient and emergency services.

The quality of medical record information is an important need in the sustainability of the Hospital. The accuracy and suitability of medical record document information will help the Hospital in making claims to the insurance provider for the service fees that have been incurred by the Hospital. The Hospital will get a service replacement fee in accordance with applicable regulations and

agreements. The accuracy of the information will keep the Hospital away from losses due to the discrepancy between the services that have been provided by the Hospital to patients and those recorded in the Hospital's information system. (Dewi, 2017)

The requirements for quality medical records are completeness, accuracy, accuracy, and meeting the requirements of legal aspects. One of the efforts to realize quality services in hospitals is to improve the quality of medical record documentation. To improve the quality of service in the medical record unit, namely by looking at the management elements. These management elements include man, machine, material, method, market and money. (Amirullah, 2015).

The researcher obtained data on the Quality Indicators of the Medical Record Unit of RSI NU Lamongan quarterly (July, August, September) in 2022, the following data was obtained:



Graph 1. Quality Indicators of the Medical Record Unit of RSI NU Lamongan

Based on the Quality Indicators in the medical record unit of Nashrul Ummah Lamongan Hospital in the quarter (July,

August, September) of 2022, it is not significant. In July, the achievement in hospitals was 56.83%, then in August it was 44.09% and in September it was 75.79%. With an achievement target and national standard of 100%.

The results of the initial survey at RSI NU Lamongan still found several problems, namely those related to the quality of medical records that affect the quality of outpatient services. The researcher took 100 samples of medical record documents, and the sampling technique used simple random sampling. The results of the initial study found the following data:

Table 1. Table of Preliminary Study Results at RSI NU Lamongan

| Quality of Medical Records | Quantity | | % |
|----------------------------|----------|----|-----|
| | Yes | No | |
| Completeness | 79 | 21 | 79% |
| Accuracy | 80 | 20 | 80% |
| Accuracy | 77 | 23 | 77% |

Table 1.1 informs that the results of the medical record quality indicator are completeness, accuracy, and accuracy of more than 20 percent. According to Vilfredo Federico Damaso Pareto in (Sunarto & WN, 2020) the pareto principle says that out of 100 percent if there are 20 percent of the problems will have an impact of 80 percent, and 20 percent of the problems that exist are important.

The first element is Man, Man has thoughts, hopes, and ideas that play a very important role in determining the empowerment of other elements. With qualified human qualities, management will run optimally, and conversely with poor quality of human capabilities, management will also experience many obstacles and failures in achieving goals. Therefore, improving human quality is considered important and must always be carried out, so that in the application of management, both in the community

(organization) and in the context of personality runs as expected. (Rohman, 2017)

The next element of management is Methods, used to facilitate work, a procedure for carrying out work known as Standard Operating Procedure (SOP) is required. This method is used for the implementation of work by considering the objectives, time, cost, and existing facilities to be more effective and efficient. (Mulyadi & Winarso, 2020)

Next, the element of materials (raw materials), is the main supporting factor in the medical record management process, and greatly affects the smooth management of medical records, without materials, medical record management will not run. The availability of raw materials or materials is vital in the production process. Experts are needed to process raw materials into finished or semi-finished goods. Human Resources and raw materials are closely related to each other and cannot be separated. (Widiana, 2020)

The Market Element is an equally important tool in medical record management, because a sign of the existence of a market, the quality of medical record services will be meaningless so that the hospital's goals will not be achieved. The market as one of the main elements of management because from it the results as the goal of a community will be obtained. Maximum results in the world of health are goals that must be achieved. Therefore, to get maximum results, the management process must pay attention to and maintain the market owned, and it must even increase. (Rohman, 2017)

The next element of management is machines, with technological advances, the use of machines is needed in the implementation of medical record management activities. With the existence of machines, the work process becomes more effective and efficient so that machines and humans cannot be separated as long as the Hospital carries out its activities. (Mulyadi & Winarso, 2020).

Meanwhile, the Money element is used to carry out various medical record

management activities that require money. Money used to pay wages or salaries, buy materials, and equipment. Money has meaning as a medium of exchange, as capital and as a value system. The money factor has placed the position of both as an important element to achieve goals. (Widiana, 2020).

The quality of medical records can also be seen from the physical aspect of medical record documents, medical records can be damaged, so that in the event of a legal case, medical record documents are inaccurate to be used as evidence. From a chemical point of view, it can make the contents of medical record documents fade and cannot be read. In terms of biology, it can make the contents of medical record documents damage to several forms due to being eaten by termites and other types of insects.

Efforts to improve the quality of medical records and maintenance of medical record documents can be carried out as seen from various aspects, namely the physical aspect by replacing damaged folders with new ones, from the chemical aspect by using quality ink, and from the biological aspect by regulating the air temperature properly and maintaining the cleanliness of the room. As for other efforts that must be made in maintaining medical record documents, namely, every loan must go through a filling officer and recorded in the expedition book. (Simanjutak & Shella, 2020)

For this reason, based on the above conclusions, the researcher is interested in conducting research related to the relationship of management elements to the quality of medical record documents in the outpatient unit of the Islamic Hospital Nashrul Ummah Lamongan.

METHOD

This research is included in quantitative analytical research. The type used by the researcher in this study is observational analytics with a cross sectional design. Cross-sectional research is research that does not use

the same research object but at the same time. (Abdullah, 2015)

This research is carried out from research planning, research implementation, to report making. The research was carried out in February-May 2023. The location for this research was carried out at RSI NU Lamongan which is located at Jl. Merpati No.62, Sidokumpul Kec. Lamongan, Lamongan Regency, East Java 62213.

The population in this study is 70 health workers who are related to patient medical record documents in the outpatient unit from February to May 2023 at RSI NU Lamongan. The sample in this study is 60 health workers who are related to the medical records of outpatient units from February to May 2023 which were taken by simple random sampling. The data collection instruments in this study are using observation sheets in the form of checklists, questionnaires and closed interviews. It is also needed such as notebooks and voice recorders.

RESULTS

Nashrul Ummah Lamongan Islamic Hospital is a hospital located on Jalan Merpati Sidokumpul Lamongan. This area is quite strategic because it is located in the middle of the city so that it can be reached by the public. This strategic location is what makes the hospital clear and easy to observe by passers-by, because the location of the school is quite close to the shoulder of the road. RSI NU Lamongan is also close to residential areas and several agencies.

Table 2. Frequency Distribution of Respondents

| Features | Frequency | Presentase |
|---------------|-----------|------------|
| Gender | | |
| Male | 22 | 36.7 |
| Women | 38 | 63.3 |
| Total | 60 | 100 |
| Age | | |
| 26-30 years | 11 | 18.3 |

| | | |
|------------------------|-----------|------------|
| 31-35 years old | 28 | 46.7 |
| 36-40 years old | 21 | 35.0 |
| Total | 60 | 100 |
| Final Education | | |
| SMA | 4 | 6.7 |
| D3 | 25 | 41.7 |
| S1 | 31 | 51.7 |
| Total | 60 | 100 |
| Tenure | | |
| <5 years old | 22 | 25.0 |
| >5 years | 38 | 75.0 |
| Total | 60 | 100 |

Based on Table 2, it can be explained that most (63.3%) of the officers are female. Then less than a part (36.7) are male, more than a part (46.7%) of officers are in the age range of 31-35 years and a small part (18.3%) are in the age range of 26-39 years, most (51.7%) officers have the last education of S1 and a small part (6.7%) of the officers have the last education of high school and more than a part (75.0%) of the officers' service period is 6-10 years. Then less than a part (25.0%) of the officers' working period is 1-5 years.

Table 3. Frequency Distribution of Management Elements

| Variable | Frequency | Presentase |
|--------------------------|-----------|------------|
| Man | | |
| Good | 36 | 60.0 |
| Not Good | 24 | 40.0 |
| Total | 60 | 100 |
| Method | | |
| SOP Compliance | 29 | 48.3 |
| Non-compliance with SOPs | 31 | 51.7 |
| Total | 60 | 100 |
| Material | | |

| | | |
|-----------------------------------|-----------|------------|
| Good | 29 | 48.3 |
| Not Good | 31 | 51.7 |
| Total | 60 | 100 |
| Quality of Medical Records | | |
| Completeness | 28 | 46.7 |
| Incompleteness | 32 | 53.3 |
| Total | 60 | 100 |

Based on Table 3, it can be explained that in the man indicator, most (60.0%) of the respondents are knowledgeable. Then less than a part (40.0%) of the respondents were poorly informed. In the method indicator, most (51.7%) respondents did not comply with the Standard Operating Procedure. While the rest are less than a part (48.3%) of respondents comply with the Standard Operating Procedure. In the material indicator, most (51.7%) of the infrastructure facilities are not good. Then the rest is less than a part (48.3%) of good infrastructure. In the medical record quality indicator, more than half (53.3%) of medical records are incomplete. While the rest (46.7%) have complete medical records.

Based on Table 4. it can be explained that after the Chi-Square Test was carried out on the man variable, the p -value was 0.01 so that the $p < 0.05$ value was rejected and H1 was accepted. In the variable method the value of p is 0.01 so that the value of $p < 0.05$ is rejected and H1 is accepted. In the material variable, the value p is 0.00 so that the value of $p < 0.05$ is rejected and H1 is accepted.

DISCUSSION

Management Elements (man, method, material)

In man, the results of the study show that from the data of the man at RSI Nashrul Ummah Lamongan, namely having good human resources. Judging by the results, human resources are good, the completeness of medical record documents is high, while vice versa, if human resources are not good, the

Table 4. Testing Relationships Between Variable

| Variabel | Recording Quality Medical | | Total | P |
|---------------------------------|---------------------------|---------------|-----------|------|
| | Completeness | Not Equipment | | |
| Elements of Man Management | | | | |
| Good | 23 (63.9%) | 13 (36.1%) | 36 (100%) | 0,01 |
| Not Good | 5 (20.8%) | 19 (79.2%) | 24 (100%) | |
| Elements of Management Method | | | | |
| SOP Compliance | 20 (69.0%) | 9 (31.0%) | 29 (100%) | 0,01 |
| Non-compliance with SOPs | 8 (25.85) | 23 (74.2%) | 31 (100%) | |
| Elements of Material Management | | | | |
| Good | 21 (72.4%) | 8 (27.6%) | 2 (100%) | 0.00 |
| Not Good | 7 (22.6%) | 24 (77.4%) | 31 (100%) | |

completeness of medical record documents decreases and this can affect the quality of a hospital. The quality of medical records through indicators of completeness of filling out medical record documents shows that incompleteness is a serious problem but is often forgotten by officers (M. M. K. Wirajaya & Dewi, 2019).

This is in line with research conducted by (Kamalia, 2022) officers who have poor knowledge regarding the completeness of filling out outpatient medical record files is one of the causes of incomplete filling in hospital medical record files. Based on the results of the questionnaire answers used, the researcher also showed several factors that affect the filling of incomplete medical record files by officers, namely knowledge, and training.

Knowledge is influenced by the educational status of the officer. The officer knew that the patient's medical record must be filled in completely, but the officer did not know the importance of filling out the medical record file completely. The results of the study show that at Nashrul Ummah Islamic Hospital there are still officers who are still in educational status who are not in accordance with their skills. According to (Kamalia, 2022), the filling of medical record files must be in accordance with the knowledge possessed by the officer and if the medical record file is filled in by an officer who is in an inappropriate educational status, then all data filling must be under the supervision of the head of the room.

One of the other causes of incomplete medical record file filling is due to the lack of

training related to filling out medical record files that is followed by officers. There are officers who rarely or never take part in medical record training. This shows that the officer only knew about the medical records. Training is an effort to improve the ability of employees and can produce a change or certain skills to a person's behavior that can improve, better abilities (T. W. Pamungkas et al., 2014).

In the method, the results of the study show that from the data method at RSI Nashrul Ummah Lamongan, more than some do not comply with the Standard Operating Procedures (SOP). Judging from the results of the questionnaire, there are several factors that cause SOPs to affect the quality of medical records, namely less effective monitoring and evaluation activities. This has an impact that the SOP has not been implemented properly and has not been implemented.

This is also in line with research (Lestari & Muflihatin, 2020) which shows that monitoring and evaluation activities are important because they can affect the quality of medical records. Monitoring is a daily routine assessment related to ongoing activities and developments, while evaluation is a periodic assessment related to all achievements (Putri et al., 2022)

Monitoring and evaluation that are still not running effectively can be one of the causes of incomplete medical record file filling. In order for the percentage of incompleteness of medical records to decrease, it is necessary to form a monitoring team by the leadership and conduct periodic evaluations at least once a month, this is intended so that the leadership

can find out the percentage of incompleteness of medical record files and can determine solutions to solve problems immediately.

In terms of materials, the results of the study show that from the material data at RSI Nashrul Ummah Lamongan, more than half of them are not good. According to the results of the questionnaire, the factors that cause the material to be poor are the arrangement of medical record forms that are not systematic and too many. This is in line with research (M. K. Wirajaya, 2019) stating that if there are too many medical record files, it causes officers to be lazy to fill out medical record forms.

In a study conducted by (F. Pamungkas et al., 2015) it is explained that the unsystematic arrangement of forms results in caregivers who are usually in a hurry where they will find it difficult to fill out the patient's medical record form because of the less systematic arrangement.

According to the theory above, small things such as the lack of systematic medical record sheets can affect the incompleteness of medical record documents and also have an impact on the quality of medical records.

Quality of Medical Record Documents

The quality of medical records can be seen in the completeness, suitability, accuracy of content, and legal protection of the information contained in the medical records (PERMENKES RI 269/MENKES/PER/III, 2008). In this study, the researcher took indicators to determine the quality of medical records.

The results of the study show that from the data of incomplete medical record documents at RSI Nashrul Ummah Lamongan, more than part of it is incomplete. This can lead to a decrease in the quality of medical records. The completeness of medical record documents is very important because it will have an impact on the quality of hospital services.

This is in line with research (Anggraeni et al., 2014) which said that if the results of the analysis of most medical record files are good, it can be concluded that the quality of health services provided is good. This means that the health service unit or facility includes health

service units or facilities with good health service quality. So the quality of service is influenced by the quality of a medical record document.

A quality medical record is a medical record that contains complete data, so that it can be processed into useful information (Febrianti & Sugiarti, 2019). This statement can be concluded that quality medical records will always contain complete data and can be processed into useful information. For example, as proof in legal cases so that it does not make it difficult for doctors to face malpractice claims.

The Relationship of Management Elements to the Quality of Medical Record Documents

The results of the study showed that when tested using the Chi-Square test, the relationship between the elements of management and the quality of medical records at RSI Nashrul Ummah Lamongan obtained a P of 0.01, which means that < 0.05 , H_0 was rejected. This indicates that there is a relationship between the management element of man and the quality of medical records. According to the results, if the man is knowledgeable, it affects the completeness of the medical record documents. And vice versa, if the man is not well knowledgeable, the incompleteness of medical record documents is even higher. This will have an impact on the quality of medical records.

This is in line with research conducted (Romansyah, 2023) which shows that there is a close relationship between male officers and the completeness of medical records which has an impact on the quality of medical records. The man in question is knowledge. The longer the working period, the higher the level of knowledge obtained and the better it is in filling out the completeness of medical records. On the other hand, the shorter the working period, the knowledge obtained is also less good in filling out the completeness of medical records.

Furthermore, in the method, the results of the study showed that when tested using the Chi-Square test, the relationship between the elements of the management method and the quality of medical records at the Nashrul

Ummah Lamongan Hospital obtained a P of 0.01, which means that < 0.05 , H_0 is rejected, this means that it has a relationship. This is in line with research conducted (Putri et al., 2022) showing that Standard Operating Procedures (SOP) or methods have a relationship with incompleteness in filling out medical record files in hospitals can also affect the quality of medical records.

Based on (PERMENKES No. 512 / MENKES / PER / IV, 2007) Standard Operational Procedure on Practice Licensing and Implementation of Medical Practice explains that SPO is an intrusion or steps used to complete a job, where SPO provides the correct and best steps and then makes it a benchmark for carrying out various activities and service functions made by health service facilities based on professional standards.

So that if the implementation of SPO socialization has not been carried out optimally, the officer does not fill out the medical record in accordance with the SPO, this results in a difference in perception between officers about the completeness of the medical record, socialization can be in the form of filling in medical records according to the SPO such as filling in the patient's identity which includes name, gender, and medical record number (Siwayana et al., 2020)

Then on the material, the results showed that when tested using the Chi-Square test, the relationship between material management elements and the quality of medical records at the Nashrul Ummah Lamongan Hospital obtained a P of 0.01, which means that < 0.05 , H_0 is rejected, which means that it has a relationship.

This is in line with the research conducted by (Lihawa et al., 2015) where the results show that there is a relationship between material management elements and the quality of medical records. In the research conducted (M. K. Wirajaya, 2019) related factors affect the completeness of the quality of medical records, namely the arrangement of forms that are less systematic. Officers who are usually in a hurry will find it difficult to fill out the patient's medical record documents because of the less systematic arrangement. Therefore,

hospitals are expected to make integrated forms.

CONCLUSION

It can be concluded that if the management elements of man, method, and material are good, then the quality of medical records is also good. This is in line with research conducted by (Solehudin, 2022) which states that in order to carry out good medical record activities, good management is also needed by organizing, planning, organizing, directing, and controlling so that organizational goals are achieved by utilizing resources effectively and efficiently. Achieving organizational goals requires management elements consisting of five elements, including man, money, material, machine, and method.

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