DESIGN TRACER (OUTGUIDE) IN THE MEDICAL RECORD STORAGE AT RSAU LANUD SULAIMAN (RSAU DR. NORMAN T. LUBIS)

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Abstract

This research aims to create a Tracer (outguide) Design for medical record file borrowing at RSAU Lanud Sulaiman (RSAU Dr. Norman T. Lubis). This study utilizes a qualitative method with a literature review approach. Data collection techniques include observation, interviews, and literature study. From this research, several issues were identified: (1) The Tracer (outguide) used in the storage of medical record files at RSAU Lanud Sulaiman (RSAU Dr. Norman T. Lubis) is not suitable for use. (2) Out of the four design samples created, one sample was made of acrylic with dimensions of 40 x 15 cm, one sample was made of wood with dimensions of 30 x 15 cm, one sample was made of impraboard with dimensions of 45 x 20 cm, and 25 other samples were made of laminated HVS with dimensions of 35 x 15 cm. A total of 28 tracers (outguides) were created due to budget limitations at the hospital. The suggestions provided by the author for the occurring issues, they are as follows: (1) The designed tracers (outguides) can be used in the borrowing of medical record files to facilitate the medical record files that are taken out from the storage shelves. (2) The hospital management should allocate a budget to increase the number of tracers (outguides) based on the agreed-upon designs.

Keywords : Design, Tracer(outguide), Storage, Medical Record

Introduction

Hospitals are health service institutions to treat patients directly and prioritize safe, quality, non-discriminatory and efficient medical services by prioritizing patient interests according to hospital service standards (Pratama, E. B., & Hendini, A., 2022).

Health service facility is a tool and place used to organize health service efforts, both promotive, preventive, curative and rehabilitative carried out by the government, local government or the community (Permenkes RI No. 24 of 2022). Medical records are documents containing data on patient identity, examination, treatment, actions, and other services that have been provided to patients (Permenkes RI No. 24 of 2022). One of the medical record units supporting medical record services is the storage room (filing) where medical record documents for outpatient, inpatient and emergency departments are storage (Mathar, Irmawati 2018).

Filing is all actions or activities related to the problem of collecting, classifying, storing, placing, maintaining and distributing letters, records, calculations, graphs, data or other information and these actions are carried out precisely in order to carry out a management process and the records and letters can be found again easily (Mathar, Irmawati 2018).

According to the International Federation of Health Information Management Associations (IFHIMA), tracer (outguide) is a substitute for medical records that will be removed from storage for any purpose. must be made of strong and colored material.

The main provisions that must be adhered to in the place of storage of medical record files according to Irmawati Mathar (2018) are:

1. None of the medical records may leave the medical record room, without an exit sign/ loan card. This regulation applies not only to people outside the medical record room, but also to medical record officers themselves.

- 2. A person who receives/borrows a medical record file is obliged to return it in good condition and on time. Provisions should be made on how long a medical record is allowed to remain out of storage. Each medical record should be returned to its shelf at the end of each working day, so that hospital staff can find the necessary information in an emergency.
- 3. Medical records should not be taken from health facilities, except by court order. From the results of observations in the storage room of the Lanud Sulaiman RSAU (RSAU

Dr. Norman T. Lubis) it was found that it turned out that the outbound instructions or tracers (outguide) were not suitable for use, tracers (outguide) tended to tear easily and were only made of buffalo paper which was only divided in half, resulting in problems such as misplacement and difficulty finding medical record files (misfile). So the importance of using tracers (outguide) in medical record files that function as outgoing instructions, to find out the location of outgoing medical records.

Then reviewing the results of previous research (literature review), namely the author Ardianti, Khopipah (2020) said that there were gaps / gaps that had not been targeted from his research, namely the results of the tracer (outguide) should be made of waterproof material and easy to tuck, then it should be more informative so that it can clarify the medical records that are out or borrowed and this is a recommendation for further research, so that the author himself focuses on realizing the gaps / gaps that have not been answered in previous research in a location that is certainly different, namely at RSAU Lanud Sulaiman (RSAU Dr. Ir. Norman T.Lubis).

The results of observations found a problem, especially related to the tracer (outguide) of medical record files, the tracer (Outguide) used in the storage of medical record files at RSAU Lanud Sulaiman (RSAU Dr. Norman T. Lubis) is not suitable for use.

Research Methodology

According to Sugiyono (2022: 4) The research method is a scientific way to obtain data with specific purposes and uses. The research method used by the author is a qualitative research method with a literature review approach. According to Sugiono (2022: 4) Qualitative research methods are research based on postpositiveism or entrepretive, used to examine natural objects, where research is a key instrument. while literature review is an explicit and reproducible systematic method for identifying, evaluating and synthesizing the work of research results and the results of thoughts that have been produced by previous researchers and practitioners.

a. Population and Sample

According to Tarjo (2019) population is all individuals who are the source of sampling consisting of objects (objects to be studied) and subjects (people who are used as sources of information) that have certain qualities and characteristics set by researchers to study and draw conclusions.

The subject in this study is "medical record officer of RSAU Lanud Sulaiman (RSAU dr.Norman T.Lubis)" because this person will be the source of information or source in obtaining data while the object in this study is "Tracer (outguide)" this object will be studied and studied using certain tools / media by the author.

Sample according to Tarjo (2019) is part of the population, samples in qualitative research are not called respondents, but as sources / informants, not statistical samples but theoretical samples, because the purpose of qualitative is to produce valid theories / conclusions.

b. Data Collection Technique

Sampling technique is a technique for determining the number of samples used in research. According to Tarjo (2019) in the research conducted by this author using Nonprobability sampling techniques (non-probability samples), namely samples that are selected on a voluntary basis or because of personal considerations from researchers because they are considered to represent the population.

With purposive sampling research technique, this research sampling is carried out because certain considerations do not intend to generalize the research results to the population. Certain considerations of

this researcher emphasize that the person chosen as a data source is considered appropriate or able to understand the problem.

c. Qualitative data analysis techniques

Data Collection Techniques use by researchers are interviews, library research, and literature review.

d. Data Analysis

According to Miles and Huberman in Sugiyono (2022: 4) that qualitative data analysis is carried out interactively (related to each other) and continues continuously until completion, so that the data is saturated (no difference).

This study uses the stages or steps of analysis from Miles and Huberman as follows:

1. Data reduction stage

Data collection through field notes, interviews, recordings and data that is already available then it is necessary to summarize and present in the form of a narrative.

This study uses data collection through field notes and discussion results in the form of interviews with medical record officers of RSAU Lanud Sulainab (RSAU dr.Norman T.Lubis).

2. Data Presentation Stage

According to Tarjo (2019) the data presentation stage is to construct a brief and structured basis for decision making and application. researchers need to analyze the data reduction process to understand its essence. Data presentation can be focused in the form of structured summaries and synopses.

3. Conclusion stage

The author must make an interpretation. interpreting the data obtained to ensure its accuracy, it is necessary to compare patterns, themes and groups through triangulation. However, in this study the authors only processed data from discussion interviews, literature studies and literature review.

Results and Discussion

A.Tracer Analysis (Out guide) of medical record files

1. Data collection

This research was created because of problems in the field in the form of Tracer (outguide) used by RSAU Lanud Sulaiman is not suitable for use can be seen in the following image attachment:

Figure 3.3. Current state tracer (outguide)



Source: processed by the author (2022)

According to (Anggraini: 2017) A good tracer is in the form of a card, usually the same size or larger than the former medical record using plywood coated with colored plastic and paper clips so as not to be lost or damaged Because the tracer is used repeatedly, the material used is a strong and striking material.

However, the reality that occurs in the field Tracer (outguide) is only made of buffalo paper which is easily torn and not waterproof.

Then on December 15, 2022 the author and the medical record officers of RSAU Lanud Sulaiman (RSAU dr, Norman.T Lubis) discussed the design of the tracer (outguide) in accordance with the needs of the field referring to the literature review journal (Ardianti Khopipah: 2020) stated that the tracer (outguide) should be made of waterproof material and easy to tuck, then it should be more informative so that it can clarify the medical records that are out or borrowed. From the results of the discussion, 5 tracer (outguide) design were formed which were edited using the Canva application software and then clarified the size and description of the outguide "tracer" information using the CorelDrawX7 application, the images are as follows:











Source: processed by the author (2022)

The author and the medical record officers of RSAU Lanud Sulaiman (RSAU dr.Norman T.Lubis) finally chose design number 4 which is in accordance with the real needs in the field. With specifications made 2 plastic bags, the right pocket is useful for slipping the patient's identity sticker, the left pocket is useful for slipping the medical record loan

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receipt paper, and the description "tracer / outguide" is placed in the right corner of the design to be seen when the medical record file is out / borrowed.

Figure 3.6. Design tracer (outguide) number 4 with information on patient identity and medical record borrowing form



Source: processed by the author (2022)

Figure 3.7. Medical Record Loan Form

FORM PEN REKAM	FORM PEMINJAMAN REKAM MEDIS						
NO REKAM MEDIS	:						
NAMA PASIEN	:						
RUANGAN PEMINJAMAN	:						
TGL. PINJAM	:						
TGL. KEMBALI	:						
NAMA PEMINJAM	:						
KETERANGAN	:						

Source: processed by the author (2022)

However, there was a revision of the tracer design (outguide) because the color of the tracer resembles the medical record file folder, which is the same blue color, fearing that the tracer (outguide) is not visible.

Figure 3.8. Medical record file folder of RSAU Lanud Sulaiman (RSAU dr,Norman T.Lubis) size 33 cm x 23 cm



Source: processed by the author (2022)



Figure 3.9. Tracer (outguide) design after revision

Source: processed by the author (2022)

2. Presentation of data

Tracer (outguide) conditions and 4 samples of Tracer (outguide) design proposals that the author has made are presented in the following table:



Table 3.2 Results of data presentation analysis

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Source: processed by the author (2022)

Based on the results of observations made at RSAU Lanud Sulaiman (RSAU dr.Norman T.Lubis) it can be concluded that the author identifies problems related to tracers (outguide) that are not suitable for use. departing from these problems the author and medical record officers held discussions to design the design of the tracer (outguide) to be used, starting from discussing the design of the shape of the tracer (outguide), tools and materials to be used, the loan receipt form.

Of the 4 design samples that have been made, 1 sample made from acrylic with a size of 40 x 15 cm, 1 sample made from wood with a size of 30 x 15 cm, 1 sample made from impraboard with a size of 45 x 20 cm, and 25 other samples made from HVS which are then laminated with a size of 35 x 15 cm. The total samples made are only 28 tracers (outguide) due to the limited budget of the hospital.

Conclusion

Based on the results of observations and discussion of making tracers (outguide) at RSAU Lanud Sulaiman (RSAU Dr.Norman T.Lubis), that concluded as follows:

- 1. RSAU Lanud Sulaiman (RSAU Dr.Norman T.Lubis) already has a tracer (outguide) but is not suitable for use
- 2. The format design of the tracer (outguide) includes information on hospital name data, hospital address, hospital logo, detailed information explaining the use of the tracer (outguide) if it will be used, and the title sign "tracer / outguide".
- 3. Upgrading the tracer material (outguide) based on research gaps from previous research results and then applied in a different place from previous research.

4. Of the 4 design samples that have been made, 1 sample made from acrylic with a size of 40 x 15 cm, 1 sample made from wood with a size of 30 x 15 cm, 1 sample made from impraboard with a size of 45 x 20 cm, and 25 other samples made from HVS which are then laminated with a size of 35 x 15 cm. The total samples made are only 28 tracers (outguide) due to the limited budget of the hospital.

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