

MEDICAL RECORD FOLDER REDESIGN

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A B S T R A C T

Medical record folder function to protect and organize medical record forms so that they are not scattered. This folder should be made of strong materials, such as manila or ivory, to ensure the security and durability of documents containing confidential information. Redesign of medical record folders at bungi health center using the methods used in documentation studies and interviews. Redesign of medical record folders at bungi health center is needed to improve the durability and longevity of the folder. By using stronger materials and the right design techniques, medical record folders can be protected from damage such as tearing or shattering, so that important information remains safe and easy to access. This can also increase administrative efficiency and provide convenience for medical staff in managing patient data. This study aims to redesign the design of medical record folders according to the theory and needs of the health center. Using a case study method, the subject of the study was the head of the medical record installation, while the object was the medical record folder itself. Data analysis was carried out descriptively. The results of the study showed that the redesign of medical record folders paid attention to physical aspects, using 260 gram ivory material to improve quality and functionality. The results of the medical record map design are expected to be a practical solution to improve the efficiency and quality of medical record services at the Bungi Healthy Center. With a design that suits your needs, this map can facilitate document management, speed up access to patient information, and support access to patient information, and support medical staff in providing better services. The implementation of this design is expected to increase patient satisfaction and work effectiveness at the health center.

INTRODUCTION

Puskesmas is a public health unit (UKM) that functions as a first-level service facility. In Permenkes 43 of 2019, UKM includes activities to maintain and improve health and prevent health problems at the family, group, and community levels. Meanwhile, individual health efforts (UKP) include health services, disease prevention, healing, and health recovery. Thus, UKM is more collective, while UKP focuses more on individual services.

Medical records are files containing notes and documents about ideas, about patients, examinations, treatments, actions and other services that have been given to patients. One of the patient medical record services is carried out by the storage (*filing*) section.

Medical records are documentation that includes all information about patients and the services received at health facilities. In addition to physical files, medical records can also be an information system that stores patient data digitally. Its purpose includes making treatment decisions, legal evidence of services, and evaluating the performance of health workers. Thus, medical records play an important role in the management and quality of health services. (Sitti Budiatty & Latumbu, 2022)

Medical record folders serve as protectors for medical record forms so that they are not scattered. This folder should be made of strong material, such as manila or ivory. Medical record files contain confidential individual data, so each form sheet must be inserted into a folder or folder to maintain confidentiality.

The results of initial observations conducted by researchers at the Bungi Health Center, the medical record folder used still uses thin plastic material, and is still incomplete where *the cover* at the health center does not have the date of birth, gender, and year of the patient's visit. Therefore, researchers are interested in conducting research on "redesigning medical record folders using folders". The design will be made by collecting and analyzing physical, anatomical, and content aspects.

Based on this background, the researcher encourages research on "Redesign of medical record folders at Bungi Health Center". The goal is to improve the security and durability of medical record documents by documenting the identity, medical history, and patient examinations in the folder. It is expected that good design will support clinical documentation and provide benefits for researchers and research development in this field.

METHODOLOGY

This study uses qualitative methods to understand social phenomena in depth. By collecting data through interviews, observations, or text analysis, this study aims to explore the meanings, experiences, and perspectives of participants. This approach allows researchers to gain rich and contextual insights into the subjects studied. the subject of the study is the head of the medical record installation, while the object is the medical record map itself. the methods used are documentation studies and interviews . This is used in accordance with the design objectives to produce a strong and qualified medical record map so that it can improve the quality of medical record management at the Bungi Health Center. The research will be conducted in the working area of Bungi Health Center, Jl. Anoa km.12 Kel.Liabuku, Bungi District, Bau-Bau City, Southeast Sulawesi The research period is from May to June 2024.

RESULTS AND DISCUSSION

The results of the study indicate that the redesign of the medical record map at the Bungi Health Center is very important. Interviews with respondent A revealed that the selection of materials for the map to be redesigned needs to be considered, according to the needs identified in the study.

Interview with respondent A showed that it is necessary to ask whether there is an SOP

"For the most appropriate material, use ivory material which is suitable for the folders in the hospital"

(Standard Operating Procedure) related to the redesign of the medical record folder. This highlights the importance of formal guidelines in the process.

"There isn't any"

(Respondent A, 14 juni 2024)

"The hope is that after it is designed, the folder will be neatly arranged so that it will be easier for officers to easily find patient medical record files."

(Respondent A, 14 juni 2024)

The results of the interview with respondent A revealed expectations regarding the map to be designed, namely that the map would be more functional, easy to use, and meet the needs of officers at the health center.

The results of the interview with respondent A mentioned the items that must be included in the map to be designed, including:

"The items that must be included in the map are the patient's name, family name (head of family), rm number, address, BPJS number, allergies"

(Responden A, 14 juni 2024)

Results of interview with respondent A explained that the medical record map should not have been used because.

"fund constraints"

(Respondent A, June 14, 2024)

The results of the interview with respondent A showed that the map at Bungi Health Center had been designed previously.

"Already"

(Respondent A, June 14, 2024)



Figure 1. Medical Recap Map Design

Physical Aspects

The physical aspects focused on in medical record map design include material, shape, size and color.

The material used is *Ivory* 260 grams. The grammage of the material used in the design of the medical record folder design is determined according to the materials available in the field, which is 260 grams. The advantages of *ivory* 260 grams are thick and stiff materials that make the medical record folder stand upright when on the medical record storage rack.



Figure 2. Ivory Paper On The Medical Record Folder

The shape used in designing the medical record map design is a rectangle equipped with a hook. The shape section has been improved by adding a fold in the middle of the map as an extension of the increasing medical record form.



Figure 3. Medical Record Map Design Form Before Redesign

The size of the medical record at Bungi Health Center is 28 cm long x 35.5 cm wide while the length of 3.5 cm is used as the tongue of the NO. RM map. The changes that occurred in the redesign occurred in the length of the original map from 28 cm to 31 cm, the width of the original map from 35.5 cm to 36 cm while the tongue of the original map from 3.5 cm to 4 cm. changes in the size of the medical record map are intended for the center fold of the map which functions as an extension of the medical record form.

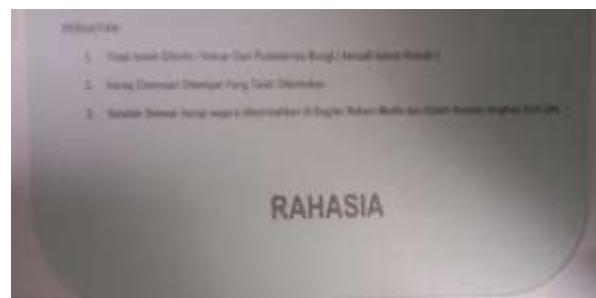
The addition of color to the design is used in the medical record folder, both basic colors and ink colors, namely red, yellow, green, blue and black and white ink colors.

Anatomical Aspects

The anatomical aspects focused on in medical record map design include headings, instructions, and *body*.

The head section (*heading*) of the medical record map includes the Bungi Health Center logo located at the top left, the name and address of the hospital located at the top center.

The Instruction section consists of instructions that medical records should not be taken out of the Bungi Health Center, instructions that the medical record folder should be stored in a designated place, medical records should be returned to the medical record installation, while the contents of the medical record belong to the patient, which means that the medical record file should not be taken home by the patient or taken out of the health service facility. This means that it is in accordance with the theory (Huffman, 1999), namely that *instructions* are placed on the front of the form if there is space available. If more detailed instructions are needed, they can be placed on the back of the form, but there must be a reference to this in the general instructions section. However, on the back there are no more detailed instructions regarding the use of the medical record folder.



Instruction design in the form of a medical record form before the redesign.



instruction design on the medical record map after redesign.

The body is the design framework that includes margins, spacing, rules, type styles and how to write.

The margins in the redesign of the medical record map include the top margins in the design being 3 cm.

The spacing used in the medical record folder at the Bungi Health Center is vertical spacing, *horizontal spacing* and box design. *Vertical spacing* in the redesign of the medical record folder is 1.5 spaces, Box design is a box *space* used in the medical record folder.

The box design in this redesign has not undergone any item changes.

The lines (*Rules*) used in the redesign of the medical record map are *solid lines* (straight, not broken) used as a divider between *the heading* and the contents of the map and *dotted lines* (broken) used for the patient's name, date of birth/age, cell phone number, and health insurance. Typefaces in the redesign of medical record folders

The font in the redesign of the medical record folder must also see and pay attention to the formal impression, because in this case the font will be applied to the medical record folder belonging to the health service facility, namely the Bungi Health Center. The font size has changed in the redesign of the medical record folder design. The following are details of the font type and changes in font size on the medical record folder at the Bungi Health Center.

Content Aspect

The design of the medical record map based on the content aspect focuses on the completeness of the abbreviation items.

Items on the medical record folder at the Bungi Health Center are additions in the redesign of the medical record folder. The additions include patient name, date of birth/age, address, BPJS number, family card name, RM number, confidential documents and allergies. Gender, gender items were added to the redesign of the medical record folder with the aim of making it easier for officers to distinguish between male and female patients.

The abbreviations used in the redesign of the medical record map design include the addition of male (M) and female (F) gender to the patient identity item.

Based on the interview conducted with the head of medical records unit at Bungi Health Center, the researcher has measured the medical record folder, on the medical record file storage rack. After measuring this, the researchers developed the appropriate folder size on the medical record rack storage. This was done by the researcher so that the results of their project were available for review and selection at Bungi Health Center.

CONCLUSION

The redesign of the medical record folder at the Bungi Health Center was carried out by considering the physical, anatomical, and content aspects. Previously, the condition of the folder was not appropriate, with the material being too thin. In the redesign, the folder material was changed to ivory 260 grams and folds were added on the stage. In terms of anatomy, items in the detailed instructions and box design were updated, including changes to patient identity. The content aspect was also expanded by adding information such as patient name, date of birth/age, address, gender, health insurance, cellphone number, and occupation.

The limitations of this study are that the medical record cover map is still incomplete, meaning it does not have the patient's date of birth, gender, and year of visit.

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