

Relationship Of Interna Medicine Specialist Doctor Knowledge With Completeness Of Integrated Outstanding Patient's Development Notes At Udayana University Hospital

I Dewa Ayu Eka Budiani¹, Ika Setya Purwanti^{2*}, Putu Ayu Sri Murcittowati³

^{1,2*}Program Studi Rekam Medis dan Informasi Kesehatan, STIKES Wira Medika Bali, Denpasar, Indonesia

³RSUD Wangaya Kota Denpasar, Denpasar, Indonesia

ARTICLE INFO

Keywords:

CPPT,
Physician Knowledge and
Discipline,
Interna Specialist

ABSTRACT

Integrated Patient Development Records (CPPT) is the documentation for health workers in reassessing patient's inpatients according to Hospital Accreditation standards. The CPPT is an integrated patient care communication media for health workers to write patient data and treatment plans. The CPPT sheet contains three main components: patient identification, essential records, and patient authentication. The function of collaboration and communication between health professionals will appear in the CPPT form at the hospital. The characteristics of doctors in supporting the completeness of filling out medical records can be seen from specialist doctors' knowledge level. This study aimed to determine the relationship between the knowledge and completeness level of filling out CPPT inpatients by interna specialists at Udayana University Hospital. The research method used in this study is quantitative analysis with a total sample of 85 medical records of interna inpatients and five respondents of interna specialists by using the Probability sampling method, namely random sampling. The results showed that from 5 interna specialist doctors at Udayana University Hospital, it was found that three doctors understood and two doctors did not understand. Of the 85 medical record files studied, the incompleteness of the CPPT form reached 12.96%, while the completeness of the CPPT form reached 87.06%. The results of the Chi-Square test resulted in a p-value of 0.016. This proves that there is a relationship between the level of knowledge and the completeness of the inpatient integrated patient development record form at Udayana University Hospital.

Email :

dewaayueka89@gmail.com
davyathaa@gmail.com
srisoedar@gmail.com

Copyright © 2022 Eduhot Journal. All rights reserved is Licensed under a [Creative Commons Attribution- NonCommercial 4.0 International License \(CC BY-NC 4.0\)](https://creativecommons.org/licenses/by-nc/4.0/)

1. INTRODUCTION

The hospital is one of the health service systems in the community. Hospitals mainly provide excellent care and treatment to patients, outpatients, inpatients, and emergency departments (Ministry of Health, 2006) [1]. As health institutions, hospitals must realize an increase in the quality of health services supported by adequate supporting facilities, including a medical record unit that professionally organizes medical record file management activities[2].

Integrated Patient Development Records (CPPT) is the documentation for health workers in reassessing patient's inpatients according to Hospital Accreditation standards. The CPPT is an integrated patient care communication media for health workers to write patient data and treatment plans. The CPPT sheet contains three main components: patient identification, essential records, and patient authentication. The function of collaboration and communication between health professionals will appear in the CPPT form in hospitals[3].

Relationship Of Interna Specialist Doctor Knowledge With Completeness Of Integrated Outstanding Patient's Development Notes At Udayana University Hospital ; I Dewa Ayu Eka Budiani, Ika Setya Purwanti, Putu Ayu Sri Murcittowati

Completeness of clinical data in medical records is essential. Incomplete medical records do not provide sufficient information for further treatment when the patient returns to the health care facility. Many factors can cause incomplete clinical data in medical records[4]. The number of patients causes doctors to try to provide services quickly. Doctors still have to wait for the results of laboratory tests to confirm a more specific diagnosis. The busyness of doctors in completing forms, the limited number of doctors, the lack of cooperation between nurses and medical record officers[5], and doctors not caring about medical records are also factors for incomplete filling of medical records. The characteristics of officers who fill out medical records are significant in filling out the completeness of medical records, especially doctors. The characteristics of doctors in supporting the completeness of filling out medical records can be seen from specialist doctors' knowledge and discipline level[6]. The results of previous research researched by [7] examined "The Influence of Completeness of Inpatient Integrated Patient Development Records (CPPT) on Standard Assessment 13.3 Management of Medical Record Information Snars Version at Santosa Hospital Bandung Kopo" using quantitative methods with a descriptive approach[8]. The population of this study was 850 medical records, the formula used to calculate the sample was the slovin formula and saturated sampling with random sampling. The results of the discussion of the quantitative analysis that has been done show that the completeness of inpatient CPPT is incomplete[9].

Based on initial data in January-March 2021 at the Udayana University Hospital Medical Record Installation, this hospital had 219 inpatients in January, 188 in February, and 152 in March. The medical records that must be managed are 549 files. One medical record management still an obstacle in incompleteness is CPPT, primarily inpatient CPPT by Interna Specialists.

The percentage of incomplete filling of medical records for the period 1 January – 30 March 2021 at Udayana University Hospital is the CPPT form. In January, the incomplete filling of the CPPT was 30 CPPT from 219 patients or 14%. Incomplete CPPT filling in February as many as 28 CPPT from 188 patients or 15%. Incomplete CPPT served as many as 25 CPPT from 152 patients or 17% in March. In the medical records, the CPPT incompleteness was examined by 63 CPPT Interna Specialists, 20 CPPT Neuro Specialists, 30 CPPT Surgeons, 7 CPPT Pediatricians, and 7 CPPT Obstetricians. These results show that the CPPT form filling with the highest percentage of incompleteness by Interna Specialists is 63 CPPT.

This study aims to identify interna specialists' knowledge level at Udayana University Hospital to fill in CPPT inpatients as measured by doctors' knowledge, attitudes, and skills. Identify the completeness of filling out the CPPT at Udayana University Hospital. Analyzing the relationship between interna specialists' knowledge level and the fullness of filling out the CPPT inpatients at the Udayana University Hospital. Given the importance of completing medical records, especially the CPPT form, the researcher is interested in taking the title "The Relationship of Knowledge and Discipline of Interna Specialists to Incomplete Development of Inpatient Integrated Patient Development Records at Udayana University Hospital."

2. METHOD

The research used in this study is descriptive quantitative analysis aimed at describing existing phenomena[10]. Cross-sectional research), namely, research to find the relationship between the independent and dependent variables by collecting data at one time [11][12]. This study aims to determine the relationship between the knowledge of interna specialists and the completeness of inpatient integrated patient development records at Udayana University Hospital. The location of research was carried out at the Udayana University Hospital. This research was conducted on January 1–March 30, 2022. The analysis of the incompleteness of the medical record file is carried out every day in the medical record unit. The population in this study were all inpatients for three months at Udayana University Hospital with the sampling technique used in this study was probability sampling with random sampling. After being calculated using the Slovin formula, a sample of 84.5 was

obtained and then rounded to 85. The sample size for this study was 85 medical records of interna specialists at Udayana University Hospital.

3. RESULTS AND DISCUSSION

Characteristics of Respondents

Respondents in this study were five interna specialists at Udayana University Hospital. The characteristics of the respondents in this study were gender, length of work in the hospital, and work unit.

Table 1. Distribution of Respondent's Characteristics

Characteristics	Frequency (n)	Percentage (%)
Gender		
Man	3	60
Woman	2	40
Amount	5	100
Length of work		
<1 year	0	0
1-<2 years	0	0
2-<3 years	2	40
>3 years	3	60
Amount	5	100
Work unit		
1st Floor Lounge	2	40
ICU room	1	20
Emergency Room	2	40
Amount	5	100

The table above shows that of the five respondents' doctors, 3 were men (60%) and 2 were women (40%). Based on the length of work, two doctors worked 2-<3 years, and three doctors worked >3 years. Based on the work unit, two doctors are on duty in the RAP Room 1st floor, 1 doctor is on duty in the ICU, two doctors are on duty in the ER.

Percentage of Knowledge Level of Interna Specialist on filling inpatient CPPT at Udayana University Hospital.

Table 2. Description of Knowledge of Interna Specialists at Udayana University Hospital

No	Statement	Strongly Disagree n(%)	Not Agree n(%)	Agree n(%)	Strongly Agree n(%)
1	I have to fill in the CPPT	0 (0)	0 (0)	2 (40)	3 (60)
2	Filling in the patient's identity is the most important part of the inpatient CPPT	0 (0)	2 (40)	1 (20)	2 (40)
3	If I do not complete the CPPT, then the minimum service standards are not met	0 (0)	0 (0)	1 (20)	4 (80)
4	The returned CPPT must be filled in entirely for each item of the form	0 (0)	0 (0)	3 (60)	2 (40)
5	I filled out the CPPT according to the applicable CPPT filling SOP	0 (0)	2 (40)	2 (40)	1 (20)
6	Incomplete filling of inpatient CPPT can hinder the preparation of hospital reports	0 (0)	0 (0)	3 (60)	2 (40)
7	Medical records have socialized the CPPT	0	0	2	3

Relationship Of Interna Specialist Doctor Knowledge With Completeness Of Integrated Outstanding Patient's Development Notes At Udayana University Hospital ; I Dewa Ayu Eka Budiani, Ika Setya Purwanti, Putu Ayu Sri Murcittowati

	SOP	(0)	(0)	(40)	(60)
8	Completeness of the initial diagnosis and final diagnosis is an important thing in establishing a diagnosis	0	1	2	2
		(0)	(20)	(40)	(40)
9	I have to fill in completely to keep the treatment going	0	0	4	1
		(0)	(0)	(80)	(20)
10	On the CPPT sheet, it contains records of patient care returned to post-inpatient control for follow-up	0	0	2	3
		(0)	(0)	(40)	(60)

The following results were obtained based on the dimensions of knowledge that were assessed with 10 statements according to table 4.2. Statement 1, I am obliged to fill in the CPPT, 3 (60%) doctors answered firmly agree, and 2 (40%) doctors answered agree. Question 2, filling in the patient's identity is the most important part of inpatient CPPT. 2 (40%) doctors answered disagree, 1 (20%) doctors answered I agree, and 2 (40%) doctors responded strongly agree. Question 3, if I do not complete the CPPT, then the minimum service standards are not met, 1 (20%) answered agree, and 4 (80%) answered strongly agree. Question 4, the returned CPPT must be filled in for each item of the form. 3 (60%) doctors answered agree, and 2 (40%) responded strongly agree. Question 5, I filled out the CPPT following the applicable CPPT filling SOP. 2 (40%) answered disagree, 2 (40%) doctors answered agree, and 1 (20%) doctors responded strongly agree.

Question 6, incomplete filling of inpatient CPPT, can hinder the preparation of hospital reports. 3 (60%) doctors agreed, and 2 (40%) doctors responded strongly agreed. Medical records have socialized question 7, the CPPT SOP, 2 (40%) doctors answered agree, and 3 (60%) doctors responded strongly agree. Question 8, the completeness of the initial diagnosis and final diagnosis is an important thing in establishing a diagnosis, 1 (20%) doctors answered disagree, 2 (40%) doctors answered agree, and 2 (40%) doctors answered strongly agree. Question 9, I must fill in completely to maintain the continuity of treatment. 4 (80%) doctors answered agree, and 1 (20%) doctor answered strongly agree. Question 10, on the CPPT sheet, contains records of patient care returned to post-hospitalized control for follow-up. 2 (40%) doctors answered agree, and 3 (60%) doctors responded strongly agree.

Table 3. Distribution of the Knowledge Frequency of Interna Specialists at Udayana University Hospital

Dimensions of knowledge	Frequency (n)	Percentage (%)
Understand	3	60
Not understand yet	2	40
Amount	5	100

Based on table 3, from 5 interna specialist doctors at Udayana University Hospital, the results were that three doctors understood (60%), and two doctors did not understand (40%) on filling inpatient CPPT at Udayana University Hospital. These results were obtained based on a questionnaire about the knowledge of filling in CPPT inpatients.

Table 4. Discipline Description of Interna Specialist at Udayana University Hospital

No	Statement	Strongly Disagree n(%)	Not Agree n(%)	Agree n(%)	Strongly Agree n(%)
1	I work correctly in filling out the inpatient CPPT form	0	0	2	3
		(0)	(0)	(40)	(60)
2	Filling in the CPPT at the hospital is easy to understand	0	0	3	2
		(0)	(0)	(60)	(40)
3	I have filled out the complete inpatient	0	0	3	2

Relationship Of Interna Specialist Doctor Knowledge With Completeness Of Integrated Outstanding Patient's Development Notes At Udayana University Hospital ; I Dewa Ayu Eka Budiani, Ika Setya Purwanti, Putu Ayu Sri Murcittowati

	CPPT sheet, and the minimum service is not fulfilled	(0)	(0)	(60)	(40)
4	I have to fill out the CPPT sheet for every treatment/patient action	0 (0)	1 (20)	2 (40)	2 (40)
5	I have attended seminars or training at the hospital	0 (0)	0 (0)	2 (40)	3 (60)
6	I know the procedure for filling out the CPPT	0 (0)	1 (20)	1 (20)	3 (60)
7	I've read the SOP about CPPT	0 (0)	1 (20)	3 (60)	1 (20)
8	If I complete filling out the CPPT, it can speed up the service process for the hospital in question	0 (0)	0 (0)	2 (40)	3 (60)
9	The response time will not decrease if the CPPT is filled out completely and returned on time	0 (0)	0 (0)	3 (60)	2 (40)
10	Filling out medical record documents, especially CPPT, is very good for the quality of hospital services	0 (0)	0 (0)	2 (40)	3 (60)

Based on the dimensions of discipline assessed with ten statements in table 4, the following results are obtained. Question 1, I worked correctly in filling out the inpatient CPPT form, 2 (40%) doctors answered agree, and 3 (60%) doctors responded strongly agree. Question 2, filling in the CPPT in hospitals is easy to understand, 3 (60%) doctors answered agree, and 2 (40%) doctors answered strongly agree. Question 3, I have filled out the complete CPPT sheet for inpatient services. The minimum service is not fulfilled, 3 (60%) doctors answered agree, and 2 (40%) doctors answered strongly agree. Question 4, I have to fill out the CPPT sheet for each patient's treatment/action, 1 (20%) doctors answered disagree, 2 (40%) doctors answered agree, and 2 (40%) doctors responded strongly agree. Question 5, I have attended seminars or training in hospitals, 2 (40%) doctors answered agree, and 3 (60%) doctors answered strongly agree.

Question 6, I know the procedure for filling out the CPPT, 1 (20%) doctors answered disagree, 1 (20%) doctors answered agree, and 3 (60%) doctors answered strongly agree. Question 7, I have read the SOP about CPPT, 1 (20%) doctors answered disagree, 3 (60%) doctors answered agree, and 1 (20%) doctors responded strongly agree. Question 8, if I complete filling out the CPPT, it can speed up the hospital service process, 2 (40%) doctors answered agree, and 3 (60%) doctors responded strongly agree. Question 9, Response time will not decrease if the CPPT is filled out completely and returned on time, 3 (60%) doctors answered agree, and 2 (40%) doctors responded strongly agree. Question 10, in filling out medical record documents, especially CPPT, is very good for the quality of hospital services, 2 (40%) doctors answered agree, and 3 (60%) doctors responded strongly agree.

Table 5. Distribution of Discipline Frequency of Interna Specialists at Udayana University Hospital

Dimensions of discipline	Frequency (n)	Percentage (%)
Discipline	4	80
Not yet disciplined	1	20
Amount	5	100

Based on table 5, from 5 interna specialist doctors at Udayana University Hospital, the results obtained are four disciplined doctors (80%), and one doctor is not disciplined (40%) for filling *Relationship Of Interna Specialist Doctor Knowledge With Completeness Of Integrated Outstanding Patient's Development Notes At Udayana University Hospital ; I Dewa Ayu Eka Budiani, Ika Setya Purwanti, Putu Ayu Sri Murcittowati*

inpatient CPPT at Udayana University Hospital. These results were obtained based on a questionnaire about the doctor's discipline towards filling out the inpatient CPPT.

Table 6. Distribution of Knowledge Levels of Interna Specialists at Udayana University Hospital

Knowledge level	Frequency (n)	Percentage (%)
Well	3	60
Not good	2	40

Based on table 6, the level of knowledge of interna specialists at Udayana University Hospital is categorized into two, namely, good and bad. These results are obtained from the accumulated level of understanding and discipline of doctors. There are three doctors with a good level of knowledge with a percentage of 60%, while doctors with poor knowledge, namely 2 doctors with a percentage of 40%.

Table 7. Overview of Completeness of CPPT Interna Specialist Doctors at Udayana University Hospital

Number	Component Analysis	There is		There isn't any		Amount	
		F	%	f	%	f	%
1	Patient identity	85	100	0	0	85	100
2	Patient Indication	84	98,82	1	1,18	85	100
3	Physical Examination Results	81	95,29	4	4,71	85	100
4	Supporting Examination Results	84	98,82	1	1,18	85	100
5	Final Diagnosis	85	100	0	0	85	100
6	Doctor's Name	77	90,59	8	9,41	85	100
7	Doctor's signature	80	94,12	5	5,88	85	100

In Table 7, it can be seen that the completeness of the CPPT form for interna specialists, namely the analysis of patient identity, is 85 (100%), in the analysis of patient indications, there are 84 (98.82%), and there is no 1 (1.18%), analysis of results physical examination there is 81 (95.29). There is no 4 (4.71%), analysis of the results of supporting examinations is 84 (98.82%) and none is 1 (1.18%), the final diagnosis analysis is there by 85 (100%), analysis of doctor's name there is 77 (90.59%) and none is 8 (9.41%), doctor's signature analysis is 80 (94.12%). None is 5 (5.88%).

Table 8. Distribution of Completeness of CPPT Interna Specialist Doctors at Udayana University Hospital

Variable	Category	Amount
Medical Record	Complete	74 (87,06%)
	Incomplete	11 (12,94%)

In Table 8, the results of the completeness of the CPPT Interna Specialist at the Udayana University Hospital were analyzed for the entirety of the complete forms, namely 74 (87.06%) and 11 (12.94%).

The Relationship of Clarity of Knowledge and Discipline of Interna Specialists to Incomplete CPPT Inpatients at Udayana University Hospital

The results of the Chi-Square statistical test using STATA software produced a p-value of 0.016. This proves that there is a significant relationship between the knowledge of interna specialists and the completeness of the medical record form for the Interna Inpatient CPPT form at the Udayana University Hospital.

Relationship Of Interna Specialist Doctor Knowledge With Completeness Of Integrated Outstanding Patient's Development Notes At Udayana University Hospital ; I Dewa Ayu Eka Budiani, Ika Setya Purwanti, Putu Ayu Sri Murcittowati

Relationship between Interna Specialist Knowledge and Completeness of Inpatient Integrated Patient Progress Records

The Chi-Square test in this study resulted in a p-value of 0.016, which indicates a significant relationship between the knowledge of specialist doctors and the completeness of the integrated patient development record form at Udayana University Hospital. This study's results align with research conducted by Kumalasari and colleagues in 2018 under the title "The Relationship of Knowledge, Attitude, and Age of Doctors to Completeness of Medical Record File Filling in BPJS Patients at Aisyiyah Bojonegoro Hospital[13]." This study proves a relationship between doctors' knowledge and the completeness of filling out medical record files. This is because the more doctors understand about filling out medical records, the higher the level of completeness of medical records.

The integrated patient progress record (CPPT) is a record of documentation carried out by health workers to coordinate between health workers. This communication aims to prevent errors and repetition of information, assist nurses in time management and improve the quality of medical records. Incomplete documentation will form an unfavorable framework that will worsen the framework of the health team because the incompleteness of the CPPT makes the services provided to patients inaccurate. The participation of health workers significantly affects the completeness of the CPPT.

According to Ayuningtyas and friends[6], officers' behavior in filling out medical records is influenced by knowledge. Lack of knowledge of health workers about the importance of medical records can result in hospital losses if there are matters relating to the law at any time because medical records have legal aspects (legal). According to researchers, all information contained in medical records can be valid evidence. In addition, incomplete medical records can also affect the process of claiming patient care costs at the hospital because the medical history contains information on patient health services that can be used as the basis for determining patient care rates/costs.

According to the researcher's analysis, in addition to the doctor's knowledge, other factors affect the completeness of filling out the Inpatient Integrated Patient Development Record at Udayana University Hospital. These factors include the limited time for doctors to examine patients in large numbers, so filling in the CPPT becomes delayed and tends to be forgotten by doctors. According to [14], writing a complete medical record requires strong awareness/motivation from doctors who provide services to patients[15].

To raise doctors' awareness of the importance of filling out medical records and incredibly complete CPPT forms, it is necessary to conduct socialization with all medical personnel who provide medical services to patients. The socialization also aims to increase doctors' knowledge of filling out CPPT forms. In addition, it is also necessary to give awards to doctors who fill out complete medical records to generate motivation for doctors. On the other hand, doctors who fill out incomplete need to be given sanctions to increase awareness of doctors who are not disciplined in filling out the CPPT form.

4. CONCLUSION

Conclusions from the research entitled Relationship of Knowledge of Interna Specialist Doctors with Completeness of Inpatient Integrated Patient Development Record Form at Udayana University Hospital, among others: Out of 5 Interna Specialist doctors at Udayana University Hospital, there are three doctors with a good level of knowledge with a percentage of 60 %, while doctors with poor knowledge are two doctors with a percentage of 40%. Of the 85 medical record files studied, the completeness of the CPPT form reached 12.96%, while the completeness of the CPPT form reached 87.06%. The results of the Chi Square test resulted in a p-value of 0.016. This proves that there is a relationship between the level of knowledge and the completeness of the inpatient integrated patient development record form at Udayana University Hospital.

REFERENCES

- [1] D. Riyantika, "Analisis Faktor-Faktor Penyebab Ketidaklengkapan Pengisian Lembar Resume Medis Pasien Rawat Inap," *Str. J. Ilm. Kesehat.*, vol. 7, no. 1, pp. 69–73, 2018.
- [2] S. E. Rikomah, *Farmasi Rumah Sakit*. Deepublish, 2017.
- [3] S. J. Swari, G. Alfiansyah, R. A. Wijayanti, and R. D. Kurniawati, "Analisis Kelengkapan Pengisian Berkas Rekam Medis Pasien Rawat Inap RSUP Dr. Kariadi Semarang," *Arter. J. Ilmu Kesehat.*, vol. 1, no. 1, pp. 50–56, 2019.
- [4] N. Nurhaidah, T. Harijanto, and T. Djauhari, "Faktor-Faktor Penyebab Ketidaklengkapan Pengisian Rekam Medis Rawat Inap di Rumah Sakit Universitas Muhammadiyah Malang," *J. Kedokt. Brawijaya*, vol. 29, no. 3, pp. 258–264, 2016.
- [5] N. Nuryani and D. D. Susanti, "Hubungan pengetahuan perawat dengan kelengkapan dokumentasi asuhan keperawatan di RSUD dr. Soekardjo Kota Tasikmalaya," *J. Manaj. Inf. Kesehat. Indones.*, vol. 2, no. 2, 2014.
- [6] A. Ayuningtyas, A. T. Susilani, and F. Hakam, "Hubungan Tingkat Pengetahuan Tentang Rekam Medis Dengan Kelengkapan Lembar Anamnesa Oleh Bidan Di Bangsal Kebidanan Rumah Sakit Nur Hidayah Bantul," *JPermata Indones. Nov*, vol. 6, no. 2, pp. 1–9, 2015.
- [7] S. Setiatin and S. Laksamana, "Pengaruh Kelengkapan Pengisian Catatan Perkembangan Pasien Terintegrasi (CPPT) Rawat Inap Terhadap Penilaian Standar 13.3 Manajemen Informasi Rekam Medis Versi Snars Di Santosa Hospital Bandung Kopo," *INFOKES (Informasi Kesehatan)*, vol. 2, no. 2, pp. 94–107, 2018.
- [8] S. Sarosa, *Analisis Data Penelitian Kualitatif*. PT Kanisius, 2021.
- [9] Y. Lestari, A. Saleh, and S. Pasinringi, "Hubungan Interprofessional Kolaborasi dengan Pelaksanaan Catatan Perkembangan Pasien Terintegrasi di RSUD Prof Dr HM Anwar Makkatutu Kabupaten Bantaeng," *J. Kesehat.*, vol. 7, no. 1, pp. 85–90, 2017.
- [10] A. Anggito and J. Setiawan, *Metodologi penelitian kualitatif*. CV Jejak (Jejak Publisher), 2018.
- [11] Notoadmodjo, *Promosi Kesehatan dan Perilaku Kesehatan*. Jakarta: PT. Rineka Cipta, 2012.
- [12] G. R. Hatta, "Pedoman Manajemen Informasi Kesehatan di sarana pelayanan kesehatan," *Jakarta Univ. Indones.*, 2008.
- [13] R. R. Kumalasari, Y. Dharmawan, and S. Winarni, "Hubungan Pengetahuan, Sikap Dan Usia Dokter Terhadap Kelengkapan Pengisian Berkas Rekam Medis Pada Pasien BPJS Di Rumah Sakit Aisyiyah Bojonegoro," *J. Kesehat. Masy.*, vol. 6, no. 4, pp. 125–131, 2018.
- [14] Y. Eny and R. Enny, "Hubungan Pengetahuan Dokter Dengan Kelengkapan Dokumen Rekam Medis Rawat Jalan di Poliklinik Neurologi RSUP. Dr. Kariadi Semarang Oktober 2008," *J. Visikes*, vol. 3, no. 2, pp. 17–28, 2008.
- [15] R. Herdiyanti, "Analisis Pelayanan Kesehatan Bagi Pasien Badan Penyelenggara Jaminan Sosial (BPJS) Di Puskesmas Ukui Kabupaten Pelalawan." Universitas Islam Riau, 2021.