

**ABSTRAK**

Nama : Nuraeni

Judul : TINJAUAN KETEPATAN KODE DIAGNOSIS PADA PASIEN *CORONAVIRUS DISEASE 2019* (COVID 19) DENGAN KOMORBID HIPERTENSI DI RSUD Dr. ADJIDARMO LEBAK TAHUN 2021-2022

Program Studi : D-III Rekam Medis dan Informasi Kesehatan

Pada akhir tahun 2019 tepatnya pada bulan Desember, dunia dihebohkan dengan sebuah kejadian yang membuat banyak masyarakat resah yaitu dikenal dengan virus corona (COVID-19) yang menimbulkan wabah besar di seluruh dunia. Penelitian ini merupakan penelitian deskriptif dengan pendekatan kuantitatif. Tujuan penelitian ini yaitu untuk mengetahui ketepatan pemberian kode diagnosis pasien COVID-19 dengan komorbid hipertensi di RSUD Dr. Adjidarmo Lebak. Penelitian ini dilakukan di RSUD Dr. Adjidarmo Lebak dengan sampel 69 rekam medis pasien COVID-19 dengan komorbid hipertensi. Hasil penelitian menunjukkan SPO pengodean pasien COVID-19 di RSUD Dr. Adjidarmo Lebak menggunakan pedoman pengodean COVID-19 berdasarkan peraturan menteri kesehatan yaitu petunjuk teknis klaim penggantian biaya pelayanan pasien *corona virus disease 2019* Tahun 2021. Diperoleh hasil ketepatan kode diagnosis utama pasien COVID-19 100% tepat. Untuk hasil kode diagnosis sekunder hipertensi diperoleh hasil ketepatan yaitu 60 rekam medis (87%) dan hasil ketidaktepatan 9 rekam medis (13%). Berdasarkan hasil wawancara dan observasi terhadap petugas koding bahwa ketepatan pengodean pasien COVID-19 Berdasarkan 5 faktor (*man, money, machine, method dan material*) di dapatkan informasi bahwa ketidaktepatan terjadi karena kurang telitinya koder dalam melakukan pengodean, beban kerja koder, kurangnya SDM dengan latar pendidikan RMIK, kurangnya pelatihan koder, tidak tersedianya kamus kedokteran (kamus terminologi medis), tidak adanya daftar singkatan diagnosis, sering terjadinya eror pada SIMRS, serta belum adanya SPO rumah sakit khusus pengodean pasien COVID-19 sehingga menyebabkan proses pengodean tidak terstruktur dengan baik.

Kata kunci: COVID-19 , hipertensi, ketepatan, pengodean

**ABSTRACT**

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Title : *REVIEW OF THE ACCURACY OF THE DIAGNOSIS CODE IN CORONAVIRUS DISEASE 2019 (COVID 19) WITH COMORBID HYPERTENSION IN RSUD Dr. ADJIDARMO LEBAK 2021-2022*

Study Program : *D-III Medical Record and Health Information*

*At the end of 2019, precisely in December, the world was shocked by an incident that made many people nervous, known as the corona virus (COVID-19) which caused a major outbreak around the world. This research is a descriptive research with a quantitative approach. The purpose of this study was to determine the accuracy of assigning a diagnosis code to COVID-19 patients with comorbid hypertension at Dr. RSUD. Adjidarmo Lebak. This research was conducted in RSUD Dr. Adjidarmo Lebak with a sample of 69 medical records of COVID-19 patients with comorbid hypertension. The results showed that the SPO for coding COVID-19 patients at the Dr. Adjidarmo Lebak uses the COVID-19 coding guidelines based on the health minister's regulation, namely the technical instructions for claiming reimbursement of costs for services for patients with corona virus disease 2019 in 2021. The results obtained are that the accuracy of the main diagnosis code for COVID-19 patients is 100% correct. For the results of the secondary diagnosis code for hypertension, the accuracy results are 60 medical records (87%) and the inaccuracy results are 9 medical records (13%). Based on the results of interviews and observations of coding officers that the coding accuracy of COVID-19 patients Based on 5 factors (man, money, machine, method and material) information was obtained that the inaccuracy occurred due to the lack of accuracy of the coder in coding, the workload of the coder, the lack of human resources with RMIK's educational background, lack of coder training, unavailability of medical dictionaries (medical terminology dictionaries), unavailability of a list of diagnostic abbreviations, frequent errors on SIMRS, and the absence of hospital SPO specifically for coding COVID-19 patients, causing the coding process to be unstructured.*

*Key words : COVID-19, hypertension, accuracy, coding*