Review Of Incomplete Filling Of Informed Consent Forms In Surgical Poly In January 2022

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ABSTRACT

Based on data received by the Indonesian Health Consumer Empowerment Foundation (YPPKI), from October 1998 to November 2001 there were 46 cases of malpractice complaints. The malpractice cases include operating information which is considered not transparent and Informed Consent which is considered unclear. Informed Consent is the consent given by the patient or family based on an explanation regarding the medical actiontaken against the patient. The study was conducted at the NY RA Habibie Special Kidney Hospital (RSKG NY RA Habibie) in the Surgery Department with a sample of 44 InformedConsent forms. This research method uses descriptive qualitative research instruments withobservations, interviews, and literature studies. The formulation of the problem in this studyis how to complete the Informed Consent form for poly surgery at RSKG NY RA Habibie in January 2022 and what are the inhibiting factors for completing the Informed Consent form for poly surgery at RSKG RA Habibie in January 2022. The results obtained are 86.36% of the completeness of the informed consent at the hospital and the inhibiting factorswere the patient's family and doctor who did not complete the informed consent, and the SOP for filling out the informed consent was not optimal. The conclusion of this study is that filling out the Informed Consent at RSKG NY RA Habibie in the surgical section is notcomplete and the contributing factor is the patient's family and medical staff have not carriedout the SOP for filling out the Informed Consent optimally.

Keywords: Informed Consent, Incompleteness, Surgical Poly

Introduction

Based on PMK No. 4 Thaun 2018 states that with the needs of an increasingly advanced society for health care needs, hospitals must be able to provide good service to the community and must improve the quality of better services, besides that based on PMK No. 46 of 2015 states in the efforts to improve the quality of health services for the community, there needs to be support and cooperation from various parties and related factors. Medical records are documents that contain patient data from patient identity, examination, treatment, and other actions that have been given to patients. Incomplete filling of medical record files can affect the quality of medical care. health services in hospital

(Anggraeni & Herlina, 2022) in line with (Ordila et al., 2020) states that medical records or commonly referred to in the health sector are ICD (International Calssificaton Diseases) is a record of the history of patients receiving treatment in hospitals and clinics.

One way to improve the quality of health services is to complete the contents of the form in the medical record. Medical records are the most important unit because they can provide various information about patients needed for planning in taking actions to be taken to patients and decision making, so the information in medical records must be complete, precise and accurate. In providing quality health services and producing precise, accurate and complete information, it must be supported by the completeness of filling out the Informed Consent form. The phenomenon that occurs is based on data received by the Indonesian Health Consumer Empowerment Foundation (YPPKI), from October 1998 to November 2001 there were 46 cases of malpractice complaints. The malpractice cases include surgical information that is considered not transparent and Informed Consent which is considered unclear. Informed Consent according to (Dali & Kasim, 2019) is one part of the Medical Action. Medical action is a legal action that occurs due to a legal relationship between a doctor and a patient as a result of an engagement / agreement between a doctor and a patient. The legal relationship between doctors and patients is known as the Therapeutic Agreement. besides that, according to (Kristiawan, 2021) Informed consent is an agreement regarding the doctor's medical action against his patient. This consent can be in oral or written form. In essence, informed consent is a communication process between a doctor and a patient regarding an agreement on medical action that the doctor will take against the patient and according to (Puji et al., 2022) Informed consent is an agreement for medical action given by the patient or his closest family after receiving a complete explanation of the medical action to be taken against the patient.

Research Methods

Scope

The author has conducted research at the NY RA Habibie General Hospital Bandung, by reviewing the completeness of the filling of the surgical poly Informed Consent form. In

this study, the authors conducted research by reviewing and examining the contents of medical records, especially regarding the completeness of the Informed Consent form for surgical poly in January 2022. In this study, the study population was the Informed Consent form of the NY RA Habibie Hospital, while the sample of this study was devoted to the inpatient Informed Consentin January totaling 44 Informed Consent forms.

Data Collection

Observation

Observation is one of the data collection techniques that makes observations of human behavior, work processes by looking at, reviewing and recording every surgical poly inpatient medical record file document with a special *Informed Consent* at a high risk level. According to (Alizah et al., 2021) Observation is making direct observations, observations can be made with tests, questionnaires, pictures, and sound recordings.

This research was conducted by looking at, recording and reviewing each surgical poly inpatient medical record document and concluding what items were not filled in or incomplete.

Interview

Interviews, namely conducting questions and answers to surgical poly nurses who participate with doctors in the process of making and providing information on the purpose of *Informed Consent* for surgical poly, as well as medical records officers. According to (Damayanti et al., 2022) Interview is the process of extracting information between the interviewer and the respondent which aims to obtain the required data. The interview is also an interaction in the question and answer process between the interviewee and the interviewer.

This research was also conducted by interviewing surgical poly nurses, DPJP doctors, medical records staff, head of the medical records installation about the inhibiting factors regarding the filling of *Informed Consent.*

Literature Study

Literature study is one of the research methods carried out by looking at and studying reference books that have to do with variables, by reviewing the theory based on the data that has been obtained. This research also studies reference books that have to do with the variables studied.

Techniques and Analysis

The technique and data analysis used by the author in this research is qualitative analysis, while the method used is descriptive method, namely describing, recording data relating to facts, circumstances, variables, and

phenomena, and presenting according to the actual situation.

The steps the author took in obtaining data to support this research, making observations to the hospital then the author also conducted interviews by preparing a list of questions to the head of the medical records installation, poly nurses, and doctors (DPJP). After the author gets the data needed, the author conducts a literature study by reviewing existing data with the theory regarding the effect of incomplete *Informed Consent* forms .

Formulir	Percentage	Total
Complete	86,36 %	38
Incomplete	13,64 %	6

Results and Discussion

This research was conducted at the NY RA Habibie General Hospital in Bandung, which is one of the hospitals owned by the Bandung Mother Care Development Foundation, located on Jl. Tubagus Ismail No.46, Sekeloa, Kec. Coblong, Bandung City, West Java 40134. Ny RA Habibie General Hospital Bandung City is a type C hospital that has several service facilities including emergency, outpatient and inpatient installations.

This research was observed directly in the field on January 17, 2022 to February 17, 2022, using interview techniques and field observations of the Informed Consent form for the Surgery Poly. The data used in this study is the KLPCM Informed Consent recap data that has been carried out in the Medical Records Installation of the Reporting section, namely:

Table 1.
Percentage of Completeness of Informed Consent Form for Surgery Poly in January 2022

Source:
Results of KLPCM data review conducted by the author in January 2022.
January 2022

Based on table 1, it was found that the total number of Informed *Consent* forms for the Surgery Poly in January 2022, 44 *Informed Consent* forms, 38 complete forms with a percentage of 86.36%. *Informed Consent* includes: patient identity, patient family identity, type of action, type of information, and authentication. Wulandari and Sugiarsi (2014) If the contents of the *Informed Consent* are complete, there is a signature between the officer caring for the patient and the patient or guardian, accompanied by a clear name.

The completeness of the *Informed Consent* form for inpatients at NY RA Habibie Hospital in January 2022 was obtained at 86.36%. The minimum service standard for medical records in

hospitals is 100%. Therefore, the *Informed Consent* form, especially hospitalization, is still incomplete. The incompleteness of the *Informed Consent* form will reduce the quality of medical records and affect hospital accreditation, guarantee legal certainty for patients, medical record personnel, medical personnel, and hospitals.

Permenkes No. 290 of 2008 explains, the consent given by the patient or family who has received a complete and detailed explanation of the medical action being taken. Completeness of filling out the *Informed Consent* sheet, obtained at 86.36%. Then the completeness of the *Informed Consent* is not complete, because the medical record SPM must be 100%. Based on the results of interviews with poly nurses and the head of medical records, the cause of incompleteness:

1. The patient's family did not complete the Informed Consent .

The results of interviews with nurses in the surgical clinic that in general the patient did not put his/her name under the signature, time and date the patient would receive medical treatment.

2. The Doctor in Charge of Services (DPJP) did not fill out the Informed Consent.

The results of interviews with nurses in the surgical clinic, DPJP generally did not fill in the full name and signature concerned. According to the nurse, this was due to the doctor's limited time.

3. The SOP for filling out the Informed Consent is not optimal.

Based on the results of interviews with surgical poly nurses, that the hospital has made Standard Operating Procedures (SOP) regarding the filling of Informed Consent , but the facts in the field are still not achieved with the applicable SOP, this is evident that there is still incomplete filling of Informed Consent from the medical staff and from the patient.

Conclusion

Completeness of *Informed Consent* was obtained at 86.36%. This number is still not optimal, because it does not reach 100%. Based on interviews conducted by the author, the incompleteness of filling out the *Informed Consent* was due to: the patient's family did not fill out the Informed Consent completely, the DPJP did not fill out the *Informed Cons* ent , the SOP for filling out the *Informed Consent* in hospitals that had not been implemented optimally.

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