

Implementation of The Legal Obligation to Complete Inpatient Medical Records for Cancer Patients at Prof. Dr. I.G.N.G. Ngoerah Denpasar General Hospital

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ABSTRACT

The type of research uses the empirical legal research method quantitatively descriptive analytical, because it observes and examines reality in filling out the medical resume of inpatients at Prof. Dr.I.G.N.G.Ngoerah Denpasar Hospital. The approach used is factual, legislative, and conceptual approaches. This data comes from primary, secondary, and tertiary data along with primary, secondary, and tertiary legal materials. Data collection methods include observation, document studies, interviews and checklists. The results of this study show that: 1). Incompleteness in filling out inpatient electronic medical records at Prof. Dr. I. G. N. G. Ngoerah Denpasar Hospital has the potential to cause losses for patients and become the basis for a lawsuit. The lawsuit can be based on the non-conformity of electronic medical records with applicable legal standards and violations of patient rights, access to medical data by unauthorized parties, as well as non-compliance with regulations that can result in administrative and criminal sanctions for healthcare facilities, electronic medical resumes have legal implications because medical resumes are legal documents that can be used as evidence in medical dispute cases. Regulation of the Minister of Health Number 24 of 2022 regulates medical records, and incomplete filling can be considered a violation if there is negligence in filling it. The effectiveness of law enforcement in this case is influenced by the factors stated by Soerjono Soekanto, including clear regulations, competent law enforcement, adequate support facilities, public awareness, and a supportive work culture. 2). The factors causing the incompleteness of filling out inpatient electronic medical resumes are in the Gynecological Oncology Division (19%) and Surgical Oncology (18%). The factors causing the incompleteness of filling out an electronic medical resume are seen in terms of legal factors and non-legal factors.

Keywords: Implementation, Legal Obligations, Inpatient Medical Resumes, Cancer Patients

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INTRODUCTION

Hospitals are an important part of the social and health system that provides complete (comprehensive), curative, and preventive services to the community (Indonesia, 2022; Indradi, 2021; Indradi S, 2017; KODEKI, 2012; M.Friedman, 2023). Health service facilities are required to maintain electronic medical records (Atas & Indrayadi, 2023; Direktur, 2017; Ferdiansyah, 2011). Every hospital must have a medical record to improve services. According to the Regulation of the Minister of Health of the Republic of Indonesia Number 24 of 2022 concerning Medical Records, chapter 1 number 1, medical records are documents that contain data about the patient's identity, examination, treatment, actions, and other services that have been provided to patients (G. Hatta, 2017; H.R Otje Salman, 2010; Ida Sugiarti, 2023). A health worker specifically responsible for managing medical records is a Medical Recorder and

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Health Information specialist, a person who has completed Medical Records and Health Information education in accordance with the provisions of laws and regulations (Permenkes, 2022).

As an individual healthcare facility, hospitals strive to improve the quality and safety of patients. Evidence-based services are one of the ways that quality hospitals operate (Poluan, 2021). A complete medical record provides information that can be used for various purposes, such as serving as a basis for research or reference in the field of health, as evidence in legal cases, as a report on health services, and as a source for assessing the quality of services provided. Improving the quality and completeness of medical records is one way to improve the quality of healthcare facilities (Puspaningsih, 2022; Rofiqoh, 2023). The completeness of medical records can also affect how medical records are interconnected or integrated, from the time patients register to the time they go home (Z. Malikha, 2017).

Medical Records are defined as a collection of information written by healthcare professionals in their efforts to provide healthcare services to patients, including information about a patient's medical condition, current and previous treatments, and his or her history of illness (Agiwahyunto, 2024; Agustini & Ajeng, 2025; Ameliyah, 2018; Arifin, 2012). A medical resume is part of the medical record for an inpatient, where the medical resume is a summary of the entire length of the patient's treatment in the hospital. A medical resume contains information such as the indications for the patient's treatment, admission and final diagnosis, as well as the results of physical examinations, supporting examinations, and treatments. When filling out a resume, the doctor or dentist must write the date, name, and signature (Hatta, 2017).

In terms of *das sollen*, if this medical resume is not completed in the medical records, it will affect the quality of the hospital, while in terms of *das sein*, if the medical resume is clearly not completed by the Doctor in Charge of Services (DPJP) after the patient has finished receiving treatment at the health service, it will result in conflicts that will impact many areas, such as insurance management, claims with the Health Social Security Administration Agency (BPJS), and further management by patients within health services thereafter.

The legal aspect of this research is based on Law Number 17 of 2023 concerning Health, article 296 paragraphs 1 to 5, which requires medical personnel and health workers who provide individual health services to create medical records (U, 2023). These medical records must be created as soon as the patient receives health services and must be kept confidential by medical personnel, health workers, and health facility leaders. According to article 310 of Law Number 17 of 2023 concerning health, disputes must first be resolved through alternative dispute resolution outside of court if medical personnel or health workers are suspected of making mistakes in carrying out their duties, causing harm to patients. Article 304 regulates the enforcement of discipline for medical personnel and health workers in paragraphs 1 to 3. Under article 305, patients or their families can file complaints with the panel if they are harmed by the actions of medical personnel or health workers in providing health services (UU, 2023).

Medical records, as regulated in the Regulation of the Minister of Health of the Republic of Indonesia (PERMENKES) Number 24 of 2022, define the filling in of clinical information in article 13 paragraphs 1 to 4 as the recording and documenting of the results of examinations, treatments, actions, and other health services provided to patients. This must be

complete, clear, and conducted after the patient receives health services. The recording must include the name, time, and signature of the healthcare provider. Article 26 paragraph (11) specifies that the medical record provided when the patient returns home, as referred to in paragraphs (8) and (9), is in the form of a letter sent and received electronically using a computer network or other electronic communication device, including mobile phones, or in printed form. According to Article 30, only administrative officers and health workers providing health services, including medical recording officers and health information personnel, have the right to correct errors in filling in clinical information Permenkes. (2022).

Hospitals must have a complaint service unit, as stated in Article 44 of Government Regulation (PP) Number 47 of 2021 concerning the implementation of the hospital sector. This unit is responsible for gathering information, providing clarifications, and handling complaints from dissatisfied patients (PP, 2021).

Article 45, paragraph 1 of Law Number 1 of 2023 concerning information and transactions, states that every person who deliberately and without right broadcasts, performs, distributes, transmits, and/or makes accessible electronic information and/or electronic documents that have content that violates morality to the public, as referred to in Article 27 paragraph (1), shall be sentenced to a maximum of 6 (six) years in prison and/or a maximum fine of IDR 1,000,000,000 (one billion rupiah) (ITE, 2024).

Law Number 27 of 2022 concerning Personal Data Protection, Article 1, defines Personal Data Protection as an overall effort to protect personal data in the processing of personal data to guarantee the constitutional rights of the data subject. Article 39 (1) specifies that the Personal Data Controller is obliged to prevent personal data from being accessed unlawfully. Criminal Provisions, paragraph (2) state that any person who intentionally and unlawfully discloses personal data that does not belong to him, as outlined in Article 65 paragraph (2), shall be sentenced to a maximum of 4 (four) years in prison and/or a maximum fine of IDR 4,000,000,000 (four billion rupiah).

The Indonesian Medical Code of Ethics stipulates that every doctor must uphold the medical oath to keep secret everything known in the course of their profession and practice in accordance with the highest professional standards. This article also explains the requirements for obtaining a Certificate of Registration (STR) and a Practice License (SIP) (KODEKI., 2012).

The process of filling out a medical resume is complex and involves interconnected people, equipment, processes, and organizations. As a result, healthcare workers often fill out medical resumes in a way that is not up to standard, which can negatively impact both hospitals and patients (Sukawan, 2021). The problem arising from the incompleteness of filling out the first medical resume lies with the DPJP when completing the medical resume after the patient finishes receiving treatment at the health service. The Central General Hospital Prof. Dr. I. G. N. G. G. Ngoerah Denpasar has implemented electronic medical resumes, which means electronic-based medical resumes. However, the policy for electronic medical records and Standard Operating Procedures (SPO) for filling out the latest medical records are not yet in place.

A preliminary study conducted at the Integrated Cancer Installation over 3 months, from January to March 2024, found that 70% of the electronic medical resumes were completed, while 30% remained incomplete. Moreover, M. Malikha (2017) highlights that the

quality and completeness of medical records play a crucial role in improving healthcare services. However, this study primarily focuses on the general aspects of medical record quality and does not specifically address the issues arising from the incomplete filling of medical resumes in hospitals, particularly for cancer patients (Sari, 2020). Another study by S. Hatta (2017) emphasizes the importance of complete medical resumes in supporting accurate diagnosis and patient management. However, it does not identify the specific challenges and barriers healthcare providers face in completing medical resumes accurately and timely, following the required standards (Rusdian, 2024). This research fills that gap by analyzing the implementation of legal obligations in completing inpatient medical resumes for cancer patients at Prof. Dr. I. G. N. G. G. Ngoerah Denpasar Hospital, and its impact on insurance management, BPJS Health claims, and patient management. This study aims to provide recommendations to address the issues related to incomplete medical resumes, which have far-reaching effects on various aspects of healthcare services and hospital administration. The benefits of this research are to provide a better understanding of the importance of complete medical resume filling in improving hospital administrative efficiency and the quality of healthcare services.

Based on the description above, it is important to conduct further research related to the "Implementation of Legal Obligations to Fill Inpatient Medical Resumes in Cancer Patients at Prof. Dr. I. G. N. G. G. Ngoerah Denpasar Hospital" to prevent the incompleteness in filling out inpatient medical resumes, which will later have an impact on many aspects such as insurance management, BPJS Health claims, and further management by patients in health services thereafter.

RESEARCH METHOD

This type of research is used to review the function of a law or regulation in terms of its application in the community (Sugiyono., 2018). In this study, the researcher seeks to identify the factors causing the phenomenon of filling out patients' medical resumes, analyzing the correlation between the factors of legal awareness of medical personnel and their legal responsibilities in filling out patients' medical resumes. The approach used in this study is:

- 1) The factual approach, which is to observe and analyze the legal awareness of medical personnel toward their juridical responsibilities in filling out the patient's inpatient medical resume.
- 2) The statute approach, which is carried out by examining all laws and regulations related to the legal issues being handled.

In this study, the data collection technique includes:

- 1) *Observethus*

This study also made observations on the object of research. To understand the interview process and its results, observation is needed in this study. Observations will include the subjects' behavior as they fill out a medical resume in the hospital, with researchers observing as well as other things deemed relevant.

- 2) A study of documents on legal materials relevant to the research.
- 3) The interview explores the understanding of legal awareness and responsibility in filling out the patient's inpatient medical resume by medical personnel. The researcher recorded the opinions and responses of the informants to the questions asked by the interviewer and

continued with other questions that had been prepared or provided. The researcher then recorded the conversation using a mobile phone as a recorder or recording device to complete further documentation.

- 4) *Check List* is a list that contains the names of the subjects, several symptoms, and other identities of the observation object. Observers only need to provide a check mark on the list to indicate the presence of symptoms or characteristics of the observation target. The checklist can be in the form of a score used when observing the completeness and incompleteness of filling out an inpatient medical resume.

RESULTS AND DISCUSSION

Incompleteness in Filling Out Electronic Medical Resume for Inpatient Cancer Patients at Prof. Ngoerah Hospital Denpasar Can Be Legally Sued

An inpatient electronic medical resume can be the subject of a lawsuit if there is a violation or non-compliance with applicable laws and regulations. The latest regulation that regulates this is the Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records, which requires health service facilities to implement electronic medical records with strict data security and confidentiality standards. The percentage of Incompleteness and Incompleteness in Filling the Integrated Cancer Installation Electronic Medical Resume for January-March 2024 can be seen in the table below:

Table 1. Percentage of Incompleteness and Completeness of Electronic Medical Resume Filling Integrated Cancer Installation January-March 2024

No	Criteria	Total	Percentage
1	Completeness of Electronic Medical Resume	2597.40	70%
2	Incompleteness of Electronic Medical Resume	1036.10	30%

Source: RSUP Prof. Dr. I.G.N.G. Ngoerah Denpasar

Judging from table 1, it is explained that the Completeness of the Electronic Medical Resume amounts to 2597.40 with a percentage of 70%, then the Incompleteness of the Electronic Medical Resume amounts to 1036.10 with a percentage of 30%. So at the level of Incompleteness of the Electronic Medical Resume with a percentage of 30%, it shows several causes and shortcomings that occur that will affect errors that will cause legal lawsuits from the patient or the patient's family. The Filling of Incompleteness and Incompleteness of Inpatient Electronic Medical Resume at the Integrated Cancer Installation in January-March 2024 can be seen in the table below:

Table 2. Filling of Inpatient Electronic Medical Resume Incompleteness and Completeness in Integrated Cancer Installations January-March 2024

No	Item	L	N %	TL	N %
1	Exit Date	112	69,6	49	30,4
2	MRS Date	151	93,8	10	6,2
3	Main Complaints Upon Entry	129	80,1	32	19,9
4	Disease History	112	69,6	49	30,4
5	History of allergies	131	81,4	30	18,6

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No	Item	L	N %	TL	N %
6	Physical Examination	112	69,6	49	30,4
7	Other Checks	105	65,2	56	34,8
8	Diagnostic and Therapeutic Procedures	146	90,7	15	9,3
9	Diagnosis	88	54,7	73	45,3
10	ME	110	68,3	51	31,7
11	Operation	144	89,4	17	10,6
12	Radiology	103	64	58	36
13	Lab PK	105	65,2	56	34,8
14	Lab Microbiology	144	89,4	17	10,6
15	Therapy	116	72	45	28
16	Treating Physician	119	73,9	42	26,1
17	Consultation Results	97	60,2	64	39,8
18	Disease Development	106	65,8	55	34,2
19	Conditions When Leaving	119	73,9	42	26,1
20	Blood transfusion	100	62,1	61	37,9
21	Transfusion reaction	100	62,1	61	37,9
22	Albumin transfusion	107	66,5	54	33,5
23	How to Get Out	100	62,1	61	37,9
24	Prognosis	122	75,8	39	24,2
25	Basic Causes of Death	133	82,6	28	17,4
26	Remaining Problems	105	65,2	56	34,8
27	Instruksi	145	90,1	16	9,9
28	Education	105	65,2	56	34,8
29	Control Back	111	68,9	50	31,1
30	Wound Care	105	65,2	56	34,8
31	Activities and Rest	121	75,2	40	24,8
32	Diet	129	80,1	32	19,9
33	Transportation	121	75,2	40	24,8
34	Companion	105	65,2	56	34,8
35	Worth Traveling With	126	78,3	35	21,7
36	Miscellaneous	105	65,2	56	34,8
37	TTD DPJP	100	62,1	61	37,9

Source : RSUP Prof.Dr.I.G.N.G.Ngoerah Denpasar

Table 2 Filling in the completeness and incompleteness of the inpatient electronic medical resume at the Integrated Cancer Installation in January-March 2024 shows that the filling of the electronic medical resume is considered complete and incomplete judging from several criteria that are filled in completely and incompletely. The results of the study show:

Completeness Level of Electronic Medical Resume Filling

Of the 161 inpatient electronic medical resumes analyzed, 70% were filled out completely according to the standards set by the Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records. The most frequently filled elements include MRS Date (93.8%), Diagnostic and Therapeutic Procedures (90.7%), Instructions (90.1%).

Incompleteness of Filling out Medical Resumes As many as 30% of medical resumes are found to be incomplete, with elements that are often missed such as Diagnosis (73%),

Consultation Results (64%), Blood Transfusion (61%). Factors causing incompleteness include a lack of understanding of medical personnel about the importance of filling out medical records as legal documents, lack of internal supervision, and obstacles in the Electronic Medical Resume System.

Factors Causing Incompleteness in Filling Out Electronic Medical Resumes for Cancer Patients at Prof. Ngoerah Denpasar Hospital

This study involved interviews with 7 medical personnel (4 doctors, 3 nurses) at the Integrated Cancer Installation at Prof. Ngoerah Hospital using an electronic medical record system. The interview aims to explore the factors that cause incomplete inpatient electronic medical resume filling. The results obtained are as follows:

Factors Causing Incompleteness of Electronic Medical Resume:

1. Lack of Understanding of Legal Obligations

Most respondents (58%) stated that they understand the importance of filling out medical records, but are not fully aware of the legal implications.

One respondent stated:

"We were indeed asked to complete the medical records, but were not given the understanding that this is a legal document that could affect the hospital legally."

Lack of Internal Supervision

Three respondents mentioned that it was not done consistently. As a result, the same mistakes are often repeated.

One of the nurses said:

"No one checks regularly. We are only told if there is a big problem."

Obstacles of Electronic Medical Resume System

One of the respondents mentioned that there were obstacles in making the patient's resume home.

One respondent stated:

"Sometimes it loads a lot . The same if you want to edit again, you have to change the date of the poly control, if it is the same as the previous resume, it cannot be saved".

Judging from the following table, it can be seen the completeness and incompleteness according to each Division as follows:

Table 3. Number of Incompleteness and Completeness per Division in an Integrated Cancer Facility

Division	L	%	TL	%	Grand Total
Pediatric - Hematology Oncology	40	46%	12	16%	52
Digestive Surgery	2	2%	9	12%	11
Oncology Surgery	10	11%	18	24%	28
Urology Surgery	2	2%	4	5%	6
Oncology - Radiology	5	6%	0	0%	5
Gynecological Oncology	10	11%	19	26%	29
Pulmonary	4	5%	2	3%	6
Internal Medicine - Gastroenterology-Hepatology	1	1%	0	0%	1
Internal Medicine - Hematology-Oncology	3	3%	7	9%	10
ENT-Head and Neck Oncology Surgery	10	11%	3	4%	13

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Division	L	%	TL	%	Grand Total
Total	87	100%	74	100%	161

Source: RSUP Prof.Dr.I.G.N.G.Ngoerah Denpasar

Table 3 The number of inpatient electronic medical resume completeness and incompleteness per Division in the Integrated Cancer Facility in January-March 2024 shows that the filling of electronic medical resumes is considered complete and incomplete. The results of the study showed:

Completeness Level of Electronic Medical Resume Filling

Of the 161 inpatient electronic medical resumes analyzed, the Division that filled in completely in Pediatric-Hematologic Oncology (40%).

Incompleteness in Filling Medical Resumes, in the divisions of Gynecological Oncology (19%) and Surgical Oncology (18%).

Analysis of Incompleteness in Filling in Electronic Medical Resume Inpatients in Cancer Patients at Prof. Ngoerah Hospital Denpasar Can Be Legally Sued

The study in January-March 2024 at the Integrated Cancer Room of Prof. Ngoerah Hospital Denpasar analyzed 3633 inpatient Electronic Medical Resumes (RMEs). The results showed a completeness level of 70% (2597.40 RME) and a 30% incompleteness (1036.10 RME). Of the 161 RMEs sampled, 70% were completely filled in accordance with the Minister of Health Regulation Number 24 of 2022 concerning Medical Records. The most complete elements include MRS Date (93.8%), Diagnostic and Therapeutic Procedures (90.7%), and Instruction (90.1%). In contrast, 30% of RMEs were incomplete, especially in Diagnosis (73%), Consultation Outcomes (64%), and Blood Transfusions (61%). These incompleteness are caused by a lack of understanding of medical personnel, lack of internal supervision, and obstacles to the RME system. An incomplete RME has legal implications, because RME is a legal document that can be the basis for a lawsuit, especially referring to the Minister of Health Regulation Number 24 of 2022. The incompleteness of RME in cancer patients at Prof. Ngoerah Hospital Denpasar has the potential to harm patients and lead to legal lawsuits against hospitals and related medical personnel.

According to the theory of legal effectiveness put forward by Soerjono Soekanto, there are five factors that affect the effectiveness of law enforcement:

- a. Legal Factors Themselves: Regulation of the Minister of Health Number 24 of 2022 has clearly regulated the obligation to fill in medical records. However, the incompleteness found shows the lack of enforcement and socialization of the regulation.
- b. Law Enforcement Factors: Medical personnel as internal law enforcers often lack a clear understanding of the legal implications of incomplete medical record filling.
- c. Facilities and Facilities Factors: The success of implementation depends on the availability of technological infrastructure such as computers, internet networks, and software to fill out electronic medical resumes.
- d. Community Factors: Patients and families are beginning to realize their right to complete medical information, so incompleteness can reduce trust in health services.
- e. Cultural Factors: The culture of manual recording is still strong, and to switch to electronic systems, changes in work culture such as familiarizing yourself with the use

of technology and complying with the digital recording standards set by regulations are required.

The application of the Legal Effectiveness Theory based on the above analysis, the effectiveness of law enforcement related to filling out medical resumes is influenced by the five factors stated by Soerjono Soekanto. To improve compliance and reduce legal risks, it is necessary to:

1. **Socialization and Training:** Increase the understanding of medical personnel about the importance of filling out complete medical records and their legal implications.
2. **Electronic System Development:** Updating the electronic medical record system with automatic reminder and validation features to ensure data completeness.
3. **Supervision and Evaluation:** Conducting routine audits of filling out medical records and providing sanctions or awards based on the level of compliance.

There are Legal Implications of Incompleteness on an electronic Medical Resume where a medical resume is a legal document that can be used as evidence in the case of medical disputes. Incomplete filling can be considered a violation of medical service standards regulated in the Regulation of the Minister of Health Number 24 of 2022. According to Article 44 letter q of Government Regulation Number 47 of 2021 concerning the implementation of the hospital sector where suing and/or suing the hospital if the hospital is suspected of providing services that are not in accordance with the standards either civil or criminal. Therefore, the incompleteness of a medical resume can be the basis for a lawsuit by the patient or family.

Potential Violations and Their Implications that Will Occur:

1. **Violation of Privacy and Data Confidentiality:** If patient data in an electronic medical resume is accessed or disseminated without permission, this violates the patient's privacy rights as stipulated in the Regulation of the Minister of Health Number 24 of 2022. Patients can file a civil lawsuit on the basis of unlawful acts in accordance with Article 1365 of the Civil Code (KUHPer).
2. **Incompleteness or Inaccuracy of Data:** Incomplete or inaccurate medical resumes can be detrimental to patients and could potentially be the basis for a lawsuit. Regulation of the Minister of Health Number 24 of 2022 emphasizes the importance of the accuracy and completeness of electronic medical record data.
3. **Denial of Patient Access to Medical Records:** Patients have the right to access the contents of their medical records. The refusal of health facilities to provide such access can be considered a violation of the patient's rights and is the basis for a lawsuit. Patients have a legally protected right to access the contents of their medical records, both physical and electronic. If a healthcare facility refuses to provide this access without a valid reason, such actions may be considered a violation of the patient's rights, as provided for in the law. This refusal can be the basis for a lawsuit filed by the patient or the patient's family.

Implications of Negligence in Filling Out an Electronic Medical Resume:

1. **For Medical Personnel:** Risk of losing practice licenses due to administrative violations, and the occurrence of lawsuits if negligence causes losses to patients.
2. **For Health Facilities:** Administrative sanctions given by hospitals or health facilities, such as reprimands, suspension of practice licenses, reduction of remuneration, or other sanctions such as social sanctions

Factors Causing Incompleteness in Filling Out Electronic Medical Resumes for Cancer Patients at Prof. Ngoerah Denpasar Hospital

The analysis of the completeness of the inpatient RME per division at the Integrated Cancer Installation of Prof. Ngoerah Hospital Denpasar (January-March 2024) based on 161 RMEs showed the highest level of completeness in the Paedia-Hemato-Hemato Oncology division (40%). The highest incompleteness was found in the Gynaecological Oncology (19%) and Surgical Oncology (18%) divisions. Interviews with 7 medical personnel (4 doctors, 3 nurses) revealed three factors causing RME incompleteness:

1. **Lack of Understanding of Legal Obligations:** 58% of respondents understand the importance of RME, but are less aware of its legal implications. One respondent stated, "We were asked to complete medical records, but were not given the understanding that this is a legal document that could legally affect the hospital."
2. **Lack of Internal Supervision:** Three respondents mentioned a lack of regular supervision, so mistakes often recur. A nurse stated, "No one checks regularly. We are only told if there is a big problem."
3. **RME System Barriers:** Respondents reported obstacles in the creation of the discharge patient's RMEs, such as loading issues and difficulties editing poly control dates. One respondent explained, "Sometimes it loads a lot. The same if you want to edit again, you have to change the date of the poly control, if it is the same as the previous resume, it cannot be saved".

According to Soerjono Soekanto's theory of legal effectiveness, there are five factors that affect the effectiveness of law enforcement. The following is an analysis of the interview results:

1. **Legal Factors Themselves**

The Minister of Health Regulation Number 24 of 2022 has provided clear guidance on the obligation to fill out medical records, including elements that must be recorded. However, medical personnel's understanding of the legal aspects is still low, as expressed by 58% of respondents.
2. **Law Enforcement Factors**

Doctors and nurses as internal law enforcement tend to prioritize medical procedures over administration. This shows the need for specialized training that emphasizes the importance of a medical resume as a legal document.
3. **Facilities and Facilities Factors**

The availability of Technology Infrastructure such as computers, internet networks, and specialized software for electronic medical resume filling greatly determines the success of implementation.
4. **Community Factors**

Patients and families are beginning to realize their right to complete medical information, which can increase the potential for litigation if the data is not filled in accurately.
5. **Cultural Factors**

The culture of manual recording is still strong. The transition to an electronic system requires a change in work culture, such as familiarizing yourself with the use of technology and the accuracy of digital recording according to the standards set in the regulations.

Incompleteness in filling out an electronic medical resume can be caused by two factors, namely legal factors and non-legal factors, namely:

Legal Factors

1. Compliance with the Regulation contained in the Regulation of the Minister of Health Number 24 of 2022 concerning Medical Records stipulates that electronic medical records must be made according to certain standards. Incompleteness of filling can be considered an administrative and legal violation. Law Number 17 of 2023 concerning Health states that electronic medical records are legal documents that become evidence in medical cases. If the data is incomplete, it can lead to legal implications such as malpractice lawsuits.
2. Professional Responsibility where the incompleteness of filling out medical records violates the Indonesian Medical Code of Ethics (Kodeki) and may affect the licensing of medical personnel. Doctors or medical personnel can be held criminally or civilly liable if incomplete medical records contribute to patient losses. Administrative sanctions given by hospitals, such as reprimands, suspension of practice permits, reduction of remuneration, or other sanctions such as social sanctions.
3. Legal Risks of Health Facilities where health facilities may be subject to administrative sanctions in accordance with Article 46 of the 2023 Health Law, such as revocation of operational permits, if proven negligent in ensuring the filling of electronic medical records, especially on complete electronic medical resumes.

Non-Legal Factors

1. Human resource factors where there is a lack of training on the importance of filling out electronic medical records. Many medical personnel do not understand the importance of filling in complete data for clinical and legal purposes and the high workload often causes medical personnel to not have time or forget to fill out medical records with details.
2. Technology and Infrastructure factors where there are technical problems, such as network or software problems, are also the main obstacles.
3. Awareness and Work Culture where the low documentation culture in some health facilities causes the filling of medical resumes to be often ignored. Because many medical or health personnel do not understand that filling out medical records, including electronic medical resumes, is not only an administrative task, but also part of a professional responsibility that has an impact on the quality of service, legality and patient safety.
4. Impact on Health Services where incomplete medical records can hinder the process of proper diagnosis and treatment, then inaccurate data can reduce the quality of service and patient trust in health facilities.

CONCLUSION

Based on the study titled "Implementation of Legal Obligations in Filling Inpatient Medical Resumes at Prof. Dr. I. G. N. G. G. Ngoerah Denpasar Hospital," it can be concluded that the incompleteness in filling out inpatient electronic medical resumes, particularly for cancer patients, poses significant legal risks. This can lead to legal actions against the hospital

and medical staff, as medical resumes are legal documents that can be used as evidence in case of medical disputes (Notoatmodjo., 2012). The Regulation of the Minister of Health Number 24 of 2022 governs medical records, and failure to complete them may be considered a violation due to negligence. The effectiveness of law enforcement is influenced by factors such as clear regulations, competent law enforcement, adequate support facilities, public awareness, and a supportive work culture. Furthermore, the causes of incomplete medical records can be categorized into legal and non-legal factors. Legal factors include compliance with regulations, professional responsibility, and legal risks to health facilities, while non-legal factors encompass human resources issues, insufficient training, high workloads, infrastructure challenges, and a low documentation culture. Incomplete medical records can affect healthcare quality, reduce patient trust, and lead to various sanctions for medical personnel and the facility.

Future research should explore the impact of implementing electronic medical records (EMR) systems on reducing errors in medical record-keeping and improving healthcare service quality. Studies could focus on identifying best practices for training healthcare professionals to ensure the completeness of medical records and how to optimize hospital infrastructure to support effective documentation. Additionally, further investigation into how different hospitals address legal and non-legal barriers in medical record-keeping could provide a comprehensive understanding of the challenges and solutions in the healthcare industry.

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