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**ANALISIS KEAKURATAN KODE DIAGNOSIS *EXTERNAL CAUSE*
PASIEI IGD DI RSUD PANTURA M.A. SENTOT PATROL
KABUPATEN INDRAMAYU**

Xvii+ 42 Halaman + 3 Tabel + 1 Bagan + 12 Lampiran

ABSTRAK

Instalasi Gawat Darurat (IGD) merupakan unit pelayanan pertama yang menangani pasien dengan kondisi darurat akibat kecelakaan, kekerasan, atau kejadian tak terduga lainnya. Dalam proses pelayanan ini, pencatatan kode diagnosis *external cause* memiliki peran penting dalam mendukung validitas data rekam medis, proses klaim pembiayaan, serta statistik rumah sakit. Namun, ketidakakuratan pengisian kode *external cause* masih sering ditemukan dan berdampak pada kualitas informasi yang disajikan.

Penelitian ini bertujuan untuk mengetahui tingkat keakuratan kode diagnosis *external cause* serta mengidentifikasi faktor penyebab ketidakakuratan pada pasien IGD di RSUD Pantura M.A. Sentot Patrol Kabupaten Indramayu. Metode yang digunakan adalah deskriptif kuantitatif dengan pendekatan total sampling terhadap 80 dokumen rekam medis pasien IGD yang memiliki diagnosis *external cause* pada periode Oktober–Desember 2024. Teknik pengumpulan data menggunakan observasi dan checklist berdasarkan pedoman ICD-10.

Hasil penelitian menunjukkan bahwa dari 80 dokumen, hanya 8 dokumen (10%) yang memiliki kode *external cause* yang akurat, sedangkan 72 dokumen (90%) tidak akurat. Faktor utama ketidakakuratan adalah tidak lengkapnya pengisian lembar Anamnesa Reka Kejadian (ARK) dan belum adanya standar operasional prosedur (SOP) yang mendukung pengkodean *external cause*.

Berdasarkan hasil penelitian disimpulkan bahwa keakuratan kode diagnosa *external cause* di RSUD Pantura M.A Sentot Patrol pada triwulan ke 4 tahun 2024 yaitu 10% kode yang akurat dan 90% kode yang tidak akurat. Disarankan dilakukan edukasi pengisian lembar anamnesa reka kejadian dan pelatihan pengkodean *external cause*.

Kata kunci : Keakuratan, kode diagnosa *external cause*, IGD
Daftar Pustaka: 32 (2008-2024)

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**ANALYSIS OF THE ACCURACY OF EXTERNAL CAUSE DIAGNOSIS
CODES FOR ER PATIENTS AT RSUD PANTURA M.A. SENTOT PATROL
INDRAMAYU REGENCY**

Xvii+ 42 Pages + 3 Tables + 1 Chart + 12 Attachments

ABSTRACT

The Emergency Department (ED) is the first service unit to treat patients with emergency conditions due to accidents, violence, or other unexpected events. In this service process, recording the external cause diagnosis code has an important role in supporting the validity of medical record data, the financial claims process, and hospital statistics. However, inaccuracies in external cause code filling are still often found and have an impact on the quality of information presented.

This study aims to determine the accuracy of the external cause diagnosis code and identify the factors that cause inaccuracies in emergency room patients at RSUD Pantura M.A. Sentot Patrol, Indramayu Regency. The method used was descriptive quantitative with a total sampling approach to 80 medical record documents of emergency room patients who had a diagnosis of external cause in the period October-December 2024. Data collection techniques using observation and checklists based on ICD-10 guidelines.

The results showed that out of 80 documents, only 8 documents (10%) had accurate external cause codes, while 72 documents (90%) were inaccurate. The main factors of inaccuracy were incomplete completion of the Anamnesa Reka Kejadian (ARK) sheet and the absence of standard operating procedures (SOPs) that support external cause coding.

Based on the results of the study, it was concluded that the accuracy of the external cause diagnosis code at Pantura M.A Sentot Patrol Hospital in the 4th quarter of 2024 was 10% accurate codes and 90% inaccurate codes. It is recommended that education on filling out anamnesis sheets and training on external cause coding be conducted.

*Keywords : Accuracy, external cause diagnosis code, emergency department
Bibliography : 32 (2008-2024)*