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| Jenis FormulirRekam Medis | Identifikasi | Keterangan | Pencatatan | Keterangan | Pelaporan | Keterangan | Autentifikasi | Keterangan | Ket.akhir |
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Keterangan :

1. Nama 6. Coretan tebal 11. Laporan Anestesi(apabila tindakan) 16. Tanggal , Jam
2. No. Rekam Medis 7. Tip-X / Hapusan 12. Laporan operasi (apabila tindakan)
3. Umur/TTL 8. Tulisan Tidak Terbaca 13. Resume Medis
4. Alamat 9. RM 1 14. TTD PPK
5. Jenis Kelamin 10. Adanya inform consent (apabila tindakan) 15. Nama Terang PPK

**NB : beri tanda (√) apabila ada, tanda (-) apabila tidak harus ada, tanda (x) apabila tidak sesuai**

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| NO RM | Review kelengkapan dan kekonsistenan diagnosa | Review kekonsistenan pencatatan diagnosa | Review pencatatan hal-hal yang dilakukan saat perawatan dan pengobatan | Review adanya informed concent yang seharusnya ada | Review cara/ praktik pencatatan | Review hal-hal yang berpotensi menyebabkan ganti rugi | Keterangan akhir |
|  | K | TK | KETERANGAN | K | TK | KETERANGAN | K | TK | KETERANGAN | K | TK | KETERANGAN | K | TK | KETERANGAN | K | TK | KETERANGAN | K | TK |
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Keterangan :

K : Konsisten

TK : Tidak Konsisten