

ABSTRAK

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ANALISIS KESALAHAN PENGobatan DI TAHAP PENGKAJIAN RESEP ANTARA RESEP MANUAL DIBANDINGKAN DENGAN RESEP ELEKTRONIK DI RUMAH SAKIT SWASTA X TANGERANG

Karya Tulis Ilmiah, Fakultas Ilmu Kesehatan (2025)

(XVI + 46 halaman; 8 tabel; 6 gambar; 6 lampiran)

Kesalahan pengobatan merupakan masalah serius yang berdampak pada kualitas hidup, masa rawat inap, dan risiko kematian. Kesalahan ini lazim ditemukan pada tahap pengkajian resep dan dapat dicegah melalui penerapan sistem peresepan elektronik, yang lebih efektif dibanding resep manual dalam mengurangi risiko akibat tulisan tidak terbaca atau informasi tidak lengkap. Penelitian ini dilakukan secara prospektif pada Februari–Maret 2025 di Rumah Sakit Swasta X Tangerang untuk membandingkan kesalahan pengobatan pada tahap pengkajian resep manual dan resep elektronik, dengan fokus pada kesesuaian resep. Sebanyak 560 resep dianalisis, terdiri dari 280 resep manual dan 280 resep elektronik. Hasil menunjukkan bahwa kesalahan peresepan lebih tinggi pada resep manual (47 kasus) dibanding resep elektronik (41 kasus). Kesalahan penyalinan ditemukan pada 18 resep manual dan 13 resep elektronik. Jenis kesalahan meliputi salah kekuatan sediaan, dosis, jumlah obat, aturan pakai, tulisan tidak terbaca, serta kesalahan administrasi. Penerapan resep elektronik terbukti menurunkan sejumlah kesalahan, terutama akibat tulisan tidak terbaca dan kekeliruan kekuatan sediaan. Namun, sistem ini belum sepenuhnya menghilangkan potensi kesalahan akibat input manual, seperti pemilihan menu *drop-down*, *template default* tidak sesuai kondisi pasien. Oleh karena itu, peran tenaga kefarmasian dalam validasi resep serta monitoring dan evaluasi berkelanjutan tetap diperlukan guna meminimalkan kesalahan pengobatan dan mendukung keselamatan pasien.

Kata Kunci: Resep, Kesalahan pengobatan, Pengkajian Resep, Rawat Inap

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ABSTRACT

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ANALYSIS OF MEDICATION ERRORS IN THE PRESCRIPTION REVIEW STAGE: A COMPARATIVE STUDY BETWEEN MANUAL AND ELECTRONIC PRESCRIPTIONS AT PRIVATE HOSPITAL X, TANGERANG.

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Medication errors are a serious issue that impact quality of life, length of hospitalization, and risk of mortality. These errors are commonly found during the prescription review stage and can be prevented through the implementation of an electronic prescribing system, which are more effective than manual prescriptions in reducing risks caused by illegible handwriting or incomplete information. This study was conducted prospectively in February–March 2025 at Private Hospital X in Tangerang to compare medication errors in the prescription review stage between manual and electronic prescriptions, focusing on prescription accuracy. A total of 560 prescriptions were analyzed, consisting of 280 manual and 280 electronic prescriptions. The results showed a higher number of prescribing errors in manual prescriptions (47 cases) compared to electronic prescriptions (41 cases). Transcribing errors were found in 18 manual prescriptions and 13 electronic ones. Error types included incorrect drug strength, dose, quantity, administration directions, illegible writing, and administrative errors. The use of electronic prescriptions was proven to reduce certain errors, especially those due to unreadable handwriting and incorrect drug strength. However, the system does not fully eliminate the risk of errors due to manual input, such as improper selection from drop-down menus or default templates that do not match the patient's condition. Thus, the role of pharmacists in prescription validation, as well as continuous monitoring and evaluation, remains essential to minimize medication errors and ensure patient safety.

Keywords: Prescription, Medication Error, Appropriateness Review, Inpatient

References: 13 (2016 – 2024)