

# LAMPIRAN

## Lampiran 1 Surat Ijin Survey Pendahuluan



**KEMENTERIAN KESEHATAN RI**  
**BADAN PENGEMBANGAN DAN PEMBERDAYAAN SUMBER DAYA MANUSIA KESEHATAN**  
**POLITEKNIK KESEHATAN KEMENKES MALANG**

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Nomor : PP.08.02/6.0/ 1333 /2018  
Lampiran : -  
Hal : Surat Ijin Survey Pendahuluan

Malang, September 2018

Kepada

Yth. Direktur RS. Hasta Husada Kepanjen

Di

Kabupaten Malang

Sehubungan dengan penyusunan Laporan Tugas Akhir Mahasiswa Semester V Prodi D-III Perkam Medis dan Informasi Kesehatan Poltekkes Kemenkes Malang TA. 2018/2019, maka bersama ini kami harapkan Bapak/Ibu berkenan untuk memberikan ijin kepada mahasiswa atas nama :

Nama : Regita Mufti Aimmatul Khasanah

NIM : 1604000018

Untuk melakukan survey pendahuluan di institusi yang Bapak/Ibu pimpin dengan Topik / Judul: *Pengembangan Sistem Informasi Kodefikasi Berdasarkan ICD 9 CM Pasien Bedah Umum Berbasis Android di RS. Hasta Husada Kepanjen.*

Pada : September 2018 – Januari 2019.

Adapun data yang akan diambil adalah sebagai berikut :

1. SOP kodefikasi di RS. Hasta Husada;
2. Dokumen rekam medis terkait kasus pasien bedah;
3. Waktu pelaksanaan koding setiap berkas.

Demikian surat ini kami buat. Atas perhatian dan kerjasamanya disampaikan terima kasih.

Ketua  
Jurusan Kesehatan Terapan

Dinayah Kholidah, SST, SGz, MPH  
NIP. 197509211997032001

Tembusan Disampaikan Kepada :

1. Ka. Rekam Medis RS. Hasta Husada
2. Arsip

## Lampiran 2 Surat Balasan Ijin Survey Pendahuluan



### RUMAH SAKIT KHUSUS BEDAH " HASTA HUSADA "

Jl. Bromo 98 – 100 Telp. (0341) 399499 Fax. (0341) 399699

E-mail : [husada.hasta@yahoo.com](mailto:husada.hasta@yahoo.com)

Kepanjen – Malang 65163

Nomor : 801.01/ 117 /100.09/2018  
Sifat : Biasa  
Lampiran : -  
Perihal : Ijin Survey Pendahuluan

Kepanjen, 18 September 2018  
Kepada  
Yth. Ketua Jurusan Kesehatan Terapan  
Poltekkes Kemenkes Malang  
Jl. Besar Ijen No. 77 C  
Di  
**MALANG**

Menunjuk surat dari Ketua Jurusan Kesehatan Terapan Poltekkes Kemenkes Malang tanggal 15 September 2018 Nomor : PP.08.02/6.0/1333/2018 Perihal Surat Ijin Survey Pendahuluan, dengan ini diberitahukan bahwa pada prinsipnya kami menyetujui dan mengijinkan Mahasiswa Prodi D-III Perekam Medis dan Informasi Kesehatan Poltekkes Kemeneks Malang dalam rangka melakukan kegiatan survey pendahuluan di Rumah Sakit Khusus Bedah Hasta Husada Kepanjen atas

Nama : **REGITA MUFTI AIMMATUL KHASANAH**  
NIM : 1604000018  
Program Studi : D-III Perekam Medis dan Informasi Kesehatan  
Judul Penelitian : Pengembangan Sistem Informasi Kodifikasi Berdasarkan ICD 9 CM Pasien Bedah Umum Berbasis Android di Rumah Sakit Khusus Bedah Hasta Husada Kepanjen  
Tempat : Sub. Bag. Rekam Medik & IT  
Penelitian : Rumah Sakit Khusus Bedah Hasta Husada

Adapun biaya serta hal yang berkaitan dengan kegiatan survey pendahuluan dimaksud menjadi tanggung jawab pihak Peneliti. Selanjutnya sebelum pelaksanaan survey pendahuluan agar berkoordinasi terlebih dahulu dengan Bagian Diklat dan Pengendali Mutu Rumah Sakit Khusus Bedah Hasta Husada Kepanjen.

Demikian atas perhatian dan kerjasamanya disampaikan terima kasih.

DIREKTUR  
RUMAH SAKIT KHUSUS BEDAH HASTA HUSADA



TEMBUSAN disampaikan kepada

Yth. Sdr. :

1. Direktur sebagai Laporan
2. Ka. Bag. Administrasi & Umum
3. Ka. Sie. Pelayanan Medik
4. Ka. Sub. Bag. Rekam Medik & IT

### Lampiran 3 Lembar Persetujuan Menjadi Responden Penelitian

**LEMBAR PERSETUJUAN MENJADI RESPONDEN PADA PENELITIAN  
"IMPLEMENTASI APLIKASI KODEFIKASI TINDAKAN  
BERDASARKAN ICD 9CM PASIEN BEDAH ORTOPEDI BERBASIS  
ANDROID TERHADAP KECEPATAN DAN KETEPATAN KODEFIKASI  
DI RUMAH SAKIT KHUSUS BEDAH HASTA HUSADA"**

Saya yang bertanda tangan di bawah ini:

Nama (inisial) : B  
Umur : 27  
Pekerjaan : EVAPOR  
Alamat : Kepanjen

Setelah membaca dan mendengarkan penjelasan penelitian ini dan setelah mendapatkan jawaban dari pertanyaan saya tentang manfaat penelitian ini, maka saya memahami bahwa ketersediaan saya menjadi responden pada penelitian ini sangat bermanfaat bagi rumah sakit khususnya petugas unit rekam medis bagian koding dalam melaksanakan kodefikasi. Saya mengerti bahwa penelitian ini menjunjung tinggi hak-hak saya sebagai responden. Saya berhak menghentikan berpartisipasi dalam penelitian ini jika suatu saat saya merasa keberatan.

Dengan menandatangani surat persetujuan ini, berarti saya telah menyatakan untuk menjadi responden dalam penelitian ini.

Peneliti  
  
Regita Mufli Aimmatul Khasanah  
NIM. 1604000018

Kepanjen, 22 September 2018  
Responden

(  )

**Lampiran 4 Ruang Lingkup Bedah Ortopedi Berdasarkan  
“INTERNATIONAL CLASSIFICATION OF DISEASES 9th REVISION  
CLINICAL MODIFICATION 2010 (Operation on The Musculoskeletal  
System)”**

<i>OPERATIONS THE MUSCULOSKELETAL SYSTEM (76-84.99)</i>		
No.	ICD-9CM	Jenis Tindakan Musculoskeletal System
1.	76	<i>Operations on facial bones and joints</i>
2.	76.0	<i>Incision of facial bone without division</i>
3.	76.01	<i>Sequestrectomy of facial bone</i> <i>Removal of necrotic bone chip from facial bone</i>
4.	76.09	<i>Other incision of facial bone</i> <i>Reopening of osteotomy site of facial bone</i>
5.	76.1	<i>Diagnostic procedures on facial bones and joints</i>
6.	76.11	<i>Biopsy of facial bone</i>
7.	76.19	<i>Other diagnostic procedures on facial bones and joints</i>
8.	76.2	<i>Local excision or destruction of lesion of facial bone</i>
9.	76.3	<i>Partial ostectomy of facial bone</i>
10.	76.31	<i>Partial mandibulectomy</i> <i>Hemimandibulectomy</i>
11.	76.39	<i>Partial ostectomy of other facial bone</i> <i>Hemimaxillectomy (with bone graft or prosthesis)</i>
12.	76.4	<i>Excision and reconstruction of facial bones</i>
13.	76.41	<i>Total mandibulectomy with synchronous reconstruction</i>
14.	76.42	<i>Other total mandibulectomy</i>
15.	76.43	<i>Other reconstruction of mandible</i>
16.	76.44	<i>Total ostectomy of other facial bone with synchronous</i>

		<i>reconstruction</i>
17.	76.45	<i>Other total ostectomy of other facial bone</i>
18.	76.46	<i>Other reconstruction of other facial bone</i>
19.	76.5	<i>Temporomandibular arthroplasty</i>
20.	76.6	<i>Other facial bone repair and orthognathic surgery</i> <i>Code also any synchronous:</i> <i>bone graft (76.91)</i> <i>synthetic implant (76.92)</i>
21.	76.61	<i>Closed osteoplasty [osteotomy] of mandibular ramus</i> <i>Gigli saw osteotomy</i>
22.	76.62	<i>Open osteoplasty [osteotomy] of mandibular ramus</i>
23.	76.63	<i>Osteoplasty [osteotomy] of body of mandible</i>
24.	76.64	<i>Other orthognathic surgery on mandible</i> <i>Mandibular osteoplasty NOS Segmental or subapical osteotomy</i>
25.	76.65	<i>Segmental osteoplasty [osteotomy] of maxilla</i> <i>Maxillary osteoplasty NOS</i>
26.	76.66	<i>Total osteoplasty [osteotomy] of maxilla</i>
27.	76.67	<i>Reduction genioplasty</i> <i>Reduction mentoplasty</i>
28.	76.68	<i>Augmentation genioplasty</i> <i>Mentoplasty:</i> <i>NOS</i> <i>with graft or implant</i>
29.	76.69	<i>Other facial bone repair</i> <i>Osteoplasty of facial bone NOS</i>
30.	76.7	<i>Reduction of facial fracture</i> <i>Includes: internal fixation</i> <i>Code also any synchronous:</i>

		<i>bone graft (76.91)</i> <i>synthetic implant (76.92)</i>
31.	76.70	<i>Reduction of facial fracture, not otherwise specified</i>
32.	76.71	<i>Closed reduction of malar and zygomatic fracture</i>
33.	76.72	<i>Open reduction of malar and zygomatic fracture</i>
34.	76.73	<i>Closed reduction of maxillary fracture</i>
35.	76.74	<i>Open reduction of maxillary fracture</i>
36.	76.75	<i>Closed reduction of mandibular fracture</i>
37.	76.76	<i>Open reduction of mandibular fracture</i>
38.	76.77	<i>Open reduction of alveolar fracture</i> <i>Reduction of alveolar fracture with stabilization of teeth</i>
39.	76.78	<i>Other closed reduction of facial fracture</i> <i>Closed reduction of orbital fracture</i>
40.	76.79	<i>Other open reduction of facial fracture</i> <i>Open reduction of orbit rim or wall</i>
41.	76.9	<i>Other operations on facial bones and joints</i>
42.	76.91	<i>Bone graft to facial bone</i> <i>Autogenous graft to facial bone</i> <i>Bone bank graft to facial bone</i> <i>Heterogenous graft to facial bone</i>
43.	76.92	<i>Insertion of synthetic implant in facial bone</i> <i>Alloplastic implant to facial bone</i>
44.	76.93	<i>Closed reduction of temporomandibular dislocation</i>
45.	76.94	<i>Open reduction of temporomandibular dislocation</i>
46.	76.95	<i>Other manipulation of temporomandibular joint</i>
47.	76.96	<i>Injection of therapeutic substance into temporomandibular joint</i>
48.	76.97	<i>Removal of internal fixation device from facial bone</i>
49.	76.99	<i>Other</i>

*The following fourth- digit subclassification is for use with appropriate categories in section 77 to identify the site. Valid fourth- digit categories are in brackets under each code.*

*0 unspecified site*

*1 scapula, clavicle, and thorax [ribs and sternum]*

*2 humerus*

*3 radius and ulna*

*4 carpals and metacarpals*

*5 femur*

*6 patella*

*7 tibia and fibula*

*8 tarsals and metatarsals*

*9 other : Pelvic bones , Phalanges (of foot) (of hand), Vertebrae*

50.	77	<i>Incision, excision, and division of other bones</i>
51.	77.0	<i>Sequestrectomy</i>
52.	77.1	<i>Other incision of bone without division Reopening of osteotomy site</i>
53.	77.2	<i>Wedge osteotomy</i>
54.	77.3	<i>Other division of bone Osteoarthrotomy</i>
55.	77.4	<i>Biopsy of bone</i>
56.	77.5	<i>Excision and repair of bunion and other toe deformities</i>
57.	77.51	<i>Bunionectomy with soft tissue correction and osteotomy of the first metatarsal</i>
58.	77.52	<i>Bunionectomy with soft tissue correction and arthrodesis</i>
59.	77.53	<i>Other bunionectomy with soft tissue correction</i>
60.	77.54	<i>Excision or correction of bunionette That with osteotomy</i>
61.	77.56	<i>Repair of hammer toe Fusion of hammer toe Phalangectomy (partial) of hammer toe Filleting of hammer toe</i>
62.	77.57	<i>Repair of claw toe Fusion of hammer toe Phalangectomy (partial) of hammer toe Capsulotomy of claw toe Tendon lengthening of clawa toe</i>
63.	77.58	<i>Other excision, fusion and repair of toes</i>



		<i>Cockup toe repair Overlapping toe repair That with use of prosthetic materials</i>
64.	77.59	<i>Other bunionectomy Resection of hallux valgus joint with insertion of prosthesis</i>
65.	77.6	<i>Local excision of lesion or tissue of bone</i>
66.	77.7	<i>Excision of bone for graft</i>
67.	77.8	<i>Other partial ostectomy Condylectomy</i>
68.	77.9	<i>Total ostectomy</i>
<p><i>The following fourth- digit subclassification is for use with appropriate categories in section 78 to identify the site. Valid fourth- digit categories are in brackets under each code.</i></p> <p><i>0 unspecified site</i>  <i>1 scapula, clavicle, and thorax [ribs and sternum]</i>  <i>2 humerus</i>  <i>3 radius and ulna</i>  <i>4 carpals and metacarpals</i>  <i>5 femur</i>  <i>6 patella</i>  <i>7 tibia and fibula</i>  <i>8 tarsals and metatarsals</i>  <i>9 other : Pelvic bones , Phalanges (of foot) (of hand), Vertebrae</i></p>		
69.	78	<i>Other operations on bones, except facial bones</i>
70.	78.0	<i>Bone graft Bone : bank graft graft (autogenous) (heterogenous) That with debridement of bone graft site (removal of sclerosed, fibrous or necrotic bone or tissue) Transplantation of bone Code also any excision of bone for graft (77.70-77.79)</i>
71.	78.1	<i>Application of external fixator device Fixator with insertion of pins/wires/screws into bone Code also any type of fixator device, if known (84.71-84.73)</i>
72.	78.2	<i>Limb shortening procedures Epiphyseal stapling Open epiphysiodesis Percutaneous epiphysiodesis Resection/osteotomy</i>

73.	78.3	<p><i>Limb lengthening procedures</i></p> <p><i>Bone graft with or without internal fixation devices or osteotomy Distraction technique with or without corticotomy/osteotomy</i></p> <p><i>Code also any application of an external fixation device (78.10-78.19)</i></p>
74.	78.4	<p><i>Other repair or plastic operations on bone</i></p> <p><i>Other operation on bone NEC</i></p> <p><i>Repair of malunion or nonunion fracture NEC</i></p>
75.	78.5	<p><i>Internal fixation of bone without fracture reduction</i></p> <p><i>Internal fixation of bone (prophylactic)</i></p> <p><i>Reinsertion of internal fixation device Revision of displaced or broken fixation device</i></p>
76.	78.6	<p><i>Removal of implanted devices from bone</i></p> <p><i>External fixator device (invasive)</i></p> <p><i>Internal fixation device</i></p> <p><i>Removal of bone growth stimulator (invasive)</i></p> <p><i>Removal of internal limb lengthening device</i></p> <p><i>Removal of pedicle screw(s) used in spinal fusion</i></p>
77.	78.7	<i>Osteoclastis</i>
78.	78.8	<i>Diagnostic procedures on bone, not elsewhere classified</i>
79.	78.9	<p><i>Insertion of bone growth stimulator</i></p> <p><i>Insertion of:</i></p> <p><i>bone stimulator (electrical) to aid bone healing</i></p> <p><i>osteogenic electrodes for bone growth</i></p> <p><i>stimulation totally implanted device (invasive)</i></p>
<p><i>categories in section 79 to identify the site. Valid fourth- digit categories are in</i></p>		

<p><i>[brackets] under each code.</i></p> <p>0 unspecified site</p> <p>1 humerus</p> <p>2 radius and ulna Arm NOS</p> <p>3 carpals and metacarpals Hand NOS</p> <p>4 phalanges of hand</p> <p>5 femur</p> <p>6 tibia and fibula Leg NOS</p> <p>7 tarsals and metatarsals Foot NOS</p> <p>8 phalanges of foot</p> <p>9 other specified bone</p>		
80.	79	<p><i>Reduction of fracture and dislocation</i></p> <p><i>Includes: application of cast or splint</i></p> <p><i>reduction with insertion of traction device (Kirschner wire) (Steinmann pin)</i></p> <p><i>Code also any:</i></p> <p><i>application of external fixator device (78.10-78.19) type of fixator device, if known (84.71-84.73)</i></p>
81.	79.0	<i>Closed reduction of fracture without internal fixation</i>
82.	79.1	<i>Closed reduction of fracture with internal fixation</i>
83.	79.2	<i>Open reduction of fracture without internal fixation</i>
84.	79.3	<i>Open reduction of fracture with internal fixation</i>
85.	79.4	<p><i>Closed reduction of separated epiphysis</i></p> <p><i>Reduction with or without internal fixation</i></p>
86.	79.5	<p><i>Open reduction of separated epiphysis</i></p> <p><i>Reduction with or without internal fixation</i></p>
87.	79.6	<p><i>Debridement of open fracture site</i></p> <p><i>Debridement of compound fracture</i></p>
88.	79.7	<p><i>Closed reduction of dislocation</i></p> <p><i>closed reduction (with external traction device)</i></p>
89.	79.70	<i>Closed reduction of dislocation of unspecified site</i>
90.	79.71	<i>Closed reduction of dislocation of shoulder</i>
91.	79.72	<i>Closed reduction of dislocation of elbow</i>
92.	79.73	<i>Closed reduction of dislocation of wrist</i>

93.	79.74	<i>Closed reduction of dislocation of hand and finger</i>
94.	79.75	<i>Closed reduction of dislocation of hip</i>
95.	79.76	<i>Closed reduction of dislocation of knee</i>
96.	79.77	<i>Closed reduction of dislocation of ankle</i>
97.	79.78	<i>Closed reduction of dislocation of foot and toe</i>
98.	79.79	<i>Closed reduction of dislocation of other specified sites</i>
99.	79.8	<i>Open reduction of dislocation</i> <i>Includes: open reduction (with internal and external fixation devices)</i>
100.	79.80	<i>Open reduction of dislocation of unspecified site</i>
101.	79.81	<i>Open reduction of dislocation of shoulder</i>
102.	79.82	<i>Open reduction of dislocation of elbow</i>
103.	79.83	<i>Open reduction of dislocation of wrist</i>
104.	79.84	<i>Open reduction of dislocation of hand and finger</i>
105.	79.85	<i>Open reduction of dislocation of hip</i>
106.	79.86	<i>Open reduction of dislocation of knee</i>
107.	79.87	<i>Open reduction of dislocation of ankle</i>
108.	79.88	<i>Open reduction of dislocation of foot and toe</i>
109.	79.89	<i>Open reduction of dislocation of other specified sites</i>
110.	79.9	<i>Unspecified operation on bone injury</i>
<p><i>The following fourth- digit subclassification is for use with appropriate categories in section 80 to identify the site:</i></p> <p><i>0 unspecified site</i></p> <p><i>1 shoulder</i></p> <p><i>2 elbow</i></p> <p><i>3 wrist</i></p> <p><i>4 hand and finger</i></p> <p><i>5 hip</i></p> <p><i>6 knee</i></p> <p><i>7 ankle</i></p> <p><i>8 foot and toe</i></p> <p><i>9 other specified sites Spine</i></p>		

111.	80	<p><i>Incision and excision of joint structures</i></p> <p><i>Includes: operations on:</i></p> <p><i>capsule of joint</i></p> <p><i>cartilage</i></p> <p><i>condyle</i></p> <p><i>ligament</i></p> <p><i>meniscus</i></p> <p><i>synovial membrane</i></p>
112.	80.0	<p><i>Arthrotomy for removal of prosthesis</i></p> <p><i>Includes removal of posterior spinal motion preservation (dynamic stabilization, facet replacement, interspinous process) device(s)</i></p> <p><i>Code also any:</i></p> <p><i>insertion of (cement)(joint) (methylnmethacrylate) spacer (<a href="#">84.56</a>)</i></p> <p><i>removal of (cement)(joint) (methylnmethacrylate) spacer (<a href="#">84.57</a>)</i></p>
113.	80.1	<p><i>Other arthrotomy</i></p> <p><i>Arthroscopy</i></p>
114.	80.2	<i>Arthroscopy</i>
115.	80.3	<p><i>Biopsy of joint structure</i></p> <p><i>Aspiration biopsy</i></p>
116.	80.4	<p><i>Division of joint capsule, ligament, or cartilage</i></p> <p><i>Goldner clubfoot release</i></p> <p><i>Heyman-Herndon(-Strong) correction of metatarsus varus</i></p> <p><i>Release of:</i></p> <p><i>adherent or constrictive joint capsule</i></p> <p><i>joint</i></p> <p><i>ligament</i></p>
117.	80.5	<i>Excision, destruction and other repair of intervertebral disc</i>
118.	80.50	<p><i>Excision or destruction of intervertebral disc, unspecified</i></p> <p><i>Unspecified as to excision or destruction</i></p>
119.	80.51	<i>Excision of intervertebral disc</i>

		<p><i>Discectomy</i>  <i>Removal of herniated nucleus pulposus</i>  <i>Level:</i>  <i>cervical</i>  <i>thoracic</i>  <i>lumbar (lumbosacral)</i>  <i>That by laminotomy or hemilaminectomy</i></p> <p><i>That with decompression of spinal nerve root at same level</i></p> <p><i>Requires additional code for any concomitant decompression of</i>  <i>spinal nerve root at different level from excision site</i></p> <p><i>Code also any concurrent spinal fusion (<a href="#">81.00 - 81.09</a>)</i>  <i>Code also any repair of the anulus fibrosus (<a href="#">80.53-80.54</a>)</i></p>
120.	80.52	<p><i>Intervertebral chemonucleolysis</i>  <i>With aspiration of disc fragments</i>  <i>With discography</i>  <i>Injection of proteolytic enzyme into intervertebral space (chymopapain)</i></p>
121.	80.53	<p><i>Repair of the anulus fibrosus with graft or prosthesis</i>  <i>Anular disc repair</i>  <i>Closure (sealing) of the anulus fibrosus defect</i>  <i>Includes:</i>  <i>microsurgical suture repair with fascial autograft</i>  <i>soft tissue re- approximation repair with tension bands</i>  <i>surgical mesh repair</i>  <i>Code also any:</i>  <i>application or administration of adhesion barrier substance, if performed (<a href="#">99.77</a>)</i>  <i>intervertebral discectomy, if performed (<a href="#">80.51</a>) locally harvested fascia for graft (<a href="#">83.43</a>)</i></p>
122.	80.54	<p><i>Other and unspecified repair of the anulus fibrosus</i>  <i>Anular disc repair</i>  <i>Closure (sealing) of the anulus fibrosus defect</i>  <i>Microsurgical suture repair without fascial autograft</i>  <i>Percutaneous repair of the anulus fibrosus</i></p>

		<p><i>Code also any:</i></p> <p><i>application or administration of adhesion barrier substance, if performed (<a href="#">99.77</a>)</i></p> <p><i>intervertebral discectomy, if performed (<a href="#">80.51</a>)</i></p>
123.	80.59	<p><i>Other destruction of intervertebral disc</i></p> <p><i>Destruction NEC</i></p> <p><i>That by laser</i></p>
124.	80.6	<p><i>Excision of semilunar cartilage of knee</i></p> <p><i>Excision of meniscus of knee</i></p>
125.	80.7	<p><i>Synovectomy</i></p> <p><i>Complete or partial resection of synovial membrane</i></p>
126.	80.8	<i>Other local excision or destruction of lesion of joint</i>
127.	80.9	<i>Other excision of joint</i>
128.	81	<i>Repair and plastic operations on joint structures</i>
129.	81.0	<p><i>Spinal fusion</i></p> <p><i>Includes: arthrodesis of spine with:</i></p> <p><i>bone graft</i></p> <p><i>internal fixation</i></p> <p><i>Code also any insertion of interbody spinal fusion device (<a href="#">84.51</a>)</i></p> <p><i>Code also any insertion of recombinant bone morphogenetic protein (<a href="#">84.52</a>)</i></p> <p><i>Code also the total number of vertebrae fused (<a href="#">81.62-81.64</a>)</i></p>
130.	81.00	<i>Spinal fusion, not otherwise specified</i>
131.	81.01	<p><i>Atlas-axis spinal fusion</i></p> <p><i>Craniocervical fusion by anterior, transoral, or posterior technique</i></p> <p><i>C1-C2 fusion by anterior, transoral, or posterior technique</i></p>

		<i>Occiput C2 fusion by anterior, transoral, or posterior technique</i>
132.	81.02	<i>Other cervical fusion, anterior technique</i> <i>Arthrodesis of C2 level or below:</i> <i>anterior (interbody) technique</i> <i>anterolateral technique</i>
133.	81.03	<i>Other cervical fusion, posterior technique</i> <i>Arthrodesis of C2 level or below:</i> <i>posterior (interbody) technique</i> <i>posterolateral technique</i>
134.	81.04	<i>Dorsal and dorsolumbar fusion, anterior technique</i> <i>Arthrodesis of thoracic or thoracolumbar region:</i> <i>anterior (interbody) technique</i> <i>anterolateral technique</i>
135.	81.05	<i>Dorsal and dorsolumbar fusion, posterior technique</i> <i>Arthrodesis of thoracic or thoracolumbar region:</i> <i>posterior (interbody) technique</i> <i>posterolateral technique</i>
136.	81.06	<i>Lumbar and lumbosacral fusion, anterior technique</i> <i>Anterior lumbar interbody fusion (ALIF)</i> <i>Arthrodesis of lumbar or lumbosacral region:</i> <i>anterior (interbody) technique anterolateral technique</i>
137.	81.07	<i>Lumbar and lumbosacral fusion, lateral transverse process technique</i>
138.	81.08	<i>Lumbar and lumbosacral fusion, posterior technique</i> <i>Arthrodesis of lumbar or lumbosacral region:</i>



		<p><i>posterior (interbody) technique</i></p> <p><i>posterolateral technique</i></p> <p><i>Posterior lumbar interbody fusion (PLIF)</i></p> <p><i>Transforaminal lumbar interbody fusion (TLIF)</i></p>
139.	81.1	<p><i>Arthrodesis and arthroereisis of foot and ankle</i></p> <p><i>arthrodesis of foot and ankle with:</i></p> <p><i>bone graft</i></p> <p><i>external fixation device</i></p>
140.	81.11	<p><i>Ankle fusion</i></p> <p><i>Tibiotalar fusion</i></p>
141.	81.12	<p><i>Triple arthrodesis</i></p> <p><i>Talus to calcaneus and calcaneus to cuboid and navicular</i></p>
142.	81.13	<i>Subtalar fusion</i>
143.	81.14	<i>Midtarsal fusion</i>
144.	81.15	<i>Tarsometatarsal fusion</i>
145.	81.16	<i>Metatarsophalangeal fusion</i>
146.	81.17	<i>Other fusion of foot</i>
147.	81.18	<i>Subtalar joint arthroereisis</i>
148.	81.2	<p><i>Arthrodesis of other joint</i></p> <p><i>arthrodesis with:</i></p> <p><i>bone graft</i></p> <p><i>external fixation device</i></p> <p><i>excision of bone ends and compression</i></p>
149.	81.20	<i>Arthrodesis of unspecified joint</i>
150.	81.21	<i>Arthrodesis of hip</i>
151.	81.22	<i>Arthrodesis of knee</i>

152.	81.23	<i>Arthrodesis of shoulder</i>
153.	81.24	<i>Arthrodesis of elbow</i>
154.	81.25	<i>Carporadial fusion</i>
155.	81.26	<i>Metacarpocarpal fusion</i>
156.	81.27	<i>Metacarpophalangeal fusion</i>
156.	81.28	<i>Interphalangeal fusion</i>
157.	81.29	<i>Arthrodesis of other specified joints</i>
158.	81.3	<p><i>Refusion of spine</i>  <i>Includes:</i>  <i>arthrodesis of spine with:</i>  <i>bone graft internal fixation</i>  <i>correction of pseudarthrosis of spine</i></p> <p><i>Code also any insertion of interbody spinal fusion device</i>  <u><a href="#">(84.51)</a></u>  <i>Code also any insertion of recombinant bone morphogenetic protein</i>  <u><a href="#">(84.52)</a></u>  <i>Code also the total number of vertebrae fused</i>  <u><a href="#">(81.62-81.64)</a></u>  <i>Code also any synchronous excision of (locally) harvested bone for graft</i>  <u><a href="#">(77.70- 77.79)</a></u></p>
159.	81.30	<i>Refusion of spine, not otherwise specified</i>
160.	81.31	<p><i>Refusion of atlas-axis spine</i></p> <p><i>Craniocervical fusion by anterior, transoral, or posterior technique</i></p> <p><i>C1-C2 fusion by anterior, transoral, or posterior technique</i></p> <p><i>Occiput C2 fusion by anterior, transoral, or posterior technique</i></p>
161.	81.32	<p><i>Refusion of other cervical spine, anterior technique</i></p> <p><i>Arthrodesis of C2 level or below:</i>  <i>anterior (interbody) technique</i>  <i>anterolateral technique</i></p>

162.	81.33	<p><i>Refusion of other cervical spine, posterior technique</i></p> <p><i>Anterior lumbar interbody fusion (ALIF)</i></p> <p><i>Arthrodesis of C2 level or below:</i></p> <p><i>posterior (interbody) technique</i></p> <p><i>posterolateral technique</i></p>
163.	81.34	<p><i>Refusion of dorsal and dorsolumbar spine, anterior technique</i></p> <p><i>Arthrodesis of thoracic or thoracolumbar region:</i></p> <p><i>anterior (interbody) technique</i></p> <p><i>anterolateral technique</i></p>
164.	81.35	<p><i>Refusion of dorsal and dorsolumbar spine, posterior technique</i></p> <p><i>Arthrodesis of thoracic or thoracolumbar region:</i></p> <p><i>posterior (interbody) technique</i></p> <p><i>posterolateral technique</i></p>
165.	81.36	<p><i>Refusion of lumbar and lumbosacral spine, anterior technique</i></p> <p><i>Arthrodesis of lumbar or lumbosacral region:</i></p> <p><i>anterior (interbody) technique</i></p> <p><i>anterolateral technique</i></p>
166.	81.37	<p><i>Refusion of lumbar and lumbosacral spine, lateral transverse process technique</i></p>
167.	81.38	<p><i>Refusion of lumbar and lumbosacral spine, posterior technique</i></p> <p><i>Arthrodesis of lumbar or lumbosacral region:</i></p> <p><i>posterior (interbody) technique</i></p> <p><i>posterolateral technique</i></p> <p><i>Posterior lumbar interbody fusion (PLIF)</i></p> <p><i>Transforaminal lumbar interbody fusion</i></p>

		<i>(TLIF)</i>
168.	81.39	<i>Refusion of spine, not elsewhere classified</i>
169.	81.4	<i>Other repair of joint of lower extremity</i> <i>Includes: arthroplasty of lower extremity with:</i> <i>external traction or fixation graft of bone</i> <i>(chips) or cartilage internal fixation device</i>
170.	81.40	<i>Repair of hip, not elsewhere classified</i>
171.	81.42	<i>Five-in-one repair of knee</i>  <i>Medial meniscectomy, medial collateral ligament</i> <i>repair, vastus medialis advancement, semitendinosus</i> <i>advancement, and pes anserinus transfer</i>
172.	81.43	<i>Triad knee repair</i>  <i>Medial meniscectomy with repair of the anterior cruciate</i> <i>ligament and the medial collateral ligament</i>  <i>O'Donoghue procedure</i>
173.	81.44	<i>Patellar stabilization</i> <i>Roux-Goldthwait operation for recurrent dislocation of</i> <i>patella</i>
174.	81.45	<i>Other repair of the cruciate ligaments</i>
175.	81.46	<i>Other repair of the collateral ligaments</i>
176.	81.47	<i>Other repair of knee</i>
177.	81.49	<i>Other repair of ankle</i>
178.	81.5	<i>Joint replacement of lower extremity</i>  <i>Includes: arthroplasty of lower</i> <i>extremity with: external</i> <i>traction or fixation graft of</i> <i>bone (chips) or cartilage</i> <i>internal fixation device or</i> <i>prosthesis</i>  <i>removal of cement spacer</i>
179.	81.51	<i>Total hip replacement</i>  <i>Replacement of both femoral head and acetabulum by</i>

		<p><i>prosthesis Total reconstruction of hip</i></p> <p><i>Code also any type of bearing surface, if known (<u>00.74-00.76</u>)</i></p>
180.	81.52	<p><i>Partial hip replacement</i></p> <p><i>Bipolar endoprosthesis</i></p> <p><i>Code also any type of bearing surface, if known (<u>00.74-00.76</u>)</i></p>
181.	81.53	<p><i>Revision of hip replacement, not otherwise specified</i></p> <p><i>Revision of hip replacement, not specified as to components(s) replaced, (acetabular, femoral or both)</i></p> <p><i>Code also any:</i></p> <p><i>removal of (cement)(joint) spacer (<u>84.57</u>)</i></p> <p><i>type of bearing surface, if known (<u>00.74-00.76</u>)</i></p>
182.	81.54	<p><i>Total knee replacement</i></p> <p><i>Bicompartmental</i></p> <p><i>Tricompartmental</i></p> <p><i>Unicompartmental (hemijoint)</i></p> <p><i>Partial knee replacement</i></p>
183.	81.55	<p><i>Revision of knee replacement, not otherwise specified</i></p> <p><i>Code also any removal of (cement) spacer (<u>84.57</u>)</i></p>
184.	81.56	<p><i>Total ankle replacement</i></p>
185.	81.57	<p><i>Replacement of joint of foot and toe</i></p>
186.	81.59	<p><i>Revision of joint replacement of lower extremity, not elsewhere classified</i></p>
187.	81.6	<p><i>Other procedures on spine</i></p> <p><b><i>Note: Number of vertebrae</i></b></p> <p><i>The vertebral spine consists of 25 vertebrae in the following order and number:</i></p>

		<p><i>Cervical: C1 (atlas), C2 (axis), C3, C4, C5, C6, C7</i></p> <p><i>Thoracic or Dorsal: T1, T2, T3, T4, T5, T6, T7, T8, T9, T10, T11, T12</i></p> <p><i>Lumbar and Sacral: L1, L2, L3, L4, L5, S1</i></p> <p><i>Coders should report only one code from the series <u>81.62</u> or <u>81.63</u> or <u>81.64</u> to show the total number of vertebrae fused on the patient.</i></p> <p><i>Code also the level and approach of the fusion or refusion (<u>81.00-81.08</u>, <u>81.30-81.39</u>)</i></p>
188.	81.62	<i>Fusion or refusion of 2-3 vertebrae</i>
189.	81.63	<i>Fusion or refusion of 4- 8 vertebrae</i>
190.	81.64	<i>Fusion or refusion of 9 or more vertebrae</i>
191.	81.65	<p><i>Percutaneous vertebroplasty</i></p> <p><i>Injection of bone void filler (cement) (polymethylmethacrylate) (PMMA) into the diseased or fractured vertebral body</i></p>
192.	81.66	<p><i>Percutaneous vertebral augmentation</i></p> <p><i>Insertion of inflatable balloon, bone tamp, or other device displacing (removing) (compacting) bone to create a space (cavity) (void) prior to injection of bone void filler (cement)(polymethylmethacrylate) (PMMA) or other substance</i></p> <p><i>Arcoplasty</i></p> <p><i>Kyphoplasty</i></p> <p><i>SKyphoplasty</i></p> <p><i>Spineoplasty</i></p>
193.	81.7	<p><i>Arthroplasty and repair of hand, fingers and wrist</i></p> <p><i>Includes: arthroplasty of hand and finger with: external traction or fixation</i></p>

		<i>graft of bone (chips) or cartilage</i> <i>internal fixation device or prosthesis</i>
194.	81.71	<i>Arthroplasty of metacarpophalangeal and interphalangeal joint with implant</i>
195.	81.72	<i>Arthroplasty of metacarpophalangeal and interphalangeal joint without implant</i>
196.	81.73	<i>Total wrist replacement</i>
197.	81.74	<i>Arthroplasty of carpocarpal or carpometacarpal joint with implant</i>
198.	81.75	<i>Arthroplasty of carpocarpal or carpometacarpal joint without implant</i>
199.	81.79	<i>Other repair of hand, fingers and wrist</i>
200.	81.8	<i>Arthroplasty and repair of shoulder and elbow</i>  <i>Includes: arthroplasty of upper limb NEC with:</i> <i>external traction or fixation</i> <i>graft of bone (chips) or cartilage</i> <i>internal fixation device or prosthesis</i>
201.	81.80	<i>Total shoulder replacement</i>
202.	81.81	<i>Partial shoulder replacement</i>
203.	81.82	<i>Repair of recurrent dislocation of shoulder</i>
204.	81.83	<i>Other repair of shoulder</i>  <i>Revision of arthroplasty of shoulder</i>
205.	81.84	<i>Total elbow replacement</i> <i>Partial elbow replacement</i>
206.	81.85	<i>Other repair of elbow</i>
207.	81.9	<i>Other operations on joint structures</i>
208.	81.91	<i>Arthrocentesis</i>  <i>Joint aspiration</i>
209.	81.92	<i>Injection of therapeutic substance into joint or ligament</i>
210.	81.93	<i>Suture of capsule or ligament of upper extremity</i>
211.	81.94	<i>Suture of capsule or ligament of ankle and foot</i>

212.	81.95	<i>Suture of capsule or ligament of other lower extremity</i>
213.	81.96	<i>Other repair of joint</i>
214.	81.97	<i>Revision of joint replacement of upper extremity</i> <i>Partial</i> <i>Removal of cement spacer</i> <i>Total</i>
215.	81.98	<i>Other diagnostic procedures on joint structures</i>
216.	81.99	<i>Other</i>
217.	82	<i>Operations on muscle, tendon, and fascia of hand</i> <i>Includes:operations on:</i> <i>Aponeurosis</i> <i>synovial membrane (tendon sheath)</i> <i>tendon sheath</i>
218.	82.0	<i>Incision of muscle, tendon, fascia, and bursa of hand</i>
219.	82.01	<i>Exploration of tendon sheath of hand</i>  <i>Incision of tendon sheath of hand</i>  <i>Removal of rice bodies in tendon sheath of hand</i>
220.	82.02	<i>Myotomy of hand</i>
221.	82.03	<i>Bursotomy of hand</i>
222.	82.04	<i>Incision and drainage of palmar or thenar space</i>
223.	82.09	<i>Other incision of soft tissue of hand</i>
224.	82.1	<i>Division of muscle, tendon, and fascia of hand</i>
225.	82.11	<i>Tenotomy of hand</i>  <i>Division of tendon of hand</i>
226.	82.12	<i>Fasciotomy of hand</i> <i>Division of fascia of hand</i>
227.	82.19	<i>Other division of soft tissue of hand</i> <i>Division of muscle of hand</i>
228.	82.2	<i>Excision of lesion of muscle, tendon, and fascia of hand</i>
229.	82.21	<i>Excision of lesion of tendon sheath of hand</i> <i>Ganglionectomy of tendon sheath (wrist)</i>



230.	82.22	<i>Excision of lesion of muscle of hand</i>
231.	82.29	<i>Excision of other lesion of soft tissue of hand</i>
232.	82.3	<i>Other excision of soft tissue of hand</i> <i>Code also any skin graft (86.61-86.62, 86.73)</i>
233.	82.31	<i>Bursectomy of hand</i>
234.	82.32	<i>Excision of tendon of hand for graft</i>
235.	82.33	<i>Other tenonectomy of hand</i> <i>Tenosynovectomy of hand</i>
236.	82.34	<i>Excision of muscle or fascia of hand for graft</i>
237.	82.35	<i>Other fasciectomy of hand</i> <i>Release of Dupuytren's contracture</i>
238.	82.36	<i>Other myectomy of hand</i>
239.	82.39	<i>Other excision of soft tissue of hand</i>
240.	82.4	<i>Suture of muscle, tendon, and fascia of hand</i>
241.	82.41	<i>Suture of tendon sheath of hand</i>
242.	82.42	<i>Delayed suture of flexor tendon of hand</i>
243.	82.43	<i>Delayed suture of other tendon of hand</i>
244.	82.44	<i>Other suture of flexor tendon of hand</i>
245.	82.45	<i>Other suture of other tendon of hand</i>
246.	82.46	<i>Suture of muscle or fascia of hand</i>
247.	82.5	<i>Transplantation of muscle and tendon of hand</i>
248.	82.51	<i>Advancement of tendon of hand</i>
249.	82.52	<i>Recession of tendon of hand</i>
250.	82.53	<i>Reattachment of tendon of hand</i>
251.	82.54	<i>Reattachment of muscle of hand</i>
252.	82.55	<i>Other change in hand muscle or tendon length</i>
253.	82.56	<i>Other hand tendon transfer or transplantation</i>
254.	82.57	<i>Other hand tendon transposition</i>

255.	82.58	<i>Other hand muscle transfer or transplantation</i>
256.	82.59	<i>Other hand muscle transposition</i>
257.	82.6	<i>Reconstruction of thumb</i> <i>Includes: digital transfer to act as thumb</i>
258.	82.61	<i>Pollicization operation carrying over nerves and blood supply</i>
259.	82.69	<i>Other reconstruction of thumb</i> <i>"Cocked-hat" procedure [skin flap and bone] Grafts:</i> <i>bone to thumb</i> <i>skin (pedicle) to thumb</i>
260.	82.7	<i>Plastic operation on hand with graft or implant</i>
261.	82.71	<i>Tendon pulley reconstruction</i> <i>Reconstruction for opponensplasty</i>
262.	82.72	<i>Plastic operation on hand with graft of muscle or fascia</i>
263.	82.79	<i>Plastic operation on hand with other graft or implant</i> <i>Tendon graft to hand</i>
264.	82.8	<i>Other plastic operations on hand</i>
265.	82.81	<i>Transfer of finger, except thumb</i>
266.	82.82	<i>Repair of cleft hand</i>
267.	82.83	<i>Repair of macrodactyly</i>
268.	82.84	<i>Repair of mallet finger</i>
269.	82.85	<i>Other tenodesis of hand</i> <i>Tendon fixation of hand NOS</i>
270.	82.86	<i>Other tenoplasty of hand</i> <i>Myotenoplasty of hand</i>
271.	82.89	<i>Other plastic operations on hand</i> <i>Plication of fascia</i> <i>Repair of fascial hernia</i>
272.	82.9	<i>Other operations on muscle, tendon, and fascia of hand</i>

273.	82.91	<i>Lysis of adhesions of hand</i> <i>Freeing of adhesions of fascia, muscle, and tendon of hand</i>
274.	82.92	<i>Aspiration of bursa of hand</i>
275.	82.93	<i>Aspiration of other soft tissue of hand</i>
276.	82.94	<i>Injection of therapeutic substance into bursa of hand</i>
277.	82.95	<i>Injection of therapeutic substance into tendon of hand</i>
278.	82.96	<i>Other injection of locally-acting therapeutic substance into soft tissue of hand</i>
279.	82.99	<i>Other operations on muscle, tendon, and fascia of hand</i>
280.	83	<i>Operations on muscle, tendon, fascia, and bursa, except hand</i>  <i>Includes: operations on</i> <i>aponeurosis</i>  <i>synovial membrane of bursa and tendon</i> <i>sheaths tendon sheaths</i>
281.	83.0	<i>Incision of muscle, tendon, fascia, and bursa</i>
282.	83.01	<i>Exploration of tendon sheath</i>  <i>Incision of tendon sheath</i> <i>Removal of rice bodies from tendon</i>
283.	83.02	<i>Myotomy</i>
284.	83.03	<i>Bursotomy</i> <i>Removal of calcareous deposit of bursa</i>
285.	83.09	<i>Other incision of soft tissue</i> <i>Incision of fascia</i>
286.	83.1	<i>Division of muscle, tendon, and fascia</i>
287.	83.11	<i>Achillotenotomy</i>
288.	83.12	<i>Adductor tenotomy of hip</i>
289.	83.13	<i>Other tenotomy</i> <i>Aponeurotomy</i>

		<i>Division of tendon</i> <i>Tendon release</i> <i>Tendon transection</i> <i>Tenotomy for thoracic outlet decompression</i>
290.	83.14	<i>Fasciotomy</i> <i>Division of fascia</i> <i>Division of iliotibial band</i> <i>Fascia stripping</i> <i>Release of Volkmann's contracture by fasciotomy</i>
291.	83.19	<i>Other division of soft tissue</i>  <i>Division of muscle</i> <i>Muscle release</i> <i>Myotomy for thoracic outlet decompression</i> <i>Myotomy with division</i> <i>Scalenotomy</i> <i>Transection of muscle</i>
292.	83.2	<i>Diagnostic procedures on muscle, tendon, fascia, and bursa, including that of hand</i>
293.	83.21	<i>Biopsy of soft tissue</i>
294.	83.29	<i>Other diagnostic procedures on muscle, tendon, fascia, and bursa, including that of hand</i>
295.	83.3	<i>Excision of lesion of muscle, tendon, fascia, and bursa</i>
296.	83.31	<i>Excision of lesion of tendon sheath</i> <i>Excision of ganglion of tendon sheath, except of hand</i>
297.	83.32	<i>Excision of lesion of muscle</i>

		<i>Excision of:</i> <i>heterotopic bone</i> <i>muscle scar for release of Volkmann's contracture myositis ossificans</i>
298.	83.39	<i>Excision of lesion of other soft tissue</i> <i>Excision of Baker's cyst</i>
299..	83.4	<i>Other excision of muscle, tendon, and fascia</i>
300.	83.41	<i>Excision of tendon for graft</i>
301.	83.42	<i>Other tenonectomy</i>  <i>Excision of:</i> <i>Aponeurosis</i> <i>tendon sheath</i>  <i>Tenosynovectomy</i>
302.	83.43	<i>Excision of muscle or fascia for graft</i>
303.	83.44	<i>Other fasciectomy</i>
304.	83.45	<i>Other myectomy</i>  <i>Debridement of muscle NOS</i>  <i>Scalenectomy</i>
305.	83.49	<i>Other excision of soft tissue</i>
306.	83.5	<i>Bursectomy</i>
307.	83.6	<i>Suture of muscle, tendon, and fascia</i>
308.	83.61	<i>Suture of tendon sheath</i>
309.	83.62	<i>Delayed suture of tendon</i>
310.	83.63	<i>Rotator cuff repair</i>
311.	81.64	<i>Other suture of tendon</i>  <i>Achillorrhaphy</i>  <i>Aponeurorrhaphy</i>
312.	83.65	<i>Other suture of muscle or fascia</i>  <i>Repair of diastasis recti</i>
313.	83.7	<i>Reconstruction of muscle and tendon</i>

314.	83.71	<i>Advancement of tendon</i>
315.	83.72	<i>Recession of tendon</i>
316.	83.73	<i>Reattachment of tendon</i>
317.	83.74	<i>Reattachment of muscle</i>
318.	83.75	<i>Tendon transfer or transplantation</i>
319.	83.76	<i>Other tendon transposition</i>
320.	83.77	<i>Muscle transfer or transplantation</i> <i>Release of Volkmann's contracture by muscle</i>
321.	83.79	<i>Other muscle transposition</i>
322.	83.8	<i>Other plastic operations on muscle, tendon, and fascia</i>
323.	83.81	<i>Tendon graft</i>
324.	83.82	<i>Graft of muscle or fascia</i>
325.	83.83	<i>Tendon pulley reconstruction</i>
326.	83.84	<i>Release of clubfoot, not elsewhere classified</i> <i>Evans operation on clubfoot</i>
327.	83.85	<i>Other change in muscle or tendon length</i> <i>Hamstring lengthening</i> <i>Heel cord shortening</i> <i>Plastic achillotenotomy</i> <i>Tendon Plication</i>
328.	83.86	<i>Quadricepsplasty</i>
329.	83.87	<i>Other plastic operations on muscle</i> <i>Musculoplasty</i> <i>Myoplasty</i>
330.	83.88	<i>Other plastic operations on tendon</i> <i>Myotenoplasty</i> <i>Tendon Fixation</i> <i>Tenodesis</i> <i>Tenoplasty</i>
331.	83.89	<i>Other plastic operations on fascia</i> <i>Fascia Lengthening</i> <i>Fascioplasty</i> <i>Plication of fascia</i>
332.	83.9	<i>Other operations on muscle, tendon, fascia, and bursa</i>

333.	83.91	<i>Lysis of adhesions of muscle, tendon, fascia, and bursa</i>
334.	83.92	<i>Insertion or replacement of skeletal muscle stimulator</i> <i>Implantation, insertion, placement, or replacement of skeletal muscle:</i> <i>Electrodes</i> <i>stimulator</i>
335.	83.93	<i>Removal of skeletal muscle stimulator</i>
336.	83.94	<i>Aspiration of bursa</i>
337.	83.95	<i>Aspiration of other soft tissue</i>
338.	83.96	<i>Injection of therapeutic substance into bursa</i>
339.	83.97	<i>Injection of therapeutic substance into tendon</i>
340.	83.98	<i>Injection of locally-acting therapeutic substance into other soft tissue</i>
341.	83.99	<i>Other operations on muscle, tendon, fascia, and bursa</i> <i>Suture of bursa</i>
342.	84	<i>Other procedures on musculoskeletal system</i>
343.	84.0	<i>Amputation of upper limb</i>
344.	84.00	<i>Upper limb amputation, not otherwise specified</i> <i>Closed flap amputation of upper limb NOS</i> <i>Kineplastic amputation of upper limb NOS</i> <i>Open or guillotine amputation of upper limb NOS</i> <i>Revision of current traumatic amputation of upper limb NOS</i>
345.	84.01	<i>Amputation and disarticulation of finger</i>
346.	84.02	<i>Amputation and disarticulation of thumb</i>
347.	84.03	<i>Amputation through hand</i> <i>Amputation through carpals</i>
348.	84.04	<i>Disarticulation of wrist</i>
349.	84.05	<i>Amputation through forearm</i> <i>Forearm amputation</i>

350.	84.06	<i>Disarticulation of elbow</i>
351.	84.07	<i>Amputation through humerus</i> <i>Upper arm amputation</i>
352.	84.08	<i>Disarticulation of shoulder</i>
353.	84.09	<i>Interthoracoscapular amputation</i> <i>Forequarter amputation</i>
354.	84.1	<i>Amputation of lower limb</i>
355.	84.10	<i>Lower limb amputation, not otherwise specified</i> <i>Closed flap amputation of lower limb NOS</i> <i>Kineplastic amputation of lower limb NOS</i> <i>Open or guillotine amputation of lower limb NOS</i> <i>Revision of current traumatic amputation of lower limb NOS</i>
356.	84.11	<i>Amputation of toe</i> <i>Amputation through metatarsophalangeal joint</i> <i>Disarticulation of toe</i> <i>Metatarsal head amputation</i> <i>Ray amputation of foot (disarticulation of the metatarsal head of the toe extending across the forefoot just proximal to the metatarsophalangeal crease)</i>
357.	84.12	<i>Amputation through foot</i> <i>Amputation of forefoot</i> <i>Amputation through middle of foot Chopart's amputation</i>  <i>Midtarsal amputation</i> <i>Transmetatarsal amputation (amputation of the forefoot, including all the toes)</i>
358.	84.13	<i>Disarticulation of ankle</i>



359.	84.14	<i>Amputation of ankle through malleoli of tibia and fibula</i>
360.	84.15	<i>Other amputation below knee Amputation of leg through tibia and fibula NOS</i>
361.	84.16	<i>Disarticulation of knee  Batch, Spittler, and McFaddin amputation Mazet amputation S.P. Roger's amputation</i>
362.	84.17	<i>Amputation above knee  Amputation of leg through femur Amputation of thigh  Conversion of below-knee amputation into above-knee amputation Supracondylar above-knee amputation</i>
363.	84.18	<i>Disarticulation of hip</i>
364.	84.19	<i>Abdominopelvic amputation  Hemipelvectomy Hindquarter amputation</i>
365.	84.2	<i>Reattachment of extremity</i>
366.	84.21	<i>Thumb reattachment</i>
367.	84.22	<i>Finger reattachment</i>
368.	84.23	<i>Forearm, wrist, or hand reattachment</i>
369.	84.24	<i>Upper arm reattachment  Reattachment of arm NOS</i>
370.	84.25	<i>Toe reattachment</i>
371.	84.26	<i>Foot reattachment</i>
372.	84.27	<i>Lower leg or ankle reattachment  Reattachment of leg NOS</i>

373.	84.28	<i>Thigh reattachment</i>
374.	84.29	<i>Other reattachment</i>
375.	84.3	<i>Revision of amputation stump</i> <i>Reamputation of stump</i> <i>Secondary closure of stump</i> <i>Trimming of stump</i>
376.	84.4	<i>Implantation or fitting of prosthetic limb device</i>
377.	84.40	<i>Implantation or fitting of prosthetic limb device, not otherwise specified</i>
378.	84.41	<i>Fitting of prosthesis of upper arm and shoulder</i>
379.	84.42	<i>Fitting of prosthesis of lower arm and hand</i>
380.	84.43	<i>Fitting of prosthesis of arm, not otherwise specified</i>
381.	84.44	<i>Implantation of prosthetic device of arm</i>
382.	84.45	<i>Fitting of prosthesis above knee</i>
383.	84.46	<i>Fitting of prosthesis below knee</i>
384.	84.47	<i>Fitting of prosthesis of leg, not otherwise specified</i>
385.	84.48	<i>Implantation of prosthetic device of leg</i>
386.	84.5	<i>Implantation of other musculoskeletal devices and substances</i>
387.	84.51	<i>Insertion of interbody spinal fusion device</i>  <i>Insertion of: cages (carbon, ceramic, metal, plastic or titanium)</i> <i>interbody fusion cage</i> <i>synthetic cages or spacers</i> <i>threaded bone dowels</i>  <i>Code also refusion of spine (81.30 - 81.39)</i> <i>Code also spinal fusion (81.00 - 81.08)</i>

388.	84.52	<p><i>Insertion of recombinant bone morphogenetic protein rhBMP</i></p> <p><i>That via collagen sponge, coral, ceramic and other carriers</i></p> <p><i>Code also primary procedure performed: fracture repair (79.00-79.99) spinal fusion (81.00 - 81.08) spinal refusion (81.30 - 81.39)</i></p>
389.	84.53	<p><i>Implantation of internal limb lengthening device with kinetic distraction</i></p> <p><i>Code also limb lengthening procedure (78.30 - 78.39)</i></p>
390.	84.54	<p><i>Implantation of other internal limb lengthening device</i></p> <p><i>Implantation of internal limb lengthening device, Not Otherwise</i></p> <p><i>Specified (NOS)</i></p> <p><i>Code also limb lengthening procedure (78.30 - 78.39)</i></p>
391.	84.55	<p><i>Insertion of bone void filler</i></p> <p><i>Insertion of:</i></p> <p><i>acrylic cement (PMMA)</i></p> <p><i>bone void cement</i></p> <p><i>calcium based bone void filler</i></p> <p><i>polymethylmethacrylate (PMMA)</i></p>
392.	84.56	<p><i>Insertion or replacement of (cement) spacer</i></p> <p><i>Insertion or replacement of joint (methylmethacrylate) spacer</i></p>

393.	84.57	<i>Removal of (cement) spacer</i>
394.	84.59	<i>Insertion of other spinal devices</i>
395.	84.6	<i>Replacement of spinal disc</i>  <i>Includes: non-fusion arthroplasty of the spine with insertion of artificial disc prosthesis</i>
396.	84.60	<i>Insertion of spinal disc prosthesis, not otherwise specified</i>  <i>Replacement of spinal disc, NOS</i>  <i>Includes: discectomy (discectomy)</i>
397.	84.61	<i>Insertion of partial spinal disc prosthesis, cervical</i>  <i>Nuclear replacement device, cervical</i>  <i>Partial artificial disc prosthesis (flexible), cervical</i> <i>Replacement of nuclear disc (nucleus pulposus), cervical</i>  <i>Includes: discectomy (discectomy)</i>
398.	84.62	<i>Insertion of total spinal disc prosthesis, cervical</i>  <i>Replacement of cervical spinal disc, NOS</i>  <i>Replacement of total spinal disc, cervical</i>  <i>Total artificial disc prosthesis (flexible), cervical</i>  <i>Includes: discectomy (discectomy)</i>
399.	84.63	<i>Insertion of spinal disc prosthesis, thoracic</i>  <i>Artificial disc prosthesis (flexible), thoracic</i> <i>Replacement of thoracic spinal disc, partial or total</i>  <i>Includes: discectomy (discectomy)</i>
400.	84.64	<i>Insertion of partial spinal disc prosthesis, lumbosacral</i>  <i>Nuclear replacement device, lumbar</i>  <i>Partial artificial disc prosthesis (flexible), lumbar</i>

		<p><i>Replacement of nuclear disc (nucleus pulposus), lumbar</i></p> <p><i>Includes: discectomy (discectomy)</i></p>
401.	84.65	<p><i>Insertion of total spinal disc prosthesis, lumbosacral</i></p> <p><i>Replacement of lumbar spinal disc, NOS</i> <i>Replacement of total spinal disc, lumbar</i></p> <p><i>Total artificial disc prosthesis (flexible), lumbar Includes: discectomy (discectomy)</i></p>
402.	84.66	<p><i>Revision or replacement of artificial spinal disc prosthesis, cervical</i></p> <p><i>Removal of (partial) (total) spinal disc prosthesis with synchronous insertion of new (partial) (total) spinal disc prosthesis, cervical</i></p> <p><i>Repair of previously inserted spinal disc prosthesis, cervical</i></p>
403.	84.67	<p><i>Revision or replacement of artificial spinal disc prosthesis, thoracic</i></p> <p><i>Removal of (partial) (total) spinal disc prosthesis with synchronous insertion of new (partial) (total) spinal disc prosthesis, thoracic</i></p> <p><i>Repair of previously inserted spinal disc prosthesis, thoracic</i></p>
404.	84.68	<p><i>Revision or replacement of artificial spinal disc prosthesis, lumbosacral</i></p> <p><i>Removal of (partial) (total) spinal disc prosthesis with synchronous insertion of new (partial)(total) spinal disc prosthesis, lumbosacral</i></p> <p><i>Repair of previously inserted spinal disc prosthesis, lumbosacral</i></p>
405.	84.69	<p><i>Revision or replacement of artificial spinal disc prosthesis, not otherwise specified</i></p>

		<p><i>Removal of (partial) (total) spinal disc prosthesis with synchronous insertion of new (partial)(total) spinal disc prosthesis</i></p> <p><i>Repair of previously inserted spinal disc prosthesis</i></p>
406.	84.7	<p><i>Adjunct codes for external fixator devices</i></p> <p><i>Code also any primary procedure performed:</i></p> <p><i>application of external fixator device (<u>78.10, 78.12-78.13, 78.15, 78.17- 78.19</u>)</i></p> <p><i>reduction of fracture and dislocation (<u>79.00-79.89</u>)</i></p>
407.	84.71	<i>Application of external fixator device, monoplanar system</i>
408.	84.72	<p><i>Application of external fixator device, ring system</i></p> <p><i>Ilizarov type</i></p> <p><i>Sheffield type</i></p>
409.	84.73	<p><i>Application of hybrid external fixator device</i></p> <p><i>Computer (assisted) (dependent) external fixator device</i></p> <p><i>Hybrid system using both ring and monoplanar devices</i></p>
410	84.8	<p><i>Insertion, replacement and revision of posterior spinal motio</i></p> <p><i>Dynamic spinal stabilization device(s)</i></p> <p><i>Includes any synchronous facetectomy (partial, total) performed at the same level</i></p> <p><i>Code also any synchronous surgical decompression (foraminotomy, laminectomy, laminotomy), if performed (<u>03.09</u>)</i></p>
411.	84.80	<p><i>Insertion or replacement of interspinous process device(s)</i></p> <p><i>Interspinous process decompression device(s)</i></p> <p><i>Interspinous process distraction device(s)</i></p>
412.	84.81	<p><i>Revision of interspinous process device(s)</i></p> <p><i>Repair of previously inserted interspinous process</i></p>

		<i>device(s)</i>
413.	84.82	<i>Insertion or replacement of pedicle- based dynamic stabilization device(s)</i>
414.	84.83	<i>Revision of pedicle-based dynamic stabilization device(s)</i> <i>Repair of previously inserted pedicle- based dynamic stabilization device(s)</i>
415.	84.84	<i>Insertion or replacement of facet replacement device(s)</i> <i>Facet arthroplasty</i>
416.	84.85	<i>Revision of facet replacement device(s)</i> <i>Repair of previously inserted facet replacement device(s)</i>
417.	84.9	<i>Other operations on musculoskeletal system</i>
418.	84.91	<i>Amputation, not otherwise specified</i>
419.	84.92	<i>Separation of equal conjoined twins</i>
420.	84.93	<i>Separation of unequal conjoined twins</i> <i>Separation of conjoined twins NOS</i>
421.	84.99	<i>Other</i>

**Lampiran 5 Draf Hasil Kegiatan Wawancara Kepada Petugas Koding Di Rumah Sakit Khusus Bedah Hasta Husada**

**DAFTAR PERTANYAAN WAWANCARA**

1. Bagaimana sistem kodifikasi khususnya dalam prosedur bedah di RS Khusus Bedah Hasta Husada ? Apakah masih menggunakan sistem manual?

Prosedur pengkodean selama ini masih menggunakan sistem manual dengan menggunakan Buku ICD 9cm tahun 2010. Selain menggunakan buku ICD 9cm 2010 juga menggunakan rekapan Ms Excel dari prosedur bedah sebelumnya, jadi petugas kodifikasi harus mencari satu persatu dari seluruh file di Ms Excel untuk kemudian mencari prosedur bedah yang sama dengan berkas yang sedang dikoding. Apabila dalam rekapan Ms Excel tidak ada, maka prosedur tersebut termasuk dalam prosedur bedah yang baru, jadi harus menggunakan buku ICD 9cm tahun 2010 sesuai prosedur secara manual.

2. Berapakah jumlah Petugas kodifikasi di RS Khusus Bedah Hasta Husada? Jumlah petugas koding di Rumah Sakit Khusus Bedah Hasta Husada ada 3 orang.

3. Dalam kodifikasi kasus bedah, apakah yang sering terjadi RS Khusus Bedah Hasta Husada ? Dan prosedur apakah yang sering dilakukan? Bedah yang sering terjadi adalah bedah ortopedi & tindakan bedah dalam bedah ortopedi yang sering dilakukan adalah ORIF (Open Reduction with



Internal Fixation). Kemudian untuk prosedur bedah lain selain bedah ortopedi menurut data 3 tahun terakhir adalah Repair Hernia, Prostatectomy, Appendectomy, Laparotomy, Caesar Section, Eksisi dan Insisi

4. Pelaporan Kodefikasi dilakukan dengan cara yang bagaimana?  
? Pelaporan kodefikasi direkap dalam Ms. Excel dan diklasifikasikan menurut jenis tindakan dan dokter penanggung jawabnya pelaporan kodefikasi tindakan tersebut disetor/ditinkan menurut bulan

**Lampiran 6 Surat Pernyataan Kesanggupan Sebagai Penguji/Validator Program Aplikasi Android**

**SURAT PERNYATAAN KESANGGUPAN  
Sebagai Penguji/Validator Program Aplikasi Android**

Berdasarkan Surat Permohonan saudari/saudara tentang kesanggupan menjadi penguji program “Aplikasi Kodefikasi Tindakan Berdasarkan ICD 9cm Pasien Bedah Ortopedi Berbasis Android”, dengan ini saya ;

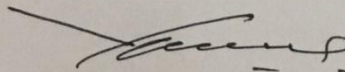
Nama : Mahmud Yunus , S.Kom., M.Pd., M.T.  
Kedudukan Jabatan : Lektor/III D  
Instansi : STMIK PPKIA PRADNYA PARAMITA MALANG

Menyatakan sanggup untuk menjadi penguji/validator dari tugas akhir yang berjudul “Implementasi Aplikasi Kodefikasi Tindakan Berdasarkan ICD 9cm Pasien Bedah Ortopedi Berbasis Android Terhadap Kecepatan Dan Ketepatan Kodefikasi Di Rumah Sakit Khusus Bedah Hasta Husada.”

Demikian surat pernyataan ini saya buat untuk digunakan sebagaimana mestinya.

Malang, 5 Januari 2019

Yang membuat pernyataan



**Mahmud Yunus, S.Kom., M.Pd., M.T.**  
**NIDN. 0716087501**

**Lampiran 7 Surat Pernyataan Validasi Oleh Penguji/Validator Program  
Aplikasi Kodefikasi Bedah Ortopedi**

**SURAT PERNYATAAN VALIDASI**

Saya yang bertanda tangan dibawah ini :

Nama : Mahmud Yunus, S.Kom., M.Pd., M.T.

Jabatan /Golongan : Lektor / III D

Instansi : STMIK PPKIA PRADNYA PARAMITA MALANG

Menyatakan bahwa saya telah melakukan validasi produk tugas akhir dari :

Nama : Regita Mufti Aimmatul Khasanah

NIM : 1604000018

Jurusan : Jurusan Kesehatan Terapan

Prodi : D-III Perekam Medis dan Informasi Kesehatan

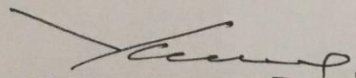
Instansi : Politeknik Kesehatan Kemenkes Malang

Nama Produk : Aplikasi Kodefikasi Tindakan Berdasarkan ICD 9cm Pasien  
Bedah Ortopedi Berbasis Android

Setelah saya lakukan telaah, dengan ini saya menyatakan bahwa isi dari produk  
Tugas Akhir tersebut diatas telah sesuai dengan yang diharapkan.

Malang, 5 Januari 2019

Yang membuat pernyataan

  
**Mahmud Yunus, S.Kom., M.Pd., M.T.**

**NIDN. 0716087501**



**Lampiran 8 Lembar Pengujian Aplikasi**

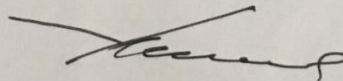
**B. Soal**

No	Pengujian	Penilaian	
		0	1
<b>1.</b>	<b>Halaman Utama</b>		
	a. Jika <i>user</i> memilih icon yang berjudul "ICD 9CM Dictionary" kemudian muncul tampilan pencarian dan beberapa kode tindakan yang dimulai dari kode 76.		✓
	b. Jika <i>user</i> mulai menuliskan kata kunci dalam tindakan bedah ortopedi dibagian "Type Something" kemudian muncul kode yang diinginkan.		✓
	c. Kode dan penjelasan tindakan bedah ortopedi dapat dicari menggunakan kata kunci berupa "kalimat" dan "angka/kode" dimulai dari kode 76 hingga 84.99.		✓
	d. Jika <i>user</i> telah mendapatkan hasil dari pencarian kode bedah, tampilan selanjutnya yakni berupa explanation /penjelasan dari kode tersebut		✓
	e. Jika <i>user</i> menekan kode 77 - 80 terdapat explanation / penjelasan bagian tubuh dimulai dari kode 0 - 9		✓
	f. Jika <i>user</i> menekan tombol kembali maka aplikasi akan kembali ke halaman utama.		✓

2. Navigasi			
a.	Jika <i>user</i> memilih menu navigasi dibagian kiri atas akan muncul tampilan : - Cara Penggunaan Aplikasi - Keluar - Profil singkat dari aplikasi android		✓
b.	Jika <i>user</i> memilih Cara penggunaan aplikasi kemudian akan muncul penjelasan dari penggunaan aplikasi tersebut		✓
c.	Jika <i>user</i> memilih keluar maka aplikasi akan tertutup		✓

Malang, 7 Januari 2019




Yang membuat pernyataan



**Mahmud Yunus, S.Kom., M.Pd., M.T.**















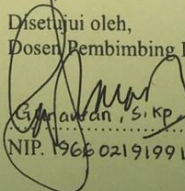
**NIDN. 0716087501**

## Lampiran 9 Surat Ijin Penelitian


	<p style="text-align: center;"><b>KEMENTERIAN KESEHATAN RI</b> <b>BADAN PENGEMBANGAN DAN PEMBERDAYAAN SUMBER DAYA MANUSIA KESEHATAN</b> <b>POLITEKNIK KESEHATAN KEMENKES MALANG</b></p> <p><small>- Kampus Utama : Jalan Besar Ijen No. 77 C Malang 65112. Telepon (0341) 566075, 571388 Fax (0341) 556746 - Kampus I : Jalan Srikoyo No. 106 Jember. Telepon (0331) 486613 - Kampus II : Jalan Ahmad Yani Sumberporong Lawang. Telepon (0341) 427847 - Kampus III : Jalan Dr. Soetomo No. 46 Blitar. Telepon (0342) 801043 - Kampus IV : Jalan KH. Wakhid Hasyim No. 64 B Kediri. Telepon (0354) 773095</small></p> <p><b>Website: <a href="http://www.poltekkes-malang.ac.id">http://www.poltekkes-malang.ac.id</a> E-mail: <a href="mailto:direktorat@poltekkes-malang.ac.id">direktorat@poltekkes-malang.ac.id</a></b></p>	
Nomor	: PP.08.02/6.0/ 1741 /2018	Malang, 21 November 2018
Lampiran	: -	
Hal	: <u><b>Surat Ijin Penelitian</b></u>	
Kepada		
Yth. Direktur RS. Hasta Husada Kepanjen		
Di		
Kabupaten Malang		
Sehubungan dengan penyusunan Laporan Tugas Akhir Mahasiswa Semester V Prodi D-III Perekam Medis dan Informasi Kesehatan Poltekkes Kemenkes Malang TA. 2018/2019, maka bersama ini kami harapkan Bapak/Ibu berkenan untuk memberikan ijin kepada mahasiswa atas nama :		
Nama	: Regita Mufti Aimmatul Khasanah	
NIM	: 1604000018	
Untuk melakukan penelitian di institusi yang Bapak/Ibu pimpin dengan Topik / Judul: <i>Implementasi Aplikasi Kodefikasi Tindakan Berdasarkan ICD 9CM Pasien Bedah Ortopedi Berbasis Android Terhadap Kecepatan dan Ketepatan Kodefikasi di Rumah Sakit Khusus Bedah Hasta Husada</i>		
Pada : Desember 2018 – Februari 2019.		
Adapun data yang akan diambil adalah berkas rekam medis sejumlah 51 berkas dibulan Juni – Agustus 2018.		
Demikian surat ini kami buat. Atas perhatian dan kerjasamanya disampaikan terima kasih.		
<p>Ketua Jurusan Kesehatan Terapan</p>  <b>Dinayah Kholidah, SST, SGz, MPH</b> <b>NIP. 19750921 199703 2 001</b>		
Tembusan Disampaikan Kepada :		
1. Ka. Rekam Medis RS. Hasta Husada		
2. Arsip		



## Lampiran 10 Kartu Bimbingan Laporan Tugas Akhir

	<b>KARTU BIMBINGAN LAPORAN TUGAS AKHIR</b> <b>PRODI D-III</b> <b>JURUSAN PEREKAM MEDIS DAN INFORMASI KESEHATAN</b> <b>POLITEKNIK KESEHATAN KEMENKES MALANG</b>																																								
<p>NIM : 1604000018</p> <p>Nama Lengkap : REGITA MUFTI AHMMATUL KHASANAH</p> <p>Dosen Pembimbing 1 : Gunawan, S.Kp, MMRS</p> <p>Dosen Pembimbing 2 : .....</p> <p>Judul Tugas Akhir : IMPLEMENTASI APLIKASI KODEFIKASI TINDAKAN BERDASARKAN ICD 9CM PASIEN BEDAH ORTOPEDI BERBASIS ANDROID TERHADAP KECEPATAN DAN KETEPATAN KODEFIKASI DI RUMAH SAKIT KHUSUS BEDAH HASTA HUSADA</p>																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">No.</th> <th style="width: 15%;">Tanggal Bimbingan</th> <th style="width: 60%;">Pokok Bahasan</th> <th style="width: 20%;">Paraf Dosen Pembimbing</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1.</td> <td style="text-align: center;">04 Januari 2019</td> <td>Konsultasi hasil aplikasi kodefikasi dan persiapan penelitian</td> <td style="text-align: center;"></td> </tr> <tr> <td style="text-align: center;">2.</td> <td style="text-align: center;">15 Januari 2019</td> <td>Konsultasi hasil pengambilan data pre-test sebelum menggunakan aplikasi di BAB IV</td> <td style="text-align: center;"></td> </tr> <tr> <td style="text-align: center;">3.</td> <td style="text-align: center;">28 Januari 2019</td> <td>Konsultasi hasil pengambilan data post-test dan penyelesaian BAB IV - BAB V</td> <td style="text-align: center;"></td> </tr> <tr> <td style="text-align: center;">4.</td> <td style="text-align: center;">29 Januari 2019</td> <td>Final Konsultasi Abstrak &amp; BAB IV - BAB V</td> <td style="text-align: center;"></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	No.	Tanggal Bimbingan	Pokok Bahasan	Paraf Dosen Pembimbing	1.	04 Januari 2019	Konsultasi hasil aplikasi kodefikasi dan persiapan penelitian		2.	15 Januari 2019	Konsultasi hasil pengambilan data pre-test sebelum menggunakan aplikasi di BAB IV		3.	28 Januari 2019	Konsultasi hasil pengambilan data post-test dan penyelesaian BAB IV - BAB V		4.	29 Januari 2019	Final Konsultasi Abstrak & BAB IV - BAB V																						
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<p>Catatan Untuk Dosen Pembimbing Bimbingan Tugas Akhir</p> <p>Dimulai pada tanggal : .....</p> <p>Diakhiri pada tanggal : .....</p> <p>Jumlah pertemuan : .....</p>																																									
<p>Disetujui oleh, Dosen Pembimbing II</p> <p>.....</p> <p>NIP. ....</p>	<p>Disetujui oleh, Dosen Pembimbing I</p> <p></p> <p>Gunawan, S.Kp, MMRS</p> <p>NIP. 196602191991031004</p>																																								
<p>*Lembar konsultasi tugas akhir tidak boleh hilang</p>																																									

## Lampiran 11 Surat Balasan Ijin Penelitian

	<b>RUMAH SAKIT KHUSUS BEDAH " HASTA HUSADA "</b> Jl. Bromo 98 – 100 Telp. (0341) 399499 Fax. (0341) 399699 E-mail : <a href="mailto:husada.hasta@yahoo.com">husada.hasta@yahoo.com</a> Kepanjen – Malang 65163
Nomor : 801.01/ 211 /100.12/2018	Kepanjen, 04 Desember 2018
Sifat : Biasa	Kepada
Lampiran : -	Yth. Ketua Jurusan Kesehatan Terapan
Perihal : Ijin Penelitian	Poltekkes Kemenkes Malang
	Jl. Besar Ijen No. 77 C
	Di
	<b>MALANG</b>

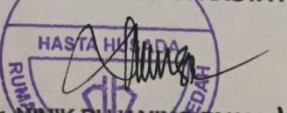
Menunjuk surat dari Ketua Jurusan Terapan Poltekkes Kemenkes Malang tanggal 21 November 2018 Nomor : PP.08.02/6.0/1799/2018 Perihal Surat Ijin Penelitian, dengan ini diberitahukan bahwa pada prinsipnya kami menyetujui dan mengijinkan Mahasiswa Program Studi D-III Perekam Medis dan Informasi Kesehatan Poltekkes Kemenkes Malang melakukan kegiatan penelitian di Rumah Sakit Khusus Bedah Hasta Husada Kepanjen atas

Nama	: REGITA MUFTI AIMMATUL KHASANAH
NIM	: 1604000018
Prodi	: D-III Perekam Medis dan Informasi Kesehatan
Judul Penelitian	: Implementasi Aplikasi Kodefikasi Tindakan Berdasarkan ICD 9CM Pasien Bedah Ortopedi Berbasis Android Terhadap Kecepatan dan Ketepatan Kodefikasi Di Rumah Sakit Khusus Bedah Hasta Husada
Tempat Penelitian	: Sub. Bag. Rekam Medik Rumah Sakit Khusus Bedah Hasta Husada

Adapun biaya serta hal yang berkaitan dengan kegiatan penelitian dimaksud menjadi tanggung jawab pihak Peneliti. Selanjutnya sebelum pelaksanaan penelitian agar berkoordinasi terlebih dahulu dengan Bagian Diklat dan Pengendali Mutu Rumah Sakit Khusus Bedah Hasta Husada Kepanjen.

Demikian atas perhatian dan kerjasamanya disampaikan terima kasih.

DIREKTUR  
RUMAH SAKIT KHUSUS BEDAH HASTA HUSADA

  
dr. NIK PUJANING DYAH

TEMBUSAN disampaikan kepada  
Yth. Sdr. :

1. Direktur sebagai Laporan
2. Ka. Bag. Administrasi & Umum
3. Ka. Sie. Pelayanan



**Lampiran 12 Lembar Observasi Perhitungan Waktu dan Identifikasi Sebelum Menggunakan Aplikasi Kodefikasi**

**LEMBAR OBSERVASI PERHITUNGAN WAKTU DAN IDENTIFIKASI PEMBERIAN KODEFIKASI TINDAKAN BEDAH ORTOPEDI SEBELUM MENGGUNAKAN APLIKASI DI RUMAH SAKIT KHUSUS BEDAH HASTA HUSADA**

<b>NO</b>	<b>NO. RM</b>	<b>TINDAKAN BEDAH ORTOPEDI</b>	<b>KODE ICD</b>	<b>WAKTU / DETIK</b>
1.	027146	<i>Closed Reduction of Separated Ephysis Radius and Ulna</i>	79.42	170 detik
2.	027500	<i>Arthrocentesis</i>	81.91	80 detik
3.	020075	<i>Open Reduction of Fracture with internal fixation tibia &amp; fibula</i>	79.86	64 detik
4.	020820	<i>Other hand tendon transfer or transplantation</i>	82.56	90 detik
5.	020175	<i>Other Repair of ankle</i>	81.49	147 detik
6.	009973	<i>Open Reduction of Fracture with Internal Fixation fracture femur</i>	79.35	82 detik
7.	019177	<i>Excision of bone for graft, tibia fibula</i>	77.77	54 detik
8.	020251	<i>Amputation of toe</i>	84.11	31 detik
9.	013937	<i>Removal of implanted device from patella</i>	78.66	131 detik
10.	006902	<i>Total knee Replacement</i>	81.54	26 detik
11.	018148	<i>Removal of implanted device from tibia and fibula</i>	79.24	83 detik
12.	020640	<i>Open Reduction of fracture without internal fixation phalanx of hand</i>	79.24	83 detik
13.	020100	<i>Arthrocentesis</i>	81.91	30 detik
14.	019520	<i>Other Plastic Opeartions on Muscle</i>	83.87	109 detik
15.	009716	<i>Excision of Other Lesion of Soft Tissue of Hand</i>	82.29	35 detik
16.	020534	<i>Excision of lesion of tendon sheath of hand</i>	82.21	69 detik
17.	020673	<i>Amputation and disarticulation of finger</i>	84.01	59 detik
18.	014998	<i>Bone graft of tibia fibula</i>	78.07	74 detik
19.	020691	<i>Sequestrectomy tibia fibula</i>	77.07	73 detik
20.	020713	<i>Excision of lesion of other soft tissue</i>	83.39	59 detik
21.	005926	<i>Removal of Implanted</i>	78.67	119 detik

		<i>device from tibia and fibula</i>		
22.	019290	<i>Other arthrotomy ankle</i>	80.17	93 detik
23.	020784	<i>Open Reduction of fracture without internal fixation phalanx of hand</i>	79.24	110 detik
24.	020606	<i>Bursectomy</i>	83.5	56 detik
25.	020840	<i>Open Reduction of Fracture With Internal Fixation of Metatarsal</i>	79.37	39 detik
26.	020817	<i>Excision of lesion of other Soft tissue</i>	83.39	75 detik
27.	020912	<i>Removal of implanted device from bone, scapula clavicle and thorax</i>	78.61	159 detik
28.	021087	<i>Open reduction of fracture without internal fixation of radius and ulna</i>	79.22	97 detik
29.	021089	<i>Other suture of muscle or fascia</i>	83.65	70 detik
30.	021194	<i>Other local excision or destruction of lesion of ankle joint</i>	80.87	117 detik
31.	020592	<i>Amputation of toe</i>	84.11	45 detik
32.	021260	<i>Other suture of flexor tendon of hand</i>	82.44	122 detik
33.	021345	<i>Debridement of open fracture site, tibia fibula</i>	79.66	54 detik
34.	031357	<i>Open Reduction of Fracture with Internal Fixation Carpal and Metatarsal</i>	79.33	58 detik
35.	021501	<i>Other Suture of Other tendon of hand</i>	82.45	66 detik
36.	021432	<i>Removal of implanted device from bone humerus</i>	78.62	122 detik
37.	021620	<i>Closed Reduction of dislocation of unspecified site</i>	79.70	35 detik
38.	021618	<i>Other suture of flexor tendon of hand</i>	82.44	58 detik
39.	021994	<i>Closed reduction of separated epiphysis radius and ulna</i>	79.42	80 detik

40.	011462	<i>Excision of lesion of tendon sheath and hand</i>	82.21	55 detik
41.	025712	<i>Other local excision or destruction of lesion of joint wrist</i>	80.83	66 detik
42.	026879	<i>Removal of implanted device from tibia and fibula</i>	78.67	81 detik
43.	027019	<i>Other excision of soft tissue of hand</i>	82.39	27 detik
44.	019942	<i>Other local excision or destruction of lesion of elbow</i>	80.82	75 detik
45.	020905	<i>Open Reduction of fracture without internal fixation humerus</i>	79.21	97 detik
46.	020929	<i>Other Plastic Opeartions on Muscle</i>	83.87	80 detik
47.	020946	<i>Closed Reduction of Separated Ehiphysis Other specified bone</i>	79.49	70 detik
48.	020251	<i>Sequestrectomy Radius and Ulna</i>	77.03	75 detik
49.	020049	<i>Disarticulation of ankle</i>	84.13	55 detik
50.	020840	<i>Toe Reattachment</i>	84.25	110 detik
51.	027018	<i>Reconstruction of muscle and tendon</i>	83.7	159 detik



**Lampiran 13 Lembar Observasi Perhitungan Waktu dan Identifikasi Setelah Menggunakan Aplikasi Kodefikasi**

**LEMBAR OBSERVASI PERHITUNGAN WAKTU DAN IDENTIFIKASI PEMBERIAN KODEFIKASI TINDAKAN BEDAH ORTOPEDI SETELAH MENGGUNAKAN APLIKASI DI RUMAH SAKIT KHUSUS BEDAH HASTA HUSADA**

NO	NO. RM	TINDAKAN BEDAH ORTOPEDI	KODE ICD	WAKTU PRE TEST / DETIK	WAKTU POST TEST / DETIK
1.	027146	<i>Closed Reduction of Separated Epiphysis Radius and Ulna</i>	79.42	170 detik	33 detik
2.	027500	<i>Arthrocentesis</i>	81.91	80 detik	20 detik
3.	020075	<i>Open Reduction of Fracture with internal fixation tibia &amp; fibula</i>	79.86	64 detik	12 detik
4.	020820	<i>Other hand tendon transfer or transplantation</i>	82.56	90 detik	8 detik
5.	020175	<i>Other Repair of ankle</i>	81.49	147 detik	14 detik
6.	009973	<i>Open Reduction of Fracture with Internal Fixation fracture femur</i>	79.35	82 detik	14 detik
7.	019177	<i>Excision of bone for graft, tibia fibula</i>	77.77	54 detik	17 detik
8.	020251	<i>Amputation of toe</i>	84.11	31 detik	8 detik
9.	013937	<i>Removal of implanted device from patella</i>	78.66	131 detik	36 detik
10.	006902	<i>Total knee Replacement</i>	81.54	26 detik	10 detik
11.	018148	<i>Removal of implanted device from tibia and fibula</i>	79.24	83 detik	19 detik
12.	020640	<i>Open Reduction of fracture without internal fixation phalanx of hand</i>	79.24	83 detik	19 detik
13.	020100	<i>Arthrocentesis</i>	81.91	30 detik	5 detik
14.	019520	<i>Other Plastic Operations on Muscle</i>	83.87	109 detik	22 detik
15.	009716	<i>Excision of Other Lesion of Soft Tissue of Hand</i>	82.29	35 detik	13 detik
16.	020534	<i>Excision of lesion of tendon sheath of hand</i>	82.21	69 detik	44 detik
17.	020673	<i>Amputation and disarticulation of finger</i>	84.01	59 detik	10 detik
18.	014998	<i>Bone graft of tibia fibula</i>	78.07	74 detik	11 detik
19.	020691	<i>Sequestrectomy tibia fibula</i>	77.07	73 detik	6 detik
20.	020713	<i>Excision of lesion of</i>	83.39	59 detik	15 detik

		<i>other soft tissue</i>			
21.	005926	<i>Removal of Implanted device from tibia and fibula</i>	78.67	119 detik	40 detik
22.	019290	<i>Other arthrotomy ankle</i>	80.17	93 detik	20 detik
23.	020784	<i>Open Reduction of fracture without internal fixation phalanx of hand</i>	79.24	110 detik	12 detik
24.	020606	<i>Bursectomy</i>	83.5	56 detik	10 detik
25.	020840	<i>Open Reduction of Fracture With Internal Fixation of Metatarsal</i>	79.37	39 detik	16 detik
26.	020817	<i>Excision of lesion of other Soft tissue</i>	83.39	75 detik	22 detik
27.	020912	<i>Removal of implanted device from bone, scapula clavicle and thorax</i>	78.61	159 detik	26 detik
28.	021087	<i>Open reduction of fracture without internal fixation of radius and ulna</i>	79.22	97 detik	15 detik
29.	021089	<i>Other suture of muscle or fascia</i>	83.65	70 detik	12 detik
30.	021194	<i>Other local excision or destruction of lesion of ankle joint</i>	80.87	117 detik	14 detik
31.	020592	<i>Amputation of toe</i>	84.11	45 detik	8 detik
32.	021260	<i>Other suture of flexor tendon of hand</i>	82.44	122 detik	12 detik
33.	021345	<i>Debridement of open fracture site, tibia fibula</i>	79.66	54 detik	21 detik
34.	031357	<i>Open Reduction of Fracture with Internal Fixation Carpal and Metatarsal</i>	79.33	58 detik	19 detik
35.	021501	<i>Other Suture of Other tendon of hand</i>	82.45	66 detik	8 detik
36.	021432	<i>Removal of implanted device from bone humerus</i>	78.62	122 detik	13 detik
37.	021620	<i>Closed Reduction of dislocation of unspecified site</i>	79.70	35 detik	27 detik
38.	021618	<i>Other suture of flexor</i>	82.44	58 detik	7 detik



		<i>tendon of hand</i>			
39.	021994	<i>Closed reduction of separated epiphysis radius and ulna</i>	79.42	80 detik	16 detik
40.	011462	<i>Excision of lesion of tendon sheath and hand</i>	82.21	55 detik	32 detik
41.	025712	<i>Other local excision or destruction of lesion of joint wrist</i>	80.83	66 detik	7 detik
42.	026879	<i>Removal of implanted device from tibia and fibula</i>	78.67	81 detik	22 detik
43.	027019	<i>Other excision of soft tissue of hand</i>	82.39	27 detik	9 detik
44.	019942	<i>Other local excision or destruction of lesion of elbow</i>	80.82	75 detik	15 detik
45.	020905	<i>Open Reduction of fracture without internal fixation humerus</i>	79.21	97 detik	17 detik
46.	020929	<i>Other Plastic Opeartions on Muscle</i>	83.87	80 detik	8 detik
47.	020946	<i>Closed Reduction of Separated Ephiphysis Other specified bone</i>	79.49	70 detik	16 detik
48.	020251	<i>Sequestrectomy Radius and Ulna</i>	77.03	75 detik	8 detik
49.	020049	<i>Disarticulation of ankle</i>	84.13	55 detik	9 detik
50.	020840	<i>Toe Reattachment</i>	84.25	110 detik	5 detik
51.	027018	<i>Reconstruction of muscle and tendon</i>	83.7	159 detik	12 detik

**Lampiran 14 Surat Pernyataan Validasi Hasil Kodefikasi Bedah Ortopedi  
Sebelum Menggunakan Aplikasi Dan Setelah Menggunakan  
Aplikasi**

**SURAT PERNYATAAN VALIDASI**

Saya yang bertanda tangan dibawah ini :

Nama : Djoko Wahyudi, Amd.PK, S.AP., M.AP.  
Jabatan Fungsional : Perekam Medis Penyelia  
Pangkat/Golongan : Penata Tingkat 1 / IIID  
Kedudukan Jabatan : Petugas Verifikasi Coding  
Instansi : RSUD Dr. Saiful Anwar Malang

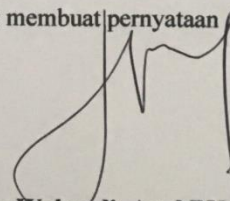
Menyatakan bahwa saya telah melakukan telaah terhadap kodefikasi tindakan bedah ortopedi yang ada di lembar observasi sebelum menggunakan aplikasi, dan buku ICD 9CM Revisi tahun 2010 untuk digunakan sebagai acuan dalam proses kodefikasi secara manual serta melakukan telaah validasi produk prosedur tindakan tugas akhir dari :

Nama : Regita Mufti Aimmatul Khasanah  
NIM : 1604000018  
Jurusan : Kesehatan Terapan  
Prodi : D-III Perekam Medis dan Informasi Kesehatan  
Nama Produk : Aplikasi Kodefikasi Tindakan Berdasarkan ICD 9CM Pasien Bedah Ortopedi Berbasis Android di Rumah Sakit Khusus Bedah Hasta Husada.

Setelah saya lakukan telaah, dengan ini saya menyatakan bahwa isi dari produk Tugas Akhir dan Lembar Observasi sebelum menggunakan aplikasi, tersebut diatas telah sesuai dengan aturan kodefikasi diagnosa tindakan yang ada di buku ICD-9CM 2010 dan layak untuk digunakan sebagai acuan dalam proses kodefikasi diagnosa kelompok tindakan bedah ortopedi "*Operation on The Musculuskeletal System*" (76 – 84.99).

Malang, 25 Januari 2019

Yang membuat pernyataan


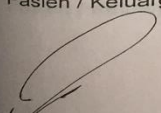
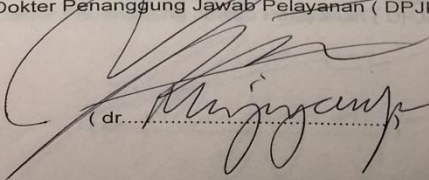


**Djoko Wahyudi, Amd.PK., S.AP., M.AP**

**NIP. 196805271989031007**



**Lampiran 15 Resume Medis Pasien Dengan Kasus Tindakan Bedah  
Ortopedi**

		RM 15 A
		<b>RUMAH SAKIT KHUSUS BEDAH "HASTA HUSADA"</b> Jl. Bromo 98 - 100 Kepanjen- Malang 65163 Telp. (0341) 399499 Fax. (0341) 399699 e-mail : husada.hasta@yahoo.com
		NO. RM : 02746 NAMA PASIEN : <span style="background-color: black; color: black;">XXXXXXXXXX</span> TANGGAL LAHIR : 24/10/2003
<b>LEMBAR RINGKASAN KELUAR</b>		
1	Masuk Rawat Inap	Hari : Minggu tanggal : 23/12/18 Pukul : 23.00
2	Keluar Rawat Inap	Hari : Senin tanggal : 24/12/2018 Pukul : 17.00
3	Alasan Di Rawat	
4	Diagnosa Masuk	
	Diagnosa Utama	FRACTURE OF LOWER END OF RADIUS Kode ICD X :
5	Diagnosa Sekunder	Kode ICD X : Kode ICD X : Kode ICD X :
6	Tindakan	CLOSED REDUCTION OF SCAPA - RATED EPIDURALIS, RADIUS & ULNAR Kode ICD9 : 79.42
7	Temuan Fisik Yang Penting	
8	Tindakan Diagnostik ( Lab, PA, USG, dll )	
9	Prosedur Yang Dilakukan	
10	Oba Yang Diberikan ( Termasuk Obat Yang Dibawa Pulang )	ASMEF 3x1/2 F/p nyen
11	Instruksi Tindak Lanjut ( Follow Up / Kontrol )	poli Ortho
12	Cara Keluar RS	<input checked="" type="checkbox"/> Pulang Atas Persetujuan <input type="checkbox"/> Pulang Atas Permintaan Sendiri <input type="checkbox"/> Rujuk ..... <input type="checkbox"/> Meninggal <input type="checkbox"/> Lain - lain .....
		<b>Kondisi Saat Pulang</b>
		Keadaan Umum : baik CEP
		Tanda Vital : DM
		Pemeriksaan Fisik : -
		Catatan hal Penting : luka baik boleh kena air
13	Jadwal Kontrol	Hari/Tanggal/Jam : poli Ortho, Jumat 4-1-2019 10. Hari/Tanggal/Jam :
Pasien / Keluarga 		Kepanjen, 24/12/2018 Dokter Penanggung Jawab Pelayanan ( DPJP )  ( dr. .... )
Catatan : Bila Mendesak Datang Ke IGD		



## Lampiran 16 Rekapitulasi Bulanan Rumah Sakit Khusus Bedah Hasta Husada Mengenai Prosedur Koding Di Ms Excel

- ENTRI RAWAT INAP rs hasta 2018 - Microsoft Excel (Product Activation Failed)

	C	D	E	F	G	H	I	J
20	011946		59	2	4	Non-insulin-dependent diabetes mellitus without complications (E11.9)	dr Nurike Sp PD	
21	021136		48	3	6	Benign neoplasm of thyroid gland ( D 34 )	dr Deddy Sp B	√
22						Excision of lesion of thyroid ( 06.31 )		
23	021201		38	3	4	Radial styloid tenosynovitis [de quervain], hand (M65.44)	dr Mujiyono Sp OT	√
24						Excision of lesion of tendon sheath of hand (82.21)		
25	021212		21	3	4	Blighted ovum and nohydatiform mole ( O 02.2 )	dr Widi Hatmaka Sp.Og	√
26						Curettage ( 69.01 )		
27	021194		27	3	4	Ganglion (M67.4)	dr Mujiyono Sp OT	√
28						Other local excision or destruction of lesion of ankle joint (80.87)		
29	021222		39	3	6	Premature rupture of membranes, onset of labour after 24 hours (O42.1)	dr Widi Hatmaka Sp.Og	√
30						Other cesarean section of unspecified type (74.99)		
31	021238	BBL		3	8	Newborn affected by Cesarean delivery ( P 03.4 )	dr Yuni Sp A	
32	020251		70	3	6	Non-insulin-dependent diabetes mellitus with peripheral circulatory complications E11.5	dr Mujiyono Sp OT	√
33						Anemia ( D64.9 )		
34						Hypoalbuminemia		
35						below knee amputation		
36	015699	13		3	4	Ulcer of lower limb, not elsewhere classified (L97)	dr Deddy Sp B	√
37						Excisional debridement of wound, infection, or burn (86.22)		
38	020592		40	4	5	Non-insulin-dependent diabetes mellitus with peripheral circulatory complications (E11.5)	dr Mujiyono Sp OT	√
39						Amputation of toe (84.11)		
40	021223		BBL	4	5	Newborn affected by Cesarean delivery ( P 03.4 )	dr Yuni Sp A	
41	021098	68		4	8	Calculus in bladder		
42						Vesicolitotomy		

## Lampiran 17 Hasil Pembuatan Kata Kunci Oleh Peneliti Untuk Keperluan Database Aplikasi Kodefikasi Bedah Ortopedi

No	ICD-9CM	Nama Tindakan	Deskripsi Tindakan Musculoskeletal System
1	*76	Operations on facial	Operations on facial bones and joints
2	*76.0	Incision of facial	Incision of facial bone without division
3	*76.01	Sequestrectomy / Removal	Sequestrectomy of facial bone
4	*76.09	Other / Reopening	Other incision of facial bone
5	*76.1	Diagnostic on facial	Diagnostic procedures on facial bones and joints
6	*76.11	Biopsy of facial	Biopsy of facial bone
7	*76.19	Other diagnostic	Other diagnostic procedures on facial bones and joints
8	*76.2	Local / destruction of facial	Local excision or destruction of lesion of facial bone
9	*76.3	ostectomy of facial	Partial ostectomy of facial bone
10	*76.31	Mandibulectomy / Hemimandibulectomy	Partial mandibulectomy
11	*76.39	Partial ostectomy / Hemimaxillectomy	Partial ostectomy of other facial bone
12	*76.4	excision of facial / reconstruction of facial	Excision and reconstruction of facial bones
13	*76.41	Mandibulectomy	Total mandibulectomy with synchronous reconstruction
14	*76.42	mandibulectomy	Other total mandibulectomy
15	*76.43	reconstruction of mandible	Other reconstruction of mandible
16	*76.44	ostectomy / synchronous	Total ostectomy of other facial bone with synchronous reconstruction
17	*76.45	ostectomy total	Other total ostectomy of other facial bone
18	*76.46	reconstruction	Other reconstruction of other facial bone
19	*76.5	arthroplasty / Temporomandibular	Temporomandibular arthroplasty
20	*76.6	Repair facial bone / orthognathic	Other facial bone repair and orthognathic surgery
21	*76.61	closed osteoplasty / gigni / mandibular	Closed osteoplasty [osteotomy] of mandibular ramus
22	*76.62	open osteoplasty / mandibular	Open osteoplasty [osteotomy] of mandibular ramus
23	*76.63	osteoplasty body of mandible	Osteoplasty [osteotomy] of body of mandible
24	*76.64	orthognathic / surgery	Other orthognathic surgery on mandible

## Lampiran 18 Manual Book Aplikasi Kodefikasi Bedah Ortopedi

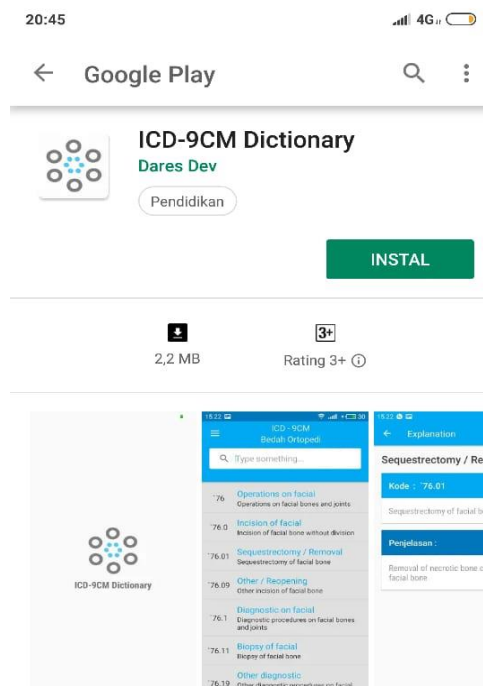
### Manual Book

#### Aplikasi Kodefikasi Tindakan Bedah Ortopedi

Sesuai dengan ICD 9CM Revisi 2010

Disini akan dijelaskan tahapan-tahapan cara menggunakan aplikasi kodefikasi tindakan bedah ortopedi di *Smartphone* Anda. Sebelumnya pastikan pada *Smartphone* Anda adalah jenis *Smartphone android* dan sudah memiliki link aplikasi.

1. Aplikasi kodefikasi tindakan bedah ortopedi dapat di download di *Google Play*



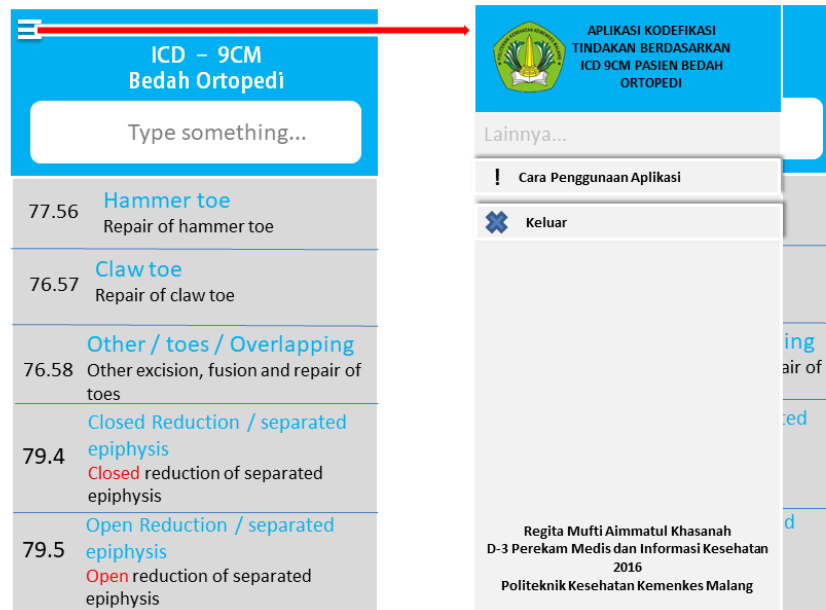
Merupakan aplikasi kamus prosedur tindakan dengan ruang lingkup bedah ortopedi

[Selengkapnya](#)

*Store.*

2. Setelah aplikasi ter-install di *Smartphone* Anda, kemudian bisa langsung digunakan.

Tampilan awal dari aplikasi kodefikasi tindakan bedah ortopedi adalah sebagai berikut.



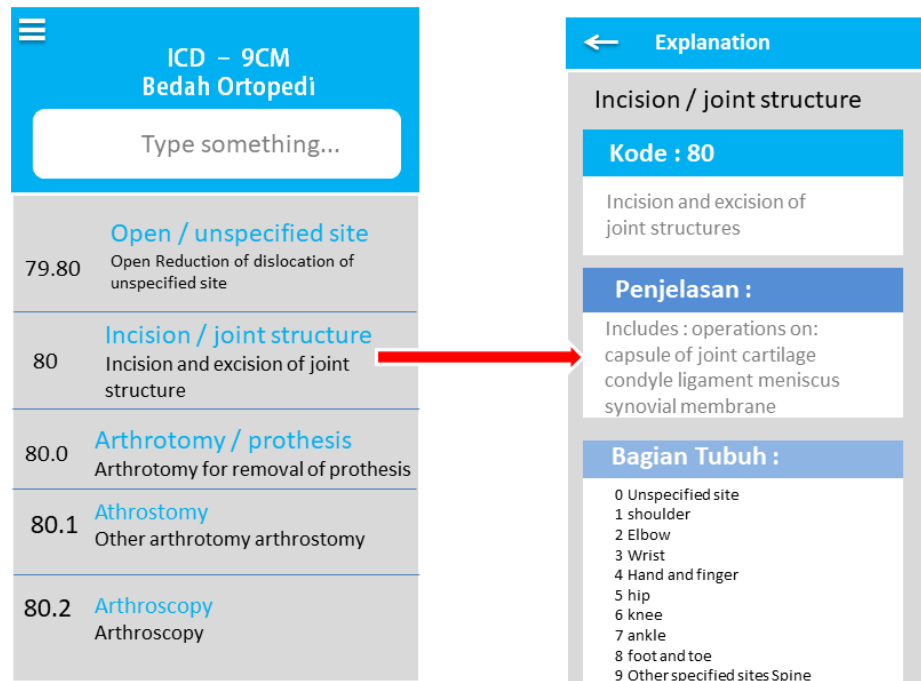
Tampilan diatas adalah tampilan pada Menu Utama dan Navigasi dari aplikasi kodefikasi tindakan bedah ortopedi.

3. Tata cara pencarian kode tindakan bedah ortopedi adalah menggunakan kata kunci.

No	ICD-9CM	Nama Tindakan	Deskripsi Tindakan Musculoskeletal System
1	76	Operations on facial	Operations on facial bones and joints
2	76.0	Incision of facial	Incision of facial bone without division
3	76.01	Sequestrectomy / Removal	Sequestrectomy of facial bone
4	76.09	Other / Reopening	Other incision of facial bone
5	76.1	Diagnostic on facial	Diagnostic procedures on facial bones and joints
6	76.11	Biopsy of facial	Biopsy of facial bone
7	76.19	Other diagnostic	Other diagnostic procedures on facial bones and joints
8	76.2	Local / destruction of facial	Local excision or destruction of lesion of facial bone
9	76.3	ostectomy of facial	Partial ostectomy of facial bone
10	76.31	Mandibulectomy / Hemimandibulectomy	Partial mandibulectomy Hemimandibulectomy
11	76.39	Partial ostectomy / Hemimaxillectomy	Partial ostectomy of other facial bone
12	76.4	excision of facial / reconstruction of facial	Excision and reconstruction of facial bones
13	76.41	Mandibulectomy	Total mandibulectomy with synchronous reconstruction
14	76.42	mandibulectomy	Other total mandibulectomy
15	76.43	reconstruction of mandible	Other reconstruction of mandible
16	76.44	ostectomy / synchronous	Total ostectomy of other facial bone with synchronous reconstruction
17	76.45	ostectomy total	Other total ostectomy of other facial bone
18	76.46	reconstruction	Other reconstruction of other facial bone
19	76.5	arthroplasty / Temporomandibular	Temporomandibular arthroplasty
20	76.6	Repair facial bone / orthognathic	Other facial bone repair and orthognathic surgery
21	76.61	closed osteoplasty / gigi / mandibular	Closed osteoplasty [osteotomy] of mandibular ramus
22	76.62	open osteoplasty / mandibular	Open osteoplasty [osteotomy] of mandibular ramus
23	76.63	osteoplasty body of mandible	Osteoplasty [osteotomy] of body of mandible
24	76.64	orthognathic / surgery	Other orthognathic surgery on mandible

Pada lingkaran merah diatas, merupakan beberapa contoh kata kunci untuk mencari jenis tindakan dalam bedah ortopedi

4. Kata kunci tersebut dapat diketik dibagian *'Type Something'*
5. Tampilan selanjutnya yakni penjelasan dari setiap kode tindakan bedah yang Anda cari



6. Penjelasan 'Bagian Tubuh' hanya dapat ditemukan dalam kode 77 sampai 80.
7. Menu Navigasi di bagian kiri atas berisi 'Cara Penggunaan Aplikasi' dan Menu Keluar.

8. Apabila Anda menekan menu 'Keluar' maka Anda akan keluar dari Aplikasi Kodefikasi Tindakan Bedah Ortopedi

The image shows a screenshot of the application interface on the left and a list of usage instructions on the right. A red arrow points from the 'Cara Penggunaan Aplikasi' menu item in the application to the first item in the list.

**APLIKASI KODEFIKASI TINDAKAN BERDASARKAN ICD 9CM PASIEN BEDAH ORTOPEDI**

Lainnya...

! Cara Penggunaan Aplikasi

✕ Keluar

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d

Regita Mufti Aimmatul Khasanah  
D-3 Perekam Medis dan Informasi Kesehatan  
2016  
Politeknik Kesehatan Kemenkes Malang

**Cara Penggunaan Aplikasi**

1. Kode bedah ortopedi yang terdapat dalam kamus ini sesuai dengan ICD 9CM revisi tahun 2010
2. Pencarian dapat berdasarkan kalimat "kata kunci" atau dengan kode tindakan "angka" sesuai dengan tindakan pasien
3. Pilih kode tindakan yang sesuai
4. Teliti juga penjelasan dan bagian tubuh yang sesuai dengan berkas rekam medis

## Lampiran 19 Hasil Uji Statistik Terhadap Waktu Kodefikasi Dokumen Rekam Medis Pasien Bedah Ortopedi menggunakan Paired T-test

### → T-Test

[DataSet1]

**Paired Samples Statistics**

	Mean	N	Std. Deviation	Std. Error Mean
Pair 1 Sebelum	79,88	51	35,026	4,905
Sesudah	15,96	51	8,890	1,245

**Paired Samples Correlations**

	N	Correlation	Sig.
Pair 1 Sebelum & Sesudah	51	,316	,024

**Paired Samples Test**

		Paired Differences				t	df	Sig. (2-tailed)	
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower				Upper
Pair 1	Sebelum - Sesudah	63,922	33,301	4,663	54,556	73,288	13,708	50	,000

## Lampiran 20 Dokumentasi Sosialisasi

### Dokumentasi Sosialisasi Penggunaan Aplikasi Kodefikasi Bedah Ortopedi kepada Petugas Koding di Rumah Sakit Khusus Bedah Hasta Husada





**Kegiatan Implementasi Aplikasi terhadap proses pengkodean berkas rekam medis pasien bedah ortopedi di Rumah Sakit Khusus Bedah Hasta Busada**



**Lampiran 21 Pedoman Observasi Hasil Sosialisasi Aplikasi Kodefikasi Bedah Ortopedi**

Tabel Pedoman Observasi Hasil Sosialisasi Aplikasi Kodefikasi Bedah Ortopedi

Materi Sosialisasi	Kompeten			Tidak Kompeten		
	R.1	R. 2	R.3	R.1	R.2	R.3
Proses <i>download</i> di <i>Google Play Store</i>	v	v	v			
Tampilan awal dari aplikasi dapat dibuka di <i>smartphone</i> responden	v	v	v			
Proses pencarian kode bedah menggunakan kata kunci	v	v	v			
Responden dapat membuka penjelasan dari hasil pencarian	v	v	v			
Responden dapat membuka menu navigasi	v	v	v			
Responden dapat membuka tampilan “Cara Penggunaan Aplikasi”	v	v	v			
Responden dapat menutup aplikasi	v	v	v			

Keterangan :

R.1 = Responden 1

R.2 = Responden 2

R.3 = Responden 3