COVID-19:
Journal of Health, Medical Records and Pharmacy
https://jurnal.devitara.or.id/index.php/sehat
E-ISSN: 3032-4033 Volume 2 Nomor 2 Tahun 2025

The Description of Work Stress Among Medical Record Officers in the Coding Section at Haji General Hospital Medan in 2024

[1]Siti Faadyah, [2]Zulham Andi Ritonga, [3]Siddik Karo Karo, Delisman Hulu
[1,2,3,4] Universitas Imelda Medan

ARTICLE INFO

Keywords:
Work Stress,
Medical Record Officers,
Coding Section,
Workload,
work-related conflicts

ABSTRACT

Stress is the result of an imbalance between demands and the resources an individual possesses—the greater the gap, the higher the level of stress experienced, which can pose a threat to well-being. The aim of this study was to describe the work stress experienced by medical record officers in the coding section at Haji General Hospital Medan in 2024. This study employed a qualitative research method. The informants included four individuals: one outpatient coding officer, two inpatient coding officers, and one head of the medical record installation. The findings revealed that the causes of work stress among coding officers included workload, work-related conflicts, inadequate work equipment, and poor working environment. It is recommended that the hospital provide adequate workspace and facilities that ensure comfort for the officers. Additionally, coding officers should pay more attention to task distribution and provide education to other healthcare workers to ensure timely delivery of medical record files for coding. Officers must also maintain effective communication with other healthcare personnel to prevent conflicts and misunderstandings.

Email:
sitifaadyah@gmail.com

INTRODUCTION

Based on the Regulation of the Minister of Health of the Republic of Indonesia No. 48 of 2016 concerning occupational health and safety standards in office settings, all companies are urged to take preventive measures against psychosocial hazards or work-related stress as an effort to protect the health and well-being of employees. In Indonesia today, the number of workers continues to increase each year, which naturally intensifies competition, demands, and workloads faced by employees. In addition, the pressure to meet the demands of modern work life has become a stressor stimulus for workers, commonly referred to as work-related stress (Munandar, 2012).

Stress results from an imbalance between demands and the resources an individual possesses; the greater the disparity, the higher the level of stress experienced by the individual, which may become threatening (Asih et al., 2018). Work stress creates an imbalance between physical and psychological conditions, affecting a worker's emotions, cognitive processes, and overall condition. It is also one of the factors that can hinder and disrupt individual productivity in the workplace (Sartika, 2023). Work-related stress experienced by employees can have both positive and negative impacts on the individuals themselves as well as on the organization (Tewal et al., 2017).

A study by Ambarwati et al. (2021) at Dr. Sardjito General Hospital Yogyakarta found that work stress experienced by medical record officers was caused by an uncomfortable physical work environment, which reduced concentration and thus decreased performance. Conflicts between family responsibilities and institutional demands—such as expectations for quick and accurate performance despite system malfunctions—also created pressure on medical record officers in carrying out their duties.

A study by Rosita & Cahyani (2019) at PKU Muhammadiyah Hospital in Surakarta found several factors that contribute to work-related stress, including excessive workload or task demands, uncomfortable interpersonal relationships, unmet work targets, and the predominance of female staff members who are more prone to experiencing work stress.

Based on a preliminary survey conducted by the researcher at Haji General Hospital Medan through interviews with coding staff, the causes of work stress include a high workload, interpersonal

COVID-19:
Journal of Health, Medical Records and Pharmacy
https://jurnal.devitara.or.id/index.php/sehat
E-ISSN: 3032-4033 Volume 2 Nomor 2 Tahun 2025

conflicts, and inadequate work equipment. In addition, observational findings revealed that poor physical working conditions also contribute to work-related stress.

METHODS

This qualitative study aims to describe the work-related stress experienced by medical record coding staff at Haji General Hospital Medan in 2024, using an approach that emphasizes understanding the meaning of events and interactions from the researcher's perspective without employing statistical procedures. The study was conducted at Haji General Hospital Medan from April to October 2024, with data collection in June. This location was chosen due to the presence of work stress issues among coding staff and the absence of previous similar studies. The research involved four informants: one outpatient coding officer, two inpatient coding officers, and the head of the medical record installation. Conceptual definitions in this study refer to the explanation of concepts based on other constructs, which are hypothetical and not directly observable. The conceptual definitions include: medical records as documents of patient services; the coding unit as the workplace for coding tasks; work stress as a response to demands that exceed the capacity of coding staff; workload as tasks that must be completed within a certain time frame; conflict as disagreements among staff; work equipment as tools that assist in task completion; and work environment as the surrounding conditions that affect performance. Factors causing work-related stress include workload, conflict, environment, and work equipment.

This study employed two primary instruments for data collection: interview guidelines and observation sheets. The interview guidelines guided the researcher in eliciting information from the informants, while the observation sheets were used to record direct findings in the field. Data collection techniques included in-depth interviews and observations. Primary data were obtained directly from medical record officers in the coding unit, while secondary data were gathered from documents or other sources. The interviews consisted of 18 questions covering aspects such as workload, conflict, work equipment, and work environment.

Data analysis was carried out in four stages: (1) data collection through interviews and observations, (2) data reduction by filtering and categorizing information into concepts and themes, (3) data presentation in a structured format to facilitate interpretation, and (4) drawing conclusions continuously throughout the data collection process by identifying patterns, causal relationships, and the meaning of the information obtained.

RESULT AND DISCUSSION

Results

This study involved four informants, consisting of one head of the medical records unit, two inpatient coding officers, and one outpatient coding officer at Haji General Hospital Medan. The characteristics of the informants in this study are described as follows:

Table 1. Characteristics of Research Informants at Haji General Hospital Medan, 2024

Informant Code	Age (Years)	Gender	Education	Position	Length of Service
A. I (Informant 1)	26	Female	Diploma (D-III) in Medical Records	Coding Staff	3 Years
R. A (Informant 2)	28	Female	Diploma (D-III) in Medical Records	Coding Staff	3 Years
L (Informant 3)	24	Female	Bachelor's Degree in Medical Education	Coding Staff	6 Months
D. I (Informant 4)	43	Female	Diploma (D-III) in Medical Records	Head of Unit	19 Years

COVID-19:
Journal of Health, Medical Records and Pharmacy
https://jurnal.devitara.or.id/index.php/sehat
E-ISSN: 3032-4033 Volume 2 Nomor 2 Tahun 2025

Based on the characteristics table, there were four informants in this study, consisting of one head of the medical records unit, two inpatient coding staff, and one outpatient coding staff at Haji General Hospital Medan. All informants were female, with ages ranging from 24 to 43 years. In terms of educational background, three informants held a Diploma (D-III) in Medical Records, while one informant held a Bachelor's degree in Medical Education. The informants' length of service varied from six months to nineteen years.

Based on interview results, it was found that workload is one of the contributing factors to work-related stress among medical record officers in the coding division. Several aspects that influence this workload include the addition of tasks, obstacles in the work process, insufficient working time, shortage of personnel, and limited participation in coding training. Collectively, these factors may trigger job stress experienced by the officers. The informants' statements regarding the workload they experienced are as follows:

Workload

Workload of Medical Record Coding Officers

Based on the results of in-depth interviews, one of the causes of work-related stress among medical record coding officers is the presence of additional tasks beyond their main duties. All informants stated that, in addition to performing the coding process for medical record files, they are also required to carry out other tasks such as entering the coding results into the system and covering for colleagues who are absent.

As stated by the informants

"Entri lah ya, kan entri termasuk… Terus kadang kalau, ee… misalkan teman nggak datang, menggantikan teman." Informan 1

"Tugas tambahan ya… Paling saya mengarahkan mereka untuk mengentri hasil koding itu, dek." Informan 4

These findings indicate that an increase in workload, both directly and indirectly, serves as a trigger for stress, particularly when staff members are required to perform multiple roles or responsibilities simultaneously.

Challenges in Performing Medical Record Coding Tasks

In-depth interview results revealed that medical record coding staff face various technical obstacles in carrying out their daily duties, which contribute to the emergence of work-related stress. The main challenges reported by informants include discrepancies in medical record documents, such as incomplete files, delayed receipt of records by the coding unit, and difficulties in reading physicians' handwriting.

"Kendalanya? Itulah berkas nggak lengkap, berkas lama nyampe, apa lagi ya… tulisan dokter yang nggak terbaca, itu-itu aja sih, dek." Informan 1

"Kendalanya palingan ya kalau nggak didiagnosis sama dokter, tulisan nggak terbaca… itu aja sih, dek. Kalau nggak, ya lama pengantarannya." Informan 2

"Kalau kendalanya dalam mengkoding ya… kalau misalkan hasil pemeriksaannya itu nggak ada di rekam medisnya itu, dek, jadi kendala. Terus pun tulisan dokternya ini kadang susah dibaca, jadi kakak harus konfirmasi lagi sama dokternya." Informan 3

"Dari yang saya perhatikan, dek, mereka sering berkendala sama berkas yang nggak lengkap atau nggak terbaca, jadi yah harus konfirmasi ke DPJP-nya." Informan 4

From the four statements above, it can be concluded that the quality and completeness of medical record documents, as well as the legibility of physicians' handwriting, are the main obstacles in carrying out coding tasks, and constitute one of the causes of work-related stress.

COVID-19:
Journal of Health, Medical Records and Pharmacy
https://jurnal.devitara.or.id/index.php/sehat
E-ISSN: 3032-4033 Volume 2 Nomor 2 Tahun 2025

Need for Additional Coding Staff

All informants stated that the number of medical record coding staff is currently very limited and therefore not proportional to the increasing workload. This situation often leads to work piling up and triggers work-related stress due to time constraints in completing the coding process, especially during the end-of-month period. The informants stated:

"Kayaknya perlu penambahan, soalnya pasien makin lama makin banyak, kami cuma berdua yang rawat inap." Informan 1

"Kalau menurut kakak pribadi, dek, perlu karena ginilah, keteteran kerja. Terkadang numpuklah berkas rekam medis yang mau dikoding." Informan 2

"Perlu sih, sekarangnya aja udah pada keteteran nyelesain pengkodingan, apalagi kalau udah akhir bulan gini, yang banyaklah itu. Ditambah cuma kakak sendiri pulak yang rawat jalan, dek." Informan 3

"Kalau ibu lihat ya, perlu penambahan koder karena untuk tiga orang aja masih kewalahan, jadi perlulah ditambah lagi." Informan 4

Based on the statements of the four informants, it can be concluded that the addition of coding personnel is highly necessary to reduce excessive workload and prevent delays in completing medical record coding.

Staff Participation in Coding Training

The results of the interviews show that staff participation in coding training remains relatively low. Some informants reported attending training only once a year, while others had never participated in any training due to various reasons such as time constraints, leave schedules, or a rotating training system. This lack of training potentially affects staff competence and increases the work-related pressure experienced by coding personnel. The informants explained:

"Setahun sekali, dek. Terakhir kali itu enam bulan yang lalu." Informan 1

"Nggak pernah, dek. Nggak males sih, cuman setiap dapat (jadwal), lagi cuti." Informan 2

"Kakak kerja di sini baru 6 bulan, dek, jadi belum pernah ngikutin pelatihan apa pun. Mungkin dalam waktu dekat ini, dek." Informan 3

"Ganti-gantian gitu, dek. Misalnya tahun ini satu, nanti pelatihan selanjutnya bergilir dibuat." Informan 4

These findings indicate that the opportunities and frequency for participating in coding training remain very limited, both due to uneven training systems and personal constraints. Ultimately, this can affect the effectiveness and accuracy of the medical record coders' work.

Workplace Conflict

Based on interviews with informants from the medical records coding unit at RSU Haji Medan, it was found that workplace conflicts arise due to disputes among healthcare workers, high workload or job demands, and a lack of support from the surrounding environment, including family. These factors can trigger tension and negatively impact the performance and well-being of medical record coding staff.

Have you ever experienced any conflicts with other healthcare workers?

"Seringnya itu tadi, berkasnya lama diantar, karena lama diantar gitu-gitu aja." (Informan 1)

"Pernah, cuma kadang sama bagian klaimnya aja sih, karena kan mereka ngodingnya lain, yang diinputnya lain, karena itu aja." (Informan 2)

"Ibu lihat sih jarang terjadi, terus masalahnya itu ya sesama orang itu aja, nggak pernah sampai membesar." (Informan 4)

COVID-19:
Journal of Health, Medical Records and Pharmacy
https://jurnal.devitara.or.id/index.php/sehat
E-ISSN: 3032-4033 Volume 2 Nomor 2 Tahun 2025

Based on the interview results, it was found that conflicts among staff do occur, mainly caused by delays in delivering medical records to the coding section and discrepancies between the codes entered and the codes assigned by the coders.

Are you required to complete your work quickly?

"Iya memang dituntut cepat, soalnya kan mau ngejar klaim jadi sebulan itu harus selesai, contohnya bulan ini harus selesai ditanggal 15 bulan selanjutnya itu semua harus clear. Sementara itu tadi kalo berkasnya nggk lengkap kan jadi terkendalakan" (informan 1)

"Ada sih dek apalagi pas dah akhit bulan, karnakan mau di klaim kan"(informan 2)

Based on the interview results, it was found that staff are required to complete their tasks quickly because they must finish the coding process every month.

Work Equipment

Based on interviews with informants in the medical records coding unit at Rumah Sakit Umum Haji Medan regarding work equipment, including questions about available tools, the condition of the equipment, available applications, and needed tools, the informants gave the following responses:

How is the condition of the work equipment currently available?

"Untuk peralatan saat ini udah cukuplah untuk kerja de, tapi komputer yang kakak pake ini kadang suka mati sendiri gitu" (informan 1)

"Untuk peralatan nya ya masih bagus bagus tapi untuk jaringan ya yang nggk bisa dikontrol" (informan 4)

Based on the interview results, it was found that the work equipment used by the staff had issues with computers and network connectivity, which could hinder their performance.

Work Environment

From the interviews with informants in the medical records coding unit at Rumah Sakit Umum Haji Medan regarding the work environment—by asking about room size, air circulation, room temperature, lighting, cleanliness, and safety conditions—the following responses were obtained:

Is the size of your workspace comfortable enough?

"Ruangannya kurang nyaman karena sempitkan, tengoklah berkasnya dimana-mana" (informan 1)

"Ya dinyaman nyamanin sih dek, sebenarnya nggk cukup nyaman lah dengan kek gini, AC kadang panas benyamuk lagi" (informan 2)

"nggk la ya dek, soalnya sempit, kami rame disini belum lagi rekam medis yang dilantai nambah nambah sempit jadi nggk cukup nyaman la yakan" (informan 3)

"Luas nya ya masih kurang luas karena juga kami rame disini belum lagi *barang barang ini nggk tau mau dipindahkan kemana'(informan 4)*

Based on the interview results, it was found that the medical records room is not spacious enough, with many records placed on the floor due to a lack of storage space.

Do you think the air circulation in your workplace is adequate?

"Nggg Belum. Belum cukup baik dek" (informan 1)

"Disini ada jendela dek, tapi karena pake AC sirkulasinya ditutup" (informan 2)

"Kalo untuk sirkulasinya nggk ada deklah dek pada ditutup" (informan 3)

COVID-19:
Journal of Health, Medical Records and Pharmacy
https://jurnal.devitara.or.id/index.php/sehat
E-ISSN: 3032-4033 Volume 2 Nomor 2 Tahun 2025

"Untuk sirkulasinya kan dek ini ruang ber AC jadi ditutup lah kan ventilasinya, tapi kadang terasa juga pengapnya udah AC kurang dingin ditambah rame lagi" (informan 4)

Based on the interview results, it was found that the air circulation in the medical records room is very poor because the ventilation is closed, and the installed air conditioner is also broken.

Is the temperature in your workplace comfortable enough?

"Enggak lah dek, AC nya aja kadang suka rusak" (informan 1)
"Wiihh panas lah dek, ada jendela nggk bisa dibuka, AC sering rusak, gitu gitu lah tu" (informan 2)
"Nggk nyaman lah dek, udah nggk ada sirkulasi udara, AC panas kek mana lah itu, kita nyaman nyamanin aja lah ya"(informan 3)
"Suhu ruanganya kan dek masih sangat kurang karena AC Cuma 1 sedangkan kami rame belum lagi ACnya sering rusak juga" (informan 4)

Based on the interview results, it was found that the temperature in the medical records room is not comfortable because there is only one air conditioner installed, and it often breaks down.

How is the lighting condition in your workspace?

"Pencahayaannya dek kalo lagi gelap diluar yang agak kurang dek" (informan 1)
"Kalo saya rasa masih kurang lah, entah karena udah tua kan? Kalo kodernya kan masih muda muda tapi itulah kalo lampu kurang terang itu ngantuk juga kita dibuatnya dek" (informan 4)

Based on the interview results, it was found that the lighting condition in the medical records room is still inadequate for comfortable working.

How is the cleanliness and safety condition in your workplace?

"Bersihnya bersih cuman yak arena berkasnyaberserak kek gini ya nggk rapi ya, kalo bersinya bersih sih. Keamanannya kurang aman juga karena pintunya nggk pake fingerprint ya pake pintu biasalah, orang lain pun bisa masuk" (informan 1)
"Yahhh dibawah standarlah dek kebersihannya, betol kalo bersih nggk mungkin ada nyamuk yakan, gitu lah" (informan 2)
"Kek gini dah bersih lah tapi karena beserak jadi nggk ada Nampak rapinya dek, keeamanannya pun belum cukup, ntah siapa-siapa aja yang masuk kesini dek" (informan 3)
"Masalah kebersihan kan ruangan itu dibersihkan setiap hari dipel, disapu tapi karena banyak barang beserak yang buat keliatan nggk rapi, tpi kalo untuk keamanan nya masih sangat kurang menurut ibu karena masih pake pintu kayu nggk pake fingerprint pulak jadi orang yang harusnya nggk bisa mengakses ruang itu jadi bisa keluar masuk gitu dek" (informan 4)

Based on the interview results, it was found that the cleanliness and safety conditions in the medical records room are still inadequate due to many scattered files on the floor and insufficient security.

Table 1. Observation Results

No.	Work Facility	Description
1	Computer	7 computers available
2	Stationery	Each desk has a box for writing tools
3	Lighting	Uses two 1-meter-long LED lamps
4	Air Conditioner	1 unit available
5	Desk	7 work desks available
6	Chair	8 work chairs available

COVID-19:
Journal of Health, Medical Records and Pharmacy
https://jurnal.devitara.or.id/index.php/sehat
E-ISSN: 3032-4033 Volume 2 Nomor 2 Tahun 2025

7	Printer	3 printers available
8	Medical Records	Each desk has medical records to be coded
9	Landline Telephone	1 unit available
10	Air Ventilation	3 ventilation outlets available, but covered with plastic
11	Room Cooler	1 air conditioner and 1 fan available

Condition of Air Ventilation in the Medical Records Coding Room

Based on observations conducted by the researcher in the medical records coding unit at Haji General Hospital Medan, it was found that the air ventilation in the workspace was closed. The vents were covered with plastic because the room is equipped with an air conditioner (AC). However, observations revealed that the room only has one AC unit, which frequently malfunctions. Additionally, the room's windows are tightly shut, resulting in poor air circulation.

This condition makes the workspace feel hot and stuffy, potentially affecting the comfort and productivity of the medical record coders. The lack of natural ventilation and the suboptimal performance of the air conditioning system may further contribute to increased work-related stress in this environment.

Lighting and Workspace Area Conditions in the Medical Records Coding Unit

Based on observations conducted in the medical records coding unit at Haji General Hospital Medan, it was found that the lighting in the room comes only from two long fluorescent lamps. While the second informant stated that the lighting was sufficiently bright, three other informants reported that the lighting in the workspace was still inadequate to fully support optimal work activities.

In addition, observations indicated that the workspace in the coding unit was relatively cramped and disproportionate to the amount of activity and volume of documents handled. The large number of medical record files stacked on staff desks further limited movement and reduced work comfort. This condition has the potential to negatively impact the efficiency and concentration of staff during the medical record coding process.

Discussion

Workload of Medical Coding Staff

Based on the results of interviews with the four informants, it was found that all informants had relatively similar views regarding the workload they experienced. Three out of four informants stated that their workload had increased due to additional tasks outside their main responsibilities. In addition, they faced difficulties in reading doctors' handwriting and felt that there was a shortage of coding staff, which impacted their performance and led to work-related stress.

The fourth informant provided a slightly different account, stating that they were not assigned additional tasks but still encountered difficulties in interpreting doctors' handwriting and confirmed the shortage of human resources. They also mentioned that some medical records lacked a physician's diagnosis, which further affected work effectiveness and productivity.

These findings are in line with the study by Rosita & Cahyani (2019) at PKU Muhammadiyah Hospital in Surakarta, which identified factors contributing to work stress among medical record staff, including excessive workload, poor interpersonal relationships, unmet work targets, and gender-related factors, where the majority of staff were women—more susceptible to stress.

Dani & Mujanah (2021) defined workload as the gap between an individual's capacity or capability and the demands of the job they must perform. A mismatch between the number of personnel and the workload can lead to fatigue, decreased productivity, and negatively impact the quality of healthcare services in hospitals.

Meanwhile, Michael Page (2022) explains that workload involves the process of completing tasks carried out by individuals within a certain period and under normal working conditions. This workload includes both physical and mental aspects.

COVID-19:
Journal of Health, Medical Records and Pharmacy
https://jurnal.devitara.or.id/index.php/sehat
E-ISSN: 3032-4033 Volume 2 Nomor 2 Tahun 2025

Based on field findings, the researcher concludes that the workload experienced by coding officers in the Medical Records Unit of Haji General Hospital Medan is relatively high. This is due to additional tasks beyond their main duties, difficulties in reading doctors' handwriting, delays in the delivery of medical records to the coding section, and the limited number of available staff. Therefore, strategic measures are needed to address this issue, including:

1. Increasing the number of coding staff to ensure a more proportional distribution of workload.
2. Enhancing coordination with other healthcare professionals, especially doctors, to ensure clarity of diagnoses and legibility of medical handwriting.
3. Improving time discipline in the delivery of medical records to the coding section to ensure a more efficient process.
4. Providing training and professional development in coding for staff to improve the quality and accuracy of their work.

Therefore, it is expected that the workload can be managed more effectively, ensuring that the productivity and quality of medical record services remain optimal.

Workplace Conflict

Based on the results of interviews with the four informants, it was found that all informants shared similar views regarding the conflicts occurring in the medical records coding unit. They revealed that work conflicts were generally caused by delays in the delivery of medical record files to the coding section, discrepancies between the claimed codes and those written by the coders, as well as the accumulation of medical record files submitted for coding at the end of the month. These conditions can trigger work-related stress, as each staff member feels uncomfortable and tends to justify themselves without proper coordination.

A study conducted by Devina and Maimun (2021) on registration officers at UPT Puskesmas Enok, Indragiri District, also found similar conflicts. In the study, staff responded to conflicts by providing clear explanations and communicating issues politely so that they could be understood by others. Conflict resolution was carried out through joint discussions to reach mutual agreements, as well as regular evaluations conducted during monthly internal meetings (mini workshops). This strategy proved effective in reducing conflicts and preventing their recurrence in the future.

Workplace conflict itself can be defined as a process of disagreement between two or more parties who are interdependent over a certain object of conflict. In general, conflicts arise due to misunderstandings or communication failures, differences in opinion, or unresolved feelings of being disadvantaged. Interpersonal conflict, which occurs between individuals, can arise from various factors such as misperceptions, conflicting interests, or overly sensitive emotions (Devina & Maimun, 2021).

Furthermore, according to Ervan (2021), workplace conflict is a form of disagreement in perspective or action between individuals or groups within an organization who perceive that the other party has a negative impact on them. In the context of Haji General Hospital Medan, conflict arises due to the delayed delivery of medical record files to the coding staff, which ultimately hinders the coding process. This discomfort leads to tension among healthcare personnel. Therefore, it is crucial to establish open and effective communication to clarify and reach mutual agreement on issues, so that shared solutions can be found and similar conflicts can be prevented in the future.

Work Equipment

Based on interview results, most informants stated that the work equipment available in the medical record unit's coding section is generally good and complete. However, there are issues such as a computer that frequently shuts down unexpectedly, which can lead to data loss and hinder staff performance, as noted by the first informant. Three other informants reported that the equipment is still functional and supports the completion of tasks effectively.

Research by Fadillah et al. (2023) emphasizes the importance of proper office equipment and maintenance to ensure the smooth execution of employee duties, as adequate equipment positively

impacts performance, while inadequate tools have a negative effect. According to Miska (2020) and Ambarwati et al. (2021), appropriate work equipment significantly affects comfort and work efficiency.

The researcher's assumption concludes that the work equipment is generally in good condition, although one computer requires repair due to frequent malfunctions. It is also recommended to add applications such as ICD-10 and ICD-9 CM to support tasks and reduce the workload of coding staff.

Work Environment

Based on interviews with four informants, it was found that the working conditions in the medical record unit, particularly in the coding section, are still inadequate. All informants mentioned that the workspace feels cramped, lighting is suboptimal, the room is hot due to a broken air conditioner, and security measures are insufficient because there is no fingerprint system at the entrance. The cramped space and poor air circulation contribute to increased room temperature and decreased oxygen levels, potentially triggering heightened emotions and work-related stress among staff.

Research by Sartika (2017) indicates that an uncomfortable work environment can lead to stress, especially when accompanied by conflicts between work and family demands. The work environment is an important factor influencing individual performance in completing tasks (Prihadi, 2021). The physical work environment includes all conditions surrounding the work area that can affect productivity (Sedarmayanti in Rahmawanti et al., 2014).

Overall, the workspace in the medical record coding section does not yet meet the standards of comfort and efficiency. Therefore, improvements are necessary, such as creating a separate coding room, reorganizing storage shelves, and repairing the air conditioning system to enhance both comfort and staff productivity.

CONCLUSION

Based on the research on the work stress among medical record coding staff at Haji General Hospital Medan in 2024, it can be concluded that the causes of work stress include workload, work conflicts, inadequate work equipment, and an unfavorable work environment. The findings indicate that the hospital should provide a more adequate workspace equipped with facilities that support a comfortable working environment, such as proper lighting, spacious rooms, and good ventilation. Medical record staff are expected to improve task management, provide education to other healthcare workers regarding the importance of timely delivery of medical record documents for the coding process, and maintain good communication to avoid conflicts and misunderstandings. Furthermore, future researchers are advised to be more meticulous in data collection and completeness to ensure the accuracy and usefulness of research results.

REFERENCES

Ambarwati, R. D., Alfiansyah, G., Farlinda, S., & Sugeng. (2021). Gambaran Stres Kerja Petugas Pendaftaran Rawat Jalan Di RSUP Dr. Sardjito Yogyakarta. 2(2), 329–337.

Anies, 2014, Kedokteran Okupasi: Berbagai Penyakit Akibat Kerja dan Upaya Penanggulangan dari Aspek Kedokteran, Ar-Ruzz Media, Yogyakarta.

Ardani, J., Santoso, B., & Nurmayanti, S. (2017). Analisis Faktor-Faktor Penyebab Stres Kerja Pada Staf Rekam Medis Di Rumah Sakit Umum Daerah Kota Mataram. 6(1), 1–18.

Asih, G. Y., Widhiastuti, H., & Dewi, R. (2018). Stress Kerja. Semarang University Press.

Dani, A. R., & Mujanah, S. (2021). Pengaruh Servant Leadership, Beban Kerja Dan Kreativitas Terhadap Kinerja Karyawan Dinas Perhubungan Kabupaten Bangkalan Madura Dengan Komitmen Organisasi Sebagai Variabel Intervening. Media Mahardhika, 19(3), 434–445. https://doi.org/10.29062/mahardika.v19i3.269

Darwel, & Mardalinda, E. (2016). Kondisi Ruangan Pengolahan dan Ketersediaan Peralatan Kerja Rekam Medis Terhadap Kinerja Petugas Rekam Medis di RSUD DR.Adnaan WD Payakumbuh. Menara Ilmu, X(72), 6–12.

Darwel, Mardalinda, E., & Katiandagho, D. (2015). Kondisi Ruang Pengolahan dan Ketersediaan Peralatan Kerja Rekam Medis Terhadap Kinerja Petugas Rekam Medis di RSUD DR. Adnaan WD Payakumbuh.

Devina, T., & Maimun, N. (2021). Upaya Meminimalisir Terjadinya Konflik Antara Pasien Dan Petugas Pendaftaran Di UPT Puskesmas Enok Kab. Indragiri Hilir Tahun 2020. Jurnal Rekam Medis (Medical Record Journal), 1(2), 106–116. https://doi.org/10.25311/jrm.vol1.iss2.379

Ekawarna. (2022). Manajemen Konflik dan Stres (Cet. 1, Vol. 11, Issue 1). PT Bui Aksara.

Ervan, M. N. (2021). Pengaruh Konflik Kerja Dan Lingkungan Kerja Terhadap Kinerja. Jurnal Ekonomi Bisnis, 2(1), 1–10.

Fadillah, M. I., Faslah, R., & Suherdi, S. (2023). Analisis Perlengkapan Kantor Pada Divisi Pelayanan Di Pt Xxx. Jurnal Ilmiah Manajemen, Bisnis Dan Kewirausahaan, 3(2), 179–184. https://doi.org/10.55606/jurimbik.v3i2.473

Fiantika, F. R., Wasil, M., Jumiyati, S., Honesti, L., & Sri, W. (2022). Metodologi Penelitian Kualitatif. In Y. Novita & M.Hum (Eds.), Rake Sarasin. PT. Global Eksekutif Teknologi. https://scholar.google.com/citations?user=O- B3eJYAAAAJ&hl=en

Heryana, A. (2019). Metodologi Penelitian Pada Kesehatan Masyarakat. Indradi S, R. (2020). Rekam Medis (Cetakan pe, pp. 1–451).

Khatimah Ismatullah, N., Winarti, Y., Saida Flora, H., & Endah Kusumaningrum, A. (2023). Rekam Medis.

King, L. (2010). Psikologi Umum: Sebuah Pandangan Apresiatif.

Michael Page, I. (2022). Pengaruh Beban Kerja Terhadap Kinerja Tenaga Rekam Medis Di RSUD Petala Bumi.

Musabiq, S. A., & Isqi Karimah. (2018). Gambaran Stress dan Dampaknya Pada Mahasiswa. 20(2), 75–83.

Nashrullah, M., Fahyuni, E. F., Nurdyansyah, N., & Untari, R. S. (2023). Metodologi Penelitian Pendidikan (Prosedur Penelitian, Subyek Penelitian, Dan Pengembangan Teknik Pengumpulan Data) (M. T. Multazam (ed.)). UMSIDA Press. https://doi.org/10.21070/2023/978-623-464-071-7

Nulia, S., Rahmadhani, I., Kuncoro, A., & Rahmadani, A. (2021). Gambaran Stres Kerja Petugas Rekam Medis di Rumah Sakit Kota Surabaya. 6(2), 189–194.

Pasaribu, B., Herawati, A., Utomo, K. W., & Aji, R. H. S. (2022). Metodologi Penelitian untuk Ekonomi dan Bisnis. In A. Muhaimin (Ed.), UUP Academic Manajemen Perusahaan YKPN. Media Edu Pustaka.

Rahmi, N. A., Wardhina, F., Arbuddin, & Khairuuisa. (2023). Gambaran Stres Kerja Petugas Rekam Medis Di Puskesmas Gadang Hanyar Banjarmasin. http://repository.stikeshb.ac.id/id/eprint/592

Rijali, A. (2018). Analisis Data Kualitatif. 17(33), 81–95.

Rizqika, A. P. P., Wahyuni, I., & Ekawati. (2018). Analisis Tingkat Stres Kerja Serta Coping Stres Pewagai Rekam Medis Di RSUD K.R.M.T. Wongsonegoro Kota Semarang. 5, 53–54.

Rosita, R., & Cahyani, N. W. (2019). Hubungan Antara Stres Kerja Dengan Kinerja Petugas Rekam Medis. 2(978-602-6363-78–7), 1–6. https://ojs.udb.ac.id/index.php/smiknas/article/view/726/656

Sartika, D. (2017). Gambaran Stres Kerja Pegawai Rekam Medis Rumah Sakit Bhakti Wiratama Semarang. Journal of Public Health, 5(3), 186–195.

Sartika, D. (2023). Stres Kerja. In A. T. Putranto (Ed.), Doctoral dissertation. Widina Bhakti Persada Bandung.

Tewal, B., Adolfina, Pandowo, M. H. C., & Tawas, H. N. (2017). Perilaku Organisasi. CV. Patra Media Grafindo Bandung.

Vanchapo, A. R. (2020). Beban Kerja dan Stres Kerja (N. Arsalan (ed.)).

Widya Sandika, T., & Anggraini, S. (2019). Pengaruh Ketidaklengkapan Berkas Rekam Medis Terhadap Pelaporan Data Morbiditas Pasien Rawat Inap (RL4a) Di RSU Mitra Medika Medan. Jurnal Ilmiah Perekam Dan Informasi Kesehatan Imelda (JIPIKI), 4(2), 620–625.