

PUBLISHER: https://journal.adlermanurungpress.com/
DOI: https://doi.org/10.63607/jcmb.v14i4

DESIGN OF MICROSOFT EXCEL-BASED ACCOUNTING INFORMATION SYSTEM FOR PREPARING FINANCIAL REPORTS IN ACCORDANCE WITH EMKM SAK AT ASYIFAA MARIUK CLINIC

Achmad Kamil Hanafi[1], Syarief Hidayat[2], Muhammad Taofik Ismail[3], Bambang Rustandi[4]
[1234]Sangga Buana YPKP University
Email: kamilothanafi@gmail.com[1], syarief.hidayat@usbypkp.ac.id[2], muhammad.taofik@usbypkp.ac.id[3], bambang.rustandi@usbypkp.ac.id[4]
Alamat: Jl. PH.H. Mustofa No.68, Cikutra, Kec. Cibeunying Kidul, Kota Bandung, Jawa Barat 40124
Koresprodensi Penulis: kamilothanafi@gmail.com

Abstrak

Klinik Asyifaa Mariuk menghadapi permasalahan dalam pencatatan keuangan yang masih dilakukan secara manual atau semi-manual, sehingga pencatatan menjadi tidak terstruktur dan belum sesuai dengan Standar Akuntansi Keuangan Entitas Mikro, Kecil, dan Menengah (SAK EMKM). Kondisi tersebut menyebabkan laporan keuangan yang dihasilkan kurang akurat, terdapat kelemahan dalam proses pencatatan, serta menimbulkan kesulitan bagi pihak manajemen dalam pengambilan keputusan. Selain itu, pencatatan data pasien juga belum berjalan secara efisien. Penelitian ini bertujuan untuk merancang dan mengimplementasikan sistem informasi akuntansi berbasis Microsoft Excel yang sesuai dengan SAK EMKM pada Klinik Asyifaa Mariuk. Tujuan utama penelitian ini adalah menghasilkan laporan keuangan yang akurat, efisien, dan terstruktur, sekaligus meningkatkan efektivitas pencatatan data pasien melalui integrasi Macro VBA. Metode penelitian yang digunakan adalah pendekatan kualitatif deskriptif dengan metode Research and Development (R&D) serta penelitian terapan. Data dikumpulkan melalui observasi partisipatif, wawancara mendalam, dan dokumentasi. Analisis data dilakukan melalui teknik reduksi data, penyajian data, dan penarikan kesimpulan dengan menggunakan triangulasi. Hasil penelitian menunjukkan bahwa penerapan sistem informasi akuntansi berbasis Microsoft Excel

dengan integrasi Macro VBA yang disesuaikan dengan SAK EMKM dapat meningkatkan kualitas pencatatan keuangan dan pengelolaan administrasi secara signifikan. Sistem ini mampu menghasilkan laporan keuangan yang konsisten, terstandarisasi, dan efisien, serta meminimalkan kesalahan pencatatan sekaligus mempercepat proses administrasi.

Kata kunci: Laporan Keuangan, SAK EMKM, Microsoft Excel, Macro VBA, Sistem Informasi Akuntansi

Abstract

Asyifaa Mariuk Clinic faces the problem of manual or semi-manual financial recording, making it unstructured and not yet in accordance with the Financial Accounting Standards for Micro, Small, and Medium Entities (SAK EMKM). This condition causes inaccurate reports, weaknesses in recording, and difficulties in management decision-making. In addition, patient data recording is also not running efficiently. This study aims to design and implement a Microsoft Excel-based accounting information system that complies with SAK EMKM at Asyifaa Mariuk Clinic. The main objective is to produce accurate, efficient, and structured financial reports, while increasing the effectiveness of patient data recording through Macro VBA integration. The research method used is a descriptive qualitative approach with Research and Development (R&D) methods and applied research. Data were collected through participant observation, in-depth interviews, and documentation. Data analysis was carried out using data reduction techniques, data presentation, and drawing conclusions through triangulation. The results of the study indicate that the implementation of a Microsoft Excel-based accounting information system with Macro VBA integration, which is adjusted to SAK EMKM, can significantly improve the quality of financial recording and management. This system produces consistent, standardized, and efficient financial reports, minimizing recording errors while speeding up the administrative process.

Keywords: Financial Reports, SAK EMKM, Microsoft Excel, Macro VBA, Accounting Information Systems

INTRODUCTION

In the development of the national economy in Indonesia, the role of Micro, Small, and Medium Enterprises (MSMEs) plays a very significant contribution. Based on national data, this sector is recorded as being able to contribute more than 60.5% to the Gross Domestic Product

(GDP) and absorb up to 97% of the total workforce (Ministry of Cooperatives and SMEs, 2025). Given this significant role, managing relevant and accurate financial information is crucial for stakeholders, both for internal management purposes, fulfilling government legal aspects, and assessing creditor eligibility. To bridge the limitations of MSMEs in preparing bookkeeping, the Indonesian Institute of Accountants has issued Financial Accounting Standards for Micro, Small, and Medium Entities (SAK EMKM) which are designed to simplify financial reporting into just three main components: the Statement of Financial Position, the Income Statement, and Notes to the Financial Statements (Indonesian Institute of Accountants, 2018). The use of digital spreadsheet-based software such as Microsoft Excel is often recommended because it is practical, economical, and easy to customize independently without requiring expensive investment costs for a professional accounting system (Rofiq & Muhammad, 2022).

Numerous previous studies have explored the use of this simple technology in implementing accounting standards for small businesses. For example, bookkeeping using Microsoft Excel has proven effective in helping business owners prepare structured financial reports for MSMEs in the trade sector (Wahyuni, 2021). A similar evaluation of a shipping service entity concluded that Excel-based financial report design can systematically and integratedly combine transaction data and accelerate business decision-making (Pratama et al., 2021). Furthermore, an accounting training and mentoring approach based on the Indonesian Financial Accounting Standards (SAK) for MSMEs in micro-health clinics also demonstrated positive implications for improving business owners' understanding of separating the concepts of personal and corporate business entities (Santoso & Wulandari, 2023). Furthermore, the integration of macro functions in the form of Visual Basic for Applications (VBA) into Excel worksheets has been shown to automate computer instructions based on event-driven programming (Budi Raharjo, 2021). The use of this VBA macro feature can significantly produce application prototypes that are much more efficient, minimize operational input errors, and improve interface interaction for novice users (Cahyan, 2021).

Although studies on Excel-based accounting information systems and SAK EMKM have been widely conducted, most previous literature still focuses on conventional transaction modeling for the trade sector of goods or simple logistics services. The scientific novelty of this article lies in the development of an accounting information system that specifically integrates SAK EMKM financial reporting with supporting clinical operational administration modules in the micro-health sector. Unlike conventional trading MSMEs, small-scale private health clinics have unique

transaction complexities, because their cash flow involves recording patient medical records, inventorying periodic drug purchases, paying medical personnel honoraria, and calculating daily health service fees. This study fills this gap by designing a spreadsheet ecosystem that not only processes accounting figures but also provides an automated patient database management system based on VBA macros that is directly connected to the financial reporting flow of micro-health entities.

This need for integration is a real problem faced by the Asyifaa Mariuk Clinic in Sumedang Regency, a micro-health entity whose operational recording is still manual or semi-manual. Based on initial observations, the lack of a standard bookkeeping system causes a misalignment between cash flow summaries and cash on hand. This condition triggers the vulnerability of inaccurate financial reports, the potential loss of patient transaction data, and makes it difficult for clinic management to identify financial discrepancies for strategic managerial decision-making. Based on this phenomenon, the research problem formulated is how to design a Microsoft Excel-based accounting information system that complies with SAK EMKM while also how to optimize the use of VBA Macros to improve the efficiency and accuracy of patient data management in micro-health clinics.

The main objective of this article is to design and implement a valid Microsoft Excel-based Accounting Information System model based on SAK EMKM at the Asyifaa Mariuk Clinic to produce accurate and user-friendly financial reports. Furthermore, this article aims to design an integrated VBA Macro application as a tool to automate the patient data input process to minimize human error and accelerate daily operational reporting at a micro-scale health clinic.

RESEARCH METHOD

This research uses a qualitative approach with the methodResearch and Development(R&D) of an applied nature (applied researchThe use of the R&D method is aimed at producing a specific product in the form of a prototype accounting information system while simultaneously testing its feasibility and effectiveness when implemented in real-world conditions (Sugiyono, 2022). The research object was deliberately selected (purposive) is the Asyifaa Mariuk Clinic, a healthcare business unit that does not yet have a structured financial recording and reporting system. Primary and secondary data collection was carried out over an effective period from April 27, 2025, to

August 15, 2025, which included the stages of proposal preparation, field observation, in-depth interviews, and finalization of the program design (Moleong, 2017).

The data collection procedure was carried out using three main techniques to maintain data validity through triangulation methods: passive participant observation, in-depth interviews, and documentation. Passive participant observation was implemented by directly observing the clinic's daily operational workflow without interfering in service activities or managerial decision-making (Moleong, 2017). In-depth interviews were conducted semi-structured, involving the clinic owner and administrative staff as key informants to explore specific obstacles in daily financial recording. Meanwhile, documentation techniques were carried out by collecting and examining physical transaction files, determining the reporting period (January–December 2025), in the form of medication purchase receipts, patient service payment receipts, and daily cash books (Sugiyono, 2022). All qualitative data obtained were then analyzed using the Miles, Huberman, and Saldaña model, which includes three interactive stages: data reduction (sorting and classifying transaction data), data presentation (compiling descriptive narratives and account tables), and drawing conclusions and final verification.

The system is developed using the main instrument of computer with softwareMicrosoft Excelintegrated with macro featuresVisual Basic for Applications (VBA). The processing and design of this accounting information system is carried out through four structured stages adapted from the system development cycle (Mulyadi, 2016). The first stage is a needs study to map the clinic's business flow, collect transaction evidence, and compile a list of accounts (chart of accounts) which is adapted to the health sector accounting nomenclature. The second stage is the initial design of the system, which focuses on the preparation of automation formulas, interconnections between worksheets (sheet), as well as the preparation of programming logicevent-drivenin the VBA module (Budi Raharjo, 2021). The third stage is system implementation by conducting functional testing using simulated clinical transaction data from the current period. The final stage is evaluation and improvement based on feedback from end users (end-user) to ensure ease of use aspects (user-friendliness) and system reliability.

The application architecture structure is specifically designed into two main parts, namely input design (input) and output design (output) (Mulyadi, 2016). Designinput consists of SheetAccount List (contains standard account codifications such as cash, patient receivables, drug inventory, accounts payable, capital, service revenue, and operating expenses),SheetTransactions

(digital form for inputting date, description, debit/credit amount, and account selection), andSheetSupporting Data for automated patient medical record management based on VBA module. On the other hand, the designoutputconfigured to provide automated financial reporting that complies with SAK EMKM regulations (Indonesian Institute of Accountants, 2016). The financial report components generated by the system include the Statement of Financial Position (Balance Sheet) to present asset and liability positions, the Profit and Loss Report to measure periodic profitability performance, and Notes to the Financial Statements (CALK) as a disclosure of the accounting policies used. The standard reporting presentation format is integrated into the program. Excel shown in Table 1 and Table 2 below.

Table 1 Statement of Financial Position Format

Asset	**Amount (Rp)**	**Liabilities & Equity**	**Amount (Rp)**
Cash and cash equivalents	xxxxxx	Accounts payable	xxxxxx
Patient Receivables	xxxxxx	Owner's Capital	xxxxxx
Drug Supplies	xxxxxx		
Medical Equipment	xxxxxx		
Total Assets	**xxxxxx**	**Total Liabilities + Equity**	**xxxxxx**

Table 2 Income Statement Format

Information	**Amount (Rp)**
Clinic Service Income	xxxxxx
Medication Burden	xxxxxx
Salary Expenses	xxxxxx
Electricity and Water Expenses	xxxxxx
Other Expenses	xxxxxx
Net profit	**xxxxxx**

RESULTS AND DISCUSSION

The results of the system development and implementation analysis indicate that the accounting information system designed for the Asyifaa Mariuk Clinic successfully overcomes conventional obstacles in micro-enterprise financial recording. Previously, the clinic's financial recording relied heavily on semi-manual Excel spreadsheets without integrated formulas, which consistently caused discrepancies between cash flow and actual balances. This baseline supports Mulyadi's (2016) argument that an unstructured recording model reduces the reliability of financial data and increases the risk of human error.

To systematically modernize this environment, a new accounting information system was designed in accordance with the Financial Accounting Standards for Micro, Small, and Medium Entities (SAK EMKM) issued by the Indonesian Institute of Accountants (IAI, 2016), utilizing Microsoft Excel integrated with Macro Visual Basic for Applications (VBA). This architecture uses four main development phases: requirements analysis, system design, implementation testing, and evaluation refinement.

System Design and Operationalization

The system is built on several integrated worksheets, starting with a standardized Chart of Accounts (COA). The COA serves as the backbone of the system's infrastructure, categorizing all of the clinic's economic events into standard accounts: assets, liabilities, equity, revenues, and expenses. Each account is assigned a unique code to prevent classification shifts.

The input interface consists of two separate Daily Transaction Sheets: Income Transactions (which record revenue along with patient registration) and Expense Transactions (which record general operating expenses). Data from these transaction sheets is transferred to the General Journal sheet using double-entry bookkeeping to maintain a balance between debits and credits. Transactions are sequentially posted to the General Ledger Sheet to separate and total the balances of each account.

At the end of the accounting period, data flows into the Adjusting Journal entry to record non-cash transactions, specifically depreciation of fixed assets. The clinic's fixed assets are depreciated using the straight-line method based on clear useful life metrics: buildings (20 years), medical equipment (8 years), vehicles (8 years), cabinets/furniture (5 years), and electronic equipment (4 to 5 years).

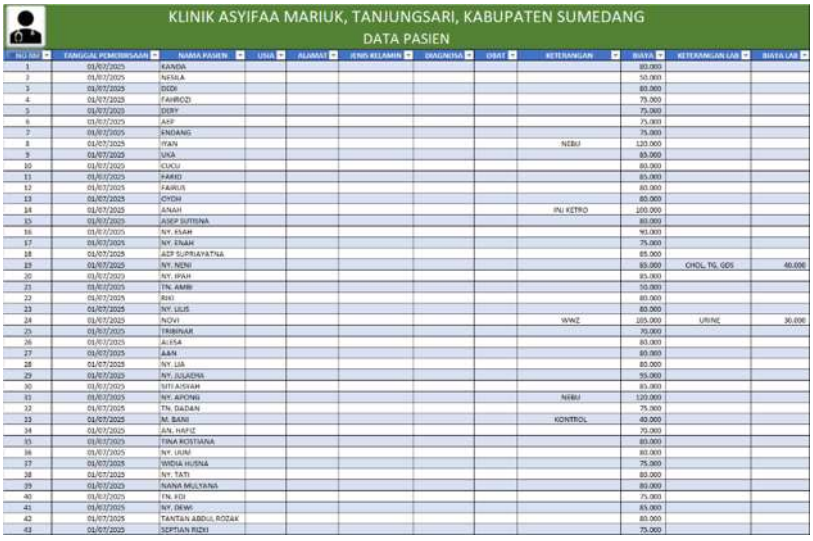
The adjusted balances are then compiled into a working sheet to verify structural balance before preparing the final financial statements. The primary financial outputs generated by this automated cycle include the Income Statement, Statement of Changes in Equity, Statement of Financial Position, and Notes to the Financial Statements (CALK).

The structural configuration of the system's basic components, data architecture, and interface design can be observed through the detailed images below:



Kode Akun	Nama Akun	Kategori	Keterangan
No Akun	Nama Akun	Aset	Akun induk aset
1-000	ASET	Aset Lancar	Kas kecil, rekening bank
1-100	Aset Lancar	Aset Lancar	Yang Tunai
1-101	Kas	Aset Lancar	Contoh rekening bank
1-102	Persediaan	Aset Lancar	Contoh rekening bank lain
1-200	Aset Tetap	Aset Lancar	Tagihan ke pasien atau asuransi
1-201	Peralatan Medis	Aset Lancar	Stok Klinik
1-202	Akumulasi Penyusutan Peralatan Medis	Aset Tetap	Alat kesehatan
1-203	Peralatan Komputer dan Printer	Aset Tetap (kontra)	Akun kontra aset tetap
1-204	Akumulasi Penyusutan Peralatan Komputer dan Printer	Kewajiban	Utang & kewajiban lainnya
1-205	Peralatan Lainnya	Kewajiban Jangka Pendek	Tagihan dari supplier
1-206	Akumulasi Penyusutan Peralatan Lainnya	Kewajiban Jangka Pendek	PPN 22, PPh 23
1-207	Peralatan Meja dan Kursi	Kewajiban Jangka Pendek	Uang pasien sebelum treatment
1-208	Akumulasi Penyusutan Peralatan Meja dan Kursi	Modal	Modal & laba ditahan
1-209	Peralatan Ranjang Pasien	Ekuitas	Modal awal pemilik
1-210	Akumulasi Penyusutan Peralatan Ranjang Pasien	Ekuitas	Laba belum dibagikan
1-211	Peralatan Kultus Penyimpanan Obat	Pengurang Ekuitas	Penarikan pribadi pemilik
1-212	Akumulasi Penyusutan Kultus Penyimpanan Obat	Pendapatan	Jasa perawatan
1-213	Kendaraan	Pendapatan Operasional	Konsultasi dokter
1-214	Akumulasi Penyusutan Kendaraan	Pendapatan Operasional	Lumbal, USG, EKG, dll
1-215	Bangunan	Pendapatan Lainnya	Penjualan resep internal
1-216	Akumulasi Penyusutan Bangunan	Pendapatan Operasional	Klaim dari BPJS, Asuransi swasta
1-217	Tanah	Beban	Biaya klinik
2-000	KEWAJIBAN(UTANG)	Beban Operasional	Termasuk penyewa dan staf
2-101	Utang Bank	Beban Operasional	Penggunaan untuk pasien
3-000	EKUITAS/MODAL	Beban Operasional	Listrik
3-101	Modal	Beban Operasional	Jika menyewa herbal
3-102	Laba Berjalan	Beban Non-Kas	Peralatan medis
4-000	PENDAPATAN	Beban Pemasaran	Iklan, digital marketing
4-101	Pendapatan		
5-000	BEBAN		
5-100	Beban Gaji Karyawan		
5-200	Beban Listrik, Air, dan Internet (WiFi)		
5-300	Beban Lain-lain		
5-400	beban penyusutan bangunan		
5-401	beban penyusutan peralatan medis		
5-402	beban penyusutan kendaraan		
5-403	beban penyusutan lemari		
5-404	beban penyusutan meja dan kursi		
5-405	beban penyusutan kultus		
5-406	beban penyusutan ranjang pasien		
5-407	beban penyusutan komp dan printer		

Figure 1. Chart of Accounts Sheet



KLINIK ASYIFAA MARIUK, TANJUNGSARI, KABUPATEN SUMEDANG

DATA PASIEN

NO. RM	TANGGAL PEMERIKSAAN	NAMA PASIEN	USIA	ALAMAT	JENIS KELAMIN	DIAGNOSA	OBAT	KETERANGAN	BIAYA	KETERANGAN LAB	BIAYA LAB
1	01/07/2025	KANDA							80.000		
2	01/07/2025	NAILA							50.000		
3	01/07/2025	DIDI							80.000		
4	01/07/2025	FAHROZI							75.000		
5	01/07/2025	DERY							75.000		
6	01/07/2025	ASF							75.000		
7	01/07/2025	KNDANG							75.000		
8	01/07/2025	IYAN						NEBU	120.000		
9	01/07/2025	UKA							85.000		
10	01/07/2025	CUCU							80.000		
11	01/07/2025	FARID							85.000		
12	01/07/2025	FAIRUS							80.000		
13	01/07/2025	OYOH							80.000		
14	01/07/2025	ANAH						PIJ KETPO	100.000		
15	01/07/2025	ASEP SUTRISNA							80.000		
16	01/07/2025	NY. EVAH							90.000		
17	01/07/2025	NY. ENAH							75.000		
18	01/07/2025	ACP SUPRIYATNA							85.000		
19	01/07/2025	NY. NENI							85.000	CHOL, TG, GDS	40.000
20	01/07/2025	NY. IPAH							85.000		
21	01/07/2025	TN. AMBI							50.000		
22	01/07/2025	RIKI							80.000		
23	01/07/2025	NY. LILIS							80.000		
24	01/07/2025	NOVI						WWZ	105.000	URINE	30.000
25	01/07/2025	TRIBINAR							70.000		
26	01/07/2025	ALISA							80.000		
27	01/07/2025	AAN							80.000		
28	01/07/2025	NY. LIA							80.000		
29	01/07/2025	NY. JULAEHA							95.000		
30	01/07/2025	SITI AISYAH							80.000		
31	01/07/2025	NY. APONG						NEBU	120.000		
32	01/07/2025	TN. DADAN							75.000		
33	01/07/2025	M. BANI						KONTROL	40.000		
34	01/07/2025	AN. HAFIZ							70.000		
35	01/07/2025	TINA ROSTIANA							80.000		
36	01/07/2025	NY. UUM							80.000		
37	01/07/2025	WIDIA HUSNA							75.000		
38	01/07/2025	NY. TATI							80.000		
39	01/07/2025	NANA MULYANA							80.000		
40	01/07/2025	TN. KOI							75.000		
41	01/07/2025	NY. DEWI							85.000		
42	01/07/2025	TANTAN ABDUL ROZAK							80.000		
43	01/07/2025	SEPTIAN RIZKI							75.000		

Figure 2. Daily Income Transaction Sheet

PENGELUARAN

NO	KAS KELUAR	BIAYA	KETERANGAN	TANGGAL
1	SELTIFORT	14.000		1/7/2025
2	LOSTACEF FORTE	15.000		1/7/2025
3	OBAT	66.000		1/7/2025
4	BENSIN	10.000		1/7/2025
5	AQUA	6.000		1/7/2025
6	FC MEDREK	30.000		1/7/2025
7	OBAT	25.000		1/7/2025
8	BANK SUMEDANG	300.000		1/7/2025
9	FOTOKOPI SS SD	13.000		1/7/2025
10	MAKAN	68.000		1/7/2025
11	KUOTA DOKTER	8.000		1/7/2025
12	PAKAN	365.000		1/7/2025
13	BENSIN	10.000		1/7/2025
14	OBAT	35.000		1/7/2025
15	CEFAD	10.500		1/7/2025

Figure 3. Daily Expenditure Transaction Sheet

KLINIK ASYIFAA MARIUK
JURNAL UMUM
Per 31 Juli 2025
(Dalam Rupiah)

Tanggal	Nama Akun	No Akun	Debit	Kredit
07/01/2025	Kas	1-101	3.530.000	
07/01/2025	Pendapatan	4-101		3.530.000
07/01/2025	Persediaan	1-102	1.008.500	
07/01/2025	Kas	1-101		1.008.500
07/02/2025	Kas	1-101	2.725.000	
07/02/2025	Pendapatan	4-101		2.725.000
07/02/2025	Persediaan	1-102	379.000	
07/02/2025	Kas	1-101		379.000
07/03/2025	Kas	1-101	2.855.000	
07/03/2025	Pendapatan	4-101		2.855.000
07/03/2025	Persediaan	1-102	642.500	
07/03/2025	Kas	1-101		642.500
07/04/2025	Kas	1-101	3.800.000	
07/04/2025	Pendapatan	4-101		3.800.000
07/04/2025	Persediaan	1-102	540.000	
07/04/2025	Kas	1-101		540.000

Figure 4. General Journal Sheet

KLINIK ASYIFAA MARIUK
BUKU BESAR
Per 31 Juli 2025
(Dalam Rupiah)

Tanggal	Nama Akun	No Akun	Debit	Kredit
07/01/2025	Kas	1-101	3.530.000,00	
07/01/2025	Kas	1-101		1.008.500,00
07/02/2025	Kas	1-101	2.725.000,00	
07/02/2025	Kas	1-101		379.000,00
07/03/2025	Kas	1-101	2.855.000,00	
07/03/2025	Kas	1-101		642.500,00
07/04/2025	Kas	1-101	3.800.000,00	
07/04/2025	Kas	1-101		540.000,00
07/05/2025	Kas	1-101	3.110.000,00	
07/05/2025	Kas	1-101		564.000,00
07/06/2025	Kas	1-101	2.290.000,00	
07/06/2025	Kas	1-101		306.500,00
07/07/2025	Kas	1-101	3.065.000,00	
07/07/2025	Kas	1-101		853.000,00
07/08/2025	Kas	1-101	3.915.000,00	
07/08/2025	Kas	1-101		375.500,00
07/09/2025	Kas	1-101	2.090.000,00	
07/09/2025	Kas	1-101		393.000,00
07/10/2025	Kas	1-101	3.790.000,00	
07/10/2025	Kas	1-101		609.000,00
07/11/2025	Kas	1-101	3.575.000,00	
07/11/2025	Kas	1-101		414.500,00
07/12/2025	Kas	1-101	3.165.000,00	
07/12/2025	Kas	1-101		447.000,00

Figure 5. General Ledger Sheet

KLINIK ASYIFAA MARIUK
JURNAL PENYESUAIAN
Per 31 Juli 2025
(Dalam Rupiah)

Tanggal	Nama Akun	No Akun	Debit	Kredit
31/7/2025	beban penyusutan bangunan	6-400	5.000.000	
31/7/2025	Akumulasi Penyusutan Bangunan	1-216		5.000.000
31/7/2025	beban penyusutan peralatan medis	6-401	1.474.583	
31/7/2025	Akumulasi Penyusutan Peralatan Medis	1-202		1.474.583
31/7/2025	beban penyusutan kendaraan	6-402	520.833	
31/7/2025	Akumulasi Penyusutan Kendaraan	1-214		520.833
31/7/2025	beban penyusutan lemari	6-403	145.833	
31/7/2025	Akumulasi Penyusutan Peralatan Lemari	1-206		145.833
31/7/2025	beban penyusutan meja dan kursi	6-404	607.292	
31/7/2025	Akumulasi Penyusutan Peralatan Meja dan Kursi	1-208		607.292
31/7/2025	beban penyusutan kulkas	6-405	150.000	
31/7/2025	Akumulasi Penyusutan Kulkas Penyimpanan Obat	1-212		150.000
31/7/2025	beban penyusutan ranjang pasien	6-406	187.500	
31/7/2025	Akumulasi Penyusutan Peralatan Ranjang Pasien	1-210		187.500
31/7/2025	beban penyusutan komp dan printer	6-407	395.833	
31/7/2025	Akumulasi Penyusutan Peralatan Komputer dan Printer	1-204		395.833
TOTAL			8.481.874	8.481.874

Figure 6. Adjustment Journal Sheet

KLINIK ASYIFAA MARIUK
NERACA LAJUR
Per 31 Juli 2025
(Dalam Rupiah)

No Akun	Nama Akun	Neraca Saldo		Jurnal Penyesuaian		Neraca Saldo Setelah Penyesuaian		Laba Rugi		Neraca	
		Debit	Kredit	Debit	Kredit	Debit	Kredit	Debit	Kredit	Debit	Kredit
1-101	Kas	1.048.378.632	-	-	-	1.048.378.632	-	-	-	1.048.378.632	-
1-102	Persediaan	215.910.400	-	-	-	215.910.400	-	-	-	215.910.400	-
1-201	Peralatan Medis	122.350.000	-	-	-	122.350.000	-	-	-	122.350.000	-
1-202	Akumulasi Penyusutan Peralatan Medis	-	76.777.500	-	1.474.583	-	78.252.083	-	-	-	78.252.083
1-203	Peralatan Komputer dan Printer	25.000.000	-	-	-	25.000.000	-	-	-	25.000.000	-
1-204	Akumulasi Penyusutan Peralatan Komputer dan Printer	-	20.625.000	-	395.833	-	21.020.833	-	-	-	21.020.833
1-205	Peralatan Lemari	14.000.000	-	-	-	14.000.000	-	-	-	14.000.000	-
1-206	Akumulasi Penyusutan Peralatan Lemari	-	5.562.500	-	145.833	-	5.708.333	-	-	-	5.708.333
1-207	Peralatan Meja dan Kursi	40.300.000	-	-	-	40.300.000	-	-	-	40.300.000	-
1-208	Akumulasi Penyusutan Peralatan Meja dan Kursi	-	13.168.750	-	607.292	-	13.776.042	-	-	-	13.776.042
1-209	Peralatan Ranjang Pasien	18.000.000	-	-	-	18.000.000	-	-	-	18.000.000	-
1-210	Akumulasi Penyusutan Peralatan Ranjang Pasien	-	12.000.000	-	187.500	-	12.187.500	-	-	-	12.187.500
1-211	Peralatan Kulkas Penyimpanan Obat	9.000.000	-	-	-	9.000.000	-	-	-	9.000.000	-
1-212	Akumulasi Penyusutan Kulkas Penyimpanan Obat	-	6.000.000	-	150.000	-	6.150.000	-	-	-	6.150.000
1-213	Kendaraan	50.000.000	-	-	-	50.000.000	-	-	-	50.000.000	-
1-214	Akumulasi Penyusutan Kendaraan	-	44.791.667	-	520.833	-	45.312.500	-	-	-	45.312.500
1-215	Bangunan	1.200.000.000	-	-	-	1.200.000.000	-	-	-	1.200.000.000	-
1-216	Akumulasi Penyusutan Bangunan	-	795.000.000	-	5.000.000	-	800.000.000	-	-	-	800.000.000
1-217	Tanah	250.000.000	-	-	-	250.000.000	-	-	-	250.000.000	-
2-101	Utang Bank	-	200.000.000	-	-	-	200.000.000	-	-	-	200.000.000
3-101	Modal	-	1.000.000.000	-	-	-	1.000.000.000	-	-	-	1.000.000.000
3-102	Laba Berjalan	-	756.225.083	-	-	-	756.225.083	-	-	-	756.225.083
4-101	Pendapatan	-	96.395.000	-	-	-	96.395.000	-	96.395.000	-	-
6-100	Beban Gaji Karyawan	32.400.000	-	-	-	32.400.000	-	32.400.000	-	-	-
6-200	Beban Listrik, Air, dan Internet (Wifi)	1.181.468	-	-	-	1.181.468	-	1.181.468	-	-	-
6-300	Beban Lain-lain	25.000	-	-	-	25.000	-	25.000	-	-	-
6-400	beban penyusutan bangunan	-	-	5.000.000	-	5.000.000	-	5.000.000	-	-	-
6-401	beban penyusutan peralatan medis	-	-	1.474.583	-	1.474.583	-	1.474.583	-	-	-
6-402	beban penyusutan kendaraan	-	-	520.833	-	520.833	-	520.833	-	-	-
6-403	beban penyusutan lemari	-	-	145.833	-	145.833	-	145.833	-	-	-
6-404	beban penyusutan meja dan kursi	-	-	607.292	-	607.292	-	607.292	-	-	-
6-405	beban penyusutan kulkas	-	-	150.000	-	150.000	-	150.000	-	-	-
6-406	beban penyusutan ranjang pasien	-	-	187.500	-	187.500	-	187.500	-	-	-
6-407	beban penyusutan komp dan printer	-	-	395.833	-	395.833	-	395.833	-	-	-
7-100	Ikhtisar Rugi Laba	-	-	-	-	-	-	-	-	-	-
TOTAL		3.026.545.500	3.026.545.500	8.481.874	8.481.874	3.035.027.374	3.035.027.374	42.088.342	96.395.000	2.992.939.032	2.938.632.374
							Laba	54.306.658			54.306.658

Figure 7. Trial Balance Sheet

KLINIK ASYIFAA MARIUK
LAPORAN LABA RUGI
Per 31 Juli 2025
(Dalam Rupiah)

Pendapatan			
4-101	Pendapatan	96.395.000	
Total Pendapatan			96.395.000
Beban			
6-100	Beban Gaji Karyawan	32.400.000	
6-200	Beban Listrik, Air, dan Internet (Wifi)	1.181.468	
6-300	Beban Lain-lain	25.000	
6-400	beban penyusutan bangunan	5.000.000	
6-401	beban penyusutan peralatan medis	1.474.583	
6-402	beban penyusutan kendaraan	520.833	
6-403	beban penyusutan lemari	145.833	
6-404	beban penyusutan meja dan kursi	607.292	
6-405	beban penyusutan kulkas	150.000	
6-406	beban penyusutan ranjang pasien	187.500	
6-407	beban penyusutan komp dan printer	395.833	
Total Beban			42.088.342
Laba Bersih			54.306.658

Figure 8. Profit and Loss Report Sheet

KLINIK ASYIFAA MARIUK
LAPORAN PERUBAHAN MODAL
Per 31 Juli 2025
(Dalam Rupiah)

3-101	Modal (Per 1/7/2025)		1.000.000.000
	Laba	54.306.658	
			54.306.658
3-101	Modal (Per 31/7/2025)		1.054.306.658

Figure 9. Equity Changes Report Sheet

KLINIK ASYIFAA MARIUK
LAPORAN PERUBAHAN MODAL
Per 31 Juli 2025
(Dalam Rupiah)

Aktiva					**Pasiva**		
Aktiva Lancar					**Hutang dan Modal**		
1-101	Kas	1.048.378.632			**Hutang**		
1-102	Persediaan	215.910.400			**Hutang Lancar**		
					2-101	Utang Bank	200.000.000
Total Aktiva Lancar				1.264.289.032	**Total Hutang Lancar**		200.000.000
					Hutang Jangka Panjang		
Aktiva Tetap							
1-201	Peralatan Medis	122.350.000			**Modal**		
1-202	Akumulasi Penyusutan Peralatan Medis	78.252.083	44.097.917		3-101	Modal	1.054.306.658
1-203	Peralatan Komputer dan Printer	25.000.000			3-102	Laba Berjalan	756.225.083
1-204	Akumulasi Penyusutan Peralatan Komputer dan Printer	21.020.833	3.979.167				
1-205	Peralatan Lemari	14.000.000					
1-206	Akumulasi Penyusutan Peralatan Lemari	5.708.333	8.291.667				
1-207	Peralatan Meja dan Kursi	40.300.000					
1-208	Akumulasi Penyusutan Peralatan Meja dan Kursi	13.776.042	26.523.958				
1-209	Peralatan Ranjang Pasien	18.000.000					
1-210	Akumulasi Penyusutan Peralatan Ranjang Pasien	12.187.500	5.812.500				
1-211	Peralatan Kulkas Penyimpanan Obat	9.000.000					
1-212	Akumulasi Penyusutan Kulkas Penyimpanan Obat	6.150.000	2.850.000				
1-213	Kendaraan	50.000.000					
1-214	Akumulasi Penyusutan Kendaraan	45.312.500	4.687.500				
1-215	Bangunan	1.200.000.000					
1-216	Akumulasi Penyusutan Bangunan	800.000.000	400.000.000				
1-217	Tanah		250.000.000				
Total Aktiva Tetap				746.242.709			
	Total Aktiva			2.010.531.741		**Total Pasiva**	2.010.531.741

Figure 10. Financial Position Report Sheet



Figure 11. VBA-based Patient Registration Interface

Table 3 Summary of Financial Statements as of July 31, 2025

Financial Indicators	**Value (Rp)**
Total Revenue	96.395.000
Total Operating Expenses	42.088.342
Net profit	54.306.658
Initial Capital (July 1, 2025)	1.000.000.000
Final Capital (July 31, 2025)	1.054.306.658

Mathematical verification for the net profit calculation embedded in the system's general ledger automation can be modeled using the standard accounting equation as follows:

$$NI = TR - TE$$

Information:

IN = Net Income

TR = Total Revenue

THE = Total Expenses (Total Drinks)

By plugging the results of the automated ledger extraction into the equation, the clinic's financial position is calculated as follows:

$$= 96,395,000 - 42,088,342 = 54,306,658$$

This net profit of Rp54,306,658 is automatically channeled into the statement of changes in equity to determine the clinic's ending equity position:

$$EC = IC + NI$$

$$EC = 1.000.000.000 + 54.306.658 = 1.054.306.658$$

Where EC represents Ending Capital and IC represents Initial Capital. This dynamic data integration eliminates mathematical errors often caused by manual calculations.

Scientific Discussion and Comparative Analysis

The empirical application of this Excel-VBA Macro framework demonstrates significant improvements in several accounting performance indicators. The discussion is broken down into four main analytical dimensions:

Consistency and Reliability of Recording: The implementation of a standard COA based on SAK EMKM successfully eliminated variations in account mutations that previously caused cash flow mismatches. The implementation of data validation features and drop-down lists systematically protected the input interface from human entry errors. These findings align with Santoso and Wulandari (2023), who stated that the implementation of an Excel system specifically designed for SAK EMKM significantly limited bookkeeping errors and improved consistency in service-sector MSMEs.

Compliance with Financial Reporting Standards: Prior to system integration, the clinic's financial output was limited to simple cash inflow and outflow records, lacking a balance sheet structure and ignoring the asset-liability-equity boundaries. This automated system brings the clinic's reporting into full alignment with the IAI (2016) mandate by producing three core components: the Statement of Financial Position, the Income Statement, and the Financial Statement Report (CALK). This reinforces the conclusions of Rofiq and Muhammad (2022), who demonstrated that Microsoft Excel can be used by MSMEs to independently produce financial reports compliant with the Indonesian Financial Accounting Standards (SAK) for MSMEs without the need for expensive ERP software.

Operational Time Efficiency: One of the most striking changes observed was the reduction in the closing time required to prepare the final financial statements, which dropped sharply from 3–5 days to just 1–2 hours. This acceleration validates Romney and Steinbart's (2018) core accounting information system theory, which states that the primary purpose of an accounting information system is to improve operational efficiency and provide timely data for managerial decision-making. This finding also reflects Wahyuni's (2021) research, which demonstrated that a structured spreadsheet model dramatically reduced closing time compared to paper-based or manual systems.

Operational Integration and Innovation: The inclusion of a VBA Macro-based Patient Registration module acts as a bridge between front-line healthcare operations and financial reporting. By automatically populating demographic parameters (name, age, address) and linking patient visits directly to daily revenue sheets, clinics can avoid redundant input data. This structural relationship supports Cahyan's (2021) assertion that integrating operational interfaces and financial records can improve overall reporting accuracy and simplify revenue audit trails.

CONCLUSION

Based on the results of the research, discussion, and analysis that has been conducted, this study has succeeded in designing an accounting information system that complies with the SAK EMKM standards based on Microsoft Excel for the Asyifaa Mariuk Clinic. This new system is able to automatically present three main financial report components, namely the Statement of Financial Position, the Income Statement, and Notes to the Financial Statements (CALK). By utilizing Excel formulas and standard account formats, this system presents transaction recording that is much more structured, consistent, and accurate compared to the previous manual method, resulting in timely and relevant financial reports as a basis for decision-making.

Furthermore, the implementation of VBA macro functions in Microsoft Excel has been proven to significantly improve the efficiency and accuracy of patient data recording in clinics. The patient registration and data management process has become much faster, while simultaneously minimizing the risk of input errors and data loss. This direct integration of patient operational data with the financial recording system simplifies the management of medical services for administrative staff, while ensuring that all clinic revenue data is properly documented according to accounting standards.

As a follow-up step, the Asyifaa Mariuk Clinic is advised to consistently implement this Excel-based accounting information system in every financial transaction recording, conduct brief training for responsible staff, and perform regular data backups to avoid the risk of file corruption. For future researchers, the development of this system can be directed towards a web-based or cloud-based application so that data recording and access can be done in real time from different locations, and expand the research object to other clinics or types of MSMEs to test the system's feasibility more broadly.

REFERENCES

Cahyan, N. D. (2021). *PERANCANGAN SISTEM INFORMASI AKUNTANSI PENGELOLAAN PERSEDIAAN BAHAN HABIS PAKAI BERBASIS MACRO VISUAL BASIC FOR APPLICATION (VBA) MICROSOFT EXCEL PADA KLINIK SYIFA AR-RACHMI SLAWI*. 1–8.

Erlin Wahyuni. (2020). *Eksistensi Pencatatan Keuangan Berdasarkan SAK EMKM pada UMKM dengan Aplikasi Microsoft Excel*. *2*, 398–412. https://elibrary.ru/item.asp?id=44814108

Hastin, A., & Adawiyah. (2022). *ANALISIS PENYUSUNAN LAPORAN KEUANGAN UMKM BERDASARKAN SAK EMKM (Studi Kasus UMKM Modes Ellis)*. *8.5.2017*, 2003–2005.

Hayatullah, M. (2024). *Analisis Penerapan Penyusunan Laporan Keuangan Umkm Berdasarkan Standar Akuntansi Keuangan Entitas Mikro Kecil Menengah (Sak Emkm)*. 1–9. https://repository.unukase.ac.id/

IAI. (2016). Standar Akuntansi Keuangan Entitas Mikro, Kecil, dan Menengah. *Standar Akuntansi Keuangan Entitas Mikro, Kecil, Dan Menengah*, *September*, 1–54.

Kementrian Koordinator Bidang Perekonomian Republik Indonesia. (2025). *pemerintah Dorong UMKM Naik Kelas, Tingkatkan Kontribusi terhadap Ekspor Indonesia*. https://ekon.go.id/publikasi/detail/6152/pemerintah-dorong-umkm-naik-kelas-ingkatkan-kontribusi-terhadap-ekspor-indonesia

Moleong, L. J. (2017). *Metodologi Penelitian Kualitatif (Edisi Revisi). Bandung: PT Remaja Rosdakarya.*

Mulyadi. (2016). *Sistem Akuntansi*. https://books.google.co.id/books?id=f4ncEAAAQBAJ&printsec=frontcover&hl=id&source=gbs_ge_summary_r&cad=0#v=onepage&q&f=false

Nilam, F. B. (2018). Perancangan Pencatatan Akuntansi Berbasis Excel Sesuai Sak Emkm (Studi Kasus Pada Rumah Makan Bakmie Atie Pontianak). *Jurnal Kajian Ilmiah Akuntansi Fakultas Ekonomi …*.

Pratama, M. Y., Indrawati, L., Akuntansi, J., & Bandung, P. N. (2021). Perancangan Model Laporan Keuangan Berdasarkan SAK EMKM Berbasis Microsoft Excel (Studi Kasus Pada Kelompok Usaha Menengah Jasa Ekspedisi Pupuk Kujang-Kab. Karawang) Design of Financial Report Model Based on SAK EMKM Using Microsoft Excel (Case Study in a. *Indonesian Accounting Literacy Journal*, *1*(2), 314–327.

Rahmat Hidayat. (2009). Penerapan Sistem Informasi Manajemen Sebagai Alat Pelaksanaan Sistem Administrasi Akademik . *Ilmiah Pendidikan Tinggi*, *2*(2), 56–59.

Rofiq, M. H., & Muhammad, R. N. (2022). Penyusunan Laporan Keuangan Berdasarkan SAK EMKM Berbantuan Microsoft Excel 2016. *Indonesian Accounting Literacy Journal*, *2*(2), 317–336. https://doi.org/10.35313/ialj.v2i2.3204

Santoso, F. (2023). *https://doi.org/ 10.62668/sabangka.v2i01.467 \. 02*, 30–37.

https://azramedia-indonesia.
azramediaindonesia.com/index.php/sabangkaabdimas/article/view/ 467

Sugiyono. (2022). Metode Penelitian Kualitatif (Untuk penelitian yang bersifat: eksploratif, enterpretif, interaktif dan konstruktif). Metode Penelitian Kualitatif, 5. http://belajarpsikologi.com/metode-penelitian-kualitatif/

Wahyuni, E. (2021). Eksistensi Pencatatan Keuangan Berdasarkan SAK EMKM pada UMKM dengan Aplikasi Microsoft Excel. 2, 398–412.