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## Juridical Analysis of Legal Protection for Malpractice Victims by Hospitals in Patients with Brain Stem Death Post Tonsillectomy as Regulated by Law Number 8 of 1999 Concerning Consumer Protection and Law Number 17 of 2023 Concerning Health

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**Abstract:** The aim of this study is to examine and comprehend the legal foundation and implementation of legal protection for victims of malpractice by hospitals in Indonesia. This research seeks to assess the degree to which victims of malpractice receive legal protection and hold hospitals and involved medical personnel accountable. The research methodology employed is a literature study, encompassing secondary data collection through books, law journals, research findings, and pertinent legislative documents. Various legal sources are scrutinized in this research, including Law Number 8 of 1999 on Consumer Protection and Law Number 17 of 2023 on Health. The findings reveal that there are legal frameworks providing protection for victims of malpractice, such as Law No. 44 of 2009 on Hospitals and Health Law No. 17 of 2023. Nonetheless, challenges persist in the implementation of legal protection for malpractice victims, particularly concerning the legal procedures that victims must navigate to secure compensation and accountability from hospitals or medical personnel.

**Keyword:** Legal Protection, Malpractice Victims, Hospitals, Consumer Protection, Health.

### INTRODUCTION

Enhancing the quality of human life in terms of health is a comprehensive endeavor that encompasses various dimensions. This encompasses the enhancement of both physical

and non-physical well-being within the community. The National Health System elucidates that health encompasses all facets of life, presenting a vast and intricate scope (Nasution, 2005).

In the present era, the field of health has witnessed rapid advancements in science and technology. These advancements have facilitated the emergence of increasingly sophisticated healthcare facilities, thereby propelling progress in this domain. Consequently, professional services within the healthcare sector have also evolved over time. While novel treatment methods have been developed, they have brought about a concomitant increase in potential errors. Instances of harm inflicted upon patients frequently arise in matters pertaining to healthcare. Hence, it is unsurprising that the healthcare profession and the safeguarding of patients have become subjects of discourse among intellectuals, laypeople, and healthcare observers.

Children often suffer from diseases caused by viruses or bacteria, leading to their admission to the hospital. One such disease that affects their appetite and ability to eat is tonsillitis, also known as tonsil disease (Mustamin, 2018). Epidemiological data from seven provinces in Indonesia regarding Ear Nose Throat (ENT) diseases reveal that 38.4% of patients had chronic tonsillitis, with a prevalence rate of 3.8%, second only to acute nasopharyngitis at 4.6% (Basuki et al., 2020). These findings highlight the prominence of chronic tonsillitis among other ENT diseases, following nasopharyngitis. At the Hasan Sadikin Hospital in Bandung, 158 cases of tonsillitis were recorded, accounting for 1.8% of the total cases, and 39% of these cases required tonsilladenoidectomy. Tonsillitis cases are more prevalent in countries with colder climates compared to those with tropical climates. Streptococcus bacteria are one of the causative agents of tonsillitis infection (Mustofa & Susanti, 2020).

Lately, the media has frequently highlighted concerns about healthcare services, particularly the gap between patients and doctors, insufficient facilities, and instances of medical malpractice. Typically, the attention is centered on the deficiencies of doctors in upholding patient rights, delays in medical examinations, and the inadequate provision of medical information to patients. As a result, patients may suffer from disabilities or trauma due to the treatment provided by healthcare professionals.

Medical malpractice is a type of professional misconduct that is particularly prevalent in the healthcare industry. It encompasses various actions carried out by doctors and other healthcare professionals, including nurses and midwives. These actions can take on different forms, such as misdiagnosis or administering inappropriate treatment for a patient's condition. Notably, developed countries like Australia and the United States have witnessed a steady rise in medical malpractice cases over the years. Similarly, Indonesia has also experienced an increase in the number of legal actions taken against doctors and healthcare workers for alleged instances of medical malpractice in recent times, compared to previous years. The media frequently highlights such cases, occurring not only in major city hospitals but also in regional healthcare facilities and clinics (Wogo, 2014).

The inception of Medical Law, specifically the Law on Medical Practice No. 29 of 2004, LN No 116 of 2004, TLN No 4431, which is a component of the Health Law, aims to enhance the legal protection of patients' rights. This branch of law is founded upon two fundamental human rights: the right to healthcare and the right to self-determination (Koeswadji, 1992).

The realm of medicine falls under the purview of Consumer Protection, as doctors and hospitals are classified as business entities that offer services to consumers. In this context, patients seeking medical treatment are regarded as consumers. This classification is explicitly stated in Law No. 8 of 1999 concerning Consumer Protection. Furthermore, the legislation pertaining to penalties for infringements upon consumers' rights is also outlined in Article 19, paragraph (1) of the aforementioned law.

In recent times, there has been a growing prevalence of instances where midwives have been found to be negligent in their provision of services. A notable case of medical malpractice took place in Bekasi City, where Alvaro suffered irreversible brain damage following a tonsil surgery at Kartika Husada Hospital in Jatiasih on September 19, 2023. In response, Alvaro's family decided to pursue legal action. The alleged negligence of several doctors at Kartika Husada Bekasi Hospital was reported to Polda Metro Jaya. The report, dated September 29, 2023, has been duly received and registered under the reference number LP/B/5814/IX/2023/SPKT POLDA METRO JAYA. The reported parties are suspected of contravening Article 62 Paragraph 1 in conjunction with Article 8 Paragraph 1 of Law Number 8 of 1999, as well as Article 360, Article 361, Article 438, and Article 440 paragraphs (1) and (2) of Law Number 17 of 2023.

The study's objectives are structured to provide a detailed examination of the legal landscape and practical implications surrounding malpractice protection by hospitals. Firstly, it endeavors to investigate and analyze the legal framework governing the protection of malpractice victims by hospitals, ensuring compliance with relevant laws and regulations. Secondly, the research aims to evaluate and describe the extent to which hospitals fulfill their responsibilities outlined in legal provisions for protecting victims of malpractice. Lastly, the study seeks to analyze and investigate the importance of providing special protection for malpractice victims within the healthcare sector.

## METHOD

The research conducted in this study is normative juridical research, which focuses on the analysis and interpretation of various legal regulations, legal documents, legal literature, and existing legal concepts. The researchers collect and analyze a range of legal sources, including laws, regulations, court decisions, opinions of legal experts, and relevant legal literature. The approach employed in this legal research involves the analysis and interpretation of written legal sources, such as laws, regulations, court decisions, legal literature, and other legal documents.

To gather data for this research, the researchers utilized data collection tools, specifically literature study or document study, to collect secondary data related to the issues at hand. This involved studying books, legal journals, research findings, and legislative documents, such as Law Number 8 of 1999 on Consumer Protection, Law Number 17 of 2023 on Health, and several other laws and regulations.

## RESULTS AND DISCUSSION

### Legal Foundation For The Protection Of Victims Of Medical Malpractice By Hospitals

In the context of regulating public health services in Indonesia, there exists a philosophical basis derived from Article 34 paragraph (1) of the 1945 Constitution. This article emphasizes that the state bears the responsibility for providing health services to its citizens. Additionally, Article 28H paragraph (1) guarantees the right of citizens to access these health services. These two articles serve as the embodiment of the principles of justice and civilization, as well as the value of social justice for all Indonesian people. The provision of health services is closely tied to the respect for the dignity of Indonesian individuals, while the right to access these services is a tangible manifestation of the principle of social justice, which is achieved through fairness.

Legal protection, in this context, refers to the actions or efforts taken to safeguard the public from arbitrary actions by authorities that do not adhere to the rule of law. The aim is to establish order and peace, thereby enabling individuals to fully enjoy their inherent dignity as human beings (Setiono, 2004).

According to Philipus Hadjon, there are two distinct forms of legal protection (Hutabarat et al., 2022). The first form is known as preventive legal protection, which grants

individuals the opportunity to express their opinions prior to the government's final decision. This measure is implemented with the intention of averting potential disputes from arising. The second form is referred to as repressive legal protection, which aims to resolve existing disputes.

Law No. 10/1961 on Goods explains that the health and safety of the people as well as the quality and composition of goods are the main considerations. The elucidation in this law emphasizes that the existence of a variety of merchandise that is not good or not good can cause danger and harm public health.

The term "goods" in Law No. 10/1961 on goods possesses a wide-ranging connotation, yet it can be subject to diverse interpretations by individuals. Within the realm of hospitals, medicines also fall within the classification of goods that individuals consume when they require them, particularly when they are unwell. Nevertheless, it is imperative for medicines to exhibit good quality in order to prevent any harm to the well-being of consumers. Prior to the consumption of drugs by patients in hospitals, it is necessary to first diagnose whether or not they have any allergies to the prescribed drugs, so as to avoid any potential harm or exacerbation of the patient's condition. Patients who exhibit symptoms while taking medication are commonly referred to as having Steven Johnson syndrome in medical terminology. These symptoms manifest when the patient ingests a drug that is incompatible with their body. However, such symptoms would be regarded as a medical risk within the context of criminal law, as there exist certain standards that must be adhered to. Every doctor who attends to a patient must conduct a diagnosis prior to administering medication in order to prevent the occurrence of undesired symptoms.

In Law Number 23 of 1992 concerning Health, the utilization of the term "everyone" encompasses a comprehensive meaning and encompasses all individuals who require health services, whether they are patients, users, or other beneficiaries of health services. This term is employed to signify that every individual possesses an equal entitlement to access and receive health services of high quality.

The right to access proper and quality health services is outlined in Articles 3, 4, and 5 of Law No. 23/1992 on Health. These articles emphasize that every individual has the right to receive clear and accurate information about their health. Additionally, the term "community" is used in this law to refer to groups of individuals who require health services. Articles 9 and 10 explain the role of the community in disease prevention and control efforts, while Article 21 confirms their right to receive information and education about health. Therefore, Law No. 23/1992 on Health highlights that access to quality health services should be provided to all individuals without exception, and the community plays a crucial role in maintaining health and preventing diseases.

Furthermore, according to Article 1 of Law No. 44/2009, hospitals are responsible for providing comprehensive health services to the community. These services include inpatient, outpatient, and emergency care. It is the duty of hospitals to ensure that the community receives the necessary healthcare services.

In terms of malpractice, a therapeutic relationship exists between patients and doctors. This relationship grants patients certain rights as consumers of health services. These rights aim to protect patients from any harm that may arise during the provision of healthcare goods and/or services.

However, if a doctor negligently or allegedly commits malpractice, causing harm to the patient, the doctor directly violates the rights of the patient as a healthcare professional. This violation is addressed in Law Number 8 of 1999, specifically in Article 4, paragraph (1) of the Consumer Protection Law. This article emphasizes the patient's right to comfort, security, and safety when consuming healthcare goods and/or services.

In accordance with Article 1 point 1 of Law No. 8/1999 on Consumer Protection, a consumer is defined as an individual who utilizes goods and/or services within the

community, not for the purpose of trade, but for their own benefit, the benefit of their family, other individuals, or other living beings. It is important to note that the consumer referred to in this context is the end consumer. The primary objective of consumer protection, as elucidated in Article 3 of Law No. 8/1999 on Consumer Protection, is to enhance consumer awareness, capability, and autonomy in safeguarding their interests. This includes elevating the status of consumers, empowering them to assert their rights, establishing a consumer protection framework that encompasses elements of legal certainty and information disclosure, fostering business actors' awareness regarding the significance of consumer protection, and enhancing the quality of goods and/or services to ensure the sustainability of the production business, as well as the health, comfort, security, and safety of consumers.

Furthermore, Law No. 8/1999 on Consumer Protection encompasses health services within the scope of consumer protection legislation. It designates recipients of health services as consumers and health workers as business actors in their legal relationships. A health worker, as defined in Article 1 point 6 of Law Number 32 of 2009 concerning Health, pertains to any individual who is dedicated to the health sector and possesses knowledge and/or skills acquired through education in the health sector.

Additionally, Article 52 paragraph (3) point a of Law Number 29 of 2004 concerning Medical Practice stipulates that patients have the right to receive a comprehensive explanation of medical procedures. However, there are instances where doctors fail to provide detailed explanations regarding the patient's medical condition. It is crucial to recognize that a complete explanation of the medical treatment administered is the patient's entitlement as a consumer. This failure to provide adequate information also contravenes Article 4 paragraph point b of the Consumer Protection Law, which guarantees the right to accurate, transparent, and truthful information concerning the conditions and warranties of goods and/or services.

According to Article 360 of the Criminal Code, an individual who, due to their own negligence, causes severe harm to another person will face imprisonment for a period not exceeding five years or a lighter imprisonment for a period not exceeding one year. On the other hand, Article 361 of the Penal Code specifies that if the offense is committed during the course of one's official duties or employment, the penalty may be increased by one third and the offender may be terminated from their employment. Additionally, the judge has the authority to order the verdict to be publicly announced. Furthermore, if an individual, through their own fault, causes harm to another person resulting in temporary illness or temporary incapacity to perform their duties or work, they will be subject to imprisonment for a maximum of nine months or a fine of up to Rp. 4,500.

In accordance with the provisions stated in articles 360 and 361 of the Criminal Code, patients who have fallen victim to medical malpractice are entitled to file a lawsuit against the responsible doctors under Article 1366 of the Civil Code. However, in order to initiate legal proceedings against a doctor, the patient must satisfy the following prerequisites:

1. The patient must be capable of substantiating that the doctor engaged in an act that deviated from the standard of care expected in the medical profession, and that this act resulted in harm. This necessitates the presentation of compelling evidence demonstrating that the doctor violated widely accepted norms of medical practice, and that this violation directly contributed to the deterioration of the patient's health or condition.
2. The patient must be capable of proving that the doctor demonstrated negligence in fulfilling their duty of care towards the patient who suffered from medical malpractice. This entails demonstrating that the doctor failed to meet the expected standard of care that should have been provided in the specific medical circumstances. Negligence can manifest in various forms, such as misdiagnosis, improper treatment, or inadequate provision of information to the patient.



3. The patient must be capable of establishing a causal connection between the doctor's actions and the harm endured. It is imperative for the patient to demonstrate not only a causal link between the doctor's actions and the resulting loss, but also that the actions directly caused the harm. Therefore, the patient must be able to establish a strong connection between the doctor's breach of duty and the adverse consequences that ensued as a direct consequence of said breach.

By meeting these three requirements, the patient can establish a strong legal foundation to initiate legal action against the doctor who is accused of committing medical malpractice. The objective of this lawsuit is to seek compensation for the damages suffered as a result of the doctor's actions, which are deemed to be in violation of the standards set by the medical profession.

According to the Medical Practice Act, individuals who have knowledge of or have been harmed by errors involving healthcare providers, particularly doctors, have the right to file a complaint with the Chairman of the Indonesian Medical Discipline Honor Council (MKDKI). In addition to filing a complaint with the MKDKI, patients who have been victims of medical malpractice can also report criminal allegations to the appropriate authorities and/or pursue a civil lawsuit to seek damages. The MKDKI is empowered to investigate and make decisions on the complaints it receives. If ethical violations are proven, the MKDKI will refer the complaint to the relevant professional organization. Consequently, patients who have suffered from medical malpractice are afforded legal protections under the Medical Practice Act, including the right to file a complaint with the MKDKI and pursue both criminal and civil remedies through the court system. The MKDKI also has the authority to impose disciplinary sanctions on doctors who are found guilty.

This is further supported by the Constitutional Court Decision Number 14/PUU-XII/2014, which affirms that cases of negligence by doctors or dentists that have been adjudicated by the MKDKI can still be reported to the authorities and/or pursued through criminal or civil litigation. The Court's reasoning, as stated in Constitutional Court Decision Number 14/PUU-XII/2014, emphasizes the inherent connection between the medical profession and human beings, encompassing their physical well-being and lives. Therefore, doctors are obligated to conduct their medical practices with utmost care and in accordance with the procedures outlined in Article 55, paragraph (1) of the Medical Practice Law.

The Health Sector Civil Servant Investigators, as defined in Regulation of the Minister of Health Number 82 of 2019, encompass any public act that is subject to criminal penalties as outlined in the legislation governing the health sector prior to the enactment of the new Health Law, Law No. 17 of 2023.

As is well known, the government has passed a new draft law on health which was passed into Law No. 17 of 2023 concerning Health. This new Health Law revokes 11 previous laws related to health. In Law Number 36 of 2009 concerning Health (the old Health Law), investigators of health crimes were divided into two, namely police investigators and investigators of civil servants in the health sector. Investigations are carried out in accordance with the rules enacted in the Criminal Procedure Code, such as conducting examinations of criminal acts in the health sector; requesting information and evidence from persons or legal entities and conducting examinations of them; requesting expert assistance in the context of carrying out investigative tasks; stopping investigations if there is insufficient evidence.

In contrast, the new Health Law, Law No. 17 of 2023, introduces a novel provision by establishing a council tasked with enforcing professional discipline. This council can be either permanent or ad hoc in nature. Consequently, if a patient or their family feels aggrieved by the actions of medical personnel or health workers, they have the option to file a complaint with the council. The complaint should include the identity of the complainant, the name and address of the medical personnel or health worker involved, the date and time of the incident, and the grounds for the complaint.

The inclusion of ad hoc judges within the medical court aligns with the provisions stated in Article 32 of Law Number 48 of 2009, which pertains to Judicial Power. As stated in paragraph (1), ad hoc judges can be designated to special courts for the purpose of examining, hearing, and adjudicating cases that necessitate specialized knowledge and experience within specific fields, and this appointment is limited to a specific duration of time. Furthermore, paragraph (2) emphasizes that the terms and procedures for appointing and removing ad hoc judges, as mentioned in paragraph (1), will be established and regulated by law.

If the allegation can be substantiated, the disciplinary measures imposed on Medical or Health Personnel for violating regulations consist of a written warning, mandatory participation in educational or training programs offered by healthcare education providers or the nearest teaching hospital with the necessary expertise, temporary deactivation of their registration certificate (STR), and/or a recommendation for the revocation of their practice license (SIP).

The legal framework for safeguarding the rights of victims of medical malpractice in Indonesia is established through a series of interconnected laws and regulations. Firstly, Law No. 44/2009 on Hospitals mandates that hospitals are accountable for delivering comprehensive and high-quality healthcare services to the public, including taking responsibility for any errors that occur during medical treatments. Secondly, Law No. 36 of 2009 on Health affirms the right of individuals to seek compensation from healthcare workers and/or healthcare providers in cases of negligence or intentional actions resulting in harm. Thirdly, Law No. 8/1999 on Consumer Protection provides protection to patients as consumers of healthcare services, ensuring their entitlement to comfort, security, safety, and compensation in the event of losses caused by negligence or errors in medical services. Additionally, the Medical Practice Act No. 29 of 2004 regulates the qualifications and professional responsibilities of doctors in delivering healthcare services. These regulations collectively establish a robust legal foundation for safeguarding the rights of patients and establishing mechanisms for holding hospitals and medical personnel accountable for instances of medical malpractice.

### **Implementation Of Hospital Liability Against The Provisions Of Legal Protection For Victims Of Malpractice**

Hospitals are health care facilities that have an important and strategic role in improving public health in Indonesia. The government has made serious efforts to ensure and improve the quality of health services in a preventive, promotive, curative, and rehabilitative manner (Sutopo, 2012).

According to Law No. 44/2009, hospitals are defined as healthcare institutions that offer comprehensive health services, including inpatient, outpatient, and emergency care. It is essential to note that hospitals should adhere to the principles of Pancasila, which emphasize professionalism, ethics, and humanity. Furthermore, hospitals must prioritize patient safety, rights, equity, and non-discrimination. They should also fulfill their social function by providing beneficial and fair services (Tendean, 2019).

Hospitals have a primary responsibility to provide healthcare services to individuals in accordance with Law No. 44 of 2009. This includes prevention, recovery, healing, and the maintenance of health by healthcare professionals. Therefore, hospitals must effectively manage their activities by prioritizing the responsibilities of health professionals, particularly medical personnel and nurses, when carrying out their duties and exercising their authorities (Aulia, 2014).

In accordance with the Medical Practice Law No. 29 of 2004, as stated in Article 1 Paragraph (10) within the jurisdiction of Indonesia, doctors are required to possess a specific level of education and possess the necessary knowledge to fulfill their role in the medical

profession. This role involves providing health services to the community in a responsible manner and adhering to a code of ethics. Consequently, doctors are bound by moral and professional obligations, as outlined by the law (Dana et al., 2021).

Furthermore, as stated in Law No. 36 of 2009, specifically in Article 58 paragraph (1) regarding Health, individuals have the right to seek compensation from healthcare workers and/or healthcare providers for the services they have received. Consequently, patients have the option to file a civil lawsuit against medical personnel or hospitals in cases where negligence or intentional actions during the provision of healthcare services have resulted in harm. Additionally, Article 46 of Law No. 44 of 2009 stipulates that hospitals hold legal responsibility for any losses incurred due to the negligence of healthcare workers within their premises. These losses may take the form of monetary compensation, aimed at restoring the patient to their pre-dispute condition (Arini & Atmadja, 2016).

The regulation of hospitals in Indonesia is currently governed by Law No. 44 of 2009 on Hospitals, which outlines their roles, functions, and responsibilities. According to Article 4 of this law, the primary task of hospitals is to provide comprehensive health services to individuals. In line with this task, the functions of hospitals in Indonesia are defined as follows. Firstly, hospitals are responsible for organizing treatment and recovery of health in accordance with established service standards. Secondly, they are tasked with maintaining and improving the health of individuals through second- and third-level health services that align with medical needs. Thirdly, hospitals are responsible for organizing education and training programs for healthcare professionals to enhance their ability to provide quality health services. Lastly, hospitals are expected to conduct research and development activities, as well as test new technologies in the health sector, with the aim of improving health services while adhering to ethical standards in the field of science (Article 5). In relation to their duties and functions, hospitals have certain obligations that must be fulfilled. These obligations can be categorized as either perfect obligations or imperfect obligations. Perfect obligations are those that are always connected to the rights of others, while imperfect obligations are not directly linked to the rights of others. Perfect obligations are legally regulated, whereas imperfect obligations are moral in nature. In a legal context, an obligation refers to a burden imposed by law on an individual or legal entity.

The practice of medicine is subject to legal regulation under Law No. 29 of 2004, which encompasses documents containing various information about the patient's identity, medical procedures, and services related to examination and treatment. In the event that a patient suffers harm, they possess the right to take legal action or hold medical personnel accountable for any negligence displayed. The initial agreement established through a contract or agreement between the patient and medical personnel can serve as authentic evidence to determine the level of responsibility that must be assumed in cases of medical negligence under civil law. In such instances, medical personnel's negligence in providing health services that result in harm to patients can be addressed using Article 1371 of the Civil Code as a legal foundation. Consequently, victims are entitled to seek compensation for medical expenses and losses incurred due to injuries or disabilities resulting from professional errors committed by medical personnel (Asvatham & Purwani, 2020).

In accordance with Article 1239 of the Civil Code, civil law addresses the liability for default. Default refers to a situation where an individual fails to fulfill their obligations as stipulated in an agreement or contract. According to civil law, a person can be deemed to be in default if they fail to fulfill their promised obligations, are delayed in fulfilling their promised obligations, fulfill their obligations but not as promised, or engage in actions that are prohibited by the agreement (Isfandyarie et al., 2006).

The occurrence of loss in cases involving the default of doctor's services must also be a direct consequence of medical treatment that violates the established standards of the medical profession or standard operating procedures. In such instances, the field of medical science



assumes a crucial role in examining and assessing the presence or absence of a causal relationship. Apart from establishing that the doctor's treatment deviated from the accepted standards of the medical profession, it is also necessary to demonstrate that the loss suffered was a direct outcome of the doctor's deviant medical treatment.

Regarding the civil liability of doctors for unlawful acts, it is possible to initiate legal proceedings under Article 1365 of the Civil Code. Unlike claims for damages that are based on contractual agreements, claims for unlawful acts do not necessitate a prior agreement between the parties involved. According to Hariyani, there are several elements that serve as the foundation for filing a tort claim, namely the occurrence of unlawful acts, the presence of losses, the establishment of a causal relationship between the unlawful acts and the losses, and the demonstration of fault (Isfandyarie et al., 2006).

In instances where a doctor may commit tortious acts, it is essential for the patient to demonstrate that the doctor's error directly caused harm. If the harm inflicted on the patient can be attributed to the mistake made by the doctor, the doctor may be held accountable and required to provide compensation. To ascertain whether the doctor is at fault, it is necessary to refer to the professional standards that are applicable within the medical profession. Actions taken by a doctor that deviate from or fail to adhere to these professional standards can be identified as malpractice (Isfandyarie et al., 2006).

Within the realm of legal protection for victims of malpractice in the medical field, these victims can be classified as consumers. This classification stems from the recognition of consumer rights and legal protection against losses resulting from the consumption of goods and/or services, as outlined in Law Number 8 of 1999 on Consumer Protection (UUPK).

The Consumer Protection Law explicitly states in Paragraph 1 of Article 19 that business actors, including medical personnel and hospitals, have a responsibility to address and compensate for any damage or loss suffered by consumers. In the context of medical malpractice, individuals who experience losses as a result of errors or omissions in medical services can be considered consumers. These consumers have the right to receive compensation or appropriate treatment, as outlined in Article 19 of the UUPK. This article serves as a robust legal foundation for safeguarding consumer rights in cases of medical malpractice.

Specifically, business actors such as medical personnel or hospitals are obligated to take responsibility for the losses incurred by consumers due to the utilization of medical services. They are required to provide compensation that corresponds to the extent of the victim's losses, which may include reimbursement for medical expenses, costs associated with rehabilitation, or any other necessary compensation. Furthermore, business actors are expected to handle the damage or loss suffered by consumers in the most effective manner possible. This entails providing the essential medical treatment, taking appropriate remedial measures if feasible, and offering any other form of assistance that can aid victims in overcoming the losses they have endured.

In the event of medical malpractice, individuals who have been harmed have the right to seek justice and legal protection. They have the option to initiate legal proceedings against the responsible parties, such as medical professionals or hospitals, in order to seek compensation for the losses they have suffered. The UUPK, specifically Article 19, serves as a robust legal framework that ensures victims of medical malpractice can receive appropriate compensation and treatment that aligns with the extent of their losses.

When it comes to medical malpractice, victims have the ability to file a claim for compensation against the relevant parties, which may include medical personnel or hospitals, as outlined in the provisions of the UUPK. These victims are entitled to receive compensation for the losses they have incurred, encompassing both tangible and intangible damages. This can include additional medical expenses, costs associated with rehabilitation, loss of income, as well as physical or psychological pain resulting from the malpractice.

Negligent errors in the medical field are not solely limited to nurses, but can also involve doctors, pharmacy officers, and hospitals, as professionalism is at stake. These errors can encompass various aspects, such as administering incorrect medication, providing improper dosages, or conducting procedures in an inappropriate manner. Such errors can have severe consequences for patients, potentially even leading to fatalities. Consequently, the sanctions imposed should be commensurate with the severity of the error committed. These sanctions may range from reprimands and warnings to the suspension or revocation of practice licenses, and in some cases, criminal charges. The determination of appropriate sanctions should take into account factors such as intent, negligence, and the impact on the patient's well-being.

However, there are instances where mistakes can occur during the prosecution and decision-making process, involving both prosecutors and judges. This becomes evident when defendant one and defendant two commit errors that violate the regulations outlined in Article 84, paragraph (2) of Law Number 36 of 2014 concerning Health Workers. If these defendants indeed make mistakes that contravene the aforementioned article, it is imperative that they face appropriate sanctions. Failure on the part of prosecutors and judges to adequately consider the available evidence or to impose sanctions commensurate with the level of misconduct committed can be deemed as an error in the formulation of charges and verdicts. Such errors not only have the potential to harm patients who have fallen victim to medical errors, but also erode public trust in the justice system.

Health workers bear a significant responsibility for the safety and well-being of their patients while carrying out their duties. Therefore, in cases where negligence leads to the loss of a patient's life, legal measures must be taken to ensure justice for the victim and their family.

Prosecutors and judges play a crucial role in upholding the law when it comes to health workers who display gross negligence. It is their duty to prosecute and impose the maximum penalty of imprisonment as stipulated in Law No. 36/2014 on Health Workers.

The law places significant emphasis on the punishment for health workers who commit gross negligence resulting in death, with a maximum imprisonment of 5 years. This highlights the gravity of negligence that leads to the loss of a patient's life and underscores the need for strict penalties. However, it is crucial to ensure that legal action against health workers is carried out fairly and proportionally. Prior to initiating legal proceedings, it is essential to conduct a thorough investigation to ascertain the severity of the negligence and its direct impact on the patient's demise.

Furthermore, it is important to take into account that Law No. 36/2009 on Health Article 29 stipulates that in cases where health workers are suspected of negligence in their professional duties, mediation should be the initial approach to resolving the matter. This demonstrates that legal action is not the sole recourse for addressing instances of health worker negligence.

The implementation of Law No. 29/2004 on the Practice of Medicine has brought about a significant change in the examination process for doctors accused of malpractice in Indonesia. Previously, the examination process was overseen by the Medical Ethics Honor Council (MKEK), but it has now been entrusted to the Indonesian Medical Discipline Honor Council (MKDKI).

MKDKI plays a crucial role in addressing complaints related to doctor misconduct. Individuals from the public have the opportunity to lodge complaints against doctors suspected of engaging in malpractice with MKDKI. Upon receiving a complaint, MKDKI undertakes a comprehensive examination of the case.

The examination process conducted by MKDKI encompasses several stages, including the collection of evidence, testimonies from witnesses, and analysis of the reported case. MKDKI possesses the authority to request information from the doctors involved in the case

and may involve medical experts to provide professional opinions on the actions taken by the accused doctors.

Following a thorough examination, MKDKI renders a decision regarding the violation of the doctor's discipline. This decision can take the form of disciplinary sanctions, reprimands, suspension of practice licenses, or even the revocation of the doctor's license. MKDKI aims to establish a firm and equitable policy for doctors who have been proven to commit malpractice. These changes are expected to enhance MKDKI's effectiveness and transparency in handling malpractice cases. Moreover, MKDKI is also anticipated to provide protection for the public by ensuring accountability within the medical profession.

The application of these articles in a case can have significant legal implications for doctors. Firstly, under Article 90 of the Criminal Code, if a doctor intentionally violates the law and as a result, causes harm or poses a danger to the patient, they may face punishment in the form of imprisonment or a fine, as determined by the relevant provisions.

Secondly, Article 359 of the Criminal Code states that if a doctor intentionally commits an act that leads to the death of a patient, they can be sentenced to imprisonment for a period of 15 years or even life imprisonment.

Thirdly, according to Article 360, paragraph (1) of the Criminal Code, if a doctor's negligence results in a patient suffering serious injury, they may be subject to a one-year prison sentence.

Fourthly, under Article 360, paragraph (2) of the Criminal Code, if a doctor's negligence causes a patient to suffer an injury that temporarily renders them ill or unable to perform their duties or work, the doctor may face punishment in the form of a nine-month prison sentence, light imprisonment for six months, or a maximum fine of four thousand five hundred rupiahs.

Lastly, Article 361 of the Criminal Code stipulates that if a doctor intentionally performs an act that causes the patient to experience bodily disability or loss of bodily function, they may be sentenced to imprisonment for a period of five years.

Doctors are required to be responsible for their actions and decisions when carrying out their professional duties, especially when facing legal consequences. They must be prepared to undergo a legal process that involves investigation and trial. If found guilty, doctors can face criminal penalties as stipulated by the relevant regulations. Additionally, doctors may also face administrative sanctions, such as the revocation of their practice licenses or disciplinary measures imposed by medical professional institutions.

In the legal relationship between doctors and patients, doctors have a duty to provide medical services in accordance with established standards. If a doctor fails to fulfill these obligations and causes harm to a patient, they can be held both civilly and criminally liable.

In the civil context, if a doctor breaches their obligations and commits an unlawful act, the patient has the right to file a civil lawsuit seeking compensation for the losses they have suffered. The purpose of this lawsuit is to either restore the patient to their pre-loss position or provide them with appropriate compensation.

On the other hand, in the criminal context, if a doctor engages in malpractice that harms a patient, they can face criminal prosecution under Article 360 of the Criminal Code. This article specifically addresses the criminal offense of malpractice, which involves a violation of the doctor's duty to provide medical services and results in the death or serious injury of the patient. The objective of this criminal process is to hold accountable those doctors who commit unlawful acts and to safeguard the rights of the victims.

It is crucial to emphasize that in malpractice cases, the legal procedure must adhere to the relevant judicial process. If a patient or their family feels wronged, they must report the incident to the authorities and substantiate that the doctor's actions were unlawful and caused harm. Throughout the judicial process, doctors are entitled to defend themselves and demonstrate that their actions were in line with the appropriate medical standards.

To summarize, the legal relationship between doctors and patients is governed by legal obligations. If a doctor breaches their responsibilities, they can face both civil and criminal lawsuits. In civil cases, patients can file a lawsuit to seek compensation for the damages they have suffered. On the other hand, in criminal cases, doctors can be subject to criminal penalties as outlined in Article 360 of the Criminal Code. Nevertheless, it is essential for the legal process to follow the applicable judicial procedures, and doctors have the right to present their defense. Therefore, it is of utmost importance for doctors to consistently adhere to the relevant medical standards and provide the highest quality medical services to their patients.

The enforcement of hospital liability in cases of malpractice involves a series of steps and procedures that must be adhered to in accordance with the relevant laws and regulations. Hospitals play a crucial and strategic role in enhancing public health and are obligated to ensure the provision of high-quality healthcare services, encompassing preventive, promotive, curative, and rehabilitative measures. When instances of malpractice occur, hospitals bear the responsibility of delivering comprehensive and superior healthcare services, as stipulated in Article 1 of Law Number 44 of 2009. In the event of negligence or errors resulting in harm to patients, hospitals are required to take appropriate measures to fulfill their obligations, which may include providing compensation or damages to the victims, as outlined in Paragraph 1 of Article 19 of the Consumer Protection Law (UUPK).

Furthermore, hospitals are expected to handle any damages or losses experienced by the affected consumers in the most effective manner possible. This may involve providing necessary medical treatments, implementing remedial actions if feasible, or offering other forms of assistance to aid the victims in overcoming the losses they have suffered. In the legal process, the aggrieved patient or their family must file a report with the relevant authorities and substantiate that the doctor or hospital has engaged in unlawful acts that have caused harm to the patient. Throughout the judicial proceedings, hospitals and doctors possess the right to defend themselves and demonstrate that their actions were in accordance with the applicable medical standards.

### **Protection For Victims Of Medical Malpractice**

Patients are entitled to seek legal recourse by filing a civil lawsuit in court to address the damages they have suffered as a result of a doctor's breach of promise. This legal action is governed by various provisions outlined in the Civil Code, specifically Law No. 36 of 2009 on Health, Law No. 17 of 2023 on Health, and Law No. 36 of 2014 on Health Workers. Within the Civil Code, the losses incurred by patients due to a doctor's breach of promise can be categorized under the provisions concerning default (as stated in Article 1239 of the Civil Code). According to this article, a debtor is deemed negligent if they fail to fulfill their agreed-upon obligations, whether through a warranty or other means, or if they exceed the specified time limit outlined in the agreement. Furthermore, the Civil Code also addresses negligence in Article 1366, which establishes that individuals are accountable not only for losses resulting from their actions but also for losses caused by their negligence or lack of care.

In cases where medical personnel or health workers are suspected of committing both criminal and civil offenses related to the healthcare sector, it is not automatic for these individuals to face criminal charges. Instead, they must first be subjected to a recommendation process by the assembly. This recommendation process has a maximum duration of 14 working days, and if the panel fails to provide a recommendation within the specified timeframe, it is considered as having recommended proceeding with the investigation.

In the process of investigation, there exists a collaboration between health civil servant investigators and police investigators. Apart from possessing the authority as prescribed in

the Criminal Procedure Code, health civil servant investigators are specifically empowered to receive and examine reports, conduct searches, verify identities for investigative purposes, seek information and evidence from individuals or legal entities, detain, examine, and confiscate letters, documents, and/or other materials/evidence related to criminal acts in the Health sector. They also have the power to summon individuals as suspects, witnesses, or experts for examination and testimony, as well as to halt the investigation if there is insufficient evidence.

Furthermore, the second legal basis, which is Law No. 36 of 2009 concerning Health, also addresses civil claims made by patients against healthcare workers or providers. According to Article 58 of this law, every individual has the right to seek compensation from healthcare workers and/or providers who have caused them harm or losses due to errors or omissions in the healthcare services they have received. However, there is an exception for compensation claims against healthcare workers who have performed life-saving or disability-preventing measures in emergency situations.

Law No. 17 of 2023 on Health serves as a crucial legal foundation in determining the accountability of medical and healthcare personnel towards patients. Article 308, paragraph (2) of this law affirms that in cases where actions or deeds have caused civil harm to a patient, the responsible medical and healthcare personnel must seek a recommendation from the panel as stipulated in Article 304.

The assembly mentioned in Article 304 is a professional body consisting of medical personnel and health workers, known as the ethics assembly or health assembly. Its main purpose is to provide recommendations regarding the actions and behavior of medical personnel and health workers in relation to professional ethics and standards.

In cases where the actions or behavior of medical personnel and health workers result in harm to the patient, the recommendations of the ethics council or health council can be taken into account when determining the legal responsibility of the individuals involved. This is outlined in Law No. 17 of 2023 on Health, which aims to provide legal protection for patients and highlight the responsibilities of medical personnel and health workers in delivering high-quality and safe healthcare services.

If a patient believes they have been harmed due to medical misconduct or negligence, they have the right to file a criminal complaint with the police. This allows patients to report doctors who they believe are responsible for the harm they have suffered, as stated in Law Number 29 of 2004 concerning Medical Practices and Law Number 17 of 2023 concerning Health. It is important to note that in Law Number 29 of 2004, specifically in Article 66 Paragraph (3), patient complaints to the Medical Ethics Council (MKDKI) do not prevent them from reporting alleged criminal acts to the relevant authorities or filing a civil lawsuit in court. Furthermore, Law Number 17 of 2023 concerning Health addresses the patient's right to file criminal charges. Article 308 paragraph (1) of this law emphasizes that medical personnel or health workers who are suspected of committing unlawful acts in the provision of health services, which may be subject to criminal penalties, must first seek a recommendation from the assembly mentioned in Article 304. This highlights the importance of the ethics assembly or health assembly in the legal process related to medical malpractice or misconduct.

Doctors who engage in malpractice and cause harm to patients may face criminal charges under Article 360 paragraph 1-2 of the Criminal Code (KUHP) in relation to criminal liability in the field of law. This particular article serves as the legal foundation that governs the penalties or sanctions that can be imposed on doctors if their errors or omissions during medical practice result in severe injuries, illnesses, or even hinder individuals from performing their work or fulfilling their positions for a certain period of time (Busthomi et al., 2023).



According to Article 360 paragraph 1-2 of the Criminal Code, doctors who commit mistakes or negligence leading to serious injuries or illnesses in others can be subjected to criminal sanctions. The primary objective of these criminal sanctions is to serve as a deterrent to doctors who engage in malpractice and to prevent the recurrence of similar incidents in the future (Suryadhimirtha, 2011).

The criminal sanctions that can be imposed on doctors may include a specific duration of imprisonment. The length of the prison sentence will be determined based on the degree of culpability exhibited by the doctor. This approach aims to ensure fairness and take into account the extent of the doctor's error in carrying out medical procedures that result in severe injuries or illnesses for patients.

The primary objective of imposing criminal sanctions in cases of medical malpractice is to serve as a deterrent for doctors. By implementing strict penalties, it is anticipated that doctors will exercise greater caution and responsibility when carrying out medical procedures. Furthermore, these criminal sanctions also serve the purpose of preventing future instances of malpractice. The prospect of facing severe punishment compels doctors to exert additional efforts in order to evade errors or negligence in their medical practice.

Law No. 17 of 2023 on Health establishes a set of fundamental principles that must be adhered to by all stakeholders in the provision of healthcare. These principles encompass the notions of justice, equality, affordability, security, openness, and community participation.

The principle of justice underscores the importance of ensuring that every individual is entitled to receive healthcare services without any form of discrimination. It emphasizes the need for equal treatment and access to healthcare, regardless of one's background or circumstances. Similarly, the principle of equality emphasizes that every person should have an equal right to receive high-quality healthcare services, irrespective of their social, economic, or cultural status. This principle seeks to eliminate disparities and ensure that healthcare is accessible to all individuals on an equitable basis. The principle of affordability highlights the necessity for healthcare services to be easily accessible and financially feasible for individuals across all strata of society. It recognizes the importance of ensuring that healthcare services are not only available to those in urban areas but also to those residing in remote or underprivileged regions. Furthermore, the principle of safety guarantees that patients are safeguarded from any potential risks or hazards that may arise during the course of their healthcare journey. This principle emphasizes the need for healthcare providers to prioritize patient safety and take necessary precautions to prevent harm.

The principle of openness emphasizes the importance of transparent and honest communication regarding healthcare services. It necessitates that all relevant information pertaining to healthcare services be conveyed to patients and the general public in a clear and comprehensible manner. Lastly, the principle of community participation underscores the significance of involving the community in decision-making processes related to healthcare services. It recognizes that the community's active engagement and input are vital in shaping healthcare policies and practices that align with their needs and preferences.

Law Number 17 of 2023 on Health encompasses various obligations for all parties involved in the provision of healthcare services. These obligations encompass the provision of high-quality healthcare services, safeguarding the confidentiality of patient information, adhering to professional standards and medical ethics when carrying out medical procedures, and involving the community in decision-making processes related to healthcare services.

Furthermore, Law No. 17 of 2023 on Health mandates that both the central and local governments prioritize environmental health aspects. This includes the control and prevention of both communicable and non-communicable diseases, effective management of medical waste, and the supervision of water and air quality. Additionally, the government is obligated to promote healthy lifestyles and prevent diseases through various initiatives such as vaccination programs, anti-smoking campaigns, and the promotion of sports activities.

In addition to these duties, Law No. 17 of 2023 on Health stipulates that the government must pay attention to the rights of patients, including the right to clear and accurate information about their health condition, the right to privacy and confidentiality of medical information, and the right to choose the type of health care they want.

In carrying out its duties, the central and local governments are expected to cooperate with various parties, including non-governmental organizations, the private sector, and the general public. This aims to ensure that health efforts truly reflect the needs and aspirations of the community, and are accessible to all levels of society without discrimination.

Thus, Law No. 17 of 2023 on Health has a very important role in ensuring public health and improving the quality of life of the population. Therefore, the government must continue to be committed to carrying out its duties properly and pay attention to the various changes and challenges that occur in the world of health.

Law No. 17 of 2023 on Health includes the following rules regarding health resource management and community involvement in health development:

The central and local governments bear the responsibility of ensuring the availability and accessibility of health facilities, along with providing health information and education. They are tasked with regulating, fostering, supervising, and enhancing the quality and competence of medical and health personnel. This encompasses planning, procurement, and utilization of medical and health personnel in accordance with community and regional needs, as stipulated by law. Additionally, the government is mandated to allocate funds for health initiatives, disaster management, fortifying health resources, and empowering communities.

Law No. 17 of 2023 on Health underscores the significance of community empowerment and participation in health efforts. Communities are expected to engage, both individually and through organized groups, at all stages of health development to expedite the attainment of the highest public health standards. Ensuring access to basic and advanced health services should involve the community, inclusive of vulnerable populations, in a non-discriminatory manner.

This study highlights the imperative to enhance legal awareness among medical personnel and patients regarding their rights and obligations concerning malpractice. Consequently, it is recommended that hospitals and health professional associations conduct regular training sessions and seminars to disseminate information on the legal aspects of healthcare. To facilitate the reporting of malpractice cases, the reporting system should be strengthened and rendered more transparent, potentially incorporating an online portal for patients to easily file complaints and access information on the related legal process.

Given the complexity of malpractice cases, the establishment of specialized health courts with ad hoc judges possessing expertise in both medical and legal fields is advised. This would contribute to more effective and efficient resolution of malpractice cases. The study underscores the importance of clear and measurable medical standards, suggesting collaboration between medical associations and the government to develop and update standards applicable to all health workers.

The Indonesian Medical Discipline Honor Council (MKDKI) plays a crucial role in addressing malpractice cases. It is recommended to reinforce the role of MKDKI in enforcing professional discipline and delivering fair and proportional sanctions for violations.

**Improved Access to Legal Services:** Victims of malpractice often encounter difficulties in accessing sufficient legal services due to limited information, cost, or accessibility. Therefore, the recommendation is for the government and relevant legal institutions to enhance access to legal services for malpractice victims. This could involve providing free or subsidized legal aid for those unable to afford it, as well as developing legal education programs for the general public to better comprehend their rights as patients and the relevant legal procedures.

## CONCLUSION

The conclusion regarding the legal protection for victims of malpractice in Indonesia is based on a combination of several laws and regulations. These include Law No. 44 of 2009 on Hospitals, Law No. 36 of 2009 on Health, Law No. 8 of 1999 on Consumer Protection, and Medical Practice Law No. 29 of 2004. These laws provide a solid foundation for safeguarding the rights of patients and establishing mechanisms to hold hospitals and medical personnel accountable for malpractice.

The implementation of hospital liability involves following the steps and procedures outlined in the relevant laws and regulations. Hospitals are required to ensure the provision of comprehensive and high-quality healthcare services, which includes taking responsibility for any errors that may occur during medical treatment. In cases of negligence, hospitals are obligated to provide compensation or damages in accordance with the Consumer Protection Act. Patients or their families who believe they have been wronged have the right to file a report with the appropriate authorities and present evidence of the unlawful actions that caused harm during the judicial process. Hospitals and doctors also have the right to defend themselves and demonstrate that their actions were in line with accepted medical standards.

The legal protection afforded to victims of malpractice encompasses various rights and mechanisms. These include the right to receive compensation, access to a fair legal process, the ability to lodge complaints with the Indonesian Medical Disciplinary Honor Council (MKDKI), protection under the Medical Practice Act, and the imposition of disciplinary sanctions by the MKDKI against doctors found guilty of malpractice. As a result, victims of malpractice have access to a range of legal avenues through which they can seek justice and obtain compensation for the losses they have suffered.

## REFERENSI

- Arini, K., & Atmadja, I. B. P. (2016). Pengaturan Tingkat Kesalahan Dokter Sebagai Dasar Penentuan Ganti Rugi Pada Pasien Korban Malpraktek. *Kertha Semaya: Journal Ilmu Hukum*, 6(12).
- Asvatham, N., & Purwani, S. P. M. (2020). Pertanggungjawaban Perdata Tenaga Medis apabila Melakukan Malapraktik Medis. *Kertha Semaya: Journal Ilmu Hukum*, 8(4), 510–519.
- Aulia, I. (2014). *Tanggungjawab Hukum Rumah Sakit Terhadap Kelalaian Medis Yang Dilakukan Tenaga Kesehatan*. Universitas Lampung.
- Basuki, S. W., Nuria SI, I., Ziyaadatullah A, Z., Utami, F., & Ardilla, N. (2020). Tonsilitis. *Jurnal Universitas Muhammadiyah Surakarta*, 483–494.
- Busthomi, A. F., Sutarno, S., Nugraheni, N., & Huda, M. K. (2023). Urgensi Pengadilan Kesehatan Sebagai Upaya Solusi Masalah Sengketa Medis Di Indonesia. *Jurnal Kertha Semaya*, 11(11), 2677–2693.
- Dana, I. K. S. P., Dewi, A. A. S. L., & Widyantara, I. M. M. (2021). Sanksi Pidana terhadap Tenaga Medis yang Melakukan Pemalsuan Surat Keterangan Rapid Test Covid 19. *Jurnal Interpretasi Hukum*, 2(1), 53–58.
- Hutabarat, D. T. H., Salam, A., Zuwandana, A., Al Azmi, C., Wijaya, C. R., Darnita, Tania, I., Lubis, L. K. A., Sitorus, M. A. P., Adawiyah, R., & Sinaga, R. (2022). Analysis of The Implementation of Law in every level of Society in Indonesia. *Policy, Law, Notary and Regulatory Issues (POLRI)*, 1(2), 9–14. <https://doi.org/https://doi.org/10.55047/polri.v1i2.80>
- Isfandyarie, A., Afandi, F., Puspita, N. Y., & Gufron, A. (2006). *Tanggung jawab hukum dan sanksi bagi dokter*. Prestasi Pustaka Publisher.
- Koeswadji, H. H. (1992). *Beberapa Permasalahan Hukum dan Medik*. Citra Aditya Bakti.

- Mustamin, R. (2018). Aktor Yang Berhubungan Dengan Kejadian Tonsillitis Pada Anak Usia Sekolah Di Poli Klinik Rsud Labuang Baji Makassar. *Jurnal Ilmiah Keperawatan Dan Kebidanan Holistic Care*, 2(02), 167–173.
- Mustofa, F. L., & Susanti, F. (2020). Hubungan Tonsilektomi dengan Umur Keluhan Utama dan Ukuran Tonsil pada Pasien Tonsilitis Kronik. *ARTERI: Jurnal Ilmu Kesehatan*, 1(3), 241–247.
- Nasution, B. J. (2005). *Hukum Kesehatan: Pertanggungjawaban Dokter*. Rineka Cipta.
- Setiono, R. O. L. (2004). *Magister Ilmu Hukum Program Pascasarjana Universitas Sebelas Maret*. Surakarta.
- Suryadhimirtha, R. (2011). *Hukum malapraktik kedokteran disertai kasus dan penyelesaiannya*. Total media.
- Sutopo, J. K. (2012). Studi Evaluasi Kepuasan Pelayanan Informasi RSUD DR. Raden Soedjati Soemodiardjo Kabupaten Grobogan Tahun 2012. *Journal of Rural and Development*, 3(1).
- Tendean, M. E. (2019). Pertanggungjawaban Rumah Sakit Terhadap Tindakan Dokter Yang Melakukan Malpraktek. *Lex Et Societatis*, 7(8).
- Wogo, I. G. A. (2014). *Tinjauan Kriminologis Terhadap Malpraktek Medik yang Dilakukan Oleh Bidan*.