

Analysis of Medical Legal Order as A Basis For Settlement of Medical Malpractice Disputes

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Abstract

This study aims to determine whether the medical legal order can provide a solution for resolving medical disputes carried out by doctors against health service recipients in hospitals. The absence of a malpractice law creates confusion in decision making when doctors become involved in medical disputes. As primary legal material, it has a strong legal basis in making decisions on sanctions that can be imposed on doctors who commit malpractice by violating the professional code of ethics or working not according to standard operating procedures. The methods used are normative legal research methods and library legal research by conducting critical analysis on primary and secondary legal materials. The results of the study have shown that malpractice acts committed by doctors have a clear legal accountability mechanism, as regulated in Health Law Number 36 of 2009, Law Number 29 of 2004 concerning medical practice. Administratively all forms of malpractice committed by doctors can be threatened with criminal, civil, administrative sanctions and fines. At a more final level, administrative sanctions from malpractice acts committed by doctors can lead to the revocation of practice license.

Keywords:

legal orders; malpractice; administrative sanctions

Introduction

Black's Law Dictionary defines malpractice as "Professional misconduct or unreasonable lack of skill or failure of one rendering professional services to exercise that the degree of skill and learning commonly applied under all the circumstances in the community by the average prudent reputable member of the profession with the result of injury, loss or damage to the recipient of those services or to those entitled to rely upon them". By using a legal perspective, it can be interpreted that malpractice can occur because of an intentional act, negligence or something unreasonable lack of proficiency (Sampurna, Budi: 2005)¹

¹Budi Sampurna, (2005); Application of the Law on Medical Practice in Medical & Nursing Actions & its Relation to Professional Malpractice

World Medical Association In line with the limitations of the Indonesian Doctors Association (IDI): malpractice is defined as "the failure of doctors to apply therapeutic service standards to patients, lack of expertise or neglect of patient care, which triggers injury to patients" (World Medical Association, 1992).²

Public unrest about malpractice resulted in complaints about malpractice cases in every hospital, where complaints were caused by the quality and lack of health services to patients both from hospitals and from doctors.

Various legal efforts have been carried out in providing comprehensive protection to the public as service recipients, as well as surgeons and medical personnel as service providers. More and more cases of malpractice are being reported by the public, especially direct reports to the police or law enforcement, all because there is no standard rule regarding malpractice in the form of the Malpractice Act, which makes every community who complains about their problems related to disputes with surgeons have to find their own way and a solution that is considered to provide justice.

Existing legal arrangements such as Law of the Republic of Indonesia number 36 of 2009 concerning Health, Law of the Republic of Indonesia number 36 of 2014 concerning Health Workers, and other laws and Regulations of the Minister of Health, will they be used as technical instructions or guidelines in resolving medical malpractice disputes? .

The absence of the Malpractice Law, for researchers is not an obstacle in making decisions on the resolution of medical malpractice because the Indonesian Medical Law Order can provide legal justice, benefit and the rule of law.

Methods

The research carried out in this writing is: by using library research, namely the research method carried out by reading and studying theories that are relevant to the subject matter.

The collected data is then processed using data processing methods consisting of: *Normative Juridical Method* namely the addition method by adhering to the applicable legal norms or rules. This discussion method is used in accordance with its needs to produce a discussion that is acceptable both from a juridical and scientific point of view.

The design of this study includes the process of collecting data (references) from books, analyzing data, and interpreting data, writing and conclusions. Meanwhile, the main

methodological knife applied by the researcher is to use a hermeneutical-critical approach, which is to carry out an in-depth interpretation of the existing data (thoughts) to find value. - fundamental truth values relevant to the research title.

Legal materials derived from Primary legal materials are derived from laws and regulations, namely:

- a. Law No. 36 of 2009 concerning Health
- b. Law No. 36 of 2014 concerning Health Workers
- c. Law No. 29 of 2013 concerning Medical Practice
- i. Regulation of the Minister of Health No. 1691 of 2011 concerning Patient Safety
- j. Regulation of the Minister of Health No. 36 of 2012 concerning Medical Secrets
- k. KKI Regulation No. 4 of 2011 concerning Professional Discipline of Doctors

Results and Discussion

There are many legal arrangements with the aim of regulating health law related to malpractice, negligence of medical personnel, competency requirements, but there is no specific law regarding the Health Worker Malpractice Act in Indonesia (Rechtsvacuum) or due to a vacancy of norms³.

Article 1(1) of Health Law 36/2009). Health is a healthy condition, both physically, mentally, spiritually and socially that allows everyone to live socially and economically productive.

Article 1 (2) Resources in the health sector are all forms of funds, personnel, medical supplies, pharmaceutical preparations and medical devices as well as health service facilities and technology used to carry out health efforts carried out by the government, regional governments and/or the public.

³According to the Big Indonesian Dictionary (KBBI), "emptiness is a matter (state, nature and so on) empty or emptiness", which in the Legal Dictionary is defined as Vacuum (Bld) which is translated or interpreted the same as "empty or vacant", so legal vacuum can be interpreted as "an empty state or absence of legislation (law) that regulates (certain) order in society", so that the legal vacuum in positive law is more accurately said to be "emptiness of laws / legislation".

In Article 5 of the Health Law, it is stated that everyone has the same rights in obtaining access or resources in the health sector, obtaining safe, quality and affordable health services and has the right to independently and responsibly determine the health services needed for himself. Likewise, Article 7 also states that everyone has the right to receive information and education about health that is balanced and responsible and has the right to obtain information about his/her health data, including actions and treatments that have been or will be received from health workers.

The meaning of the Health Law above, when it is associated with malpractice accused of a doctor or medical personnel, is felt to be unreasonable, because the surgeon who will perform a surgical procedure in which almost all of the actions are risky so that it is certain that a doctor must have excellent health conditions to be able to do so. manage patients according to Standard Operating Procedures so that they can produce an "effort" healing action with better results. Likewise, the facilities and infrastructure to support the achievement of better efforts must certainly be prepared and according to the standards of the hospital, the pharmacy department, so that the standard of service provided to the community is categorized as "excellence". Informed consent which contains documents regarding Communication of Information and Doctor Education to patients before a surgical procedure is performed is very important because the informed consent can be used as "evidence or evidence" if in the future there is a medical risk that is considered as malpractice by the patient and family.

According to the Law on Medical Practice No. 29 of 2004, medical practice is a series of activities carried out by doctors and dentists for patients in carrying out health efforts. To realize good medical practice, it is necessary to have a good health service system so that medical practice is carried out with the highest standards.

In Article 50 of Law No. 29 of 2004, letter a, doctors and dentists in medical practice have the right to obtain legal protection as long as they carry out their duties according to professional standards and standard operating procedures.

It is very clear what the meaning contained in the Medical Practice Law above is that medical malpractice can be avoided if surgeons and medical personnel, in providing services, must have a practice permit on the basis of a Registration Certificate from the Indonesian

Medical Council and a competency letter from a surgical college so that the quality is standard. good service can still be maintained. And of course avoid lawsuits by patients if there is a medical risk. In the Health Law of the Republic of Indonesia number 36 of 2009,

1. Article 27 states that health workers have the right to receive compensation and legal protection in carrying out their duties in accordance with their profession. Others are regulated in a Government Regulation.
2. Article 29 states that, in the event that a health worker is suspected of being negligent in carrying out his profession, the negligence must first be resolved through mediation.

Other articles related to the occurrence of medical malpractice as also mentioned in the Health Law are:

1. Article 42,(2.) Health technology includes all methods and tools used to prevent disease, detect disease, relieve suffering due to disease, cure, minimize complications and restore health after illness.
2. In article 56. Everyone has the right to accept or reject part or all of the relief measures that will be given to him after receiving and fully understanding the information regarding the action.
3. Article 58 states that everyone has the right to claim compensation for a person, health worker and or health provider who causes losses due to errors or omissions in the health services they receive.
4. Article 83 paragraph 2 also states "The government guarantees legal protection for health workers in health services.

The rule of law must still be enforced as long as justice is created between doctors as service providers and patients as service recipients. Doctors have rights and obligations as well as patients have rights and obligations, both of which must be honest with each other and create an atmosphere of harmony, communication that is maintained properly during carrying out "Therapeutic" process even reaches recovery. If unexpected things occur, medical risk events are beyond the ability of doctors as service providers, the Health Law clearly states that Mediation is an option before bringing medical disputes to the realm of law (Criminal). or civil)

In the Guidance and Supervision Chapter section, article 188 it is stated, the Minister can take administrative action against health workers and health service facilities that violate

the provisions as stipulated in the Health Law. Its main duties and functions are in the health sector.

Administrative actions can be in the form of a written warning, revocation of temporary permits or permanent permits.

In the Health Law No. 36 of 2009, CHAPTER XX concerning Criminal Provisions starting from articles 190 to 201. In article 190, (1) Heads of health care facilities who practice or work intentionally do not provide first aid to patients who are in an emergency situation are punished with imprisonment for a maximum of two (2) years and a fine of a maximum of two hundred million rupiah (Rp. 200,000,000.00). In paragraph (2), in the event that the act in accordance with paragraph (1) results in disability or death, the head of the health service facility and/or health worker shall be sentenced to a maximum imprisonment of 10 (ten) years and a maximum fine of Rp.1,000. 000,000.00 (one billion rupiah). In article 191.

The existence of long imprisonment and fines and the amount is up to billions without any evidence of "negligence" or fraud committed by doctors, it seems difficult to apply in enforcing criminal law. intentionally having an abortion imprisonment for a maximum of 10 years and a fine of a maximum of one billion rupiah" except for abortion medicinalis. intentionally failing to provide first aid to a patient in an emergency situation as referred to in Article 32 (2) or Article 85(2) shall be punished with imprisonment for a maximum of two years and a fine of a maximum of two hundred million rupiahs. In the two articles 32 (2) and 85(2), in principle, service providers are prohibited from refusing or not taking emergency actions to critically ill patients or during a disaster.

Health service providers, especially doctors and medical personnel, have a "specialty" so that legally the person concerned has been educated to become a health worker whose "mind-mental-set" has been called to take action wherever they see an incident that requires the help of health workers. So article 190 paragraphs 1 and 2, with imprisonment and a fine of two hundred million rupiah to one billion, are impossible to apply due to the difficulty of evidence in court.

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The regulation of supporting facilities in health care facilities has been set forth in the Law of the Republic of Indonesia number 44 of 2009 concerning Hospitals. Article 13 states that: Medical personnel who practice medicine in hospitals are required to have a Practice Permit (SIP), work according to professional standards, hospital service standards, applicable standard operating procedures, professional ethics, respect patient rights, and prioritize patient safety. In articles 15 and 16, requirements for pharmaceuticals and equipment, hospitals must ensure the availability of pharmaceutical preparations and medical devices that are of good quality, useful, safe and affordable and fit for use. In paragraph 2 of article 16. Medical equipment used directly by doctors.

In Article 37 of Law No. 44 of 2009 concerning Hospitals, that every medical action performed in a hospital must obtain the consent of the patient or family. 1) Hospitals are required to apply patient safety standards. In article 45 (1) the hospital is not legally responsible if the patient and or family refuses or stops treatment which can result in the patient's death after a comprehensive medical explanation. And in article 46, that the hospital is legally responsible for all losses caused by negligence by health workers at the hospital. Here the hospital as a large institution in providing health services to the public.

The legal order related to medical malpractice is of course also contained in the Law of the Republic of Indonesia Number 36 of 2014 concerning Health Workers. so that the highest degree of health will be realized as an investment for the development of socially and economically productive resources as well as one of the elements of general welfare as referred to in the preamble to the Constitution of the Republic of Indonesia. Health efforts must be carried out by responsible health workers, who have high ethics and morals,

expertise, and authorities whose quality must be continuously improved through continuous education and training, certification, registration, licensing, as well as guidance, supervision, monitoring so that the implementation of health efforts fulfills a sense of justice and humanity and is in accordance with the development of science and technology. general provisions say that this Law provides legal certainty to the public and medical personnel. Article 5 (e) Guidance is carried out by fostering, supervising, and improving the quality of Health Workers through the implementation of Competency certification activities and implementation of Health Personnel Registration. Article 34 (1) To improve the quality of the practice of Health Workers and to provide legal protection and certainty to Health Workers and the public, a Health Workers Council was formed. The Indonesian Health Workers Council has a function as a function of regulating, determining, and fostering Health Workers in carrying out the practice of Health Workers with the aim of improving the quality of health services (article 37). (STR) is stated in article 44.

In addition, Health Teenagas must have a certificate of education in the field of Health, have a Certificate of Competence/professional certificate, have a Certificate of Physical and Mental Health, have a statement that has taken an oath/professional promise, and a statement to comply with and implement provisions of professional ethics. and coaching Health Workers in carrying out the practice of Health Workers with the aim of improving the quality of health services (article 37). For registration purposes, and coaching, every Health Workers who practice are required to have a Registration Certificate (STR) as stated in article 44. In addition, Teenaga Health must have an education diploma in the field of health, have a certificate of competence/professional certificate, have a certificate of physical and mental health, have a statement that has taken an oath/professional promise, and a statement to comply with and implement the provisions of professional ethics. and coaching Health Workers in carrying out the practice of Health Workers with the aim of improving the quality of health services (article 37).

For registration purposes, and coaching, every Health Worker who practices practice is required to have a Registration Certificate (STR) as stated in article 44. must have an education diploma in the field of health, have a certificate of competence/professional certificate, have a certificate of physical and mental health, have a statement that has taken an oath/professional promise, and a statement to comply with and implement the provisions of

professional ethics. have a Certificate of Competence/professional certificate, have a Certificate of Physical and Mental Health, have a statement that has taken an oath/professional promise, and a statement to comply with and implement the provisions of professional ethics. have a Certificate of Competence/professional certificate, have a Certificate of Physical and Mental Health, have a statement that has taken an oath/professional promise, and a statement to comply with and implement the provisions of professional ethics.

The fourth part of the Law on Health Workers, which concerns discipline enforcement, states that if there is a case of violation of the discipline of Health Workers, the Council may impose disciplinary sanctions in the form of: giving written warnings, revocation of STR or SIP and or the obligation to attend education or training at Health Education Institutions.

Regarding legal protection, in article 57 concerning the Rights and Obligations of Health Workers, that: Health workers in carrying out their practice are entitled to: obtain legal protection as long as they carry out their duties in accordance with professional standards, professional service standards and standard operating procedures. treatment in accordance with human dignity, morals, decency, and religious values. Refuse the wishes of recipients of health services that are contrary to professional standards, codes of ethics, service stands, Standard Operating Procedures, or statutory provisions. In article 58 In carrying out the practice, health workers must (e) refer recipients of health services to other health workers who have competence and authority in accordance with the severity of their illness.

In article 61, in carrying out practice, Health Workers who provide direct services to Health Service Recipients must carry out their best efforts for the benefit of Health Service Recipients by not promising results. Because the doctor-patient agreement is a therapeutic agreement) inspanningverbintennis, not resultanverbintennis.

Article 75 expressly states that Health Workers in carrying out their practice are entitled to legal protection, and in Article 77 concerning Dispute Resolution, that any Health Service Recipient who is harmed due to errors or negligence of Health Workers can request compensation in accordance with the provisions of the legislation. the point of article 78, that any dispute arising from the negligence of the health worker must be resolved first through dispute resolution outside the court. and the community for actions taken by Health Workers, providing legal certainty for the community and Health Workers. Administrative sanctions for Health Workers who commit negligence resulting in malpractice are administrative

sanctions (ps 82). Administrative sanctions are in the form of: verbal warnings, written warnings, administrative fines, and revocation of permits.

Criminal provisions due to negligence committed by Health Workers, causing serious injury to recipients of health services, shall be punished with a maximum imprisonment of 3 (three) years, if it results in death due to being proven "negligent" shall be sentenced to a maximum imprisonment of 5 (five) years.

In article 85 (1), any health worker who intentionally practices without having an STR is sentenced to a maximum fine of Rp. 100,000,000.00 (one hundred million rupiah), while article 86(1) states that every health worker who practices without have a permit, shall be punished with a maximum fine of Rp. 100,000,000.00 (One hundred million rupiah).

In the Regulation of the Minister of Health of the Republic of Indonesia number 4 of 2014, regarding the Obligations of Hospitals (RS) and patient obligations, in the considering section it is said that, actions taken by hospitals as health service providers with complex characteristics and organizations have legal implications for patients who receive health services, officers who work in hospitals and the surrounding community.

In article 23 of the Minister of Health Regulation, paragraph 1 reads, the obligation of hospitals to protect and provide legal assistance to all hospital officers, in carrying out their duties, is carried out by providing legal consultation, facilitating the mediation process, and judicial processes, providing legal advocacy, providing assistance in settlements. medical disputes and allocate budget for funding legal proceedings and compensation. In paragraph 2, it is also stated that hospitals have an obligation to guarantee the rights of officers who work in hospitals.

Likewise, in the Medical Practice Law, number 29 of 2004, in article 3 chapter II, it is stated that the regulation of medical practice aims to provide protection to patients, maintain and improve the quality of medical services provided by doctors and dentists and provide legal certainty to patients. community, doctors and dentists.

In article 50 letter a, the Medical Practice Law also mentions the rights and obligations of doctors and dentists, as stated in point a. obtain legal protection as long as they carry out their duties in accordance with professional standards and standard operating procedures.

In the description of the explanation of the medical practice law above, it is stated that doctors and dentists with their scientific equipment have distinctive characteristics. This

peculiarity can be seen from the justification provided by the law, namely the permissibility of taking medical actions against the human body in an effort to maintain and improve health status. However, it is not detailed in an explanation regarding legal certainty for these health workers if there are medical risk problems in carrying out their work.

With the existence of this Medical Practice Act, even though medical personnel have specific characteristics, they still have to work and when performing medical actions are carried out regularly. *artistic lege*, meet the requirements such as a special Competency Letter, Registration Certificate from the Indonesian Medical Council, Practice Permit, and other letters stating that medical personnel may actually touch patients and perform medical actions.⁴

In the Medical Practice Law number 29 of 2004, it is regulated that if a doctor or medical personnel is proven to have committed malpractice, the legal sanctions are in the form of:

a. Administrative Sanctions

If a doctor is proven to have violated the application of medical discipline, the Indonesian Medical Discipline Honorary Council (MKDKI) will investigate the truth of the alleged wrongdoing to the doctor, and if proven, the MKDK will forward the complaint to the Indonesian Doctors Association (IDI) organization for action.

The sanctions given by the MKDKI are in the form of administrative sanctions in the form of written warnings, recommendations for revocation of Registration Certificates (STR) or Practice Permits (SIP), and or the obligation to attend medical education and training. (according to the Law on Health Workers number 36 of 2014, CHAPTER XVI, the fourth part of Enforcement of Discipline for Health Workers, article 49 (2).

b. Civil Claims: can be in the form of claims for default based on contractual liability and or unlawful acts (*onrechtmatigedaad*).

⁴According to Leenan, "lege artis" is essentially an action that is carried out according to the Medical Professional Standards

- c. Criminal charges, can be subject to articles of punishment due to intentional or negligence which results in another person dying, getting sick or being injured, still referring to the provisions of articles 359, 360 and 361 of the Criminal Code. malpractice' in point 1 and point 2. which contains "...intentionally failing to provide emergency assistance, shall be punished with imprisonment for a maximum of two years or a fine of two hundred million rupiahs. Meanwhile, in point 2, "...if it results in disability or death, the maximum imprisonment is imprisonment. ten years and a maximum fine of one billion rupiah.

By paying attention to the Health Law number 36 of 2009, in Chapter V concerning Resources in the Health Sector, the first part of Health Workers in article 29, it is clearly stated that "In the event that a health worker is suspected of negligence in carrying out his profession, the negligence must be resolved first. first through mediation.

In the Elucidation section of Article 29 Chapter V of the RI Law No. 36 of 2009 concerning health, "Mediation is carried out when a dispute arises between health workers providing health services and patients as recipients of health services. Mediation is carried out with the aim of resolving disputes out of court by mediator agreed upon by the parties.

Conclusion

Regulations regarding medical malpractice in Indonesian positive law do not yet have a specific regulation. Although in several laws and regulations (*lex generalis*), namely in the Criminal Code and the Medical Practice Law, there are several articles that are indirectly related to medical practice, but in the regulations Thus, it can be said that medical malpractice in Indonesia still does not have a clear legal umbrella or legal basis, so it is still difficult to resolve problems related to medical malpractice.

However, if this is difficult to realize, the many legal arrangements can be used as a reference in making decisions so that there is no chaos or confusion in the community so that the legal process for suspected malpractice (doctors) and the community/patients who feel aggrieved get a middle ground or win-win. win solution to the case at hand.

Malpractice has broad implications both for hospitals as health care facilities, for doctors as workers in the health sector who are under the auspices of a large institution,

collegium and educational center that are recognized by the government, and of course have a huge impact on patients/communities in the area.

The final sanctions from the articles of the health law order place more emphasis on administrative sanctions such as moral ethical sanctions for doctors, revocation of practice permits, settlement of compensation (fines), settlement by mediation.

If a doctor is proven to have committed a crime against the law "criminal malpractice" in the health law, it is clear that there is a criminal article that can uphold justice.

References

- AP's son; Physician's Criminal Settlement and Liability Against Patients in Medical Malpractice Cases; Law Study Program Masters Program FH University 17 August 1945 Semarang Indonesia, Vol1 no 1 Magistra Law Review January 2020
- Dahlan S(2019); Malpractice in terms of Indonesian Administrative Law, Journal of Legal Dynamics, Vol 2(1)
- Damayanti OP (2013); Doctor's Criminal Liability in Malpractice Cases in Various Legislations in Indonesia;Recidive Volume 2(2)
- Dananjaya, AAND; Dewi AASL; Suryani, LP ;(2019) Malpractice Sanctions and Medical Risks Performed by Doctors; Warmadewa University Denpasar-Bali, Indonesia;Journal of Legal Analogy 1(1)
- Dr.Tiar Ramon SH,MH: advocate/lawyer/legal consultant/lecturer: Emptiness of Norma,13 December 2009,Tiaramon Wordpress.com
- Eka Julianta W (2010): Justification for Medical Actions according to the Medical Practice Law and Standard Operating Procedures in Malpractice Legal Disputes; DIH, Universitas Pelita Harapan (UPH) Karawaci Tangerang Banten
- Hadi, Apsari IGA;(2018) Unlawful Acts in the Accountability of Doctors for Medical Malpractice Actions, Juridical Journal no. 1
- Handayani T(2020); Physician Accountability and Medical Malpractice Case Settlement Models in Indonesia; Blitar Regency Government Law Division. Mizan; Legal Studies Journal Vol. 9, Number 1,
- Handayani, DA. (2019). *Criminal Accountability of Health Workers*. Jakarta: Yuma Pustaka.
- Handayani, DA. (2020). *Medical Dispute Perspective in Indonesia*. Jakarta: Yuma Pustaka.

- Handoyo B;(2020) Juridical Review of Medical Malpractice Law Enforcement in Health Services in the Perspective of Criminal Law; Lecturer of Constitutional Law Study Program at STAIN Teungku Dirundeng Meulaboh; AT-TASYRI'Scientific Journal of Muamalah Study Program 12(1) June 2020
- Health Law of the Republic of Indonesia number 36 of 2009 and Health Workers number 36 of 2014, Permata Press, 2017
- Indonesian Medical Council Law No. 2 of 2011 concerning Procedures for Handling Cases of Alleged Violations of Discipline for Doctors and Dentists
- Indonesian Medical Council Law No. 29 of 2004 concerning the practice of medicine.
- Indonesian Medical Council Regulation No. 4 of 2011 concerning Professional Discipline of Doctors and/or Dentists
- Lajar JR, Dewi AASLD, Widyantara M(2020) Due to Malpractice Law Perpetrated by Medical Personnel; FH Warmadewa University, Denpasar Bali-Indonesia; Journal of Legal Interpretation Vol.1(1)
- Law No. 29 of 2004 concerning Medical Practice
- Law No. 36 of 2014 concerning Health Workers
- Law No. 44 of 2009 concerning Hospitals
- Mannas, Yussy A;(2018) Legal Relations of Doctors and Patients and Responsibilities of Doctors in Providing Health Services, Journal of Cita Hukum Vol 6(1)
- Marjan Miharja M(2020); Administrative Sanctions for Malpractice Acts of Doctors and Hospitals in Indonesia; STIH; De Lega Lata. Journal of Legal Studies, Faculty of Law UMSU, Vol5(1)
- McGraw-Hill. Concise Dictionary of Modern Medicine 2002; Segen's Medical Dicionary, Farlex, Inc. 2012; A "Medical Failure".<http://medical-dictionar.thefreedictionary.com/medical+failure>
- Minister of Health Regulation of the Republic of Indonesia No. 1691 of 2011 concerning Patient Safety
- Pane E, (2009); Legal Protection for Doctors in Relation to Malpractice and Medical Risks, Yustisia Legal Journal. Vol 76, no 1. Surakarta: UNSPressi,
- Presidential Decree No. 56 of 1995 concerning the Disciplinary Council for Health Workers (MDTK)

Presidential Regulation No. 44 of 2009 concerning Teaching Hospitals

PriantaraAA; Yudistira NO (2020): Hospital Criminal Liability for Doctors or Health Workers
Doing Malpractice; FH.Udayana University; Journal of Kerta Wicara Vol.9(12)

Putra GS;(2020) Implications of Legal Liability for Malpractice Actions Perpetrated by Medical
Personnel in Indonesia; Muhammadiyah Law Review;Journal of Legal Studies,
University of Muhammadiyah 4(2),July 2020

Regulation of the Minister of Health of the Republic of Indonesia No. 36 of 2012 concerning
Medical Secrets

RI Minister of Health Regulation No. 34 of 2017 concerning Hospital Accreditation

RI Minister of Health Regulation No. 4 of 2018 concerning Medical Secrets

Sukendar, S. (2019). *Criminal Acts in Independent Nursing Practice (Legal Protection for Nurses
and Patients)*. Jakarta: Nuha Medika.

Team, P. (2017) *Book of the Republic of Indonesia Health Law Number 36 of 2009 and Health Workers
Number 36 of 20.*, Jakarta: Permata Press.

Tungga, BD. (2018). *Overview of legal liability for medical malpractice*, Jakarta: Yuma Pustaka.

Tungga, DB. (2017). *The role of the mediator judge*. Jakarta: Yuma Pustaka.

Wijaya DF, Sitinjak M, Panggabean AM;(2020) The Application of Malpractic Criminal Causes
Causing Death Based on Law No.36 of 2009 on Health; Legal Studies Program, Prima
University, Indonesia; Journal of Education ,Humanities and Social Science (JEHSS)
Vol3(1)