

## ACCOUNTABILITY OF HEALTH WORKERS AND HOSPITALS IN MEDICAL DISPUTES BASED ON LAW NUMBER 17 OF 2023 CONCERNING HEALTH

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### Abstract

This study discusses the accountability of health workers and hospitals in medical disputes based on Law Number 17 of 2023 concerning Health. The focus of the research is directed at setting norms related to the limits of professional responsibility, institutional obligations of hospitals, as well as medical dispute resolution mechanisms that include mediation, administrative settlement, and judicial channels. The research uses normative juridical methods through the analysis of laws and regulations, doctrines, and related literature to identify legal constructions that govern the protection of patients and health workers. The results of the study show that there is a strengthening of professional standards, patient safety systems, and the governance of health institutions that function as the foundation of legal accountability. The regulatory structure in Law No. 17 of 2023 creates a balance between legal certainty for health workers and the protection of patients' rights, accompanied by improving the quality of documentation, transparency of information, and improving the health service management system. This new norm shows the direction of national health law reform that is more accountable and adaptive to the needs of modern medical services.

**Keywords:** *accountability of health workers, hospitals, medical disputes, Law No. 17 of 2023, health law.*

### INTRODUCTION

The development of healthcare services in Indonesia raises the need for a clear accountability system for health workers and hospitals, especially when medical disputes occur. The public is increasingly aware of health rights, so expectations for the quality of services and safe procedures continue to increase. This situation encourages the need for regulations that ensure legal protection for patients without ignoring legal certainty for health workers in carrying out their professional practices (Ramadhani, 2022).

Law Number 17 of 2023 concerning Health presents significant changes to the regulations related to the accountability of health workers and health service facility operators (Astuti & Savitri, 2025). This regulation contains professional standards, patient safety procedures, and mechanisms for handling medical complaints and disputes. These provisions are expected to create transparent health service governance and provide clear limits on the responsibilities and obligations of all parties. The implementation of this new rule requires a deep understanding because it concerns interrelated ethical, administrative, and legal aspects.

Differences in perceptions between patients and healthcare workers often trigger medical disputes, whether they involve alleged negligence, inappropriate medical measures, or ineffective communication. This situation has the potential to cause losses for patients and legal consequences for health workers and hospitals. Clarity on the form of accountability is urgently needed so that dispute resolution can be carried out objectively, fairly, and in accordance with laws and regulations. Law No. 17 of 2023 provides a new foundation that must be studied to find out how legal responsibility is formulated and applied to medical practice (Abdurrohman et al., 2024).

Research on the accountability of health workers and hospitals in medical disputes based on Law No. 17 of 2023 is needed to examine the extent to which this regulation answers the needs of legal protection for all parties and how it is implemented in the field. This discussion is also important to see the clarity of responsibility standards, dispute resolution mechanisms, and the legal position of health workers and patients. The purpose of this study is to analyze the regulation of the liability of health workers and hospitals in medical disputes based on Law Number 17 of 2023 concerning Health and identify its implications for legal protection for patients and health workers.

## **LITERATURE REVIEW**

### **Medical Disputes**

Medical disputes are understood as disputes between patients and health workers or health facilities that arise due to alleged errors, negligence, or dissatisfaction with the results of medical services (Bayumi, 2024). Research by Ferine et al. (2024) shows that disputes are generally triggered by ineffective communication, mismatch of expectations, lack of informed consent, and alleged malpractice. Some studies have emphasized that medical disputes are not always caused by medical errors, but often arise due to different perceptions of healthcare processes and outcomes, so the study of regulations and service standards becomes very relevant to prevent and handle disputes (Wiguna et al., 2025; Zaluchu & Syaharudin, 2022).

### **Health Worker Accountability**

The accountability of health workers in Supraba et al. (2025) is explained to include professional, administrative, ethical, and legal aspects, all of which are directed so that health workers work in accordance with applicable professional standards and operational procedures. Previous studies have shown that health workers can be held accountable if they are proven to have committed negligence or violations of service standards that cause losses to patients (Manse et al., 2025; Supraba et al., 2025b).

### **Hospital Liability**

Hospital accountability is discussed in Harmoni et al. (2022) that the concept of institutional responsibility for all services provided by health workers working under their auspices. Hospitals are positioned as health service providers that are obliged to ensure quality, patient safety, infrastructure, and risk management (Tarigan, 2020). Previous studies have shown that hospitals can be held to civil and administrative liability when proven to not meet service delivery standards or fail to supervise their medical personnel, so that the fulfillment of operational standards and internal supervision is a central aspect in preventing disputes (Atmadja et al., 2025; Patriajaya et al., 2025).

## **Law No. 17 of 2023 concerning Health**

Law No. 17 of 2023 presents health regulation reform through simplifying rules, rearranging authority, and affirming responsibility standards in health services. The law expands legal protections for patients while clarifying the limits of responsibility of health workers and health care facilities (Ginanjar & Syam, 2025). This regulatory update is seen as an effort to create an adaptive, integrated, and patient safety-oriented health system, so an academic study is needed to see how its implementation affects the resolution of medical disputes.

## **RESEARCH METHOD**

The research uses a normative juridical method that focuses on the study of laws and regulations, legal doctrines, and literature (Wiraguna, 2024) that are relevant to the accountability of health workers and hospitals in medical disputes. This method places legal materials as the main source of data to understand the legal construction stipulated in Law Number 17 of 2023 concerning Health. The approaches used include a legislative approach, a conceptual approach, and a case approach to examine the application of norms in practice.

Data collection techniques are carried out through literature studies which include searching for laws, implementing regulations, court decisions, scientific journals, health law books, and expert opinions. The primary legal materials studied include Law No. 17 of 2023 and its supporting regulations, while secondary legal materials include scientific literature that discusses medical disputes and legal liability. Tertiary legal materials are used as support to clarify legal concepts and terms related to research.

Data analysis is carried out using a qualitative analysis method that interprets the content of norms, groups legal materials, and connects provisions in different regulations to find the right legal construction. The results of the analysis are directed to identify the basis for the accountability of health workers and hospitals, the clarity of norms in Law No. 17 of 2023, and their implications for the resolution of medical disputes. The analysis process results in a systematic understanding of how the rule of law works and the limits of liability that apply to the parties involved.

## **RESULT AND DISCUSSION**

### **Regulation of Health Worker Accountability in Law No. 17 of 2023**

The regulation of health worker accountability in Law No. 17 of 2023 shows fundamental changes to the legal framework that was previously spread across various sectoral regulations. The new provisions provide a clearer structure of responsibility through the strengthening of professional standards and operational procedure standards that serve as the legal benchmark for any medical procedure. Every action of a health worker is positioned as part of a professional process that must be based on competence, ethics, and thoroughness. This affirmation provides a firm limit on conditions that can give rise to legal liability, so that medical actions that have met the standards cannot be classified as violations or negligence (Manse et al., 2025). The structure of such norms creates a more proportionate legal space between the inherent medical risks and the professional misconduct that actually occurs.

The implementation of patient safety is a central element in determining the accountability of health workers. Law No. 17 of 2023 contains the obligation to implement a patient safety system as part of service standards, including error prevention, incident reporting,

and risk evaluation. The implementation of the system is not just an administrative procedure, but is part of legal protection because it can show that health workers have carried out their obligations correctly (Oliviany et al., 2023). The presence of patient safety procedures helps assess whether an event is an unavoidable medical complication or the result of negligence. This formulation strengthens the legal argument in dispute resolution because the evaluation of medical actions is carried out objectively through established standards.

The obligation to provide accurate, complete, and understandable informed consent is also an aspect that has a major influence on determining the limit of accountability (Dzulhizza et al., 2023). Law No. 17 of 2023 contains the obligation to provide information regarding diagnosis, procedures, risks, benefits, and alternative actions. This information is not only a form of communication, but also a legal document that establishes an understanding between health workers and patients. Ambiguity or neglect of providing informed consent can open up space for medical disputes, while providing complete information can be the basis for legal defense for health workers in the event of an unexpected event (Auliansyah et al., 2025). This mechanism confirms that the communication process is an integral part of medical actions that can be legally accounted for.

The establishment of clear norms regarding the accountability of health workers creates a balance between the protection of patients and the protection of health workers. Law No. 17 of 2023 provides legal certainty through the limitation that health workers cannot be held accountable for the results of actions that are in accordance with professional standards and not the result of negligence (Prayuti et al., 2025). This provision is particularly relevant in cases involving high medical risks, where unexpected results may arise even if the entire procedure has been performed correctly. Clarity of the boundaries of responsibility reduces the potential for criminalization of health workers and helps foster a culture of safe, transparent, and evidence-based service.

Strengthening the rules regarding the accountability of health workers also has an impact on the governance of health service institutions. The new norm encourages the improvement of the quality of coaching, supervision, and documentation of medical procedures so that each procedure has legal evidence that can be accounted for. Medical documentation is part of the professional action verification tool, including care records, informed consent sheets, and patient safety incident reports. The accuracy and completeness of documentation can support health workers when facing legal proceedings. On the other hand, weak documentation becomes a loophole that triggers irregularities and increases the risk of legal liability. The confluence between norms, practices, and documentation is a strong foundation in resolving medical disputes based on Law No. 17 of 2023.

### **Hospital Accountability as a Health Service Facility**

Hospital accountability in Law No. 17 of 2023 is placed as a form of institutional responsibility that goes beyond the individual actions of health workers (Atmadja et al., 2025). Hospitals are positioned as health service providers that are obliged to ensure that the entire series of services runs based on quality and safety standards. This provision emphasizes that hospitals are not only responsible for the results of services, but are also held accountable for the readiness of facilities, availability of infrastructure, completeness of medical equipment, and adequacy of human resources (Tarigan, 2020). Any negligence in fulfilling these elements can give rise to legal liability because it is considered to have a direct effect on the quality of service received by patients.

The health service management system is a crucial element that is assessed in determining whether the hospital has carried out its obligations adequately. Law No. 17 of 2023 stipulates that hospitals are required to have a risk management system, patient safety system, and a structured internal supervision mechanism (Pasaribu, 2020). The system is needed to prevent service errors, ensure good coordination between units, and present a continuous

evaluation process. Evaluation of management systems is often used as a basis in medical dispute resolution to distinguish between systemic fault and individual fault. Certain conditions can indicate that medical disputes are not solely the result of the actions of health workers, but are a consequence of managerial weaknesses for which the institution is responsible.

Supervision of health workers is another aspect that is very influential in the construction of hospital accountability. Law No. 17 of 2023 requires hospitals to ensure the competence of health workers through coaching, performance assessment, certification, and fulfillment of professional competency standards. Hospital failure to conduct supervision and coaching can be considered a form of institutional negligence, especially when medical disputes are proven to have occurred due to the actions of health workers who do not meet standards (Toumahuw et al., 2023). This situation shows that the responsibility of the institution does not stop only at the provision of facilities, but includes active and continuous supervision of all health workers working in it.

The provision of emergency services and handling patient complaints are also important indicators to assess the sustainability of the quality of services provided by hospitals. Law No. 17 of 2023 requires hospitals to provide emergency services without discrimination, provide incident reporting channels, and respond to patient complaints quickly and measurably. The hospital's inability to follow up on complaints or failure to provide emergency services has become a basis for liability in various medical dispute cases. The complaint handling process is not only an administrative mechanism, but serves as part of preventive efforts to avoid escalating the problem in the direction of legal disputes.

The mechanism of documentation and reporting of service incidents strengthens the hospital's position in accounting for every medical service process. Comprehensive documentation of medical procedures, service flows, examination results, and clinical decisions helps clarify whether an incident was caused by institutional negligence or other unavoidable factors. Weaknesses in documentation are often a weak point for hospitals in dealing with medical disputes because they can give rise to the assumption that services are not carried out professionally. The norms in Law No. 17 of 2023 provide an encouragement for hospitals to build a standardized documentation system so that the process of verifying medical events can be carried out objectively.

The hospital accountability structure in Law No. 17 of 2023 creates clearer boundaries of responsibility but also demands an improvement in the quality of health service governance. Health facility operators are required to consistently implement risk management approaches, patient safety systems, and quality evaluation mechanisms (Wijaya, 2024). This provision seeks to ensure that medical disputes can be resolved based on a firm separation between individual negligence factors and institutional weakness factors. This strengthening of institutional responsibility contributes to increasing hospital accountability and provides legal certainty for patients and health workers in dispute resolution.

### **Medical Dispute Resolution Mechanism Based on Law No. 17 of 2023**

The medical dispute resolution mechanism in Law No. 17 of 2023 is designed to provide a more targeted settlement stage before the dispute proceeds to the judicial process. Mediation is placed as the main path that must be pursued first because it is considered to be able to reduce the escalation of conflict and provide opportunities for patients and health workers to reach an agreement without a protracted process (Juliandri et al., 2023). This approach also aims to reduce the tendency to criminalize medical procedures that have actually been performed according to professional standards but result in unavoidable complications.

Administrative settlement is an alternative route provided through the internal mechanism of the hospital or health institution that is authorized to handle complaints. This pathway offers a professional evaluation of alleged negligence by considering service standards, medical documentation, and expert testimony (Juliandri et al., 2023). An

administrative evaluation can provide an objective picture of whether a dispute stems from a procedural error, a system error, or an unavoidable medical risk. This mechanism serves as a filter before disputes enter the more formal legal realm.

The judicial process remains an option if mediation and administrative settlement do not achieve results or if strong indications of gross negligence are found. Law No. 17 of 2023 stipulates that law enforcement must consider professional standards and relevant scientific evidence, so that decisions are not solely based on perceptions or emotional pressure. This arrangement shows an effort to maintain a balance between the protection of patients' rights and the protection of health workers so that they do not become the object of demands without a solid basis. The structure of the settlement stages also strengthens the principle of prudence in handling medical disputes.

### **Regulatory Implications for Health Service Practices**

The implementation of the regulations in Law No. 17 of 2023 provides a great encouragement for hospitals and health workers to reorganize service governance to be more structured and accountable. Strengthening service standards requires every health facility to improve the quality of service through improving the competence of health workers, updating medical equipment, and implementing a measurable patient safety system (Gea, 2020). These changes encourage healthcare institutions to improve their internal systems to reduce the risk of errors and reduce the chances of medical disputes through more evidence-based practices and professional standards.

The relationship between patients and health workers is at a more transparent point through the affirmation of the obligation to provide complete medical information. Any medical action should be based on clear communication regarding the diagnosis, treatment options, risks, and chances of success. This increased transparency is not only a form of patient protection, but also as a legal mechanism that creates mutual understanding so that potential misunderstandings can be suppressed from the start. Clarity of communication also strengthens the position of health workers because every clinical decision is recorded in valid medical documentation and can be used as a basis in the dispute resolution process.

Health service institutions are required to build a documentation system that is more neat, complete, and easily verified. Provisions regarding patient safety and institutional accountability require hospitals to record the entire process of medical procedures, including the development of the patient's condition, medical procedures performed, examination results, and clinical decisions. Good documentation can strengthen the evidence for healthcare workers and institutions when disputes occur, while weak documentation is often the starting point for legal defense difficulties. Strengthening documentation is one of the most strategic implications of this regulatory change.

The implementation of the new regulations also provides space for the creation of a balance between patient rights and the comfort of work of health workers. The certainty of the liability limit allows health workers to work without excessive pressure as long as they follow professional standards, while patients obtain a guarantee of protection through stricter safety norms (Restiyowati et al., 2023). This pattern points to the direction of national health system reform towards more equitable, safe, and standards-based legal relationships that can be measured. The update in this regulation is expected to strengthen public trust in health services while improving the quality of interaction between patients, health workers, and hospitals.

## CONCLUSION

The conclusion of the study shows that Law No. 17 of 2023 concerning Health presents a structural strengthening of the accountability of health workers and hospitals through the affirmation of professional standards, operational procedure standards, patient safety systems, and more measurable documentation and supervision mechanisms. This rule puts healthcare workers in a more protected position as long as medical procedures are carried out according to standards, while ensuring patients' rights are met through improved service quality, information transparency, and proportionate dispute resolution pathways. Hospitals are positioned as the main institutions that are obliged to ensure the availability of facilities, competence of health workers, and effective risk management so that every service process can be legally accounted for. Dispute resolution mechanisms through mediation, administrative settlement, and the judiciary create a balance between the need for justice for patients and legal protection for health workers. This regulation reflects the direction of national health law reform that seeks to build a safer, accountable, and legal certainty service system for all parties.

## REFERENCES

Abdurrohman, R., Heridadi, H., Kantikha, I. M., & Jaeni, A. (2024). Tanggung Jawab Hukum Rumah Sakit Berdasarkan Doktrin Corporate Liability Menurut Pasal 193 Undang-Undang Nomor 17 Tahun 2023 Tentang Kesehatan. *Jurnal Cahaya Mandalika ISSN 2721-4796 (Online)*, 2635–2647. <https://doi.org/10.36312/jcm.v3i3.3659>

Astuti, R., & Savitri, A. M. (2025). Perbandingan Perlindungan Hukum Bagi Bidan dalam Menjalankan Praktik Keprofesiannya Sebelum dan Sesudah Berlakunya UU Nomor 17 Tahun 2023 Tentang Kesehatan. *HUMANIORUM*, 3(2), 71–81. <https://doi.org/10.37010/hmr.v3i2.76>

Atmadja, N., Tulak, N., & Fadila, A. (2025). Pertanggungjawaban Hukum RS atas Kelalaian Medik dan Sanksi terhadap Tenaga Medis di RS. *Jurnal Ilmu Hukum, Humaniora Dan Politik*, 5(6), 5469–5474. <https://doi.org/10.38035/jihhp.v5i6.5512>

Auliansyah, D., Dilaga, R. K., Fikri, A. M., & Herjunaidi. (2025). Upaya Perlindungan Hukum Terhadap Tenaga Kesehatan Melalui Informed Consent dalam Teori Kepastian Hukum. *Jurnal Ilmu Hukum, Humaniora Dan Politik*, 5(5), 4634–4641. <https://doi.org/10.38035/jihhp.v5i5.5524>

Bayumi, M. (2024). Perlindungan Hukum Profesi Dokter pada Dugaan Kasus Malpraktik. *Jurnal Ilmu Hukum, Humaniora Dan Politik*, 4(6), 2718–2755. <https://doi.org/10.38035/jihhp.v4i6.2780>

Dzulhizza, D. S. R., Anatami, D., & Nofrial, R. (2023). Aspek Yuridis dalam Pertanggungjawaban Hukum Profesi Dokter pada Perspektif Pelayanan Informed

Consent Untuk Mewujudkan Perlindungan Hukum. *Jurnal Kajian Ilmiah*, 23(1), 43–50. <https://doi.org/10.31599/jki.v23i1.1716>

Ferine, M., Hidayah, A. N., Amalia, A., Lestari, D. W. D., & Muflikhah, K. (2024). Penguatan Keterampilan Komunikasi Efektif Dokter Dalam Proses Informed Consent Dengan Role Play. *Linggamas: Jurnal Pengabdian Masyarakat*, 2(1), 37. <https://doi.org/10.20884/1.lingga.2024.2.1.12943>

Gea, K. N. R. (2020). *Penerapan Sasaran Keselamatan Pasien di Rumah Sakit*. Open Science Framework. <https://doi.org/10.31219/osf.io/aznjv>

Ginanjar, S. S., & Syam, H. (2025). Tanggung Jawab Hukum Dokter atas Kelalaianya dalam Melakukan Pelayanan Kesehatan Pascapersalinan di Rumah Sakit yang Merugikan Pasien menurut Undang-Undang Nomor 17 Tahun 2023 tentang Kesehatan. *Bandung Conference Series: Law Studies*, 5(2). <https://doi.org/10.29313/bcsls.v5i2.18543>

Harmoni, D., Fahmi, F., & Yetti, Y. (2022). Tanggung Jawab Rumah Sakit atas Kelalaian Tenaga Medis dalam Pelayanan Kesehatan. *JOURNAL OF SCIENCE AND SOCIAL RESEARCH*, 5(2), 302. <https://doi.org/10.54314/jssr.v5i2.929>

Juliandri, R., Sidi, R., Satria, B., & Sumarno, S. (2023). Peran Manajemen Rumah Sakit dalam Penyelesaian Sengketa Medis Melalui Jalur Mediasi di Rumah Sakit. *JIIP - Jurnal Ilmiah Ilmu Pendidikan*, 6(7), 5330–5339. <https://doi.org/10.54371/jiip.v6i7.2382>

Manse, Y. R., Siregar, R. A., & Panggabean, M. L. (2025). Pertanggungjawaban Pidana Tenaga Medis dalam Malpraktik. *Jurnal Ilmu Hukum, Humaniora Dan Politik*, 5(5), 4682–4688. <https://doi.org/10.38035/jihhp.v5i5.5771>

Oliviany, W., Prayogo, D. A., & Mulyanti, D. (2023). Analisis Manajemen Keselamatan Pasien Di Rumah Sakit: Systematic Literature Review. *Jurnal Ilmiah Kedokteran Dan Kesehatan*, 2(2), 133–144. <https://doi.org/10.55606/klinik.v2i2.1279>

Pasaribu, T. A. A. (2020). *Pentingnya Pelaksanaan Sasaran Keselamatan Pasien Dalam Keperawatan*. Open Science Framework. <https://doi.org/10.31219/osf.io/2cmuy>

Patriajaya, B. A., Rifani, M., Sukmajaya, L. P., & Prayuti, Y. (2025). Tanggung Jawab Perdata Rumah Sakit Terhadap Pasien Jiwa yang Melukai Diri atau Orang Lain Saat Dirawat. *Jurnal Ilmu Hukum, Humaniora Dan Politik*, 5(6), 4736–4743. <https://doi.org/10.38035/jihhp.v5i6.5557>

Prayuti, Y., Kusumah, Y., & Abidin, Z. (2025). Perlindungan Hukum bagi Tenaga Medis dan Tenaga Kesehatan dalam Undang-Undang Nomor 17 Tahun 2023 tentang Kesehatan.

*Legal Standing : Jurnal Ilmu Hukum, 9(2), 503–513.*

<https://doi.org/10.24269/ls.v9i2.11760>

Ramadhani, S. S. (2022). Upaya Penyelesaian Malpraktek Medis dengan Menghadirkan Payung Hukum Tindak Pidana Medis. *Wijayakusuma Law Review*, 4(2). <https://doi.org/10.51921/wlr.v4i2.213>

Restiyowati, A., Budiarti, D., & Humiati, H. (2023). Tinjauan Yuridis Tanggung Jawab Pemerintah Daerah Atas Perlindungan Tenaga Kesehatan dalam Menjalankan Praktik. *Yurijaya : Jurnal Ilmiah Hukum*, 5(1), 23–29. <https://doi.org/10.51213/yurijaya.v5i1.93>

Supraba, P. A. A., Parsa, I. W., & Manuaba, I. B. G. F. (2025a). Pertanggungjawaban Hukum terhadap Tenaga Medis dan Tenaga Kesehatan atas Pelanggaran Kode Etik menurut Undang-Undang Nomor 17 Tahun 2023 tentang Kesehatan. *Jurnal Ilmiah Ilmu Sosial*, 11(1), 126–131. <https://doi.org/10.23887/jiis.v11i1.94332>

Supraba, P. A. A., Parsa, I. W., & Manuaba, I. B. G. F. (2025b). Pertanggungjawaban Hukum terhadap Tenaga Medis dan Tenaga Kesehatan atas Pelanggaran Kode Etik menurut Undang-Undang Nomor 17 Tahun 2023 tentang Kesehatan. *Jurnal Ilmiah Ilmu Sosial*, 11(1), 126–131. <https://doi.org/10.23887/jiis.v11i1.94332>

Tarigan, T. V. B. (2020). *Penerapan Keselamatan Pasien sebagai aspek penting di Rumah Sakit*. Open Science Framework. <https://doi.org/10.31219/osf.io/4synq>

Toumahuw, B. N., Wijaya, A. U., & Widianto, R. M. (2023). Tanggung Jawab Rumah Sakit terhadap Kelalaian Malpraktik. *Jurnal Ilmu Hukum Wijaya Putra*, 1(2), 57–68. <https://doi.org/10.38156/jihwp.v1i2.84>

Wiguna, G. N. B. P., Pidada, I. B. Gd. S. P., & Wikan Basworo. (2025). Strategi Antisipasi Sengketa Medis pada Pelayanan di Rumah Sakit. *Medika Alkhairaat: Jurnal Penelitian Kedokteran Dan Kesehatan*, 7(01), 805–811. <https://doi.org/10.31970/ma.v7i01.251>

Wijaya, A. F. S. (2024). Strategi Manajemen Resiko dalam Pelayanan Kesehatan: Tinjauan Literatur tentang Penerapan di Rumah Sakit. *Jurnal Kesehatan Ilmiah Indonesia (Indonesian Health Scientific Journal)*, 9(2). <https://doi.org/10.51933/health.v9i2.1711>

Wiraguna, S. A. (2024). Metode Normatif dan Empiris dalam Penelitian Hukum: Studi Eksploratif di Indonesia. *Public Sphere: Jurnal Sosial Politik, Pemerintahan Dan Hukum*, 3(3). <https://doi.org/10.59818/jps.v3i3.1390>

Zaluchu, T., & Syaharudin, D. Y. (2022). Penyelesaian Sengketa Medis Antara Pasien Atau Keluarga Pasien Dengan Dokter Berdasarkan Ketentuan Hukum di Indonesia. *KRTHA BHAYANGKARA*, 16(2). <https://doi.org/10.31599/krtha.v16i2.1114>