

# Legal Protection of Nerve Surgery Who is Known by The Anesthesian in Nerve Surgery Services at Susanna Wesley Hospital Medan

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## Article Info

Page : 111-122

ISSN : 3026-5290

Vol 2 No 1 2024

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## Abstract

Neurosurgery services at Susanna Wesley Hospital in Medan involve a complex therapeutic transaction between doctors and patients, necessitating adequate legal protection for neurosurgeons and anesthesiologists. There is a need to understand how therapeutic agreements and principles of civil law are applied in medical practice, especially to reduce the potential for disputes and enhance patient satisfaction as well as legal protection for doctors. This analysis employs a descriptive qualitative approach, reviewing legal provisions in the Civil Code and other relevant regulations, as well as the internal procedures of Susanna Wesley Hospital in Medan. The research findings indicate that Susanna Wesley Hospital in Medan has established a legal and operational framework that protects doctors' rights while meeting patient service expectations, through clear therapeutic agreements, open communication, and a complaint resolution mechanism. The recommendations offered suggest further development and refinement of this framework, ensuring a good understanding between doctors and patients regarding each other's rights and obligations, and implementing an effective and accessible grievance system.

**Keyword:** Legal Protection, Neurosurgery, Therapeutic Agreement

## 1. INTRODUCTION

The formal education standards of a doctor must be met both academically and juridically, meaning that based on the formal academic standards required by completing formal medical education, a medical worker has the initial standard of ability to be able to carry out medical service tasks. In subsequent developments, initial standards alone turned out to be insufficient for a medical worker, because they had to be supplemented and complemented by developments in science and technology that occurred all the time. The world of medicine is always experiencing development, in fact its development is considered very rapid. Medical personnel who do not follow developments in science and technology will be left behind. Medical personnel who are left behind with developments in science and technology that are related to the medical world, if they carry out medical service duties can be classified as medical personnel who do not meet standards, if they carry out their duties and it turns out to have a negative impact, they can be classified as having committed an error or negligence, which is now better known as malpractice. The medical profession is not a field of science where everything can be measured. According to Hippocrates, the medical profession is a combination of knowledge and *art*. For example, making a diagnosis is a doctor's own art, because after hearing the patient's complaint, the doctor will use imagination and make careful observations of the patient. The knowledge or medical theories and experience that he has received so far become the basis for diagnosing the patient's illness and it is hoped that the diagnosis will be close to the truth. Article 189 Paragraph (1) Point s Health Law Number 17 of 2023. *"protects and provides legal assistance for all Hospital officers in carrying out their duties"*. Articles and verses on confirm that every action taken by the officer medical House Sick own obligation For give help law as well as protect. This same thing is also emphasized by Article 193 *"Hospitals are responsible answer in a way law to all losses incurred on negligence committed by Hospital Health Human Resources"*.

In the modern era that continues developing, service health be one vital aspects in ensure well-being public. Confession to health as right basic fundamental human has push formation framework law comprehensive purpose for regulate and protect practice medicine, including at hospital. This matter especially relevant in Indonesian context, where the system health face challenge influencing complex

dynamics work practitioner medicine, like doctor surgery neurologist at Susanna Wesley Hospital Medan. Hospital as institution service health main hold role central in guard well-being public. In context here, doctor own not quite enough answer big in diagnosis, treatment and care patient. However, they also face various challenges, incl condition complex medical, work team multidisciplinary, and pressure administrative. In situation the dynamic, protection law to doctor no only become important for ensure they can operate his task with effective but also for avoid risk possible law appear from decision medical. Protection law in practice medicine, in particular surgery nerves, have implications big in reduce conflict the law can happen consequence decision medical. For example, issue like a misdiagnosis or action medical that is not appropriate can ended in a lawsuit malpractice, clarify importance protection adequate law for doctor. Apart from that, the environment conducive work and comfort work for doctor become important in guard quality service health. Heavy workload and pressure time often causes stress and fatigue, which in turn can influence quality service to patient. In practice medical, esp in service surgery nerves, doctor faced with challenges double. In one side, them must strive best results for patient, follow principles ethics medical and standard professionalism. On the other hand, they should too ensure that all over action medical treatment performed is at in framework applicable law, avoid potency lawsuit possible malpractice harm good patient nor practitioner medical that alone. Malpractice, in context service health, is one issue most laws discussed and debated, remembering the consequences can be very detrimental for second split party. Protection law to doctor surgery neurologist and doctor anesthesia no only become shield in protect they from lawsuit malpractice, but also as guiding guide practice medical to stay is at in corridor ethics and law. In practice, protection this law covers various aspect, start from informed consent procedures, standard necessary care maintained, used technology medical, up to policy insurance adequate malpractice. This problems need clarity the law is not only protect patient but also deliver room for doctor for do action medical with confidence that they supported by the framework solid law.

Based on research that the author has carried out, the medical services most frequently provided at Susanna Wesley hospital in Medan reveal the three neurosurgical cases that have been most frequently treated since it was founded in 2021. These three cases are brain tumors, blood vessel disorders and spinal disorders. Writer Identification problem specific main to service surgery nerve involve aspect legal and operational aspects direct impact on practice surgery nerve. This following is problem frequent specifics faced in service surgery nerve from corner look law :

1. *Informed Consent* : One problem law main is regarding the giving process information and informed consent from patient or guardian patient before undergo procedure surgery. Difficulty appear when must explain risks, benefits, and alternatives procedure surgery complex nerves to patient and family they with easy way understandable. Issue law can appear if patient feel no enough given information for make informed decision
2. *Standard Maintenance* : Establish and maintain standard appropriate care for surgery nerve often becomes challenge. Standard treatment that is not consistent or no clear can cause uncertainty law about what is considered as practice medical can accepted. Nonconformity with standard maintenance this can cause lawsuit malpractice
3. *Error Medical and Malpractice* : In service surgery nerves, potential for error medical fine because action or negligence relative tall because complexity the procedure. Error in diagnosis, errors during operation, or failure in maintenance post operation can cause consequence serious for patients and lawsuits malpractice to doctor surgery
4. *Documentation Medical* : Documentation medical that is not complete or no accurate is problem significant law. Documentation is proof important from communication between doctor and patient as well as decision medical treatment taken. Error or negligence in documentation can difficult defense in case lawsuit malpractice
5. *Communication with patient and family* : Poor communication with patient and family patient often leads to dissatisfaction patient, who can trigger complaint or lawsuit law. This is very crucial in surgery nerve, where expectations patient and reality results medical possible no always in line.
6. *Use Technology New Medical* : Technology integration medical new in surgery nerve bring challenge law related with training, adequacy use, and potential risk or failure technology. Question about who is responsible answer in case failure technology doctor surgery, hospital, or producer technology can become complex
7. *Insurance malpractice and hospital policy* : Issues about coverage and adequacy insurance

malpractice for doctor surgery nerves, as well policy house pain that governs practice surgery nerves, can influence How doctor surgery face risk law.

Susanna Wesley Hospital Medan, with experience in handle case surgery nerves, are at the forefront in face this challenges. As institution, this hospital own not quite enough answer for provide environment supportive work practice safe, efficient, and ethical medical care. This matter covers provision adequate training for staff medical, integration technology medical latest, as well development policies and protocols that guarantee quality service and security patient. However, in in practice, there is various challenges that arise. One of them is in the informed consent process, where the doctor must can explain procedure surgery complex nerves to patients and their families with easy way understandable. Problem other is in establish and maintain standard appropriate care, where ambiguity standard can cause uncertainty law. Error medical, documentation is not complete or no inaccurate, poor communication with patients and families, as well challenge in integrate technology medical new is a number of from various possible issues trigger conflict law. Addressing these specific issues requires a deep understanding of the interactions between law, medical ethics, and neurosurgical practice and the liability of anesthesiologists, as well as proactive strategies to reduce legal risks and improve the quality of care to patients. Therefore this study done and as for focus author 's discussion thorough is How rights and obligations as well as connection between Hospitals, Doctors and Patients in health services ? and how legal protection for neurosurgeons in neurosurgery services at Susanna Wesley Hospital, Medan ?

## 2. RESEARCH METHODOLOGY

The research entitled "Legal Protection for Surgeons in Neurosurgical Services at Susanna Wesley Hospital Medan" adopts a sociological juridical approach, which is designed to examine the implementation and effectiveness of legal protection for neurosurgeons. Through a combination of legal document analysis and field observation techniques, this research aims to understand how far the theory of legality is realized in medical practice, especially in neurosurgical services. Within the framework of legality theory, this research focuses on the application of fair and strict laws in the context of surgeon protection, testing regulations and practices at the Susanna Wesley Hospital in Medan against applicable legal standards. For support analysis, research This utilize primary data in the form of laws, regulations government, and regulations relevant local, as well as secondary data from journals, articles scientific, documentation hospital, and report case related. Data collection was carried out through studies documentation and observation directly at Susanna Wesley Hospital Medan, possible understanding deep about practice service surgery nerve as well as dynamics protection law for doctor. This observation expected open outlook about realities on the ground, esp interaction between doctor with patients and their families, and how regulations applied in context the. This method facilitate identification challenges, needs and opportunities repair in protection law for doctor surgery nerves, to be sure they can operate task professional with support adequate law.

## 3. RESULT AND DISCUSSION

### *Rights and Obligations of Health Workers in Providing Health Services*

#### *Article 273*

(1) Medical personnel and health workers in carrying out practice have the right to:

- a) obtain legal protection as long as they carry out their duties in accordance with professional standards, professional service standards, standard operational procedures and professional ethics, as well as the patient's health needs;
- b) obtain complete and correct information from patients or their families;
- c) receive appropriate salaries/wages, service benefits and performance allowances in accordance with statutory provisions;
- d) obtain protection for safety, occupational health and security;
- e) obtain health insurance and employment guarantees in accordance with statutory provisions;
- f) receive protection from treatment that is not in accordance with human dignity, morals, decency and socio-cultural values;
- g) receive awards in accordance with statutory provisions;
- h) get the opportunity to develop themselves through competency, knowledge and career development in their professional field;

- i) refuse the wishes of patients or other parties that conflict with professional standards, service standards, standard operational procedures, codes of ethics, or statutory provisions; And
  - j) obtain other rights in accordance with the provisions of statutory regulations.
- (2) Medical personnel and health workers can stop health services if they receive treatment that is not in accordance with human dignity, morals, decency and socio-cultural values as intended in paragraph (1) letter f, including acts of violence, harassment and bullying.

#### *Article 274*

Medical Personnel and Health Workers in carrying out mandatory practices:

- a. provide health services in accordance with professional standards, professional service standards, standard operational procedures, and professional ethics as well as patient health needs;
- b. obtain consent from the patient or his family for the action to be given;
- c. maintain patient health secrets;
- d. create and store records and/or documents regarding examinations, care and actions taken; and
- e. refer patients to medical personnel or other health personnel who have the appropriate competence and authority.

#### *Article 275*

- (1) Medical personnel and health workers who practice at health service facilities are obliged to provide first aid to patients in emergencies and/or disasters.
- (2) Medical personnel and health workers who provide health services in the context of life-saving measures or preventing someone's disability in emergencies and/or disasters are excluded from claims for compensation.

In the context of neurosurgical services at the Susanna Wesley Hospital in Medan, legal protection for neurosurgeons, as known to anesthesiologists, is a fundamental aspect guaranteed by Law no. 17 of 2023 concerning Health. Protection law this based on principles justice, equality and professionalism in practice medicine, with focus on aspects like rights and obligations power medical as well as power health in operate the practice. Article 273 states right power medical for get protection law during carry out task in accordance with standard profession, ethics profession, and needs health patient. This matter covers right for get complete and correct information from patient or his family, which is vital aspects in service surgery nerve. Accurate and complete information from patient possible doctor surgery neurologist and doctor anesthesia for plan and implement procedure surgery with level minimal risk. Apart from that, Article 274 confirms obligation power medical and energy health for give service health in accordance with standard profession and ethics profession. This matter including obligation obtain agreement from patient or his family on action that will given, which is very relevant in context surgery nerve. Agreement the must based on clear and comprehensive explanations about procedures, risks, and benefits, possible patient for make informed decision. Article 275 regulates about obligation give help first to patient in circumstances terrible emergency, incl in context disaster. Provision This confirm role doctor surgery neurologist and doctor anesthesia in save lives and prevent disability somebody without must worry will demands change loss, as long as action the done in accordance with standard professionalism and ethics medical.

#### *Patient Rights and Obligations in Health Services*

##### *Article 276*

Patients have the right:

- a. get information about his/her health;
- b. receive an adequate explanation regarding the Health Services they receive;
- a. obtain Health Services in accordance with medical needs, professional standards and quality services;
- b. refuse or agree to medical treatment, except for medical treatment necessary for the prevention of infectious diseases and control of outbreaks or epidemics;
- c. gain access to information contained in medical records;
- d. ask for the opinion of Medical Personnel or other Health Personnel; and
- e. obtain other rights in accordance with the provisions of statutory regulations.

*Article 277*

Patients have obligations:

- a. provide complete and honest information about their health problems;
- b. comply with the advice and instructions of Medical Personnel and Health Personnel;
- c. comply with the provisions applicable to health service facilities; and
- d. provide compensation for services received.

*Article 278*

Further provisions regarding the rights and obligations of medical personnel, health workers and patients are regulated by government regulations. Article 276 strengthens position patient as subject the law has right for accept information, adequate explanation, service health quality, as well right for reject or agree action medical. In practice, this demand doctor surgery neurologist and doctor anesthesia for operate effective and transparent communication, ensuring that patient or guardian they given enough information for make informed decision. Article 277, on the other hand, provides obligation affected patients straight into practice medical doctor surgery neurologist and doctor anesthesia. Obligation patient for give complete and honest information about problem his health, obey advice medical, and provisions facility service health, facilitating environment conducive work for doctor for operate task they with effectiveness maximum, while minimize risk medical and legal. UU no. 17 of 2023 provides framework work for doctor surgery neurologist and doctor anesthesia for operate practice medical they in environment law that supports, recognizes rights they as provider service health, as well put well-being patient as priority main. Through implementation provision this, practice surgery neurologist at Susanna Wesley Hospital Medan can operate in framework ensuring law safety patient and protection law For power medical .

*Hospital Rights and Obligations in Health Services**Article 189*

(1) Every Hospital has the obligation to:

- a. provide correct information about Hospital services to the community;
- b. provide safe, high-quality, anti-discriminatory and effective health services by prioritizing the interests of patients in accordance with hospital service standards;
- c. provide emergency services to patients according to their service capabilities;
- d. play an active role in providing Health Services during disasters in accordance with their service capabilities;
- e. provide facilities and services for disadvantaged or poor communities;
- f. carry out social functions, among others, by providing service facilities for indigent or poor patients, emergency services without down payment, free ambulances, services for disaster and outbreak victims, or social services for humanitarian missions;
- g. create, implement and maintain quality standards for Health Services in Hospitals as a reference in serving Patients;
- h. maintain medical records;
- i. provide adequate public facilities and infrastructure, including prayer facilities, parking lots, waiting rooms, facilities for people with disabilities, breastfeeding women, children and the elderly;
- j. implementing a referral system;
- k. refuse the patient's wishes which are contrary to professional and ethical standards as well as statutory provisions;
- l. provide correct, clear and honest information regarding the patient's rights and obligations;
- m. respect and protect the rights of Patients;
- n. implement Hospital ethics;
- o. have an accident prevention and disaster management system;
- p. implementing government programs in the health sector, both regionally and nationally;
- q. make a list of Medical Personnel who practice medicine or dentistry and other Health Personnel;
- r. prepare and implement internal hospital regulations;
- s. protect and provide legal assistance to all Hospital officers in carrying out their duties; And
- t. enforce the entire hospital environment as a smoking-free area.

(2) Violations of the obligations as intended in paragraph (1) are subject to administrative sanctions in

accordance with the provisions of statutory regulations.

#### *Article 190*

Hospitals are required to implement a Hospital Health Information System that is integrated with the National Health Information System.

#### *Article 191*

The Hospital has the right:

- a. determine the number, type and qualifications of human resources in accordance with the Hospital classification;
- b. receive compensation for services and determine remuneration, incentives and awards in accordance with statutory provisions;
- c. collaborate with other parties in developing services;
- d. receive assistance from other parties in accordance with statutory provisions;
- e. sue the party who caused the loss;
- f. obtain legal protection in implementing Health Services; and
- g. promote health services in hospitals in accordance with statutory provisions.

#### *Article 192*

- (1) The hospital is not legally responsible if the patient and/or his family refuses or stops treatment which could result in the patient's death after a comprehensive medical explanation.
- (2) Hospitals cannot be required to carry out their duties in saving human lives.

#### *Article 193*

The Hospital is legally responsible for all losses incurred due to negligence committed by Hospital Health Human Resources. In study about protection law to doctor surgery in context service surgery nerves, important for explain and understand rights and obligations hospital as set in Law no. 17 of 2023 concerning Health. This constitution provide framework work detailed laws about operations and governance Hospital, which means direct or not direct influence on practice doctor surgery and services medical treatment provided to patient. Article 189 explains obligation house extensive pain, starting from provision the correct information about service, provide service safe and quality health, up to protect rights patients and organizers record medical. This obligation create environment supportive services for doctor surgery for give appropriate service with standard profession and ethics medical. Specifically, obligations for provide facilities and infrastructure decent general as well as protect and provide help law for power medical play role important in ensure that doctor surgery can operate his task in optimal conditions. Article 190 requires it hospital apply system integrated hospital health information with system national health information, strengthen function record medical in support doctor surgery in make decision medical based on accurate and up-to- date information. This integration makes it easier coordination and communication between service health, which is aspect critical in cases surgery complex nerves. Home rights regulated pain in Article 191, such as determine source Power human and accepting rewards service, provide base for hospital for manage source its power with effective, which in turn support doctor surgery in operate practice the medical. Right to get protection law and sue the party causing it loss give layer protection for doctor surgery and home Sick from potency risk the law can arise from practice medical.

Articles 192 and 193 provide context more laws Specific related not quite enough answer hospital in context rejection treatment by the patient and the harm caused on negligence. This provision relevant in practice surgery nerves, where risks and complications can become factor important in decision treatment. This provision confirm importance communication and counseling comprehensive medical between doctor surgeon and patient as well as his family, and provide framework law for protect doctor surgery and hospital from not quite enough answer law in situation certain. Lastly, apart from the previous ones writer mention above is also necessary consider and refer to the regulations council medicine, namely professional doctor education this neurosurgery own specificity separately as regulations that have been issued by KKI. Indonesian medical council regulation number 89 of 2020 concerning professional education standards for neurosurgery specialists. This Regulation regulates in as much detail as possible the competency standards

for neurosurgeons, educational achievement standards, teaching staff standards and even facilities and infrastructure standards.

### *Anesthesiologist's Rights and Obligations*

In the ecosystem service health, doctor anesthesia hold role often crucial no seen but vital for success procedure surgery nerve. Operate on the front lines maintenance medical, doctor anesthesia no only responsible answer on comfort and safety patient during operation but also play role important in management preoperative, during surgery, and post-op. Not quite enough answer this demand broad competency, start from evaluation condition patient before operation until maintenance intensive and critical post-operative. Hassle duties carried out by doctors anesthesia in context surgery nerve necessary exists clear rights and obligations for ensure quality service as well as security patient. In phase preoperative, doctor anesthesia do evaluation deep to condition patients, incl history health, allergies, and use potential drugs influence procedure anesthesia. This evaluation role important in determine the appropriate anesthetic strategy for avoid risk during and after operation taking place. During surgery, doctor anesthesia is on the side patient, monitor vital signs strict, and manage giving anesthesia for ensure patient still in condition stable without feel sick. Not quite enough answer this covers supervision on breathing, beat heart, pressure blood, temperature body, amount fluid body, and levels oxygen in blood. Post-surgery, doctor anesthesia play vital role in monitor recovery patient from anesthesia, to be sure that transition from condition anesthesia to aware taking place with smooth and safe.

This includes management pain and prevention possible complications arise after operation. In context maintenance intensive, doctor anesthesia responsible answer on management patient with condition critical need attention constant. Work the same with team medical in the ICU, incl nurses and doctors specialist else, it's possible comprehensive and responsive management to need patient. This includes giving fluids and medications, as well action intubation and use of a ventilator for support function Respiratory patient. Competence doctor anesthesia covers broad understanding to various aspect medical, start from anamnesis, examination physical and supporting, up to action emergency like installation central venous catheter and tracheostomy. Anesthesiologist must capable handle various condition medical, from trauma management to resuscitation heart lungs, as well management airway and breathing patient. Doctor's rights anesthesia covers access to information medical complete and accurate patient care, as well adequate facilities and infrastructure for operate his task. They have rights too get confession on role as well as contribution they in team medical. Temporary that's an obligation doctor anesthesia covers giving clear and complete information to patients and their families about procedure anesthesia, risks, and benefits. An anesthesiologist is also mandatory guard confidentiality information patient and make sure that action medical treatment performed in accordance with standard professional and ethical medical. The role of the doctor anesthesia in surgery nerve is determining integral component success procedure medical. Through combination competence technical and commitment ethical, doctor anesthesia ensure that patient undergo procedure surgery in safe and comfortable conditions. Therefore, understanding deep about rights and obligations they no only important for practitioner medical that alone but also for patient, family patients, and institutions service health in a way whole.

### *Legal Protection for Neurosurgeons who are known to be Anesthetists in Neurosurgery Services at the Susanna Wesley Hospital in Medan*

Health service efforts in hospitals start from basic relationships in the form of therapeutic transactions. A therapeutic transaction is a binding transaction between the service provider and the neurosurgical patient as the recipient of the service in the therapeutic transaction agreement. To assess the validity of legal relationship agreements in health services, it is regulated in Article 1320 of the Civil Code, that the elements of agreement requirements in therapeutic transactions include:

- 1) There is agreement from those who bind themselves;
- 2) There is skill between the parties in making an agreement;
- 3) A certain thing is permitted;
- 4) For a legitimate reason.

The implementation and application of the agreement itself must be carried out in good faith in accordance with the provisions of Articles 1338 and 1339 of the Civil Code and the agreement is based on a

business agreement based on the precautionary principle. The relationship between health care providers and neurosurgical patients can be divided into two forms of agreement, namely:

- a. Treatment agreement, where there is an agreement between the hospital and the neurosurgical patient that the hospital provides a treatment room and the treatment staff carries out healing actions.
- b. Medical service agreement, where there is an agreement between the hospital and the neurosurgical patient that the medical personnel at the hospital will make maximum efforts to cure the neurosurgical patient through medical procedures.

Neurosurgical patients with all their obligations that have been identified by the hospital have the right to health services based on the indication of the neurosurgical patient's illness. In this agreement, the hospital's obligation is to provide treatment facilities, namely medical equipment, doctors, health workers with the aim of providing optimal health services to neurosurgical patients. Agreements made between neurosurgical patients and health service providers based on Article 1320 of the Civil Code are used as a benchmark based on the legal conditions for an agreement between a neurosurgical patient and a health service provider based on a therapeutic agreement which creates rights and obligations for the parties in carrying out healing efforts. Next, the cause of disputes between doctors and neurosurgery patients is if the neurosurgery patient is dissatisfied with the doctor in carrying out treatment efforts or carrying out the medical profession, this dissatisfaction is due to allegations of errors or negligence in carrying out the profession which causes harm to the neurosurgery patient, this occurs if there is a perception that the contents of the therapeutic agreement have not been fulfilled or violated by the doctor. The relationship between doctors/dentists and neurosurgery patients, seen from a legal aspect, is a relationship between legal subjects and legal subjects. The relationship between legal subjects and legal subjects is regulated by the rules of civil law. Civil law rules contain guidelines/measures for how parties in a relationship carry out their rights and obligations. Talking about law, there are reciprocal rights and obligations, where the rights of the doctor/dentist become the obligations of the neurosurgery patient and the rights of the neurosurgery patient become the obligations of the doctor/dentist.

Apart from that, these rules also contain guidelines about what can be done and what cannot be done. For example, a neurosurgery patient must not ignore the doctor's/dentist's advice, in the sense that the neurosurgery patient's obligation is to obey the doctor's/dentist's advice and it is the doctor's/dentist's right to obey his or her advice. Judging from the legal relationship, between the doctor/dentist and the neurosurgical patient there is what is known as a mutual agreement to bind themselves in carrying out treatment for the neurosurgical patient, thus forming what is known as an agreement ( *verbintas* ). The doctrine of legal science recognizes two types of engagements, namely engagements of endeavor ( *inspanning verbintenis* ) and engagements of results ( *resultat verbintenis* ). In an undertaking agreement, performance is seen from the legal relationship, between the doctor/dentist and the neurosurgical patient there is what is known as a mutual agreement to bind themselves in carrying out treatment for the neurosurgical patient so that what is known as an agreement ( *verbintas* ) is formed. Legal science doctrine recognizes two types of engagements, namely engagements of endeavor ( *inspanning verbintenis* ) and engagements of results ( *resultat verbintenis* ). In an endeavor engagement, the achievement that must be given by the doctor/dentist is the maximum possible effort, whereas in a results engagement, the achievement that must be given by the doctor/dentist is in the form of a certain result. The actions or steps taken by doctors when treating neurosurgical patients are in accordance with their field which also has operating standards or SOPs that are in accordance with the knowledge they have acquired, and they must not cross boundaries, for example the lungs, so in the lung field -The lung doctor carries out his duties as a doctor to treat neurosurgery patients. The Neurosurgery Service Standards at Susanna Wesley Hospital Medan are:

- a. Condition
  - 1) Identity Card Has NIK
  - 2) Participant Eligibility Letter
  - 3) Reference Letter
- b. Meanwhile Systems, Mechanisms and Procedures
  - 1) The nurse calls the patient according to the queue number;
  - 2) The nurse performs the examination;
  - 3) Examination by a Doctor;
  - 4) Education by Doctors;
  - 5) If necessary, supporting examinations (laboratory, radiology) are carried out;

- 6) If necessary, consult with other specialist doctors or other professions within the hospital;
- 7) If the services the patient needs are not available, an external referral is made to a more complete health facility;
- 8) Prescribing;
- 9) Patients will be hospitalized if necessary or outpatient control;
- 10) The patient completes the administration at the cashier.

Factors that cause failure are the doctor's lack of understanding of the disease suffered by neurosurgery patients, misdiagnosis, lack of equipment that will be used to carry out the diagnosis, or there is a lack of communication with neurosurgery patients. Among the things that cause neurosurgical patients or their families to be dissatisfied and are said to be in default include:

1. Not doing what the agreement says is obligatory to do.
2. Doing what according to the agreement must be done but fulfilling it too late or not on time.
3. Doing what according to the agreement must be done but not perfect.
4. Doing what according to the agreement should not be done.

Thus, the above liability can be individual or corporate and can also be transferred to other parties based on the principle of vicarious liability. If there are deviations in the provisions of health services, neurosurgery patients or recipients of health care services can claim their rights, which are violated by the health service provider, in this case the hospital and doctors/health workers. Doctors/health workers and hospitals can be held legally responsible if they commit negligence/mistakes that cause harm to neurosurgery patients as consumers of health services. Neurosurgery patients can sue for medical legal responsibility (medical liability), if the doctor makes a mistake/negligence. Doctors cannot take cover under the pretext of unintentional actions, because a doctor's error/negligence that causes harm to neurosurgery patients gives rise to the right for neurosurgery patients to sue for compensation.

#### *Article 305*

- (1) Patients or their families whose interests are harmed by the actions of Medical Personnel or Health Personnel in providing Health Services can complain to the assembly as intended in Article 304.

The article above explicitly provides space for the patient or the patient's family if it is felt that the medical services received are not in accordance with what was expected/should be. However, it is important to remember that a doctor can only try and provide assistance in accordance with the SOP that has been determined and the knowledge he has studied, while the results are not a definite achievement. Next, the question arises, who can determine whether a neurologist has made a mistake, malpractice or negligence? Article 304 states that the Professional Council has the right to determine whether a doctor is guilty or not. Article (2) In order to enforce professional discipline as intended in paragraph (1), the Minister forms a council to carry out tasks in the field of professional discipline. Article (3) The Assembly as referred to in paragraph (2) determines whether there are violations of professional discipline committed by Medical Personnel and Health Personnel. Next, if a doctor is proven to have made a mistake, the sanctions are listed in:

#### *Article 306*

- (1) Violations of discipline by Medical Personnel or Health Personnel as intended in Article 304 paragraph (3) are subject to disciplinary sanctions in the form of:
  - a. written warning;
  - b. obligation to attend education or training at an education provider in the Health sector or competency to carry out such training;
  - c. temporary deactivation of STR; and/or
  - d. recommendation for revocation of SIP.
- (2) The results of the examination as intended in paragraph (1) are binding on Medical Personnel and Health Personnel.
- (3) Medical personnel or health workers who have carried out disciplinary sanctions as intended in paragraph
- (4) which are imposed on suspicion of a criminal act, law enforcement officials prioritize resolving disputes using restorative justice mechanisms in accordance with the provisions of statutory regulations.

Lastly, the thing that needs to be paid attention to is that there are regulations that clearly and firmly protect the rights of medical personnel so that they are not criminalized, found in Article 310 "In the event that a Medical Personnel or Health Personnel is suspected of making a mistake in carrying out their profession which causes harm to patients, disputes arising from these errors are resolved first through alternative dispute resolution outside of court." In facing the complexity and challenges of neurosurgical services, Susanna Wesley Medan Hospital has developed a special approach in protecting its medical personnel, especially neurosurgeons, while ensuring patient rights. One of the main strategies is application agreement detailed and structured therapeutic, which is not only define expectation service but also in a way clear inform possible risks and challenges faced by patients. This agreement, which is rooted in the provisions of Article 1320 of the Civil Code, includes agreement between hospital and patients about type service will be given, incl condition for care and service medical. With prioritize principle caution in accordance with Articles 1338 and 1339 of the Civil Code, Susanna Wesley Medan Hospital guarantees that every step in the service process surgery nerve taken with consideration and attention full. For strengthen communication and understanding together about the process and expected results from service surgery nerves, Susanna Wesley Medan Hospital provides clear and transparent information about service medical treatment received patient. This includes explanation about various possible scenario happen during or after procedure surgery nerves, so patient can make decision information about maintenance they. Apart from that, management hospital has form clear scheme about mechanism complaint as response to dissatisfaction patient on service received. In the corners room certain, provided board easy information patient or his family for understand how submit complaint or related suggestions service received. It creates a channel open between patients and providers service health, possible every issue or dissatisfaction can handled in a way effective and efficient.

Application agreement detailed and structured therapy, accompanied by with giving clear information about risk, as well formation scheme easy complaint accessible, shows commitment to the Susanna Wesley Hospital in Medan protect Good patient nor power the medical. This approach no only strengthen trust patient to service their medical accept but also deliver layer protection addition for doctor surgery nerves, to be sure that they can give maintenance best in supportive and protected environment in a way law. Hence, according to writer that Protection law to doctor surgery nerves known to the doctor anesthesia in service surgery nerves at Susanna Wesley Hospital Medan refers to the structure agreement regulated therapy in the Civil Code, especially Article 1320 which emphasizes elements condition legitimate happen agreement. Connection between patient with doctor surgery neurologist and doctor anesthesia based on principles prudence and faith Good in accordance with Articles 1338 and 1339 of the Civil Code. In practice, agreement care and service medical covers agreement about provision facilities and efforts healing, strengthening position law doctor in give service in accordance with standard profession. Failure in fulfil expectation patient can give rise to dispute, where is the doctor can faced with accusations malpractice or negligence. In context law civil, relationship between doctor and patient governed by prescriptive rules reciprocal rights and obligations, require patient for obey advice medical, all at once give doctor right for obeyed. Approach to the Susanna Wesley Hospital in Medan implement agreement clear therapeutic structure communication open show effort for minimize risk dispute and improve satisfaction patient. Protection law for doctor strengthened through systems, mechanisms and procedures services specified by the hospital, which is not only focus on aspects technical service medical but also on fulfillment right patient for get information, provide approval, and submit complaint. Application principle justice restorative and mechanism solution outside dispute court according to Article 310 offers road for solution fair and efficient conflict, providing layer protection addition for doctor surgery nerve. With thus, Susanna Wesley Hospital Medan implemented it framework comprehensive legal and operational for protect rights doctor surgery neurologist and doctor anesthesia, while ensure fulfillment standard service quality and responsible medical care answer. This approach reflect commitment hospital for create environment safe and secure, good service for patient nor for power medical.

#### 4. CONCLUSION

Research on the Legal Protection of Neurosurgeons Known by Anesthetists in Neurosurgery Services at the Susanna Wesley Hospital in Medan has revealed the importance of a strong and detailed legal structure in supporting medical practice, especially in highly technical and high-risk specialties such as neurosurgery. Through analysis internal house policy pain and regulations relevant legislation, this research highlighting

How agreement detailed therapeutic, clear information about risk procedures and mechanisms effective complaint can help in reduce legal risks for doctor while increase trust and satisfaction patient .

## REFERENCE

- Abdi, Nuzul , Sudi Fahmi, and Bagio Kadaryanto . " Hospital Legal Responsibility for Doctors' Medical Actions ." *Journal Of Science And Social Research* 5.3 (2022).
- Apeldoorn, LJ Van. *Introduction Legal studies* . PT Pradnya Paramita, Jakarta, 2004, 30th cet .
- Aris Priyadi . " Contract Therapeutic / Agreement Between Doctor and Patients ." *Journal of Pancasila and Citizenship Education Communication Media* Vol. 2, No.1, (April 2020).
- Becker, Lawrence C. *Ethics in Neurosurgical Practice*. Cambridge: Cambridge University Press, 2014.
- Cooper, J. B. (2018). Critical Role of the Surgeon– Anesthesiologist Relationship for Patient Safety. *Anesthesiology* , 129(3), pp. 402–405.
- Daldiyono . *Smart Patients & Wise Doctors* . PT. Bhuana Knowledge Popular , Jakarta, 2007.
- Darwaman , R., Sidi, R., & Saragih , YM " Legal Protection for Doctors in Independent Doctor Practice Health Services ." *Nursing Journal* 7.1 (2023): 225–231. <https://doi.org/10.31004/jn.v7i1.13000>.
- Degdy Chandra B. Simarmata , et al. " Legal Analysis About Agreement Therapeutics Between Doctors and Patients in Health Services ." *Rectum Journal* Vol. 4 No. 1, (January 2022).
- Eko Esti Santoso, et al. " Form Legal Protection of Consumer Rights in Using Health Services ." *Kertha Semaya Law Journal* Vol.10 No.3 (2022).
- Hadjon, Philipus M. *Legal Protection for the People in Indonesia*. Surabaya: Airlangga University Publishers, 1987.
- Isfandyarie , Anny. *Malpractice & Risk Medicine in Criminal Law Studies* . Library Achievement , Jakarta, 2005.
- Kartika Patpahan , et al. " Comparison Legal Protection for Patients Victims of Malpractice Surgery Plastic In Indonesia and South Korea." *IUS Journal of Law and Justice Studies* Vol.9 No.1, April (2021).
- Komang Ayu Windy Widyastari Putri, et al. " Doctor's Responsibilities Against Patient in Agreement Therapeutics ." *Journal Legal Analogy* Vol.2 No.3, (August 2020).
- Law Number 17 of 2023 concerning Health.
- Law of the Republic of Indonesia Number 29 of 2004 concerning Medical Practice.
- Law of the Republic of Indonesia Number 36 of 2009 concerning Health.
- Law of the Republic of Indonesia Number 44 of 2009 concerning Hospitals.
- Lee J.H. (2017). Anesthesia for Ambulatory Surgery. *Korean Journal of Anesthesiology* , 70(4), pp. 398–406.
- Machmud, Syahrul . *Law Enforcement and Legal Protection for Suspected Doctors Do Medical Malpractice* . Putra Darwati's work , Bandung, 2012.
- Maroon, John C. *Neurosurgery*. Philadelphia: Elsevier, 2018.
- Marzuki, Peter Mahmud. *Introduction to Legal Science*. Jakarta: Kencana Publishers, 2010.
- Mertokusumo, Sudikno. *Law and Courts on Various Issues*. Yogyakarta: Liberty Publishers, 2005.
- Notoatmodjo, Soekidjo. *Sociology for Health*. Jakarta: Salemba Medika, 2008, p.25.
- Notoatmodjo , Soekidjo . *Sociology For health* . Salemba Medika, Jakarta, 2008.
- Priantara , I Nyoman Agus Adi, and AA Ngurah Oka Yudistira Darmadi. " Accountability Hospital Crimes for Doctors or Health Workers Do Malpractice ." *Kertha Speech* 9.2 (2020).
- Daughter, Aulia. "Protection of the Rights of Neurosurgical Patients: Case Study of Neuro Medika Hospital." *Indonesian Health Law Journal*, vol. 12, no. 1, 2020.
- Raharja, Bayu. "Regulation Analysis of Neurosurgical Services in Indonesia: A Critical Review." *Journal of Health Policy Analysis*, special issue on Neurosurgery, 2021.
- Rashid, Love. "Comparison of Legal Protection for Neurosurgical Patients in Indonesia and Malaysia." *International Public Health Magazine*, vol. 5, no. 3, 2022.
- Regulation of the Minister of Health of the Republic of Indonesia Number 28 of 2019 concerning the Implementation of Health Services in Health Insurance.
- Regulation of the Minister of Health of the Republic of Indonesia Number 39 of 2018 concerning Implementation of the Healthy Indonesia Program with a Family Approach.
- Republic of Indonesia Government Regulation Number 46 of 2013 concerning Procedures for Licensing and Organization of Doctor and Dentist Practices.

- Ricardo Goncalves Klau, Muhammad Saiful Fahmi, and Gusti Ayu Utami. " Hospital Civil Legal Liability for Adverse Medical Actions of Partner Doctors Patient ." *Journal Community Justice* 5.3 (2022).
- Rifah Roihanah . " The Legal Relationship of Doctors and Patients : Perspective Law No. 8 of 1999 concerning Protection Consumers ." *Journal of Legal and Social Studies* Vol. 16, No.1, (June 2019).
- Rohadi , Mokhamad Khairul Huda, Chomariah. " Legal Protection Against Patient Deep Neurosurgery Service Neurosurgery in Hospitals." *Journal Kertha Semaya* vol. 11, no. 3, 2023, p . 655-665, <https://doi.org/10.24843/KS.2023.v11.i03.p16> .
- RSPUN Dr. Cipto Mangunkusumo (2017). KSM Anesthesiology and Therapy Intensive .
- Satria, Beni, and Redyanto Sidi Jambak . *Criminal law Medical and Malpractice ( Aspects Accountability Criminal Against Doctors in Health Services )* . CV. Cattleya Darmaya Fortuna, Print 1, October 2022.
- Sriwijaya University (2017). Faculty Medicine . Specialist Medical Education Guidebook-1 Anesthesiology and Therapy Study Program Intensive .
- Yuarsa , Tri Agus. " Legal Protection for Doctors on Delegation Authority Medical Specialist Doctor "To the doctor on duty at the hospital." *Syiar Law : Journal Legal Studies* 17.2 (2020).