# Strengthening Informed Consent as an Effort to Prevent Medical Disputes and Improve Patient Protection

**Desi Sintyasari, Irsyam Risdawati, Muhammad Arif Sahlepi**

**Abstract**

Informed consent is an important instrument in health services that serves to ensure the patient's right to obtain adequate information before determining medical action against him. In practice, the implementation of informed consent still faces various problems, including limited information, low patient understanding, suboptimal communication, and the tendency to make consent an administrative formality. This condition can cause differences in understanding between patients and medical personnel and increase the potential for medical disputes. This study aims to analyze the implementation of informed consent from the perspective of health law and examine its strengthening as an effort to prevent medical disputes and improve legal protection for patients. The research uses normative legal research methods with a legislative approach and a conceptual approach. Legal materials are analyzed descriptive-analytically to obtain an overview of the position, implementation, and problems of informed consent in the legal relationship between patients and medical personnel. The results show that informed consent is not solely a consent document, but a communication process that provides an opportunity for patients to understand the diagnosis, medical measures, benefits, risks, alternative course of action, and possible consequences. Therefore, strengthening informed consent needs to be done through improving the quality of communication of medical personnel, providing easy-to-understand information, strengthening documentation, implementing standard operating procedures, and using technology appropriately. The strengthening is expected to increase legal certainty, prevent misunderstandings, reduce the potential for medical disputes, and realize more optimal legal protection for patients and medical personnel.

***Keywords**: Informed Consent, Medical Disputes, Patient Protection, and Medical Personnel*

Desi Sintyasari[1]
[1]Postgraduate Master Of Health Law, University of Pembangunan Panca Budi, Medan
e-mail: desisintyasari6@gmail.com[1]

Irsyam Risdawati[2], Muhammad Arif Sahlepi[3]
e-mail: irsyam.risdawati@gmail.com[1] , muhammadarif@gmail.com[3]

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## Introduction

### 1.1 Legal Relationship between Patients and Medical Personnel, Position *of Informed Consent,* and Patient Rights

The relationship between patients and medical personnel is a legal relationship that is born in the process of health services and is generally realized through therapeutic agreements. In this relationship, medical personnel are positioned as parties who provide professional services, while patients are recipients of services who have legal rights and obligations. The relationship is not only based on trust, but also gives birth to legal consequences in the form of the patient's right to obtain proper services and the obligation of medical personnel to provide services in accordance with professional standards and applicable legal provisions. Thus, the relationship between patients and medical personnel is a legal relationship that places both parties as legal subjects with their respective positions and responsibilities. In this therapeutic relationship, *informed consent* has an important position because it is part of the decision-making process before a medical procedure is performed. *Informed consent* should not be understood only as an administrative form or document, but as a communication process between medical personnel and patients regarding health conditions, actions to be taken, benefits, risks, and available alternative measures. The patient's consent is given after obtaining sufficient information so that the decision taken is a conscious and understandable decision. Therefore, *informed consent* has a legal function to clarify the rights and obligations of the parties as well as provide a basis for the implementation of medical measures in therapeutic relationships.

*Informed consent* is also a concrete form of respect for the patient's right to information and autonomy in determining medical actions against him. Patients are no longer seen as parties who only accept the decisions of medical personnel, but as legal subjects who have the right to participate in determining the choice of health services that they will receive. The correct implementation *of informed consent* provides an opportunity for patients to understand their medical conditions and choices before giving consent or refusal. Thus, strengthening *informed consent* not only serves to protect patients from unwanted medical actions, but can also provide legal protection for medical personnel because of a clear communication and consent process. Such implementation can ultimately strengthen the relationship of trust between patients and medical personnel and reduce the potential for misunderstandings that can develop into medical disputes.

### 1.2 Problems of Implementing *Informed Consent* in Practice and the Risk of Medical Disputes

The implementation of *informed consent* in health service practice still faces various problems, especially related to the quality and completeness of information provided to patients. In some circumstances, *informed consent is* still treated as an administrative document that must be signed before medical procedures, while the substance of communication between medical personnel and patients has not been optimally carried out. Patients may have difficulty understanding the diagnosis, the purpose of the action, the benefits, the risks, complications, and the available alternative course of action. Research shows that incomplete disclosure of information can cause patients to make decisions without adequate understanding, so the principle of patient autonomy has not been fully fulfilled.

These problems have legal consequences because a lack of information or lack of adequate consent can cause a difference in perception between patients and medical personnel when there are service results that do not meet expectations. Uncertainty about the risks of medical action can cause patients to consider the occurrence of complications or unexpected outcomes as a form of negligence or malpractice. Therefore, *informed consent* has a preventive function in reducing the potential for medical disputes through the provision of transparent

information and good documentation of consent. This is in line with the provisions of Article 293 of Law Number 17 of 2023 concerning Health which requires every individual health service action to obtain approval after the patient has received an adequate explanation.

### 2.3 The Importance of Strengthening *Informed Consent* as an Instrument for Patient Legal Protection

Strengthening *informed consent* is important because the approval of medical procedures does not only function as an administrative document, but is a legal instrument that guarantees the patient's right to obtain information and determine medical actions against him. The implementation of *informed consent* that is carried out in a complete, transparent, and easy-to-understand manner can clarify the legal relationship between patients and medical personnel and reduce potential misunderstandings about actions, benefits, risks, and alternatives to health services. Research on *informed consent* also shows that the completeness of consent provides legal protection for patients in the event of deviations from the agreed actions, as well as providing legal certainty for medical personnel in carrying out services according to the patient's consent.

The strengthening *of informed consent* is increasingly relevant to the development of national health law after the enactment of Law Number 17 of 2023 concerning Health. Article 293 emphasizes that individual health care actions must obtain approval after the patient has received an adequate explanation, including for invasive and/or high-risk actions that require written consent. This provision shows the strengthening of the patient's position as a legal subject who has autonomy in determining the health services he receives. Therefore, strengthening *informed consent* needs to be directed not only at the fulfillment of consent formalities, but also at the quality of communication, patient understanding, documentation, and compliance of medical personnel with legal provisions. This is important to realize the principles of patient protection and safety while building a national health service system that is more transparent, accountable, and provides legal certainty.

### 2.4 Problem Formulation

1. What is the legal position of informed consent in health services in Indonesia?
2. What are the problems with the implementation of informed consent in preventing medical disputes?
3. How can strengthening informed consent improve patient legal protection?

### 2.5 Research Objectives

This study aims to analyze the legal position of informed consent in health services, including its role in the legal relationship between patients and medical personnel; analyze the problems of implementing informed consent in an effort to prevent medical disputes, especially related to the provision of information, understanding, and consent of patients; and analyze efforts to strengthen informed consent As an instrument to improve the legal protection of patients, so that its implementation is not only administrative, but is able to guarantee patients' rights, provide legal certainty, and prevent disputes between patients and medical personnel. Studies on informed consent show that consent has an important position in therapeutic relationships and serves as a form of legal protection for patients and medical personne

### 2.5 Research Benefits

The research entitled Strengthening Informed Consent as an Effort to Prevent Medical Disputes and Improve Patient Protection is expected to provide theoretical and practical benefits in the development of health law, especially related to the implementation of informed consent in medical services. Theoretically, this research can add insight into the importance of informed consent as a form of fulfilling patient rights and the basis of communication between patients and medical personnel. Practically, this research is expected to be an input for the government in strengthening regulations, for health service facilities in improving operational standards and documentation, and for medical personnel in providing clear information to patients. Thus,

strengthening informed consent can increase patient understanding and involvement, reduce the potential for misunderstandings, and prevent medical disputes

**Literature Review**

Informed consent is an important part of the legal relationship between patients and medical personnel because it relates to the patient's right to obtain information and determine medical actions against him/her. Informed consent is not only interpreted as a consent document, but also as a communication process that provides information about diagnosis, purpose of action, benefits, risks, and alternative medical measures. Pietrzykowski and Smilowska (2021) explained that informed consent is a basic concept in medical services that is oriented towards patient autonomy and supports joint decision-making between doctors and patients. Thus, the quality of informed consent is largely determined by the extent to which the patient understands the information provided before making a decision. From the perspective of patient protection, the implementation of good informed consent can be an instrument to ensure respect for patients' rights and autonomy. The patient must obtain adequate information, be able to understand it, and give consent voluntarily without coercion. Sherman et al. (2021) found that informed consent in medical practice still faces problems in the form of insufficient information, low patient understanding, and non-optimal aspects of volunteerism. These conditions can have an impact on low patient satisfaction, non-compliance with treatment, and even an increased risk of lawsuits against medical personnel. Therefore, strengthening informed consent needs to be directed at improving the quality of communication, not just administrative fulfillment.

Informed consent is also closely related to the prevention of medical disputes. Disputes can arise when patients feel that they do not have enough information about the available medical procedures, risks, or treatment alternatives. Giudici-Wach et al. (2022), through a systematic review of legal cases related to informed consent, show that the lack of information about risks and the absence of evidence that information has been provided are factors that are often found in dispute cases. The findings show that clear communication and documentation of the informed consent process are important aspects in reducing potential disputes between patients and medical personnel. Thus, informed consent can function as a preventive mechanism against disputes as well as part of good medical service governance.

In the context of Indonesian law, informed consent has an important position in the doctor-patient relationship and is related to legal protection for both parties. Sinaga (2022) research shows that informed consent and medical records have an important position in proving and resolving medical disputes. If the process of providing information and approval is not carried out or not properly documented, this condition can cause legal problems for medical personnel and health service facilities. Therefore, strengthening informed consent needs to be done through compliance with procedures, completeness of documentation, and increasing the understanding of medical personnel regarding the obligation to provide information to patients.

Based on this study, strengthening informed consent can be seen as one of the strategies to increase legal protection of patients while preventing medical disputes. The strengthening not only includes the provision of consent forms, but also the improvement of the quality of doctor-patient communication, ensuring patient understanding, providing information about risks and alternative actions, and recording the complete approval process. Research in Indonesia also shows that medical personnel's compliance with informed consent procedures still needs to be strengthened so that its implementation does not stop as an administrative formality. Therefore, research on strengthening informed consent is important to formulate more effective implementation in providing protection to patients and at the same time creating legal certainty for medical personnel.

## Research Methodology

This study uses a *normative juridical research* method with three approaches, namely the statute *approach* to examine provisions regarding *informed consent* and patient protection, a *conceptual approach* to analyze the concept of *informed consent* and medical disputes, and a case approach) to review cases or decisions related to *informed consent*. These three approaches are used to analyze the strengthening of *informed consent* as an effort to prevent medical disputes and improve patient legal protection.

## Results and Discussion

### 4.1 Legal Status of Informed Consent in Health Services

*Informed consent* is the patient's consent to medical action after obtaining adequate information about the health condition, purpose of the action, benefits, risks, and available alternative actions. In the health service relationship, *informed consent* has an important position because it is part of the legal relationship between patients and medical personnel. Patients have the right to obtain clear and complete information and determine whether a medical action can be taken against him. Thus, patient consent is not just a signature on a form, but a decision-making process based on the information provided by medical personnel. Legally, the implementation of *informed consent* relates to the obligation of medical personnel to provide adequate explanation before medical procedures are performed and to the patient's right to accept or reject such actions. In the perspective of the therapeutic relationship, patients and medical personnel are legal subjects who have their own rights and obligations. Therefore, medical personnel are obliged to provide information correctly, clearly, and understandably, while patients have the right to determine the actions they will receive based on this information. Provisions regarding *informed consent* are also part of the development of national health law, including the provisions in Law Number 17 of 2023 concerning Health.

The position of *informed consent* is ultimately not only a procedure in health services, but also as an instrument of legal protection for patients and medical personnel. For patients, *informed consent* provides assurance that medical procedures are carried out with consent and based on the information that has been received. For medical personnel, the correct implementation of *informed consent* can provide certainty regarding the communication and consent process before action is taken. Therefore, *informed consent* needs to be implemented in a substantive, transparent, and well-documented manner in order to strengthen patient rights, prevent misunderstandings, and reduce the potential for medical disputes in health services. From the perspective of legal protection, *informed consent* also serves as a form of respect for the principle of patient autonomy in determining the health services they receive. Consent given after the patient has obtained adequate information indicates that the medical procedure is carried out based on the patient's wishes, not solely the decision of the medical personnel. Therefore, the implementation of *informed consent* must be carried out honestly, clearly, easily understood, and adjusted to the patient's condition. This process can also be proof that medical personnel have fulfilled their obligation to provide information and obtain consent before performing medical procedures, so as to provide legal certainty for both parties and reduce the potential for medical disputes.

### 4.2 Problems of Implementing Informed Consent in the Prevention of Medical Disputes

The implementation of *informed consent* in health service practice still faces various obstacles, especially in providing information to patients. Information about the diagnosis, purpose of action, benefits, risks, complications, and alternative course of action is sometimes not fully communicated or in language that is easy for the patient to understand. Differences in education levels, health knowledge, and the ability to understand information can also cause

patients to not fully understand the action they will receive. Research shows that incomplete information can cause patient decisions to not be fully based on adequate understanding, so the principle of patient autonomy has not been optimally implemented.

Another problem is *informed consent* which can still be treated as an administrative formality, limited service time, and incomplete consent documentation. This condition can weaken the function of *informed consent* as evidence that there has been communication and consent between patients and medical personnel. In addition, in an emergency, medical personnel may face situations when action must be taken immediately while the patient is unable to provide consent or the family is not yet available. This condition requires clarity on the basis of the action, the limits of authority, and good documentation so as not to cause legal problems in the future. Weaknesses in the implementation of *informed consent* can increase the potential for medical disputes because patients and medical personnel can have different perceptions of health care actions and outcomes. Patients who do not obtain adequate information about risks or alternative courses of action may consider the occurrence of complications as a form of negligence or malpractice, while medical personnel may have difficulty proving that information and consent have been provided correctly if the documentation is incomplete. Therefore, *informed consent* needs to be carried out as a substantive communication process, not just filling out a form, by ensuring that the information is understood by the patient and documented properly. Thus, strengthening *informed consent* can be a preventive step to reduce misunderstandings, prevent medical disputes, and provide legal protection for patients and medical personnel.

In addition to these problems, the implementation of *informed consent* also faces challenges in ensuring that consent is truly given freely and based on the patient's understanding. In practice, the patient's anxious condition, family pressure, limited communication, and unbalanced relationship between the patient and medical personnel can affect the patient's ability to make decisions. Therefore, medical personnel need to ensure that patients have the opportunity to ask questions, understand the information provided, and give consent without pressure. Strengthening the communication process and documentation of *informed consent* is important so that the consent given has a substantive meaning, while reducing differences in perceptions and potential disputes between patients and medical personnel.

### 4.3 Strengthening Informed Consent as an Instrument for Patient Legal Protection

Strengthening *informed consent* needs to start from improving the quality of information provided to patients. Information regarding the diagnosis, purpose of action, benefits, risks, possible complications, and alternative course of action should be provided in full using simple, easy-to-understand language. It is important that patients fully understand the condition and health care options before giving consent. Thus, *informed consent* is not only an administrative requirement, but a communication process that respects the rights and autonomy of patients. Research shows that clear and transparent communication can strengthen patients' legal protections while reducing the potential for misunderstandings that can develop into medical disputes. Strengthening also needs to be done through improving the communication competence of medical personnel and the implementation of clear standard operating procedures (SOPs). Medical personnel need to have the ability to explain medical information according to the patient's level of understanding and provide opportunities for patients to ask questions before making a decision. In addition, *informed consent* documentation must be carried out completely and systematically in medical records so that it can be evidence that the process of providing information and consent has been carried out. Thus, *informed consent* can function as an instrument of legal protection for patients as well as provide legal certainty for medical personnel.

The use of digital technology can also be part of strengthening *informed consent*, especially in the delivery of information and consent documentation. Digital media can be used

to provide information in the form of text, images, videos, and electronic consent forms so that patients have the opportunity to learn information more flexibly. Systematic studies show that digital technology in the *informed consent process* can improve the initial understanding of patients and help the documentation process. However, its implementation must still pay attention to data security, accessibility, equity, and maintain direct communication between patients and medical personnel. Furthermore, it is necessary to periodically supervise and evaluate the implementation of *informed consent* and strengthen the preventive medical dispute resolution mechanism. Health care facilities need to evaluate the compliance of medical personnel with SOPs, completeness of documentation, and the quality of communication with patients. In the context of national health law, the strengthening is in line with Article 293 of Law Number 17 of 2023 concerning Health, which regulates the approval of actions after the patient has obtained an adequate explanation, including provisions regarding written consent and emergency conditions. Therefore, strengthening *informed consent* substantively can be a preventive strategy to clarify the rights and obligations of the parties, reduce misunderstandings, and prevent conflicts from developing into medical disputes

### 4.4 Model of Strengthening Informed Consent in Health Law Reform

The model of strengthening *informed consent* in health law reform needs to place adequate information and patient understanding as the main initial stage. Patients should obtain information about health conditions, objectives of action, benefits, risks, and alternative actions in simple language and appropriate to their level of understanding. A valid consent is not just marked by a signature, but must show that the patient really understands the information before making a decision. Various studies show that more interactive communication methods, including the use of audiovisual media and *teach-back*, can improve patient understanding in the *informed consent process*.

Based on this, the model offered can be formulated in a series: adequate information → patient understanding → free consent → robust documentation. Each stage has interrelated legal functions. Adequate information results in understanding, understanding allows patients to give consent freely without pressure, while complete documentation provides evidence that the approval process has been done correctly. Thus, *informed consent* needs to be positioned as a substantive legal and communication process, not just the fulfillment of administrative formalities. This is also important because the quality of *informed consent* has to do with the adequacy of information, the patient's understanding, and the voluntary nature of the decision given. The next stage is service transparency → dispute prevention → legal protection of patients, which can be the direction of health service regulations and practices. Transparency can be strengthened through standard operating procedures, integrated documentation, evaluation of medical personnel compliance, and the use of digital technology to assist in information delivery and record of consents. Research shows that digital technology can improve patients' initial understanding of the *informed consent process*, although it is still necessary to be accompanied by communication with medical personnel and pay attention to the condition of vulnerable patient groups. Thus, the model can be developed as a recommendation for health law reform that places *informed consent* as a preventive instrument to prevent disputes while strengthening patient legal protection and legal certainty for medical personnel.

## Conclusion

Based on the results of the research, *informed consent* has an important position as a legal instrument in health services because it is part of the legal relationship between patients and medical personnel and guarantees the patient's right to obtain information and determine medical actions against him. *Informed consent* should not be understood as just an

administrative document, but as a process of communication and consent that is carried out consciously, voluntarily, and based on adequate information. In the context of national health law, the obligation to obtain approval after the patient has received an adequate explanation is also affirmed in Article 293 of Law Number 17 of 2023 concerning Health. The implementation of *informed consent* still faces various problems, such as incomplete information, limited patient understanding, suboptimal communication, formalistic consent, and weak documentation. This condition can cause differences in perception between patients and medical personnel and increase the potential for medical disputes. Therefore, it is necessary to strengthen *informed consent* through improving the quality of information and communication, using easy-to-understand language, strong documentation, implementing SOPs, and continuous supervision and evaluation. The strengthening is expected to make *informed consent* a preventive instrument to prevent disputes while increasing legal protection of patients and providing legal certainty for medical personnel. Thus, strengthening *informed consent* needs to be placed as an important part of the reform of national health laws by shifting the paradigm from administrative consent to substantive legal and medical communication processes. The reinforcement includes providing complete and easy-to-understand information, the opportunity for patients to ask questions and make choices freely, documentation that can be accounted for, and supervision of its implementation. An adequate information model → patient understanding → free consent → strong documentation → transparency of services → dispute prevention → legal protection of patients can be a preventive framework in building health services that are more transparent, accountable, and oriented towards the protection of patients' rights.

**Suggestions**

The government needs to strengthen regulations and standards for the implementation *of informed consent* so that its implementation has legal certainty and can be implemented uniformly in health services. Health service facilities also need to improve the quality of **SOPs**, documentation systems, and supervision of the implementation of *informed consent* so that they do not stop at fulfilling administrative formalities. Medical personnel are expected to improve communication competence by providing complete, clear, honest, and easy-to-understand information for patients regarding medical procedures, benefits, risks, and available alternatives. Patients also need to increase their understanding and involvement in medical decision-making by actively obtaining information, asking questions, and giving consent consciously without pressure. Meanwhile, policymakers need to develop *informed consent* mechanisms that are more adaptive to health technology developments, including the use of digital systems in the delivery of information and consent documentation while still paying attention to data security and patient rights. With this step, *informed consent* is expected to function optimally as an instrument for preventing medical disputes while strengthening patient legal protection and legal certainty for medical personnel.

**References**

**Laws and Regulations:**

[1]. Anwar, Y., Zarzani, T. R., & Chermanto, C. (2023). Legal Responsibility of Medical Physicists for Quality in Radiology Operational Permits at Bhayangkara Banda Aceh

Hospital. *Sibatik Journal: Scientific Journal of Social, Economic, Cultural, Technological, and Educational*, *2*(8), 2263-2282.

[2]. Aspan, H. (2020). The Role of Legal History in the Creation of Aspirational Legislation in Indonesia. *International Journal of Research and Review (IJRR), 7*(6), 40-47.

[3]. Aspan, H., & Ginting, G. G. P. (2023). Legal counseling related to the provision of wages and incentives in the Medan City Market Center. *Journal of Community Service* Disciplines, *1*(1), 5-8.

[4]. Dewi, E. D. A. M., Sastrowijoto, S., & Padmawati, R. S. (2021). Autonomous informed consent in terms of completeness of medical information disclosure. *Journal of Community Medicine, 37*(3), 71–78.

[5]. *Digital technology in informed consent for surgery: Systematic review*. (2023). *BJS Open, 7*(1), zrac159.

[6]. Eka Pratama, C. A., & Ngadino, N. (2022). The position of *informed consent* as a legal protection of the doctor-patient relationship in cases of malpractice. *Notary, 15*(1), 241–252.

[7]. Eka Pratama, C. A., & Ngadino, N. (2022). The position of *informed consent* as a legal protection of the doctor-patient relationship in cases of malpractice. *Notary, 15*(1), 241–252.

[8]. Fadillah, M. R. H., & Sewu, L. S. (2025). Legal protection for patients who are given medical procedures without *informed consent* is linked to the principles of protection and safety after the birth of Law Number 17 of 2023 concerning Health. *Journal of Law, Humanities and Politics, 5*(3).

[9]. Franky Kurniawan, Hendry Aspan, and Andoko, "A Juridical Review of Informed Consent Based on Law Number 17 of 2023 Concerning Health as a Replacement for Law Number 36 of 2009," *Bengkoelen Justice: Journal of Legal Sciences*, Vol. 14, No. 1, 2024, pp. 85–100.

[10]. Giudici-Wach, K., Gillois, P., Remen, T., & Claudot, F. (2022). Learning from informed consent litigation to improve practices: A systematic review. *Patient Education and Counseling, 105*(7), 1714–1721.

[11]. Glaser, J., Nouri, S., Fernandez, A., et al. (2020). Interventions to improve patient comprehension in informed consent for medical and surgical procedures: An updated systematic review. *Medical Decision Making, 40*(2), 119–143.

[12]. Hakim, M. L., Maulana, A., & Sabilla, M. (2026). The legal dimensions of communication in hospital settings: A medicolegal perspective. *Jurnal Hukum Replik, 14*(1).

[13]. Indonesian Medical Code of Ethics (KODEKI) Year 2012

[14]. Irfan, I. (2018). The position of *informed consent* in the doctor-patient relationship. *De Lega Lata: Journal of Legal Science, 3*(2).

[15]. Irsyam Risdawati, *Health and Hospital Law* (Yogyakarta: Deepublish, 2022), pp. 97–100.

[16]. Irsyam Risdawati, Muhammad Donni Lesmana Siahaan. (2025). *Health and Law in Society 5.0*. Bekasi: PT Dewangga Energi International.

*[17].* Irsyam Risdawati. (2024). *Informed Consent in Medical Practice with a Value of Justice Approach*. Bekasi: PT Dewangga Energi International.

[18]. Irsyam Risdawati. (2024). Informed Consent in Medical Practice with a Value of Justice Approach. Bekasi: PT Dewangga Energi International.

*[19].* Irsyam Risdawati. (2024). *Introduction to Health Law Navigating Legal and Ethical Challenges in Health Services*. Bekasi: PT Dewangga Energi International.

[20]. Irsyam Risdawati. (2024). Introduction to Health Law Navigating Legal and Ethical Challenges in Health Services. Bekasi: PT Dewangga Energi International.

[21]. Kiernan, A., Fahey, B., Guraya, S. S., & Boland, F. (2023). Digital technology in informed consent for surgery: Systematic review. *BJS Open, 7*(1), zrac159.
[22]. Kurniawan, F., Aspan, H., & Andoko. (2024). A juridical review of informed consent based on Law Number 17 of 2023 concerning Health as a replacement for Law Number 36 of 2009. *Bengkoelen Justice: Jurnal Ilmu Hukum, 14*(1), 85–100.
[23]. Law Number 17 of 2023 concerning Health.
[24]. Mayasari, D. E. (2017). Informed consent on therapeutic transaction as a protection of legal relationship between a doctor and patient. *Mimbar Hukum, 29*(1).
[25]. Nadira, C. S., & Khairunnisa, C. (2023). The position of *informed consent* in health services in Indonesia. *Scholars: Journal of Law, Social and Humanities, 1*(1), 28–38.
[26]. Narendra, I., & Yustian, S. I. (2023). Completeness of filling *out informed consent* for legal protection for doctors and patients. *Proceedings of the National Health Information Seminar*.
[27]. Parsons, J. A., et al. (2023). Digital informed consent: Modernising information sharing in surgery to empower patients. *World Journal of Surgery*.
[28]. Pietrzykowski, T., & Smilowska, K. (2021). The reality of informed consent: Empirical studies on patient comprehension—Systematic review. *Trials, 22*, 57.
[29]. Purawijaya, H. R., Jollis, J., Aswan, A., & Fikri, A. M. (2025). Informed consent and medical disputes in Emergency Installations (IGD): An ethical and legal review. *Syntax Literate: Indonesian Scientific Journal, 10*(7).
[30]. Ramadianto, A. Y. (2017). Informed consent as the agreement in therapeutic contract between physician and patient. *Simbur Cahaya, 24*(1).
[31]. Republic of Indonesia. (2023). *Law Number 17 of 2023 concerning Health*.
[32]. Rifaldo, I. J. (2025). The legal status *of informed consent* as a therapeutic agreement between patient doctors according to the Civil Code. *Indonesian Journal of Health Law, 5*(2), 82–94.
[33]. Rumapea, G. N., & Dharmawan, N. K. S. (2023). The principle of consensualism in therapeutic agreements: *Inform consent* as a form of agreement between the doctor and the patient. *Kertha Semaya: Journal of Legal Science, 11*(5).
[34]. Sherman, K. A., Kilby, C. J., Pehlivan, M., & Smith, B. (2021). Adequacy of measures of informed consent in medical practice: A systematic review. *PLOS ONE, 16*(5),
[35]. Sinaga, N. A. (2022). The legal force of informed consent and medical records as evidence in the resolution of medical disputes in Indonesia. *Scientific Journal of Aerospace Law, 12*(2).
[36]. Susilo, L. E., Suryono, A., & Makbul, A. (2026). *Informed consent* in the perspective of the patient's legal protection in therapeutic transactions. *Journal of Law, Humanities and Politics, 6*(1).
[37]. Susilowati, E. A., Yuspin, W., & Absori, A. (2021). Compliance of medical personnel against the implementation of informed consent: A lawsuit prevention study for medical disputes. *Soepra Jurnal Hukum Kesehatan, 7*(2).
[38]. Sutarno, S., & Maryati, M. (2021). Information of medical malpractice and risks in the informed consent process before surgery in Indonesia. *Yustisia, 10*(2).
[39]. Widjaja, G., et al. (2025). *The Obligation of Health Workers in Providing Informed Consent: A Review of the Ethical and Legal Literature*. Zahra Journal of Health and Medical Research.
[40]. Widjaya, Christine Elisia. "Development of Standards for Providing Information in the Informed Consent Process in Therapeutic Agreements." *Perspective: A Study of Legal and Development Issues*, Vol. 27, No. 1, 2022.
[41]. Wijaya, I. M. A. P., & Wedha, Y. Y. (2024). The urgency of informed consent in resolving medical disputes. *Student Law Journal*.

[42]. Wirabrata, I. G. M. (2019). Juridical Review *of Informed Consent* in Legal Protection for Patients and Physicians. *Journal of Legal Analysis*.
[43]. Wulandari Nur, A. A., Mokhtar, S., & Razak, K. (2026). Informed consent as an effort to prevent and resolve medical disputes: A literature review. *Journal La Medihealtico, 7*(2).
[44]. Wulandari, D. A. (2023). Patient Health Literacy and the Challenges of Implementing *Informed Consent* in Indonesia. *Indonesian Journal of Health Law*.
[45]. Yussy A. Mannas, "The Legal Relationship of Doctors and Patients and the Responsibilities of Doctors in the Implementation of Health Services," *Journal of Legal Studies*, Vol. 7, No. 2 (2019).