JLPH: Journal of Law, Politic and Humanities
E-ISSN: 2962-2816
P-ISSN: 2747-1985
https://dinastires.org/JLPH dinasti.info@gmail.com +62 811 7404 455

DOI: https://doi.org/10.38035/jlph.v7i1
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Received: 21 Oktober 2026 | **Revised:** 11 November 2026 | **Accepted:** 17 November 2026

Legal Liability of Pediatricians for Medical Interventions Involving Anti-Seizure Intravenous Drug Administration Resulting in Severe Patient Compliations at Mohammad Hoesin Hospital Palembang

Kemas Muhammad Dahlan[1], Mulyadi Tanzili[2], Helwan Kasra[3]
[1]Universitas Muhammadiyah Palembang, Palembang, Indonesia, dokterdahlanspb@gmail.com
[2]Universitas Muhammadiyah Palembang, Palembang, Indonesia, magisterhukumppsump@gmail.com
[3]Universitas Muhammadiyah Palembang, Palembang, Indonesia, magisterhukumppsump@gmail.com

Corresponding Author: dokterdahlanspb@gmail.com[1]

Abstract: The research questions are: What is the legal liability of a pediatrician regarding the administration of an intravenous anti-seizure medication that results in harm to the patient? and What factors influence the legal liability of a pediatrician regarding the administration of an intravenous anti-seizure medication that results in harm to the patient?. The findings indicate that: First, a pediatrician's legal liability for the administration of an anticonvulsant infusion that harms a patient at RSUP Dr. Mohammad Hoesin Palembang may encompass criminal, civil, and administrative aspects, provided that errors or negligence such as violations of professional standards, service protocols, standard operating procedures (SOPs), or prevailing laws are proven. In emergency situations, life-saving interventions that align with medical indications and professional standards do not incur legal liability, provided that any resulting harm constitutes an acceptable medical risk. Furthermore, the factors influencing a pediatrician's legal liability include the adequacy of legal frameworks and facilities; the need for improved understanding among law enforcement officials in distinguishing between inherent medical risks and medical negligence; and societal and cultural factors stemming from a limited understanding of the risks associated with medical procedures, excessively high expectations for recovery, and the common, yet often inaccurate, assumption that any complication is necessarily the result of a physician's error.

Keywords: Legal Liability, Pediatrician, Medical Procedure, Administration of Anticonvulsant Infusion, Harm to a Patient

INTRODUCTION

Health is a constitutionally guaranteed basic right of every citizen and is one of the main indicators in realizing social welfare. The right to health is not only understood as being free from disease, but also includes ensuring access to adequate, safe, high-quality, and affordable health services for all levels of society. In the Indonesian constitutional system,

guarantees for the right to health are affirmed in Article 28H paragraph (1) of the 1945 Constitution of the Republic of Indonesia, which states that everyone has the right to live in physical and spiritual prosperity, to have a place to live, and to receive health services (Hanafiah & Amir, 2021).

The state is obligated to develop a healthcare system that emphasizes not only curative aspects but also promotive, preventive, and rehabilitative aspects in an integrated manner. These efforts aim to improve public health while creating services that are socially just, as mandated by Law Number 17 of 2023 concerning Health (Nasution, 2020). Healthcare is a form of fulfillment of human rights guaranteed by the constitution, particularly the right to adequate and safe healthcare for every citizen. In the context of medical services, doctors, as professional healthcare workers, play a central role in performing medical procedures based on professional standards and applicable standard operating procedures. Pediatricians, as specialist medical personnel, have even more complex responsibilities because they treat child patients who are biologically, psychologically, and legally vulnerable. Therefore, every medical procedure, including the administration of anticonvulsant medication infusions, must be carried out with utmost care and based on the principles of patient safety and medical professional ethics. However, medical risk *is* a consequence that cannot always be avoided in medical practice, even if the procedure is carried out according to correct procedures and medical indications (Guwandi, 2021).

The relationship between medical personnel, particularly doctors, plays a strategic role as the spearhead of healthcare services, interacting directly with patients. The doctor-patient relationship is not merely medical, but also encompasses complex legal and ethical dimensions. Therefore, every medical procedure performed by a doctor must be based on professional standards, standard operating procedures, and the principle of prudence to ensure patient safety. Pediatricians, as specialist medical professionals, have a greater responsibility because they treat child patients who are legally incompetent and are highly dependent on the decisions of their parents and medical personnel. Pediatric patients are vulnerable physically, psychologically, and legally, so any medical intervention must weigh the benefits and risks proportionally. In pediatric practice, emergency situations often require rapid and appropriate intervention, one of which is the administration of anticonvulsant medication infusions. This medical procedure aims to stop seizures, prevent brain damage, and save the patient's life. However, in emergency situations, doctors often have to make decisions quickly and with limited clinical information (Komalawati, 2022).

Administering anticonvulsant medication infusions to pediatric patients is an emergency medical procedure aimed at saving lives and preventing further neurological damage (Price et al., 2024). This procedure is medically justified and commonly performed in pediatric practice, particularly in acute seizures or status epilepticus. However, in practice, this medical procedure does not always result in the desired outcome due to the possibility of side effects, complications, or unpredictable individual patient reactions. These conditions often result in physical and psychological harm to patients, which then leads to lawsuits against doctors. This situation places pediatricians in a dilemma between their professional obligation to save the patient and the potential legal risks resulting from suboptimal medical outcomes. (Soewono, 2020).

Administering anticonvulsant drugs intravenously to pediatric patients is a medical procedure that requires precise drug selection, dosage, speed of administration, and monitoring of the patient's condition. Research on the use of intravenous levetiracetam, phenytoin, and lacosamide indicates that anticonvulsant therapy has both clinical benefits and the risk of side effects that must be anticipated through the implementation of medical care standards and patient safety (Besli et al., 2020). The harm a patient experiences after administering an anticonvulsant infusion does not necessarily prove medical negligence. Legal assessments

must be based on the actions' compliance with professional standards, operational procedures, the obligation to provide information to the patient's parents or guardians, and the causal relationship between the medical action and the harm. If proven to have been an error or negligence that meets the legal requirements, the doctor can be held accountable under applicable regulations (Angurana & Suthar, 2021).

Normatively, Indonesian health law stipulates that doctors have the right to legal protection as long as they perform medical procedures in accordance with professional standards and standard operating procedures. This legal protection is intended to provide doctors with a sense of security in carrying out their professional duties without fear of criminalization. The Medical Practice Law and the Health Law emphasize that medical risk cannot be equated with negligence or professional error. In this context, the law should be able to clearly distinguish between *medical malpractice* and *medical risk,* which are part of the uncertainty of medical science (Guwandi, 2023).

The lack of a comprehensive understanding of the concepts of *medical malpractice, medical negligence,* and *medical risk* is often a major factor in the criminalization of medical procedures. The administration of anticonvulsant medication infusions, which are medically considered life-saving, is often misinterpreted as professional error when they cause adverse effects on patients (Singh et al., 2024). This is exacerbated by the suboptimal legal protection mechanisms for physicians, whether through hospitals, professional organizations, or internal regulations of healthcare facilities. In the context of Dr. Mohammad Hoesin General Hospital in Palembang, as a government-owned hospital, the issue of legal protection for pediatricians becomes increasingly relevant because it concerns institutional responsibility and public trust in government healthcare services (Indonesian Medical Council, 2021).

From a legal perspective, the primary issue lies in proving the element of error in medical procedures. Medicine is not an exact science, so not all adverse outcomes can be categorized as negligence (Besli et al., 2020). In the context of administering anticonvulsant infusions, a comprehensive analysis is needed to determine whether the patient's harm was caused by a violation of medical standards or an unavoidable medical risk. Without adequate understanding, the legal enforcement process has the potential to lead to injustice for doctors. Therefore, legal protection must be implemented proportionally and based on scientific evidence (Rahardj, 2021). Furthermore, hospitals, as healthcare institutions, also have legal responsibility for the medical actions performed by their medical personnel. Dr. Mohammad Hoesin General Hospital, Palembang, as a public service institution, should provide an internal legal protection system for pediatricians, including legal assistance and a mechanism for resolving medical disputes. However, in practice, this protection has not been optimally implemented. Doctors often face legal challenges individually without adequate institutional support. This further weakens doctors' position in facing legal challenges (Hadjon, 2020).

This situation has the potential to negatively impact the quality of healthcare services. Fear of lawsuits can drive doctors to adopt a defensive approach (*defensive medicine)*, avoiding high-risk medical procedures even when medically necessary (Angurana et al., 2021). In the world of pediatrics, this defensive attitude can have fatal consequences because delaying or avoiding emergency medical intervention can endanger patient safety. In pediatric healthcare practices at Dr. Mohammad Hoesin General Hospital in Palembang, a legal issue arose regarding the administration of an anticonvulsant infusion to a pediatric patient experiencing recurrent seizures in an emergency situation. Based on the results of a clinical examination, the pediatrician on duty assessed that the patient's condition required immediate intervention in the form of intravenous anticonvulsant medication to prevent further neurological damage. After the intervention, the patient's condition developed complications, leading the family to believe that the intervention had caused harm. Therefore, the patient's family filed a complaint

with the hospital and questioned the legal responsibility of the doctor treating the patient (Hanafiah, 2020).

Legal problems then developed because before the action was taken there was no Written informed consent was obtained. According to the doctor, the procedure was performed in an emergency situation, so saving the patient's life was the top priority. In such circumstances, it is necessary to examine whether the failure to implement written informed consent constitutes a violation of the law or is an exception as stipulated in laws and regulations, professional standards, and the Standard Operating Procedures (SOPs) of Dr. Mohammad Hoesin Hospital, Palembang, regarding emergency services. Therefore, this study will also examine whether the SOPs in effect at Dr. Mohammad Hoesin Hospital, Palembang, require written informed consent in emergency situations or provide exceptions according to health law. Medical records show that the administration of anticonvulsant medication infusions was carried out based on medical indications, dosages, and applicable clinical procedures. However, the patient's family continues to file a lawsuit against the consequences. This demonstrates a difference in perception between medical risk as a consequence of patient-saving measures and medical negligence, which can lead to legal liability.

This case reflects the tension between patient rights protection and legal protection for pediatricians. On the one hand, patients and their families have the right to legal certainty for any losses they experience. On the other hand, pediatricians also have the right to legal protection if medical procedures have been carried out in accordance with medical indications, professional standards, service standards, and standard operating procedures. Therefore, a legal review is needed regarding the limits of pediatricians' legal liability for the medical action of administering anticonvulsant medication infusions in emergency situations, including the application of informed consent based on statutory provisions and the standard operating procedures of Dr. Mohammad Hoesin Hospital, Palembang.

Under *das sollen,* or ideal norms, in the context of Indonesian health law, pediatricians who administer anticonvulsant medication infusions should receive full and proportionate legal protection, as long as the procedure is based on medical indications, professional standards, and standard operating procedures. Law Number 17 of 2023 concerning Health explicitly states that medical personnel have the right to legal protection in carrying out their professional practice. This protection is intended to enable doctors to carry out their professional obligations without fear of criminalization, particularly in medical emergencies that require swift and appropriate action, such as in cases of acute seizures in pediatric patients. Furthermore, Law Number 29 of 2004 concerning Medical Practice emphasizes that a physician's legal liability must be based on the presence of an element of error, either negligence or intent (Farkas et al., 2023). Therefore, patient losses arising from medical risks *should* not automatically be attributed to the physician's fault. Ideally, any alleged medical error should first be resolved through ethical and professional disciplinary mechanisms, involving professional organizations and pediatric experts, before being brought to the criminal or civil courts (Machmud, 2021).

Das Sollen phenomenon in health law shows that pediatricians who perform medical procedures such as administering anticonvulsant drugs based on medical indications, professional standards, service standards, and standard operating procedures should receive legal certainty and protection. Law Number 17 of 2023 concerning Health and Law Number 29 of 2004 concerning Medical Practice emphasize that medical personnel have the right to receive legal protection as long as they carry out medical practice in accordance with their competence, professional standards, service standards, and medical codes of ethics (Kartek et al., 2024). Therefore, pediatricians should only be held legally responsible if there is evidence of an error in the form of intent or negligence in carrying out medical procedures, not solely because of losses arising as a result of medical *risks.*

Furthermore, in healthcare services at Dr. Mohammad Hoesin General Hospital in Palembang, the hospital is also obliged to provide institutional legal protection to pediatricians through the implementation of clear standard operating procedures, legal assistance in the event of medical disputes, and an effective risk management system, especially in the treatment of pediatric patients in emergency conditions. In addition, there needs to be certainty regarding the implementation of *informed consent* in emergency medical procedures in accordance with the provisions of laws and regulations and hospital operational standards. Thus, a balance between the protection of patient rights and the legal responsibility of pediatricians can be realized proportionally so that healthcare services take place professionally, fairly, and provide legal certainty for all parties involved.

In *the* empirical reality that occurs in the field, legal protection for pediatricians in the practice of administering anticonvulsant drug infusions has not fully implemented in accordance with ideal norms. In several health care cases, including those that occurred at Dr. Mohammad Hoesin General Hospital, Palembang, pediatricians who treated patients with acute seizures actually faced complaints, social pressure, and threats of lawsuits when patients suffered losses, even though medical actions had been carried out according to medical standards and in emergency conditions. This reality shows that the final results of medical actions are often used as the sole benchmark for assessment, without considering the medical decision-making process and the inherent risks in medical actions.

Facts on the ground also show that hospitals' internal legal protection mechanisms are suboptimal. Pediatricians often face legal challenges personally without adequate legal representation from the hospital. Furthermore, public and law enforcement officials' understanding of the difference between medical negligence and medical risk remains relatively limited. Consequently, administering an anticonvulsant infusion, a medically life-saving measure, can be interpreted as professional misconduct when it results in complications or harm to the patient. In practice, it is not uncommon for medical cases to be reported directly to law enforcement without first going through ethical and professional disciplinary mechanisms. This situation has the potential to lead to the criminalization of pediatricians, as well as encourage the emergence of defensive medicine practices that can actually harm patients. The weak enforcement of the ultimum remedium principle in criminal health law shows that legal protection for doctors is still normative and has not been fully implemented effectively. As a result, there is a clear gap between *das sollen* and *das sein* in the practice of legal protection for pediatricians at Dr. Mohammad Hoesin Palembang General Hospital, thus requiring an in-depth legal study and solutions.

In *das sein* or empirical reality, legal liability for pediatricians for medical actions such as administering anticonvulsant infusions that cause harm to patients continues to raise various issues in healthcare practice. At Dr. Mohammad Hoesin Central General Hospital in Palembang, pediatricians treating patients in emergency situations face potential complaints, lawsuits, and even criminal reports when the results of medical procedures do not meet the patient's family's expectations. This is despite the fact that these medical procedures are carried out based on medical indications, professional standards, service standards, and standard operating procedures to save the patient's life. This situation indicates that the harm experienced by patients is often directly attributed to the doctor's error, without first assessing whether or not there was an element of negligence in the medical procedures provided (Indonesian Medical Association, 2022).

The reality on the ground also shows that the process of determining the legal responsibility of pediatricians is not entirely based on proof of professional negligence. In some cases, differences in perception arise between the patient's family and medical personnel regarding whether the harm experienced by the patient was the result of the doctor's negligence or an unavoidable medical risk. This problem becomes more complex when medical

procedures are carried out in emergency conditions without prior written informed consent. Therefore, it is necessary to examine whether these actions are in accordance with the provisions of laws and regulations, professional standards, and the Standard Operating Procedures (SOP) of Dr. Mohammad Hoesin Palembang Central General Hospital regarding emergency services. Furthermore, medical dispute resolution in practice still tends to be directed directly to the criminal or civil realm without prior examination through ethical mechanisms and professional discipline as stipulated in health law. This situation can create legal uncertainty for pediatricians and hinder the implementation of optimal medical services. Therefore, a comprehensive legal study is needed regarding the legal liability of pediatricians for the medical action of administering anticonvulsant medication infusions that caused harm to patients at Dr. Mohammad Hoesin Central General Hospital, Palembang, so that legal certainty, justice, and balanced legal protection can be achieved for both doctors and patients (Komalawati, 2021).

The issue of legal liability of pediatricians is also inseparable from the application of informed consent in the medical procedure of administering anticonvulsant medication infusions. In practice, pediatric patients experiencing severe seizures are generally in an emergency situation, requiring doctors to immediately provide life-saving measures without delaying medical services (Giannaccini et al., 2024). In such circumstances, written informed consent is often not possible because patient safety is the top priority. Therefore, it is necessary to examine whether the actions of pediatricians without written informed consent in an emergency are in accordance with the provisions of laws and regulations, professional standards, and the Standard Operating Procedures (SOP) of Dr. Mohammad Hoesin Central General Hospital, Palembang, so that they do not automatically become the basis for imposing legal liability (Sharawat et al., 2024). In addition, determining the legal liability of pediatricians It also relates to the role of professional organizations in assessing the conformity of medical procedures to professional standards and medical codes of ethics. This assessment is a crucial aspect in determining whether the harm experienced by a patient is the result of medical negligence or a medical risk unavoidable. However, in the practice of resolving medical disputes, the results of professional organization assessments are not always a primary consideration by law enforcement officials. As a result, the process of determining legal liability for pediatricians has the potential to ignore aspects of medical science. Therefore, synchronization between professional ethics mechanisms, medical discipline, and law enforcement processes is necessary to create legal certainty, justice, and balanced legal protection for both doctors and patients (Isfandyarie & Fahrizal, 2020).

From a sociological perspective, the increase in lawsuits against doctors reflects a shift in the doctor-patient relationship. Relationships previously based on trust now tend to be transactional and legalistic. In this situation, pediatricians become vulnerable, confronted with high expectations from patients' parents. When these expectations are not met, legal conflicts become difficult to avoid. Therefore, a legal approach is needed that is not only normative, but also sociological and humanistic. (Susila, 2026).

The issue of legal protection for pediatricians at Dr. Mohammad Hoesin General Hospital, Palembang, also reflects systemic challenges in national health law. Existing regulations have not fully balanced the interests of patients and medical personnel. On the one hand, patients have the right to protection for the harm they experience. On the other hand, physicians also have the right to legal protection for medical procedures performed professionally. This balance is the essence of justice in health law (Singh et al., 2024). Therefore, a study of the legal liability of pediatricians for medical procedures involving the administration of anticonvulsant medication infusions that cause harm to patients is crucial and relevant.

Relevant previous research conducted by Mahdi et al. (2021) concluded that healthcare workers receive legal protection if medical procedures are carried out in accordance with professional standards, service standards, and standard operating procedures. Conversely, violations of these standards can result in criminal, civil, administrative, and ethical liability. The similarities are that both discuss legal protection and the accountability of healthcare workers in medical procedures. The difference is that the previous study examined healthcare workers in general, while this study focuses on the legal accountability of pediatricians in administering anticonvulsant medication infusions.

Research conducted by Bayumi et al. (2024) discusses malpractice in medical practice from the perspective of criminal law and legal protection of the medical profession. The similarities between the aforementioned studies and this study lie in their study of alleged malpractice and the legal liability of doctors. The difference is that Muhammad Bayumi's study focused on criminal law and the protection of the medical profession in general, while this study specifically examines the legal liability of pediatricians for the medical act of administering anticonvulsant medication infusions that caused harm to patients at Dr. Mohammad Hoesin General Hospital, Palembang, including civil, criminal, and administrative aspects in accordance with the facts and applicable legal provisions.

Research by Gunawan et al. (2021) concluded that doctors are entitled to legal protection if medical procedures are performed in accordance with competence, professional standards, and statutory provisions. The similarity is that both studies examine the legal protection of doctors in medical procedures. The difference is that the previous study focused on circumcision, while this study examines the legal liability of pediatricians for administering anticonvulsant medication infusions.

Furthermore, research by Nugraha et al. (2023) concluded that doctors can be held criminally responsible if they are proven to have acted intentionally (*dolus)* or negligently (*culpa)* resulting in harm or death to patients, and hospitals can be held responsible based on institutional responsibility. The similarities are that both examine the legal liability of doctors for medical actions. The difference is that the previous study discussed the criminal liability of doctors in general, while this study focuses on the legal liability of pediatricians in administering anticonvulsant medication infusions. The study by Salma Saraya Ginanjar and Husni Syam states that negligent doctors can be held liable under both civil and criminal law, while hospitals are responsible based on the principle of *vicarious liability* as stipulated in Law Number 17 of 2023 concerning Health (Ginanjar & Syam, 2025). The similarity is that both discuss the legal responsibility of medical personnel based on Law Number 17 of 2023. The difference is that the previous study examined postpartum health services, while this study examines the administration of anti-seizure drug infusions by pediatricians.

Triana et al. (2023) research concluded that hospitals are responsible for doctors' actions based on the principle of *employer liability* and statutory provisions. The similarities are that both discuss legal responsibility in healthcare. The difference is that the previous study focused on hospital responsibility, while this study focuses on the legal responsibility of pediatricians. Desyari et al. (2023) study states that a medical action can only be categorized as malpractice if it is proven to violate professional standards, service standards, or standard operating procedures, resulting in harm to the patient. The similarities are that both discuss legal liability resulting from medical procedures. The difference is that the previous study examined post-CPR, while this study focuses on administering anticonvulsant medication infusions to pediatric patients.

Based on previous research, it can be concluded that the study of physicians' legal liability has developed, particularly since the enactment of Law Number 17 of 2023 concerning Health. However, there has been no research specifically addressing the legal liability of pediatricians for administering anticonvulsant infusions that result in harm to patients. This

gap is the basis for this study. The novelty of this research lies in its focus, which specifically analyzes the legal liability of pediatricians for administering anticonvulsant infusions that result in harm to patients. Previous research generally only discusses general physician liability, medical malpractice, and hospital liability without examining the characteristics of pediatric healthcare services and the administration of intravenous anticonvulsant medication. Furthermore, this study uses Law Number 17 of 2023 concerning Health as the basis for analysis, integrating aspects of civil, criminal, administrative, and professional discipline within a single framework. This approach provides a more comprehensive analysis of the relationship between physicians' obligations, professional standards, standard operating procedures, patient safety, and legal protection for pediatric patients who experience harm due to medical procedures.

This study aims to analyze the legal liability of pediatricians when medical actions result in harm to patients, and to assess the suitability of these actions to the provisions of laws and regulations, professional standards, service standards, and standard operating procedures applicable at Dr. Mohammad Hoesin General Hospital, Palembang. Furthermore, this study also analyzes the application of informed consent in emergency situations and the boundaries between medical risk and medical risk. and medical negligence as a basis for determining legal accountability. Therefore, this research is expected to provide academic contributions to the development of health law and provide input for hospitals, medical personnel, and policymakers in realizing legal certainty, justice, and balanced legal protection for both doctors and patients. Based on the background above, the author tried to conduct research with the title "Legal Responsibility of Doctors" Child Undergoes Medical Action of Infusion of Anticonvulsant Drugs that Causes Loss for Patient at P DR. Mohammad Hoesin Hospital, Palembang"

The problem formulation is: What is the legal responsibility of doctors? Children due to medical action of administering an infusion of anti-seizure medication which causes loss for patient at Dr. Mohammad Hoesin General Hospital, Palembang? And what are the factors that influence the legal responsibility of pediatricians for the medical action of administering anticonvulsant medication infusions that cause harm to patients at Dr. Mohammad Hoesin General Hospital, Palembang?

METHODS

The research used in this thesis is empirical legal research or field research, still based on doctrinal principles, conducted by examining all laws and regulations related to the problem in this study. The data used in this study is primary data. This research uses empirical research, with case approach statutory regulations (*statute approach).* In writing this thesis, the data obtained were then collected both primary and secondary, and analyzed in depth. Furthermore, it was submitted descriptively, namely by explaining, describing and describing the problems with their solutions related to the writing of Qualitative data analysis is an effort carried out by working with data, organizing data, sorting it into manageable units, synthesizing it, searching for and finding patterns, finding what is important and what is learned and deciding what can be told to others (Moleong, 2023).

RESULTS AND DISCUSSION

Legal Liability of Pediatricians for Medical Actions in the Form of Anticonvulsant Drug Infusions Causing Harm to Patients at Dr. Mohammad Hoesin General Hospital, Palembang

Legal liability for pediatricians administering anticonvulsant medication infusions that cause harm to patients is a legal issue that requires a comprehensive analysis, taking into account aspects of criminal law, civil law, administrative law, and health law. In healthcare

practice, every medical procedure carries risks that cannot always be avoided, especially in emergency situations. Therefore, not every harm experienced by a patient automatically constitutes legal liability for a physician.

The measure of legal responsibility is not based solely on the existence of patient losses, but must first be proven to be a deviation from medical service standards. As medical professionals with specialized competencies in pediatric health, pediatricians are obligated to provide healthcare services in accordance with professional standards, medical service standards, and hospital standard operating procedures. These obligations aim to protect patient safety while also providing legal certainty for physicians in their medical practice. Therefore, the assessment of a physician's legal liability cannot be based solely on the outcome of the patient's injury, but must also be based on evidence of a deviation from medical service standards.

Administering an intravenous infusion of anticonvulsant medication is a medical procedure performed to stop persistent seizures that can potentially cause permanent neurological damage or even death if not treated promptly. Therefore, the decision to administer intravenous anticonvulsant medication is a medical procedure based on medical indications and the patient's life-saving needs.

1. Criminal Liability of Pediatricians

Criminal liability for pediatricians administering anticonvulsant medication infusions that cause harm to patients must, in principle, be based on proof of an element of error (*schuld*), either intentional (*dolus*) or negligence (*culpa*). Indonesian criminal law adheres to the principle of *geen straf zonder schuld,* meaning a person cannot be punished unless proven guilty. This principle is the fundamental basis for determining whether or not a doctor is criminally liable for the medical actions they perform.

The criminal liability of pediatricians in administering anticonvulsant medication infusions cannot be based solely on the harm caused to the patient, but must also be proven to have violated professional standards, to have a clear causal relationship, and to have fulfilled the elements of error as required by the theory of legal responsibility. Therefore, criminal law must remain the ultimum remedium, while professional ethics mechanisms, medical personnel discipline, and medical audits are the primary instruments in assessing the existence or absence of suspected errors by health workers.

2. Civil Liability of Pediatricians

The legal relationship between a doctor and a patient is a therapeutic relationship, born from the patient's trust in the doctor to provide health care. This relationship is not an agreement guaranteeing the patient's recovery (resultaatverbintenis), but rather an obligation to make the best efforts (inspanningverbintenis). Therefore, the doctor's obligation is to provide professional medical services in accordance with professional standards, medical service standards, and applicable standard operating procedures, not to guarantee that the patient will recover from their illness.

This demonstrates that the relationship between doctor and patient is a professional one based on trust and medical scientific standards. Therefore, the measure of successful healthcare services is not solely the final outcome of a patient's recovery, but rather how the doctor has carried out all medical procedures in accordance with professional standards, clinical practice guidelines, and advances in medical science. According to the source, every doctor has an obligation to make maximum efforts in treating patients, but cannot guarantee that all patients will achieve the same results because each patient's biological condition is different, and medical audits play a very important role in determining whether or not there is suspected negligence on the part of medical personnel.

3. Administrative Responsibilities of Pediatricians

The administrative responsibilities of pediatricians relate to compliance with the administrative provisions of medical practice, particularly in the implementation of medical procedures in accordance with professional standards, medical service standards, standard operating procedures (SOPs), and provisions regarding the granting of informed consent. In principle, every medical procedure that carries risks must be preceded by the provision of complete information to the patient or their family as a basis for granting consent. This consent is a form of respect for the patient's right to obtain information and determine the medical treatment they will receive. However, the provision regarding *informed consent* is not absolute. Health laws and regulations provide an exception to the requirement to obtain prior consent if the patient is in an emergency situation *requiring* immediate action to save a life or prevent further disability. In such circumstances, doctors are authorized to immediately perform medical procedures based on clinical indications without having to wait for written consent from the patient or their family.

The administrative responsibility of pediatricians in administering anticonvulsant medication infusions must be assessed based on the patient's clinical condition at the time of the procedure. In an emergency, failing to obtain informed consent before a medical procedure does not constitute an administrative violation if the procedure is performed to save the patient's life, is based on clear medical indications, and complies with applicable professional standards and standard operating procedures. Conversely, administrative responsibility may arise if the physician inappropriately uses the emergency rationale or acts outside professional standards, thereby ignoring the patient's rights, which should still receive legal protection. Therefore, the research findings indicate that exceptions to informed consent in emergency situations represent a form of legal protection provided by statutory regulations to physicians so they can act quickly for patient safety, without eliminating the obligation to continue providing an explanation to the patient or their family after the emergency has been resolved.

Factors Influencing the Legal Liability of Pediatricians for Medical Actions in the Form of Infusion of Anticonvulsant Drugs Causing Harm to Patients at Dr. Mohammad Hoesin General Hospital, Palembang

1. Legal Factors (Legal Substance)

Legal factors relate to the existence of laws and regulations that serve as the basis for doctors in performing medical procedures. These regulations include Law Number 17 of 2023 concerning Health, regulations regarding medical practice, professional standards, medical service standards, hospital standard operating procedures, and clinical practice guidelines for managing seizures in children. Clarity in legal norms provides certainty for doctors in determining appropriate actions, particularly in emergency situations.

2. Law Enforcement Factors (Legal Structure)

Law enforcement factors relate to the parties authorized to assess whether a doctor has committed a crime, such as medical disciplinary boards, hospital ethics committees, law enforcement officials, and judges in court proceedings. Assessments of suspected malpractice cannot be based solely on the consequences experienced by the patient but must be supported by evidence based on professional standards and expert opinion. This demonstrates that the quality of law enforcement significantly determines objectivity in determining accountability doctor's legal answer.

According to the theory of legal effectiveness put forward by Soerjono Soekanto, the law enforcement factor is one of the factors that determines the success or failure of the implementation of a legal provision.

3. Facilities Factors

Facilities include the availability of healthcare facilities, medicines, medical equipment, service rooms, emergency systems, and human resources to support medical procedures. Adequate facilities will help doctors provide standardized care, thereby reducing the risk of medical errors.

When administering anticonvulsant infusions to pediatric patients experiencing prolonged seizures, the facility plays a crucial role, as this procedure is considered an emergency service that requires speed, accuracy, and coordination. Doctors cannot perform optimally if the hospital does not provide anticonvulsant medications according to therapeutic standards, patient monitoring equipment, intravenous access, a resuscitation room, supporting laboratory facilities, and healthcare professionals competent in treating pediatric patients with acute neurological conditions. Therefore, the quality of healthcare facilities is a key factor influencing the success of medical procedures and determining whether or not legal liability exists in the event of harm to the patient.

4. Community Factors

Societal factors relate to the patient's and family's level of understanding regarding medical procedures, the risks of therapy, and the limits of physician liability. A lack of public understanding often leads to the assumption that every complication constitutes malpractice. This level of public understanding influences the emergence of legal liability claims against physicians.

According to the theory of legal effectiveness put forward by Soerjono Soekanto, societal factors are one of the elements that significantly influence the success of law enforcement. Societal factors relate to the level of knowledge, legal awareness, attitudes, and understanding of applicable legal norms. The law cannot be effectively implemented if the public, as legal subjects, does not understand its rights and obligations. In the context of healthcare, the level of understanding of patients and their families regarding medical procedures, treatment risks, physician authority, and legal accountability mechanisms are crucial factors in determining whether or not medical disputes arise. The higher the level of public understanding of healthcare, the lower the likelihood of misunderstandings that could lead to lawsuits against medical personnel.

5. Cultural Factors

Cultural factors relate to a society's values, beliefs, and customs regarding healthcare services. In Indonesian society, families play a very dominant role in making medical decisions, resulting in frequent differences of opinion between doctors and patients' families, particularly in emergency situations.

The culture of family consultation still significantly influences the healthcare process for pediatric patients. According to sources, many families request time to discuss with other family members before agreeing to medical procedures, even when the patient's condition requires immediate treatment. This often presents a challenge for doctors, as any delayed decision can impact patient safety. The societal culture that still views doctors as the sole provider of cures for all illnesses also influences lawsuits when treatment outcomes don't meet expectations. According to him, some families still find it difficult to accept that medical procedures involve various risks that cannot always be prevented, even if doctors provide services according to professional standards.

CONCLUSIONS AND RECOMMENDATIONS

First, the legal liability of a pediatrician at RSUP Dr. Mohammad Hoesin Palembang regarding the administration of intravenous anti-seizure medication resulting in patient harm

encompasses criminal, civil, and administrative liability; such liability applies only if fault or negligence is proven specifically, actions deviating from professional standards, service standards, standard operating procedures, and statutory regulations. In emergency situations, the administration of intravenous anti-seizure medication as a life-saving measure performed in accordance with medical indications and professional standards cannot serve as grounds for imposing criminal, civil, or administrative liability on the physician, even if harm occurs as an inherent medical risk.

Second, the factors influencing the legal liability of pediatricians at RSUP Dr. Mohammad Hoesin Palembang regarding this procedure include legal factors, such as the adequacy of regulations, professional standards, service standards, and Standard Operating Procedures (SOPs) are already in place for medical interventions, particularly in emergency situations law enforcement factors: generally adequate, though there is still a need to strengthen and improve the understanding of officials regarding the distinction between medical risk and medical negligence; facilities and resources: adequate, with the availability of anti-seizure medication, emergency facilities, medical equipment, and healthcare personnel to support services meeting established standards; public factors: inadequate, due to limited understanding among patients and their families regarding emergency conditions, the risks associated with medical interventions, and the limits of a doctor's liability; and cultural factors: inadequate, due to the culture of family deliberation, high expectations for recovery, and the perception that any complication arising from emergency medical intervention is the result of a doctor's error.

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