

Informed Consent Analysis in Medical Emergency Situations in an Ethical and Practical Review

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Abstract — *Informed consent is a fundamental principle in medical practice that guarantees the patient's right to autonomy over every medical procedure he or she receives. However, in medical emergencies such as loss of consciousness, the risk of urgent death, or the absence of family, the implementation of informed consent is often not feasible according to the ideal procedure. This creates an ethical and practical dilemma for medical personnel between the obligation to save lives and the need to respect the rights of patients. This study aims to analyze how the principle of informed consent is applied in emergency situations, review the ethical justification for taking medical measures without consent, and examine the legal protection of medical personnel in the practice. The research method used is a normative and descriptive qualitative juridical approach through literature studies of legal documents, medical codes of ethics, and bioethical literature. The results of the study show that in an emergency, medical actions without informed consent can be ethically justified through the principles of beneficence and non-maleficence, and are strengthened by legal provisions that provide exceptions in certain conditions. These findings demonstrate the importance of clarity of procedures and documentation in emergency practice to maintain a balance between professional ethics and legal protection. The practical implications of this study are the need for the preparation of adaptive standard operating procedures (SOPs), as well as training of medical personnel in ethical decision-making in critical situations.*

Keywords: *Informed Consent, Medical Ethics, Actions Without Consent*

I. INTRODUCTION

A. The Important of Informed Consent

Informed consent is an important foundation in the relationship between medical personnel and patients, which serves to protect patients' right to freedom of choice and to be clearly informed about medical actions to be performed. In Law Number 17 of 2023 concerning Health, the concept of informed consent is affirmed as a form of respect for human dignity and dignity in the context of health services. Article 52 paragraph (1) explicitly states that any medical procedure given to a patient must obtain consent given voluntarily, after the patient has received a complete explanation and can understand it. This shows that the state through this law places patient autonomy as a priority in professional and ethical medical services¹.

The importance of informed consent is also closely related to the principle of responsibility and accountability of medical personnel. In situations where medical procedures are carried out without the patient's consent, there can be violations of the law and professional ethics that have an impact on administrative and criminal sanctions. Therefore, Law No. 17 of 2023 places informed consent as a condition for the legality of a legally valid medical procedure. Article 52 paragraph (2) explains that in a medical emergency, medical actions can be carried out without consent, but must still be based on the principle of patient safety. It reflects a balance between the protection of patients' rights and urgent medical needs that cannot be delayed². The existence of a provision regarding informed consent in the latest Health Law strengthens the legal position of patients as active subjects in medical decision-making. The correct implementation of informed consent not only improves the quality of health services, but also builds trust between patients and health workers. Thus, this law not only aims to protect patients' rights, but also provides legal protection for medical personnel so that the actions taken have a legal basis and can be accounted for ethically and professionally.

B. The role of informed consent in the protection of patients' rights

Informed consent is an essential component of efforts to protect patients' rights in the health care system. Law Number 17 of 2023 concerning Health expressly places informed consent as a form of protection for patient autonomy. In Article 52 paragraph (1), it is stated that any medical procedure can only be carried out after the patient has received a complete explanation and given voluntary consent. This shows that the patient has the right to know, understand, and agree to the medical procedure to be undertaken, including the benefits, risks, and other alternative measures. Furthermore, the role of informed consent also functions as a legal instrument that protects patients from medical actions that are invasive, coercive, or carried out without clarity. This law strengthens the right of patients not to be the object of unilateral decisions by medical personnel. Patients have the right to refuse medical treatment if they feel unsure or do not understand the consequences, as long as the refusal does not directly endanger their safety. Therefore, informed consent is a bridge between the patient's right to make decisions and the obligation of medical personnel to provide honest, accurate,

¹ Law Number 17 of 2023 concerning Health, especially Article 52 paragraphs (1) and (2).

² Ministry of Health of the Republic of Indonesia. (2023). Health Law No. 17 of 2023.



and easy-to-understand information³. The implementation of informed consent in accordance with the provisions of Law No. 17 of 2023 also has an impact on the creation of ethical professional relationships between medical personnel and patients. With valid consent, medical actions are not only ethically legal, but also have legal force that can be accounted for. This is important in ensuring legal protection for both parties and increasing public trust in health institutions. Thus, informed consent not only protects the rights of individual patients, but also contributes to improving the quality of national health services based on human rights principles⁴.

C. Problem Formulation

1. How is the application of informed consent in medical emergency situations reviewed from an ethical and practical perspective?
2. Is medical action without explicit consent in an emergency legally and ethically justified?

D. Research Objectives

The purpose of the research entitled "*An Analysis of Informed Consent in Medical Emergency Situations in an Ethical and Practical Review*" is to examine how the principles of medical ethics, in particular patient autonomy, can be applied in medical emergencies where informed consent is often not ideally obtainable. This study aims to analyze the suitability of medical measures without the patient's explicit consent with ethical norms and applicable legal provisions, as well as to evaluate practices in the field in ensuring the protection of patients' rights while fulfilling the professional responsibilities of medical personnel in making quick decisions regarding life safety.

E. The Theoretical and Practical Benefits of Research

The benefit of the research entitled "*Analysis of Informed Consent in Medical Emergency Situations in an Ethical and Practical Review*" is that it makes an academic and practical contribution in enriching the understanding of the limitations and application of informed consent in emergency conditions. Theoretically, this research is expected to be a scientific reference in the development of bioethics and health law studies, especially those related to patient rights and the obligations of medical personnel. Practically, the results of this study can serve as a guideline for medical personnel in making ethical decisions when dealing with emergency situations, as well as provide a basis for policymakers to formulate regulations that balance the protection of patients' rights and the need for immediate medical action for the sake of life safety.

II. LITERATURE REVIEW

A. The Concept of Informed Consent

Health is a fundamental human right for every individual, regulated in various regulations both at the national and international levels. In the era of globalization and digitalization, health services have undergone significant

transformation, including through e-health or telemedicine platforms.⁵ The concept of Informed Consent is one of the main foundations in medical and health service practices that are oriented towards respect for patients' human rights. Informed consent can be defined as a form of patient consent to certain medical procedures after obtaining an adequate, clear, and understandable explanation of the diagnosis, procedures, risks, benefits, and other alternative measures. The basic principle of informed consent is respect for the patient's autonomy, which is the right of the individual to make decisions about his or her own body and health, without pressure or coercion from others. In addition, the principles of non-maleficence (do no harm) and beneficence (doing good) are also important foundations in the implementation of informed consent⁶. Informed consent consists of three main elements, namely information, competence, and voluntariness. The information element includes a clear presentation of the patient's diagnosis, the medical procedures to be performed, the benefits and risks that may occur, and the choice of alternative course of action. This information must be delivered by a competent healthcare professional and provided in a language that is understood by the patient. The competency element refers to the patient's ability to understand the information conveyed and make rational decisions. The patient must be in a stable mental and emotional state, as well as of legal age to make medical decisions. Meanwhile, the voluntary element requires that consent be given without coercion, manipulation, or pressure from health workers or other parties.⁷

The source of information in the informed consent process comes from medical personnel involved in patient care, especially doctors who are responsible for the medical actions to be performed. Explanations must be made directly to the patient or his legal guardian, and adjusted to the level of education, culture, and psychological condition of the patient. This process usually ends with the signing of a medical procedure consent form which is part of the medical record documentation, and aims to protect the patient's rights and provide a legal basis for the medical procedure performed. Thus, informed consent is not only an administrative obligation, but also a reflection of ethical and dignified communication between health workers and patients.⁸

B. Medical Ethics in the Context of Emergencies

Medical ethics in emergency situations is a complex challenge because it requires medical personnel to make quick decisions to save patients' lives, often without the opportunity to obtain full informed consent. In this context, the principles of *beneficence* and *non-maleficence* are the main cornerstones in the practice of medicine. Medical personnel are required to intervene immediately to prevent greater risks, even if the patient is not in a condition to give explicit consent. Emergency situations provide an ethical justification for medical actions without informed consent, provided that the action is proportionate and is performed to save lives or

³ Law Number 17 of 2023 concerning Health, especially Article 52 paragraphs (1) and (2).

⁴ Ministry of Health of the Republic of Indonesia. (2023). Health Law No. 17 of 2023.

⁵ Gladdays Naurah, Marice Simarmata, Redyanto Sidi Jambak. (2024). Rights and Privacy of Hospital Patients in the Era of Digitalization. *Journal Conservation*, 3(12), 4798-4805.

⁶ Beauchamp, T.L., & Childress, J.F. (2013). *Principles of Biomedical Ethics* (7th ed.). Oxford University Press

⁷ Appelbaum, P.S., Lidz, C.W., & Meisel, A. (1987). *Informed Consent: Legal Theory and Clinical Practice*. Oxford University Press. WHO. (2016). *Guidelines on Ethical Issues in Public Health Surveillance*.

⁸ Ministry of Health of the Republic of Indonesia. (2008). *General Guidelines for Informed Consent*.

prevent serious disability.⁹ However, ethical dilemmas often arise when there is a mismatch between the patient's interests and the available medical measures. In this context, it is important for medical personnel to act on professional guidelines and the principles of justice, including considering aspects of fairness in the limited distribution of medical resources. In a mass emergency or disaster situation, doctors are not only responsible for a single patient, but also for the wider population.¹⁰ Therefore, medical ethics does not only focus on individual relationships, but also involves fair and responsive health system policies.

In an emergency, where the patient is unable to give consent directly due to unconscious circumstances or very limited time, the medical personnel still have a moral and professional obligation to act in the best interests of the patient. In this case, actions without informed consent are considered ethically valid if they meet the principle of *salus aegroti suprema lex*, namely patient safety is the highest law. However, he also emphasized the importance of recording medical procedures in writing and the involvement of the patient's family as soon as possible after the emergency measures are taken.¹¹ Ethics in emergency services must also pay attention to the proper communication aspect post-action. Once the patient's condition is stable, it is important to explain the medical measures that have been taken and the reasons for it, as a form of respect for the patient's autonomy. This reflects that although in an emergency the principle of autonomy can be temporarily set aside, it should not be ignored in its entirety. This emphasis is reinforced in that highlights the importance of transparency and accountability in emergency medicine practice to maintain patient and public trust.¹²

C. Related Laws and Regulations

In the context of health law in Indonesia, informed consent is an important part of protecting patients' rights and implementing ethical medical practices. Health Law Number 17 of 2023 emphasizes that any medical procedure can only be performed after the patient has given consent on the basis of a complete explanation of the diagnosis, procedures, risks, and alternative measures. However, in a medical emergency, where the patient is unable to consent due to a critical or unconscious condition, the health worker is authorized to perform life-saving actions without having to wait for informed consent from the patient or family, provided that such actions are based on professional considerations and applicable medical ethics.¹³ Medical emergencies often put medical personnel in a dilemma between compliance with legal procedures and the need to act quickly to save patients' lives. Therefore, Health Law Number 17 of 2023 provides an exception to the need to obtain approval for medical measures in an emergency. This exception is regulated in Article 64 paragraph (3), which states that in an emergency, medical personnel or health workers may perform medical actions without the patient's consent to prevent the risk of death or severe disability. This demonstrates the flexibility of the law in maintaining a balance between the rights of patients and the responsibilities of medical professionals.

Practically, the implementation of actions without informed consent in emergency conditions must still be recorded and reported administratively according to hospital service standards. The medical record should explain the urgency of the action, the reasons for the lack of consent, and the professional judgment behind the decision. This aims to ensure that medical actions can still be accounted for legally and ethically. In addition, the Hospital Ethics Committee also has a role in providing ethical consideration to medical actions outside of the standard of general procedure, including in emergency cases involving informed consent, to ensure that the principles of non-maleficence and beneficence remain paramount.¹⁴

III. METHOD

In the research titled "*An Analysis of Informed Consent in Medical Emergency Situations in an Ethical and Practical Review*", a juridical normative research method was used which aimed to examine the legal norms that govern the implementation of informed consent in medical emergencies, both from the aspects of medical ethics and health law practice. This approach is strengthened by literature studies that involve searching for laws and regulations, medical codes of ethics, court decisions, and relevant academic literature. In addition, this study is qualitative descriptive, which seeks to systematically describe how legal and ethical principles are applied in clinical practice when patients are unable to give conscious consent, with the aim of providing a comprehensive understanding of the challenges faced by medical personnel and the solutions that can be taken responsibly.

IV. RESULT AND DISCUSSION

A. Real cases or hypothetical emergency situations

Informed consent is an important process in medical practice that guarantees the patient's right to autonomy to accept or refuse medical intervention after obtaining sufficient information. However, in medical emergencies—such as traffic accidents, cardiac arrest, or unconscious conditions—the implementation of informed consent is a major challenge. In these conditions, patients are often unable to give consent directly, and time is a crucial factor in saving lives. Therefore, ethically, the principles of beneficence and non-maleficence can take a dominant role in medical decision-making without the patient's explicit consent¹⁵. In practice, doctors and medical personnel rely on the concept of implied consent, which is the assumption that a rational patient will definitely agree to medical actions aimed at saving his life if he is conscious. For example, in the hypothetical case that a motorcyclist is in an accident and is unconscious with life-threatening internal injuries, the medical team at the emergency room can immediately perform the surgical procedure without waiting for the family's approval, assuming

⁹ Iserson, K. V., et al. (2008). Ethical principles in emergency medicine. *Emergency Medicine Clinics of North America*, 26(4), 815–839.

¹⁰ Brody, H., & Doukas, D. (2014). *Professionalism: A framework to guide medical ethics*. Hastings Center Report, 44(5), 18–23.

¹¹ Irsyam Risdawati. (2024). Informed Consent in Medical Practice with a Value of Justice Approach. Bekasi: PT Dewangga Energi Internasional

¹² Eyal, N., & Lipsitch, M. (2021). Vulnerability, equity, and the ethics of emergency response. *Bioethics*, 35(3), 198–205.

¹³ Law of the Republic of Indonesia Number 17 of 2023 concerning Health, Article 64.

¹⁴ Pratiwi, D. (2024). Medical Ethics in Handling Emergency Cases. *Journal of Bioethics and Health Law*, 12(1), 45–58.

¹⁵ Beauchamp, T.L., & Childress, J.F. (2019). *Principles of Biomedical Ethics* (8th ed.). Oxford University Press

that the procedure is an emergency necessity¹⁶. In other real-life cases, such as cardiac arrest in public spaces, cardiopulmonary resuscitation (CPR) protocols are performed directly by medical personnel or trained persons without first obtaining the patient's or family's consent, as set forth in American Heart Association guidelines¹⁷.

Although these actions are ethically and legally permissible, there are still limitations that must be observed. First, medical intervention should only be done to the extent necessary to save lives or prevent serious disability. Second, medical personnel must immediately contact the patient's family or guardian to get further approval if the situation is possible. Good documentation of the reason for the non-obtaining of informed consent must be recorded in the medical records to avoid potential conflicts of law or alleged malpractice¹⁸. Failure to document the justification for action in an emergency can damage medical credibility despite the saving intentions. Ethically, it is also important to consider cultural and religious values that may influence the medical decisions of the patient or his or her family. In highly religious societies, medical decisions are often not only based on medical analysis, but also on the norms of belief. Therefore, even if in an emergency situation there is room to go through the informed consent procedure, medical personnel still need to act sensitively, proportionately, and professionally. As explained in the book *Medical Ethics and Law* by Dominic Wilkinson et al., the biggest challenge in emergency medical ethics is striking a balance between a quick response to save lives while still respecting humanitarian values and professional accountability¹⁹.

B. Ethical Analysis

In medical ethics, the four main principles used as a framework for consideration are autonomy, beneficence, non-maleficence, and justice²⁰. In emergency situations, the principle of patient autonomy—which is usually fulfilled through the *informed consent* process—is often unenforceable due to the patient's unconscious condition, inability to make decisions, or limited time. However, medical action can still be ethically justified if the principles of beneficence and non-maleficence are prioritized, namely saving lives and preventing greater harm. Therefore, even if the *informed consent* procedure is not formally performed, ethical principles can still be considered fulfilled if medical measures are performed to save lives in a proportionate and professional manner²¹. The main conflict in this condition arises between the patient's right to autonomy to determine his or her medical fate and the moral and professional obligations of medical personnel to prevent death or severe disability. For example, in the case of a patient who is unconscious due to an accident, the doctor must immediately make a surgical decision to stop the bleeding, without having time to ask for approval from the patient or his family. On the one hand, not respecting the autonomy of the patient can be considered an ethical violation.

But on the other hand, allowing the patient to die in order to await approval can be considered negligence and a violation of the principle of beneficence²².

Modern clinical ethics allows for flexibility in the application of those principles, especially in emergency contexts. In the *Guidelines on Ethics of Medical Practice* of the World Medical Association, it is stated that in an emergency where the patient is unable to give consent, the necessary medical action can be taken assuming that the patient will consent if he or she is conscious²³. This is known as *presumed consent*, an approach that bases decisions on rational considerations and is best for the patient. However, this action must be limited by the principles of proportionality and goodwill—that is, to intervene only that which is really necessary to save lives or prevent great harm. Thus, even if the principle of autonomy is not fully exercised under certain conditions, the fulfillment of other ethical principles can be a strong moral justification. The most important thing is that medical personnel are able to distinguish between emergency conditions that really require immediate action and those that still allow for communication processes. Complete documentation of clinical decisions and communication as quickly as possible with the patient's family remains an important part of maintaining ethical and legal accountability. This is in line with the view of medical ethicists who emphasize that ethics are not rigid rules, but rather principles that must be interpreted contextually and humanely²⁴.

C. Practical and Juridical Analysis

In the practice of medical services, *informed consent* is an important foundation in upholding patients' rights to medical information and decision-making. However, in the context of emergency situations, the process of obtaining informed consent is not always possible due to time constraints and the patient's condition does not allow for conscious consent. Therefore, Health Law Number 17 of 2023 provides an exception to this principle, especially in Article 64 paragraph (3), stating that medical personnel can perform medical actions without the patient's consent in an emergency to prevent the risk of death or severe disability. This shows that juridically, the state gives legal legitimacy to medical measures taken quickly to save the lives of patients in an emergency.²⁵

Practically, the implementation of medical measures in emergency situations without the patient's consent must still be carried out by prioritizing the principles of prudence and professional responsibility. Medical personnel are required to make complete records in medical records, including the reasons for not obtaining informed consent and the clinical considerations underlying the action. This is in accordance with the principle of *non-maleficence* in medical ethics, namely the obligation not to harm patients and provide well-intentioned interventions. In addition, supervision from hospitals through the Ethics Committee is also an important

¹⁶ Marco, C.A., & Larkin, G.L. (2000). "Informed Consent for Emergency Department Patients with Emergency Medical Conditions." *Annals of Emergency Medicine*, 36(4), 408–411

¹⁷ American Heart Association. (2020). *Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care*

¹⁸ Sulmasy, D.P., & Sugarman, J. (2010). "The Many Methods of Medical Ethics (or, Thirteen Ways of Looking at a Blackbird)." *Theoretical Medicine and Bioethics*, 31(6), 403–430

¹⁹ Wilkinson, D., Savulescu, J., & Kerridge, I. (2022). *Medical Ethics and Law: A Curriculum for the 21st Century*. Oxford University Press

²⁰ Beauchamp, T.L., & Childress, J.F. (2019). *Principles of Biomedical Ethics* (8th ed.). Oxford University Press

²¹ Lo, B. (2021). *Resolving Ethical Dilemmas: A Guide for Clinicians* (6th ed.). Wolters Kluwer.

²² Jonsen, A.R., Siegler, M., & Winslade, W.J. (2015). *Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine* (8th ed.). McGraw-Hill.

²³ <https://www.wma.net/publications/wma-medical-ethics-manual/>

²⁴ Wilkinson, D., Savulescu, J., & Kerridge, I. (2022). *Medical Ethics and Law: A Curriculum for the 21st Century*. Oxford University Press.

²⁵ Law of the Republic of Indonesia Number 17 of 2023 concerning Health, Article 64 paragraph (3).

mechanism in ensuring that emergency actions are carried out in accordance with the standards and codes of ethics of the health profession.²⁶ From an ethical and juridical perspective, the policies regulated in the 2023 Health Law seek to balance legal protection for medical personnel and respect for patients' rights. Medical procedures without informed consent in an emergency situation are not a crime, but part of a recognized legal exception for the sake of humanity. This confirms that health law in Indonesia is not rigid, but adaptive to medical dynamics and the need to act quickly in critical circumstances. Legal protection and ethical responsibility must go hand in hand so that the practice of medicine remains within the corridor of professionalism and integrity.²⁷

D. Solutions and recommendations

To address the ethical and legal challenges when *informed consent* cannot be obtained in an emergency, clear operational guidelines are needed for medical personnel. Hospitals and healthcare facilities must have Standard Operating Procedures (SOPs) specifically designed for medical emergency situations. This SOP must include emergency criteria, measures that are allowed without the patient's consent, and action reporting mechanisms. The guidelines not only protect patients, but also provide a strong legal and ethical basis for doctors to act quickly. WHO and the Indonesian Ministry of Health also emphasized the importance of national guidelines and periodic training related to the handling of patients in unconscious or critical conditions²⁸. In addition to guidelines, the use of technology and electronic documentation systems is an important solution in strengthening the accountability of medical procedures. A digital medical record system allows healthcare workers to record the timeline of actions, decision-making times, and clinical justifications quickly and accurately. In fact, some hospital systems have integrated an *emergency consent override* feature that can be activated in critical conditions. This technology not only helps in tracing data in the event of a legal dispute, but also speeds up communication between units, for example between emergency rooms and legal or nursing units²⁹. The use of voice recordings and timestamps in emergency situations has also begun to be adopted in some major hospitals as part of a professional accountability system.

Another recommendation is to increase the education of medical personnel about the basics of medical law and ethics, especially related to *informed consent* in emergency situations. The medical professional education curriculum as well as hospital training should include simulation of emergency cases involving ethical dilemmas and quick decisions. In addition, the hospital must cooperate with the internal legal team so that any medical action taken in an extraordinary situation has adequate juridical support. These measures, if implemented consistently, will improve the quality of clinical decision-making while minimizing the risk of lawsuits against medical personnel³⁰.

V. CONCLUSION

The study found that in medical emergency situations—such as accidents, cardiac arrest, or unconsciousness—*informed consent procedures* are not always feasible due to time constraints and the patient's legally incompetent condition. In this condition, ethical principles such as *beneficence* (kindness) and *non-maleficence* (do no harm) are the main basis for medical personnel to act quickly to save lives. Practically and juridically, doctors and health workers are protected by legal rules such as Article 45 paragraph (2) of Law No. 29 of 2004 concerning Medical Practice, which allows medical procedures without consent in emergency conditions, as long as the action is carried out in accordance with professional standards. Based on these findings, it can be concluded that in a medical emergency situation, the principles of medical ethics can still be met even if a *formal informed consent procedure* is not carried out. The patient's right to autonomy is still respected through *the presumed consent approach*, which is the assumption that the rational patient would consent to the rescue if he or she was conscious. Thus, the formulation of the problem of whether medical actions without *informed consent* are ethically justified and legally answered in the affirmative, provided that the action is carried out professionally, proportionately, well-documented, and for the safety of the patient. As a recommendation, healthcare facilities need to develop and disseminate clear emergency action guidelines and include digital documentation for any interventions carried out without *informed consent*. In medical and nursing professional education, it is important to instill an understanding of emergency ethics and law early on through case studies and simulations. For policymakers, it is necessary to conduct regular regulatory reviews to keep pace with the development of medical technology and the complexity of clinical cases. With this approach, it is hoped that ethical integrity is maintained, patient safety is protected, and medical personnel have legal certainty in carrying out their duties.

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²⁸ Ministry of Health of the Republic of Indonesia. (2020). Guidelines for Handling Medical Emergencies in Health Facilities.

²⁹ Ghosh, R., & Gupta, P. (2018). "Technology in Emergency Medical Documentation: A New Era of Accountability." *International Journal of Medical Informatics*, 116, 34–40.

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