American Journal of Humanities and Social Sciences Research (AJHSSR)

e-ISSN: 2378-703X

Volume-09, Issue-04, pp-61-63

www.ajhssr.com

Research Paper

Open Access

Delegation of Doctor's Authority to Nurses in Emergency Services Based on the Principles of the Medical Code of Ethics

Sugiharti¹, Suardi Dg. Mallawa², Ansar², Idham Chalid²

¹Doctor of Undata Hospital Palu and Master of Law Faculty of Law, Tadulako University
²Faculty of Law, Tadulako University

ABSTRACT : The World Health Organization (WHO) emphasizes the importance of an effective system in handling emergencies to reduce mortality and disability (WHO, 2023). In Indonesia, this service is regulated in Law No. 17 of 2023 concerning Health and Regulation of the Minister of Health No. 47 of 2018 concerning Emergency Services. However, obstacles in its implementation still occur, especially related to the limited number of medical personnel, especially doctors, in remote areas. The purpose of this study is to examine the delegation of authority of doctors to nurses in emergency services based on the principles of the Medical Code of Ethics. This study uses a normative legal approach with a literature study method. Data were collected from primary legal materials, such as Law No. 17 of 2023 concerning Health, and secondary legal materials in the form of journals and related literature (Huda & Huda, 2021). The analysis was carried out using a statute approach and a conceptual approach to examine applicable regulations and their suitability to practices in the field.

The results of the study indicate that the delegation of authority from doctors to nurses in emergency services is a common practice in Indonesia, especially in areas with limited medical personnel. However, existing regulations do not specifically regulate the limits and mechanisms for the delegation of authority. Therefore, a clearer policy revision is needed regarding the delegation of authority in emergency services as well as increased training for nurses to minimize the risk of medical errors.

KEYWORDS: Delegation of Authority, Emergency Services, Principles of Medical Code of Ethics

I. INTRODUCTION

Emergency services in hospitals are a crucial component of the health system that plays a role in saving lives and preventing disability due to emergency medical conditions. The World Health Organization (WHO) emphasizes the importance of an effective system in handling emergencies in order to reduce mortality and disability rates (WHO, 2023). In Indonesia, this service is regulated in Law No. 17 of 2023 concerning Health and Regulation of the Minister of Health No. 47 of 2018 concerning Emergency Services. However, obstacles in its implementation still occur, especially related to the limited number of medical personnel, especially doctors, in remote areas (Ministry of Health, 2022).

The shortage of doctors often requires nurses to handle emergency cases, even though their authority is limited according to applicable regulations. In practice, the delegation of authority from doctors to nurses is a solution that is widely implemented to ensure that patients receive immediate treatment. However, this delegation raises ethical and legal issues. Nurses who perform medical procedures without official authority can face legal consequences, while on the other hand, refusing to take action can be risky for patient safety. Unfortunately, there are no specific regulations that regulate in detail the delegation of authority from doctors to nurses in emergency services (Rangkutir & Risdawati, 2024). This ambiguity causes differences in interpretation in practice in the field. Some hospitals may implement internal policies, but without a strong legal basis, nurses remain in a legally vulnerable position.

Therefore, this study aims to analyze the practice of delegating authority from doctors to nurses in emergency services based on the principles of the medical code of ethics. This study is expected to provide a deeper understanding of the challenges and legal consequences of this practice and become input for the formulation of clearer and more comprehensive policies. With more specific regulations, it is hoped that emergency services can run more effectively without causing ethical or legal dilemmas for health workers on duty in the field. The purpose of this study is to examine the delegation of authority from doctors to nurses in emergency services based on the principles of the Medical Code of Ethics

II METHOD

This study uses a normative legal approach with a literature study method. Data were collected from primary legal materials, such as Law No. 17 of 2023 concerning Health, and secondary legal materials in the form of journals and related literature (Huda & Huda, 2021). The analysis was carried out using a statute approach and a conceptual approach to examine applicable regulations and their suitability to practices in the field.

III. RESULTS

The results of the study indicate that the delegation of authority from doctors to nurses in emergency services has been implemented in several hospitals in Indonesia. However, there is a lack of clarity in the regulations governing the limits of this authority. A study conducted at Pabatu Hospital revealed that nurses often have to make medical decisions in emergency situations without direct supervision from doctors. This is due to the limited number of medical personnel, especially in remote areas or hospitals with limited resources (Rangkutir & Risdawati, 2024).

In addition, nurses who receive the delegation of authority do not always receive adequate training to handle emergency conditions. This increases the risk of medical errors, which can be fatal for patients. A study by Vitrianingsih & Budiarsih (2019) showed that nurses who are less trained are more prone to making errors in diagnosis and emergency medical actions.

Existing regulations, such as Law No. 38 of 2014 concerning Nursing and Law No. 29 of 2004 concerning Medical Practice, do not explicitly regulate the limits of nurses' authority in emergency situations. This ambiguity causes the practice of delegation of authority to vary between hospitals and regions. Some hospitals have internal policies to address the shortage of doctors, while others are more restrictive of nurses' actions in emergency situations.

With this legal uncertainty, nurses are in a vulnerable position, both professionally and legally. On the one hand, they must act quickly to save patients' lives, but on the other hand, they risk facing legal consequences if their actions are considered to exceed the authority stipulated in the law. Therefore, clearer policies and more comprehensive training are needed for nurses who handle emergency cases so that health services can run safely and effectively.

IV. DISCUSSION

General practitioners have a crucial role in emergency services, especially in providing first aid and stabilizing the patient's condition. Their authority includes (Presiden R.I, 2004):

- a. Triage: Determining the patient's level of emergency and prioritizing treatment;
- b. Stabilization: Performing initial stabilization measures, such as administering oxygen, administering IV fluids, and treating bleeding;
- c. Initial Diagnosis: Performing an initial diagnosis based on the patient's symptoms and clinical signs;
- d. Basic Medical Actions: Performing basic medical actions, such as cardiopulmonary resuscitation (CPR) and wound care;
- e. Referral: Referring patients to specialist doctors or hospitals with more complete facilities if necessary.

In emergency situations, general practitioners are required to act quickly and appropriately, prioritizing patient safety (Permenkes R.I, 2018)

Although general practitioners have broad authority in emergency services, there are limitations that must be adhered to in the delegation of authority (Yanuar, 2017):

- a. Nursing Competence: General practitioners may only delegate authority to nurses who have the appropriate competence and qualifications;
- b. Type of Action: General practitioners may only delegate medical actions that are included in the scope of nursing practice. Complex or high-risk medical procedures must still be performed by a doctor;
- c. Supervision: The general practitioner is responsible for providing adequate supervision and guidance to the nurse who receives the delegation of authority;
- d. Documentation: The delegation of authority must be documented in writing and clearly, including the type of action delegated, the name of the nurse who received the delegation, and the date of the delegation;
- e. Patient Condition: The delegation of authority must be adjusted to the patient's condition;
- f. In the case of patients with critical or complex conditions, the general practitioner must remain actively involved in the treatment;
- g. Regulations: The delegation of authority must be in accordance with applicable laws and regulations, as well as established professional standards.

By understanding these limitations, the general practitioner can carry out the delegation of authority safely and responsibly, and ensure patient safety (Ismail 2019).

The delegation of authority in emergency services needs to be analyzed from the aspects of legality and medical ethics. From a legal perspective, Hans Kelsen's theory emphasizes that every legal norm must have a clear hierarchy in order to be implemented effectively (Kelsen, 2005). In this context, regulations related to the

delegation of authority need to have a strong and specific legal basis so that there is no inequality in practice in the field. Currently, the Health Law does not regulate in detail the mechanism for delegation of authority in emergency situations, so revisions or additional regulations are needed to ensure legal certainty for health workers. From the perspective of the medical code of ethics, the principles of beneficence (doing good) and non-maleficence (doing no harm) are the main basis for delegation of authority (Kodeki, 2012). Nurses who receive additional authority must ensure that their actions benefit patients and do not cause greater harm. However, without clear regulations, nurses' decisions in emergency situations can be an ethical dilemma, especially if they have to act without a doctor's supervision or without sufficient training.

In addition to the legal and ethical aspects, training for nurses in handling emergency cases is a key factor in increasing the effectiveness of delegation of authority. A study by Huda & Huda (2021) showed that nurses who received emergency training had a higher success rate in treating patients without direct doctor supervision. This training includes resuscitation skills, trauma management, and other emergency procedures that are often encountered in emergency units. With clearer regulations and adequate training, delegation of authority can be an effective solution to overcome the limited medical personnel, especially in remote areas. However, without strong regulations, this practice can cause legal and ethical problems that impact the quality of health services and patient safety. Therefore, health policies in Indonesia need to pay more attention to the legal aspects and readiness of human resources in implementing delegation of authority in emergency services.

V. CONCLUSION

The delegation of authority from doctors to nurses in emergency services is a common practice in Indonesia, especially in areas with limited medical personnel. However, existing regulations do not specifically regulate the limitations and mechanisms of this delegation of authority. Therefore, a clearer policy revision is needed regarding the delegation of authority in emergency services as well as increased training for nurses to minimize the risk of medical errors.

VI. SUGGESTIONS

The government, especially the Ministry of Health, should revise the policy to be clearer regarding the delegation of authority in emergency services. Also regulate operational standards and procedures in the delegation of authority, so that it is safe from a legal aspect.

ACKNOWLEDGEMENTS

The author would like to thank the management of Undata Hospital, Central Sulawesi, who has encouraged him to raise this theme as a research. The author would also like to thank the lecturers of the master of law program who have guided the author during the writing.

REFERENSI

- [1] Huda, K., & Huda, M. (2021). Perlindungan Hukum Perawat Atas Pelimpahan Wewenang dari Dokter dalam Melakukan Tindakan Medis Jahit Luka di IGD Rumah Sakit. Jurnal Hukum dan Etika Kesehatan, 1(1), 45-60.
- [2] Ismail, Mahsun. "Perlindungan Hukum Bagi Dokter Dalam Menangani Keadaan Medis Darurat Berdasarkan Implied Concent." *Islamadina : Jurnal Pemikiran Islam* (2019).
- [3] Kementerian Kesehatan Republik Indonesia. (2022). *Laporan Kesehatan Nasional 2022*. Jakarta: Kemenkes RI.
- [4] Kelsen, H. (2005). *Teori Hukum Murni*. Jakarta: Pustaka Mandiri.
- [5] Kodeki. (2012). Kode Etik Kedokteran Indonesia. Jakarta: IDI.
- [6] Presiden Republik Indonesia. UU No. 29 Tahun 2004 Tentang Praktik Kedokteran. Aturan Praktik Kedokteran, 2004.
- [7] Permenkes RI, Nomor 47. "Permenkes RI No. 47 Tahun 2018 Tentang Pelayanan Kegawatdaruratan." *Menteri Kesehatan Republik Indonesia* 151, no. 2 (2018): 1–34.
- [8] Rangkutir, R., & Risdawati, I. (2024). Analisis Yuridis Pelimpahan Wewenang oleh Dokter terhadap Perawat di Ruang ICU Rumah Sakit Pabatu. Jurnal Ners, 8(2), 1161-1167.
- [9] Vitrianingsih, Y., & Budiarsih. (2019). *Pelimpahan Wewenang Dokter kepada Profesi Perawat dalam Tindakan Medis dari Perspektif Hukum*. Jurnal Hukum Magnum Opus, 2(2), 78-92.
- [10] WHO. (2023). Emergency Medical Services: Global Standards for Quality and Safety. Geneva: WHO.
- [11] Yanuar Amin. Etika Profesi Dan Hukum Kesehatan, 2017.