

ORIGINAL ARTICLE

Medical Services Through Online Media In Health Law Perspective

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ABSTRACT

Introduction: Health is an important aspect of human life because it affects all daily actions. Along with the development of technology in the health sector, new innovations related to online medical services are called Telemedicine. In Minister of Health Regulation (Permenkes) No. 20/2019, it only regulates Telemedicine between health service providers. It does not regulate medical services through online media between the relationship between doctors as medical personnel and patients. This is feared to have the potential to guarantee quality and threaten the safety of its users. **Methods:** This research is normative research by conducting a study of the legal problems in implementing telemedicine in health services. **Results:** The results of the study indicate that medical services through online media are not explicitly regulated in the Health Law. However, the Health Law supports health efforts; in this case, medical services through online media (Telemedicine) is an effort in the interest of health in Indonesia. **Conclusions:** Medical personnel who neglect a patient can be held accountable. The medical personnel's accountability can be in the form of medical code of ethics sanctions, civil, and criminal sanctions

Keywords: Health, Medical Services, Telemedicine, Technology, Online

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INTRODUCTION

Health is an important element in the progress of a country for prosperity, which must be realized as referred to in Pancasila and the 1945 Constitution of the Republic of Indonesia, which is also a human right (1). Health in the Act of the Republic of Indonesia Number 36 of 2009 is defined as a healthy state, both physically, mentally, spiritually, and socially that allows everyone to live socially and economically productive. However, health is still a problem that cannot be avoided by a country (2).

With the development of the era, the level of health quality can be said to be decreasing (3). The diseases that arise are also increasingly diverse due to the lifestyle of today's people, who are less regular and other factors (4). To achieve good public health quality conditions, it

is necessary to make efforts to strengthen and develop an effective and efficient health service strategy by health workers, especially doctors as medical service providers (5-6). In the general provisions of Article 1 point 1 of the Act of the Republic of Indonesia Number 36 of 2014 regarding Health Workers, health workers is defined as every person who devotes himself/herself to the health sector and has knowledge and or skills through education in the health sector, which for certain types requires the authority to make health efforts (7). Therefore, public health services in a country must be increasingly considered. Hence, they are in accordance with the mission and vision of the health development program.

Efforts to improve the quality of human life in the health sector are a very broad and comprehensive effort (8). In the National Health System, it is stated that health concerns all aspects of life whose scope is very broad and complex (9). Health effort activities (preventive, promotive, curative, and rehabilitative) require adequate legal instruments. Adequate health legal instruments are intended to provide legal certainty and comprehensive

protection for both the organizers of health efforts and the community receiving medical services (10). Medical services have a goal as an effort to heal a patient (11). Actions taken must also be in accordance with applicable procedures and regulations.

Regarding medical services, there is a relationship that arises between doctors as healers and patients as patients, which is a relationship of trust. The legal relationship between a doctor and a patient that is conducted with a sense of trust from the patient to the doctor is called a therapeutic transaction (12).

Along with the development of the world of technology, the health sector also gives rise to many innovations and new breakthroughs related to health services, from direct to indirect health services (online) (13). In general, a patient who comes to see a doctor will get a medical service (14). Medical services are a series of activities of doctors and health workers provided to sick patients according to predetermined medical service standards (15). Usually, these services are accompanied by optimal hospital resources and facilities, namely health service facilities. However, this online health service does not require sick patients to come to the hospital and can stay at home and can only use an application (16).

The growth of digital health services must also be accompanied by the growth of adequate health infrastructure and regulations (17), that specifically regulate how to regulate the relationship between service providers and users or patients, who consult online and which regulates the limits that can be done in order to obtain optimal results. Regulations regulated by the government are only limited between health service providers through the Minister of Health Regulation (Permenkes) No. 20/2019 (18). However, they do not regulate service providers and their users as many appear today. Moreover, because health services with technology intermediaries, which are remote consultation and examination services, are different from direct physical examinations by doctors; hence, the medical service sector conducted online for doctors is required to meet the competence. It is evidenced by the existence of a certification legitimized by the doctor, medical professional organization, as well as providers of online health consulting services. The regulations are needed to specifically regulate what must be fulfilled. Hence, in carrying out operational activities, they implement the precautionary principle and help ensure quality and safe services.

Therefore, it is feared that it can have the potential to guarantee quality and threaten the safety of its users. Hence, in order to be able to convince and guarantee that the medical personnel on the online media platform must really be doctors who have credible benchmarks. Afterward, what must be fulfilled in order to conduct operational activities can implement the precautionary

principle and contribute to ensuring quality and safe services. In this study wants to identified How are medical services by doctors to patients through online media according to statutory regulations and can medical services that harm patients through online health services (Telemedicine) be accounted for

MATERIALS AND METHODS

This research is normative research by conducting a study of the legal problems in implementing telemedicine in health services. In addition, several things are also carried out using the Qualitative Approach method, which emphasizes understanding problems in social life based on conditions of reality or natural settings that are holistic, complex, and detailed. The methodological approach in qualitative research is divided into several types of fields, including ethnography, fieldwork, soft data, symbolic interactionism, naturalistic, descriptive, observation with role involvement, phenomenology, documentary data, case studies, descriptive historical studies, environmental studies, observations, reviews documents, participant-observer and stories.

RESULTS

Medical Services Through Telemedicine According To Legislation

According to Act Number 36 of 2009 regarding Health, it is stated in the principles and objectives contained in Article 1 of the general provisions paragraph (11) that medical services are a form or series of health efforts conducted by medical personnel, namely doctors and dentists in the interest of public health (19). Afterward, Article 3, which explains that health development aims to increase awareness, willingness, and ability to obtain the highest degree of health, socially, and economically through online media (Telemedicine), is one form of development (20). Health that is more economical and can be evenly distributed (21-22). Medical services are classified in the form of a health effort that is conducted in the form of promotive, preventive, curative, and rehabilitative approaches (23). They are carried out in an integrated, comprehensive, and sustainable manner, as stated in Article 47 (19). According to Act Number 29 of 2004 regarding Medical Practices in carrying out their duties, services Medical treatment performed by a doctor must be given to the Professional Standards (19). The enactment of the Medical Practice Law aims to provide legal protection for doctors in carrying out their duties, as well as to bridge the interests of doctors and patients in the process of providing health services. This is the basis for a doctor in carrying out his medical practice. The obligations of a doctor or dentist are stated in Article 51 of the Medical Practice Act (24), which is as follows:

a. Provide medical services in accordance with the professional standards, standard operating procedures, as well as the patient's medical needs

- b. Refer the patient to another doctor or dentist who has better skills or abilities if unable to carry out an examination or treatment
- c. Keep everything he knows about the patient secret, even after the patient has died.
- d. Conduct emergency assistance on a humanitarian basis unless he/she believes that someone else is on duty and capable of doing it, and
- e. Increase knowledge and follow the development of medical science or dentistry.

The medical profession, while carrying out its obligations, applies *Aegroti Salus Lex Suprema* means that patient safety is the highest law or the most important (25). The doctor's obligations include 19 general obligations, which are doctor is a doctor who is obliged to uphold, live and practice the doctor's oath and/or appointments, make professional decisions independently and maintain professional behavior in a high measure, avoid self-praise, must be careful in the treatment process, be competent, be honest, respect the rights of patients, as well as pay attention to all aspects of health services based on Articles 1 to 13 of the 2012 Indonesian Medical Code of Ethics (24). Article 53 of the Medical Practice Act explains that patients who receive services in medical practice have obligations as follows (26):

- a. Provide complete and honest information about their health problems. It means the patient is obliged to provide information, both identity and history of the disease, as well as complaints felt by the patient honestly and truthfully without hiding anything from the doctor
- b. Obeying the advice and instructions of the doctor or dentist. It means the patient is obliged to carry out the rules in the form of advice and instructions given by the doctor as an effort to heal the patient
- c. Comply with the applicable regulations in health care facilities; and
- d. Provide compensation for services received.

Based on the explanation of the patient's rights and obligations above, it can be concluded that the patient's rights are actually human rights originating from the basic rights of individuals in the health sector (the right of self-determination). Although, in fact, it is the same as fundamental, the right to medical services is often considered more basic. Relatively, the position of the patient in the doctor-patient relationship is in a weaker position. The patient's inability to defend his or her interests in medical care situations creates a need to denounce the patient's rights in dealing with health professionals (27). Therefore, the Medical Practice Act explicitly provides protection for patients as recipients of medical services in the form of granting rights for patients that must be fulfilled by doctors as well as obligations that must be carried out by patients.

According to the Regulation of the Minister of Health Number 20 of 2019 regarding the Implementation

of Telemedicine among Health Service Facilities, the provision of medical services through online media in the regulations is commonly referred to as Telemedicine (28). Telemedicine is defined as the provision of health services remotely by health professionals using information and communication technology, including the exchange of information on diagnosis, treatment, prevention of disease and injury, research and evaluation, as well as continuing education of health service providers for the benefit of improving individual and community health (29–32). Meanwhile, what is meant by Telemedicine services are services conducted between one health service facility and another in the form of consultation to establish a diagnosis, therapy, and/or disease prevention (33–36). Telemedicine services are limited and consist of 4 services as stated in Article 3 paragraph (1) of the Minister of Health Regulation 20/2009, namely teleradiology, teleektronicardography, teleultrasonography, clinical teleconsultation, and other telemedicine consulting services in accordance with the development of science and technology. In medical services through online media, which are usually conducted by medical personnel, a doctor and patients who usually conduct online consultations, can be categorized as clinical teleconsultation. Telemedicine services themselves must be conducted by medical personnel who have a practice license or (SIP) in a health service facility (*fasyankes*), which includes providing consultations and requesting consultations.

According to the Indonesian Medical Council Regulation Number 74 of 2020 regarding Authority and Medical Practice Through Telemedicine During the Corona Virus Disease 2019 (COVID-19) Pandemic In Indonesia, article 1 number 4 of this regulation explains that Telemedicine is the provision of remote medical services by doctors as well as dentists using information and communication technology (37). This is including the exchange of diagnostic information, treatment for disease and injury prevention, research and evaluation, and continuing education of health service providers for the benefit of improving individual and community health. The regulation of the Indonesian Medical Council, hereinafter abbreviated as KKI, also explains clinical authority, where this authority will later be useful as a right by medical staff to carry out their duties based on their assignments (38). Furthermore, the KKI regulation also regulates the extent of the authority that can be exercised by doctors and dentists in carrying out their duties in providing medical services, specifically during the current pandemic. Medical practice during the Covid 19 virus pandemic can be done through an application or an electronic system in the form of Telemedicine itself. Telemedicine refers to a consultation or teleconsultation service provided by Doctors and Dentists regarding the principle of patient confidentiality. Telemedicine in this regulation is carried out in the form of online writing, voice, and/or live video to obtain information needed in order to establish a diagnosis, as well as management and

treatment of patients in accordance with the provisions in the legislation. In the KKI regulation, it explains that doctors and dentists who practice medicine through Telemedicine are prohibited from practicing medicine through Telemedicine:

- a) conducting teleconsultation between medical personnel and patients directly without going through health service facilities (fasyankes);
- b) providing dishonest, unethical, and inadequate explanations (inadequate information) to patients or their families;
- c) conducting diagnosis and treatment beyond their competence;
- d) requesting irrelevant investigations;
- e) committing disgraceful acts, acts of intimidation, or acts of violence against patients in the implementation of medical practice;
- f) conducting invasive procedures via teleconsultation;
- g) collecting fees other than the rates that have been set by the health facilities; and/or
- h) providing health certificate.

As for other regulations that also regulate specifically regarding medical services through online media (Telemedicine) regarding the limitations of doctors in conducting teleconsultation, namely in number 5 of the Circular Letter of the Minister of Health of 2020 in the Implementation of Health Services through the Utilization of Information and Communication Technology in the Context of Preventing the Spread of Corona Virus Disease 2019 (COVID-19)/SE Minister of Health 303/2020; Doctors in providing telemedicine services are authorized to carry out:

- a. History, including the main complaint, accompanying complaints, history of current illness, other diseases or risk factors, family information, and other related information asked by the doctor to the patient/family online.
- b. Certain physical examinations are performed through audiovisual.
- c. Providing advice needed based on the results of supporting examinations and/or the results of certain physical examinations. The results of the supporting examination can be carried out by the patient using the modalities/resources they have or based on the recommendation of a previous supporting examination on the doctor's instructions. Suggestions/advice can be in the form of further health checks to health facilities.
- d. The diagnosis is made based on the results of the examination, most of which are obtained from the history, certain physical examinations, or supporting examinations.
- e. The management and treatment of patients are carried out based on establishing a diagnosis, which includes non-pharmacological, pharmacological management, as well as medical actions against patients/families according to the patient's medical needs. If further medical action is needed, the patient

is advised to carry out a follow-up examination at the health facilities.

f. Writing prescriptions for drugs and/or medical devices given to patients in accordance with the diagnosis.

g. Issuance of a referral letter for examination or further action to the laboratory and/or health facilities according to the results of patient management.

In the case as an example of an application that provides health services, namely Halodoc. It is the application of medical services through online media that provides services in the form of teleconsultation. It is emphasized in the terms and conditions intended for users, which is an important thing to note, read, and understand before using and take advantage of the features that are in it regarding the extent and limitations of what is made in the application.

DISCUSSION

Liability Of Medical Personnel Who Harm Patients Through Online Media (Telemedicine).

A doctor commits a professional error if he does not carry out an examination, diagnose, and do something or allows something that a good doctor in general and with the same conditions will carry out examinations and diagnoses and do or allow such things (39). In the Indonesian Medical Code of Ethics, doctors who are obliged to provide assistance to their patients must meet professional standards as guidelines that must be used in carrying out their profession properly, where medical ethics are norms and principles that apply to doctors as the basis for carrying out their profession. There are important elements that can be said to be an important reference for formulating a medical action that can be classified as medical negligence. There are four elements commonly known as 4D, namely as follows:

1. Duty or Obligation

A doctor-patient relationship. Thus, there is a bond of obligation that has been formed. Usually, it is in the form of a therapeutic engagement or contract. Hence, the doctor's obligation to the patient has arisen

2. Dereliction or deviation from obligations

In this case, the patient as the recipient of medical services must be able to prove that the doctor failed to meet the service standards required and set by the medical profession

3. Damages

There is a loss given by the doctor where this loss refers to the compensation that must be given to the patient as a result of the action

4. Direct cause

There is a direct cause of the loss felt as a result of medical services between a violation of professional responsibility and the loss felt by the patient

Potential problems that may arise in terms of Telemedicine are the obligations of doctors, namely to provide medical

services in accordance with professional standards, standard operating procedures, as well as the medical needs of patients. Another problem is in terms of doctors and patients who are conducting remote consultations. This is because the doctors do not directly examine the possibility and depend on whether the instrument is related. For example, a problematic internet connection or the doctor's erroneous interpretation or diagnosis due to incomplete communication delivery. Meanwhile, as is known so far, there is no professional standard for doctors who practice through Telemedicine. It is legitimized by the existence or issuance of a certification stating that the doctor has fulfilled all the necessary and qualified aspects to practice Telemedicine. This is because telemedicine practice is very different from face-to-face practice. Hence, doctors who will practice medical services via Telemedicine must be certified by an institution that has the authority to publish it.

Communication that is not carried out comprehensively occurs because telemedicine medical services are generally limited by time. Hence, that incomplete information is possible even though the urgency of doctor-patient communication is to (40), create a good interpersonal relationship, exchange of information, and medical decision making.

Furthermore, regarding standard operating procedures, the standard operating procedures are a system that is prepared with the aim of facilitating, tidying, and bringing order to a job. It is on this basis that a person does his job. Hence, there are strictly regulated guidelines about what must be done. So far, there is also no standard operating procedure that must be carried out when a patient wishes to receive medical services via Telemedicine. Meanwhile, the function of standard operating procedures is very significant because if later problems arise, they can be studied or analyzed, which processes or stages are not appropriate or not carried out based on the procedures as set out in the standard operating procedures. Legally, the doctor-patient relationship is a relationship known as a therapeutic transaction. Starting with a question and answer (anamnesis) between the doctor and the patient, then a physical examination is carried out by the doctor on the patient, the doctor will determine the diagnosis of the patient's disease. After the diagnosis is established, then the doctor decides the type of therapy or medical action that will be carried out on the patient (41).

Regarding the responsibility of telemedicine providers as corporations, as it is known that the position of corporations in positive law in Indonesia has been recognized as a legal subject, this is also based on Article 201 of the Health Act, which contains criminal sanctions against corporations. Hence, the corporations can be held accountable. In the theory of corporate criminal responsibility, it is known that there are several theories that can be applied to corporations. The first one is the

identification theory. It is certain agents in a company, which are considered as directing minds or alter egos, namely the actions and mens rea of individuals who are then linked to the company. If individuals are given authority to act on behalf of, and during the conduct of the company's business, the mens rea of individuals is the mens rea of that company (42).

criminal liability doctrine, which considers the mens rea of senior officials to be the mens rea of the company/corporation. However, it does not necessarily mean that the individual's mens rea can be said to be a corporate mens rea. That is, the individual should be qualified as an individual who does have the authority to determine an action or the will of a corporation, namely a senior official of a corporation or can be called a manager, not those who only is an ordinary employee in a sense only as a person who does work on what is ordered by the manager.

The second one is the doctrine of vicarious liability or substitute criminal liability. Vicarious liability is wherein one person, though without personal fault, is more liable for the conduct of another. The last one is Strict Liability. Strict liability is an absolute liability. The reason or rationale is a person who has committed a prohibited act (actus reus), as formulated in the act, can already be convicted without questioning whether the perpetrator has an error (mens rea) or not. Someone who has committed a crime, according to the formulation of the act, must or absolutely can be punished. Hence, the main element that must be proven in the strict liability doctrine is a prohibited act (actus reus), not an error (mens rea).

In addition to being bound by the legal norms of the Health profession, Medical Workers are also bound by another set of rules called ethical norms as contained in the Decree of the Minister of Health Number 99a/Menkes/SK/III/1982 regarding the National Health System. As it is known that the medical profession is a professional job that is not only a profession because not all jobs are called professions. The profession is a moral community that has shared ideals and values (43). A doctor can be reported if he/she is deemed to have violated the code of ethics to the Honorary Council for Medical Ethics (MKEK), which is part of the medical professional organization as an enforcement agency for Medical Professional Ethics. The Indonesian Medical Discipline Honorary Council (MKDKI) is an institution that has the authority to determine whether or not there are errors that have been made by doctors and dentists in the application of medical and dental disciplines and to impose sanctions on the Indonesian Doctors Association (IDI). The MKEK is issued in the Indonesian Medical Ethics Code (KODEKI). As for the possibility of a doctor being examined by the MKEK, it is reported by someone directly to MKDKI, reported by MKDKI when MKDKI examines a doctor, who is

reported to have violated professional discipline as stated in Article 68 of Act Number 29 of 2004 regarding Indonesian Medical Practice: "If in examination found ethical violations. The Indonesian Medical Discipline Honorary Council forwards complaints to professional organizations". In carrying out its practice, an example of one of the violations of medical ethics is medical secrets. According to Article 16 of the KODEKI, every doctor is obliged to keep everything he knows about a patient, even if the patient dies. The following one is an example. The forms of sanctions for violating medical ethics can be in the form of verbal or written warnings or demands, demotion or position, and postponement of promotion or position. According to article 66 paragraph (1) of Act No. 29 of 2004 regarding Medical Practice, everyone who knows or whose interests have been harmed by the actions of a doctor or dentist in carrying out medical practice can make a written complaint to the Chairperson of the Indonesian Medical Discipline Honorary Council.

Regarding the imposition of sanctions, the liability of medical personnel can be accounted for or carried out both civilly and criminally if it is based on important elements: Duty, Derelict, Damages, and Direct, as previously explained. In civil terms, if in a medical action there is an error that results in a loss, then the patient has the right to demand compensation based on an unlawful act as regulated in Article 1365 BW: the loss to compensate for the loss. Indeed, the legislation does not provide a limit to the extent to which a doctor's actions are categorized as having violated the law for medical actions that have been carried out. This must be proven by a court decision. What is meant by wrongdoing in Article 1365 BW can be in the form of intentional or negligence of a doctor, either in terms of doing or not doing something in a medical action to a patient? The losses incurred must be caused by wrong medical actions, and the error must be proven, both from the point of view of medical science and from the point of law science of patients. It is regulated in Article 1366 BW, which states: "Everyone is responsible not only for losses caused by his actions but also for losses caused by negligence or carelessness." In Article 1366 of this BW, an illustration of the case can be given as follows: a surgeon performs an operation incorrectly. The area that hurts on the left, the surgery on the right. The wound that occurs in the area that does not suffer from the pain is the patient's loss, which must be paid by the surgeon due to his negligence (unintentional). Such an act can be classified as an unlawful act (44). A good and communicative relationship between doctors and patients will have a positive impact on patients, such as the realization of patient knowledge and understanding satisfaction, adherence to treatment, and measurable health outcomes. The effective quality of the doctor-patient relationship is a major determinant of patient satisfaction and adherence to treatment. In building good interpersonal relationships, important elements

are needed, namely intimacy, attention, lack of tension, and non-verbal expressions from doctors and patients. Regarding the basis of the lawsuit that can be made to use the argument of violating the act as regulated in Article 1365 BW because a doctor who continues to practice consulting through Telemedicine even though he is clearly incapable or incompetent in that field, can be categorized as having violated his obligations as stated in the act itself. Article 51 letter A of the Medical Practice Act, namely providing medical services in accordance with professional standards, standard operating procedures, as well as the patient's medical needs, so that a patient who feels aggrieved can sue for compensation.

However, if in terms of medical services via Telemedicine, which is limited by time and/or bad internet instruments; therefore, doctors and/or patients cannot convey comprehensive information. Afterward, Telemedicine as a corporation must be held accountable because the system settings regarding the time limit are determined by the telemedicine operator.

In line with the provisions of 1367 BW, as it is known, it is his obligation to ensure and guarantee all the instruments needed for the smooth and comprehensive communication between doctors and patients. Even further, it is the obligation of telemedicine providers to ensure that doctors or health workers become employees so that they have qualified abilities.

Regarding criminal liability, it is certainly very closely related to criminal acts. Although it is not necessarily, someone who commits a crime can be held criminally responsible. This is because, in criminal liability, there is a very fundamental element to determine whether a person can be held accountable or not. That element is an element of error. Criminal liability contains the principle of error or what is known as (*mens rea*). The doctrine of *mens rea* is based on the conception that an act does not make a person guilty unless the person's mind is evil. In English, the doctrine is formulated as an act that does not make a person guilty unless the mind is legally blameworthy. Hence, there are two in the doctrine and two conditions that must be met in order to be able to convict someone: a forbidden outward act/criminal act (*actus reus*) and an evil/despicable inner attitude (*mens rea*) (45).

In accordance with the problems that occur, doctors as medical personnel can be held accountable if they have carried out medical actions that are less thorough or less careful (*Culpa Lata*). Medical actions that are not in accordance with Professional Standards do not fulfill their agreement to do their best and result in losses, such as an injury due to the negligence of the doctor on the patient. The doctor's actions can be accounted for with the possibility of articles that can be applied, namely Article 359 and Article 360 of the Criminal Code.

Another element is that a person, who has committed a criminal act, cannot necessarily be held criminally responsible. The parameters of a person committing a crime must be seen whether the person's actions or activities already exist or there are no rules. When there are rules, it means that the person has committed a crime. On the other hand, if there are no rules, then the person's actions or activities are not criminal acts. This is what is called the principle of legality (46).

The basic difference between ordinary crimes and medical crimes lies in the focus of the crime. The focus of ordinary crimes lies in the consequences of criminal acts. Meanwhile, in medical crimes, the focus is on the causes of criminal acts. In addition to medical crimes (criminal malpractice), criminal liability in medicine must be proven about the existence of professional errors. For example, misdiagnosis or errors in the way of treatment or care (47). The point is that if a doctor is suspected in his medical actions that caused a patient to be disabled and even die, then law enforcers should not only look at the consequences of medical action. They will also have to trace medical errors regulated by medical, scientific disciplines as regulated in the Regulations Council Regulations Indonesian Medical Council Number 4 of 2011 regarding the Professional Discipline of Doctors and Dentists.

Criminal liability for this matter is as stipulated in the criminal provisions in the Medical Practice Law, namely in Article 75 paragraph (1). Any doctor or dentist who intentionally practices medicine without having a registration certificate as referred to in Article 29 paragraph (1) shall be punished with imprisonment for a maximum of 3 (three) years or a maximum fine of IDR. 100,000,000.00 (one hundred million rupiahs), especially because they do not have service competence. Hence, if the diagnosis is misdiagnosed due to the incompetence of a doctor in conducting disease analysis or remote examination, which results in disability or death, a doctor can be held criminally responsible for not having the element of having a certificate of competence fulfilled. As a result, the doctor does not get a registration certificate. In addition, it can be held criminally responsible based on Article 75 paragraph (1) of the Medical Practice Act.

CONCLUSION

Medical services are a series of efforts from health care providers to patients in accordance with the standards and qualifications determined by legislation to help cure patients. In carrying out their duties, medical services conducted by doctors must be provided due to observance of Professional Standards, namely the minimum ability limits in the form of knowledge, skills, and professional attitudes that must be mastered by a doctor or dentist. This aims to be able to carry out professional activities in the community independently made by his professional

organization. In essence, the obligations and rights of doctors are to provide medical services in accordance with professional standards and standard operating procedures as well as the medical needs of patients. They are entitled to legal protection if they fulfill these requirements. Meanwhile, the obligations and rights of the patient are basically complete. The patients must be honest about their health problems and information, as well as obey the advice given by the doctor. They have the right to obtain comprehensive information about their disease and the possible risks that may occur in the process of healing the disease.

Transformation in the field of health services, namely medical services remotely via online by utilizing technology and communication, is certainly a very useful innovation. This is because it can speed up treatment for patients and can reach all regions. However, there is a possibility of risk arising because there is a very significant difference between a direct physical examination by a doctor to a patient and a remote examination. It concludes that the information is provided narratively by the patient remotely. Hence, in the end, it will establish a diagnosis of the disease that is being suffered by the patient even without a physical examination. Certainly, to ensure that a doctor who practices Telemedicine is of high quality and safety, he/she must be a qualified and competent doctor in this field.

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