LEGAL PROTECTION FOR DOCTOR AND MEDICAL STAFF IN THE PANDEMIC PERIOD OF COVID-19
(An Overview of Indonesia from International Perspective)

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Abstract
When first announced as a global pandemic on March 11 by WHO the number of infections worldwide has reached more than 121,000. Instead of Indonesia still feeling safe from a virus outbreak that has paralyzed some countries in the world, President Joko Widodo in early March, who had put the population in a comfort zone, had to admit defeat with a co-19 case report caused by the virus SARS-Cov-2 or better known as the Corona virus. Even with the dynamism of existing data, these predictions can change. This data is certainly not to create panic in the community, but rather to make people aware and provide an overview for the government in handling it. Namely comprehensive handling, especially to prevent wider spread so that the number of infections can be suppressed. In addition, legal certainty is an important instrument in ensuring the safety of health workers so that the government cannot take arbitrary actions against the assignment of health workers. Especially if you look at the legislation regarding health workers, it seems that no one has yet regulated the guarantee of legal certainty for health workers even though Law Number 36 of 2014 concerning Health Workers is already in place. Therefore the Government needs to issue implementing regulations and technical guidelines for the Health Workforce Law and other laws governing legal protection and work safety for health workers. In line with this, Chairman of the Indonesian Lung Doctors Association Agus Dwi Susanto, announced that the number of lung specialist doctors is limited, this must be sought by the government with further grouping of funds so that the number of cases of infection does not overwhelm health workers, this is done to break the chain of viral circulation with the help of partially quarantine and social procurement.

Keywords: Covid-19; Legal Protection; Doctor; Medical personnel; Pandemic.

A. INTRODUCTION
Please note, due to the government looks “relaxed” in anticipating the arrival of the virus to Indonesia, the Director General of WHO has intervened to
send a letter dated March 10, 2020 to the President of Indonesia to question the level of readiness of Indonesia in facing the global pandemic, the openness of the government in handling cases to highlight Indonesia's approach in tracing and detecting corona cases. Actually, it is simply understood that the Government's efforts to be calm (tend to be relaxed / slow?) To ward off the crisis is to minimize information so that there is no panic. However, this short logic causes more complicated problems, one of which is that people who lack information will be more easily consumed by hoaxes when there is no official reference. As a result, people are less able to get proper access to prevention efforts that can be done early.

Therefore it is necessary to conduct a scientific study of this escalating pandemic. The public needs to get good education about the handling of Covid-19 and get certainty from the government, that the government is legally obliged to provide adequate health services, and the community has the right to receive protection as inherent rights. Protection must also guarantee everyone who is in the vanguard.

B. DISCUSSION

1. What is Covid-19?

Covid-19 is a disease that is identified as the cause is the Corona virus that attacks the respiratory tract. This disease was first detected in Wuhan, China. As we know that SARS-Cov-2 is not a new type of virus. However, in scientific explanation a virus is able to mutate to form a new genetic makeup, in short the virus remains the same type and only changes uniformly. The reason for naming SARS-Cov-2 is because the corona virus has a close genetic link to the virus that causes SARS and MERS.

It is known that DNA from the SARS-Cov-2 virus has similarities with DNA in bats. It is also believed that this virus emerged from the wet market (wet market) in Wuhan, where many exotic Asian animals of various types are sold, even to maintain freshness, some are cut directly on the market to

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3 Wahyu Andiranto is a Lecturer and Researcher at the Health Law Research Unit of the Faculty of Law UI, accessed from https://www.hukumonline.com/berita/baca/lt5e8d9bf1341e1/ protection-hukum-for-dokter-di-masa-pandemi-covid-19-oleh--wahyu-andrianto?page=5, on June 8, 2020
be bought fresh. Then this market is considered a breeding ground for viruses due to the close interaction of animals and humans.\textsuperscript{4}

From this our consciousness should form, that viruses as invisible beings always mutate and infect living things. The spread is not only between one type of living creature such as animal to animal or human to human but more than that the spread takes place from animal to human. Of course we need to take anticipatory steps in order to minimize the spread of diseases originating from animals (zoonoses) without having to stay away and destroy animals from the face of the earth.\textsuperscript{5}

\section*{2. Why Need One Health Approach?}

We cannot deny, that in an environmental ecosystem there will be many interactions in the form of reciprocal relations between living things or living things with their environment. Not without problems, the interaction has become a concern, especially among living things themselves (humans, animals and plants). The focus of this discussion is on health issues that ultimately trigger zoonotic diseases that rise to the surface after the presence of SARS, MERS, Ebola H5N1, H1N1 to NCoV-2019 / SARS-CoV-2 attacking the global community. Are we aware that many of these diseases are caused by viruses that mutate when we make physical contact with animals?\textsuperscript{6}

The Centers for Disease Control and Prevention recognizes that human health is related to animal health and the environment. Even the world has increased the threat of new infectious diseases or known as emerging infectious diseases (EID), which 70\% are zoonotic or transmitted from animals to humans. It cannot be allowed to pass by without handling, the Government should be assisted by the community to take a stance to prevent the development of zoonotic diseases.\textsuperscript{7}

Therefore, to deal with this we need an approach where interaction in the environment can be maintained even though humans make contact with animals. This approach is called One Health. This approach involves a collaborative, multisectoral, and transdisciplinary approach whose scope is from local, regional, national to global levels aimed at achieving optimal

\textsuperscript{6} NIH, New coronavirus stable for hours on surfaces SARS-CoV-2 stability similar to SARS original, 2020, accessed from virushttps: //www.sciencedaily.com/releases/2020/03/200317150116.htm on March 20, 2020
\textsuperscript{7} Rachael D'amore, Coronavirus: Where did it come from and how did we get here?, 2020, accessed from https://globalnews.ca/news/6682629/coronavirus-how-did-it-start/ On March 20 2020
health outcomes regarding the same relationship between humans, animals, plants and the environment. It can be concluded that this concept teaches the meaning of sharing the environment without harming one another.\(^8\)

One health is a concept that recognizes that human health is also influenced by animal health and the environment. One Health Approach is not a new thing but its existence has become more important in recent years. This is because many factors have changed the interaction between humans, animals, plants and the environment, among others:\(^9\):

The human population grows and develops into new geographical areas. As a result, more people live side by side with wild animals, pets and livestock. Animals play an important role in our lives, whether for food, fiber, livelihoods, travel, sports, education, or friendship. Because of frequent contact with animals and their environment, more opportunities for disease to be transmitted through animals and humans.

The earth has experienced climate change and land use, such as deforestation and intensive agricultural practices. Disruption to environmental and habitat conditions can provide new opportunities for various diseases to be transmitted to animals. The movement of humans, animals and animal products has increased from international travel and trade. As a result, disease can spread quickly across borders and throughout the world. This change results in the spread of zoonotic disease, which can spread between animals and humans.

According to the world's experts, the implementation of the One Health Approach is a deep solution used in responding to the threat of zoonoses.\(^10\) This concept is a strategy in expanding interdisciplinary collaboration to build synergies for advancing health efforts which is realized through accelerating the discovery of biomedical research, increasing public health efforts, expanding scientific knowledge base and improving education and clinical care. So in the future high synergy is needed between the government as a policy maker, the community as a policy supporter assisted by various professions and experts from doctors, nutritionists, nurses, to ecologists to ensure human, animal and environmental health.

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8 CDC (Centers for Disease Control and Prevention), One Health, accessed from https://www.cdc.gov/onehealth/basics/index.html on March 17, 2020

9 Rebecca Onion, We've Had a Lot of Pandemics Lately. Have We Learned Anything From Them ?, 2020, accessed from https://slate.com/human-interest/2020/01/coronavirus-outbreak-sars-swine-flu-viral-history.html on March 17, 2020

3. Law Enforcement

In terms of law enforcement, let's review from the beginning the emergence of the virus in Indonesia. The Government of Indonesia, based on Article 154 of Law No. 36 of 2009 concerning Health, is obliged to announce areas that are the source of disease transmission to the public. This means that the government is obliged to disclose the types and distribution of diseases that have the potential to be transmitted or spread in a short time and to mention the area that is the source of transmission. However, the fact is that the government has been slow in disseminating information regarding the first case of Covid 19, namely that the announcement was only officially made after a week since the two positive SARS-Cov-2 viruses were declared and no notice of domicile of the two patients.11

But in discussing a problem, we cannot drag on to discuss things that have already happened and are already distorted. So it is better to improve in the future, the government must prepare further scenarios in handling Covid-19, especially to anticipate the surge in the number of infections that have been predicted, that here the law must also be upheld both when handling and can help prevent if a similar outbreak occurs in the future (futuristic ). In law enforcement that must be done let's look at a number of things including:

a. The constitutional basis for Health Insurance

Health is one of the basic human needs, whose constitutional rights have been guaranteed lately. Indeed, the constitutional guarantee of the right to health has existed since the time of the Constitution of the Republic of the United States (RIS) 1949 "The authorities have always tried to earnestly promote public hygiene and public health". After the form of a union state returned to the form of a unitary state and the enactment of the Provisional Constitution of 1950 (UUDS), the provisions of Article 40 of the RIS Constitution were adopted into Article 42 of the UUDS.

In line with that, the Constitution of the World Health Organization (WHO) 1948 has also emphasized that "obtaining health status at the highest level is a human right for everyone" (the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being). The term used is not "human rights", but "fundamental rights", which if we translate directly into Indonesian becomes "Basic Rights".12

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Then in 2000, through the Second Amendment to the 1945 Constitution, health was affirmed as part of human rights. In Article 28H paragraph (1) it is stated that: "Every person has the right to live in physical and spiritual prosperity, to live, and to have a good and healthy environment and to receive health services." The inclusion of these provisions in the 1945 Constitution illustrates an extraordinary paradigm shift. Health is seen as no longer just a personal matter related to the fate or gift of God that has nothing to do with the responsibility of the state, but rather a legal right that is guaranteed by the state.

b. Follow Up One Health Approach

To follow up on the anticipation of zoonotic disease emergencies, in addition to the existing set of regulations governing efforts to protect and prevent infectious diseases, there is also a need for a One Health Approach Coordination Manual, which will coordinate the roles of relevant ministries in handling diseases such as coordinating the Ministry of Health and the Ministry of Environment and Forestry. This effort is expected to be able to support the existence of Law Number 24 Year 2007 which stipulates an outbreak as a non-natural disaster that needs to be managed as a potential threat.

c. Social Distancing Policy

The existence of Social Distancing so far has been very effective in preventing the spread of viruses / diseases, namely by preventing sick people from making close contact with people to prevent transmission. But seeing the current phenomenon, in fact social distancing is still in the form of a plea that if it is not assisted to be distributed on social media, fewer people will know about it. Therefore, social distancing policies should be included in government regulations in lieu of laws regarding efforts to deal with the Covid-19 outbreak, one of which regulates social distancing is an obligation, if necessary there is an affirmation of sanctions in accordance with positive law, so that people are not only aware on the importance of social distancing but also applying the practice.

4. Protection of Health Workers as Front Guard

With regard to social distancing, in fact we also help health workers who stand in the vanguard in preventing the increase in the number of infections. In addition, the government also needs to guarantee the protection and work safety of medical personnel in the effort to deal with

Covid-19. Demands for the protection of health workers rolled after seven doctors died due to positive infection, fatigue to heart attacks. Therefore, there must be a set of working hours, an increase in the number of referral hospitals, fulfillment of the primary needs of each health worker, the provision of Personal Protective Equipment (PPE), then determining the priority scale for granting PPE to take precedence over the provision of incentives (although this is also necessary). Do not let the vanguard lack weapons in handling a pandemic, especially since there is no vaccine.

Legal certainty is an important instrument in ensuring the safety of health workers so that the government cannot take arbitrary actions against the assignment of health workers. Especially if you look at the legislation regarding health workers, it seems that no one has yet regulated the guarantee of legal certainty for health workers even though Law Number 36 of 2014 concerning Health Workers is already in place. Therefore the Government needs to issue implementing regulations and technical guidelines for the Health Workforce Law and other laws governing legal protection and work safety for health workers. In line with this, Chairman of the Indonesian Lung Doctors Association Agus Dwi Susanto, stated that the number of lung specialist doctors was limited.

The Covid-19 pandemic has caused deep sorrow for the world community and Indonesian society. At present, Indonesia is entering a critical period of the Covid 19 pandemic. Based on data published by the Ministry of Health of the Republic of Indonesia on April 6, 2020, for the world level there are more than 1.4 million positive cases of Covid-19 which caused 81,889 fatalities. people as of April 8, 2020.

As for the territory of Indonesia, there were 2,9564 positive cases of Covid-19 that caused as many as 240 deaths. This data certainly makes us sad because it clearly shows the fact that the distribution of Covid-19 is very aggressive. In the critical period of the Covid-19 pandemic, Doctors were a profession in the vanguard and fought directly against Covid-19. Under these conditions, doctors sometimes had to sacrifice their lives to protect the public from the spread of the Covid-19 pandemic.

Based on data published by the Indonesian Doctors Association on April 6, 2020, there were 24 Doctors (6 of whom were Dentists) who died in the middle of the Covid-19 pandemic. Indeed, it is appropriate if we are very sad because of the loss of the best sons and daughters of the Indonesian people who are willing to devote themselves to serving public health and even sacrifice their lives. The doctor's profession is a noble profession and at the moment the glory of that profession is increasingly manifested in the midst of the Covid pandemic crisis. -19. Doctor profession

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is a noble profession. However, this noble profession sometimes in carrying out his duties closely with risk factors. Covid-19 as a virus that is very aggressive in its distribution so that the doctor is getting closer to these risk factors. Nevertheless, there are three things that can be used as guidelines by doctors in order to minimize risk. Those three things are Medical Professional Standards, Informed Consent, and Medical Records.

5. Medical Professional Standards as Guidelines for Doctors in Critical Pandemic Period 19

Professor HJJ Leenen in his book entitled "Gezondheidszorg en Recht een Gezondheidsrechtellyke Studie" explains the elements of the Medical Professional Standards consisting of:

a. Zorgvuldig handelen (conduct carefully / thoroughly);
b. Volgens de Medische standard (according to medical measurements);
c. Gemiddelde bewaamheid van gelijke Medische categorie (average ability compared to the same category of medical expertise);
d. Gelijkie omstandigheden (same situation and condition);
e. Met middelen die in redelijke verhouding staan tot het concreet handelingsdoel (a means of effort that is comparable or proportionate to the concrete goal of the medical action or act).

Doing thoroughly and thoroughly is the main element that must be considered by doctors, especially during the Covid-19 Pandemic. In this regard, there are several things that can be used as guidelines:

a. Doctors must always prioritize social distancing

Based on data that has been published in various mass media, some doctors who died are doctors who open private practices. So, there is a possibility that the doctor is unaware that the patient who is accessing his health services is a Covid-19 carrier. Therefore, in such a situation the precautionary element of the Doctor must take precedence in carrying out his profession. Details should also be the focus of attention for the doctor, for example to always wash hands and maintain cleanliness.

b. Using Personal Protective Equipment (PPE)

Doctors absolutely must use Personal Protective Equipment (PPE) when conducting medical treatment in the critical situation of the current Covid 19 pandemic. The problem is the limited availability of PPE. One reason is the panic from the community so that people scramble to get PPE. As a result, PPE that should have been used by doctors was actually used by the community.

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16 Harif Fadhillah et al, - Regulation of Health Workers in the Legislation and the Principle of Legal Certainty, - Soepra Journal of Health Law Vol. 05 No. 1, 2019, p. 161
In March 2020, the Task Force for the Acceleration of Covid-19 Handling issued a Standard Recommendation on the Use of PPE for Handling Covid-19 in Indonesia. This should be widely disseminated, including the general public, so that there is an understanding of the use of PPE.\textsuperscript{17}

In a critical condition like now, it is not fair to only demand the Government to provide PPE for doctors. This should be a joint responsibility. PPE is a doctor's right that must be fulfilled for his safety and to be able to work in accordance with his professional standards as mandated in Article 50 letter (b) of the Law of the Republic of Indonesia Number 29 of 2004 concerning Medical Practices which states that, -Doctor or Dentist in carrying out medical practice has the right to provide medical services according to professional standards and operational procedure standards."

This is also expressly regulated in the Regulation of the Minister of Health of the Republic of Indonesia Number 11 of 2017 concerning Patient Safety. Professor van der Mijn and Professor Leenen in one of their literatures emphasized the importance of fulfilling the right of doctors to work in accordance with medical standards. In the critical condition of the Covid-19 pandemic as it is today, the availability of PPE for doctors is an essential element that must be fulfilled so that doctors can work in accordance with medical standards in order to fulfill the element of safety for doctors.

c. Pay attention to health

Doctors as a noble profession are always called to dedicate their knowledge and energy when health problems occur. However, often because he was too eager to devote himself, doctors ignored his health condition. This should be a concern because Covid-19 is classified as a virus that is very fast in transmission, especially to people who are elderly and in poor health.\textsuperscript{18}

Article 16 of the Indonesian Medical Ethics Code requires doctors to always maintain their health, so that they can work well. But often, the workload of doctors is too excessive so that these obligations cannot be carried out properly. Workload and work time are actually regulated in Article 77 of Law Number 13 Year 2003 concerning Manpower which divides work time into two schemes, namely: 7 hours 1 day and 40 hours 1 week for 6 working days in 1 week or 8 1 hour and 40 hours 1 week for 5 working days in 1 week.

\textsuperscript{17} Amirullah et al Wabah Corona, Lung Specialists in Indonesia Only 1,106 people, 2020, accessed from https://nasional.tempo.co/read/1322827/wabah-corona-dokter-spesialis-paru-di-indonesia-cuma-1-106 people on March 26, 2020

However, this provision is difficult for doctors to implement because doctors often face legal obligations that they cannot avoid when carrying out their profession. For example, a doctor receives emergency calls outside of work time (legal obligations under Article 531 and Article 304 of the Criminal Code). In response to this, a health facility policy is needed to regulate the workload and working time for doctors to remain proportionate in the critical period of the Covid pandemic 19.

Doctors in carrying out their profession must always be in accordance with medical measures consisting of medical science and experience in the medical field. This is consistent with Professor Leenen's statement stating that, "De Medische standardized is worden omschreven als op grond van wetenschap en envaring een gewezen wijze van Medisch handelen in het concrete geval" ("A way of carrying out medical actions in a concrete case according to a certain measure based on medical science and experience").

Medical science and experience in the medical field, both obtained while studying at the medical school, or the scientific development of collegium and various other scientific activities are guidelines that must always be adhered to in handling the Covid pandemic 19. Therefore, other than as a noble profession Doctor is also a profession that is rich in knowledge because every time it is obliged to always develop their knowledge.

This is due to the development of problems in the health sector which is always moving quickly and dynamically. This obligation has been mandated in Article 17 of the Indonesian Medical Ethics Code which states that, "Every Doctor must always follow the development of medical / medical science and technology". The wisdom of the Covid 19 pandemic is the media and scientific development opportunities for the doctor profession and presenting the doctor's professionalism.

In carrying out his profession, doctors must have the ability average or average compared to the same category of medical expertise in the same situations and conditions. For example, a General Practitioner who works in a Class A Hospital in Jakarta is expected to have the same standards compared to other General Practitioners who also work in a Class A Hospital in Jakarta when facing the same case.

Therefore, working in accordance with Medical Professional Standards is not only a right that must be fulfilled for every Doctor, but also an obligation that must be carried out for every Doctor. This is confirmed in Article 50 letter (a) of Law Number 29 Year 2004 concerning Medical Practices which states that, "Doctors or Dentists in carrying out medical practices have the right to obtain legal protection
as long as carrying out their duties in accordance with professional standards and operational procedure standards.19"

Whereas Article 51 letter (a) of the Medical Practice Law states that, "Doctors or Dentists in carrying out medical practices have an obligation to provide medical services in accordance with professional standards and standard operating procedures and patient medical needs.

Fulfillment of Medical Professional Standards in carrying out their duties is an absolute element for Doctors. Related to the implementation of standards, the legal method requires an average ability, but the ethical method requires the highest ability for a doctor to fulfill it. This is as stated in Article 2 of the Indonesian Medical Ethics Code which states that, "A Doctor must always strive to carry out his profession in accordance with the highest professional standards."

The explanation of these provisions is, "What is meant by the highest measure in carrying out the latest medical profession, which is in accordance with the development of Medical Science and Technology, general ethics, medical ethics, law and religion, in accordance with the level / level of health services, as well as local conditions and situations".

- Based on these various things it can be concluded that the Doctor is a profession that requires high discipline for the bearers of his profession.

Covid 19 Pandemic is a - Candradimuka crater - for the profession of Doctor to discipline to comply with standards in carrying out his profession. Of course, efforts to uphold this professional discipline must also be supported by all parties, both Government, Private and Community. This form of support, for example, is to provide adequate health facilities and infrastructure for doctors, including by creating a conducive work environment. In carrying out his profession, doctors must consider means of effort that is comparable or proportionate to the concrete objectives of the medical action or act. That is, in carrying out medical actions to patients, required maximum efforts from doctors in accordance with scientific standards and experience in the medical field.

The relationship between the patient and the doctor is the majority is inspanningsverbintennis and is not a resultaatverbintennis. Inspanningsverbintennis implies engagement as the achievement of maximum effort. While the resultaatverbintennis is an engagement whose achievements are in the form of results. Indonesian people still think that the relationship between doctors and patients is a result ofverbintennis. That is, patients who are in sick condition come to the

doctor and the result is healing so that the demand for the doctor to cure the illness completely is an obligation that must be fulfilled by the doctor.

This view must be straightened out. The majority of relationships between patients and physicians are inspectorally inspired. That is, in this connection what is emphasized is the maximum effort of the doctor based on scientific standards and experience in the medical field. Regarding the Covid-19 pandemic, a doctor cannot guarantee the success of his medical treatment when treating patients. As long as the doctor has made the maximum effort in accordance with medical measures (science and experience in the medical field), the medical action cannot be blamed. This is due to several factors that have the potential to cause failures in medical treatment, including medical risks, medical accidents, and contributors of negligence from patients.

6. Informed Consent as the Foundation of Medical Action in the Crisis of the Covid Pandemic 19

Informed consent consists of the right to information and the right to give consent. Informed consent is the foundation in the relationship between doctors and patients. In Indonesia there are regulations that specifically (lex specialis) regulate informed consent namely, Decree of the Minister of Health of the Republic of Indonesia Number 585 of 1989 concerning Approval of Medical Measures, which is then updated with Regulation of the Minister of Health of the Republic of Indonesia Number 290 of 2008 concerning Approval of Medical Measures.

Informed consent is an interesting issue related to the Covid-19 pandemic because some patients convey information that is not honest (or cover up some information) when accessing medical services to doctors. As a result, in addition to the therapy given by the doctor to be not optimal, the doctor has the potential to be exposed to Covid-19 if it turns out that the patient he is serving is a carrier of Covid-19. This is cause for concern because several laws and regulations have mandated patients to submit information honestly when accessing medical services. Article 50 letter (c) of the Medical Practice Law states that, "Doctors or Dentists in carrying out medical practices have the right to obtain complete and honest information from patients or their families." Article 7 paragraph (2) letter (a) Regulation of the Minister of Health of the Republic of Indonesia Number 11 of 2017 concerning Patient Safety requires patients and their families to provide true, clear, complete and honest information. Therefore, this provision needs to be re-socialized to patients and their families in order to carry out health education to patients in order to realize smart patients and contribute
to improving the quality of health services. In addition, communication patterns between doctors and patients must also be improved. The majority of medical disputes are caused by communication that is not in harmony between the doctor and the patient. For example, doctors do not provide explanations, or minimal in giving explanations, or provide explanations using language styles that are not understood by patients.

C. CONCLUSION

In Indonesia there are regulations that specifically (lex specialis) regulate the medical record, namely Decree of the Minister of Health of the Republic of Indonesia Number 749a of 1989 concerning Medical Records, which is then updated with Minister of Health Regulation No. 269 of 2008 concerning Medical Records. Article 1 Regulation of the Minister of Health of the Republic of Indonesia Number 269 of 2008 concerning Medical Records states that, "Medical records are files containing records and documents about patient identity, examination, treatment, actions and other services that have been provided to patients." Gemala R Hatta explained the benefits of medical records in the ALFRED mnemonic consisting of: Administrative values, Legal values, Financial of fiscal values, Research values, Education values, Documentary values. Regarding the Covid-19 pandemic, the research, education and documentation functions of the medical record are very prominent. In treating Covid-19 patients, the Doctor must write completely and immediately in the medical record, the handling procedures for Covid-19 patients that have been carried out (examination, treatment, actions, and other services that have been provided to Covid-19 patients). Related to the handling of Covid-19 patients, the contents of the medical record are important documentation as objects of research and development of medical science and as a reference or learning material for the doctor profession.

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