Legal Risks of Nurses' Negligence in Interpreting Drug Prescriptions

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Abstract

Errors in the medication administration process are a form of medication error that has the potential to jeopardize patient safety. Nurses as health workers who are directly responsible for these actions have legal, ethical, and professional obligations in their implementation. This study aims to identify the factors that cause nurses' negligence in reading drug prescriptions and examine the forms of legal risks that may arise as a result of such negligence. Qualitative descriptive method was used in this study. Various literatures, such as books, journals, and regulations, were analyzed. The study showed that medication errors can be caused by illegible prescription writing, similarity of drug names, high workload, lack of training, and lack of interprofessional coordination. The legal risks that can be imposed on nurses fall into two categories, namely administrative sanctions and criminal sanctions. Negligence in reading drug prescriptions not only risks endangering patients clinically but also poses serious legal consequences for nurses. Therefore, nurses need to carry out their duties with care and always comply with professional standards to reduce the risk of errors while protecting themselves from lawsuits.

Keywords:
Nurse, Medication, Patient, Negligence

1. Introduction

Health is a universal right given to all people and guaranteed by the state as stated in Article 28H paragraph (1) and Article 34 paragraph (3) of the 1945 Constitution of the Republic of Indonesia. The state has the responsibility to ensure the implementation of safe, quality, and equitable health services. This is emphasized in Law Number 17 of 2023 concerning Health, specifically in Article 4 which states that everyone has the right to obtain safe, quality and affordable health services. In relation to health services, nurses have an important role as implementers of nursing care (Rini & Fadlillah, 2021), including in the process of drug administration (Tampubolon & Pujianto, 2018). This task requires accuracy, professional responsibility, and compliance with applicable operational standards.

However, in practice there are still many cases of medication errors (Salar et al., 2020), namely errors in the treatment process that can occur at the stage of

prescribing, preparing, or administering drugs. One form of medication error that often occurs is nurses' negligence in reading drug prescriptions. This negligence can be in the form of misrecognizing the name of the drug, dose, method, or time of administration, even to the point of misidentification of the patient. This can certainly have a serious impact on the patient's health condition, as well as lead to potential legal liability for nurses. Article 288 paragraph (1) of Law No. 17 of 2023 emphasizes that medical personnel and health workers are obliged to carry out practices based on professional and service standards. If there is a violation or negligence, then according to Article 464, nurses may be subject to administrative, civil, or criminal sanctions.

A real case occurred at the Lumajang District Hospital in 2020, when a nurse gave medicine to a patient named Asmuni (KompasTV.com, 2020) , which turned out not to be the medicine under his name. Although the hospital stated that the medicine was an antiviral and vitamin that was also given to other COVID-19 patients, this mistake was still considered a form of negligence in verifying the prescription and patient identity. A similar incident occurred in a hospital in Central Sulawesi Province, where a nurse mistakenly administered medication to an inpatient, leading to poor therapeutic outcomes and jeopardizing patient safety. These two cases show that nurses' errors in reading prescriptions not only harm patients physically and psychologically, but also open up opportunities for lawsuits against the nurses concerned.

The focus of this study is on the factors that cause such negligence to occur in nursing practice and the form of legal risk that can be imposed on nurses due to negligence in reading drug prescriptions, as well as what. This question is important to answer given its impact not only on patient safety, but also on the legal protection and professionalism of nursing staff.

Thus, the purpose of this study is to analyze the forms of responsibility and legal risks that can arise due to nurses' negligence in reading drug prescriptions, as well as to identify the elements that cause such errors to occur in the practice of drug administration in homes. in the practice of drug administration in hospitals or health care facilities.

The following are the theoretical benefits of this research: Contributing materials in the development of health law science, especially related to the liability of nursing personnel in medical services. However, practically, it is expected that the findings of this study will provide benefits for nursing education institutions, hospitals, and health workers to improve compliance with service standards, as well as strengthen the medication error prevention system to ensure patient safety and legal protection for nurses.

2. Literature Review

Errors in reading drug prescriptions represent a critical legal and professional issue in nursing. The responsibility of accurately interpreting and administering medications lies at the core of nursing practice. Nurses are legally and ethically obligated to verify that every drug administered aligns with the physician's

instructions. When prescription errors occur due to misreading, the nurse may be held liable for breaching professional standards (Ogston-Tuck, 2020).

Prescription-related negligence often arises from illegible handwriting, ambiguous abbreviations, or failure to verify dosage and drug names. According to Griffith (2020), such negligence falls under civil tort law and may result in legal action if patient harm occurs. Therefore, understanding key legal concepts such as duty of care and standard of care is essential for nursing professionals.

In the landmark case Prendergast v Sam & Dee (1989), both the physician and pharmacist were found liable due to medication errors stemming from unreadable prescriptions. Nurses, as part of the medication administration chain, carry the responsibility to question unclear instructions. Failure to do so may be interpreted not only as clinical negligence but as a violation of legal and ethical obligations (Ogston-Tuck, 2020).

Beyond civil liability, nurses may also face criminal charges if prescription errors result in severe harm or death. Moradi and Shademanfar (2016) assert that criminal accountability in drug administration encompasses general and specific responsibilities. These legal obligations highlight the need for alignment between medical regulations and criminal law to protect patient safety.

Professional codes of conduct, such as those set by the Nursing and Midwifery Council (NMC), emphasize safe practice, accountability, and competence. Breaching these codes can lead to disciplinary measures, including revocation of licensure. Nurses must demonstrate critical judgment, risk assessment, and professional integrity when handling drug prescriptions (NMC, 2018).

Proactive strategies are vital in mitigating legal risk. The use of electronic prescribing systems can reduce legibility-related errors. Ongoing training in medication protocols, including the "Five Rights" of drug administration, and fostering open interprofessional communication can improve safety and legal compliance (American Medical Compliance, 2025).

Accurate documentation plays a pivotal role in legal protection. Actions not recorded are legally deemed not performed. Nurses must record essential details such as dosage, administration time, patient reactions, and corrective measures taken after any error (Brent, 2015). Proper records serve as legal evidence of diligence and accountability. In conclusion, negligence in reading drug prescriptions poses serious legal risks for nurses. This issue extends beyond clinical practice into legal, ethical, and organizational domains. Strengthening education, documentation practices, and institutional support systems is essential to uphold patient safety and safeguard nurses against legal repercussions.

3. Research Method

This study used a qualitative approach. *library research* (Septia et al., 2023) to review and analyze the legal risks of nurses' negligence in reading drug prescriptions. The qualitative approach was chosen because the focus of this research lies on an in-depth understanding of legal concepts, ethics of the nursing profession, and regulations governing the practice of drug administration in health care facilities. The

literature study method was used because all data were collected and analyzed from various relevant written sources, both in the form of laws and regulations, scientific journals, reference books, and professional documents that have been legally published.

The data in this study were sourced from primary legal materials, namely Law of the Republic of Indonesia Number 17 of 2023 concerning Health, the Civil Code (KUHPerdata), specifically Article 1365 concerning tortious acts, and Regulation of the Minister of Health Number 72 of 2016 concerning Pharmaceutical Service Standards in Hospitals. In addition, secondary legal materials such as health and nursing law textbooks, as well as scientific articles from accredited national journals and reputable international journals were used. Tertiary legal materials such as legal dictionaries and health law encyclopedias were also utilized to strengthen the interpretation of key concepts. Data collection techniques were carried out through *documentary study*, namely by identifying, reviewing and evaluating the content of literature that has a direct relationship with the research topic. Data sources were obtained through university libraries, electronic databases such as Garuda Ristekbrin, Google Scholar, and academically recognized health law journals. The content analysis method was used to analyze the data.

The content analysis method was used to conduct data analysis by categorizing the content of relevant legal sources, identifying key themes related to nurse negligence and legal liability, and interpreting the information within the framework of Indonesian health law. To ensure the validity and credibility of the data, legal interpretation and real-life case studies were used. This approach enabled the researcher to develop a comprehensive and objective understanding of the legal risks faced by nurses due to negligence in reading medication prescriptions, as well as contributing to the development of health law literature in Indonesia.

4. Result

4.1 Causes

Accuracy in interpreting and implementing medical instructions, including reading medication prescriptions, is an important responsibility for nurses (Harefa, 2019) . This process not only impacts the success of therapy, but also has legal consequences if errors occur. One of the most frequent medical incidents in nursing practice is medication error, which is an error in drug administration that could have been prevented. The Ministry of Health of the Republic of Indonesia explains that this incident includes errors ranging from writing prescriptions (Sabila et al., 2018) , copying instructions, preparing drugs, to the process of giving them to patients. Errors in the drug administration process can come from various factors, such as inappropriate dosage (Prabowo, 2021) , incorrect patient identification (Solehudin & et al, 2023) , incorrect time of administration (Feriani, 2020) , inappropriate dosage form (Elis Susilawati, 2022) , inappropriate use of solvents, to unclear packaging labels. Violation of standard operating procedures (SPO) in the act of drug administration (Feriani, 2020) is also a common cause of medication errors. All these

forms of errors not only interfere with the effectiveness of treatment (Juwita et al., 2019) , but can also jeopardize patient safety and have legal implications for nursing personnel. Ineffective communication (Anam et al., 2022) is a major cause of medication errors. Inaccuracy in interpreting the doctor's handwriting or miscommunication between health workers and patients (Budi Kusumawardani et al., 2023) can lead to erroneous interpretations. Another problem is the suboptimal drug management system, such as the absence of digitized prescriptions, an unorganized storage system, and the high workload and limited understanding of pharmacology of health workers. All of these conditions increase the likelihood of errors. Some factors that exacerbate the situation include the similarity of packaging between products from manufacturers (LASA-Look-Alike Sound-Alike drugs) (Haryadi & Trisnawati, 2022) , patient non-compliance with usage rules (Ariani & Maulana, 2016) , to patient family interventions that interfere with the concentration of pharmaceutical personnel during drug delivery. The non-conducive service environment is also a trigger for the increased risk of errors in drug dispensing. Common forms of errors in prescription (Sabarudin et al., 2015) found in the field include: not including the rules of use (signa), writing drug names that are unclear or only in the form of codes, the absence of drug doses, not listing the patient's age, the absence of a doctor's signature, prescribing drugs that are no longer produced, and not mentioning dosage forms. In addition, the use of drugs with the same effect but different names in one prescription, as well as not mentioning the date of the prescription are also classified as serious errors. The impact of medication errors can be fatal. Based on WHO data, medication errors were the third leading cause of death in the United States in 2013, with more than 250,000 deaths. A follow-up WHO study in 2016 in Sweden showed that almost half of the medication administration process had errors. In Indonesia, a report by the Ministry of Health and the Indonesian Hospital Association (PERSI) in 2008 stated that medication errors occupied the highest position of events affecting aspects of patient safety in health care facilities, reaching almost a quarter of the overall incident reports. Based on the Indonesian Minister of Health Decree No. 129/Menkes/SK/II/2008 concerning Minimum Hospital Service Standards, errors in drug administration are incidents that cannot be tolerated. The ideal healthcare goal (Salsabila & Dhamanti, 2023) is to reduce the incidence of medication errors to zero. Risks from errors can vary from minor injuries to sentinel events that include permanent disability or death. In a legal context, negligence in reading prescriptions that leads to medication errors can be sanctioned in accordance with the provisions in Law Number 17 of 2023 concerning Health. Article 270 paragraph (3) states that medical personnel or health workers who commit negligence may be subject to administrative (Widiastuti et al., 2019), disciplinary, and/or criminal sanctions. Administrative sanctions include reprimands, written warnings, administrative fines, suspension of practice licenses, and revocation of practice licenses. If the result of the negligence causes serious injury or death of the patient, the health worker may be subject to criminal sanctions as stipulated in Article 438 of the same law.

Nurses as a profession that plays a direct role in drug administration have a great responsibility to ensure that errors do not occur. The lack of pharmacological

knowledge is one of the causes of negligence which can lead to legal sanctions. Therefore, increased training, strengthening of digital documentation systems, and adherence to the "five right" principles (Pakpahan et al., 2023) (right patient, right drug, right dose, right time of administration, and right method of administration are important steps to prevent errors (Widiastuti et al., 2019) and avoid legal risks.

4.2 Legal Risks

Nurses' negligence in reading prescriptions is a form of malpractice that can endanger patient safety and damage the quality of health services. In nursing practice, errors in prescription interpretation not only have clinical impacts but also have legal implications, both administratively (Nasution et al., 2022) , disciplinary (Wahyudi, 2015) , and criminal. Law Number 17 of 2023 concerning Health emphasizes that health workers are obliged to provide services according to professional standards and the applicable code of ethics. Article 189 paragraph (1) concerning hospital obligations and continued paragraph (2) concerning the provision of administrative sanctions due to violations committed in article 189 paragraph (1) which is detailed in article 283 paragraph [(3), (4), (5), (6)] concerning administrative sanctions.

Administrative sanctions can be in the form of reprimands, written warnings, administrative fines, suspension of practice licenses, or even revocation of practice licenses. These sanctions are imposed when nurses are proven to violate procedural standards, including negligence in reading prescriptions that lead to the administration of the wrong medication. In conditions where such negligence causes serious harm to the patient such as disability, serious injury, or death the nurse may be subject to criminal sanctions. This is stipulated in Article 438 of the same law, which opens up the possibility of criminalization based on the degree of consequences and the proven elements of negligence.

In addition, the implications of such errors can also lead to the revocation of legal documents for nurse practice, such as the Registration Certificate (STR) (Safitri et al., 2020) and *Nurse* Practice *License* (SIPP) *("Nurse Practice License Policy (Study on the Implementation of the Nurse Practice License Policy in Lamongan Regency)," 2020*) . The professional registration letter issued by the Indonesian Health Workers Council is proof that the nurse has been competency verified (Prihandhani & Gandari, 2019) , while the SIPP issued by the local government authorizes nursing practice in health care facilities. Revocation of this document means that nurses lose the legal right to practice nursing professionally.

Factors causing negligence in reading prescriptions include high workload, inaccurate communication between doctors and nurses, limited pharmacological knowledge (Lovia et al., 2019) , and prescription documentation systems that are still manual or not clearly legible. These errors often occur in the process of verifying patient identity (Pringgayuda et al., 2021) , drug selection (Mujiati et al., 2022) , dose, time, and route of administration (Setianingsih & Septiyana, 2020) . Therefore, the application of the principle of "twelve correct drug administration" is a crucial component in reducing the risk of errors and their legal consequences. In an effort to

mitigate risk, hospitals and health care institutions can take proactive steps through strengthening the medical incident reporting system, routine training for nurses (Pambudi et al., 2018) , as well as implementing an electronic system on prescriptions (Nuke Fendiana & Roma Ave Maria, 2021) and medical documentation (Henry Adrian et al., 2023) . These efforts not only serve as an improvement in service quality (Ahmad Fachrurrozi et al., 2023) , but also as legal protection for health workers (Gegen & Santoso, 2022) . Article 437 of Law Number 17 of 2023 stipulates that medical personnel and health workers are entitled to legal protection while carrying out their duties in accordance with professional standards (Nurhayati et al., 2020) and applicable legal provisions. However, this right does not absolve health workers from responsibility if they are proven to have committed negligence.

4.3 Criminal Sanctions

Nurses have an important role (Ahda & Hidayah, 2021) in the process of administering drugs to patients (Suryani & Permana, 2020) , so negligence in reading or understanding drug prescriptions can have serious impacts, not only for patient safety (Halawa et al., 2021) but also from the legal side that must be faced. Legally, nurses can be held criminally liable if their actions meet several conditions in accordance with the provisions contained in statutory regulations. First, the nurse's actions must include a violation of the law. This means that the act is contrary to the applicable rules of law, especially if the health services provided are not in accordance with established professional standards and procedures. article 274 concerning standard operational procedures and professional ethics and patient health needs.

Second, nurses must be aware and understand the consequences of their actions. In other words, nurses realize that their actions have the potential to cause harm or endanger patients so that they cannot avoid legal responsibility. This element shows that legal liability applies to nurses who consciously act and know the risks that may arise. Third, there must be an element of fault, either due to negligence or willfulness. The fault can be in the form of intentional actions or as a result of negligence, for example not following standard operating procedures or not performing actions with full accuracy. This element of fault is the basis for assessing criminal liability when harming patients. Fourth, there must be no lawful justification or excuse. Nurses cannot defend themselves with reasons such as emergencies or compulsion that exempt them from liability. If these reasons are not found, the legal process can continue according to the applicable provisions. If the four conditions are met, then the nurse can be subject to legal sanctions ranging from examination to punishment through court decisions. The legal basis for the imposition of this criminal sanction is stated in Article 359 of the Criminal Code, which states that "anyone whose negligence causes the death of another person may be sentenced to a maximum of five years' imprisonment or one year's confinement." In the context of legal liability for medical personnel and health workers, Article 308 of Law Number 17 Year 2023 confirms that if a medical personnel or health worker is suspected of committing an unlawful act in health services and is potentially subject to criminal sanctions, the

first step that must be taken is to request a recommendation from the Health Workers Council as referred to in Article 304. The same applies to civil cases, i.e. if the health worker's actions are considered detrimental to the patient, a recommendation from the panel is still required before the legal process continues. For criminal cases, the recommendation can only be issued after investigators, either from the Police or Civil Servant Investigators (PPNS), submit a written request. As for civil cases, the application is submitted by medical personnel or their proxies in response to a lawsuit from the patient or the patient's family. The content of the recommendation will assess whether the practices carried out by medical personnel or health workers are in accordance with the applicable competency standards, service quality, and work implementation procedures. If the recommendation states that the action is not appropriate, then the investigation or lawsuit process can continue. This recommendation must be issued within a maximum of 14 days in terms of working days since the submission is received. If during this period the tribunal does not issue a recommendation, it is legally considered that the recommendation has been given and an investigation can be conducted. However, this provision does not apply if the alleged criminal offense is not directly related to the delivery of health services.

4.4 Impact

Medication errors (Manik, 2021) are a serious threat to patient safety (Ningsih & Endang Marlina, 2020) and can have legal repercussions for the nurses involved. Patients can experience injuries, severe allergic reactions, medical complications, and even death. Meanwhile, nurses risk disciplinary sanctions, criminal and civil lawsuits, and severe psychological distress. Other impacts include loss of public trust (Zhahera et al., 2023) in health institutions and financial losses due to additional medical expenses and lawsuits. According to WHO (2017), prevention efforts are essential, including regular training for nurses (Putri et al., 2018) , the use of technology such as e-prescribing and barcode systems, and reporting incidents without sanctions. Effective communication between medical personnel and strict implementation of standard operating procedures (SOPs) (Taufiq, 2019) are also key in preventing medication errors. The ethics of the nursing profession (Rizal, 2019) demands that every action be carried out with the principle of prudence and oriented towards patient safety (Ningsih & Endang Marlina, 2020) (non-maleficence). Law No. 38/2014 on Nursing explicitly states that nurses who are negligent to the detriment of patients can be subject to legal sanctions. In practice, medication errors often occur due to high workload, lack of medical personnel, weak documentation systems, and lack of training. The impact not only affects the physical condition of patients, but also their mental health, such as trauma, anxiety, and loss of trust in health workers. On the other hand, medical personnel who make mistakes also experience psychological pressure in the form of stress, guilt, and fear of legal sanctions. Health institutions may also suffer reputational damage, decreased accreditation, and loss of public trust. Therefore, prevention must be done through a systematic approach that includes strengthening regulations, continuous training, effective

interprofessional communication, and active patient involvement in the treatment process. Patient safety is a shared responsibility and should be a top priority in every nursing service.

5. Conclusion

Nurses' negligence in understanding drug prescriptions is a form of medication error that can threaten patient safety and lead to serious legal issues. Some of the main causes of this negligence include prescription writing that is difficult to read, similar names between drugs, high workload, limited training, and lack of communication between health workers. Nurses who make mistakes can be subject to administrative sanctions such as reprimands to revocation of their license to practice, and can also face criminal sanctions if the mistake has a fatal impact such as serious injury or death of the patient. To avoid this, it is necessary to improve the ability of nurses through regular training, utilization of information technology, safe incident reporting systems, and adherence to appropriate and professional work principles. Safe and quality nursing services can only be realized if they are carried out carefully, responsibly, and according to professional standards.

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