

The Regulation Of Autopsy In Indonesia

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Abstract: Autopsy is one part in the process of proving criminal acts in Indonesia. the results of the autopsy became scientific evidence that was difficult for the criminal to disprove. The implementation of the autopsy provides benefits that are benefits to physicians and health care organizations, benefits to the family of the deceased, benefits to public health, benefits to medical education, benefits to medical discovery and applied clinical research and benefits to basic biomedical research. The professionalism of police investigators in conducting autopsies is needed at the verification stage at the investigation level in order to reveal the truth in a criminal act of murder.

Keywords: Autopsy, Criminal, Indonesia.

1. INTRODUCTION

First recorded in the 19th century in France Josep Bonaventura Orfila in a trial with poisoning experiments on animals and with his toxicology book could convince the judge, thus eliminating the notion that death due to poisoning was caused by mysticism. In the mid-19th century, the first time chemistry, microscopy, and photography were used in the investigation of criminal cases (W.G Eckert, 1980). This revolution is a picture of the responsibility of investigators in law enforcement (C.S.T. Kansil, 1991) Alphonse Bertillon was the first scientist to systematically examine the size of the human body as a parameter in personal identification. Until the early 1900s, Bertillon's method was very effective in personal identification. Bertillon is known as the father of criminal identification (P.D. Anderson, 2000) Francis Galton first examined fingerprints and developed a classification method of fingerprints. The results of his research are now used as a basic method in personal identification. Leone Lattes is a professor at the institute of forensic medicine at the University of Turin, Italy. In investigating and identifying a dried bloodstain, Lattes classified blood into 4 classifications, namely A, B, AB, and O (P.D. Anderson, 2000). The basis of this classification is still known to us and is widely used today. In subsequent developments more and more fields of science were involved or utilized in the investigation of a criminal case for the benefit of law and justice. This knowledge is often known as Forensic Science. Saferstein in his book *Criminalistics an Introduction to Forensic Science* argues that forensic science in general is the application of science to law (R. Saferstein. 1995) Forensics is usually always associated with criminal acts (acts against the law). In forensic science books in general, forensic science is defined as the application and use of certain knowledge in the interests of law enforcement and justice. In investigating a crime case, observation of physical evidence and interpretation of the results of the analysis (testing) of evidence is the main tool in the investigation (Cut Khairunnisa, 2014) Forensic Medicine is one of the specialized branches of medicine that studies the use of medical science for the sake of law enforcement and justice (Budianto A, et al, 1997). In the past people were more familiar with forensic services with pathological services, namely forensic services for victims who died. In assisting the judicial process in order to explain a criminal case, a doctor also has an obligation that is no less important than humanitarian duties.

The victim is adequate, the defendant needs to be rewarded with receiving the appropriate punishment (in accordance with the proven crime), while the innocent person must be protected from the punishment he should not have received (Rumancay S, et al, 2016) Forensic science is categorized into natural science and is built based on natural science methods. In the view of natural science something is considered scientific only and only if it is based on facts or experience (empiricism), scientific truth must be proven by everyone through his senses (positivism), analysis and results can be poured in a reasonable manner, both deductive and inductive in structure Certain languages that have meaning (logic) and their results can be communicated to the wider community without being easily or without being shaken (critics of science) (Budianto A, et al, 1997). In scientific proof and examination, we are familiar with the terms forensic science and criminology. In general, forensic science can be interpreted as the application or use of certain knowledge for the sake of law enforcement and justice. The existence of scientific proof is expected by the police, prosecutors, and judges not to rely on the recognition of suspects or living witnesses in investigating and resolving a case. Because living witnesses can lie or are told to lie, then based solely on the witness's statement, it cannot guarantee the achievement of the objective of establishing the truth in the criminal proceedings (Cut Khairunnisa, 2014). A post-mortem (forensic autopsy) is actually needed to find out and determine the exact cause of death of the victim, which leads to the goal of finding material truth or true truth in the examination of criminal cases. The cause of death of a victim for a crime of murder will correlate with criminal liability and sanctions. The crime of murder as a prohibited material offense is the result of an act, namely the loss of another person's life. The causal relationship between the actions of the perpetrators and the consequences caused according to medical science should be proven through a post-mortem examination (forensic autopsy) (Y. A. Triana Ohoiwutun, 2016). The contribution of Forensic Medicine in assisting the completion of the investigation process of criminal cases involving human lives, is poured in the form of *Visum Et Repertum* (Idris AM. Et al, 2011). *Visum Et Repertum* is a substitute for evidence in article 184 of the Criminal Procedure Code (KUHAP) classified as documentary evidence (Sapardja SE, 2016) This *Visum Et Repertum* can only be made if the police (investigators) directly submit a Letter of Request for *Visum Et Repertum*, as mentioned in article 133 of the Criminal Procedure Code (1) In the case of investigators for the benefit of the judiciary handling a victim whether injured, poisoned or dead suspected because the event is a criminal offense, he has the authority to submit a request for information from a judicial medical expert or doctor

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or other expert. (2) Requests for expert statements as referred to in paragraph (1) shall be made in writing, which in the letter is explicitly stated for examination of wounds or examinations of corpses and / or post-mortem examinations (Soerodibroto S, 2002)

2. Legal Arrangements of Autopsy

Scientifically proven in the process of investigating criminal cases is the most reliable evidence in the criminal justice process, especially in the disclosure of cases or perpetrators in the investigation process. This is acknowledged by some forensic experts where if evidence is not found in court in witnesses, the results of examination of evidence become the primary evidence. Investigators in the effort to search for and collect evidence have the authority as in Article 7 paragraph (1) letter h of the Criminal Procedure Code which states that bringing in experts is needed in connection with the examination of the case and Article 120 paragraph (1) of the Criminal Procedure Code states that if the investigator considers it necessary, he can ask the opinion of experts or people who have special expertise (Andi Hamzah, 2011) The expert's statement is intended to make light of a case for the purpose of examination as stipulated in article 1 point (28) of the Criminal Procedure Code which states that "Expert's statement is a statement given by a person who has special expertise about the matter needed to make light of a criminal case for importance of inspection ". Before the expert gives an expert statement, the expert must take an oath before the investigator to provide information according to his best knowledge. However, if due to clear reasons in accordance with applicable regulations, the expert may refuse to provide information, as stipulated in article 120 paragraph (2) The Criminal Procedure Code stated that the Ahli took an oath or made a promise in front of the investigator that he would give information according to his best knowledge except if it was due to dignity and dignity, his job or position which required him to keep a secret could refuse to give the requested information. Conversely, if the expert does not have justified reasons according to article 120 paragraph 2, then if the expert is asked to provide expert information for justice then the expert has the obligation to provide expert information as regulated in article 179 of the Criminal Procedure Code states that:

- 1) Everyone who is asked for his opinion as an expert in medical medicine or a doctor or other expert must provide expert information for justice.
- 2) All of the provisions above for witnesses also apply to those who provide expert statements, provided that they take an oath or promise to provide the best and actual information according to knowledge in their area of expertise.

If the expert intentionally fails to provide expert information which is an obligation requested by the investigator, then the expert may be subject to criminal penalties as stipulated in Article 224 of the Criminal Code which states that: Whoever is called as a witness, expert, or interpreter according to the law intentionally does not fulfill obligations under the law that must be fulfilled, is threatened:

- 1) In criminal cases, with a maximum imprisonment of nine months
- 2) In other cases, with a maximum imprisonment of six months.

In the event that an investigator handles a case involving someone dead, the investigator is authorized to submit expert statements to the judicial medicine as regulated in articles 133 and 134 of the Criminal Procedure Code: Article 133 of the Criminal Procedure Code states that:

- 1) In the case of an investigator in the interest of the judiciary handling a victim whether injured, poisoned or dead suspected of an event that constitutes a criminal offense, he is authorized to submit requests for expert information to the judicial medical expert or doctor and or other experts.
- 2) Requests for expert statements referred to in paragraph (1) shall be made in writing, which in the letter is explicitly stated for examination of wounds or examinations of corpses and / or post-mortem examinations.
- 3) Corpses sent to the judicial medical expert or doctor at the hospital must be treated well with respect for the corpse and labeled with the corpse's identity, treated with a position stamp attached to the big toe or other body part of the corpse.

It can be explained that the expert statement is a doctor, be it a physician expert in judicial medicine or other experts, in the explanation of Article 133 of the Criminal Procedure Code it is stated, that those who can give an expert statement are experts in judicial medical science, so as such, it is clear that according to Article 133 of the Criminal Procedure Code that a general practitioner is not part of the expert statement but is only limited to providing information. Meanwhile, for requests for assistance an expert witness can only be submitted in writing stating the type of assistance or inspection desired. For example, in cases of violent criminal acts which resulted in the death of victims, then the request for assistance to expert witnesses in this case forensic expert witnesses must be clarified. The purpose is made clear is limited to what assistance is needed as written or oral evidence, whether the examination carried out by a forensic expert witness is limited to external examination (physical examination) or external and internal examination (forensic autopsy). Furthermore, Article 134 of the Criminal Procedure Code regulates the implementation of a forensic autopsy which states that:

- 1) In the case where it is absolutely necessary that for the purposes of proving post-mortem it is no longer possible to be avoided, the investigator must notify the victim's family in advance.
- 2) In the case of family objections, the investigator is obliged to explain clearly the intent and purpose of the surgery.
- 3) If within two days no response from the family or the party is not found, the investigator shall immediately implement the provisions referred to in Article 133 paragraph (3) of this law.

It can be explained that when the investigator holds the view that it is very necessary for the purpose of proof, the investigator can ask the judicial medical expert or the hospital doctor to carry out a post-mortem examination (forensic autopsy). The definition of "very necessary" in this article is clarified with the words "it is no longer possible to avoid". As long as it is still possible to avoid it, post-mortem (forensic autopsy) is not necessary. If we examine the provisions of

article 134, the meaning of which is no longer possible to be avoided, the question arises as to who determines the objective measure. Impossible sentences must be connected and returned to the preceding sentence namely: "for proof purposes". The official who determines whether a post-mortem (forensic autopsy) is necessary or not for the purpose of proof during the investigation stage is the investigating official. Thus, what determines the size of the need for a post-mortem examination (forensic autopsy), depends on the assessment and opinion of the investigator. It is the investigator who determines, not the judicial medical expert or the hospital doctor. And regarding the objective measure of whether or not a post-mortem (forensic autopsy) is done there is no clear regulation of the size is needed whether it depends on the condition of the body or on the type of crime that resulted in the death of a person. If it has arrived at the decision to carry out a post-mortem examination (forensic autopsy), the investigator has the obligation first to notify the victim's family or family of the body in question. The purpose of the family in this article is those who become heirs of the victim, in accordance with the order of priorities determined in the inheritance law. In the case of the objected victim's family, the investigator must take the method determined by article 134 paragraph (2) and (3). First, the investigator "must" explain clearly about the intent and purpose of the need for cadaver surgery (forensic autopsy). Secondly, if within two days there has not been a response from the family on the explanation of the investigator related to the need for a post-mortem (forensic autopsy), then the investigator can carry out a post-mortem (forensic autopsy) with due regard to the provisions in article 133 paragraph (3) namely must be treated well with full respect for the corpse and labeled with the identity of the corpse, treated with a position stamp affixed to the toe or other body part of the corpse. In the case of the family taking actions that attempt to prevent, hinder, or arrive at an attempt to thwart the post-mortem (forensic autopsy), the investigator can take steps to implement the provisions of article 222 of the Criminal Code which states that: Anyone who prevents, hinders or thwarts the examination of a corpse for a trial, is liable to a maximum of nine months imprisonment or a maximum fine of four thousand five hundred rupiah. Investigators have the authority to implement the provisions of article 222 of the Criminal Code based on Police Chief Instruction No. Ins / E / 20 / IX / 75 concerning Procedures for Requests / Revocation of Visum Et Repertum in item 6 which states that: If there is a victim / corpse family's objection if a Visum Et Repertum is held post-mortem (forensic autopsy) then the obligation of The Indonesian National Police (POLRI) officers cq examination to immediately persuasive provide an explanation of the importance of Autopsy for investigative purposes, if necessary even the imposition of article 222 of the Criminal Code. The instructions above confirm that every corpse examination in case of unnatural death or death that is an indication of a criminal act, then a post-mortem examination must be carried out. In an effort to reject the implementation of a post-mortem (forensic autopsy), the investigator can enforce Article 222 of the Criminal Code. The family of the victim or the family of the corpse may be subject to criminal sanction if an attempt is made to obstruct a corpse examination process for the court, the victim's family should not take any precautionary measures against the investigation where a coronary attempt (forensic autopsy) carried out by the investigator is essentially carried out to find out the causes which results in the death of the

victim so that evidence can be carried out if the victim dies due to a crime or not and even to provide instructions to the investigator to arrest the perpetrator who caused the death of the victim.

3. Types of Autopsy

In Indonesia, a Corpse Surgery (Autopsy) is carried out for a specific cause or purpose. Based on the purpose, the autopsy is divided into 3 namely:

1) Anatomical Autopsy

Article 1 letter (b) of Government Regulation No. 18 of 1981 states that anatomical post-mortem is an examination carried out by surgery on corpses for educational purposes in the field of medical science (Government Regulation No. 18 of 1981) Anatomical post-mortem can only be done in the anatomical ward of a medical school. Anatomical post-mortem is carried out by medical faculty students and medical scholars under the direct leadership and responsibility of a surgeon (C.S.T. Kansil, 1991) For this autopsy, approval from the sufferer (before death) or his immediate family is required. It can also be done without the consent of the sufferer or his immediate family, if within 2 x 24 hours no immediate family member of the deceased comes to the hospital. Medical faculty students must be taught macroscopically, which is called anatomy and microscopically called body tissue science (histology). Discipline of the body gives students knowledge about the body's organs and their location in the body, such as muscles, bones, heart, heart and others, while the disassembled body tissue provides students with knowledge about the arrangement of cells of various organs (organs). Without studying anatomy and histology, it is not possible for a doctor to know about the composition of a healthy human body, even though there are props for the human body made from artificial materials (Rocky B. F. Sitohang, 2005) All religions and beliefs in God Almighty basically do not forbid the use of one's corpse (for autopsy), with the stipulation that the corpse is treated according to each religion and belief in God Almighty.

2) Clinical Autopsy

In Article 1 letter (a) Government Regulation No. 18 of 1981 concerning clinical post-mortem is an examination carried out by dissection of the corpse to determine with certainty the disease or abnormality that is the cause of death and for the assessment of the results of health recovery efforts carried out on the corpse of a disease sufferer , who has been treated for some time in the hospital. The aim is to determine with certainty the disease that causes the death of the patient and also to find out whether the diagnosis made by the doctor treating the patient is in accordance with the diagnosis made based on autopsy and anatomical microscopic examination of the tissues. Thus the doctor's experience will increase, especially with the presence of the possibility of unfolding things that were not / haven't been known before. The police did not intervene in clinical autopsy, the hospital must obtain permission for clinical autopsy from the family of the deceased patient (Arif Budiyo, et al, 1987) In addition to the consent of the patient during his life and or his immediate family, a clinical autopsy can also be carried out without the consent of the patient or his immediate family, if the patient is suspected of suffering from a disease that can endanger others or the surrounding community, also if within 2 x 24 hours there is no the closest relative of the deceased mastermind to the

hospital. Clinical post-mortem is needed to develop clinical and medical science. All known diseases must now originate from a collection of clinical autopsies that have been carried out previously. This clearly supports progress in the medical field.

3) Forensic Autopsy

Forensic autopsy is also known as medico legal autopsy or judicial autopsy. This is the type of autopsy that is most widely performed in Indonesia. Therefore by calling the term autopsy only, most people will associate it with a forensic autopsy. Conducted on the body of someone suspected of dying due to an unnatural cause such as in cases of accidents, murder, or suicide. The purpose of a forensic autopsy examination is to: help determine the identity, the corpse determine the exact cause of death, the mechanism of death and time of death, collect and examine evidence to determine the identity of the cause and perpetrator of the crime and make an objective written report based on facts in the form of *Visum Et Repertum*. Forensic autopsy must be done as early as possible, completely, by the doctor himself and as thoroughly as possible.

4. The Benefits Of Autopsy

Basically the implementation of an autopsy is very beneficial to doctors, public health workers and especially in law enforcement, for that the benefits of autopsy are grouped in 7 categories namely:

a. Benefits to Physicians and Health Care Organizations

Osler commented that "medicine is a science of uncertainty and an art of probability," and this is as true today as it was 100 years ago. Two of the major objectives of the autopsy are the establishment of final diagnoses and determination of the cause of death. Autopsy cases provide a unique opportunity for clinical teams to correlate their physical and laboratory findings with the pathologic changes of disease (Finkbeiner, W. E., et al, 2009) In essence, the autopsy is a gold standard for evaluating the accuracy of diagnosis and the outcome of therapy. Interestingly, a thorough retrospective meta-analysis of diagnostic errors detected at autopsy showed that in the year 2000, Class I errors (which would have affected patient outcome) were detected in 4% to 8% of autopsies and other major errors were seen in 8% to 23% (Shojania KG, et al, 2003). Additionally, the weak relationship between autopsy rates and error rates among institutions suggested that clinicians cannot reliably predict which autopsies will be of high diagnostic yield, suggesting that increasing numbers of autopsies would be diagnostically fruitful at many institutions (Shojania KG, et al, 2003). Through autopsy findings, pathologists alert hospital infection control committees of possible contagion and provide outcomes data for specific devices, procedures, and new clinical operations. Thus the autopsy provides critical data for medical quality assurance and, ultimately, quality improvement. Autopsies may also reduce hospital and physician malpractice risk. Valaske (Valaske MJ, 1984) surveyed 183 hospitals and 39 malpractice liability companies and from their responses concluded that autopsies (1) eliminate suspicion, (2) provide reassurance to families, (3) substitute facts for conjecture, (4) construct a better defense, (5) reduce the number of claims, and (6)

improve the quality of care. In a small, biased sample of autopsies performed after families filed a malpractice suit, postmortem findings clarified the cause of death in 10 of 15 cases, contributing to the resolution of conflicts and safety of future patients (Juvin P, et al). In a retrospective analysis of outcomes of medical malpractice cases, Bove and colleagues (Bove KE, 2002) concluded that a finding of medical negligence was based on standard-of-care issues rather than accuracy of clinical diagnosis, even when a major discrepancy was discovered at autopsy. In fact, major discrepancies in diagnosis identified by autopsy were relatively uncommon in suits in which a physician was found to be negligent; however, in about 20% of cases, autopsy findings were helpful to defendant physicians. One of the most overlooked benefits of the autopsy may be its contribution to accurate billing. Under the Diagnosis-Related Group system of Medicare reimbursement, autopsy data increased allowable billing by 6.6% (Guariglia P, 1985)

b. Benefits to the Family of the Deceased

The therapeutic value of the autopsy for surviving family is often overlooked (Roberts ME, et al, 1986) At autopsy, pathologists can identify or define hereditary or contagious diseases. This information not only provides the basis for genetic counseling but also may indicate preventive care for relatives. In a study of the value of autopsies performed in cases of death during the perinatal period, Faye-Petersen and colleagues (Faye-Petersen OM, et al, 1999) determined that autopsy findings altered parental counseling or recurrence risk estimates in 26% of cases. Autopsies help families with the grieving process, especially by removing guilt on the part of the immediate family for believing that they may have contributed to death (Oppewal F, et al, 2001). This is particularly true after sudden death. In the setting of a postautopsy conference, the clinician or pathologist can console the family by reporting the cause of death, provide information about the disease process, answer any lingering questions about the terminal events, and alleviate irrational guilt (Hirsch CS, 1984; Valdés-Dapena M, 1984) . Finally, the autopsy provides accurate data for determination of insurance benefits or workers' compensation. McPhee and coauthors (McPhee SJ, et al, 1986), in a survey of family members who had consented to an autopsy of their relatives, found that 88% considered the postmortem examination beneficial. Reasons given, in order of frequency, included consolation through contributing to the advancement of medical knowledge, comfort in knowing the cause of death, reassurance that the therapy was complete and appropriate, identification of genetic or contagious diseases, and settlement of insurance claims. Despite the autopsy's proven value to families, one study indicates that physicians and pathologists can still do a better job of communicating autopsy findings to the families of decedents (Keys E, et al, 2008)

c. Benefits to Public Health

The autopsy contributes to public health surveillance through detection of contagious diseases, identification of environmental hazards, and contribution of accurate vital statistics. Direct benefits accrue when an autopsy

pathologist alerts public health officials about a communicable disease or an environmental hazard. In the age of global terrorism, the autopsy may help in the early identification of bioterrorism (Nolte KB, et al, 2007) Indirectly, the autopsy contributes to population health planning and disease prevention by providing reliable data. Unfortunately, as the autopsy rate declines, so does the accuracy of vital statistics. Numerous studies document serious discrepancies in the underlying cause of death as recorded on death certificates when determined clinically rather than from autopsies (Hill RB, 1988; Kircher T, et al, 1985). Major inaccuracies reach levels of approximately 30%. The discordance crosses national boundaries, diseases, and age of the deceased (although errors are magnified in the geriatric population). Furthermore, because the practice of amending death certificates after autopsy is sporadic at best, mortality statistics based on these documents are probably too inaccurate for meaningful use. With this concern in mind, a committee of the College of American Pathologists proposed the creation of a National Autopsy Data Bank, but this has never been fully realized (Finkbeiner, W. E, et al, 2009).

d. Benefits to Medical Education

The majority of medical students, house officers, pathology residents, physicians and medical educators, and nurses agree on the usefulness of the autopsy in medical practice and education. However, surveys of medical students and faculty suggest that the educational value of the autopsy is not fully realized (Inanici MA, et al, 2000). The autopsy aids in the education of students in medicine and other health-related disciplines by providing teaching material for anatomy, histology, and pathology. Direct exposure of medical students as participants offers opportunities not just in the instruction of pathology but also in that of anatomy. In the arena of medical school education, the autopsy is a focal point for integration and correlation of basic and clinical medical knowledge (Sánchez H, 2001). Medical students and hospital residents and fellows learn from observing or discussing at conferences the postmortem findings of patients whom they treated. The autopsy also provides an opportunity for pathologists-in-training to improve their knowledge of clinical medicine, skill with normal and abnormal gross and microscopic anatomy, and integration of anatomic and clinical pathology (Hebert TM, et al, 2014).

e. Benefits to Medical Discovery and Applied Clinical Research

Despite the decline in autopsy numbers, autopsy data continue to embellish the medical literature and figure most prominently in neuroscience, cardiovascular, oncology, hematology, and respiratory fields. Modern molecular techniques coupled with and supplementing postmortem examinations have identified diseases related to emerging and reemerging infectious agents. Hill and Anderson, compiling the data of others, identified 87 diseases that were discovered or critically clarified through the autopsy between 1950 and 1988. Regarding this list, one can conclude two things. First, it is an underestimate, and second, it continues to grow. In addition to discovering new diseases, the autopsy pathologist may

uncover changing patterns of diseases (Klatt EC, 1994). However, the value of the autopsy lies not just in documenting disease processes. It is the autopsy pathologist who helps evaluate the toxic effects of the latest drugs, the accuracy of imaging techniques, the durability of medical devices, and the efficacy of new therapies.

f. Benefits to Basic Biomedical Research

The autopsy provides investigators with normal and diseased human tissues for research. Tissues obtained at autopsies are useful for establishing cell and organ cultures, xenotransplantation, biochemical analysis, and morphologic studies despite the often lengthy interval between death and examination. Cooperation between families (who are frequently interested in the study of an inherited disease), clinicians, pathologists, and basic scientists often provides an opportunity for donations of organs or tissues shortly after death (Lindell KO, et al, 2006). Many human organs such as those of the central nervous system are not available by other means, accounting for the importance of the autopsy in research in the fields of neuropathology and neuroscience (Chariot P, et al, 2000; Cummings TJ, 2001). Rapid autopsy programs, in addition to supplying well-preserved normal tissues for study, allow investigators the opportunity to examine pathologic processes at the molecular and cellular levels using viable cells or short-lived macromolecules (Shah RB, et al, 2004; Embuscado EE, et al, 2005). However, a fountain of knowledge also comes from autopsies performed after the usual postmortem time intervals. Tissues collected and banked by institutions and research societies around the world provide investigators with normal and diseased tissues. As large-scale genomics and expression profiling efforts proceed, the importance of stored tissue expressing specific disease phenotypes increases.

g. Benefits to Law Enforcement and Jurisprudence

The medicolegal investigation of death is a key component of a crime investigation. The forensic autopsy is focused on establishing the cause, time, and manner of death, including the circumstances preceding and surrounding death. Thus, in addition to the postmortem examination, the medicolegal investigation may involve inspection of the site where the body was found. Anticipating the potential for legal action, the forensic pathologist must collect and preserve evidence obtained at the scene and from the autopsy (Finkbeiner, W. E, et al, 2009)

5. Conclusion

The legal provisions regarding autopsy in Indonesia are explicitly regulated in the criminal procedure code (KUHP) in article 134 that an autopsy can be carried out by the investigator for the purpose of proving a crime by first notifying the family and efforts to impede the implementation of the autopsy, it can be dropped the maximum sentence of imprisonment is nine months. according to Government Regulation Number 18 Year 1981 Concerning Anatomical Corpse and Human Body Tool or Tissue Transplantation that autopsy is divided into 3 types namely anatomical autopsy, clinical autopsy and forensic autopsy which are types of

autopsies used for judicial purposes. however, there are weaknesses in the arrangements related to autopsy that are not yet clear the types of deaths that require the implementation of an autopsy so investigators from the police sometimes have difficulty conducting an autopsy when the family does not give permission in the implementation of an autopsy for the benefit of the judiciary.

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