

DAFTAR PUSTAKA

- Agha, A. (2014). *Understanding The Experiences Of Rural Community-Dwelling Older Adults In Using A New Dvd-Delivered Otago Exercise Program In British Columbia. July.*
- Alkhawajah, H. A., & Alshami, A. M. (2019). The effect of mobilization with movement on pain and function in patients with knee osteoarthritis: A randomized double-blind controlled trial. *BMC Musculoskeletal Disorders*, 20(1), 1–9. <https://doi.org/10.1186/s12891-019-2841-4>
- Amatachaya, S., Kwanmongkolthong, M., Thongjumroon, A., Boonpew, N., Amatachaya, P., Saensook, W., Thaweewannakij, T., & Hunsawong, T. (2019). Influence of timing protocols and distance covered on the outcomes of the 10-Meter walk test. *Physiotherapy Theory and Practice*, 00(00), 1–6. <https://doi.org/10.1080/09593985.2019.1570577>
- Avelar, B. P., Costa, J. N., Safons, M. P., Dutra, M. T., Bottaro, M., Gobbi, S., Tiedemann, A., de David, A. C. and Lima, R. M. 2016. Balance Exercises Circuit improves muscle strength, balance, and functional performance in older women. *Age (Dordr)*. 38(1), 14.
- Ayhan, E., Kesmezacar, H., & Akgun, I. (2014). Intraarticular injections (corticosteroid, hyaluronic acid, platelet rich plasma) for the knee osteoarthritis. *World Journal of Orthopaedics*, 5(3), 351–361. <https://doi.org/10.5312/wjo.v5.i3.351>
- Benner, R. W., Shelbourne, K. D., Bauman, S. N., Norris, A., & Gray, T. (2019). Knee Osteoarthritis: Alternative Range of Motion Latihan. *Orthopedic Clinics of North America*, 50(4), 425–432. <https://doi.org/10.1016/j.ocl.2019.05.001>
- Bohannon, R. W. (1997). Comfortable and maximum walking speed of adults aged 20-79 years: Reference values and determinants. *Age and Ageing*, 26(1), 15–19. <https://doi.org/10.1093/ageing/26.1.15>
- Brach, J. S., & VanSwearingen, J. M. (2013). Interventions to Improve Walking in Older Adults. *Current Translational Geriatrics and Experimental Gerontology Reports*, 2(4), 230–238. <https://doi.org/10.1007/s13670-013-0059-0>
- Campbell, A. J., & Robertson, M. C. (2013). Single Interventions for Fall Prevention. *Journal of the American Geriatrics Society*, 61(2), 281–285. <https://doi.org/10.1111/jgs.12095>
- Campbell, A. J., Robertson, M. C., Gardner, M. M., Norton, R. N., Ti;yard, M. W., & Buchner, D. M. (1997). Randomised controlled trial of a general practiceprogramme of home based exercise to prevent falls inelderly women. *British Medical Journal*, 315(7115), 1065–1069. <https://doi.org/10.1136/bmj.315.7115.1060>
- Caruel, M., & Truskinovsky, L. (2017). *Physics of muscle contraction*. 1–97. <https://doi.org/doi.org/10.1088/1361-6633/aa7b9e>
- Caruel, M. and Truskinovsky, L. 2018. Physics of muscle contraction. Rep

- Prog Phys. 81(3), 036602.
- Chen, H., Zheng, X., Huang, H., Liu, C., Wan, Q., & Shang, S. (2019). The effects of a home-based exercise intervention on elderly patients with knee osteoarthritis: A quasi-experimental study. *BMC Musculoskeletal Disorders*, 20(1), 1–11. <https://doi.org/10.1186/s12891-019-2521-4>
- Cheung, C., Wyman, J. F., Resnick, B., & Savik, K. (2014). Yoga for managing knee osteoarthritis in older women: A pilot randomized controlled trial. *BMC Complementary and Alternative Medicine*, 14. <https://doi.org/10.1186/1472-6882-14-160>
- Chiu, H. L., Yeh, T. T., Lo, Y. T., Liang, P. J. and Lee, S. C. 2021. The effects of the Otago Exercise Programme on actual and perceived balance in older adults: A meta-analysis. *PLoS One*. 16(8), e0255780.
- Cho, H. Y., Kim, E. H., Kim, J., & Yoon, Y. W. (2015). Kinesio taping improves pain, range of motion, and proprioception in older patients with knee osteoarthritis: A randomized controlled trial. *American Journal of Physical Medicine and Rehabilitation*, 94(3), 192–200. <https://doi.org/10.1097/PHM.0000000000000148>
- Choi, J. H., & Kim, N. J. (2015). The effects of balance training and ankle training on the gait of elderly people who have fallen. *Journal of Physical Therapy Science*, 27(1), 139–142. <https://doi.org/10.1589/jpts.27.139>
- Claudia, G., Saturti, T. I. .., & Kurniari, P. K. (2020). Karakteristik penderita osteOArthritis knee di rsup sanglah periode januari-juni 2018 1. 9(7), 3–7.
- Colling, M., & Arena, S. (2018). The Otago Exercise Program: Perspectives of a Home Healthcare Physical Therapist. *Home Healthcare Now*, 36(3), 194–195. <https://doi.org/10.1097/NHH.0000000000000681>
- Collins, B. C., Laakkonen, E. K., & Lowe, D. A. (2019). Aging of the musculoskeletal system: How the loss of estrogen impacts muscle strength. *Bone*, 123, 137–144. <https://doi.org/10.1016/j.bone.2019.03.033>
- Dahlan, M. S. (2016). Besar Sample dan Cara Pengambilan Sampel dalam Penelitian Kedokteran dan Kesehatan Edisi 4 Seri Evidence Based Medicine 2. In *Epidemiologi Indonesia*.
- Deniston, O. L., & Jette, A. (1980). A functional status assessment instrument: Validation in an elderly population. *Health Services Research*, 15(1), 21–34.
- de Zwart, A. H., van der Esch, M., Pijnappels, M. A., Hoozemans, M. J., van der Leeden, M., Roorda, L. D., Dekker, J., Lems, W. F. and van Dieën, J. H. 2015. Falls Associated with Muscle Strength in Patients with Knee Osteoarthritis and Self-reported Knee Instability. *J Rheumatol*. 42(7), 1218-23.
- Eriarosa, C., & Ambardini, R. L. (2020). *The Impact of 8 Weeks Training with Resistance Band in a Special Period towards the Improvement of the Legs Power of Taekwondo Athletes*. 73–78.

- <https://doi.org/10.5220/0009212500730078>
- Fransen, M., McConnell, S., Harmer, A. R., Van Der Esch, M., Simic, M., & Bennell, K. L. (2015). Exercise for osteoarthritis of the knee: A Cochrane systematic review. *British Journal of Sports Medicine*, 49(24), 1554–1557. <https://doi.org/10.1136/bjsports-2015-095424>
- Guyton, A. C., & Hall, J. . (2016). Textbook of Medical Physiology. In *Surgical Neurology International* (13th ed.).
- Gwynne-Jones, J. H., Wilson, R. A., Wong, J. M. Y., Abbott, J. H., & Gwynne-Jones, D. P. (2020). The Outcomes of Nonoperative Management of Patients With Hip and Knee Osteoarthritis Triaged to a Physiotherapy-Led Clinic at Minimum 5-Year Follow-Up and Factors Associated With Progression to Surgery. *Journal of Arthroplasty*, 35(6), 1497–1503. <https://doi.org/10.1016/j.arth.2020.01.086>
- Higgins, M. 2011. *Therapeutic Exercise: From Theory to Practice*. Philadelphia: F.A. Davis Company.
- Hochberg, M. C., Altman, R. D., April, K. T., Benkhalti, M., Guyatt, G., McGowan, J., Towheed, T., Welch, V., Wells, G., & Tugwell, P. (2012). American College of Rheumatology 2012 recommendations for the use of nonpharmacologic and pharmacologic therapies in osteoarthritis of the hand, hip, and knee. *Arthritis Care and Research*, 64(4), 465–474. <https://doi.org/10.1002/acr.21596>
- Hussain, S. M., Cicuttini, F. M., Alyousef, B. and Wang, Y. 2018. Female hormonal factors and osteoarthritis of the knee, hip and hand: a narrative review. *Climacteric*. 21(2), 132-139.
- IWalk Guide Online Resources. (n.d.). Quick Look-Up Sheet : Reference Values for 10-metre Walk test and 6-Minute Walk test. *University of Toronto*, 90. https://www.physicaltherapy.utoronto.ca/wp-content/uploads/2018/03/14_Quick-Look-Up-Sheet-Reference-Values-for-10mWT-6MWT-FINAL-.pdf
- Jan, M. H., Lin, J. J., Liau, J. J., Lin, Y. F. and Lin, D. H. 2008. Investigation of clinical effects of high- and low-resistance training for patients with knee osteoarthritis: a randomized controlled trial. *Phys Ther*. 88(4), 427-36.
- Jones, C. J., Rikli, R. E., & Beam, W. C. (1999). A 30-s chair-stand test as a measure of lower body strength in community-residing older adults. *Research Quarterly for Exercise and Sport*, 70(2), 113–119. <https://doi.org/10.1080/02701367.1999.10608028>
- Jorge, R. T. B., Souza, M. C. De, Chiari, A., Jones, A., Fernandes, A. D. R. C., Júnior, I. L., & Natour, J. (2015). Progressive resistance exercise in women with osteoarthritis of the knee: A randomized controlled trial. *Clinical Rehabilitation*, 29(3), 234–243. <https://doi.org/10.1177/0269215514540920>
- Jovanov, E., Wright, S., & Ganegoda, H. (2019). Development of an Automated 30 Second chair stand test Using Smartwatch Application. *Proceedings of the Annual International Conference of the IEEE Engineering in Medicine and Biology Society, EMBS*, 2474–2477.

- <https://doi.org/10.1109/EMBC.2019.8857003>
- Kabiri, S., Halabchi, F., Angoorani, H. and Yekaninejad, S. 2018. Comparison of three modes of aerobic exercise combined with resistance training on the pain and function of patients with knee osteoarthritis: A randomized controlled trial. *Phys Ther Sport.* 32, 22-28.
- Katre, K. A., Pushparaj, V., & Paul, J. (2019). Effect of Otago Exercise Program (OEP) and Strength Training Program (STP) on leg strength and risk of fall among bilateral knee osteoarthritis patients. *International Journal Medical and Exercise Science,* 05(01), 536–551. <https://doi.org/10.36678/ijmaes.2019.v05i01.004>
- Kellgren, J. H., & Lawrence, J. S. (1956). *Radiological Assessment of Osteoarthritis.* 4, 494–502.
- Kenyon, K., & Kenyon, J. (2018). *The physiotherapist's pocket book- essential facts at your fingertips.* Elsevier.
- Kerrie, H., Flavia, M. S., & Rezaul, C. (2016). Biomechanical balance response during induced falls under dual task conditions in people with knee osteoarthritis. *Gait & Posture.* <https://doi.org/10.1016/j.gaitpost.2016.04.031>
- Kisner, C., & Colby, L. A. (2013). *Therapeutic exercise : foundations and techniques* (6th ed., Vol. 53, Issue 9).
- Koli, J., Multanen, J., Kujala, U. M., Häkkinen, A., Nieminen, M. T., Kautiainen, H., Lammentausta, E., Jämsä, T., Ahola, R., Selänne, H., Kiviranta, I., & Heinonen, A. (2015). Effects of Exercise on Patellar Cartilage in Women with Mild Knee Osteoarthritis. *Medicine and Science in Sports and Exercise,* 47(9), 1767–1774. <https://doi.org/10.1249/MSS.0000000000000629>
- Kulkarni, K., Karssiens, T., Kumar, V., & Pandit, H. (2016). Obesity and osteoarthritis. *Maturitas,* 89, 22–28. <https://doi.org/10.1016/j.maturitas.2016.04.006>
- Leem, S. H., Kim, J. H. and Lee, B. H. 2019. Effects of Otago exercise combined with action observation training on balance and gait in the old people. *J Exerc Rehabil.* 15(6), 848-854.
- Lespasio, M. J., Piuzzi, N. S., Husni, M. E., Muschler, G. F., Guarino, A., & Mont, M. A. (2017). Knee Osteoarthritis: A Primer. *The Permanente Journal,* 21, 1–7. <https://doi.org/10.7812/TPP/16-183>
- Liao, C. De, Tsauo, J. Y., Chiu, Y. S., Ku, J. W., Huang, S. W., & Liou, T. H. (2020). Effects of elastic resistance exercise after total knee replacement on muscle mass and physical function in elderly women with osteoarthritis a randomized controlled trial. *American Journal of Physical Medicine and Rehabilitation,* 99(5), 381–389. <https://doi.org/10.1097/PHM.0000000000001344>
- Lintin, G. B. R., & Miranti. (2019). *Hubungan Penurunan Kekuatan Otot dan Massa Otot dengan Proses Penuaan pada Individu Lanjut Usia yang Sehat Secara Fisik.* 5(1), 1–5.
- Loughlin, J. (2015). Genetic contribution to osteoarthritis development:

- Current state of evidence. *Current Opinion in Rheumatology*, 27(3), 284–288. <https://doi.org/10.1097/BOR.0000000000000171>
- Madhushri, P., Dzhagaryan, A., Jovanov, E., & Milenkovic, A. (2016). An mHealth tool suite for mobility assessment. *Information (Switzerland)*, 7(3). <https://doi.org/10.3390/info7030047>
- Marcos-Pardo, P. J., Orquin-Castrillón, F. J., Gea-García, G. M., MenayoAntúnez, R., González-Gálvez, N., Vale, R. G. de S., & MartínezRodríguez, A. (2019). Effects of a moderate-to-high intensity resistance circuit training on fat mass, functional capacity, muscular strength, and quality of life in elderly: A randomized controlled trial. *Scientific Reports*, 9(1), 1–12. <https://doi.org/10.1038/s41598-019-44329-6>
- Mat, S., Ng, C. T., Tan, P. J., Ramli, N., Fadzli, F., Rozalli, F. I., Mazlan, M., Hill, K. D., & Tan, M. P. (2017). *Effect of Modified Otago Exercises on Postural Balance, Fear of Falling, and Fall Risk in Older Fallers with Knee Osteoarthritis and Impaired Gait and Balance: A Secondary Analysis*. <https://doi.org/10.1016/j.pmrj.2017.08.405>
- Millor, N., Lecumberri, P., Gómez, M., Martínez-Ramírez, A., & Izquierdo, M. (2013). An evaluation of the 30-s chair stand test in older adults: Frailty detection based on kinematic parameters from a single inertial unit. *Journal of NeuroEngineering and Rehabilitation*, 10(1), 1–9. <https://doi.org/10.1186/1743-0003-10-86>
- Mora, J. C., Przkora, R., & Cruz-Almeida, Y. (2018). Knee osteoarthritis: Pathophysiology and current treatment modalities. *Journal of Pain Research*, 11, 2189–2196. <https://doi.org/10.2147/JPR.S154002>
- Muraki, S., Akune, T., Teraguchi, M., Kagotani, R., Asai, Y., Yoshida, M., Tokimura, F., Tanaka, S., Oka, H., Kawaguchi, H., Nakamura, K., & Yoshimura, N. (2015). Quadriceps muscle strength, radiographic knee osteoarthritis and knee pain: The ROAD study Epidemiology of musculoskeletal disorders. *BMC Musculoskeletal Disorders*, 16(1), 1–10. <https://doi.org/10.1186/s12891-015-0737-5>
- Nokham, R., & Kitisri, C. (2017). Effect of square-stepping exercise on balance in older adults: A systematic review and meta-analysis. *The Journal of Physical Fitness and Sports Medicine*, 6(3), 183–190. <https://doi.org/10.7600/jp fsm.6.183>
- Ojoawo, A. O., Olaogun, M. O. B., & Hassan, M. A. (2016). Comparative effects of proprioceptif and isometric exercises on pain intensity and difficulty in patients with knee osteoarthritis: A randomised control study. *Technology and Health Care*, 24(6), 853–863. <https://doi.org/10.3233/THC-161234>
- Peters, D. M., Fritz, S. L., & Krotish, D. E. (2013). Assessing the Reliability and Validity of a Shorter Walk test Compared With the 10-Meter Walk test for Measurements of Gait Speed in Healthy , Older Adults. 36(1). <https://doi.org/10.1519/JPT.0b013e318248e20d>
- Rahim, A. F., Sari, G. M., & Rejeki, P. S. (2020). Difference Influence of Core Stability Exercise and Ankle Proprioceptif Exercise toward

- Dynamic Balance on Young Adult Overweight.* Hsic 2019, 27–30.
<https://doi.org/10.5220/0009120100270030>
- Rahmati, M., Nalesto, G., Mobasher, A., & Mozafari, M. (2017). Aging and osteoarthritis: Central role of the extracellular matrix. *Ageing Research Reviews*, 40, 20–30.
<https://doi.org/10.1016/j.arr.2017.07.004>
- R., F. P., Wungouw, H. I. S., & Marunduh, S. (2015). Pengaruh Latihan Beban Terhadap Kekuatan Otot Lansia. Jurnal E-Biomedik, 3(1).
<https://doi.org/10.35790/ebm.3.1.2015.8075>
- Roman-Blas, J. A., Castañeda, S., Largo, R. and Herrero-Beaumont, G. 2009. Osteoarthritis associated with estrogen deficiency. *Arthritis Res Ther.* 11(5), 241.
- Salekar, S., & Khandale, S. R. (2019). *Effect of Otago exercise program on balance and risk of fall in community-dwelling individuals having knee osteoarthritis.* 4(4), 36–38.
- Sherwood, L. (2012). Human Physiology: From cells to systems, 7th edition. In *The Neuroscientist* (7th ed.).
- Shih, Y. F., Yu, H. T., Chen, W. Y., Liao, K. K., Lin, H. C., & Yang, Y. R. (2018). The effect of additional joint mobilization on neuromuscular performance in individuals with functional ankle instability. *Physical Therapy in Sport*, 30, 22–28.
<https://doi.org/10.1016/j.ptsp.2017.12.001>
- Silverwood, V., Blagojevic-Bucknall, M., Jinks, C., Jordan, J. L., Protheroe, J., & Jordan, K. P. (2015). Current evidence on risk factors for knee osteoarthritis in older adults: A systematic review and meta-analysis. *Osteoarthritis and Cartilage*, 23(4), 507–515.
<https://doi.org/10.1016/j.joca.2014.11.019>
- Skou, S. T., Grønne, D. T., & Roos, E. M. (2020). Prevalence, severity, and correlates of pain flares in response to a repeated sit-to-stand activity: A cross-sectional study of 14 902 patients with knee and hip osteoarthritis in primary care. *Journal of Orthopaedic and Sports Physical Therapy*, 50(6), 309–318.
<https://doi.org/10.2519/jospt.2019.9125>
- Song, H.-s., Lee, J.-n. and Han, H.-j. 2020. The Effect of Otago Exercise Program on Balance, Walking and Falls Efficacy in Patients with Total Knee Replacement. *The Journal of Korean Academy of Orthopedic Manual Physical Therapy*. 26(1), 1-8.
- Spinozo, D. H., Bellei, N. C., Marques, N. R., & Navega, M. T. (2018). Quadriceps muscle weakness influences the gait pattern in women with knee osteoarthritis. *Advances in Rheumatology (London, England)*, 58(1), 26. <https://doi.org/10.1186/s42358-018-0027-7>
- Suchomel, T. J., Nimphius, S., Bellon, C. R., & Stone, M. H. (2018). The Importance of Muscular Strength: Training Considerations. *Sports Medicine*, 48(4), 765–785. <https://doi.org/10.1007/s40279-018-0862-z>
- Tani, K., Kola, I., Shpata, V., & Dhamaj, F. (2018). Evaluation of gait speed after applying kinesio tape on quadriceps femoris muscle in

- patients with knee osteoarthritis. *Open Access Macedonian Journal of Medical Sciences*, 6(8), 1394–1398. <https://doi.org/10.3889/oamjms.2018.273>
- Toivanen, A. T., Heliövaara, M., Impivaara, O., Arokoski, J. P. A., Knekt, P., Lauren, H., & Kröger, H. (2010). Obesity, physically demanding work and traumatic knee injury are major risk factors for knee osteoarthritis-a population-based study with a follow-up of 22 years. *Rheumatology*, 49(2), 308–314. <https://doi.org/10.1093/rheumatology/kep388>
- Tschon, M., Contartese, D., Pagani, S., Borsari, V. and Fini, M. 2021. Gender and Sex Are Key Determinants in Osteoarthritis Not Only Confounding Variables. A Systematic Review of Clinical Data. *J Clin Med.* 10(14).
- Valderrabano, V. and Steiger, C. 2010. Treatment and Prevention of Osteoarthritis through Exercise and Sports. *J Aging Res.* 2011, 374653.
- Vincent, K. R., Vasilopoulos, T., Montero, C., & Vincent, H. K. (2019). Eccentric and Concentric Resistance Exercise Comparison for Knee Osteoarthritis. *Medicine and Science in Sports and Exercise*, 51(10), 1977–1986. <https://doi.org/10.1249/MSS.0000000000002010>
- Wallace, D. T., Riches, P. E., & Picard, F. (2019). The assessment of instability in the osteOArthritic knee. 4(March). <https://doi.org/10.1302/2058-5241.4.170079>
- Waller, B., Munukka, M., Multanen, J., Rantalainen, T., Pöyhönen, T., Nieminen, M. T., Kiviranta, I., Kautiainen, H., Selänne, H., Dekker, J., Sipilä, S., Kujala, U. M., Häkkinen, A., & Heinonen, A. (2013). Effects of a progressive aquatic resistance exercise program on the biochemical composition and morphology of cartilage in women with mild knee osteoarthritis: Protocol for a randomised controlled trial. *BMC Musculoskeletal Disorders*, 14, 1–14. <https://doi.org/10.1186/1471-2474-14-82>
- Wewerka, G., Wewerka, G., & Iglseder, B. (2015). Measuring gait velocity in the elderly with a gait analysis system and a 10-Meter walk test: A comparison. *Zeitschrift Fur Gerontologie Und Geriatrie*, 48(1), 29–34. <https://doi.org/10.1007/s00391-013-0569-6>
- Wilkinson, D. J., Piasecki, M., & Atherton, P. J. (2018). The age-related loss of skeletal muscle mass and function: Measurement and physiology of muscle fibre atrophy and muscle fibre loss in humans. *Ageing Research Reviews*, 47(July), 123–132. <https://doi.org/10.1016/j.arr.2018.07.005>
- Woodell-May, J. E., & Sommerfeld, S. D. (2020). Role of Inflammation and the Immune System in the Progression of Osteoarthritis. *Journal of Orthopaedic Research*, 38(2), 253–257. <https://doi.org/10.1002/jor.24457>
- Xu, Q., Chen, B., Wang, Y., Wang, X., Han, D., Ding, D., Zheng, Y., Cao, Y., Zhan, H., & Zhou., Y. (2017). The Effectiveness of Manual

- Therapy for Relieving Pain, Stiffness, and Dysfunction in Knee Osteoarthritis. *A Systematic Review and Meta- Analysis*, 229–243.
- Yoo, H. na, Chung, E., & Lee, B. H. (2013). The effects of augmented reality-based otago exercise on balance, gait, and falls efficacy of elderly women. *Journal of Physical Therapy Science*, 25(7), 797–801. <https://doi.org/10.1589/jpts.25.797>
- Zeng, X., Ma, L., Lin, Z., Huang, W., Huang, Z., Zhang, Y., & Mao, C. (2017). Relationship between Kellgren-Lawrence score and 3D kinematic gait analysis of patients with medial knee osteoarthritis using a new gait system. *Scientific Reports*, 7(1), 1–8. <https://doi.org/10.1038/s41598-017-04390-5>
- Zwart, A. H. De, Esch, M. Van Der, Pijnappels, M. A. G. M., Hoozemans, M. J. M., Leeden, M. Van Der, Roorda, L. D., Dekker, J., Lems, W. F., & Dieën, J. H. Van. (2015). Falls associated with muscle strength in patients with knee osteoarthritis and self-reported knee instability. *Journal of Rheumatology*, 42(7), 1218–1223. <https://doi.org/10.3899/jrheum.140517>

Lampiran 1. *Informed Consent*

FORMULIR PERSETUJUAN SETELAH PENJELASAN

Saya yang bertandatangan di bawah ini :

Nama :
Umur :
Masa Kerja :
Satuan :
Alamat :
.....
.....

setelah mendengar/membaca dan mengerti penjelasan yang diberikan mengenai tujuan, manfaat, dan apa yang akan dilakukan pada penelitian ini, menyatakan setuju untuk ikut dalam penelitian ini secara sukarela tanpa paksaan.

Saya tahu bahwa keikutsertaan saya ini bersifat sukarela tanpa paksaan, sehingga saya bisa menolak ikut atau mengundurkan diri dari penelitian ini. Saya berhak bertanya atau meminta penjelasan pada peneliti bila masih ada hal yang belum jelas atau masih ada hal yang ingin saya ketahui tentang penelitian ini.

Saya juga mengerti bahwa semua biaya yang dikeluarkan sehubungan dengan penelitian ini, akan ditanggung oleh peneliti. Saya percaya bahwa keamanan dan kerahasiaan data penelitian akan terjamin dan saya dengan ini menyetujui semua data saya yang dihasilkan pada penelitian ini untuk disajikan dalam bentuk lisan maupun tulisan.

Dengan membubuhkan tandatangan saya di bawah ini, saya menegaskan keikutsertaan saya secara sukarela dalam studi penelitian ini.

Nama	Tanda tangan
Tgl/Bln/Thn	
Responden.....
/Wali
Saksi

(Tanda Tangan Saksi diperlukan hanya jika Partisipan tidak dapat memberikan consent/persetujuan sehingga menggunakan wali yang sah secara hukum, yaitu untuk partisipan berikut:

1. Berusia di bawah 18 tahun
2. Usia lanjut
3. Gangguan mental
4. Pasien tidak sadar
5. Dan lain-lain kondisi yang tidak memungkinkan memberikan persetujuan

Lampiran 2. Surat Etik

KEMENTERIAN PENDIDIKAN, KEBUDAYAAN, RISET DAN TEKNOLOGI

UNIVERSITAS HASANUDDIN FAKULTAS KEDOKTERAN

KOMITE ETIK PENELITIAN KESEHATAN

RSPTN UNIVERSITAS HASANUDDIN

RSUP Dr. WAHIDIN SUDIROHUSODO MAKASSAR

Sekretariat : Lantai 2 Gedung Laboratorium Terpadu

JL.PERINTIS KEMERDEKAAN KAMPUS TAMALANREA KM.10 MAKASSAR 90245.

Contact Person: dr. Agussalim Bukhari.,MMed,PhD, Sp.GK TELP. 081241850858, 0411 5780103, Fax : 0411-581431



REKOMENDASI PERSETUJUAN ETIK

Nomor : 714/UN4.6.4.5.31/ PP36/ 2021

Tanggal: 9 Nopember 2021

Dengan ini Menyatakan bahwa Protokol dan Dokumen yang Berhubungan Dengan Protokol berikut ini telah mendapatkan Persetujuan Etik :

No Protokol	UH21100657	No Sponsor Protokol	
Peneliti Utama	Dian Ambarwaty Prasetyo, S.Ft, Ftr	Sponsor	
Judul Peneliti	Perbedaan Efek Otago Exercise, Basic Exercise, dan Kombinasi Keduanya terhadap Kekuatan Otot dan Kemampuan Fungsional Berjalan pada Penderita Osteoarthritis Knee		
No Versi Protokol	2	Tanggal Versi	5 Nopember 2021
No Versi PSP	2	Tanggal Versi	5 Nopember 2021
Tempat Penelitian	RS. Dunda Kab. Gorontalo dan Klinik Era Sehat Kota Gorontalo		
Jenis Review	<input type="checkbox"/> Exempted <input type="checkbox"/> Expedited <input checked="" type="checkbox"/> Fullboard Tanggal 3 Nopember 2021	Masa Berlaku 9 Nopember 2021 sampai 9 Nopember 2022	Frekuensi review lanjutan
Ketua Komisi Etik Penelitian Kesehatan FKUH RSUH dan RSWS	Nama Prof.Dr.dr. Suryani As'ad, M.Sc.,Sp.GK (K)	Tanda tangan	
Sekretaris Komisi Etik Penelitian Kesehatan FKUH RSUH dan RSWS	Nama dr. Agussalim Bukhari, M.Med.,Ph.D.,Sp.GK (K)	Tanda tangan	

Kewajiban Peneliti Utama:

- Menyerahkan Amandemen Protokol untuk persetujuan sebelum di implementasikan
- Menyerahkan Laporan SAE ke Komisi Etik dalam 24 Jam dan dilengkapi dalam 7 hari dan Lapor SUSAR dalam 72 Jam setelah Peneliti Utama menerima laporan
- Menyerahkan Laporan Kemajuan (progress report) setiap 6 bulan untuk penelitian resiko tinggi dan setiap setahun untuk penelitian resiko rendah
- Menyerahkan laporan akhir setelah Penelitian berakhir
- Melaporkan penyimpangan dari protokol yang disetujui (protocol deviation / violation)
- Mematuhi semua peraturan yang ditentukan

Lampiran 3. Surat Telah Meneliti di Klinik Era Sehat



Lampiran 4. Surat Telah Meneliti di RS Dunda Limboto



PEMERINTAH KABUPATEN GORONTALO

RSUD Dr. M.M DUNDA LIMBOTO

Jl. Achmad A Wahab (Ex Jl. Jend A. Yani No.53) Limboto Telp. (0435) 881095
Website <http://www.rsudunda.com/> - E-mail : rsudunda@gmail.com-admin@rsudunda.com

SURAT KETERANGAN

Nomor : 812 / 202 / RSUD-DUNDA

Yang bertanda tangan di bawah ini Direktur RSUD Dr. MM Dunda Limboto Kabupaten Gorontalo Menerangkan :

Nama : DIAN AMBARWATY PRASETYO

Tempat /Tgl.Lahir : Gorontalo, 03 November 1996

Alamat : Jl. Rusli Datau Kelurahan Dulomo Utara
Kecamatan Kota Utara Kota Gorontalo

Bahwa nama yang telah disebutkan diatas benar-benar telah menyelesaikan Penelitian dengan Judul " Perbedaan Efek Otago Exercise, Basic Exercise, Dan Kombinasi Keduanya Terhadap Perubahan Kekuatan Otot Dan Kemampuan Fungsional Berjalan Pada Penderita Osteoarthritis Knee "

Demikian surat keterangan ini dibuat untuk dipergunakan seperlunya.

Gorontalo, 25 Januari 2022



Lampiran 5. Hasil Analisis Data (SPSS)

Umur_Kel_Otago					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	60-64 Tahun	7	35.0	35.0	35.0
	65-69 Tahun	6	30.0	30.0	65.0
	>70	7	35.0	35.0	100.0
	Total	20	100.0	100.0	

JK_Kel_Otago					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Laki-laki	2	10.0	10.0	10.0
	Perempuan	18	90.0	90.0	100.0
	Total	20	100.0	100.0	

Lama_Menderita_OA_Kel_Otago					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	<1 Tahun	8	40.0	40.0	40.0
	>1 Tahun	9	45.0	45.0	85.0
	>3 Tahun	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Umur_Kel_Basic					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	60-64 Tahun	10	50.0	50.0	50.0
	65-69 Tahun	6	30.0	30.0	80.0
	>70 Tahun	4	20.0	20.0	100.0
	Total	20	100.0	100.0	

JK_Kel_Basic					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Laki-laki	6	30.0	30.0	30.0
	Perempuan	14	70.0	70.0	100.0
	Total	20	100.0	100.0	

Lama_Menderita_OA_Kel_Basic					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	<1 Tahun	10	50.0	50.0	50.0
	>1 Tahun	8	40.0	40.0	90.0
	>3 Tahun	2	10.0	10.0	100.0
	Total	20	100.0	100.0	

Umur_Kel_Kombinasi					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	60-64 Tahun	10	50.0	50.0	50.0
	65-69 Tahun	7	35.0	35.0	85.0
	>70 Tahun	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

JK_Kel_Kombinasi					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Laki-laki	6	30.0	30.0	30.0
	Perempuan	14	70.0	70.0	100.0
	Total	20	100.0	100.0	

Lama_Menderita_OA_Kel_Kombinasi					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	<1 Tahun	7	35.0	35.0	35.0
	>1 Tahun	12	60.0	60.0	95.0
	>3 Tahun	1	5.0	5.0	100.0
	Total	20	100.0	100.0	

Pretest_Kekuatan_otot_perlakuan_1					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Below average	20	100.0	100.0	100.0

Posttest_Kekuatan_otot_perlakuan_1					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Below Average	7	35.0	35.0	35.0
	Average	13	65.0	65.0	100.0
	Total	20	100.0	100.0	

Pretest_Kekuatan_otot_perlakuan_2					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Below Average	20	100.0	100.0	100.0

Posttest_Kekuatan_otot_perlakuan_2					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Below Average	5	25.0	25.0	25.0
	Average	15	75.0	75.0	100.0
	Total	20	100.0	100.0	

Pretest_Kekuatan_otot_perlakuan_3					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Below Average	20	100.0	100.0	100.0

Posttest_Kekuatan_otot_perlakuan_3					
	Frequency	Percent	Valid Percent	Cumulative Percent	
Valid	Average	17	85.0	85.0	85.0
	Above Average	3	15.0	15.0	100.0
	Total	20	100.0	100.0	

Descriptives					
	Nilai_kekuatan_otot			Statistic	Std. Error
Hasil_Nilai	Pretest	Mean		8.10	.390
_Kekuata	Kekuatan Otot	95% Confidence Interval for Mean	Lower Bound	7.28	
n_Otot	perlakuan 1		Upper Bound	8.92	
		5% Trimmed Mean		8.11	
		Median		8.00	
		Variance		3.042	
		Std. Deviation		1.744	
		Minimum		5	
		Maximum		11	
		Range		6	
		Interquartile Range		3	
		Skewness		-.434	.512
		Kurtosis		-.368	.992
	Posttest	Mean		12.70	.465
	Kekuatan otot	95% Confidence Interval for Mean	Lower Bound	11.73	
	perlakuan 1		Upper Bound	13.67	
		5% Trimmed Mean		12.89	

	Median	13.00	
	Variance	4.326	
	Std. Deviation	2.080	
	Minimum	7	
	Maximum	15	
	Range	8	
	Interquartile Range	3	
	Skewness	-1.075	.512
	Kurtosis	1.543	.992
Pretest Kekuatan otot perlakuan 2	Mean	8.45	.510
	95% Confidence Interval for Mean	Lower Bound Upper Bound	
	5% Trimmed Mean	8.44	
	Median	8.00	
	Variance	5.208	
	Std. Deviation	2.282	
	Minimum	4	
	Maximum	13	
	Range	9	
	Interquartile Range	3	
	Skewness	-.002	.512
	Kurtosis	.090	.992
Posttest Kekuatan otot perlakuan 2	Mean	13.60	.400
	95% Confidence Interval for Mean	Lower Bound Upper Bound	
	5% Trimmed Mean	13.67	
	Median	14.00	
	Variance	3.200	
	Std. Deviation	1.789	
	Minimum	10	
	Maximum	16	
	Range	6	
	Interquartile Range	2	
	Skewness	-.733	.512
	Kurtosis	-.165	.992
Pretest Kekuatan otot perlakuan 3	Mean	9.10	.332
	95% Confidence Interval for Mean	Lower Bound Upper Bound	
	5% Trimmed Mean	9.17	
	Median	9.00	
	Variance	2.200	
	Std. Deviation	1.483	
	Minimum	6	
	Maximum	11	
	Range	5	
	Interquartile Range	2	
	Skewness	-.404	.512
	Kurtosis	-.666	.992
Posttest Kekuatan otot perlakuan 3	Mean	15.70	.430
	95% Confidence Interval for Mean	Lower Bound Upper Bound	
	5% Trimmed Mean	15.67	
	Median	15.00	
	Variance	3.695	
	Std. Deviation	1.922	
	Minimum	12	
	Maximum	20	
	Range	8	
	Interquartile Range	3	
	Skewness	.376	.512
	Kurtosis	.233	.992

		Tests of Normality			Shapiro-Wilk		
		Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Nilai_kekuatan_otot	Statistic	df	Sig.	Statistic	df	Sig.
Hasil_Nilai_Kekuatan_Otot	Pretest Kekuatan Otot perlakuan 1	.177	20	.100	.921	20	.106
	Posttest Kekuatan otot perlakuan 1	.168	20	.140	.890	20	.027
	Pretest Kekuatan otot perlakuan 2	.172	20	.124	.958	20	.497
	Posttest Kekuatan otot perlakuan 2	.183	20	.078	.903	20	.047
	Pretest Kekuatan otot perlakuan 3	.178	20	.097	.926	20	.131
	Posttest Kekuatan otot perlakuan 3	.192	20	.051	.936	20	.201

a. Lilliefors Significance Correction

		Descriptives				
		Nilai_Kemampuan_Fungsional_Berjalan			Statistic	Std. Error
Hasil_Nilai_Kemampuan_n_Fungsional_Berjalan	Pretest Kemampuan fungsional berjalan perlakuan 1	Mean			36.25	3.010
		95% Confidence Interval for Mean	Lower Bound		29.95	
			Upper Bound		42.55	
		5% Trimmed Mean			36.11	
		Median			35.00	
		Variance			181.250	
		Std. Deviation			13.463	
		Minimum			15	
		Maximum			60	
		Range			45	
		Interquartile Range			10	
		Skewness			.316	.512
Hasil_Nilai_Kemampuan_n_Fungsional_Berjalan		Kurtosis			-.002	.992
	Posttest Kemampuan fungsional berjalan perlakuan 1	Mean			28.15	2.462
		95% Confidence Interval for Mean	Lower Bound		23.00	
			Upper Bound		33.30	
		5% Trimmed Mean			27.94	
		Median			27.50	
		Variance			121.187	
		Std. Deviation			11.008	
		Minimum			10	
		Maximum			50	
		Range			40	
		Interquartile Range			11	
Hasil_Nilai_Kemampuan_n_Fungsional_Berjalan	Pretest Kemampuan fungsional berjalan perlakuan 2	Skewness			.227	.512
		Kurtosis			-.118	.992
		Mean			33.25	2.623
		95% Confidence Interval for Mean	Lower Bound		27.76	
			Upper Bound		38.74	
		5% Trimmed Mean			32.50	
		Median			35.00	
		Variance			137.566	
		Std. Deviation			11.729	
		Minimum			15	
		Maximum			65	
		Range			50	
Hasil_Nilai_Kemampuan_n_Fungsional_Berjalan	Posttest Kemampuan fungsional berjalan perlakuan 2	Interquartile Range			10	
		Skewness			.524	.512
		Kurtosis			1.843	.992
		Mean			26.85	2.212
		95% Confidence Interval for Mean	Lower Bound		22.22	
Hasil_Nilai_Kemampuan_n_Fungsional_Berjalan			Upper Bound		31.48	
		5% Trimmed Mean			26.50	
		Median			30.00	

	Variance	97.818	
	Std. Deviation	9.890	
	Minimum	10	
	Maximum	50	
	Range	40	
	Interquartile Range	10	
	Skewness	.120	.512
	Kurtosis	.578	.992
Pretest Kemampuan fungsional berjalan perlakuan 3	Mean	35.30	3.338
	95% Confidence Interval for Mean	Lower Bound Upper Bound	28.31 42.29
	5% Trimmed Mean	34.78	
	Median	37.50	
	Variance	222.853	
	Std. Deviation	14.928	
	Minimum	15	
	Maximum	65	
	Range	50	
	Interquartile Range	22	
	Skewness	.148	.512
	Kurtosis	-.392	.992
Posttest Kemampuan fungsional berjalan perlakuan 3	Mean	24.45	2.400
	95% Confidence Interval for Mean	Lower Bound Upper Bound	19.43 29.47
	5% Trimmed Mean	23.78	
	Median	25.00	
	Variance	115.208	
	Std. Deviation	10.733	
	Minimum	9	
	Maximum	52	
	Range	43	
	Interquartile Range	14	
	Skewness	.629	.512
	Kurtosis	.931	.992

	Nilai_Kemampuan_Fungsional_Berjalan	Tests of Normality					
		Kolmogorov-Smirnov ^a			Shapiro-Wilk		
		Statistic	df	Sig.	Statistic	df	Sig.
Hasil_Nilai_Kemampuan_Fungsional_Berjalan	Pretest Kemampuan fungsional berjalan perlakuan 1	.190	20	.056	.894	20	.032
	Posttest Kemampuan fungsional berjalan perlakuan 1	.183	20	.077	.931	20	.165
	Pretest Kemampuan fungsional berjalan perlakuan 2	.191	20	.054	.899	20	.040
	Posttest Kemampuan fungsional berjalan perlakuan 2	.175	20	.110	.942	20	.260
	Pretest Kemampuan fungsional berjalan perlakuan 3	.163	20	.171	.908	20	.058
	Posttest Kemampuan fungsional berjalan perlakuan 3	.153	20	.200*	.939	20	.231

*. This is a lower bound of the true significance.

a. Lilliefors Significance Correction

Paired Samples Statistics					
	Mean	N	Std. Deviation	Std. Error Mean	
Pair 1	Perlakuan_1_Pretest_Kekuatan_otot	8.10	20	1.744	.390
	Perlakuan_1_Postest_Kekuatan_otot	12.70	20	2.080	.465

Paired Samples Correlations			
	N	Correlation	Sig.
Pair 1	Perlakuan_1_Pretest_Kekuatan_otot & Perlakuan_1_Postest_Kekuatan_otot	20	.545
			.013

Paired Samples Test								
	Paired Differences			95% Confidence Interval of the Difference			Sig. (2-tailed)	
	Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	
Pair 1	Perlakuan_1_Pretest_Kekuatan_otot - Perlakuan_1_Postest_Kekuatan_otot	-4.600	1.847	.413	-5.464	-3.736	-	19 .000

Paired Samples Statistics					
	Mean	N	Std. Deviation	Std. Error Mean	
Pair 1	Pretest_Kemampuan_fungsional_berjalan_perlakuan_1	36.25	20	13.463	3.010
	Posttest_Kemampuan_fungsional_berjalan_perlakuan_1	28.15	20	11.008	2.462

Paired Samples Correlations			
	N	Correlation	Sig.
Pair 1	Pretest_Kemampuan_fungsional_berjalan_perlakuan_1 & Posttest_Kemampuan_fungsional_berjalan_perlakuan_1	20	.973
			.000

Paired Samples Test								
	Paired Differences			95% Confidence Interval of the Difference			Sig. (2-tailed)	
	Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	
Pair 1	Pretest_Kemampuan_fungsional_berjalan_perlakuan_1 - Posttest_Kemampuan_fungsional_berjalan_perlakuan_1	8.100	3.726	.833	6.356	9.844	9.722	19 .000

Paired Samples Statistics					
	Mean	N	Std. Deviation	Std. Error Mean	
Pair 1	Perlakuan_2_Pretest_Kekuatan_otot	8.45	20	2.282	.510
	Perlakuan_2_Postest_Kekuatan_otot	13.60	20	1.789	.400
Pair 2	Pretest_Kemampuan_fungsional_berjalan_perlakuan_2	33.25	20	11.729	2.623
	Posttest_Kemampuan_fungsional_berjalan_perlakuan_2	26.85	20	9.890	2.212
Pair 3	Perlakuan_3_Pretest_Kekuatan_otot	9.10	20	1.483	.332
	Perlakuan_3_Postest_Kekuatan_otot	15.70	20	1.922	.430

Pair 4	Pretest_Kemampuan_fungsional_berjalan_perlakuan_3	35.30	20	14.928	3.338
	Posttest_Kemampuan_fungsional_berjalan_perlakuan_3	24.45	20	10.733	2.400

Paired Samples Correlations					
		N	Correlation	Sig.	
Pair 1	Perlakuan_2_Pretest_Kekuatan_otot & Perlakuan_2_Posttest_Kekuatan_otot	20	.833	.000	
Pair 2	Pretest_Kemampuan_fungsional_berjalan_perlakuan_2 & Posttest_Kemampuan_fungsional_berjalan_perlakuan_2	20	.953	.000	
Pair 3	Perlakuan_3_Pretest_Kekuatan_otot & Perlakuan_3_Posttest_Kekuatan_otot	20	.399	.082	
Pair 4	Pretest_Kemampuan_fungsional_berjalan_perlakuan_3 & Posttest_Kemampuan_fungsional_berjalan_perlakuan_3	20	.922	.000	

Paired Samples Test									
	Paired Differences			95% Confidence Interval of the Difference			t	df	Sig. (2-tailed)
	Mean	Std. Deviation	Std. Error Mean	Lower	Upper				
Pair 1	Perlakuan_2_Pretest_Kekuatan_otot - Perlakuan_2_Posttest_Kekuatan_otot	-5.150	1.268	.284	-5.743	-4.557	-18.163	19	.000
Pair 2	Pretest_Kemampuan_fungsional_berjalan_perlakuan_2 - Posttest_Kemampuan_fungsional_berjalan_perlakuan_2	6.400	3.789	.847	4.627	8.173	7.554	19	.000
Pair 3	Perlakuan_3_Pretest_Kekuatan_otot - Perlakuan_3_Posttest_Kekuatan_otot	-6.600	1.903	.426	-7.491	-5.709	-15.511	19	.000
Pair 4	Pretest_Kemampuan_fungsional_berjalan_perlakuan_3 - Posttest_Kemampuan_fungsional_berjalan_perlakuan_3	10.850	6.515	1.457	7.801	13.899	7.447	19	.000

Descriptive Statistics			
	Mean	Std. Deviation	N
selisih_kekuatan_otot_Perlakuan_n_1	4.60	1.847	20
selisih_kekuatan_otot_Perlakuan_n_2	5.15	1.268	20
selisih_kekuatan_otot_Perlakuan_n_3	6.60	1.903	20

Multivariate Tests ^a						
Effect		Value	F	Hypothesis df	Error df	Sig.
Perlakuan	Pillai's Trace	.644	16.261 ^b	2.000	18.000	.000
	Wilks' Lambda	.356	16.261 ^b	2.000	18.000	.000
	Hotelling's Trace	1.807	16.261 ^b	2.000	18.000	.000
	Roy's Largest Root	1.807	16.261 ^b	2.000	18.000	.000

a. Design: Intercept
Within Subjects Design: Perlakuan
b. Exact statistic

Mauchly's Test of Sphericity ^a						
Measure:	MEASURE_1					
Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Greenhouse-Geisser	Epsilon ^b
Perlakuan	.706	6.256	2	.044	.773	.829 .500

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.
a. Design: Intercept
Within Subjects Design: Perlakuan
b. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displayed in the Tests of Within-Subjects Effects table.

Tests of Within-Subjects Effects						
Measure:	MEASURE_1					
Source		Type III Sum of Squares	df	Mean Square	F	Sig.
Perlakuan	Sphericity Assumed	42.700	2	21.350	8.116	.001
	Greenhouse-Geisser	42.700	1.546	27.618	8.116	.003
	Huynh-Feldt	42.700	1.657	25.768	8.116	.002
	Lower-bound	42.700	1.000	42.700	8.116	.010
Error(Perlakuan)	Sphericity Assumed	99.967	38	2.631		
	Greenhouse-Geisser	99.967	29.376	3.403		
	Huynh-Feldt	99.967	31.484	3.175		
	Lower-bound	99.967	19.000	5.261		

Mauchly's Test of Sphericity ^a						
Measure:	MEASURE_1					
Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Greenhouse-Geisser	Epsilon ^b
perlakuan	.869	2.528	2	.283	.884	.968 .500

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.
a. Design: Intercept
Within Subjects Design: perlakuan
b. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displayed in the Tests of Within-Subjects Effects table.

Mauchly's Test of Sphericity ^a						
Measure:	MEASURE_1					
Within Subjects Effect	Mauchly's W	Approx. Chi-Square	df	Sig.	Greenhouse-Geisser	Epsilon ^b
perlakuan	.869	2.528	2	.283	.884	.968 .500

Tests the null hypothesis that the error covariance matrix of the orthonormalized transformed dependent variables is proportional to an identity matrix.
a. Design: Intercept
Within Subjects Design: perlakuan
b. May be used to adjust the degrees of freedom for the averaged tests of significance. Corrected tests are displayed in the Tests of Within-Subjects Effects table.

Tests of Within-Subjects Effects						
Measure: MEASURE_1		Type III Sum of Squares	df	Mean Square	F	Sig.
perlakuan	Sphericity Assumed	201.700	2	100.850	3.859	.030
	Greenhouse-Geisser	201.700	1.768	114.062	3.859	.036
	Huynh-Feldt	201.700	1.936	104.165	3.859	.031
	Lower-bound	201.700	1.000	201.700	3.859	.064
Error(perlakuan)	Sphericity Assumed	992.967	38	26.131		
	Greenhouse-Geisser	992.967	33.598	29.554		
	Huynh-Feldt	992.967	36.791	26.990		
	Lower-bound	992.967	19.000	52.261		

Lampiran 6. Dokumentasi