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Lampiran 1

## FORM INFORMED CONSENT

Penjelasan Penelitian untuk Disetujui (Information for consent)

Nama Peneliti : Najmiah N. Djakaria

Judul Penelitian:

PENGARUH PEMBERIAN PRAVASTATIN TERHADAP KADAR Nitrat OKSIDA  
PADA PASIEN RISIKO TINGGI PREEKLAMPSIA

- A. Tujuan penelitian & penggunaan hasilnya  
Penelitian ini bertujuan untuk menilai efektifitas obat (Pravastatin) dalam menurunkan kadar Nitrat oksida pada pasien risiko tinggi preeklamsia.
- B. Manfaat bagi peserta penelitian  
Penemuan terapi baru untuk mencegah preeklamsia dengan menilai perubahan kadar Nitrat oksida pada ibu yang memiliki risiko tinggi terhadap preeklamsia

Metode dan prosedur kerja penelitian

- Penderita yang memenuhi kriteria inklusi dan eksklusi akan diberikan penjelasan mengenai penelitian ini, mulai tujuan penelitian, perlakuan, pengawasan, efek samping, risiko, pengambilan sampel dan lain-lain
- Penderita akan ditawarkan untuk ikut berpartisipasi dalam penelitian ini, dan dijelaskan hak dan kewajiban sebagai partisipan penelitian
- Jika penderita setuju menjadi partisipan penelitian ini, maka wajib menandatangani lembar persetujuan penelitian
- Partisipan kemudian akan dilakukan randomisasi menjadi dua kelompok: yang menerima kombinasi pravastatin dan aspirin, serta yang menerima aspirin saja
- Partisipan akan meminum obat sampai akhir kehamilan
- Kadar endotelin-1 akan diperiksa sebelum dan setelah pemberian obat.

C. Resiko yang mungkin timbul

Penelitian terkini menunjukkan bahwa pemberian pravastatin pada ibu hamil tidak meningkatkan risiko terjadinya kelainan bawaan pada janin.

1. Penelitian Data farmakologis Merck, dengan 477 ibu hamil yang mengkonsumsi statin. Tidak terbukti adanya peningkatan risiko kelainan bawaan pada janin pada ibu hamil yang mengkonsumsi simvastatin atau lovastatin (Kazmin A et al, 2007).
2. Dari penelitian metaanalisis berskala besar, yang menilai efek pemberian statin pada ibu hamil trimester pertama. Tidak didapatkan peningkatan risiko kelainan bawaan janin, namun didapatkan sedikit peningkatan risiko keguguran pada trimester pertama (Zarek J, Koren G, 2014).

D. Efek samping penelitian

Konsumsi pravastatin dapat menimbulkan efek samping ringan (nyeri ulu hati, nyeri otot, nyeri dada, pusing, diare, nyeri kepala, batuk, bengkak, mual muntah, demam, kelelahan, sesak ringan, gejala flu), dan risiko efek samping berat (gangguan liver, dan kelainan otot). Dari penelitian Constatine (2016), tidak didapatkan peningkatan risiko terjadinya efek samping pada pemberian pravastatin.

E. Tindak lanjut jika terjadi insiden saat dilaksanakan penelitian

Apabila terjadi insiden akan dilakukan tindakan pengobatan sesuai standar yang biayanya ditanggung oleh peneliti.

F. Jaminan kerahasiaan

Identitas peserta penelitian, data, hasil penelitian dan semua yang berhubungan dengan penelitian ini akan dirahasiakan oleh tim peneliti.

G. Hak untuk menolak menjadi subyek penelitian

Subyek penelitian berhak menolak ikut serta dalam penelitian tanpa mempengaruhi perawatan selanjutnya.

H. Partisipasi berdasarkan kesukarelaan dan hak untuk mengundurkan diri

Subyek penelitian berpartisipasi secara sukarela, diberi kesempatan untuk menanyakan hal-hal yang belum jelas dan berhak mendapatkan jawaban yang memuaskan. Tiap saat dalam periode penelitian, subyek penelitian berhak mengundurkan diri dari penelitian.

I. Subjek dapat dikeluarkan dari penelitian

Bila subyek penelitian tidak mentaati instruksi yang diberikan oleh para peneliti, maka dapat dikeluarkan setiap saat dari penelitian ini.

J. Penelitian ini dilakukan oleh

Makassar, .....

Yang memberi penjelasan

Yang menerima penjelasan

(.....)

(.....)

Saksi I

Saksi II

(.....)

(.....)

Lampiran 2

## FORM INFORMED CONSENT

## LEMBAR PERSETUJUAN MENGIKUTI PENELITIAN (Informed consent)

Saya yang bertanda tangan dibawah ini :

Nama  
:.....  
Umur  
:.....  
Alamat  
:.....  
Tlp / Email  
:.....

Sesudah mendengarkan penjelasan yang diberikan dan diberikan kesempatan untuk menanyakan yang belum dimengerti, dengan ini memberikan :

## PERSETUJUAN

Mengikuti penelitian sebagai subyek penelitian dengan judul penelitian:

PENGARUH PEMBERIAN PRAVASTATIN TERHADAP KADAR NITRAT OKSIDA PADA PASIEN RISIKO TINGGI PREEKLAMPSIA

dan sewaktu-waktu saya berhak mengundurkan diri.

Demikian persetujuan ini saya buat dengan penuh kesadaran dan tanpa paksaan.

Makassar,

Yang memberi penjelasan

Yang membuat pernyataan

(.....)

(.....)

Saksi I

Saksi II

(.....)

(.....)

Lampiran 3

## LEMBAR PERSETUJUAN TINDAKAN MEDIS

Saya yang bertanda tangan dibawah ini :

Nama

.....

Umur

.....

Alamat

.....

Tlp / Email

.....

Sesudah mendengarkan penjelasan yang diberikan dan diberikan kesempatan untuk menanyakan yang belum dimengerti, dengan ini memberikan :

## PERSETUJUAN

Untuk dilakukan tindakan medis  
berupa: .....

Dengan judul penelitian:

PENGARUH PEMBERIAN PRAVASTATIN TERHADAP KADAR NITRAT  
OKSIDA PADA PASIEN RISIKO TINGGI PREEKLAMPSIA

Subjek penelitian juga menyetujui bahwa sampel yang diambil akan dapat dilakukan pemeriksaan di laboratorium baik di dalam atau luar negeri.

Sewaktu-waktu saya berhak mengundurkan diri.

Demikian persetujuan ini saya buat dengan penuh kesadaran dan tanpa paksaan.

Makassar, .....

Yang Membuat Pernyataan

(.....)

Saksi 1

Saksi 2

(.....)

(.....)

Lampiran 4

## LEMBAR PENGUMPULAN DATA DASAR PESERTA PENELITIAN

Nama

: .....

Usia

: .....

No Rekam Medis

: .....

Rumah Sakit

: .....

Alamat

: .....

No Telp

: .....

Kelompok : Pravastatin - Kontrol

Data Fisik, Antropologis, dan Etnografis

Suku : Makassar-Bugis-Mandar-Toraja

Tempat kelahiran

: .....

Tempat kelahiran orang

tua : .....

Paritas : .....

Gravida

: .....

Tinggi badan : ..... cm

Berat Badan : ..... kg

BMI : ..... kg/m<sup>2</sup>

Riwayat Penyakit

Hipertensi : + / -

Penyakit ginjal : + / -

Diabetes mellitus : + / - [jika +, Tipe 1 atau Tipe 2]

Penyakit vaskular kolagen (SLE, APS) : + / -

Riwayat Preeklamsia : + / -

Riwayat DM Gestasional : + / -

### Riwayat Obsetri

(Berikan keterangan kehamilan keberapa dan usia kehamilan saat terjadinya)

Keguguran	:	+	/	-
.....				
Kematian janin dalam rahim	:	+	/	-
.....				
Keguguran yang diinduksi	:	+	/	-
.....				
Hipertensi Gestasional	:	+	/	-
.....				
Preeklamsia	:	+	/	-
.....				
Eklampsia	:	+	/	-
.....				
Sindroma HELLP	:	+	/	-
.....				
IUGR atau Bayi KMK	:	+	/	-
.....				
DM Gestasional memerlukan insulin	:	+	/	-
.....				
Persalinan preterm (< 37 minggu):		+	/	-
.....				
Kematian neonatal	:	+	/	-
.....				

### Riwayat Kehamilan Saat Ini

Tekanan darah saat pertama datang  
(booking) : ..... mmHg

Kehamilan multipel	: + / -
Mola Hidatidosa	: + / -
Plasenta hidrofik	: + / -
Konsumsi obat anti hipertensi	: + / -
Mendapat terapi SM	: + / -
Mendapat terapi steroid untuk maturasi paru	: + / -
Mendapat terapi obat anti tiroid	: + / -

Hasil pemeriksaan

Kadar endothelin-1 sebelum terapi :  
 Kadar endothelin-1 setelah terapi :  
 Kadar profil lipid sebelum terapi :  
 Kadar profil lipid setelah terapi :  
 Kadar NO darah sebelum terapi :  
 Kadar NO darah setelah terapi :  
 RI doppler arteri uterina :  
 Fetal scan pada uk 20 - 24 minggu :  
 Doppler arteri umbilikalis :  
 Biometri janin pada usia kehamilan 28 - 32 minggu :

#### Diagnosis Preeklamsia

Data tekanan darah tertinggi selama kehamilan  
 : .....  
 Data tekanan darah tertinggi saat persalinan  
 : .....  
 Data tekanan darah tertinggi 48 jam setelah  
 persalinan : .....  
 Proteinuria :  
 + .....  
 Keterlibatan multiorgan (trombositopenia, peningkatan SGOT/SGPT, BUN-SK,  
 kejang, persalinan preterm, IUGR, kematian fetal atau neonatal): ya -  
 tidak .....  
 .....

#### Luaran Ibu

Mengalami Preeklamsia : + / -  
 Mengalami Preeklamsia Berat : + / -  
 Mengalami Hipertensi Gestasional : + / -  
 Kematian Ibu : + / -  
 .....  
 Persalinan preterm < 37 minggu : + / -  
 Persalinan preterm < 34 minggu : + / -  
 Komplikasi Ibu : + / - [jika ya, sebutkan: edema paru,  
 eklampsia, gagal ginjal akut, sindroma HELLP, tekanan darah  $\geq$  180/110  
 mmHg, DIC, CVA]  
 Lama Perawatan di RS : + / -  
 Metode persalinan : Per vaginam - Pervaginam dengan alat -  
 SC

#### Luaran Janin

Kematian fetal-neonatal : + / -  
 Morbiditas neonatal gabungan (IUGR, RDS, ICH, NEC, neonatal sepsis, IUGR) : + / -  
 Usia Kehamilan saat dilahirkan : .....  
 Berat Badan Bayi : ..... g  
 Panjang Badan Bayi : ..... cm  
 Ballard Score (jika ada) : ..... minggu  
 Lutzchenko Score (jika ada) : P .....  
 Kelainan kongenital : + / - .....  
 Tingkat perawatan : Bayi sehat - intermediate care - NICU  
 Lama perawatan di NICU : ..... hari  
 Pemakaian ventilator : + / -  
 Lama perawatan di RS : ..... hari  
 Mengalami gangguan dalam rahim (oligohidramnion berat, AEDV atau REDV pada arteri umbilikalis, abnormal NST) : + / -

#### Efek Samping Obat

Nyeri kepala : + / -  
 Insomnia : + / -  
 Flushing skin : + / -  
 Nyeri otot, atau kelemahan : + / -  
 Mengantuk berlebihan : + / -  
 Pusing : + / -  
 Mual muntah : + / -  
 Nyeri abdomen hebat : + / -  
 Kembung : + / -  
 Diare : + / -  
 Konstipasi : + / -  
 Bercak kulit : + / -

#### Efek Samping Berat Obat

Miositis (keradangan otot) : + / -  
 Rhabdomyolisis : + / -

Catatan: Pemilihan jenis data dasar yang dikumpulkan berdasarkan pada standarisasi penelitian Preeklamsia yang dikeluarkan COLAB (Global Pregnancy CoLaboratory): Strategy for Standardization of Preeclampsia Research Study Design (Myatt L et al, 2014) dan luaran penelitian ini.

Lampiran 5

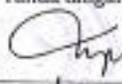
## PROTOKOL PENELITIAN

1. Tim peneliti melakukan skrining pada semua ibu hamil usia kehamilan 12 minggu – 19 minggu 6 hari di poliklinik
2. Ibu hamil yang memenuhi kriteria inklusi dan eksklusi akan ditawarkan untuk terlibat dalam penelitian ini
3. Tim peneliti memberikan penjelasan (information for consent) secara detail mengenai tujuan penelitian, prosedur penelitian, perlakuan, monitoring dan follow up pasien, hak dan kewajiban partisipan penelitian.
4. Jika pasien bersedia mengikuti penelitian ini, maka harus menandatangani lembar persetujuan penelitian (informed consent)
5. Kemudian tim peneliti akan mengambil data dasar partisipan dari wawancara dan pemeriksaan fisik (sesuai lampiran 4)
6. Tim peneliti kemudian akan membagi partisipan kedalam kelompok perlakuan atau kontrol berdasarkan randomisasi yang telah ditetapkan sebelumnya, kemudian akan diambil sampel darah pasien.
7. Pembagian randomisasi kelompok dapat dilakukan sendiri oleh tim peneliti atau pihak farmasi rumah sakit
8. Setelah partisipan dimasukkan dalam salah satu kelompok, maka ia harus meminum obat tersebut selama kehamilan
9. Tim peneliti akan memfollow up dan memonitor partisipan selama kehamilan sesuai dengan jadwal pemeriksaan kehamilan standar
10. Adanya efek samping obat patut dievaluasi oleh tim peneliti, dan dicatat di lembar pengumpulan data (lampiran 4)
11. Partisipan akan diikuti sampai usia kehamilan 36 minggu, dan diambil sampel darah.
12. Tim peneliti akan mencatat luaran maternal dan fetal-neonatal setelah partisipan melahirkan sebagai luaran penelitian ini
13. Hasil luaran penelitian dan data dasar partisipan akan dicatat dan dikompilasi di lembar kompilasi hasil penelitian (dalam bentuk file microsoft excel)

Nama Tim Peneliti (No Telpon):

1. Dr. dr. Deviana Soraya Riu, SpOG (K)
2. dr. Ellen Wewengkang, SpOG
3. dr. Rizky A Ramadhani (082297669191)
4. dr. Andre Septian Putra (082266609863)

5. dr. Najmiah Nur Indah Djakaria (082190246304)  
Lampiran 6 : Rekomendasi persetujuan Etik

 <p style="text-align: center;">KEMENTERIAN PENDIDIKAN DAN KEBUDAYAAN 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 90045. Contact Person: dr. Agussalim Bukhari, M.Med.,Ph.D., Sp.GK. TELP. 081240850858, 0411 5780003. Fax : 0411-581431</p> 			
<b>REKOMENDASI PERSETUJUAN ETIK</b>			
Nomor : 230/UN4.6.4.5.31/ PP36/ 2020			
Tanggal: 10 Maret 2020			
Dengan ini Menyatakan bahwa Protokol dan Dokumen yang Berhubungan Dengan Protokol berikut ini telah mendapatkan Persetujuan Etik :			
No Protokol	UH20010009	No Sponsor	
Peneliti Utama	dr. Najmiah Nur Indah Dj	Sponsor	
Judul Peneliti	Pengaruh Pemberian Pravastatin Terhadap Kadar Nitrat Oksida Pada pasien Risiko Tinggi Preeklamsia		
No Versi Protokol	2	Tanggal Versi	2 Maret 2020
No Versi PSP	2	Tanggal Versi	2 Maret 2020
Tempat Penelitian	Puskesmas Jumpangang Baru Makassar		
Jenis Review	<input type="checkbox"/> Exempted <input type="checkbox"/> Expedited <input checked="" type="checkbox"/> Fullboard Tanggal 22 Januari 2020	Masa Berlaku 10 Maret 2020 sampai 10 Maret 2021	Frekuensi review lanjutan
Ketua Komisi Etik Penelitian Kesehatan FKUH	Nama Prof.Dr.dr. Suryani As'ad, M.Sc.,Sp.GK (K)	Tanda tangan	
Sekretaris Komisi Etik Penelitian Kesehatan FKUH	Nama dr. Agussalim Bukhari, M.Med.,Ph.D.,Sp.GK (K)	Tanda tangan	
<b>Kewajiban Peneliti Utama:</b> <ul style="list-style-type: none"> <li>• Menyerahkan Amandemen Protokol untuk persetujuan sebelum di implementasikan</li> <li>• Menyerahkan Laporan SAE ke Komisi Etik dalam 24 jam dan ditengklapi dalam 7 hari dan Laporan SUSAR dalam 72 jam setelah Peneliti Utama menerima laporan</li> <li>• Menyerahkan Laporan Kemajuan (progress report) setiap 6 bulan untuk penelitian resiko tinggi dan setiap setahun untuk penelitian resiko rendah</li> <li>• Menyerahkan laporan akhir setelah Penelitian berakhir</li> <li>• Melaporkan penyimpangan dari protokol yang disetujui (protocol deviation / violation)</li> <li>• Mematuhi semua peraturan yang ditentukan</li> </ul>			

Lampiran 7 : Surat Izin Penelitian

 <b>RUMAH SAKIT UNHAS</b> <b>FORMULIR</b> <b>2</b> <b>BIDANG</b> <b>PENELITIAN DAN</b> <b>INOVASI</b>	<b>SURAT IZIN PENELITIAN</b>	
	<b>Nomor:</b> 2756/UN4.24.1.2/PT.01.04/2021	<b>Tanggal</b> 08 Maret 2021
	Kepada Yth <b>Kepala Ruang Laboratorium Penelitian</b>	
<p>Dengan hormat,</p> <p>Dengan ini menerangkan bahwa peneliti/ mahasiswa berikut ini:</p> <p>Nama : dr. Najmiah N Djakaria</p> <p>NIM / NIP : C055172010</p> <p>Institusi : Departemen Obstetri dan Ginekologi, Fakultas Kedokteran, Universitas Hasanuddin Makassar</p> <p>Kode penelitian : 210308_1</p> <p>Akan melakukan pengambilan data/ analisa bahan hayati:</p> <p>Terhitung : 08 Maret 2021 s/d 08 Juni 2021</p> <p>Jumlah Subjek/Sample : 76</p> <p>Jenis Data : Data Primer : Elisa</p> <p>Untuk penelitian dengan judul:  <b>"PENGARUH PEMBERIAN PRAVASTATIN TERHADAP KADAR NITRIT OKSIDA PADA PASIEN RISIKO TINGGI PREEKLAMPSIA"</b></p> <p>Harap dilakukan pembimbingan dan pendampingan seperti halnya.</p> <p>Kepada Bidang Penelitian dan Inovasi</p>		
 dr. Muh. Firdaus Kasim, M.Sc NIP:198412012018073001		
Catatan: Lembaran ini diarsipkan oleh Bidang Penelitian dan Inovasi		

Lampiran 8 : Cara Kerja KIT Elisa Nitrat oksida



## Human Nitric Oxide ELISA Kit

### USER INSTRUCTION

Cat.No EI510Hu

Standard Curve Range: 2 $\mu$ mol/L - 600 $\mu$ mol/L

Sensitivity: 1.12 $\mu$ mol/L

Size: 96 wells

**Storage:** Store the reagents at 2-8 $^{\circ}$ C. For over 6-month storage refer to the expiration date keep it at -20 $^{\circ}$ C. Avoid repeated thaw cycles. If individual reagents are opened it is recommended that the kit be used within 1 month.

**\*This product is for research use only, not for use in diagnosis procedures. It's highly recommend to read this instruction entirely before use.**

#### Precision

**Intra-Assay Precision (Precision within an assay)** Three samples of known concentration were tested on one plate to assess intra-assay precision.

**Inter-Assay Precision (Precision between assays)** Three samples of known concentration were tested in separate assays to assess inter-assay precision.

$CV(\%) = SD/mean \times 100$

Intra-Assay:  $CV < 8\%$

Inter-Assay:  $CV < 10\%$

#### Intended Use

This sandwich kit is for the accurate quantitative detection of human Nitric Oxide (also known as NO) in serum, plasma, cell culture supernates, cell lysates, tissue homogenates.

#### Assay Principle

This kit is an Enzyme-Linked Immunosorbent Assay (ELISA). The plate has been pre-coated with human NO antibody. NO present in the sample is added and binds to antibodies coated on the wells. And then biotinylated human NO Antibody is added and binds to NO in the sample. Then Streptavidin-HRP is added and binds to the Biotinylated NO antibody. After incubation unbound

Streptavidin-HRP is washed away during a washing step. Substrate solution is then added and color develops in proportion to the amount of human NO. The reaction is terminated by addition of acidic stop solution and absorbance is measured at 450 nm.

#### Reagent Provided

Components	Quantity
Standard Solution (640µmol/L)	0.5ml x1
Pre-coated ELISA Plate	12 * 8 well strips x1
Standard Diluent	3ml x1
Streptavidin-HRP	6ml x1
Stop Solution	6ml x1
Substrate Solution A	6ml x1
Substrate Solution B	6ml x1
Wash Buffer Concentrate (25x)	20ml x1
Biotinylated human ANO Antibody	1ml x1
User Instruction	1
Plate Scaler	2 pics
Zipper bag	1 pic

#### Material Required But Not Supplied

- 37°C±0.5°C incubator
- Absorbent paper
- Precision pipettes and disposable pipette tips
- Clean tubes
- Deionized or distilled water
- Microplate reader with 450 ± 10nm wavelength filter

#### Precautions

- Prior to use, the kit and sample should be warmed naturally to room temperature 30 minutes.
- This instruction must be strictly followed in the experiment.
- Once the desired number of strips has been removed, immediately reseal the bag to protect the remain from deterioration. Cover all reagents when not in use.
- Make sure pipetting order and rate of addition from well-to-well when pipetting reagents.
- Pipette tips and plate sealer in hand should be clean and disposable to avoid cross-contamination.

- Avoid using the reagents from different batches together.
- Substrate solution B is sensitive to light, don't expose substrate solution B to light for a long time.
- Stop solution contains acid. Please wear eye, hand and skin protection when using this material. Avoid contact of skin or mucous membranes with kit reagent.
- The kit should not be used beyond the expiration date.

### Specimen Collection

**Serum** Allow serum to clot for 10-20 minutes at room temperature. Centrifuge at 2000-3000 RPM for 20 minutes.

**Plasma** Collect plasma using EDTA or heparin as an anticoagulant. Centrifuge samples for 15 minutes at 2000-3000 RPM at 2 - 8°C within 30 minutes of collection.

**Urine** Collect by sterile tube. Centrifuge at 2000-3000 RPM for approximately 20 minutes. When collecting pleuroperitoneal fluid and cerebrospinal fluid, please follow the procedures above-mentioned.

**Cell Culture Supernatant** Collect by sterile tubes when examining secrete components. Centrifuge at 2000-3000 RPM for approximately 20 minutes. Collect the supernatants carefully. When examining the components within the cell, use PBS (pH 7.2-7.4) to dilute cell suspension to the cell concentration of approximately 1 million/ml. Damage cells through repeated freeze-thaw cycles to let out the inside components. Centrifuge at 2000-3000 RPM for approximately 20 minutes.

**Tissue and other body fluids** Rinse tissues in PBS (pH 7.4) to remove excess blood thoroughly and weigh before homogenization. Mince tissues and homogenize them in PBS (pH7.4) with a glass homogenizer on ice. Thaw at 2-8°C or freeze at -20°C. Centrifuge at 2000-3000 RPM for approximately 20 minutes.

### Note

- Sample concentrations should be predicted before being used in the assay. If the sample concentration is not within the range of the standard curve, users must **contact us** to determine the optimal sample for their particular experiments.
- Samples to be used within 5 days should be stored at 2-8°C. Samples should be aliquoted or must be stored at -20°C within 1 month or -80°C within 6 months. Avoid repeated freeze thaw cycles.
- Samples should be brought to room temperature before starting the assay.

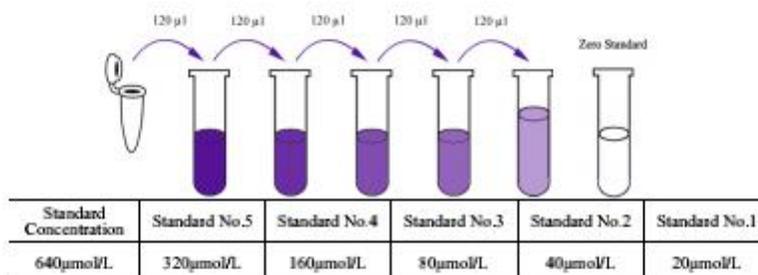
- Centrifuge to collect sample before use.
- Samples containing  $\text{NaN}_3$  can't be tested as it inhibits the activity of Horse Radish Peroxidase (HRP).
- Collect the supernatants carefully. When sediments occurred during storage, centrifugation should be performed again.
- Hemolysis can greatly impact the validity of test results. Take care to minimize hemolysis.

*\*Sample can't be diluted with this kit. Owing to the the material we use to prepare the kit, the sample matrix interference may falsely depress the specificity and accuracy of the assay.*

#### Reagent Preparation

- All reagents should be brought to room temperature before use.
- **Standard** Reconstitute the 120 $\mu\text{l}$  of the standard (640 $\mu\text{mol/L}$ ) with 120 $\mu\text{l}$  of standard diluent to generate a 320 $\mu\text{mol/L}$  standard stock solution. Allow the standard to sit for 15 mins with gentle agitation prior to making dilutions. Prepare duplicate standard points by serially diluting the standard stock solution (320 $\mu\text{mol/L}$ ) 1:2 with standard diluent to produce 160 $\mu\text{mol/L}$ , 80 $\mu\text{mol/L}$ , 40 $\mu\text{mol/L}$  and 20 $\mu\text{mol/L}$  solutions. Standard diluent serves as the zero standard(0  $\mu\text{mol/L}$ ). Any remaining solution should be frozen at  $-20^\circ\text{C}$  and used within one month. Dilution of standard solutions suggested are as follows:

320 $\mu\text{mol/L}$	Standard No.5	120 $\mu\text{l}$ Original Standard + 120 $\mu\text{l}$ Standard Diluent
160 $\mu\text{mol/L}$	Standard No.4	120 $\mu\text{l}$ Standard No.5 + 120 $\mu\text{l}$ Standard Diluent
80 $\mu\text{mol/L}$	Standard No.3	120 $\mu\text{l}$ Standard No.4 + 120 $\mu\text{l}$ Standard Diluent
40 $\mu\text{mol/L}$	Standard No.2	120 $\mu\text{l}$ Standard No.3 + 120 $\mu\text{l}$ Standard Diluent
20 $\mu\text{mol/L}$	Standard No.1	120 $\mu\text{l}$ Standard No.2 + 120 $\mu\text{l}$ Standard Diluent



- **Wash Buffer** Dilute 20ml of Wash Buffer Concentrate 25x into deionized or distilled water to yield 500 ml of 1x Wash Buffer. If crystals have formed in the concentrate, mix gently until the crystals have completely dissolved.

### Assay Procedure

1. Prepare all reagents, standard solutions and samples as instructed. Bring all reagents to room temperature before use. The assay is performed at room temperature.
2. Determine the number of strips required for the assay. Insert the strips in the frames for use. The unused strips should be stored at 2-8°C.
3. Add 50µl standard to standard well. **Note:** Don't add antibody to standard well because the standard solution contains biotinylated antibody.
4. Add 40µl sample to sample wells and then add 10µl anti-NO antibody to sample wells, then add 50µl streptavidin-HRP to sample wells and standard wells (Not blank control well). Mix well. Cover the plate with a sealer. Incubate 60 minutes at 37°C.
5. Remove the sealer and wash the plate 5 times with wash buffer. Soak wells with at least 0.35 ml wash buffer for 30 seconds to 1 minute for each wash. For automated washing, aspirate all wells and wash 5 times with wash buffer, overfilling wells with wash buffer. Blot the plate onto paper towels or other absorbent material.
6. Add 50µl substrate solution A to each well and then add 50µl substrate solution B to each well. Incubate plate covered with a new sealer for 10 minutes at 37°C in the dark.
7. Add 50µl Stop Solution to each well, the blue color will change into yellow immediately.
8. Determine the optical density (OD value) of each well immediately using a microplate reader set to 450 nm within 10 minutes after adding the stop solution.

### Summary

1. Prepare all reagents, samples and standards.
2. Add sample and ELISA reagent into each well. Incubate for 1 hour at 37°C.
3. Wash the plate 5 times.
4. Add substrate solution A and B. Incubate for 10 minutes at 37°C.
5. Add stop solution and color develops.
6. Read the OD value within 10 minutes.

### Calculation of Result

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Tel: 86 21 31007137 | Fax: 86 21 65 929711 816 | E-mail: [sales@bt-laboratory.com](mailto:sales@bt-laboratory.com)

Lampiran 9 : Tabel Induk

No	No	KODE	NAMA	PENDIDIKAN	Data Ibu			Riwayat Penyakit Dahulu		Persalinan Saat Ini			NITRIK OKSIDA		LIPID SEBELUM				LIPID SESUDAH				
					Usia	Paritas	IMT	Hipertensi	Riwayat Preeklampsia Sebelumnya	MAP Pre Intervensi	MAP Post intervensi	PE	BBL Bayi	SEBELUM	SESUDAH	KOL TOT	LDL	HDL	TG	KOL TOT	LDL	HDL	TG
1	1	A	ANGGI	S1	29	2	25.35	YA	YA	93.3	120.00	YA	2720	240.4	299.93	256	152	43	231	271	173.8	45	261
2	6	A	SUHARTI	SMA	38	5	35	TIDAK	TIDAK	113	116.70	YA	3800	22.77	117.43	176	80.2	40	279	249	124	48	387
3	7	A	YOANTI R SIAHAYA	S1	32	1	27.5	YA	TIDAK	133.3	120.00	YA	1200	119.77	485.63	348	256.4	40	258	488	373.4	52	313
4	10	A	SUDARMA	S1	45	4	25.5	TIDAK	TIDAK	83.3	83.30	TIDAK	4100	203.17	240.57	173	105	40	140	235	132	65	189
5	15	A	MUSRIATI	S1	37	2	31.5	TIDAK	TIDAK	105	100.00	TIDAK	2600	203.93	120.23	294	189	53	256	242	158.4	48	178
6	18	A	SAMSIH	SMA	28	2	31	TIDAK	TIDAK	83.3	83.30	TIDAK	2900	233.17	253.5	210	121.8	42	231	235	132.6	56	232
7	19	A	ANDI FARAHDIBA	SMA	26	2	29.1	TIDAK	YA	96.6	103.30	YA	1285	224.33	3.50629	231	174	43	70	347	258.8	41	236
8	26	A	TRI ULFA	S1	29	1	25.48	TIDAK	TIDAK	90	126.70	YA	2200	250.5	339.23	264	140.4	40	418	349	161.2	50	689
9	31	A	ANA PERDIANA	S1	25	1	38	TIDAK	TIDAK	110	93.30	TIDAK	3300	383.37	154.17	244	174.8	42	136	246	165	48	165
10	32	A	NRI HARTATI	S1	38	1	25.6	YA	TIDAK	96.7	110.00	YA	2900	200.1	265.97	283	206.4	45	158	367	218	53	480
11	37	A	NOVITA	S1	32	4	21.05	TIDAK	YA	93.3	113.30	TIDAK	2400	152.2	23.54009	155	109.4	30	78	392	280.6	56	277
12	39	A	DEWI WAHYUNI	SMA	31	4	22.3	TIDAK	TIDAK	93.3	90.00	TIDAK	3400	176.2	32.47108	368	256	52	300	408	252	48	500
13	43	A	CENCENG	SMA	42	3	25.22	TIDAK	TIDAK	83.3	123.30	TIDAK	3400	146.2	38.81158	248	167	43	190	353	257.8	40	276
14	46	A	SYAMSINAR	SMP	40	3	20	TIDAK	TIDAK	83.3	100.00	TIDAK	2500	172.5	16.29062	270	194	50	130	212	117.2	47	239
15	47	A	KARMILA	SMA	41	5	31.5	TIDAK	TIDAK	93.3	93.30	TIDAK	3000	202.47	19.23389	268	183.8	41	216	277	180	46	255
16	50	A	RAHMAH	D3	28	2	32.53	TIDAK	YA	73.3	93.30	TIDAK	3100	216.03	13.19184	214	146	40	140	127	70.4	40	83
17	53	A	YOSEPHA	S1	43	3	32.4	TIDAK	TIDAK	86.6	116.70	YA	3200	280.63	67.41663	218	149	40	145	225	255.8	40	154
18	56	A	RESKIAH CHANDRA	SMP	33	4	20.9	TIDAK	YA	93.33	160.00	YA	2480	220.87	0.00000	327	196.6	54	382	348	219	44	329
19	58	A	SYINTA DWI	SMA	33	2	29.6	TIDAK	TIDAK	76.67	86.70	TIDAK	3400	184.87	41.35893	262	198.8	35	141	248	157.2	43	237
20	59	A	FATIMAH	SD	38	6	29.9	YA	YA	93	103.30	TIDAK	2900	222.27	34.92492	280	179.8	56	221	306	181	58	335
21	60	A	MUNJIAH	SMA	34	2	32	TIDAK	TIDAK	83.3	93.30	TIDAK	3800	196.67	19.15034	208	127.8	58	111	213	132	39	207
22	61	A	SYAHERIAH	SMK	37	3	23.04	TIDAK	TIDAK	90	103.30	TIDAK	3100	45.98012	0.96491	294	211	46	185	308	203.4	40	323
23	62	A	NURHARDIYANTI	SMA	25	3	28.7	YA	YA	83.3	130.00	YA	1100	24.71214	47.84892	222	150.8	48	116	349	245.2	43	461
24	63	A	SURAHMAWATI	S1	43	5	26.25	TIDAK	TIDAK	93.3	133.30	YA	3200	15.98664	39.61895	214	77.4	42	473	264	177.2	40	234
25	66	A	ERNAWATI	S1	39	3	18.22	YA	TIDAK	126.7	120.00	YA	400	41.09474	318.50538	252	179.6	43	147	208	130	58	97
26	67	A	RISKI EKAWATI	D3	30	2	23.21	TIDAK	YA	83.3	93.30	TIDAK	2900	33.28386	35.55443	251	190	43	90	179	125	40	68
27	68	A	RESTU	S2	32	3	32	YA	YA	93.3	130.00	YA	4100	37.97108	19.33415	369	300.6	46	112	335	230	49	295
28	71	A	ROHANA	SMA	23	2	39.6	TIDAK	YA	103.3	110.00	YA	3850	54.60165	112.3708	190	124	39	131	212	160	46	188
29	74	A	FINALIA	D3	29	2	28.51	TIDAK	TIDAK	83.3	103.30	TIDAK	2000/2300	23.49008	140.52406	179	162	40	151	191	134	50	98
30	75	A	KATTIE	S1	30	2	25.73	TIDAK	YA	80	116.70	TIDAK	2750	18.74924	42.61332	280	124	56	218	225	113	44	81
31	76	A	AMANDA	S1	26	1	26.14	TIDAK	TIDAK	80	106.70	YA	2811	14.64972	42.59509	317	202	48	165	174	108	40	76
32	77	A	HALIDA	S1	34	3	28.54	TIDAK	YA	93.3	93.30	TIDAK	2930	33.08484	30.48263	247	191	42	143	182	144	41	115
33	2	B	NURLAELA	SMA	35	2	45.5	TIDAK	YA	106.6	116.70	TIDAK	3250	91.83	207.87	212	142	41	146	246	145	56	223
34	3	B	WIDYANTI	S1	32	1	24	TIDAK	TIDAK	110	106.60	YA	3500	64.27	285.1	245	153	55	187	251	146	40	324
35	11	B	ASRI SRI	SD	39	3	33	YA	TIDAK	110	123.30	YA	3300	368.63	134	205	142	40	115	272	208	36	138
36	12	B	SITI FARIDA	SMA	42	2	30.1	TIDAK	TIDAK	83.3	123.30	YA	3100	236.93	92.37	169	107	42	100	181	126	40	77
37	13	B	IMELDA	SMA	37	3	21.3	TIDAK	YA	86.6	86.70	TIDAK	1300	64.67	72.93	234	159	47	139	234	159	47	139
38	14	B	NURJANNAH	D4 KEBI	24	1	33.9	TIDAK	TIDAK	86.6	106.70	YA	3150	325.5	132.27	221	152	46	117	216	104	42	350
39	17	B	ASNIAR B UMAR	S1	32	2	30.16	TIDAK	YA	96.6	103.30	TIDAK	2750	46.77	108.47	313	227	53	163	281	186	56	193
40	21	B	ROSDIANA	SD	39	4	23.6	YA	TIDAK	78.3	93.30	TIDAK	3150	603.27	303.68324	174	89.4	48	180	218	105	50	317
41	23	B	FITRIA	S1	36	4	31.57	YA	YA	90	110.00	YA	2100	138.5	154.17	257	155	35	334	530	322	41	837
42	28	B	RANI	S2	37	3	25.66	TIDAK	YA	83.3	126.70	YA	575	175.8	149.97	233	155	42	182	189	72	40	383
43	29	B	IRMAWATI	SMA	33	5	35.88	TIDAK	YA	106.6	136.70	YA	2000	84.77	58.66703	155	79	41	175	243	216	54	304
44	33	B	MILAWATI	SMA	32	3	37.89	TIDAK	TIDAK	93.3	106.70	YA	3450	87.2	41.41271	189	144	30	71	334	216	58	298
45	34	B	NURMI	S1	34	2	21.6	TIDAK	YA	90	93.30	TIDAK	3260	239.5	43.30616	187	123	39	124	268	156	42	352
46	35	B	IRIANTI	D3	39	3	24.7	TIDAK	TIDAK	83.3	90.00	TIDAK	2600	138.03	24.15683	170	101	40	145	241	208	51	311
47	38	B	SAFITRI	SMA	34	2	26.67	TIDAK	TIDAK	110	126.70	TIDAK	2600	179.2	34.92492	229	144	40	229	184	67.6	40	382
48	40	B	JUSMIANINGSIH	DIPLOM	28	1	25.7	TIDAK	TIDAK	96.6	110.00	TIDAK	2800	342.9	24.47310	254	171	48	173	271	129	42	496
49	41	B	JUMRIANA	SMA	32	3	39.8	TIDAK	TIDAK	96.6	96.70	TIDAK	3660	44.1	13.06493	202	124	41	185	202	124	41	185
50	42	B	YULIANA	SMA	37	5	22.17	TIDAK	YA	96.6	126.70	YA	3000	168.6	20.06006	212	145	62.4	105	231	150	43.2	190
51	45	B	SYAMSIDAR	SMA	32	4	26.67	TIDAK	YA	93.3	126.70	YA	2210	118.87	32.53786	232	155	56	105	206	118	45	216
52	48	B	ENDANG	SMA	41	4	25.48	TIDAK	YA	83.3	93.30	TIDAK	3900	93.67	27.05443	312	223	41	239	440	271	40	647
53	49	B	SICILIA	SMA	33	2	27.7	TIDAK	TIDAK	96.7	96.70	TIDAK	3700	137.8	37.73948	275	183	50	210	275	183	50	210
54	51	B	SALMIAH	SMA	38	3	28.2	YA	YA	90	120.00	YA	3200	127.77	239.32096	288	206	40	208	274	132	46	479
55	52	B	RIKA	SMA	27	2	24.16	TIDAK	YA	106.7	136.70	YA	1380	297.93	0.00000	230	144	50	179	321	233	52	178
56	54	B	ANDI FAUZIAH	S1	28	4	30	YA	TIDAK	106.7	93.00	TIDAK	3340	107.8	39.80892	269	139	57	365	312	207	40	328
57	55	B	SITTI NURAENI	D3	34	2	34.4	TIDAK	TIDAK	103.3	96.70	TIDAK	3400	273.53	61.83160	177	74.2	43	299	290	159	40	489
58	64	B	NISMAHUL	D3	29	1	35.41	TIDAK	TIDAK	106.7	130.00	YA	2450	26.76320	20.48940	391	317	40	169	258	162	46	252
59	65	B	WIDYAWATI	S1	25	3	17.87	TIDAK	YA	70	83.30	TIDAK	3100	157.76323	21.22076	245	188	40	83	280	177	55	236
60	69	B	NURLINA SALIHU	SD	33	3	27.9	YA	TIDAK	106.7	133.30	YA	2800	26.62174	51.86237	264	165	58	207	275	147	40	438
61	70	B	MASRAH	SMA	31	5	16	YA	YA	76.67	88.30	TIDAK	2045	36.96177	37.29275	204	137	48	95	226			

## Lampiran 10 : Hasil SPSS

**Crosstab**

		Pemberian		Total	
		Aspirin	Aspirin+Pravastatin		
Umur	20-35	Count	20	21	41
		% within Pemberian	62.5%	67.7%	65.1%
	>35	Count	12	10	22
		% within Pemberian	37.5%	32.3%	34.9%
Total		Count	32	31	63
		% within Pemberian	100.0%	100.0%	100.0%

**Chi-Square Tests**

	Value	df	Asymptotic Significance (2- sided)	Exact Sig. (2- sided)	Exact Sig. (1- sided)
Pearson Chi-Square	.190 <sup>a</sup>	1	.663		
Continuity Correction <sup>b</sup>	.030	1	.863		
Likelihood Ratio	.191	1	.662		
Fisher's Exact Test				.793	.432
Linear-by-Linear Association	.187	1	.665		
N of Valid Cases	63				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 10.83.

b. Computed only for a 2x2 table

**Chi-Square Tests**

	Value	df	Asymptotic Significance (2- sided)
Pearson Chi-Square	5.577 <sup>a</sup>	3	.134
Likelihood Ratio	6.486	3	.090
Linear-by-Linear Association	1.937	1	.164

N of Valid Cases	63	
------------------	----	--

a. 4 cells (50.0%) have expected count less than 5. The minimum expected count is .98.

### Pendidikan \* Pemberian Crosstabulation

		Pemberian		Total	
		Aspirin	Aspirin+Pravastatin		
Pendidikan	Pendidikan Dasar	Count	13	18	31
		% within Pemberian	40.6%	58.1%	49.2%
	Pendidikan Tinggi	Count	19	13	32
		% within Pemberian	59.4%	41.9%	50.8%
Total	Count	32	31	63	
	% within Pemberian	100.0%	100.0%	100.0%	

### Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.916 <sup>a</sup>	1	.166		
Continuity Correction <sup>b</sup>	1.282	1	.258		
Likelihood Ratio	1.926	1	.165		
Fisher's Exact Test				.211	.129
Linear-by-Linear Association	1.886	1	.170		
N of Valid Cases	63				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 15.25.

b. Computed only for a 2x2 table

### Crosstab

		Pemberian		Total
		Aspirin	Aspirin+Pravastatin	

Paritas	Nulipara	Count	3	4	7
		% within Pemberian	9.4%	12.9%	11.1%
	>1 Anak	Count	29	27	56
		% within Pemberian	90.6%	87.1%	88.9%
Total		Count	32	31	63
		% within Pemberian	100.0%	100.0%	100.0%

### Chi-Square Tests

	Value	df	Asymptotic Significance (2- sided)	Exact Sig. (2- sided)	Exact Sig. (1- sided)
Pearson Chi-Square	.198 <sup>a</sup>	1	.656		
Continuity Correction <sup>b</sup>	.002	1	.964		
Likelihood Ratio	.199	1	.656		
Fisher's Exact Test				.708	.482
Linear-by-Linear Association	.195	1	.659		
N of Valid Cases	63				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 3.44.

b. Computed only for a 2x2 table

### Crosstab

		Pemberian		Total	
		Aspirin	Aspirin+Pravastatin		
IMT	Underweight	Count	1	3	4
		% within Pemberian	3.1%	9.7%	6.3%
	Normal	Count	14	13	27
		% within Pemberian	43.8%	41.9%	42.9%
	Obesitas	Count	17	15	32
		% within Pemberian	53.1%	48.4%	50.8%
Total		Count	32	31	63
		% within Pemberian	100.0%	100.0%	100.0%

### Chi-Square Tests

	Value	df	Asymptotic Significance (2- sided)
Pearson Chi-Square	1.146 <sup>a</sup>	2	.564
Likelihood Ratio	1.193	2	.551
Linear-by-Linear Association	.528	1	.467
N of Valid Cases	63		

a. 2 cells (33.3%) have expected count less than 5. The minimum expected count is 1.97.

### Paired Samples Statistics kelompok aspirin

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Cholesterol Sebelum	248.42	32	54.296	9.049
	Cholesterol Sesudah	269.86	32	77.955	12.992
Pair 2	LDL Sebelum	180.31	32	64.881	11.339
	LDL Sesudah	172.68	32	53.881	9.525
Pair 3	HDL Sebelum	51.08	32	42.093	7.015
	HDL Sesudah	46.39	32	6.838	1.140
Pair 4	TG Sebelum	187.44	32	93.662	15.610
	TG Sesudah	245.00	32	137.552	22.925

### Paired Samples Test kelompok aspirin

Mean	Std. Deviation	Paired Differences		t	df	Sig. (2- tailed)
		Std. Error Mean	95% Confidence Interval of the Difference			

					Lower	Upper			
Pair 1	Cholesterol Sebelum - Cholesterol Sesudah	-21.444	72.891	12.149	-46.107	3.218	-1.765	31	.086
Pair 2	LDL Sebelum - LDL Sesudah	76.637	69.096	12.215	-17.274	32.549	.625	31	.536
Pair 3	HDL Sebelum - HDL Sesudah	4.694	42.547	7.091	-9.702	19.090	.662	31	.512
Pair 4	TG Sebelum - TG Sesudah	-57.556	124.972	20.829	-99.840	-15.271	-2.763	31	.009

### Paired Samples Statistics kelompok pravastatin

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Cholesterol Sebelum	229.77	31	51.339	9.221
	Cholesterol Sesudah	262.29	31	73.027	13.116
Pair 2	LDL Sebelum	152.12	31	48.056	8.631
	LDL Sesudah	161.73	31	55.023	9.882
Pair 3	HDL Sebelum	45.43	31	7.282	1.308
	HDL Sesudah	45.65	31	6.022	1.082
Pair 4	TG Sebelum	168.21	31	71.517	12.845
	TG Sesudah	301.16	31	166.953	29.986

### Paired Samples Test kelompok pravastatin

		Paired Differences				t	df	Sig. (2-tailed)	
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower				Upper
Pair 1	Cholesterol Sebelum - Cholesterol Sesudah	-32.516	72.261	12.978	-59.022	-6.011	-2.505	30	.018

Pair 2	LDL Sebelum - LDL Sesudah	-9.616	68.713	12.341	-34.820	15.588	-.779	30	.442
Pair 3	HDL Sebelum - HDL Sesudah	-.219	10.138	1.821	-3.938	3.499	-.120	30	.905
Pair 4	TG Sebelum - TG Sesudah	-132.952	130.159	23.377	-180.694	-85.209	-5.687	30	.000

### Paired Samples Statistics MAP

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	MAPsebelum Aspirin	92.7178	32	13.35149	2.36023
	MAPsesudah Aspirin	108.4281	32	17.13102	3.02836
Pair 2	MAP Sebelum Pravastatin	93.8994	31	11.57059	2.07814
	MAP Sesudah Pravastatin	109.2935	31	16.26813	2.92184

### Crosstab

		Pemberian			
		Aspirin	Aspirin+Pravastatin	Total	
Hipertensi	Ya	Count	7	7	14
		% within Pemberian	21.9%	22.6%	22.2%
	Tidak	Count	25	24	49
		% within Pemberian	78.1%	77.4%	77.8%
Total	Count	32	31	63	
	% within Pemberian	100.0%	100.0%	100.0%	

### Chi-Square Tests

	Value	df	Asymptotic Significance (2- sided)	Exact Sig. (2- sided)	Exact Sig. (1- sided)
Pearson Chi-Square	.005 <sup>a</sup>	1	.946		
Continuity Correction <sup>b</sup>	.000	1	1.000		

Likelihood Ratio	.005	1	.946		
Fisher's Exact Test				1.000	.592
Linear-by-Linear Association	.004	1	.947		
N of Valid Cases	63				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 6.89.

b. Computed only for a 2x2 table

### Crosstab

		Pemberian			
		Aspirin	Aspirin+Pravastatin	Total	
Riwayat Preklamsia	Ya	Count	12	16	28
		% within Pemberian	37.5%	51.6%	44.4%
	Tidak	Count	20	15	35
		% within Pemberian	62.5%	48.4%	55.6%
Total	Count	32	31	63	
	% within Pemberian	100.0%	100.0%	100.0%	

### Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.270 <sup>a</sup>	1	.260		
Continuity Correction <sup>b</sup>	.763	1	.382		
Likelihood Ratio	1.274	1	.259		
Fisher's Exact Test				.315	.191

Linear-by-Linear Association	1.250	1	.264	
N of Valid Cases	63			

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 13.78.

b. Computed only for a 2x2 table

### Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Aspirin	143.7195034	32	99.23695755	17.54278141
	Aspirin	106.7802769	32	123.98649370	21.91792262
Pair 2	Aspirin+Pravastatin	162.0232	31	126.75328	22.76556
	Aspirin+Pravastatin	82.6042	31	81.15458	14.57579

### Paired Samples Test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	Aspirin - Aspirin	36.93922656	145.25009834	25.67683238	-15.42901833	89.30747146	1.439	31	.160
	Aspirin+Pravastatin - Aspirin+Pravastatin	79.41893	127.12427	22.83219	32.78937	126.04849	3.478	30	.002

### preklamisa \* Pemberian Crosstabulation

		Pemberian		Total	
		Aspirin	Aspirin+Pravastatin		
preklamisa	Ya	Count	11	18	29

	% within Pemberian	34.4%	58.1%	46.0%
Tidak	Count	21	13	34
	% within Pemberian	65.6%	41.9%	54.0%
Total	Count	32	31	63
	% within Pemberian	100.0%	100.0%	100.0%

### Chi-Square Tests

	Value	df	Asymptotic Significance (2- sided)	Exact Sig. (2- sided)	Exact Sig. (1- sided)
Pearson Chi-Square	3.557 <sup>a</sup>	1	.059		
Continuity Correction <sup>b</sup>	2.667	1	.102		
Likelihood Ratio	3.591	1	.058		
Fisher's Exact Test				.079	.051
Linear-by-Linear Association	3.501	1	.061		
N of Valid Cases	63				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 14.27.

b. Computed only for a 2x2 table

### BBL \* pbr Crosstabulation

		intervensi		Total	
		Aspirin	Aspirin+Pravast atin		
BBL	<2500	Count	7	8	15
		% within pbr	21.9%	25.8%	23.8%
	2500-4000	Count	23	23	46
		% within pbr	71.9%	74.2%	73.0%
	>4000	Count	2	0	2
		% within pbr	6.3%	0.0%	3.2%
Total		Count	32	31	63
		% within pbr	100.0%	100.0%	100.0%

### Chi-Square Tests

	Value	df	Asymptotic Significance (2- sided)
Pearson Chi-Square	2.051 <sup>a</sup>	2	.359
Likelihood Ratio	2.823	2	.244
Linear-by-Linear Association	.707	1	.400
N of Valid Cases	63		

a. 2 cells (33.3%) have expected count less than 5. The minimum expected count is .98.

### Test Statistics<sup>a</sup>

	Cholesterol Sesudah - Cholesterol Sebelum	LDL Sesudah - LDL Sebelum	HDL Sesudah - HDL Sebelum	TG Sesudah - TG Sebelum
Z	-2.632 <sup>b</sup>	-.898 <sup>b</sup>	-.751 <sup>b</sup>	-4.800 <sup>b</sup>
Asymp. Sig. (2-tailed)	.008	.369	.452	.000

a. Wilcoxon Signed Ranks Test

b. Based on negative ranks.

Lampiran 11

# KARTU KONTROL OBAT

NAMA:  
 UMUR:  
 HPHT:  
 USIA KEHAMILAN:  
 TAKSIRAN PERSALINAN  
 KELOMPOK:

## 2018

## 2019

<table border="1"> <caption>January</caption> <tr><th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th></tr> <tr><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td></tr> <tr><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td></tr> <tr><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td></tr> <tr><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td></tr> <tr><td>28</td><td>29</td><td>30</td><td>31</td><td></td><td></td><td></td></tr> </table>	Su	Mo	Tu	We	Th	Fr	Sa		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				<table border="1"> <caption>February</caption> <tr><th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th></tr> <tr><td></td><td></td><td></td><td>1</td><td>2</td><td>3</td><td></td></tr> <tr><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> <tr><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td></tr> <tr><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td></tr> <tr><td>25</td><td>26</td><td>27</td><td>28</td><td></td><td></td><td></td></tr> </table>	Su	Mo	Tu	We	Th	Fr	Sa				1	2	3		4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28				<table border="1"> <caption>March</caption> <tr><th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th></tr> <tr><td></td><td></td><td></td><td></td><td>1</td><td>2</td><td>3</td></tr> <tr><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td></tr> <tr><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td></tr> <tr><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td></tr> <tr><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td></tr> </table>	Su	Mo	Tu	We	Th	Fr	Sa					1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	<table border="1"> <caption>January</caption> <tr><th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th></tr> <tr><td></td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td></td></tr> <tr><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td></tr> <tr><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td></tr> <tr><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td></tr> <tr><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td></td><td></td></tr> </table>	Su	Mo	Tu	We	Th	Fr	Sa		1	2	3	4	5		6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			<table border="1"> <caption>February</caption> <tr><th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th></tr> <tr><td></td><td></td><td></td><td></td><td></td><td>1</td><td>2</td></tr> <tr><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td></tr> <tr><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td></tr> <tr><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td></tr> <tr><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td></tr> </table>	Su	Mo	Tu	We	Th	Fr	Sa						1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	<table border="1"> <caption>March</caption> <tr><th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td>1</td><td>2</td></tr> <tr><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td></td></tr> <tr><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td></tr> <tr><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td><td>25</td></tr> <tr><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td>31</td><td></td><td></td></tr> </table>	Su	Mo	Tu	We	Th	Fr	Sa							1	2	3	4	5	6	7	8	9		10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31																											
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