DAFTAR PUSTAKA

Ahmadi, Z., Shamsi, M., Roozbahani, N., & Moradzadeh, R. (2020). The effect of educational intervention program on promoting preventive behaviors of urinary tract infection in girls: A randomized controlled trial. *BMC Pediatrics*, *20*(1). https://doi.org/10.1186/s12887-020-1981-x

Akagawa, Y., et al. 2019. Optimal bacterial colony counts for the diagnosis of upper urinary tract infections in infants. *Clin Exp Nephrol.*

Alsubaie, S. S., & Barry, M. A. (2019). Current status of long-term antibiotic prophylaxis for urinary tract infections in children: An antibiotic stewardship challenge. In *Kidney Research and Clinical Practice* (Vol. 38, Issue 4, pp. 441–454). The Korean Society of Nephrology. https://doi.org/10.23876/j.krcp.19.091

Altuntas, N., et al. 2020. Midstream clean-catch urine culture obtained by stimulation technique versus catheter-specimen urine culture for urinary tract infections in newborns: a paired comparison of urine collection methods. *Med Princ Pract.* 29: 326.

Anses. 2019. Safety of Baby Diapers. *Collective expert appraisal report;26-39*

Balighian E, Burke M. 2018. Urinary tract infections in children. *Pediatr Rev*; 39(1): 3-12.

Daulay, M., Siregar, R., Rina Ramayani, O., & Ramayati, R. (2013). Association between the frequency of disposable diaper changing and urinary tract infection in children. In *Paediatrica Indonesiana VOLUME* (Vol. 53, Issue 2).

Fahimzad, A., Taherian, M., Dalirani, R., & Shamshiri, A. (2010). Diaper Type as a Risk Factor in Urinary Tract Infection of Children. In *Iranian Journal of Pediatrics* (Vol. 20, Issue 1).

Fitriawati, I., Wahyunitisari, M. R., Prasetyo, R. V., & Puspitasari, D. (2021). The Characteristics of Children with UTI Due to ESBL-producing Bacteria at Dr. Soetomo General Hospital, Surabaya. *Biomolecular and Health Science Journal*, *4*(1), 38. https://doi.org/10.20473/bhsj.v4i1.25392

Gondim, R., Azevedo, R., Braga, A. A. N. M., Veiga, M. L., & Barroso, U. (2018). Risk factors for urinary tract infection in children with urinary

urgency. *International Braz J Urol*, *44*(2), 378–383. https://doi.org/10.1590/s1677-5538.ibju.2017.0434

Herreros, M.L., et al. 2018. Performing a urine dipstick test with a clean-catch urine sample is an accurate screening method for urinary tract infections in young infants. *Acta Paediatr*. 107: 145.

Hidayati, S. F., Umboh, V., & Rondonuwu, S. H. E. (2022). Relationship between Nutritional Status and Urinary Tract Infection in Children. *E-CliniC*, *10*(2), 288. https://doi.org/10.35790/ecl.v10i2.37830

Hudson A, Romao RLP, MacLellan D. 2017. Urinary tract infection in children. *CMAJ*; 189(16): E608

Janett, S., et al. 2019. Pyuria and microbiology in acute bacterial focal nephritis: A systematic review. *Minerva Medica*. 110: 232

Karmazyn BK, Alazraki AL, Anupindi SA, Dempsey ME, Dillman JR, Dorfman SR, et al. 2017. Expert panel on pediatric imaging: ACR appropriateness criteria, urinary tract infection-child. *J Am Coll Radiol*; 14(5S): S362-S71

Kaufman J, et al. 2019. Urinary tract infections in children: an overview of diagnosis and management. *BMJ Paediatrics Open*. 3:e000487

Korbel L, Howell M, Spencer JD. 2017. The clinical diagnosis and management of urinary tract infections in children and adolescents. *Paediatr Int Child Health*; 37(4): 273-9.

Kunmi Sobowale, Ashley Clayton, Megan V. Smith. 2021. Diaper Need Is Associated with Pediatric Care Use: An Analysis of a Nationally Representative Sample of Parents of Young Children, *The Journal of Pediatrics*, Volume 230, Pages 146-151

Leung *et al*. 2019. Urinary Tract Infection in Children. *Recent Patents on Inflammation & Allergy Drug Discovery*, Vol 13, 2-18

Mazzi, S., et al. 2019. Timing of voiding cystourethrography after febrile urinary tract infection in children: A systematic review. *Archives of Disease in Childhood*

Mayangsari, S., As, N. A., Lisminingsih, R. D., & Biologi, J. (n.d.). Prevalensi Infeksi Saluran Kemih (ISK) Pada Pasien Di Rumah Sakit Islam (RSI) Unisma Malang Tahun 2018 Prevalence of Urinary Tract Infection (UTI) in Patients at Islamic Hospital (RSI) of Unisma Malang on 2018. *Jurnal Ilmiah BIOSAINTROPIS (BIOSCIENCE-TROPIC, 6.*

Meštrović, T., Matijašić, M., Perić, M., Čipčić Paljetak, H., Barešić, A., & Verbanac, D. (2021). The role of gut, vaginal, and urinary microbiome in urinary tract infections: From bench to bedside. In *Diagnostics* (Vol. 11, Issue 1). MDPI. https://doi.org/10.3390/diagnostics11010007

Mireles, A., Walker, J., Caparon, M. *et al.* 2015. Urinary tract infections: epidemiology, mechanisms of infection and treatment options. *Nat Rev Microbiol* 13, 269–284.

Mohamed A H, Mohamud M F Y, Mohamud H A. 2020. Epidemiology and Antimicrobial Susceptibility Pattern of Uropathogens in Patients with the Community- and Hospital-Acquired Urinary Tract Infections at a Tertiary Hospital in Somalia. Jundishapur J Microbiol. 13 (9):e107453. Doi: 10.5812/jjm.107453

Radmayr *et al.* 2022. Urinary Tract Infection in Children. *European Association of Urology Guidelines on paediatric urology*, 35-41

Renko, M., Salo, J., Ekstrand, M., Pokka, T., Pieviläinen, O., Uhari, M., & Tapiainen, T. (2022). *The Pediatric Infectious Disease Journal • Volume XX, Number XX, XXX XXX Original Studies Meta-analysis of the Risk Factors for Urinary Tract Infection in Children Literature Review Inclusion and Exclusion Criteria*. https://doi.org/10.1097/INF.0000000000003628

Rizki Amalia, V., Sekarwana, N., & Puspa W, H. (2022). Scoping Review: Hubungan Frekuensi dan Durasi Penggunaan Popok Sekali Pakai terhadap Kejadian Infeksi Saluran Kemih Pada Bayi dan Anak. *Bandung Conference Series: Medical Science*, *2*(1). https://doi.org/10.29313/bcsms.v2i1.770

Rusdidjas, Ramayati, R. 2017. Infeksi Saluran Kemih : *Buku Ajar Nefrologi Anak*, ed 3. UKK Nefrologi, pp 475-489.

Tri Puji Lestari, H. (2014). The Impact of Duration of using Superabsorbent Diaper on the Incidence of Urinary Tract Infection in Children. *Journal of Nephrology & Therapeutics*, *04*(05). https://doi.org/10.4172/2161-0959.1000180

Tsai, Jeng-Daw & Lin, Chun-Chen & Yang, Stephen. 2016. Diagnosis of pediatric urinary tract infections. *Urological Science*. 27. 10.1016/j.urols.10.001.

Tullus, K., & Shaikh, N. (2020). Urinary tract infections in children. In *www.thelancet.com* (Vol. 395). https://uticalc.pitt.edu

Shahab, N., Ali, C.I., & Salih, S.M. (2017). Isolation and Identification of bacteria causing urinary tract infections in children in Kirkuk city. *Tikrit Journal of Pure Science, 22*.

Sobowale, K., Clayton, A., & Smith, M. v. (2021). Diaper Need Is Associated with Pediatric Care Use: An Analysis of a Nationally Representative Sample of Parents of Young Children. *Journal of Pediatrics*, *230*, 146–151. https://doi.org/10.1016/j.jpeds.2020.10.061

Sugimura, T., Tananari, Y., Ozaki, Y., Maeno, Y., Tanaka, S., Ito, S., Kawano, K., & Masunaga, K. (2009). Association between the frequency of disposable diaper changing and urinary tract infection in infants. *Clinical Pediatrics*, *48*(1), 18–20. https://doi.org/10.1177/0009922808320696

Waseem, Y., Naseeb, M. W., & Hamza, M. (2008). Diapers, an underestimated cause of urinary tract infections in children. In *J Ayub Med Coll Abbottabad* (Vol. 20, Issue 7).

Woosuck S, et al. Febrile urinary tract infection in children: changes in epidemiology, etiology, and antibiotic resistance patterns over a decade. *Clin Exp Pediatr.* 2021;64(6):293-300

Wulandari, S., Umilia Purwanti, N., Susanti, R., Handari Nawawi Kota Pontianak, J. H., & Korespondensi, P. (2022). Volume 4 Nomor 2 Evaluasi Penggunaan Antibiotik untuk Terapi Infeksi Saluran Kemih (ISK) pada Pediatri di Instalasi Rawat Inap Rumah Sakit. *Journal Syifa Sciences and Clinical Research*. https://doi.org/10.37311/jsscr.v4i2.14796

Lampiran 1. Rekomendasi Persetujuan Etik

KEMENTERIAN PENDIDIKAN, KEBUDAYAAN, RISET DAN TEKNOLOGI
UNIVERSITAS HASANUDDIN FAKULTAS KEDOKTERAN
KOMITE ETIK PENELITIAN UNIVERSITAS HASANUDDIN
RSPTN UNIVERSITAS HASANUDDIN
RSUP Dr. WAHIDIN SUDIROHUSODO MAKASSAR
Sekretariat : Lantai 2 Gedung Laboratorium Terpadu
JL.PERINTIS KEMERDEKAAN KAMPUS TAMALANREA KM.IO MAKASSAR 90245.
Contact Person: dr. Agussalim Bukhari.,MMed,PhD, SpGK TELP. 081241850858, 0411 5780103, Fax : 0411-381431

REKOMENDASI PERSETUJUAN ETIK
Nomor : 287/UN4.6.4.5.31/ PP36/ 2022

Tanggal: 16 Juni 2022

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

No Protokol	UH22040175		No Sponsor Protokol	
Peneliti Utama	**dr. Ivana Yunita**		Sponsor	
Judul Peneliti	Popok sebagai faktor resiko infeksi saluran kemih pada anak			
No Versi Protokol	2		Tanggal Versi	**14 Juni 2022**
No Versi PSP	2		Tanggal Versi	**14 Juni 2022**
Tempat Penelitian	RS WAHIDIN SUDIROHUSODO MAKASSAR			
Jenis Review	[ ] Exempted [x] Expedited [ ] Fullboard Tanggal		Masa Berlaku 16 Juni 2022 sampai **16 Juni 2023**	Frekuensi review lanjutan
Ketua KEP Universitas Hasanuddin	Nama **Prof.Dr.dr. Suryani As'ad, M.Sc.,Sp.GK (K)**		Tanda Tangan	
Sekretaris KEP Universitas Hasanuddin	Nama dr. Agussalim Bukhari, M.Med.,Ph.D.,Sp.GK (K)			

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 prokol yang disetujui (protocol deviation / violation)
- Mematuhi semua peraturan yang ditentukan

Lampiran 2. Izin Penelitian

KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
RISET DAN TEKNOLOGI
UNIVERSITAS HASANUDDIN FAKULTAS KEDOKTERAN
PROGRAM STUDI ILMU KESEHATAN ANAK
Jl.Perintis Kemerdekaan, Kampus Tamalanrea Km.11 Makassar 90245
Departemen Ilmu Kesehatan Anak, RSPTN Universitas Hasanuddin Gedung A Lantai 3
Telp. (0411) 584461, Fax : (0411) 590629

Nomor   : 14416/UN4.6.8/PT.01.04/2022   29 Juni 2022
Perihal   : **Izin Penelitian**

Yth.   Direktur RS Dr. Wahidin Sudirohusodo
        Makassar

Dengan hormat, sehubungan dengan tugas akhir pendidikan Dokter Spesialis pada Program Studi Ilmu Kesehatan Anak Fakultas Kedokteran Universitas Hasanuddin, maka dimohon kiranya mahasiswa yang tersebut namanya di bawah ini dapat diberikan izin penelitian di RS Dr. Wahidin Sudirohusodo Makassar, dalam rangka penulisan tesis, sbb :

Nama   : **dr. Ivana Yunita**

NIM   : **C105172001**

Judul   : **Popok sebagai Faktor Resiko Infeksi Saluran Kemih pada Anak**

Pembimbing   : **Prof. dr. Husein Albar, SpA(K)**

                  Dr. dr. St. Aizah Lawang, M.Kes, SpA(K)

Demikian permohonan ini, atas perhatian dan bantuannya diucapkan terima kasih.
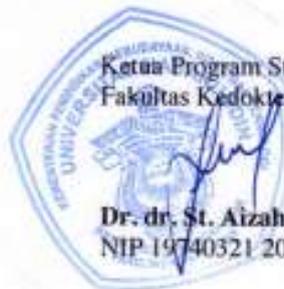
Ketua Program Studi Ilmu Kesehatan Anak
Fakultas Kedokteran Universitas Hasanuddin

Dr. dr. St. Aizah Lawang, M.Kes, SpA(K)
NIP 19740321 200812 2 002

Lampiran 3. Analisis Data

Frequencies

Notes

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	Elapsed Time	00:00:00.00

		JK	Popok	Frekuensi	Ganti.BAB	Ortu	Kultur	Kat.Kultur
N	Valid	80	80	40	40	80	80	80
	Missing	0	0	40	40	0	0	0

Frequency Table

JK

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Perempuan	25	31.3	31.3	31.3
	Laki-laki	55	68.8	68.8	100.0
	Total	80	100.0	100.0	

Popok

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	40	50.0	50.0	50.0
	Tidak	40	50.0	50.0	100.0
	Total	80	100.0	100.0	

Frekuensi

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	< 8X/ HARI	30	37.5	75.0	75.0
	> 8X/ HARI	10	12.5	25.0	100.0
	Total	40	50.0	100.0	
Missing	System	40	50.0		
Total		80	100.0		

Ganti.BAB

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Tidak	33	41.3	82.5	82.5
	Ya	7	8.8	17.5	100.0
	Total	40	50.0	100.0	
Missing	System	40	50.0		
Total		80	100.0		

Ortu

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	32	40.0	40.0	40.0
	Tidak	48	60.0	60.0	100.0
	Total	80	100.0	100.0	

Kultur

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	ACINETOBACTER	2	2.5	2.5	2.5
	ACINETOBACTER BAUMANII	1	1.3	1.3	3.8
	ACINETOBACTER IWOFII	1	1.3	1.3	5.0
	ACINETOBACTER SPP	1	1.3	1.3	6.3
	CANDIDA ALBICANS	1	1.3	1.3	7.5
	CITROBACTER FREUNDI	1	1.3	1.3	8.8
	E.COLI	10	12.5	12.5	21.3
	ENTEROCOCCUS FAECIUM	1	1.3	1.3	22.5
	ENTEROCOCCUS GALLINARUM	1	1.3	1.3	23.8
	KLEBSIELLA	7	8.8	8.8	32.5
	KLEBSIELLA OXYTOCA	1	1.3	1.3	33.8
	KLEBSIELLA PNEUMONIAE	1	1.3	1.3	35.0
	MICROCOCCUS	1	1.3	1.3	36.3
	PSEUDOMONAS AERUGINOSA	1	1.3	1.3	37.5
	STAPHYLOCOCCUS	1	1.3	1.3	38.8
	STAPHYLOCOCCUS HEMOLITICUS	1	1.3	1.3	40.0
	STAPHYLOCOCCUS LENTUS	1	1.3	1.3	41.3
	YEAST (JAMUR)	2	2.5	2.5	43.8
	Negatif	45	56.3	56.3	100.0
	Total	80	100.0	100.0	

Kat.Kultur

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Positif	35	43.8	43.8	43.8
	Negatif	45	56.3	56.3	100.0
	Total	80	100.0	100.0	

Crosstabs

Notes

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	Cases Used	Statistics for each table are based on all the cases with valid data in the specified range(s) for all variables in each table.
Syntax		CROSSTABS /TABLES=JK Popok Frekuensi Ganti.BAB Ortu BY Kat.Kultur /FORMAT=AVALUE TABLES /STATISTICS=CHISQ RISK /CELLS=COUNT ROW /COUNT ROUND CELL.
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Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
JK * Kat.Kultur	80	100.0%	0	0.0%	80	100.0%
Popok * Kat.Kultur	80	100.0%	0	0.0%	80	100.0%
Frekuensi * Kat.Kultur	40	50.0%	40	50.0%	80	100.0%
Ganti.BAB * Kat.Kultur	40	50.0%	40	50.0%	80	100.0%
Ortu * Kat.Kultur	80	100.0%	0	0.0%	80	100.0%

JK * Kat.Kultur

Crosstab

			Kat.Kultur		Total
			Positif	Negatif	
JK	Perempuan	Count	17	8	25
		% within JK	68.0%	32.0%	100.0%
	Laki-laki	Count	18	37	55
		% within JK	32.7%	67.3%	100.0%
Total		Count	35	45	80
		% within JK	43.8%	56.3%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	8.689[a]	1	.003		
Continuity Correction[b]	7.315	1	.007		
Likelihood Ratio	8.761	1	.003		
Fisher's Exact Test				.004	.003
Linear-by-Linear Association	8.581	1	.003		
N of Valid Cases	80				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 10.94.
b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for JK (Perempuan / Laki-laki)	4.368	1.588	12.012
For cohort Kat.Kultur = Positif	2.078	1.306	3.307
For cohort Kat.Kultur = Negatif	.476	.261	.867
N of Valid Cases	80		

Popok * Kat.Kultur

Crosstab

			Kat.Kultur		Total
			Positif	Negatif	
Popok	Ya	Count	24	16	40
		% within Popok	60.0%	40.0%	100.0%
	Tidak	Count	11	29	40
		% within Popok	27.5%	72.5%	100.0%
Total		Count	35	45	80
		% within Popok	43.8%	56.3%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	8.584[a]	1	.003		
Continuity Correction[b]	7.314	1	.007		
Likelihood Ratio	8.756	1	.003		
Fisher's Exact Test				.006	.003
Linear-by-Linear Association	8.477	1	.004		
N of Valid Cases	80				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 17.50.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Popok (Ya / Tidak)	3.955	1.546	10.114
For cohort Kat.Kultur = Positif	2.182	1.242	3.832
For cohort Kat.Kultur = Negatif	.552	.361	.844
N of Valid Cases	80		

Frekuensi * Kat.Kultur

Crosstab

			Kat.Kultur		
			Positif	Negatif	Total
Frekuensi	< 8X/ HARI	Count	22	8	30
		% within Frekuensi	73.3%	26.7%	100.0%
	> 8X/ HARI	Count	2	8	10
		% within Frekuensi	20.0%	80.0%	100.0%
Total		Count	24	16	40
		% within Frekuensi	60.0%	40.0%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	8.889[a]	1	.003		
Continuity Correction[b]	6.806	1	.009		
Likelihood Ratio	9.038	1	.003		
Fisher's Exact Test				.007	.005
Linear-by-Linear Association	8.667	1	.003		
N of Valid Cases	40				

a. 1 cells (25.0%) have expected count less than 5. The minimum expected count is 4.00.
b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Frekuensi (< 8X/ HARI / > 8X/ HARI)	11.000	1.915	63.178
For cohort Kat.Kultur = Positif	3.667	1.042	12.904
For cohort Kat.Kultur = Negatif	.333	.171	.651
N of Valid Cases	40		

Ganti.BAB * Kat.Kultur

Crosstab

			Kat.Kultur		Total
			Positif	Negatif	
Ganti.BAB	Tidak	Count	23	10	33
		% within Ganti.BAB	69.7%	30.3%	100.0%
	Ya	Count	1	6	7
		% within Ganti.BAB	14.3%	85.7%	100.0%
Total		Count	24	16	40
		% within Ganti.BAB	60.0%	40.0%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	7.388[a]	1	.007		
Continuity Correction[b]	5.260	1	.022		
Likelihood Ratio	7.614	1	.006		
Fisher's Exact Test				.011	.011
Linear-by-Linear Association	7.203	1	.007		
N of Valid Cases	40				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 2.80.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Ganti.BAB (Tidak / Ya)	13.800	1.464	130.070
For cohort Kat.Kultur = Positif	4.879	.784	30.367
For cohort Kat.Kultur = Negatif	.354	.194	.644
N of Valid Cases	40		

Ortu * Kat.Kultur

Crosstab

			Kat.Kultur		Total
			Positif	Negatif	
Ortu	Ya	Count	17	15	32
		% within Ortu	53.1%	46.9%	100.0%
	Tidak	Count	18	30	48
		% within Ortu	37.5%	62.5%	100.0%
Total		Count	35	45	80
		% within Ortu	43.8%	56.3%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.905[a]	1	.168		
Continuity Correction[b]	1.323	1	.250		
Likelihood Ratio	1.904	1	.168		
Fisher's Exact Test				.178	.125
Linear-by-Linear Association	1.881	1	.170		
N of Valid Cases	80				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 14.00.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Ortu (Ya / Tidak)	1.889	.762	4.681
For cohort Kat.Kultur = Positif	1.417	.869	2.311
For cohort Kat.Kultur = Negatif	.750	.488	1.152
N of Valid Cases	80		

Logistic Regression

Notes

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	N of Rows in Working Data File	80
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing
Syntax		LOGISTIC REGRESSION VARIABLES Kat.Kultur /METHOD=ENTER JK Popok Ortu /CONTRAST (JK)=Indicator(1) /CONTRAST (Popok)=Indicator(1) /CONTRAST (Ortu)=Indicator(1) /PRINT=CI(95) /CRITERIA=PIN(0.05) POUT(0.10) ITERATE(20) CUT(0.5).
Resources	Processor Time	00:00:00.00
	Elapsed Time	00:00:00.00

Case Processing Summary

Unweighted Cases[a]		N	Percent
Selected Cases	Included in Analysis	80	100.0
	Missing Cases	0	.0
	Total	80	100.0
Unselected Cases		0	.0
Total		80	100.0

a. If weight is in effect, see classification table for the total number of cases.

Dependent Variable Encoding

Original Value	Internal Value
Positif	0
Negatif	1

Categorical Variables Codings

		Frequency	Parameter coding (1)
Ortu	Ya	32	.000
	Tidak	48	1.000
Popok	Ya	40	.000
	Tidak	40	1.000
JK	Perempuan	25	.000
	Laki-laki	55	1.000

Block 0: Beginning Block

Classification Table^{a,b}

			Predicted		
			Kat.Kultur		Percentage
	Observed		Positif	Negatif	Correct
Step 0	Kat.Kultur	Positif	0	35	.0
		Negatif	0	45	100.0
	Overall Percentage				56.3

a. Constant is included in the model.
b. The cut value is .500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)
Step 0	Constant	.251	.225	1.243	1	.265	1.286

Variables not in the Equation

			Score	df	Sig.
Step 0	Variables	JK(1)	8.689	1	.003
		Popok(1)	8.584	1	.003
		Ortu(1)	1.905	1	.168
	Overall Statistics		13.025	3	.005

Block 1: Method = Enter

Omnibus Tests of Model Coefficients

		Chi-square	df	Sig.
Step 1	Step	13.541	3	.004
	Block	13.541	3	.004
	Model	13.541	3	.004

Model Summary

Step	-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
1	96.109[a]	.156	.209

a. Estimation terminated at iteration number 4 because parameter estimates changed by less than .001.

Classification Table[a]

			Predicted		
			Kat.Kultur		Percentage
	Observed		Positif	Negatif	Correct
Step 1	Kat.Kultur	Positif	22	13	62.9
		Negatif	11	34	75.6
	Overall Percentage				70.0

a. The cut value is .500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I.for EXP(B) Lower	95% C.I.for EXP(B) Upper
Step 1[a]	JK(1)	1.122	.547	4.213	1	.040	3.072	1.052	8.974
	Popok(1)	1.014	.518	3.835	1	.050	2.755	.999	7.599
	Ortu(1)	.270	.511	.278	1	.598	1.309	.481	3.567
	Constant	-1.158	.517	5.011	1	.025	.314		

a. Variable(s) entered on step 1: JK, Popok, Ortu.

Logistic Regression

Notes

Output Created		10-SEP-2022 22:12:34
Comments		
Input	Data	D:\Office\SPSS\Data dr Ivana.sav
	Active Dataset	DataSet35
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	80
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing
Syntax		LOGISTIC REGRESSION VARIABLES Kat.Kultur /METHOD=ENTER Frekuensi Ganti.BAB /CONTRAST (Frekuensi)=Indicator(1) /CONTRAST (Ganti.BAB)=Indicator(1) /PRINT=CI(95) /CRITERIA=PIN(0.05) POUT(0.10) ITERATE(20) CUT(0.5).
Resources	Processor Time	00:00:00.02
	Elapsed Time	00:00:00.01

Case Processing Summary

Unweighted Cases[a]		N	Percent
Selected Cases	Included in Analysis	40	50.0
	Missing Cases	40	50.0
	Total	80	100.0
Unselected Cases		0	.0
Total		80	100.0

a. If weight is in effect, see classification table for the total number of cases.

Dependent Variable Encoding

Original Value	Internal Value
Positif	0
Negatif	1

Categorical Variables Codings

		Frequency	Parameter coding (1)
Ganti.BAB	Tidak	33	.000
	Ya	7	1.000
Frekuensi	< 8X/ HARI	30	.000
	> 8X/ HARI	10	1.000

Block 0: Beginning Block

Classification Table[a,b]

			Predicted		
			Kat.Kultur		Percentage
	Observed		Positif	Negatif	Correct
Step 0	Kat.Kultur	Positif	24	0	100.0
		Negatif	16	0	.0
	Overall Percentage				60.0

a. Constant is included in the model.
b. The cut value is .500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)
Step 0	Constant	-.405	.323	1.578	1	.209	.667

Variables not in the Equation

			Score	df	Sig.
Step 0	Variables	Frekuensi(1)	8.889	1	.003
		Ganti.BAB(1)	7.388	1	.007
	Overall Statistics		9.206	2	.010

Block 1: Method = Enter

Omnibus Tests of Model Coefficients

		Chi-square	df	Sig.
Step 1	Step	9.485	2	.009
	Block	9.485	2	.009
	Model	9.485	2	.009

Model Summary

Step	-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
1	44.356[a]	.211	.285

a. Estimation terminated at iteration number 4 because parameter estimates changed by less than .001.

Classification Table[a]

			Predicted		
			Kat.Kultur		Percentage
	Observed		Positif	Negatif	Correct
Step 1	Kat.Kultur	Positif	22	2	91.7
		Negatif	8	8	50.0
	Overall Percentage				75.0

a. The cut value is .500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I.for EXP(B) Lower	Upper
Step 1[a]	Frekuensi(1)	1.705	1.292	1.740	1	.187	5.500	.437	69.264
	Ganti.BAB(1)	1.099	1.633	.453	1	.501	3.000	.122	73.642
	Constant	-1.012	.413	6.004	1	.014	.364		

a. Variable(s) entered on step 1: Frekuensi, Ganti.BAB.

Logistic Regression

Notes

Output Created		14-SEP-2022 18:26:21
Comments		
Input	Data	D:\Office\SPSS\Data dr Ivana.sav
	Active Dataset	DataSet3
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	80
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing
Syntax		LOGISTIC REGRESSION VARIABLES Kat.Kultur /METHOD=ENTER JK Popok /CONTRAST (JK)=Indicator(1) /CONTRAST (Popok)=Indicator(1) /PRINT=CI(95) /CRITERIA=PIN(0.05) POUT(0.10) ITERATE(20) CUT(0.5).
Resources	Processor Time	00:00:00.02
	Elapsed Time	00:00:00.05

Case Processing Summary

Unweighted Cases[a]		N	Percent
Selected Cases	Included in Analysis	80	100.0
	Missing Cases	0	.0
	Total	80	100.0
Unselected Cases		0	.0
Total		80	100.0

a. If weight is in effect, see classification table for the total number of cases.

Dependent Variable Encoding

Original Value	Internal Value
Positif	0
Negatif	1

Categorical Variables Codings

		Frequency	Parameter coding (1)
Popok	Ya	40	.000
	Tidak	40	1.000
JK	Perempuan	25	.000
	Laki-laki	55	1.000

Block 0: Beginning Block

Classification Table[a,b]

			Predicted		
			Kat.Kultur		Percentage
	Observed		Positif	Negatif	Correct
Step 0	Kat.Kultur	Positif	0	35	.0
		Negatif	0	45	100.0
	Overall Percentage				56.3

a. Constant is included in the model.
b. The cut value is .500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)
Step 0	Constant	.251	.225	1.243	1	.265	1.286

Variables not in the Equation

			Score	df	Sig.
Step 0	Variables	JK(1)	8.689	1	.003
		Popok(1)	8.584	1	.003
	Overall Statistics		12.790	2	.002

Block 1: Method = Enter

Omnibus Tests of Model Coefficients

		Chi-square	df	Sig.
Step 1	Step	13.265	2	.001
	Block	13.265	2	.001
	Model	13.265	2	.001

Model Summary

Step	-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
1	96.386[a]	.153	.205

a. Estimation terminated at iteration number 4 because parameter estimates changed by less than .001.

Classification Table[a]

			Predicted		
			Kat.Kultur		Percentage
	Observed		Positif	Negatif	Correct
Step 1	Kat.Kultur	Positif	16	19	45.7
		Negatif	3	42	93.3
	Overall Percentage				72.5

a. The cut value is .500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I.for EXP(B) Lower	Upper
Step 1[a]	JK(1)	1.144	.545	4.400	1	.036	3.140	1.078	9.145
	Popok(1)	1.069	.507	4.442	1	.035	2.911	1.078	7.864
	Constant	-1.041	.464	5.032	1	.025	.353		

a. Variable(s) entered on step 1: JK, Popok.

Lampiran 4. Data Dasar

POPOK SEBAGAI FAKTOR RESIKO INFEKSI SALURAN KEMIH PADA ANAK

NO	NAMA	JK	USIA	PAKAI POPOK	DIGANTI	LANGSUNG DIGANTI	TAU/ TIDAK	HASIL KULTUR
1	DIKA	L	1 THN	YA	< 8X/ HARI	TIDAK	YA	CANDIDA ALBICANS
2	ANANDA	P	2 THN 10 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	KLEBSIELLA
3	ARUMI	P	2 THN	YA	< 8X/ HARI	TIDAK	YA	KLEBSIELLA
4	AFNAN YUSUF	L	1 THN 9 BLN	YA	< 8X/ HARI	TIDAK	YA	YEAST (JAMUR)
5	HUMAIRA	P	2 THN 5 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	KLEBSIELLA
6	GHIBRAN	L	4 THN	YA	< 8X/ HARI	TIDAK	YA	ACINETOBACTER
7	AMEERA	P	3 THN	YA	< 8X/ HARI	TIDAK	YA	STAPHYLOCOCCUS
8	NUR ARHAISYA	P	2 THN 5 BLN	YA	< 8X/ HARI	TIDAK	YA	KLEBSIELLA
9	M.IRSYAPADDANG	L	1 THN 4 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	YEAST (JAMUR)
10	NURHAFIZAH	P	1 THN 10 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	E.COLI
11	MUH. TAQWA	L	2 THN 5 BLN	YA	< 8X/ HARI	TIDAK	YA	MICROCOCCUS
12	CHAROLINE	P	4 THN	YA	< 8X/ HARI	TIDAK	YA	CITROBACTER FREUNDI
13	PATRICIA	P	2 THN 2 BLN	YA	< 8X/ HARI	TIDAK	YA	E.COLI
14	RAISA TRI NOVIANTI	P	3 THN 3 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	KLEBSIELLA PNEUMONIAE
15	AHMAD ILHAM	L	5 THN 11 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	KLEBSIELLA
16	DELVANO BETRANDUS	L	1 THN 1 BLN	YA	< 8X/ HARI	TIDAK	YA	E.COLI
17	FADIA INAYAH	P	1 THN	YA	< 8X/ HARI	TIDAK	YA	E.COLI
18	NURUL MUFIDAH	P	1 THN 10 BLN	YA	< 8X/ HARI	TIDAK	YA	STAPHYLOCOCCUS HEMOLITICUS
19	NUR AGNI	P	2 THN 3 BLN	YA	< 8X/ HARI	TIDAK	YA	E.COLI
20	AISYA AILANI	P	4 TAHUN	YA	< 8X/ HARI	TIDAK	YA	E.COLI
21	DZAKIRA ANIYA	P	5 TAHUN	YA	< 8X/ HARI	TIDAK	TIDAK	E.COLI
22	GRYSELDA	P	3 THN 7 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	E.COLI
23	AQLAN	L	2 THN 6 BLN	YA	> 8X/ HARI	YA	YA	NEGATIF
24	LILIH SAVINA	P	3 THN	YA	>8X/ HARI	TIDAK	TIDAK	NEGATIF
25	ABQARU ZAYAN	L	3 THN 9 BLN	YA	>8X/ HARI	YA	TIDAK	NEGATIF
26	AUSHAF	L	4 THN	YA	>8X/ HARI	YA	YA	NEGATIF
27	ADHITAMA FATIAN	L	2 THN 9 BLN	YA	>8X/ HARI	YA	YA	NEGATIF
28	NASRULLAH	L	5 THN 6 BLN	YA	>8X/ HARI	TIDAK	TIDAK	NEGATIF
29	UWAIS ALQARINI	L	1 THN	YA	>8X/ HARI	YA	TIDAK	NEGATIF
30	MUH NUR AKMAL	L	2 THN	YA	>8X/ HARI	YA	TIDAK	NEGATIF
31	SABRIANI	P	2 THN	YA	>8X/ HARI	YA	TIDAK	ACINETOBACTER
32	ANDI TOGA	L	5 THN 8 BLN	YA	>8X/ HARI	TIDAK	TIDAK	ACINETOBACTER IWOFII
33	MUKTI KHAESAN	L	1 THN	YA	< 8X/ HARI	TIDAK	YA	NEGATIF
34	RISKI	L	4 THN 5 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	NEGATIF
35	NAFISHA SYAFA	P	3 THN	YA	< 8X/ HARI	TIDAK	YA	NEGATIF
36	MUH. RAFQY SYAUKILLAH	L	2 THN 6 BLN	YA	< 8X/ HARI	TIDAK	YA	NEGATIF
37	IRMA MAGFIRAH	P	3 THN 5 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	NEGATIF
38	ALRESCHA RIFKY	L	4 THN 2 BLN	YA	< 8X/ HARI	TIDAK	YA	NEGATIF
39	MUH. FIRAS AFIQ	L	1 THN 3 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	NEGATIF
40	MUH. FAHRIN	L	2 THN 3 BLN	YA	< 8X/ HARI	TIDAK	TIDAK	NEGATIF
41	FAIZ RAMADHAN	L	1 THN 11 BLN	TIDAK			TIDAK	NEGATIF
42	ATTA RAYHAN	L	2 THN 6 BLN	TIDAK			TIDAK	NEGATIF
43	ANDI NIBRAHIM	L	3 THN 10 BLN	TIDAK			TIDAK	NEGATIF
44	FAYDA NUR MALIKA	P	1 THN	TIDAK			TIDAK	NEGATIF

NO	NAMA	JK	USIA	PAKAI POPOK	DIGANTI	LANGSUNG DIGANTI	TAU/ TIDAK	HASIL KULTUR
45	AZKA AULIA	L	5 THN 9 BLN	TIDAK			TIDAK	NEGATIF
46	ANDI ALFARIZA	L	4 THN 8 BLN	TIDAK			YA	NEGATIF
47	MUH.GIBRAN	L	3 THN 2 BLN	TIDAK			TIDAK	NEGATIF
48	ALDEN HONESTA	L	4 THN 9 BLN	TIDAK			YA	NEGATIF
49	ALHAQ FAEYZA	L	1 THN 11 BLN	TIDAK			YA	NEGATIF
50	AMIRAH LASHIRA	P	2 THN 7 BLN	TIDAK			YA	NEGATIF
51	ARUMI AZZAHRA	P	1 THN 7 BLN	TIDAK			YA	NEGATIF
52	UMAR	L	1 THN 1 BLN	TIDAK			TIDAK	ENTEROCOCCUS FAECIUM
53	MUH AIDIN	L	1 THN 3 BLN	TIDAK			YA	KLEBSIELLA
54	ZHIROW POA	P	5 TAHUN	TIDAK			TIDAK	NEGATIF
55	IZQIAN KHALIL	L	4 THN	TIDAK			TIDAK	NEGATIF
56	ABDUL RAHMAN	L	5 THN	TIDAK			YA	NEGATIF
57	REY PATU	L	5 THN	TIDAK			TIDAK	NEGATIF
58	VLOWRA AGUSTINA	P	5 THN 7 BLN	TIDAK			TIDAK	NEGATIF
59	FADHLAN MALIK	L	3 THN 3 BLN	TIDAK			TIDAK	NEGATIF
60	MUH. ALFATIH	L	4 THN 11 BLN	TIDAK			TIDAK	NEGATIF
61	NAUFAL	L	5 THN	TIDAK			TIDAK	NEGATIF
62	ELVINO MUBARAQ	L	3 THN	TIDAK			YA	NEGATIF
63	ALFATIH RIZKI	L	3 THN 7 BLN	TIDAK			YA	NEGATIF
64	YUDA	L	2 THN	TIDAK			TIDAK	NEGATIF
65	ZAYN FAHRUL	L	3 THN	TIDAK			TIDAK	NEGATIF
66	ARDI ANSAR	L	4 THN 3 BLN	TIDAK			TIDAK	NEGATIF
67	XAVIER HILARION	L	3 THN	TIDAK			TIDAK	NEGATIF
68	AHMAD AL WAHYU	L	5 THN	TIDAK			TIDAK	NEGATIF
69	ADZRIEL RAFIF	L	1 THN 2 BLN	TIDAK			TIDAK	NEGATIF
70	MUH. ADAM ABDULLAH	L	2 THN 4 BLN	TIDAK			TIDAK	NEGATIF
71	NICHOLAS JERICH	L	3 THN 11 BLN	TIDAK			TIDAK	NEGATIF
72	MUH. DHANU DWI	L	2 THN 2 BLN	TIDAK			TIDAK	PSEUDOMONAS AERUGINOSA
73	FAIRUZT ZULFADLI	L	4 THN 3 BLN	TIDAK			TIDAK	E.COLI
74	MUH. AZKA ALFARABI	L	1 THN 10 BLN	TIDAK			TIDAK	KLEBSIELLA
75	ZIDAN ADRIAN	L	3 THN 4 BLN	TIDAK			TIDAK	ACINETOBACTER BAUMANII
76	AFDILAN SAMSUL	L	4 THN	TIDAK			TIDAK	STAPHYLOCOCCUS LENTUS
77	KHALISA	P	3 THN 9 BLN	TIDAK			YA	ENTEROCOCCUS GALLINARUM
78	UWAIS IDRIS	L	3 THN	TIDAK			TIDAK	KLEBSIELLA OXYTOCA
79	AFNAN YUNRIDHA	L	3 THN	TIDAK			YA	ACINETOBACTER SPP
80	HAIRIL ABDILLAH	L	3 THN 6 BLN	TIDAK			TIDAK	E.COLI