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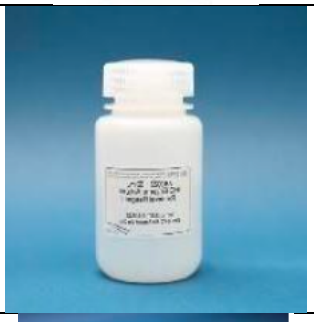
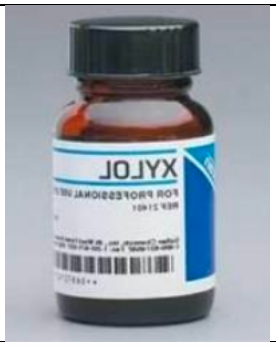
Zhao, Y., et al. (2022). "The impact of PI3K pathway activation on the progression and metastasis of luminal breast cancer." *Breast Cancer Research and Treatment*, 194(3), 659-670. DOI: 10.1007/s10549-021-06415-1.

LAMPIRAN

ALAT DAN BAHAN

No	Alat	Bentuk Kemasan	Kegunaan
1	Alkohol 90%		Fiksasi Jaringan
2	Alkohol 70%		Fiksasi Jaringan
3	Alkohol 50%		Fiksasi Jaringan
4	Metanol		Fiksasi Jaringan
5	Pap Pen		Pulpen khusus IHC untuk memberi tanda pada slide

6	Etanol		Fiksasi cairan sitologi
7	Hidrogen Peroksida		Sebagai desinfektan
8	Hematosiklin		Sebagai bahan pewarnaan jaringan
9	Cairan Raterival		Pewarnaan Imunohistokimia
10	Slide IHC		Sebagai tempat jaringan yang diamati

11	Xylol		Sebagai bahan clearing sehingga jaringan memudahkan pengamatan
12	Deglass		Sebagai kaca penutup sediaan jaringan histopatologis
13	Entelan		Perekat Objek glass dan coverglass
14	Pisau Microtom		Pemotong mikro jaringan
15	Rak Pewarnaan		Tempat pengecatan jaringan histopatologis

16	Mikropipet		Memindahkan cairan dalam jumlah kecil dengan akurat
17	Reagen dan Primer PI3K		Pewarnaan Imunohistokimia

METODE PEMERIKSAAN

1. Seluruh pasien Kanker Payudara yang diikutkan dalam penelitian dilakukan *informed consent* berupa penjelasan manfaat dan prosedur penelitian, apabila pasien setuju, maka diikutkan dalam penelitian.
2. Dilakukan anamnesis untuk melengkapi pencatatan identitas serta hasil pemeriksaan sesuai dengan formulir penelitian yang telah disiapkan.
3. Pengambilan bahan operasi/biopsi jaringan payudara dari penderita dalam keadaan steril, kemudian dimasukkan ke dalam botol yang berisi larutan buffer formalin 10% selanjutnya dikirim ke Laboratorium Patologi Anatomi Fakultas Kedokteran Universitas Hasanuddin.
4. Pembuatan preparat jaringan. (Gambar 14.)
   - Potong blok paraffin dengan mikrotom pada ketebalan 3-4µ

- Celupkan kedalam Waterbath

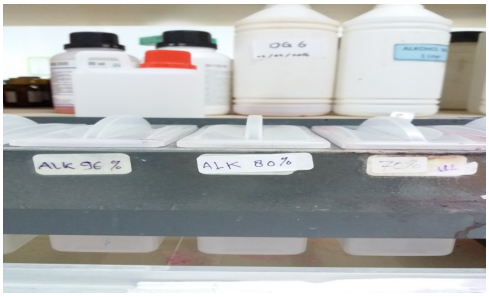
- Ambil potongan jaringan dengan slide lalu tiriskan

-
-
- Tulis pada slide kode sesuai blok paraffin dengan pensil

- Panaskan slide diatas Hot Plate selama 1 jam

- Dinginkan slide lalu masukkan kedalam keranjang slide
- Deparafinasi (Xylol I, Xylol II, Xylol III) masing-masing 5 menit

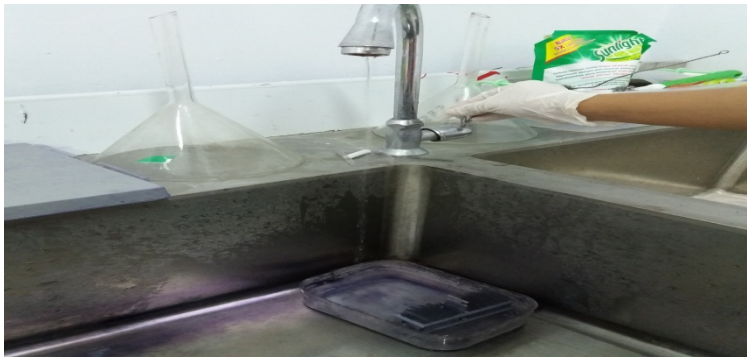
- Rehidrasi (Alkohol 96%, Alkohol 80%, Alkohol 70%), masing-masing selama 5 menit



- Cuci air mengalir selama 5 menit

- Angkat dari air lalu masukkan slide kedalam larutan Blocking Endogen Peroksida, rendam selama 15 menit

- Cuci air mengalir selama 5 menit



- Masukkan keranjang berisi slide kedalam decloaking yang berisi larutan Antigen Retrival Decloaking Chamber, lalu letakkan slide pada rack holder

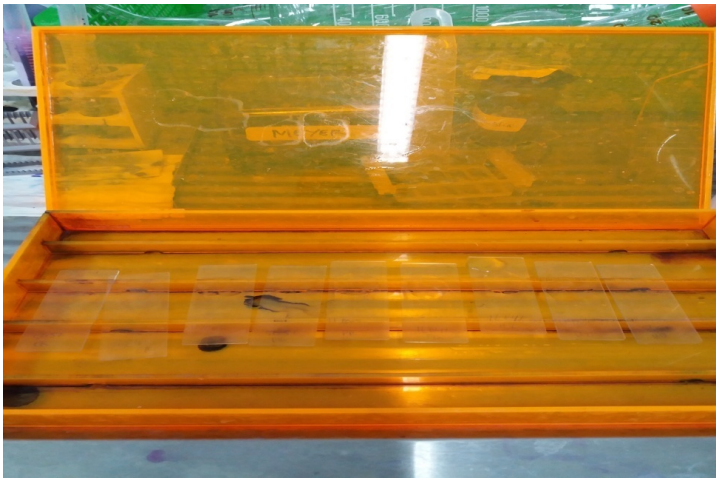
- Masukkan rack holder kedalam decloaking, lalu tutup

-

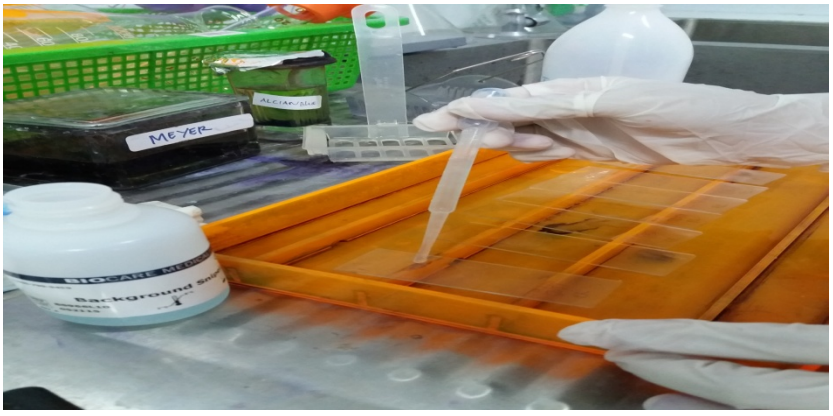
- Atur waktu yaitu selama 40 menit pada suhu 95 derajat.

- Dinginkan, dengan mengeluarkan slide dari decloaking dan disimpan pada suhu ruangan
- Setelah dingin , cuci dalam larutan PBS 2x masing-masing selama 5 menit
- Tandai slide dengan memberi lingkaran sekitar jaringan

- Atur slide pada baki slide

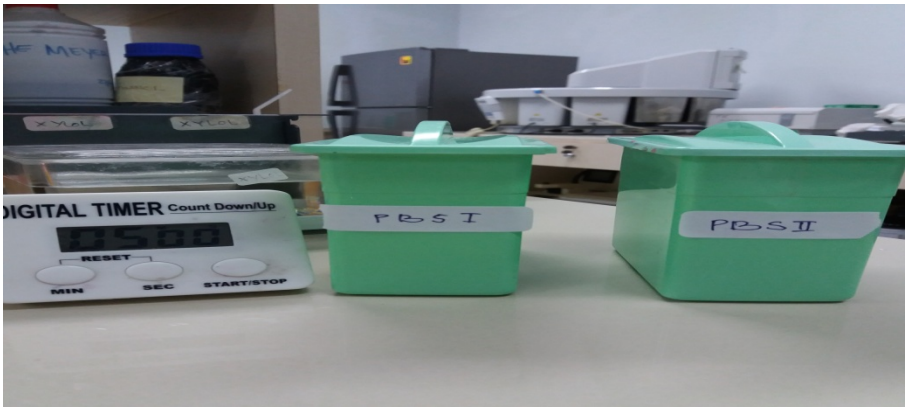


- Ambil satu per satu lalu tetesi Background Sniper lalu inkubasi selama 30 menit



- Buang larutan background sniper dengan cara ditiriskan pada tisu

- Tetesi Antibody Primer (reagen primer PI3KCA 110 α) lalu inkubasi selama 1 jam pada suhu ruang, cuci PBS 2x selama 5 menit



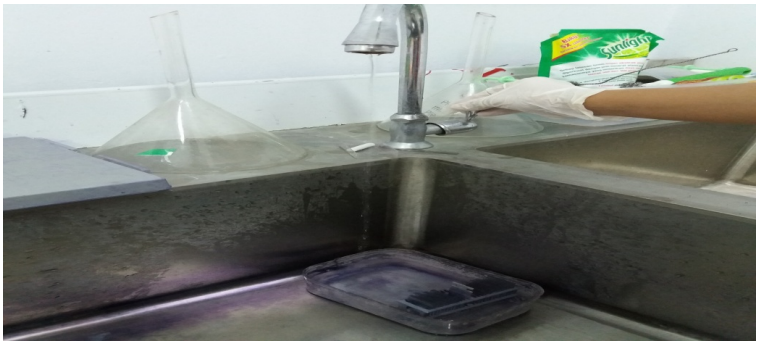
- Tetesi Trekkie Universal lalu diamkan selama 30 menit

- Tiriskan pada tissue lalu tetesi Trekkkavidin-HRP lalu diamkan selama 30 menit

- Cuci PBS 2x dengan cara merendam slide selama 5 menit

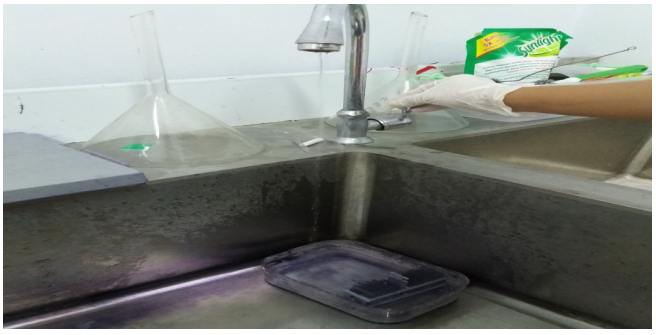
- Sambil menunggu pencucian, buat larutan DAB dengan cara campurkan cromogen DAB 1 tetes + Substrat buffer 1 ml (dicampur dalam tabung bersih) lalu tetesi kejaringan

- Amati jaringan jika sudah menunjukkan warna coklat, langsung direndam ke dalam air selama 5 menit

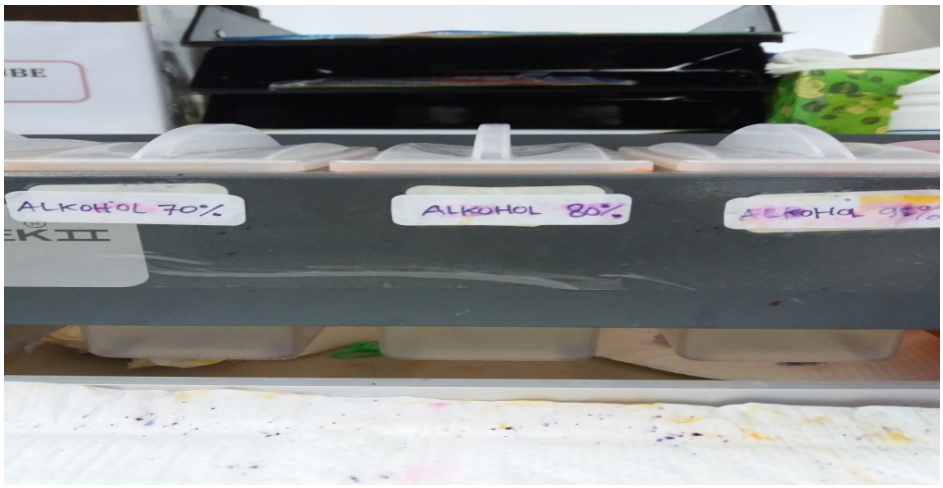


- Rendam dengan hematoxylin Meyer 5 menit

- Cuci air mengalir selama 5 menit



- Dehidrasi (Alkohol 70%, Alkohol 80%, Alkohol 96%) masing-masing 5 menit



- Clearing (Xylol I, Xylol II, Xylol III)

- Keringkan slide lalu tetesi dengan entelan lalu tutup dengan deck glass.
- Amati di Mikroskop

PERSETUJUAN ETIK PENELITIAN

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.10 MAKASSAR 90245.
Contact Person: dr. Agussalim Bukhari.,MMed.PhD. SpGK TELP. 081241850858, 0411 5780103, Fax : 0411-581431

REKOMENDASI PERSETUJUAN ETIK
Nomor : 767/UN4.6.4.5.31/ PP36/ 2022

Tanggal: 30 Nopember 2022

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

No Protokol	UH22110697	No Sponsor Protokol	
Peneliti Utama	**dr. Yusfitaria Alvina, Sp.B,MARS,MKes**	Sponsor	
Judul Peneliti	HUBUNGAN EXPRESI PI3KCA DENGAN PROFIL CLINICOPATHOLOGICAL DAN METASTASIS PADA PASIEN KANKER PAYUDARA SUBTIPE LUMINAL		
No Versi Protokol	**1**	Tanggal Versi	**16 Nopember 2022**
No Versi PSP	**1**	Tanggal Versi	**16 Nopember 2022**
Tempat Penelitian	RS Univeritas Hasanuddin dan RSUP Dr. Wahidin Sudirohusodo Makassar		
Jenis Review	[ ] Exempted [ ] Expedited [X] Fullboard Tanggal **30 Nopember 2022**	Masa Berlaku **30 Nopember 2022** sampai **30 Nopember 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)**	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 prokol yang disetujui (protocol deviation / violation)
- Mematuhi semua peraturan yang ditentukan

DATA PRIMER PASIEN PENELITIAN

DAFTAR SAMPEL PENELITIAN

NO	RM	NO.PA	NAMA PASIEN	UMUR	PA	LETAK TUMOR	GRADE	ER	PR	HER-2	KI-67	METASTASIS	LOKASI METASTASIS
1	133777	H19.1415	SA	69	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	1	POSITIF	POSITIF	NEGATIF			
2	104892	H20.002	NU	52	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	DEXTRA	3	POSITIF	POSITIF	NEGATIF	HIGH		HEPAR, TULANG
3	126029	H20.027	NL	44	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	DEXTRA	1	POSITIF	NEGATIF	NEGATIF			
4	135901	H20.265	HT	72	INVASIVE LOBULAR CARCINOMA MAMMAE	DEXTRA	2	POSITIF	POSITIF	NEGATIF	POSITIF		
5	135426	H20.173	Y	37	DUCTAL CARCINOMA INSITU	DEXTRA	1	POSITIF	POSITIF	NEGATIF			
6	137976	H20.339	KS	50	INVASASIVE LOBULAR CARCINOMA MAMMAE BILATERAL	DEXTRA & SINISTRA	1						
7	136075	H20.322	ID	37	INVASIVE CARCINOMA MAMMAE OF NO SPECIAL TYPE	DEXTRA	2	POSITIF	POSITIF	NEGATIF			
8	138685	H20.376	WH	46	CARCINOMA MAMMAE DEXTRA	DEXTRA		POSITIF	POSITIF	NEGATIF			
9	149716	H20.778	SI	49	INVASIVE CARCINOMA MAMMAE OF NO SPECIAL TYPE		1	POSITIF	POSITIF	NEGATIF	LOW	YA	HEPAR
10	153358	H21.065	RA	53	METASTASIS ADENOCARCINOMA			POSITIF	POSITIF	NEGATIF	HIGH	YA	OTAK
11	151559	H21.074	SA	31	DUCTAL CARCINOMA INSITU	SINISTRA		POSITIF	POSITIF	NEGATIF	LOW	TIDAK	
12	147875	H21.109	FI	52	MIXED INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE AND MUCINOUS CARCINOMA	DEXTRA	2	POSITIF	POSITIF	NEGATIF		YA	HEPAR
13	114579	H21.223	NS	62	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	2	POSITIF	NEGATIF	NEGATIF	HIGH	YA	
14	151490	H21.172	JN	45	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	2	POSITIF	POSITIF	NEGATIF	HIGH	YA	
15	155704	H21.218	SY	34	INVASIVE LOBULAR CARCINOMA MAMMAE	SINISTRA	2	POSITIF	NEGATIF	NEGATIF	HIGH		
16	144882	H21.372	DO	54	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	DEXTRA	1	POSITIF	POSITIF	NEGATIF	HIGH		
17	143828	H21.390	DA	42	METASTASIS ADENOCARCINOMA	SINISTRA		POSITIF	POSITIF	NEGATIF	HIGH	YA	
18	72374	H21.450	RJ	62	METAPLASTIC CARCINOMA MAMMAE	SINISTRA	2	POSITIF	POSITIF	NEGATIF	LOW		
19	159955	H21.525	EP	54	MUCIONOUS CARCINOMA MAMMAE WITH MICROPAPILLARY FEATURE	SINISTRA	2	POSITIF	POSITIF	NEGATIF	LOW		
20	170450	H21.974	SU	48	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE		2	POSITIF	POSITIF	NEGATIF	LOW	YA	HEPAR
21	167610	H21.776	NG	70	INVASIVE LOBULAR CARCINOMA MAMMAE	SINISTRA	3	POSITIF	POSITIF	NEGATIF	HIGH	TIDAK	
22	183171	H22.920	RB	54	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	2	POSITIF	POSITIF	NEGATIF	HIGH		
23	182963	H22.799	WO	47	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	DEXTRA	2	POSITIF	POSITIF	NEGATIF	HIGH	YA	
24	171845	H22.668	SR	44	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	2	POSITIF	POSITIF	NEGATIF	LOW		
25	180928	H22.536	SK	48	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	1	NEGATIF	POSITIF	NEGATIF	HIGH		
26	181347	H22.583	DA	44	INVASIVE PAPILLARY CARCINOMA MAMMAE SINISTRA	SINISTRA	2	POSITIF	POSITIF	NEGATIF	HIGH		
27	178821	H22.441	SM	43	INVASIVE LOBULAR CARCINOMA MAMMAE	DEXTRA	2	POSITIF	POSITIF	NEGATIF	HIGH		
28	76185	H22.528	FT	38	ADENOCARCINOMA MAMMAE MUCINOSUM	SINISTRA	1	POSITIF	POSITIF	NEGATIF	LOW		
29	184572	H22.895	NN	46	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	DEXTRA	2	NEGATIF	POSITIF	NEGATIF	HIGH	TIDAK	
30	171015	H22.434	BR	60	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	3	POSITIF	POSITIF	NEGATIF	HIGH	YA	
31	177488	H22.279	MY	41	INVASIVE BREAST CARCINOMA	SINISTRA	1	POSITIF	POSITIF	NEGATIF	HIGH	YA	PARU
32	170492	H22.020	SH	59	SECRETORY CARCINOMA	SINISTRA	2	POSITIF	POSITIF	NEGATIF	HIGH		PARU
33	152510	H21.1027	RABIAH	58	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	DEXTRA	2	POSITIF	POSITIF	NEGATIF	LOW	YA	TULANG
34	799715	P18.0058	RB	42	Invasive carcinoma mammae, NOS type	SINISTRA	2	POSITIF	POSITIF	NEGATIF		YA	HEPAR, TULANG
35	909897	P21.1270	SK	45	Invasive carcinoma mammae bilateral of no special type	SINISTRA	2	POSITIF	POSITIF	NEGATIF	HIGH	YA	PARU, TULANG
36	932873	P21.2023	HF	62	Invasive breast carcinoma of NOS		2	POSITIF	POSITIF	POSITIF	HIGH		
37	944665	P22.0070	UH	37	invasive carcinoma breast of no other special type	SINISTRA	2	POSITIF	POSITIF	NEGATIF	LOW	YA	PARU,TULANG
38	958576	P22.3872	MR	46	Invasif Ca breast carcinoma of No Special Type	SINISTRA	3	POSITIF	POSITIF	NEGATIF			
39	895747	P20.0233	RR	45	INVASIVE CARCINOMA MAMMA,MUCINOUS CARCINOMA MAMMA	SINISTRA	2	POSITIF	POSITIF	NEGATIF		YA	PARU/PLEURA
40	427566	P20.0330	HS	57	Adenocarcinoma mammae sinistra	SINISTRA	1	POSITIF	POSITIF	NEGATIF	HIGH		PARU
41	977455	P22.1740	IH	67	invasive carcinoma mammae of no special type	DEXTRA	2	POSITIF	POSITIF	NEGATIF	LOW		
42	969756	P22.1706	NR	56	Invasif carcinoma	SINISTRA	3	POSITIF	NEGATIF	NEGATIF	LOW		
43	792073	P22.2674	HA	40	invasive breast carcinoma of no special type	DEXTRA	1	POSITIF	POSITIF	NEGATIF	LOW		
44	935498	P21.2364	LT	65	Invasive breast carcinoma of no special type	DEXTRA	3	POSITIF	NEGATIF	NEGATIF	HIGH		TULANG
45	767517	P19.4447	YT	51	Invasive ca mammae of no special type	DEXTRA	2	POSITIF	POSITIF	NEGATIF		YA	PARU, TULANG
46	886699	P19.3023	MR	64	Invasive lobular carcinoma mammae,	SINISTRA	1	POSITIF	POSITIF	NEGATIF	LOW		
47	781133	P19.4731	HD	49	Invasive breast carcinoma	SINISTRA	2	NEGATIF	POSITIF	NEGATIF		YA	TULANG
48	885602	P19.3754	FL	42	Invaive ductal carcinoma mammae	SINISTRA	2	POSITIF	POSITIF	NEGATIF		YA	PARU
49	895551	P19.4522	RA	56	invasive ductal ca mammae	DEXTRA	2	POSITIF	NEGATIF	NEGATIF			
50	868636	P19.0121	HY	54	Invasive carcinoma mammae NOS	DEXTRA	2	POSITIF	NEGATIF	NEGATIF		YA	PARU
51	907210	P20.0245	HJ	54	invasive carcinoma mamae, NST,	SINISTRA	2	POSITIF	POSITIF	NEGATIF	LOW	YA	PARU, TULANG
52	975206	P22.3030	SN	60	invasive carcinoma mammae	SINISTRA	3	POSITIF	POSITIF	NEGATIF	HIGH		TULANG
53	992064	P22.3783	FR					POSITIF	POSITIF	NEGATIF	LOW		
54	989380	P22.3352	SS					POSITIF	NEGATIF	NEGATIF	LOW		
55	987840	P22.2719	NM					POSITIF	POSITIF	NEGATIF	LOW		
56	981861	P22.2178	AR					POSITIF	NEGATIF	NEGATIF	LOW	YA	
57	979904	P22.1813	SUKRIANI					POSITIF	POSITIF	NEGATIF	LOW	YA	
58	902837	P22.1739	SK	58	invasive carcinoma mamae, NST,	SINISTRA	3						
59	683760	P22.1387	AR					POSITIF	POSITIF	NEGATIF	LOW		
60	427894	P22.1324	SN			SINISTRA		POSITIF	POSITIF	NEGATIF	LOW		
61	945626	P21.2968	MD	61	Invasif Breast Carcinoma of no Special Type	DEXTRA	2						
62	909382	P21.1566	ANTHO	57	invasive carcinoma mamae, NST,	SINISTRA	1	POSITIF	POSITIF	NEGATIF	HIGH	YA	PARU
63	844501	P20.0071	AT	40	Invasif ductal carcinoma mammae,	DEXTRA	2						
64	884354	P19.2995	MP	56		SINISTRA							
65	98443	P19.3195	NT	63	Invasive carcinoma mamae, NST,	DEXTRA	2	POSITIF	POSITIF	NEGATIF	LOW		
66	871333	P19.1226	HYA					POSITIF	POSITIF	NEGATIF			
67	831108	P21.1359	SRD					POSITIF	POSITIF	NEGATIF	HIGH	YA	TULANG
68	891882	P19.4880	SN	57	invasive carcinoma mamae, NST,	SINISTRA	2	POSITIF	POSITIF	NEGATIF	HIGH	YA	TULANG
69	76185	H22.528	FT	38	ADENOCARCINOMA MAMMAE MUCINOSUM	SINISTRA	1	POSITIF	POSITIF	NEGATIF	LOW		TULANG
70	114121	H19.235	RT	44	INVASIVE LOBULAR CARCINOMA MAMMAE	SINISTRA	2	POSITIF	POSITIF	NEGATIF			
71	119990	H19.552	MB	46	INVASIVE LOBULAR CARCINOMA MAMMAE	SINISTRA	2	POSITIF	POSITIF	NEGATIF		YA	
72	173596	H22.550	MN	70	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	DEXTRA	2	POSITIF	POSITIF	NEGATIF	HIGH	YA	TULANG
73	124287	H19.879	FT	42	invasive carcinoma mamae, NST,	DEXTRA	1	POSITIF	POSITIF	NEGATIF			
74	114149	H19.279	YL	44	invasive carcinoma mammae	DEXTRA	3	POSITIF	POSITIF	NEGATIF	HIGH		
75	85827	H19.450	NH	55	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	2	POSITIF	POSITIF	NEGATIF		YA	PARU, TULANG
76	14683	H20.475	SN	46	MUCINOUS CARCINOMA OF BREAST	DEXTRA	1	POSITIF	POSITIF	NEGATIF	HIGH		PARU
77	115269	H19.331	SL	68	invasive carcinoma mamae, NST,	DEXTRA	2	POSITIF	POSITIF	NEGATIF		YA	TULANG
78	102105	H19.250	HJ	49	ADENOCARCINOMA MAMMAE MUCINOSUM	SINISTRA	1	POSITIF	NEGATIF	NEGATIF			
79	81301	H22.024	SK	40	INVASIVE BREAST CARCINOMA OF NO SPECIAL TYPE	SINISTRA	2	POSITIF	POSITIF	NEGATIF	LOW		TULANG

FORM PERSETUJUAN SETELAH PENJELASAN *(Informed Consent)*

FAKULTAS KEDOKTERAN UNIVERSITAS HASANUDDIN
RSUP Dr. WAHIDIN SUDIROHUSODO
KOMISI ETIK PENELITIAN KESEHATAN
Sekretariat : JEMBATAN PENGHUBUNG LT. 2 PCC-IGD RSWS
JL.PERINTIS KEMERDEKAAN KAMPUS TAMALANREA KM.11, Makassar, Telp. (0411)586105 Ext. 8147

FORM PERSETUJUAN SETELAH PENJELASAN (PSP)
(Informed Concent Penelitian)

Saya bertanda tangan dibawah ini:

Nama : [redacted]
Umur/Kelamin : 42 TAHUN / PEREMPUAN
Alamat : JENEPONTO
Bukti diri/KTP : [redacted]

Setelah membaca/mendengar dan mengerti penjelasan yang diberikan mengenai tujuan, manfaat apa yang akan dilakukan pada peelitian ini, dengan ini saya menyatakan dengan sesunggunhnya serta memberikan persetujuan secara sukarela tanpa paksaan dan bersedia menjalani/mengikuti penelitian mengenai Hubungan Ekpresi PI3K dengan grading dan metastasis pada Kanker Payudara Subtipe luminal

Saya mengerti bahwa dari semua hal yang dilakukan penelitian pada saya dapat menimbulkan masalah, namun saya percaya kemungkinan tersebut sangat kecil karena akan dilakukan oleh petugas yang terlatih.

Saya tahu bahwa keikut sertaan saya ini bersifat sukarela tanpa paksaan, sehingga saya bias menolak ikut atau mengundurkan diri dari penelitian ini tanpa kehilangan hak saya untuk mendapatkan pelayanan kesehatan. Juga saya berhak bertanya atau meminta penjelasan pada penelitian bila masih ada hal yang belum jelas atau masih ada hal-hal yang ingin saya ketahui tentang benelitian ini.

Saya juga mengerti bahwa semua biaya yang dikeluarkan sehubungan dengan penelitian ini, akan ditanggung oleh peneliti. Demikian juga biaya berawatan dan pengobatan bila terjadi hal-hal yang tidak diinginkan akibat penelitian ini, akan dibiayai oleh peneliti.

Saya percaya bahwa keamanan dan keahasiaan data penelitian akan terjamin dan saya dengan ini menyetujui semua data yang dihasilkan pada penelitian ini untuk dipublikasikan dalam bentuk lisan maupun tulisan.

Bila terjadi perbedaan pendapat dikemudian hari, kami akan menyelesaikan secara kekeluargaan.

	NAMA	TANDA TANGAN	TGL/BLN/TAHUN
Klien :	[redacted]		14/04/2023
Saksi1 :			
Saksi 2 :			

Penanggung Jawab Penelitian:

Nama : dr. YUSFITARTA ALVINA, SpB
Alamat : [redacted]
Telepon : [redacted]

Penanggung Jawab Medis:

Nama : Dr. dr. William Hamdani, Sp.B., Subsp. Onk.(K)
Alamat :
Telepon :

REAGEN PI3K P110 Alpha Antibody

GeneTex Datasheet

PI3 kinase p110 alpha antibody

Cat No. GTX100462

Host	Rabbit
Clonality	Polyclonal
Isotype	IgG
Application	WB, ICC/IF, IHC-P
Reactivity	Human, Mouse

Reference (2)
Package
100 µl, 25 µl

APPLICATION

Application Note

*Optimal dilutions/concentrations should be determined by the researcher.

Suggested dilution	Dilution
WB	1:500-1:3000
ICC/IF	1:100-1:1000
IHC-P	1:100-1:1000

Not tested in other applications.

Calculated MW 124 kDa. (Note)

PROPERTIES

Form	Liquid
Buffer	1XPBS (pH7), 20% Glycerol
Preservative	0.025% ProClin 300
Storage	Store as concentrated solution. Centrifuge briefly prior to opening vial. For short-term storage (1-2 weeks), store at 4ºC. For long-term storage, aliquot and store at -20ºC or below. Avoid multiple freeze-thaw cycles.
Concentration	2.58 mg/ml (Please refer to the vial label for the specific concentration.)
Immunogen	Recombinant protein encompassing a sequence within the N-terminus region of human PI3 kinase p110 alpha. The exact sequence is proprietary.
Purification	Purified by antigen-affinity chromatography.
Conjugation	Unconjugated
Note	For laboratory use only. Not for any clinical, therapeutic, or diagnostic use in humans or animals. Not for animal or human consumption.

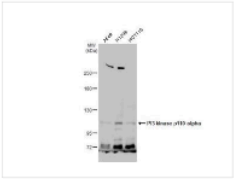
For full product information, images and publications, please visit our website.

GeneTex, Inc. (North America)
1-877-436-3839 (Toll-free) 1-949-309-2888 sales@genetex.com

GeneTex International Corporation (Global)
886-3-6208988 886-3-6208989 infoasia@genetex.com

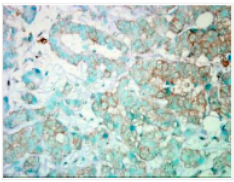
GeneTex Datasheet

DATA IMAGES



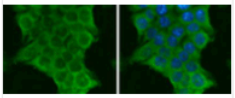
GTX100462 WB Image

Various whole cell extracts (30 µg) were separated by 5% SDS-PAGE, and the membrane was blotted with PI3 kinase p110 alpha antibody (GTX100462) diluted at 1:1000. The HRP-conjugated anti-rabbit IgG antibody (GTX213110-01) was used to detect the primary antibody, and the signal was developed with Trident ECL plus-Enhanced.



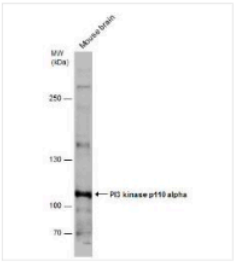
GTX100462 IHC-P Image

Immunohistochemical analysis of paraffin-embedded Human Breast Cancer, using PI3 kinase p110 alpha(GTX100462) antibody.
Antigen Retrieval: Trilogy™ (EDTA based, pH 8.0) buffer, 15min



GTX100462 ICC/IF Image

PI3 kinase p110 alpha antibody detects PI3 kinase p110 alpha protein at cytoplasm by immunofluorescent analysis.
Sample: HCT 116 cells were fixed in 4% paraformaldehyde at RT for 15 min.
Green: PI3 kinase p110 alpha protein stained by PI3 kinase p110 alpha antibody (GTX100462) diluted at 1:500.
Blue: Hoechst 33342 staining.



GTX100462 WB Image

Mouse tissue extract (50 µg) was separated by 5% SDS-PAGE, and the membrane was blotted with PI3 kinase p110 alpha antibody (GTX100462) diluted at 1:3000. The HRP-conjugated anti-rabbit IgG antibody (GTX213110-01) was used to detect the primary antibody.

For full product information, images and publications, please visit our website.

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HASIL SPSS

```
CROSSTABS
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  /FORMAT=AVALUE TABLES
  /STATISTICS=CHISQ RISK
  /CELLS=COUNT ROW
  /COUNT ROUND CELL.
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Crosstabs

Notes

Output Created		02-APR-2023 20:21:45
Comments		
Input	Active Dataset	DataSet2
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	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	74
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	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=GRADING METASTASIS BY PI3K /FORMAT=AVALUE TABLES /STATISTICS=CHISQ RISK /CELLS=COUNT ROW /COUNT ROUND CELL.
Resources	Processor Time	00:00:00.01
	Elapsed Time	00:00:00.00
	Dimensions Requested	2
	Cells Available	524245

Frequencies

Statistics

Lokasi Metastasis

N	Valid	29
	Missing	45
Mode		2
Range		4
Minimum		1
Maximum		5

Lokasi Metastasis

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Paru-paru	8	10.8	27.6	27.6
	Tulang	10	13.5	34.5	62.1
	Hati	3	4.1	10.3	72.4
	Multiple Metastasis	1	1.4	3.4	75.9
	5	7	9.5	24.1	100.0
	Total	29	39.2	100.0	
Missing	System	45	60.8		
Total		74	100.0		

Frequencies

Statistics

		Usia	Status menopause	Jenis Histopatologi	Grading	PI3K	Subtipe	Metastasis
N	Valid	74	74	74	74	74	74	74
	Missing	0	0	0	0	0	0	0
Mode		2	1	1	2	1	2	2
Range		1	1	2	2	1	1	1
Minimum		1	1	1	1	1	1	1
Maximum		2	2	3	3	2	2	2

Frequency Table

Usia

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	<50 tahun	35	47.3	47.3	47.3
	>50 tahun	39	52.7	52.7	100.0
	Total	74	100.0	100.0	

Status menopause

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Premenopause	38	51.4	51.4	51.4
	Menopause	36	48.6	48.6	100.0
	Total	74	100.0	100.0	

Jenis Histopatologi

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Invasif Ductal Carcinoma	57	77.0	77.0	77.0
	Invasif Lobular Carcinoma	12	16.2	16.2	93.2
	Carcinoma Mammae mucinous	5	6.8	6.8	100.0
	Total	74	100.0	100.0	

Grading

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Low Grade Malignancy	15	20.3	20.3	20.3
	Moderate Grade Malignancy	30	40.5	40.5	60.8
	High Grade Malignancy	29	39.2	39.2	100.0
	Total	74	100.0	100.0	

PI3K

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Positif	42	56.8	56.8	56.8
	Negatif	32	43.2	43.2	100.0
	Total	74	100.0	100.0	

Subtipe

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Luminal A	25	33.8	33.8	33.8
	Luminal B	49	66.2	66.2	100.0
	Total	74	100.0	100.0	

Metastasis

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Metastasis	29	39.2	39.2	39.2
	Tidak Metastasis	45	60.8	60.8	100.0
	Total	74	100.0	100.0	

Descriptives

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Usia	74	1	2	1.53	.503
Status menopause	74	1	2	1.49	.503
Jenis Histopatologi	74	1	3	1.30	.591
Grading	74	1	3	2.19	.753
PI3K	74	1	2	1.43	.499
Subtipe	74	1	2	1.66	.476
Metastasis	74	1	2	1.61	.492
Valid N (listwise)	74				

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
GRADING * PI3K	74	100.0%	0	0.0%	74	100.0%
METASTASIS * PI3K	74	100.0%	0	0.0%	74	100.0%

GRADING * PI3K

Crosstab

			PI3K		
			NEGATIVE	POSITIVE	Total
GRADING	LOW GRADE MALIGNANCY	Count	5	10	15
		% within GRADING	33.3%	66.7%	100.0%
	MODERATE GRADE MALIGNANCY	Count	20	10	30
		% within GRADING	66.7%	33.3%	100.0%
	HIGH GRADE MALIGNANCY	Count	7	22	29
		% within GRADING	24.1%	75.9%	100.0%
Total		Count	32	42	74
		% within GRADING	43.2%	56.8%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	11.619[a]	2	.003
Likelihood Ratio	11.889	2	.003
Linear-by-Linear Association	1.598	1	.206
N of Valid Cases	74		

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 6.49.

Risk Estimate

	Value
Odds Ratio for GRADING (LOW GRADE MALIGNANCY / MODERATE GRADE MALIGNANCY)	[a]

a. Risk Estimate statistics cannot be computed. They are only computed for a 2*2 table without empty cells.

METASTASIS * PI3K

Crosstab

			PI3K		
			NEGATIVE	POSITIVE	Total
METASTASIS	NON METASTASIS	Count	25	20	45
		% within METASTASIS	55.6%	44.4%	100.0%
	METASTASIS	Count	7	22	29
		% within METASTASIS	24.1%	75.9%	100.0%
Total		Count	32	42	74
		% within METASTASIS	43.2%	56.8%	100.0%

Chi-Square Tests

	Value	Df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	7.092[a]	1	.008		
Continuity Correction[b]	5.870	1	.015		
Likelihood Ratio	7.349	1	.007		
Fisher's Exact Test				.009	.007
Linear-by-Linear Association	6.996	1	.008		
N of Valid Cases	74				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 12.54.

b. Computed only for a 2x2 table

P value 0.008. Maka Tolak H0 terima H1 berarti ada hubungan
H0 = tidak ada hubungan H1 = ada hubungan

Risk Estimate

	Value	95% Confidence Interval Lower	Upper
Odds Ratio for METASTASIS (NON METASTASIS / METASTASIS)	3.929	1.397	11.048
For cohort PI3K = NEGATIVE	2.302	1.147	4.617
For cohort PI3K = POSITIVE	.586	.398	.862
N of Valid Cases	74		

- OR (Odd Ratio) Pasien kanker payudara dengan nilai PI3K positif akan beresiko mengalami metastasis 3,929 kali dibandingkan dengan PI3K nya negatif
- RR (Relative Risk) Pasien dengan kanker payudara dengan PI3K negatif memiliki peluang tidak metastasis sebesar 2,302 kali dibandingkan dengan yang PI3K nya positif
- RR (Relative Risk) Pasien dengan kanker payudara dengan PI3K negatif memiliki peluang metastasis sebesar 0,586 kali dibandingkan orang yang PI3K nya positif.

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Metastasis	3.929	1.397	11.048
For Cohort PI3K = Negative	2.302	1.147	4.617
For Cohort PI3K = Positive	.586	.398	.862
N of Valid Cases	74		

HAKI PENELITIAN

REPUBLIK INDONESIA
KEMENTERIAN HUKUM DAN HAK ASASI MANUSIA

SURAT PENCATATAN
CIPTAAN

Dalam rangka pelindungan ciptaan di bidang ilmu pengetahuan, seni dan sastra berdasarkan Undang-Undang Nomor 28 Tahun 2014 tentang Hak Cipta, dengan ini menerangkan:

Nomor dan tanggal permohonan	:	EC00202393778, 14 Oktober 2023
Pencipta		
Nama	:	**dr. Yusfitaria Alvina, SpB, MARS, M.Kes, Prof. Dr. dr. Prihantono, SpB, Subsp.Onk(K), M.Kes dkk**
Alamat	:	Jl. Pemuda No. 25, Tamalate, Makassar, Sulawesi Selatan, 90223
Kewarganegaraan	:	Indonesia
Pemegang Hak Cipta		
Nama	:	**Universitas Hasanuddin**
Alamat	:	Jln. Perintis Kemerdekaan KM. 11, Tamalanrea, Makassar, Sulawesi Selatan 90245
Kewarganegaraan	:	Indonesia
Jenis Ciptaan	:	**Karya Tulis (Artikel)**
Judul Ciptaan	:	**THE CORELLATION PHOSPHATIDYLINOSITOL 3 KINASE (PI3K) AND CYCLIN DEPENDENT KINASE 4 (CDK4) EXPRESSION WITH GRADING AND METASTASIS IN LUMINAL BREAST CANCER**
Tanggal dan tempat diumumkan untuk pertama kali di wilayah Indonesia atau di luar wilayah Indonesia	:	1 September 2023, di Makassar
Jangka waktu pelindungan	:	Berlaku selama hidup Pencipta dan terus berlangsung selama 70 (tujuh puluh) tahun setelah Pencipta meninggal dunia, terhitung mulai tanggal 1 Januari tahun berikutnya.
Nomor pencatatan	:	000526733

adalah benar berdasarkan keterangan yang diberikan oleh Pemohon.
Surat Pencatatan Hak Cipta atau produk Hak terkait ini sesuai dengan Pasal 72 Undang-Undang Nomor 28 Tahun 2014 tentang Hak Cipta.

a.n. MENTERI HUKUM DAN HAK ASASI MANUSIA
Direktur Hak Cipta dan Desain Industri

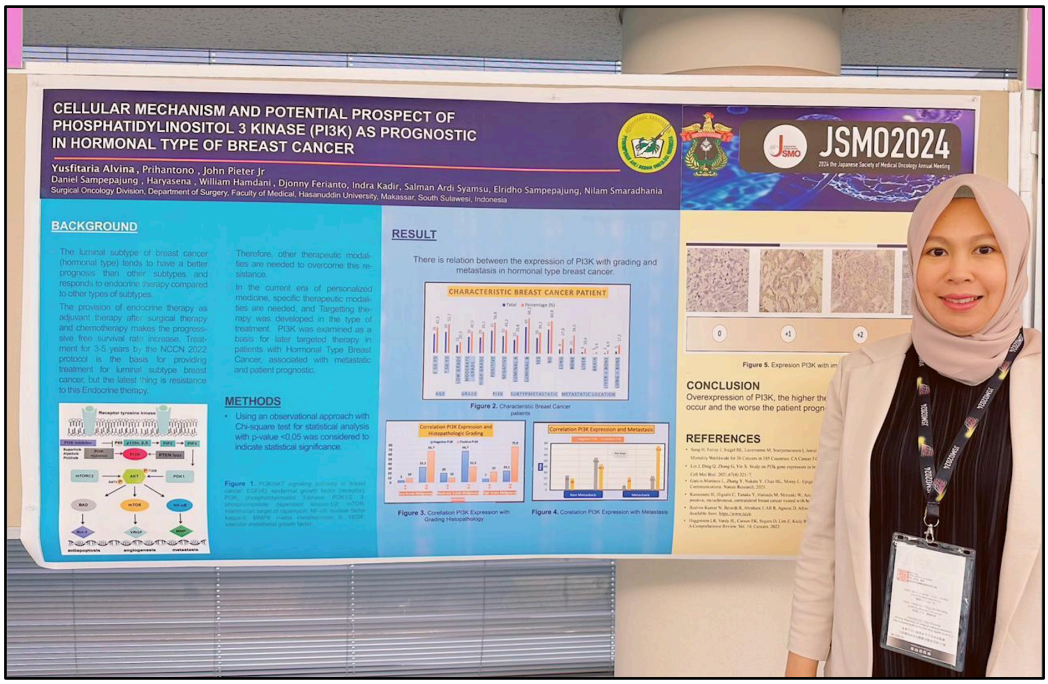
Anggoro Dasananto
NIP. 196412081991031002

Disclaimer:
Dalam hal pemohon memberikan keterangan tidak sesuai dengan surat pernyataan, Menteri berwenang untuk mencabut surat pencatatan permohonan.

LAMPIRAN PENCIPTA

No	Nama	Alamat
1	dr. Yusfitaria Alvina, SpB, MARS, M.Kes	Jl. Pemuda No. 25
2	Prof. Dr. dr. Prihantono, SpB, Subsp.Onk(K), M.Kes	Jl. Tun Abdul Razak. Perumahan Graha Lestari Makassar Blok D1 No.5
3	dr. John Sammy Leids Alfawim Pieter, SpB, Subsp.Onk(K)	Jl. Datumuseng No.3
4	dr. Salman Ardi Syamsu, SpB, Subsp.Onk(K)	Jl. Mapala A4 No.1
5	dr. Nilam Smaradhania, SpB, Subsp.Onk(K), M.Kes	Jl. Toddopuli Raya Timur, Komp Villa Surya Mas Blok J No. 21
6	Dr. dr. Berti Julian Nelwan, DFM, M.Kes, SpPA (K), SpF	Komp. Baruga Antang

PRESENTASI INTERNASIONAL



Break the Borders and Beyond
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Travel Award Certificate

This is to certify that

YUSFITARIA ALVINA

has received Travel Award
in recognition of the outstanding abstract(s) submitted for

2024 the Japanese Society of
Medical Oncology Annual Meeting
held from February 22 to 24, 2024

Hiroji Iwata, M.D., Ph.D.
Congress President
2024 the Japanese Society of Medical Oncology
Annual Meeting (JSMO2024)

JSMO2024
The Japanese Society of Medical Oncology 21st Annual Meeting
President Hiroji Iwata, M.D., Ph.D. Vice director and chief of Breast Oncology, Aichi Cancer Center
Date February 22 (Thu) – 24 (Sat), 2024 Venue Nagoya Congress Center
Congress Secretariat : c/o Congress Corporation
3F Onward Park Building, 3-10-5 Nihonbashi, Chuo-ku, Tokyo 103-0239, Japan TEL. +81-3-3518-3701 E-mail : jsmo2024@congre.co.jp
https://www.congre.co.jp/jsmo2024/en/