

## DAFTAR PUSTAKA

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## LAMPIRAN

### Lampiran 1: PRISMA CHECKLIST 2009

Section/topic	#	Checklist item	Reported on page #
<b>TITLE</b>			
Title	1	Identify the report as a systematic review, meta-analysis, or both.	cover
<b>ABSTRACT</b>			
Structured summary	2	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.	vii
<b>INTRODUCTION</b>			
Rationale	3	Describe the rationale for the review in the context of what is already known.	Page 1, line:110-143
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	Page 6 Line 167-172 Page 33 Line 18
<b>METHODS</b>			
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number.	Page 33 line 12
Eligibility criteria	6	Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	Page 34 Line 28-35 Page 35 Line 75-88
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	Page 35 Line 90-103

Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	Page Line
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	Page Line
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	Page Line
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	Page 40 Line 216-222
Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	Page 39-40 Line 191-215
Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	√
Synthesis of results	14	Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., $I^2$ ) for each meta-analysis.	√

Section/topic	#	Checklist item	Reported on page #
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).	√

Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	√
<b>RESULTS</b>			
Study selection	17	Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram.	Page: 42-43 Line: 281-303
Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations.	Page: 49 Line: 16-24
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	Page: 49 Line: 1-14
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	Page: 50-51 Line: 26-69
Synthesis of results	21	Present results of each meta-analysis done, including confidence intervals and measures of consistency.	Page: 51-52 Page: 70-130
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	Page: 58-59 Line: 6-35
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	
<b>DISCUSSION</b>			
Summary of evidence	24	Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).	Page: 60 Line: 38-63
Limitations	25	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).	Page: 64 Line: 181-200
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	page: 65 Line: 203-215
<b>FUNDING</b>			

Funding	27	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.	
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*From:* Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group (2009). Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 6(7): e1000097. doi:10.1371/journal.pmed1000097

For more information, visit: [www.prisma-statement.org](http://www.prisma-statement.org)

**CASP Checklist:** 11 questions to help you make sense of a **Randomised Controlled Trial**

**How to use this appraisal tool:** Three broad issues need to be considered when appraising a trial:

- ▶ Are the results of the study valid? (Section A)
- ▶ What are the results? (Section B)
- ▶ Will the results help locally? (Section C)

The 11 questions on the following pages are designed to help you think about these issues systematically. The first three questions are screening questions and can be answered quickly. If the answer to both is "yes", it is worth proceeding with the remaining questions. There is some degree of overlap between the questions, you are asked to record a "yes", "no" or "can't tell" to most of the questions. A number of italicised prompts are given after each question. These are designed to remind you why the question is important. Record your reasons for your answers in the spaces provided.

**About:** These checklists were designed to be used as educational pedagogic tools, as part of a workshop setting, therefore we do not suggest a scoring system. The core CASP checklists (randomised controlled trial & systematic review) were based on JAMA 'Users' guides to the medical literature 1994 (adapted from Guyatt GH, Sackett DL, and Cook DJ), and piloted with health care practitioners.

For each new checklist, a group of experts were assembled to develop and pilot the checklist and the workshop format with which it would be used. Over the years overall adjustments have been made to the format, but a recent survey of checklist users reiterated that the basic format continues to be useful and appropriate.

**Referencing:** we recommend using the Harvard style citation, i.e.: *Critical Appraisal Skills Programme (2018). CASP (insert name of checklist i.e. Randomised Controlled Trial) Checklist. [online] Available at: URL. Accessed: Date Accessed.*

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Paper for appraisal and reference:.....

Section A: Are the results of the trial valid?

1. Did the trial address a clearly focused issue?

Yes	
Can't Tell	
No	

**HINT:** An issue can be 'focused' in terms of

- the population studied
- the intervention given
- the comparator given
- the outcomes considered

Comments:

2. Was the assignment of patients to treatments randomised?

Yes	
Can't Tell	
No	

**HINT:** Consider

- how this was carried out
- was the allocation sequence concealed from researchers and patients

Comments:

3. Were all of the patients who entered the trial properly accounted for at its conclusion?

Yes	
Can't Tell	
No	

**HINT:** Consider

- was the trial stopped early
- were patients analysed in the groups to which they were randomised

Comments:

Is it worth continuing?



4. Were patients, health workers and study personnel 'blind' to treatment?

Yes	<input type="checkbox"/>
Can't Tell	<input type="checkbox"/>
No	<input type="checkbox"/>

Comments:

5. Were the groups similar at the start of the trial

Yes	<input type="checkbox"/>
Can't Tell	<input type="checkbox"/>
No	<input type="checkbox"/>

**HINT:** Consider other factors that might affect the outcome, such as; age, sex, social class

Comments:

6. Aside from the experimental intervention, were the groups treated equally?

Yes	<input type="checkbox"/>
Can't Tell	<input type="checkbox"/>
No	<input type="checkbox"/>

Comments:

Section B: What are the results?

7. How large was the treatment effect?

- HINT: Consider
- what outcomes were measured
  - Is the primary outcome clearly specified
  - what results were found for each outcome

Comments:

8. How precise was the estimate of the treatment effect?

- HINT: Consider
- what are the confidence limits

Comments:

**Section C: Will the results help locally?**

9. Can the results be applied to the local population, or in your context?

Yes	<input type="checkbox"/>
Can't Tell	<input type="checkbox"/>
No	<input type="checkbox"/>

- HINT: Consider whether
- the patients covered by the trial are similar enough to the patients to whom you will apply this
  - how they differ

Comments:

10. Were all clinically important outcomes considered?

Yes	<input type="checkbox"/>
Can't Tell	<input type="checkbox"/>
No	<input type="checkbox"/>

- HINT: Consider whether
- there is other information you would like to have seen
  - if not, does this affect the decision

Comments:

11. Are the benefits worth the harms and costs?

Yes	<input type="checkbox"/>
Can't Tell	<input type="checkbox"/>
No	<input type="checkbox"/>

HINT: Consider  
• even if this is not addressed by the trial, what do **you** think?

Comments:

**JBI Critical Appraisal tools (Checklist for Quasi experimental tools)**

**JBI Critical Appraisal Checklist for Quasi-Experimental Studies  
(non-randomized experimental studies)**

Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Author \_\_\_\_\_ Year \_\_\_\_\_ Record  
Number \_\_\_\_\_

	Yes	No	Unclear	Not applicable
1. Is it clear in the study what is the 'cause' and what is the 'effect' (i.e. there is no confusion about which variable comes first)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Were the participants included in any comparisons similar?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Were the participants included in any comparisons receiving similar treatment/care, other than the exposure or intervention of interest?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Was there a control group?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Were there multiple measurements of the outcome both pre and post the intervention/exposure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Was follow up complete and if not, were differences between groups in terms of their follow up adequately described and analyzed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Were the outcomes of participants included in any comparisons measured in the same way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Were outcomes measured in a reliable way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Was appropriate statistical analysis used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall appraisal:      Include     Exclude     Seek further info

Comments (Including reason for exclusion)

### Lampiran 4: The Cochrane collaborations tool for assessing risk of bias

Cochrane Collaboration's tool for assessing risk of bias (adapted from Higgins and Altman13)

Bias domain	Source of bias	Support for judgment	Review authors' judgment (assess as low,
			unclear or high risk of bias)
Selection bias	Random sequence generation	Describe the method used to generate the allocation sequence in sufficient detail to allow an assessment of whether it should produce comparable groups	Selection bias (biased allocation to interventions) due to inadequate generation of a randomised sequence
	Allocation concealment	Describe the method used to conceal the allocation sequence in sufficient detail to determine whether intervention allocations could have been foreseen before or during enrolment	Selection bias (biased allocation to interventions) due to inadequate concealment of allocations before assignment
Performance bias	Blinding of participants and personnel*	Describe all measures used, if any, to blind trial participants and researchers from knowledge of which intervention a participant received. Provide any information relating to whether the intended blinding was effective	Performance bias due to knowledge of the allocated interventions by participants and personnel during the study
Detection bias	Blinding of outcome assessment*	Describe all measures used, if any, to blind outcome assessment from knowledge of which intervention a participant received. Provide any information relating to whether the intended blinding was effective	Detection bias due to knowledge of the allocated interventions by outcome assessment
Attrition bias	Incomplete outcome data*	Describe the completeness of outcome data for each main outcome, including attrition and exclusions from the analysis. State whether attrition and exclusions were reported, the numbers in each intervention group (compared with total randomised participants), reasons for attrition or exclusions where reported, and any reinclusions in analyses for the review	Attrition bias due to amount, nature, or handling of incomplete outcome data
Reporting bias	Selective reporting	State how selective outcome reporting was examined and what was found	Reporting bias due to selective outcome reporting
Other bias	Anything else, ideally Prespecified	State any important concerns about bias not covered in the other domains in the tool	Bias due to problems not covered elsewhere

Assessments should be made for each main outcome or class of outcomes

# Pencarian untuk database PubMed

The screenshot shows the PubMed website interface. At the top, the NIH logo and 'National Library of Medicine' are visible. The search bar contains a complex query: '((((((((intensive care unit[Title/Abstract]) AND (critical care[Title/Abstract]))) AND (mechanical ventilation[Title/Abstract]) AND (intubated patients[Title/Abstract]) AND (oral hygiene[Title/Abstract]) AND (oral care[Title/Abstract]) AND (salvadora persica[Title/Abstract]) AND (miswak[Title/Abstract]) AND (sticks[Title/Abstract]) AND (mouthwash[Title/Abstract]) AND (persica[Title/Abstract]) AND (bacteria[Title/Abstract]) AND (colonization[Title/Abstract]) AND (ventilator associated pneumonia[Title/Abstract])))))). The search results page shows 409,469 results. A message states: 'The following term was not found in PubMed: saladora'. Below this, there is a 'Previous results' section for 'Page 77'. A specific result is highlighted: 'Crustacean biodiversity as an important factor for mosquito larval control.' with citation information: 'Kroeger I, Duquesne S, Liess M. J Vector Ecol. 2013 Dec;38(2):390-400. doi: 10.1111/j.1948-7134.2013.12055.x. PMID: 24581370 Free article.' The result description mentions 'Populations of the mosquito Culex pipiens colonized artificial ponds that contained crustacean communities at different time points of colonization by crustaceans: 1) 'no colonization' (no crustaceans), 2) 'simultaneous colonization' by crustaceans and mosqui ...'. The interface includes filters for 'MY NCBI FILTERS', 'RESULTS BY YEAR' (1875-2021), and 'TEXT AVAILABILITY' (Abstract, Free full text, Full text).

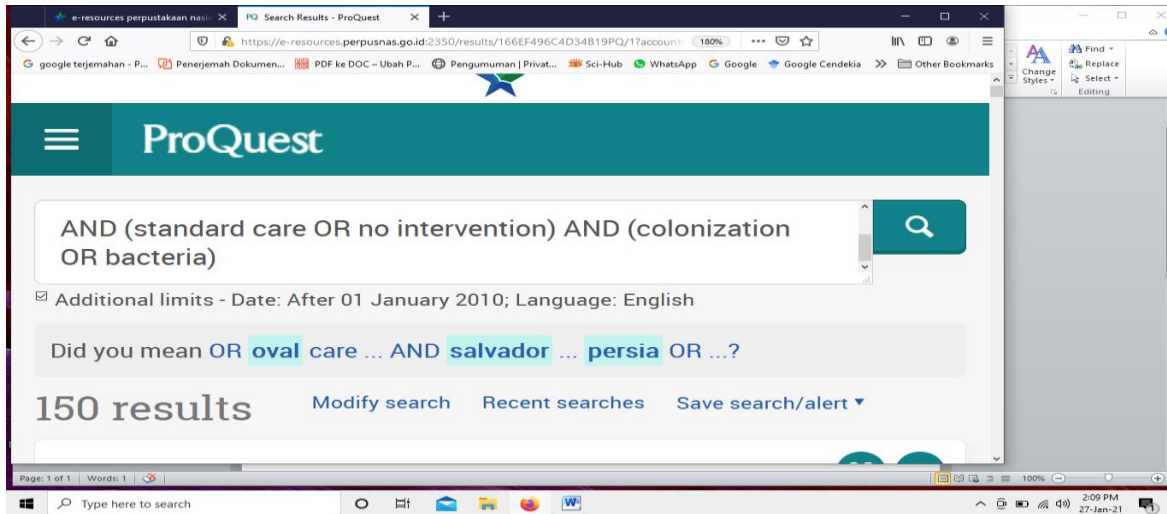
# 10 tahun terakhir

The screenshot shows the 'History and Search Details' section of the PubMed website. It displays a search history table with one entry. The table has columns for 'Search', 'Actions', 'Details', 'Query', 'Results', and 'Time'. The entry is as follows:

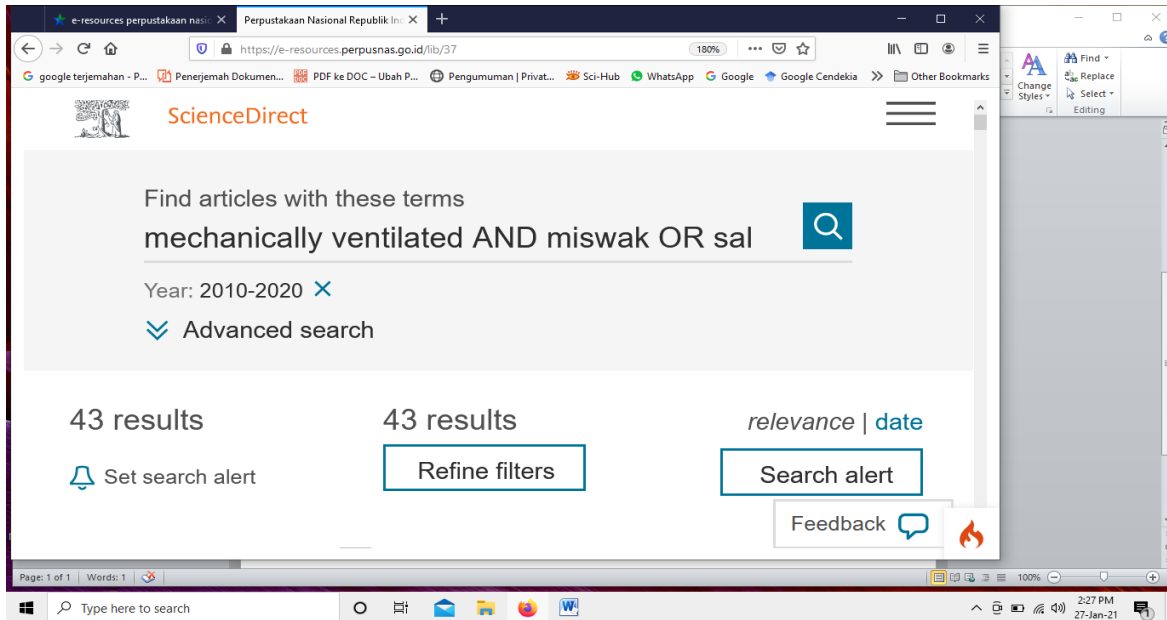
Search	Actions	Details	Query	Results	Time
#1	...	>	Search: (((((((((((intensive care unit[Title/Abstract]) OR (critical care[Title/Abstract])) AND (mechanical ventilation[Title/Abstract]) OR (intubated patients[Title/Abstract]) AND (oral hygiene[Title/Abstract]) OR (oral care[Title/Abstract]) AND (salvadora persica[Title/Abstract]) OR (miswak[Title/Abstract]) OR (sticks[Title/Abstract]) OR (mouthwash[Title/Abstract]) OR (persica[Title/Abstract]) AND (bacteria[Title/Abstract]) OR (colonization[Title/Abstract]) AND (ventilator associated pneumonia[Title/Abstract])))))).	412	18:34:26

Below the table, it says 'Showing 1 to 1 of 1 entries'. The interface also includes a 'Query box' at the top with the text 'Enter / edit your search query here' and a 'Search' button. The bottom of the screenshot shows the Windows taskbar with the time '7:35 AM 1/27/2021'.

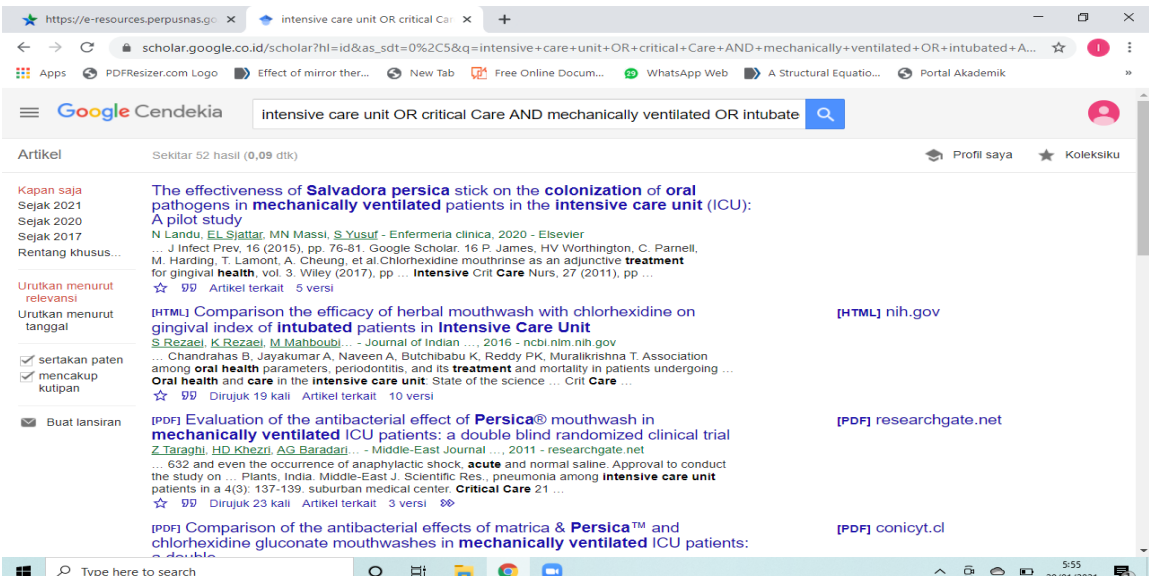
# Pencarian di ProQuest



### Pencarian di Science Direct



### Pencarian di Grey Litertaur (google scholar)



Google Cendekia | intensive care unit OR critical care AND mechanical ventilation AND oral hygi

Artikel | Sekitar 29 hasil (0,07 dik)

Kapan saja  
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Telusuri

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Urutkan menurut tanggal

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☑ mencakup kutipan  
☑ Buat lansiran

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... Z. Al Maskari, et al.Rates of ventilator-associated pneumonia in critical care units in ... D. Spence, J. Kozioi-McClainOral hygiene care in the pediatric intensive care unit: practice recommendations ... A. Cheung, et al.Chlorhexidine mouthrinse as an adjunctive treatment for gingival ...  
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... Chandrasas B, Jayakumar A, Naveen A, Butchibabu K, Reddy PK, Muralkrishna T. Association among oral health parameters, periodontitis, and its treatment and mortality in patients undergoing ... Oral health and care in the intensive care unit: State of the science ... Am J Crit Care ...  
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