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LAMPIRAN-LAMPIRAN

Lampiran 1 :

LEMBAR PENJELASAN PENELITIAN

Assalamualaikum Warahmatullahi Wabarakatuh

Saya yang bertanda tangan dibawah ini adalah mahasiswa Ilmu Keperawatan Fakultas Keperawatan Universitas Hasanuddin atas **nama A.Sri Mulyani, NIM R011181012**, saat ini saya sedang mengerjakan penelitian yang berjudul **“Gambaran Kejadian Ikutan Kejadian Pasca Imunisasi (KIPI) pada Remaja yang telah Menerima Vaksinasi COVID-19 di Kota Makassar”**.

Penelitian ini bertujuan untuk mengetahui gambaran reaksi KIPI pada remaja yang telah menerima vaksinasi COVID-19 di kota Makassar. Adapun manfaat dari penelitian ini yaitu untuk menjadi sumber informasi masyarakat guna menambah wawasan dan pengetahuan dalam meningkatkan derajat kesejahteraan khususnya pencapaian *herd immunity* menghadapi pandemi COVID-19.

Dalam penelitian ini akan dilakukan pengambilan data berupa data demografi, informasi vaksin, reaksi KIPI vaksin COVID-19, periode waktu reaksi KIPI serta aktivitas saat mengalami KIPI. Kuesioner diperkirakan diselesaikan dalam waktu ± 5 menit. Kerahasiaan semua informasi yang diperoleh oleh peneliti akan dijamin keamanannya dan hanya data tertentu saja yang akan disajikan atau dilaporkan pada hasil penelitian.

Untuk itu, peneliti mengharapkan kesediaan dan kerja sama saudara dalam mengikuti penelitian ini. Apabila sewaktu-waktu ada hal yang ingin dikonfirmasi terkait penelitian silahkan menghubungi peneliti melalui *whatsapp* 082348452615. Atas kesediaan saudara dan kerja samanya peneliti ucapan terima kasih.

Wassalamualaikum Warahmatullahi Wabarakatuh

Makassar, 5 April 2022
Peneliti

A.Sri Mulyani

Penanggung Jawab Penelitian :

Nama : A.Sri Mulyani
Alamat : Jalan Sahabat Raya No.2 UNHAS
No.Telepon : 082348452615

Lampiran 2 :

LEMBAR PERSETUJUAN RESPONDEN

Saya yang bertanda tangan dibawah ini :

Nama :

Umur :

Alamat :

Setelah membaca dan mengerti penjelasan yang diberikan mengenai tujuan, manfaat dan apa yang akan dilakukan pada penelitian “**Gambaran Kejadian Ikutan Kejadian Pasca Imunisasi (KIPI) pada Remaja yang telah Menerima Vaksinasi COVID-19 di Kota Makassar**”, menyatakan setuju untuk ikut dalam penelitian ini secara sukarela dan tanpa paksaan dari pihak manapun, sehingga saya bisa menolak ikut atau mengundurkan diri dari penelitian ini, berhak bertanya atau meminta penjelasan kepada peneliti bila masih ada hal yang belum jelas.

Dengan demikian, saya yang bertanda tangan dibawah ini menyatakan bersedia dan tidak keberatan untuk memberikan informasi dan menjawab pertanyaan-pertanyaan yang diajukan kepada saya. Saya percaya bahwa keamanan dan kerahasiaan penelitian ini dijamin dan saya menyetujui semua data saya dari penelitian ini untuk disajikan dalam bentuk lisan maupun tulisan.

Demikian pernyataan ini saya buat dengan penuh tanggung jawab untuk dipergunakan sebagaimana mestinya.

Makassar, 2022

Peneliti



A.Sri Mulyani

Responden

(.....)

Lampiran 3

KUESIONER PENELITIAN

A. Identitas Responden

1. Nama/Inisial Responden :
2. Umur : 4. Nama Sekolah/Kelas :
3. Jenis Kelamin :..... 5. Nomor Tlp/Whatsapp :

B. Informasi Vaksin COVID-19

1. Jenis vaksin yang diterima : (*silahkan centang yang sesuai*)
 Coronavac (Sinovac)
 Pfizer
2. Kapan waktu penerimaan vaksin terakhir (*bisa dilihat di sertifikat vaksin*)
Jawaban (DD/MM/YYYY) :

C. Pertanyaan Kriteria Eksklusi

1. Apakah sudah mendapatkan vaksinasi COVID-19 suntikan kedua?
 - a. Ya
 - b. Tidak

D. Reaksi KIPI :

(KIPI adalah efek samping yang bisa dirasakan seseorang setelah menerima vaksinasi)

1. Reaksi KIPI pada DOSIS PERTAMA :

(silahkan centang pada reaksi yang anda rasakan dalam kurun waktu 7 hari setelah vaksin)

- | | |
|---|---|
| <input type="checkbox"/> Nyeri pada lokasi suntikan | <input type="checkbox"/> Kemerahan di lokasi suntikan |
| <input type="checkbox"/> Bengkak di lokasi suntikan | <input type="checkbox"/> Demam |
| <input type="checkbox"/> Sakit kepala | <input type="checkbox"/> Pusing |
| <input type="checkbox"/> Mual/Muntah | <input type="checkbox"/> Nyeri otot |
| <input type="checkbox"/> Kelelahan | <input type="checkbox"/> Menggigil |

Mengantuk Perubahan nafsu makan

Kesulitan bernafas Nyeri dada

Tidak ada

2. Jika terdapat reaksi KIPI, berapa lama reaksi dirasakan ?

(jika dipertanyaan sebelumnya memilih "tidak ada" maka silahkan pilih "tidak mengalami KIPI")

- a. Tidak mengalami KIPI
- b. < 24 jam
- c. 24-72 jam
- d. >72 jam

3. Tindakan yang dilakukan saat mengalami KIPI vaksin COVID-19 dosis 1

Contoh : Minum obat penurun panas, istirahat yang cukup, ke pelayanan kesehatan, dll

Jawaban :

4. Dapat menjalani aktivitas sehari hari secara normal saat mengalami KIPI vaksin COVID-19 dosis 1

- a. Tidak mengalami KIPI
- b. Ya
- c. Tidak

5. Vaksinasi **DOSIS KEDUA** :

a. Reaksi KIPI :

(silahkan centang pada reaksi yang anda rasakan dalam kurun waktu 7 hari setelah vaksin)

Nyeri pada lokasi suntikan Kemerahan di lokasi suntikan

Bengkak di lokasi suntikan Demam

Sakit kepala Pusing

Mual/Muntah Nyeri otot

- | | |
|---|--|
| <input type="checkbox"/> Kelelahan | <input type="checkbox"/> Menggigil |
| <input type="checkbox"/> Mengantuk | <input type="checkbox"/> Perubahan nafsu makan |
| <input type="checkbox"/> Kesulitan bernafas | <input type="checkbox"/> Nyeri dada |
| <input type="checkbox"/> Tidak ada | |

6. Jika terdapat reaksi KIPI, berapa lama reaksi dirasakan

- a. Tidak mengalami KIPI
- b. < 24 jam
- c. 24-72 jam
- d. >72 jam

7. Tindakan yang dilakukan saat mengalami KIPI vaksin COVID-19 dosis 2

Contoh : Minum obat penurun panas, istirahat yang cukup, ke pelayanan kesehatan, dll

Jawaban :

8. Dapat menjalani aktivitas sehari hari secara normal saat mengalami KIPI vaksin COVID-19 dosis 2

- a. Tidak mengalami KIPI
- b. Ya
- c. Tidak

9. Apakah memiliki reaksi lain selain efek samping yang telah ditanyakan diatas ?

Sebutkan :

-TERIMA KASIH ATAS PARTISIPASINYA-

Lampiran 4 : Lembar Surat Izin Data Awal Penelitian



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
RISET DAN TEKNOLOGI
UNIVERSITAS HASANUDDIN
FAKULTAS KEPERAWATAN
Jl. Perintis Kemerdekaan Km. 10 Makassar 90245
Laman :keperawatan@unhas.ac.id

No. : 688/UN4.18.1/DL.16/2022 9 Februari 2022

Lamp. :

H a l : **Permintaan Izin Observasi / Pengambilan
Data Awal**

Yth.: Kepala Sekolah SMA NEGERI 18 MAKASSAR

di-
MAKASSAR

Dengan hormat disampaikan bahwa dalam rangka penyelesaian studi/penyusunan skripsi bagi Mahasiswa Program Studi Ilmu Keperawatan Fakultas Keperawatan Universitas Hasanuddin, maka dengan ini mohon kiranya mahasiswa yang tersebut namanya dibawah ini :

N a m a : **A. Sri Mulyani**
NIM : R011181012
Program Studi : Ilmu Keperawatan
Rencana Judul : Gambaran Kejadian Ikutan Pasca Imunisasi (KIPI) pada Remaja yang Telah Menerima Vaksinasi Covid-19 di Kota Makassar.

Dapat diberikan izin untuk melakukan observasi dalam rangka pengambilan data awal, di Sekolah yang Bapak/Sdr. (i) pimpin, yang akan dilaksanakan pada bulan **Februari s/d Maret 2022**. Adapun metode yang digunakan dalam Pengumpulan data awal tersebut adalah **Observasi dan Wawancara, dengan tetap menerapkan protocol kesehatan**.

Demikian permohonan kami, atas bantuan dan kerjasama yang baik disampaikan terima kasih.



Tembusan :

1. Dekan "sebagai laporan"
2. Ketua Program Studi Ilmu Keperawatan
3. Kabag. TU.



Lampiran 5 : Lembar Surat Izin Penelitian



KEMENTERIAN PENDIDIKAN, KEBUDAYAAN,
RISET DAN TEKNOLOGI
UNIVERSITAS HASANUDDIN
FAKULTAS KEPERAWATAN
Jl. Perintis Kemerdekaan Km. 10 Makassar 90245
Laman : keperawatan@unhas.ac.id

No. : 1776/UN4.18.1/PT.01.04/2022

1 April 2022

Lamp. :

H a l : **Permintaan Izin Penelitian**

Yth. Gubernur Provinsi Sulawesi Selatan
C.q. Kepala Dinas Penanaman Modal dan PTSP
Provinsi Sulawesi Selatan

MAKASSAR

Dengan hormat disampaikan bahwa dalam rangka penyelesaian studi Mahasiswa Program Studi Ilmu Keperawatan, Fakultas Keperawatan Universitas Hasanuddin, maka dengan ini kami mohon agar mahasiswa tersebut namanya di bawah ini :

Nama : **A. Sri Mulyani**
NIM : R011181012
Program Studi : Ilmu Keperawatan
Rencana Judul : Gambaran Reaksi Kejadian Ikutan Pasca Imunisasi (KIPI) pada Remaja yang telah Menerima Vaksinasi COVID-19 di Kota Makassar.

Dapat diberikan izin melakukan penelitian di Dinas Pendidikan Provinsi Sulawesi Selatan, yang akan dilaksanakan pada bulan **April s/d Juni 2022**. Adapun Metode pengambilan sampel/data dengan : **kuesioner via online (google form)**.

Besar harapan kami, permohonan izin ini dapat dipertimbangkan untuk diterima.

Demikian permohonan kami, atas perhatiannya disampaikan terima kasih.

a.n. Dekan,
Wakil Dekan Bidang Akademik, Riset
dan Inovasi

Syahrul, S.Kep, Ns, M.Kes., Ph.D.
NIP. 19820419 200604 1 002

Tembusan :

1. Dekan "sebagai laporan"
2. Ketua Program Studi Ilmu Keperawatan Fak. Keperawatan Unhas
3. Dinas Pendidikan Provinsi Sulawesi Selatan
4. Kepala Bagian Tata Usaha F-Kep-UH
5. Arsip



Syahrul, S.Kep, Ns, M.Kes., Ph.D.
NIP. 19820419 200604 1 002



Lampiran 6 : : Persetujuan Etik Penelitian



REKOMENDASI PERSETUJUAN ETIK

Nomor : 194/UN4.6.4.5.31/ PP36/ 2022

Tanggal: 25 April 2022

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

No Protokol	UH22040148	No Sponsor Protokol	
Peneliti Utama	A. Sri Mulyani	Sponsor	
Judul Peneliti	Gambaran Reaksi Kejadian Ikutan Pasca Imunisasi (KIP) pada Remaja yang telah Menerima Vaksinasi COVID-19 di Kota Makassar		
No Versi Protokol	2	Tanggal Versi	21 April 2022
No Versi PSP	2	Tanggal Versi	21 April 2022
Tempat Penelitian	Makassar		
Jenis Review	<input type="checkbox"/> Exempted <input checked="" type="checkbox"/> Expedited <input type="checkbox"/> Fullboard Tanggal	Masa Berlaku 25 April 2022 sampai 25 April 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 protokol yang disetujui (protocol deviation / violation)
- Mematuhi semua peraturan yang ditentukan

Lampiran 7 : Surat Izin Penelitian



12022193004407

PEMERINTAH PROVINSI SULAWESI SELATAN DINAS PENANAMAN MODAL DAN PELAYANAN TERPADU SATU PINTU BIDANG PENYELENGGARAAN PELAYANAN PERIZINAN

Nomor : 29328/S.01/PTSP/2022
Lampiran :
Perihal : Izin Penelitian

KepadaYth.
Kepala Dinas Pendidikan Prov. Sulsel

di-
Tempat

Berdasarkan surat Dekan Fak. Keperawatan UNHAS Makassar Nomor : 1776/UN4.18.1/PT.01.04/2022 tanggal 01 April 2022 perihal tersebut diatas, mahasiswa/peneliti dibawah ini:

Nama	: A. SRI MULYANI
Nomor Pokok	: R011181012
Program Studi	: Ilmu Keperawatan
Pekerjaan/Lembaga	: Mahasiswa(S1)
Alamat	: Jl. P. Kemerdekaan Km. 10, Makassar

Bermaksud untuk melakukan penelitian di daerah/kantor saudara dalam rangka penyusunan Skripsi, dengan judul :

" GAMBARAN REAKSI KEJADIAN IKUTAN PASCA IMUNISASI (KIP) PADA REMAJA YANG TELAH MENERIMA VAKSINASI COVID-19 DI KOTA MAKASSAR "

PELAYANAN TERPADU SATU PINTU
PTSP
Yang akan dilaksanakan dari : Tgl. 18 April s/d 18 Juni 2022

Sehubungan dengan hal tersebut diatas, pada prinsipnya kami **menyetujui** kegiatan dimaksud dengan ketentuan yang tertera di belakang surat izin penelitian.
Dokumen ini ditandatangi secara elektronik dan Surat ini dapat dibuktikan keasliannya dengan menggunakan **barcode**,
Demikian surat izin penelitian ini diberikan agar dipergunakan sebagaimana mestinya.

Diterbitkan di Makassar
Pada tanggal : 06 April 2022

A.n. GUBERNUR SULAWESI SELATAN
Plt. KEPALA DINAS PENANAMAN MODAL DAN PELAYANAN TERPADU
SATU PINTU PROVINSI SULAWESI SELATAN
Selaku Administrator Pelayanan Perizinan Terpadu

Dra. Hj. SUKARNIATY KONDOLELE, M.M.
Pangkat : Pembina Utama Madya
Nip : 19650606 199003 2 011

Tembusan Yth
1. Dekan Fak. Keperawatan UNHAS Makassar di Makassar,
2. Pertinggal.

SIMAP PTSP 06-04-2022



Jl.Bougenville No.5 Telp. (0411) 441077 Fax. (0411) 448936
Website : <http://simap.sulselprov.go.id> Email : ptsp@sulselprov.go.id
Makassar 90231



Lampiran 8 : Master Tabel Data Demografi Uji Validitas dan Reliabilitas

No. Responden	Usia	Jenis Kelamin	Jenis Vaksin
1	3	2	1
2	4	2	1
3	4	2	1
4	3	2	1
5	3	1	1
6	3	1	1
7	3	1	1
8	3	2	1
9	4	2	1
10	3	1	1
11	4	2	1
12	4	2	1
13	1	1	1
14	3	2	1
15	4	2	1
16	3	1	1
17	4	1	1
18	3	1	2
19	4	1	1
20	4	1	1
21	3	2	2
22	1	2	2
23	2	2	1
24	3	2	1
25	3	2	2
26	3	2	1
27	3	2	1
28	4	2	2
29	4	2	1
30	4	2	1

Keterangan :

Usia :

1 = 14 tahun

2 = 15 tahun

3 = 16 tahun

4 = 17 tahun

Jenis Kelamin :

1 = Laki-laki

2 = Perempuan

Jenis Vaksin :

1 = Coronavac

2 = Pfizer

Lampiran 5 : MASTER TABEL

No.	UMUR	JENIS KELAMIN	JENIS VAKSIN
1.	17	1	1
2.	17	2	1
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4.	15	2	1
5.	16	2	1
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13.	15	1	1
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27.	16	2	1
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117.	16	2	1
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124.	16	2	1
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217.	16	2	1
218.	16	2	1
219.	16	2	1
220.	16	2	1
221.	16	2	1
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227.	16	2	1
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245.	17	2	1
246.	17	2	1
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260.	16	1	1
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271.	17	1	1
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285.	17	1	1
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287.	16	2	1
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293.	17	2	1
294.	17	2	1
295.	17	1	1
296.	17	1	1
297.	17	1	1
298.	16	2	1
299.	17	2	1
300.	17	2	1
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302.	17	2	1
303.	16	2	1
304.	16	2	1
305.	17	2	1
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307.	17	2	1
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314.	16	2	1
315.	16	2	1
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317.	16	2	1
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322.	16	2	1
323.	16	1	1
324.	15	1	1
325.	16	1	1
326.	16	1	1
327.	15	1	1
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329.	15	2	1
330.	15	2	1
331.	15	1	1
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334.	16	2	2
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339.	16	1	1
340.	15	1	1

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342.	16	2	1
343.	16	2	1
344.	16	2	1
345.	15	2	1
346.	15	1	1
347.	16	2	1
348.	16	2	1
349.	16	2	1
350.	16	2	1
351.	15	2	1
352.	17	1	2
353.	15	1	1
354.	15	2	1

Karakteristik Responden :

Keterangan :

- Jenis Kelamin :
 - 1 = Laki-laki
 - 2 = Perempuan
- Jenis vaksin yang diterima :
 - 1 = Coronavac (Sinovac)
 - 2 = Pfizer-BionTech

Reaksi KIPI Dosis I

KIPI 1	KIPI 2	KIPI 3	KIPI 4	KIPI 5	KIPI 6	KIPI 7	KIPI 8	KIPI 9	KIPI 10	KIPI 11	KIPI 12	KIPI 13	KIPI 14	KIPI 15
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Keterangan :

- KIPI 1 (Nyeri pada lokasi suntikan)
- KIPI 2 (Kemerahan di lokasi suntikan)
- KIPI 3 (Bengkak di lokasi suntikan)
- KIPI 4 (Demam)
- KIPI 5 (Sakit Kepala)
- KIPI 6 (Pusing)
- KIPI 7 (Mual/Muntah)
- KIPI 8 (Nyeri otot)
- KIPI 9 (Kelelahan)
- KIPI 10 (Menggigil)
- KIPI 11 (Mengantuk)
- KIPI 12 (Perubahan nafsu makan)
- KIPI 13 (Kesulitan Bernafas)
- KIPI 14 (Nyeri dada)
- KIPI 15 (Tidak ada)

Keterangan Koding :

0 = Tidak

1 = Ya

Reaksi KIPI dosis 2

KIPI 1	KIPI 2	KIPI 3	KIPI 4	KIPI 5	KIPI 6	KIPI 7	KIPI 8	KIPI 9	KIPI 10	KIPI 11	KIPI 12	KIPI 13	KIPI 14	KIPI 15
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0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Keterangan :

- KIPI 1 (Nyeri pada lokasi suntikan)
- KIPI 2 (Kemerahan di lokasi suntikan)
- KIPI 3 (Bengkak di lokasi suntikan)
- KIPI 4 (Demam)
- KIPI 5 (Sakit Kepala)
- KIPI 6 (Pusing)
- KIPI 7 (Mual/Muntah)
- KIPI 8 (Nyeri otot)
- KIPI 9 (Kelelahan)
- KIPI 10 (Menggigil)
- KIPI 11 (Mengantuk)
- KIPI 12 (Perubahan nafsu makan)
- KIPI 13 (Kesulitan Bernafas)
- KIPI 14 (Nyeri dada)
- KIPI 15 (Tidak ada)

Keterangan Koding :

0 = Tidak

1 = Ya

**Lama Gejala atau Jangka Waktu Reaksi KIPI dan Kemampuan
Beraktifitas sehari-hari saat Mengalami KIPI**

Jangka Waktu KIPI 1	Jangka Waktu KIPI 2	Kemampuan Beraktifitas (KIPI dosis 1)	Kemampuan Beraktifitas (KIPI dosis 2)
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1	1	1	1
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3	3	2	2
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2	2	2	2
2	3	2	2
2	2	2	2
3	1	2	1
2	2	3	2
1	1	1	1
1	1	1	1

Keterangan Jangka Waktu Reaksi KIPI:

1 = Tidak mengalami KIPI

2 = <24 jam

3 = 24-72 jam

4 = >72 jam

Keterangan Kemampuan Beraktifitas sehari-hari saat mengalami KIPI :

1 = Tidak

2 = Ya

Tindakan yang dilakukan Saat Mengalami Reaksi KIPI

Tindakan yang dilakukan saat KIPI dosis 1	Tindakan yang dilakukan saat KIPI dosis 2	KIPI lainnya
1	6	1
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2	1	1
1	1	1
1	1	1
2	2	1
3	2	1
6	1	1
4	2	1
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1	1	1

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2	2	1
1	2	1
2	1	1
2	3	1
1	2	1
3	1	1
3	1	1
2	2	1
2	3	1
3	1	1
2	3	1
1	1	1
1	1	1

Keterangan Tindakan yang dilakukan saat mengalami Reaksi KIPI :

- 1 = Tidak mengalami KIPI
- 2 = Istirahat, tidur dan mengurangi aktifitas
- 3 = Mengonsumsi obat atau minuman lain untuk mengurangi gejala
- 4 = Mengompres area suntikan
- 5 = Ke Pelayanan Kesehatan
- 6 = Mandi setelah vaksin

Keterangan Reaksi KIPI lainnya :

- 1 = Tidak ada
- 2 = Pingsan
- 3 = Tangan terasa lemah
- 4 = Perut terasa panas
- 5 = Tangan kram
- 6 = Linglung

Lampiran 9 (Gambaran Reaksi KIPI)

Reaksi KIPI lokal dosis 1 (n = 201)

Reaksi KIPI Lokal	n	%	<i>Percent of cases (%)</i>
Nyeri Pada Lokasi Suntikan	197	82,1	98,0
Kemerahan di lokasi suntikan	17	7,1	8,5
Bengkak di lokasi suntikan	26	10,8	12,9
Total	240	100,0	119,4

Reaksi KIPI lokal dosis 2 (n = 170)

Reaksi KIPI Lokal	n	%	<i>Percent of cases (%)</i>
Nyeri Pada Lokasi Suntikan	162	77,9	95,3
Kemerahan di lokasi suntikan	17	8,2	10,0
Bengkak di lokasi suntikan	29	13,9	17,1
Total	208	100,0	122,4

Reaksi KIPI lokal di kedua dosis/tidak :

Reaksi KIPI Lokal	Pada Kedua Dosis	Tidak pada Kedua Dosis
Nyeri Pada Lokasi Suntikan	128 (36,2%)	226 (63,8%)
Kemerahan di lokasi suntikan	7 (2%)	347 (98,0%)
Bengkak di lokasi suntikan	10 (2,8%)	344 (97,2%)

Reaksi KIPI Sistemik dosis 1 (n = 231)

Reaksi KIPI Lokal	n	%	<i>Percent of cases (%)</i>
Demam	37	8,6	16,0
Sakit Kepala	43	10,0	18,6
Pusing	41	9,5	17,7
Mual/Muntah	4	0,9	1,7
Nyeri Otot	75	17,4	32,5
Kelelahan	115	26,6	49,8
Menggigil	6	1,4	2,6
Mengantuk	59	13,7	25,5
Perubahan Nafsu Makan	52	12,0	22,5

Reaksi KIPI Sistemik dosis 2 (n = 183)

Reaksi KIPI Lokal	n	%	<i>Percent of cases (%)</i>
Demam	26	7,2	14,2
Sakit Kepala	33	9,2	18,0
Pusing	40	11,1	21,9
Mual/Muntah	5	1,4	2,7
Nyeri Otot	55	15,3	23,4
Kelelahan	84	23,4	45,9
Menggigil	6	1,7	3,3
Mengantuk	69	19,2	37,7
Perubahan Nafsu Makan	41	11,4	22,4

Reaksi Sistemik di kedua dosis/tidak : (N = 354)

Reaksi KIPI Lokal	Pada Kedua Dosis	Tidak pada Kedua Dosis
Demam	17 (4,8%)	337 (95,2%)
Sakit Kepala	19 (5,4%)	335 (94,6%)
Pusing	21 (5,9%)	333 (94,1%)
Mual/Muntah	2 (0,6%)	352 (99,4%)
Nyeri otot	38 (10,7%)	316 (89,3%)
Kelelahan	57 (16,1%)	297 (83,9%)
Menggigil	1 (0,3%)	353 (99,7%)
Mengantuk	23 (6,5%)	331 (93,5%)
Perubahan nafsu makan	23 (6,5%)	331 (93,5%)

Lampiran 10 : Hasil Analisa Kuantitatif

A. Frekuensi Karakteristik Responden

Frequencies

Statistics			
	Usia	Jenis Kelamin	Jenis Vaksin
N	Valid	354	354
	Missing	0	0

Frequency Table

Usia				
	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	15 Tahun	54	15.3	15.3
	16 Tahun	141	39.8	55.1
	17 Tahun	159	44.9	100.0
	Total	354	100.0	100.0

Jenis Kelamin

Jenis Kelamin				
	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Laki-laki	134	37.9	37.9
	Perempuan	220	62.1	62.1
	Total	354	100.0	100.0

Jenis Vaksin

Jenis Vaksin				
	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Coronavac	348	98.3	98.3
	Pfizer	6	1.7	1.7
	Total	354	100.0	100.0

KIP1atauTidak

		Frequency	Percent	Cumulative Percent	
				Valid Percent	Cumulative Percent
Valid	Tidak Mengalami KIPI	65	18.4	18.4	18.4
	KIPI	289	81.6	81.6	100.0
	Total	354	100.0	100.0	

KIPI2atauTidak

		Frequency	Percent	Cumulative Percent	
				Valid Percent	Cumulative Percent
Valid	Tidak Mengalami KIPI	103	29.1	29.1	29.1
	KIPI	251	70.9	70.9	100.0
	Total	354	100.0	100.0	

Distribusi Reaksi KIPI

JENISKIPI1

		Frequency	Percent	Cumulative Percent	
				Valid Percent	Cumulative Percent
Valid	Reaksi Gabungan	145	50.2	50.2	50.2
	Reaksi Lokal	56	19.4	19.4	69.6
	Reaksi Sistemik	88	30.4	30.4	100.0
	Total	289	100.0	100.0	

JENISKIPI2

		Frequency	Percent	Cumulative Percent	
				Valid Percent	Cumulative Percent
Valid	Reaksi Gabungan	103	41.0	41.0	41.0
	Reaksi Lokal	68	27.1	27.1	68.1
	Reaksi Sistemik	80	31.9	31.9	100.0
	Total	251	100.0	100.0	

USIA * JENISKIPI1 Crosstabulation

Count

		JENISKIPI1			
		Reaksi Gabungan	Reaksi Lokal	Reaksi Sistemik	Total
USIA	15 TAHUN	25	10	9	44
	16 TAHUN	60	20	40	120
	17 TAHUN	60	26	39	125
	Total	145	56	88	289

USIA * JENISKIPI2 Crosstabulation

Count

		JENISKIPI2			
		Reaksi Gabungan	Reaksi Lokal	Reaksi Sistemik	Total
USIA	15 TAHUN	13	12	10	35
	16 TAHUN	40	26	37	103
	17 TAHUN	50	30	33	113
	Total	103	68	80	251

JENISKELAMIN * JENISKIPI1 Crosstabulation

Count

		JENISKIPI1			
		Reaksi Gabungan	Reaksi Lokal	Reaksi Sistemik	Total
JENISKELAMIN	LAKI-LAKI	52	23	31	106
	PEREMPUAN	93	33	57	183
	Total	145	56	88	289

JENISKELAMIN * JENISKIPI2 Crosstabulation

Count

		JENISKIPI2			
		Reaksi Gabungan	Reaksi Lokal	Reaksi Sistemik	Total
JENISKELAMIN	LAKI-LAKI	26	33	29	88
	PEREMPUAN	77	35	51	163
	Total	103	68	80	251

JENISVAKSIN * JENISKIPI1 Crosstabulation

Count

		JENISKIPI1			Total
		Reaksi Gabungan	Reaksi Lokal	Reaksi Sistemik	
JENISVAKSIN	Coronavac	143	54	86	283
	Pfizer	2	2	2	6
	Total	145	56	88	289

JENISVAKSIN * JENISKIPI2 Crosstabulation

Count

		JENISKIPI2			Total
		Reaksi Gabungan	Reaksi Lokal	Reaksi Sistemik	
JENISVAKSIN	Coronavac	102	67	76	245
	Pfizer	1	1	4	6
	Total	103	68	80	251

Frekuensi Reaksi KIPI Lokal Dosis 2

\$Reaksi_Lokal_Dosis_2 Frequencies

		Responses		
		N	Percent	Percent of Cases
\$Reaksi_Lokal_Dosis_2 ^a	Nyeridosis2	162	77.9%	95.3%
	Kemerahandosis2	17	8.2%	10.0%
	Bengkakdosis2	29	13.9%	17.1%
Total		208	100.0%	122.4%

Multiple Response

Case Summary

		Cases					
		Valid		Missing			
		N	Percent	N	Percent		
\$Reaksi_Sistemik_Dosis_1 ^a		231	100.0%	0	0.0%	231	100.0%

a. Dichotomy group tabulated at value 1.

Frekuensi Reaksi KIPI Sistemik Dosis 1

\$Reaksi_Sistemik_Dosis_1 Frequencies

		Responses		
		N	Percent	Percent of Cases
\$Reaksi_Sistemik_Dosis_1 ^a	Demam	37	8.6%	16.0%
	Sakitkepala	43	10.0%	18.6%
	Pusing	41	9.5%	17.7%
	Mualmuntah	4	0.9%	1.7%
	Nyeriotot	75	17.4%	32.5%
	Kelelahan	115	26.6%	49.8%
	menggigil	6	1.4%	2.6%
	mengantuk	59	13.7%	25.5%
	Perubahannafsumakan	52	12.0%	22.5%
Total		432	100.0%	187.0%

a. Dichotomy group tabulated at value 1.

Multiple Response

Case Summary

		Cases		Total			
		Valid N	Percent	Missing N	Percent	N	Percent
\$Reaksi_Sistemik_Dosis_2 ^a		183	100.0%	0	0.0%	183	100.0%

a. Dichotomy group tabulated at value 1.

Frekuensi Reaksi KIPI Sistemik Dosis 2

\$Reaksi_Sistemik_Dosis_2 Frequencies

		Responses		
		N	Percent	Percent of Cases
\$Reaksi_Sistemik_Dosis_2 ^a	Demam	26	7.2%	14.2%
	SakitKepala	33	9.2%	18.0%
	Pusing	40	11.1%	21.9%
	Mualmuntah	5	1.4%	2.7%
	Nyeriotot	55	15.3%	30.1%

Kelelahan	84	23.4%	45.9%
Mengigil	6	1.7%	3.3%
Mengantuk	69	19.2%	37.7%
Perubahannafsumakan	41	11.4%	22.4%
Total	359	100.0%	196.2%

a. Dichotomy group tabulated at value 1.

Multiple Response

Case Summary

	Valid		Cases		Total	
	N	Percent	N	Percent	N	Percent
\$Reaksi_Berat_Dosis_1 ^a	1	100.0%	0	0.0%	1	100.0%

a. Dichotomy group tabulated at value 1.

Frekuensi Reaksi KIPI Berat Dosis 1

\$Reaksi_Berat_Dosis_1 Frequencies

	Responses			
	N	Percent	Percent of Cases	
\$Reaksi_Berat_Dosis_1 ^a	Kesulitannafas	1	50.0%	100.0%
	Nyeridada	1	50.0%	100.0%
Total		2	100.0%	200.0%

a. Dichotomy group tabulated at value 1.

Multiple Response

Case Summary

	Valid		Cases		Total	
	N	Percent	N	Percent	N	Percent
\$Reaksi_Berat_Dosis_2 ^a	2	100.0%	0	0.0%	2	100.0%

a. Dichotomy group tabulated at value 1.

Frekuensi Reaksi KIPI Berat Dosis 2

\$Reaksi_Berat_Dosis_2 Frequencies

		Responses		
		N	Percent	Percent of Cases
\$Reaksi_Berat_Dosis_2 ^a	Kesulitannafas	2	66.7%	100.0%
	Nyeridada	1	33.3%	50.0%
Total		3	100.0%	150.0%

a. Dichotomy group tabulated at value 1.

Jangka Waktu Reaksi KIPI dosis 2

JangkaWaktuKIPI1

		Frequency	Percent	Valid Percent	Cumulative
					Percent
Valid	Tidak Mengalami KIPI	65	18.4	18.4	18.4
	<24 Jam	206	58.2	58.2	76.6
	24-72 jam	77	21.8	21.8	98.3
	>72 jam	6	1.7	1.7	100.0
	Total	354	100.0	100.0	

Jangka Waktu Reaksi KIPI dosis 2

JangkaWaktuKIPI2

		Frequency	Percent	Valid Percent	Cumulative
					Percent
Valid	Tidak Mengalami KIPI	103	29.1	29.1	29.1
	<24 Jam	197	55.6	55.6	84.7
	24-72 jam	51	14.4	14.4	99.2
	>72 jam	3	.8	.8	100.0
	Total	354	100.0	100.0	

Kemampuan Melakukan Aktiftas Saat KIPI Dosis 2

AktifitasKIP1

		Frequency	Percent	Valid Percent	Cumulative
					Percent
Valid	Tidak Mengalami KIPI	65	18.4	18.4	18.4
	Ya	249	70.3	70.3	88.7
	Tidak	40	11.3	11.3	100.0
	Total	354	100.0	100.0	

Kemampuan Melakukan Aktiftas Saat KIPI Dosis 2

AktifitasKIP1

		Frequency	Percent	Valid Percent	Cumulative
					Percent
Valid	Tidak KIPI	103	29.1	29.1	29.1
	Ya	229	64.7	64.7	93.8
	Tidak	22	6.2	6.2	100.0
	Total	354	100.0	100.0	

Tindakan Saat Mengalami Reaksi KIPI dosis 2

TindakanyangdilakukanKIP1

		Frequency	Percent	Valid Percent	Cumulative
					Percent
Valid	Tidak ada	127	35.9	35.9	35.9
	Istirahat/Mengurangi Aktifitas	178	50.3	50.3	86.2
	Mengonsumsi Obat, vitamin atau minuman lain untuk mengurangi gejala KIPI	45	12.7	12.7	98.9
	Kompres area suntikan	2	.6	.6	99.4
	Ke Pelayanan Kesehatan	1	.3	.3	99.7
	Mandi setelah vaksin	1	.3	.3	100.0
	Total	354	100.0	100.0	

Tindakan Saat Mengalami Reaksi KIPI dosis 2

TindakanKIPI2

		Frequency	Percent	Cumulative Percent	
				Valid Percent	Cumulative Percent
Valid	Tidak ada	150	42.4	42.4	42.4
	Istirahat/Mengurangi Aktifitas	175	49.4	49.4	91.8
	Mengonsumsi Obat, vitamin atau minuman lain untuk mengurangi gejala KIPI	27	7.6	7.6	99.4
	Ke Pelayanan Kesehatan	1	.3	.3	99.7
	Mandi setelah Vaksin	1	.3	.3	100.0
	Total	354	100.0	100.0	

Reaksi KIPI Lainnya

KIPILainnya

		Frequency	Percent	Cumulative Percent	
				Valid Percent	Cumulative Percent
Valid	Tidak ada	347	98.0	98.0	98.0
	Pingsan	3	.8	.8	98.9
	Tangan terasa lemah	1	.3	.3	99.2
	Perut terasa panas	1	.3	.3	99.4
	Tangan Kram	1	.3	.3	99.7
	Linglung	1	.3	.3	100.0
Total		354	100.0	100.0	