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Lampiran 1 : INSTRUMEN PANSS

THE POSITIVE AND NEGATIVE SYNDROME SCALE (PANSS)

Nama :

Umur :

Gejala Positif (P)

| Gejala | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-----------------------------|---|---|---|---|---|---|---|
| P1. Waham | | | | | | | |
| P2. Kekacauan proses pikir | | | | | | | |
| P3. Halusinasi | | | | | | | |
| P4. Gaduh gelisah | | | | | | | |
| P5. Waham kebesaran | | | | | | | |
| P6. Kecurigaan atau kejaran | | | | | | | |
| P7. Permusuhan | | | | | | | |

Gejala Negatif (N)

| Gejala | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-------------------------------------|---|---|---|---|---|---|---|
| N1. Afek tumpul | | | | | | | |
| N2. Penarikan emosi | | | | | | | |
| N3. Kemiskinan <i>rappor</i> | | | | | | | |
| N4. Penarikan diri | | | | | | | |
| N5. Pemikiran abstrak | | | | | | | |
| N6. Spontanitas dan arus percakapan | | | | | | | |
| N7. Pemikiran stereotipik | | | | | | | |

Skala Psikopatologi Umum (G)

| Gejala | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---------------------------------------|---|---|---|---|---|---|---|
| G1. Kekhawatiran somatik | | | | | | | |
| G2. Anxietas | | | | | | | |
| G3. Rasa bersalah | | | | | | | |
| G4. Ketegangan | | | | | | | |
| G5. Manerisme dan sikap tubuh | | | | | | | |
| G6. Depresi | | | | | | | |
| G7. Retardasi motorik | | | | | | | |
| G8. Ketidakkooperatifan | | | | | | | |
| G9. Isi pikiran yang tidak biasa | | | | | | | |
| G10. Disorientasi | | | | | | | |
| G11. Perhatian buruk | | | | | | | |
| G12. Kurangnya daya nilai dan tilikan | | | | | | | |
| G13. Gangguan dorongan kehendak | | | | | | | |
| G14. Pengendalian impuls yg buruk | | | | | | | |
| G15. Preokupasi | | | | | | | |
| G16. Penghindaran sosial secara aktif | | | | | | | |

Keterangan :

| | |
|-----------|--|
| Nilai 1 : | Tidak ada gejala |
| Nilai 2 : | Gejala minimal, gejalanya masih diragukan keberadaannya, atau masih cenderung tampak normal. |
| Nilai 3 : | Gejala ringan, keberadaan gejala yang jelas, tetapi tidak terlalu berpengaruh pada fungsi keseharian. |
| Nilai 4 : | Gejala sedang, adanya gejala yang menimbulkan masalah serius sehingga kadang-kadang cukup mengganggu aktivitas keseharian. |
| Nilai 5 : | Gejala agak berat, manifestasi gejala bermakna yang mempengaruhi fungsi seseorang, tetapi tidak keseluruhan hidup, dan masih dapat diatasi. |
| Nilai 6 : | Gejala berat, psikopatologi yang berat dan frekuensinya sering, sangat mengganggu kehidupan seseorang dan selalu membutuhkan pengawasan langsung. |
| Nilai 7 : | Gejala sangat berat, merujuk pada psikopatologi dengan level serius sangat mempengaruhi hampir seluruh fungsi kehidupan sehingga membutuhkan pengawasan ketat. |

Perhitungan Persentase Perbaikan PANSS (Leuch, 2005):

Rumus:

$$100\% ((\text{PANSS pekan akhir-30}) / (\text{PANSS pekan awal-30})) \times 100 \%$$

Interpretasi:

1. Minimal : 19-28 %
2. Sedang : 29-39 %
3. Banyak : 40-53%
4. Sangat Banyak : > 53%

Lampiran 2 : REKOMENDASI PERTETUJUAN ETIK UNHAS

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 : 64/UN4.6.4.5.31/ PP36/ 2023

Tanggal: 26 Januari 2023

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

| | | | |
|---------------------------------------|--|---|---------------------------|
| No Protokol | UH23010001 | No Sponsor Protokol | |
| Peneliti Utama | dr. LUTFI JAUHARI | Sponsor | |
| Judul Peneliti | PENGARUH PEMBERIAN ADJUVANT TERAPI ASPIRIN (Acetylsalicylic acid) TERHADAP PERBAIKAN GEJALA KLINIS & NILAI TNF-a PADA PASIEN SKIZOFRENIA | | |
| No Versi Protokol | 2 | Tanggal Versi | 24 Januari 2023 |
| No Versi PSP | 2 | Tanggal Versi | 24 Januari 2023 |
| Tempat Penelitian | RS Universitas Hasanuddin dan RS Jejaring Makassar | | |
| Jenis Review | <input type="checkbox"/> Exempted <input type="checkbox"/> Expedited <input checked="" type="checkbox"/> Fullboard Tanggal 19 Januari 2023 | Masa Berlaku 26 Januari 2023 sampai 26 Januari 2024 | 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 3 : REKOMENDASI PERSETUJUAN ETIK RSKD DADI



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

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

Nomor : **2878/S.01/PTSP/2022** Kepada Yth.
Lampiran : - Direktur Rumah Sakit Khusus Daerah
Perihal : **Izin penelitian** Prov. Sulsel

di-
Tempat

Berdasarkan surat Ketua Prog. Studi Ilmu Kedokteran Jiwa Fak. Kedokteran UNHAS Makassar Nomor : 30558/UN4.6.8/PT.01.04/2022 tanggal 28 Desember 2022 perihal tersebut diatas, mahasiswa/peneliti dibawah ini:

Nama : DR. LUTFI JAUHARI
Nomor Pokok : C065191003
Program Studi : Ilmu Kedokteran Jiwa
Pekerjaan/Lembaga : Mahasiswa (S2)
Alamat : Jl. P. Kemerdekaan Km. 10 Makassar
PROVINSI SULAWESI SELATAN

Bermaksud untuk melakukan penelitian di daerah/kantor saudara dalam rangka menyusun Tesis, dengan judul :

" PENGARUH PEMBERIAN ADJUVANT TERAPI ASPIRIN (Acetylsalicylic acid) TERHADAP PERBAIKAN GEJALA KLINIS & NILAI TNF-? PADA PASIEN SKIZOFRENIA "

Yang akan dilaksanakan dari : Tgl. **01 Januari s/d 28 Februari 2023**

Sehubungan dengan hal tersebut diatas, pada prinsipnya kami **menyetujui** kegiatan dimaksud dengan ketentuan yang tertera di belakang surat izin penelitian.

Demikian Surat Keterangan ini diberikan agar dipergunakan sebagaimana mestinya.

Diterbitkan di Makassar
Pada Tanggal 29 Desember 2022

A.n. GUBERNUR SULAWESI SELATAN
KEPALA DINAS PENANAMAN MODAL DAN PELAYANAN TERPADU
SATU PINTU PROVINSI SULAWESI SELATAN



Ir. H. SULKAF S LATIEF, M.M.
Pangkat : PEMBINA UTAMA MADYA
Nip : 19630424 198903 1 010

Tembusan Yth

1. Ketua Prog. Studi Ilmu Kedokteran Jiwa Fak. Kedokteran UNHAS Makassar;
2. Pertinggal.

Lampiran 4 : REKOMENDASI PERSETUJUAN ETIK RS UNHAS

| | | |
|--|---|--|
| RUMAH SAKIT UNHAS FORMULIR 2 PENDIDIKAN DAN PENELITIAN | SURAT IZIN PENELITIAN Nomor: 1702/UN4.24.1.1/PT.01.04/2023 Tanggal 13 Februari 2023 | |
| | Kepada Yth Kepala Ruang Laboratorium Penelitian | |
| <p>Dengan hormat,</p> <p>Dengan ini menerangkan bahwa peneliti/ mahasiswa berikut ini:</p> <p>Nama : dr. Lutfi Jauhari NIM / NIP : C065191003 Institusi : Ilmu Kedokteran Jiwa, Fakultas Kedokteran, Universitas Hasanuddin, Makassar Kode penelitian : 230213_5</p> <p>Akan melakukan pengambilan data/ analisa bahan hayati:</p> <p>Terhitung : 14 Februari 2023 s/d 14 Mei 2023 Jumlah Subjek/Sample : 46 Jenis Data : Data Primer: Elisa</p> <p>Untuk penelitian dengan judul:</p> <p>"PENGARUH PEMBERIAN ADJUVANT TERAPI ASPIRIN (Acetylsalicylic acid) TERHADAP PERBAIKAN GEJALA KLINIS & NILAI TNF-? PADA PASIEN SKIZOFRENIA"</p> <p>Harap dilakukan pembimbingan dan pendampingan seperlunya.</p> <p>Manajer Pendidikan dan Penelitian,</p> <p> dr. Aslim Taslim, Sp.Onc.Rad, M.Kes NIP. 198304252012121003</p> <p><i>Catatan: Lembaran ini diarsipkan oleh Bidang Penelitian dan Inovasi</i></p> | | |

Lampiran 5 : DOKUMENTASI PENELITIAN

