

DAFTAR PUSTAKA

- Bell, L. C. K., & Noursadeghi, M. (2018). Pathogenesis of HIV-1 and mycobacterium tuberculosis co-infection. *Nature Reviews Microbiology*. <https://doi.org/10.1038/nrmicro.2017.128>
- Cantaert, T., Baeten, D., Tak, P. P., & Baarsen, L. G. van. (2010). Type I IFN and TNF α cross-regulation in immune-mediated inflammatory disease: basic concepts and clinical relevance. *Arthritis Research & Therapy*. <https://doi.org/10.1186/ar3150>
- CDC. (2016). *chapter2 TRANSMISION. Transmission and Pathogenesis of Tuberculosis*.
- Creswell, J., Raviglione, M., Ottmani, S., Migliori, G. B., Uplekar, M., Blanc, L., ... Lönnroth, K. (2011). Series: "Update on tuberculosis" - Tuberculosis and noncommunicable diseases: Neglected links and missed opportunities. *European Respiratory Journal*. <https://doi.org/10.1183/09031936.00084310>
- de Noronha, A. L. L., Báfica, A., Nogueira, L., Barral, A., & Barral-Netto, M. (2008). Lung granulomas from Mycobacterium tuberculosis/HIV-1 co-infected patients display decreased in situ TNF production. *Pathology Research and Practice*. <https://doi.org/10.1016/j.prp.2007.10.008>
- Diedrich, C. R., O'Hern, J., Gutierrez, M. G., Allie, N., Papier, P., Meintjes, G., ... Wilkinson, R. J. (2016). Relationship between HIV Coinfection, Interleukin 10 Production, and Mycobacterium tuberculosis in Human Lymph Node Granulomas. *Journal of Infectious Diseases*. <https://doi.org/10.1093/infdis/jiw313>
- Dinas Kesehatan Jatim. (2015). InfoDatin: Tuberkulosis. *Pusat Data Dan Inforasi Kementerian Kesehatan RI*. <https://doi.org/24442-7659>
- El-kalashy, M., Abd el-Atty, H.-S., MohamadBakr, R., El-Helbawy, R., & Fathyabbass, H. (2014). The value of serum lipoarabinomannan in the diagnosis of pulmonary tuberculosis. *Menoufia Medical Journal*, 27(4), 733. <https://doi.org/10.4103/1110-2098.149720>
- Elliott, A. M., Namaambo, K., Allen, B. W., Luo, N., Hayes, R. J., Pobee, J. O. M., & McAdam, K. P. W. J. (1993). Negative sputum smear results in HIV-positive patients with pulmonary tuberculosis in Lusaka, Zambia. *Tubercle and Lung Disease*. [https://doi.org/10.1016/0962-8479\(93\)90010-U](https://doi.org/10.1016/0962-8479(93)90010-U)

... V., Ranjbar, S., Jasenosky, L. D., & Goldfeld, A. E. Arc of a sinus circle: Pathways activated by Mycobacterium tuberculosis that let the HIV-1 long terminal repeat, *American Journal of Respiratory and Molecular Biology* (2011). <https://doi.org/10.1165/rcmb.2011-6TR>



- Feldman, C., Polverino, E., Ramirez, J. a, Feldman, C., & Polverino, E. (n.d.). *Pulmonary Complications of HIV*. (L. K. Bush Andrew , Calverley Peter, Kolb Martin, Ed.). Norwich, UK: Page Bros Ltd. Retrieved from https://web.telegram.org/#/im?p=c1013866696_9674288120622011209
- García-Basteiro, A. L., DiNardo, A., Saavedra, B., Silva, D. R., Palmero, D., Gegia, M., ... Theron, G. (2018). Point of care diagnostics for tuberculosis. *Revista Portuguesa de Pneumologia (English Edition)*, 24(2), 73–85. <https://doi.org/10.1016/j.rppnen.2017.12.002>
- Getahun, H., Gunneberg, C., Granich, R., & Nunn, P. (2010). HIV Infection–Associated Tuberculosis: The Epidemiology and the Response. *Clinical Infectious Diseases*, 50(s3), S201–S207. <https://doi.org/10.1086/651492>
- Global Tuberculosis*. (2017). <https://doi.org/10.1001/jama.2014.11450>
- Guarda, G., Braun, M., Staehli, F., Tardivel, A., Mattmann, C., Förster, I., ... Tschopp, J. (2011). Type I Interferon Inhibits Interleukin-1 Production and Inflammasome Activation. *Immunity*. <https://doi.org/10.1016/j.immuni.2011.02.006>
- Hamasur, B., Bruchfeld, J., Haile, M., Pawlowski, A., Bjorvatn, B., Källenius, G., & Svenson, S. B. (2001). Rapid diagnosis of tuberculosis by detection of mycobacterial lipoarabinomannan in urine. *Journal of Microbiological Methods*. [https://doi.org/10.1016/S0167-7012\(01\)00239-1](https://doi.org/10.1016/S0167-7012(01)00239-1)
- Harding, C. V., & Boom, W. H. (2010). Regulation of antigen presentation by Mycobacterium tuberculosis: A role for Toll-like receptors. *Nature Reviews Microbiology*. <https://doi.org/10.1038/nrmicro2321>
- Havlir, D. V., Getahun, H., Sanne, I., & Havlir, D. V. (2008). Opportunities and Challenges for HIV Care. <https://doi.org/10.1001/jama.300.4.423>
- Human-LipoarabinomannanLAMELISA-Kit-4800-1. (n.d.).
- Irianti, Kuswandi, Yasin, N. M., & Kusumaningtyas, R. A. (2016). Anti-tuberculosis, 225.
- Kemenkes RI. (2015). Rencana Aksi Nasional Kolaborasi TB-HIV 2015-2019.
- Kementerian Kesehatan Republik Indonesia. (2014). Pedoman pengobatan antiretroviral. *Peraturan Menteri Kesehatan Republik Indonesia, Nomor 87 Tahun 2014*, 1–121. <https://doi.org/10.1017/CBO9781107415324.004>
- Kleinnijenhuis, J., Oosting, M., Joosten, L. a B., Netea, M. G., & Van Crevel, R. (2011). Innate immune recognition of Mycobacterium tuberculosis. *Clinical & Developmental Immunology*. <https://doi.org/10.1155/2011/405310>
- ..., & Ernst, J. D. (2011). HIV and tuberculosis: A deadly human pandemic. *Clinical Microbiology Reviews*, 24(2), 351–376. <https://doi.org/10.1128/CMR.00042-10>
- E. A., Ribeiro-Lima, J., Waters, W. R., Thacker, T., & Sreevatsan,



- S. (2014). Mannosylated lipoarabinomannan in serum as a biomarker candidate for subclinical bovine tuberculosis. *BMC Research Notes*. <https://doi.org/10.1186/1756-0500-7-559>
- Laurentius, L. B., Crawford, A. C., Mulvihill, T. S., Granger, J. H., Robinson, R., Spencer, J. S., ... Porter, M. D. (2017). Importance of specimen pretreatment for the low-level detection of mycobacterial lipoarabinomannan in human serum. *Analyst*, *142*(1), 177–185. <https://doi.org/10.1039/c6an02109c>
- Lawn, S. D., Dheda, K., Kerkhoff, A. D., Peter, J. G., Dorman, S., Boehme, C. C., & Nicol, M. P. (2013). Determine TB-LAM lateral flow urine antigen assay for HIV-associated tuberculosis: Recommendations on the design and reporting of clinical studies. *BMC Infectious Diseases*. <https://doi.org/10.1186/1471-2334-13-407>
- Lawn, S. D., Kerkhoff, A. D., Burton, R., Schutz, C., Boule, A., Vogt, M., ... Meintjes, G. (2017). Diagnostic accuracy, incremental yield and prognostic value of Determine TB-LAM for routine diagnostic testing for tuberculosis in HIV-infected patients requiring acute hospital admission in South Africa: A prospective cohort. *BMC Medicine*. <https://doi.org/10.1186/s12916-017-0822-8>
- Lawn, S. D., Kerkhoff, A. D., Vogt, M., & Wood, R. (2012). Diagnostic accuracy of a low-cost, urine antigen, point-of-care screening assay for HIV-associated pulmonary tuberculosis before antiretroviral therapy: A descriptive study. *The Lancet Infectious Diseases*. [https://doi.org/10.1016/S1473-3099\(11\)70251-1](https://doi.org/10.1016/S1473-3099(11)70251-1)
- Leidl, L., Mayanja-Kizza, H., Sotgiu, G., Baseke, J., Ernst, M., Hirsch, C., ... Lange, C. (2010). Relationship of immunodiagnostic assays for tuberculosis and numbers of circulating CD4+ T-cells in HIV infection. *European Respiratory Journal*. <https://doi.org/10.1183/09031936.00045509>
- Lubis, R. (n.d.). *Ko-Infeksi Hiv/Aids Dan Tb*.
- MacMicking, J. D. (2014). Cell-autonomous effector mechanisms against *Mycobacterium tuberculosis*. *Cold Spring Harbor Perspectives in Medicine*. <https://doi.org/10.1101/cshperspect.a018507>
- Mayer-Barber, K. D., & Yan, B. (2017). Clash of the Cytokine Titans: Counter-regulation of interleukin-1 and type I interferon-mediated inflammatory responses. *Cellular and Molecular Immunology*. <https://doi.org/10.1038/cmi.2016.25>
- McNerney, R., & Daley, P. (2011). Towards a point-of-care test for active tuberculosis: Obstacles and opportunities. *Nature Reviews Microbiology*. <https://doi.org/10.1038/nrmicro2521>
- Mukundan, H., Kumar, S., Price, D. N., Ray, S. M., Lee, Y. J., Min, S., ... Gnanon, B. I. (2012). Rapid detection of *Mycobacterium tuberculosis* markers in a sandwich immunoassay format using a waveguide-mediated optical biosensor. *Tuberculosis*, *92*(5), 407–416. <https://doi.org/10.1016/j.tube.2012.05.009>
- & Fitrika, Y. (2010). HUBUNGAN TUBERKULOSIS DENGAN



- HIV / AIDS Correlation between Tuberculosis with HIV / AIDS. *Idea Nursing Journal*, 2(2), 163–166.
- Nigou, J., Zelle-Rieser, C., Gilleron, M., Thurnher, M., & Puzo, G. (2001). Mannosylated Lipoarabinomannans Inhibit IL-12 Production by Human Dendritic Cells: Evidence for a Negative Signal Delivered Through the Mannose Receptor. *The Journal of Immunology*. <https://doi.org/10.4049/jimmunol.166.12.7477>
- Norbis, L., Alagna, R., Tortoli, E., Codecasa, L. R., Migliori, G. B., & Cirillo, D. M. (2014). Challenges and perspectives in the diagnosis of extrapulmonary tuberculosis. *Expert Review of Anti-Infective Therapy*. <https://doi.org/10.1586/14787210.2014.899900>
- Padmapriyadarsini, C., Narendran, G., & Swaminathan, S. (2011). Diagnosis & treatment of tuberculosis in HIV co-infected patients. *The Indian Journal of Medical Research*. <https://doi.org/10.4103/0971-5916.92630>
- PDPI. (2011). Pedoman Penatalaksanaan TB (Konsensus TB). *Perhimpunan Dokter Paru Indonesia*, 1–55. <https://doi.org/10.5860/CHOICE.41-4081>
- Perkins, M. D., & Cunningham, J. (2007). Facing the Crisis: Improving the Diagnosis of Tuberculosis in the HIV Era. *The Journal of Infectious Diseases*. <https://doi.org/10.1086/518656>
- Peter, J. G., Theron, G., Van Zyl-Smit, R., Haripersad, A., Mottay, L., Kraus, S., ... Dheda, K. (2012). Diagnostic accuracy of a urine lipoarabinomannan strip-test for TB detection in HIV-infected hospitalised patients. *European Respiratory Journal*. <https://doi.org/10.1183/09031936.00201711>
- Piccini, P., Chiappini, E., Tortoli, E., de Martino, M., & Galli, L. (2014). Clinical peculiarities of tuberculosis. *BMC Infectious Diseases*. <https://doi.org/10.1186/1471-2334-14-S1-S4>
- Reither, K., Saathoff, E., Jung, J., Minja, L. T., Kroidl, I., Saad, E., ... Hoelscher, M. (2009). Low sensitivity of a urine LAM-ELISA in the diagnosis of pulmonary tuberculosis. *BMC Infectious Diseases*. <https://doi.org/10.1186/1471-2334-9-141>
- Science, A. (n.d.). Urine lipoarabinomannan assays for paediatric tuberculosis, 2–4.
- Sester, M., Giehl, C., McNerney, R., Kampmann, B., Walzl, G., Cuchí, P., ... Meyerhans, A. (2010). Challenges and perspectives for improved management of HIV/Mycobacterium tuberculosis co-infection. *European Respiratory Journal*, 36(6), 1242–1247. <https://doi.org/10.1183/09031936.00040910>
- Shah, M., Variava, E., Holmes, C. B., Coppin, A., Golub, J. E., McCallum, ... Susan E. Dorman, MD,* and Neil A. Martinson, MBBCh, M. (2009). Diagnostic accuracy of a urine lipoarabinomannan test for tuberculosis in hospitalized patients in a high HIV prevalence setting. *Journal of Acquired Immune Deficiency Syndromes*, 52(2), 145–151. <https://doi.org/10.1097/QAI.0b013e3181b98430>



- Singh, S. K., Andersson, A. M., Ellegård, R., Lindestam Arlehamn, C. S., Sette, A., Larsson, M., ... Blomgran, R. (2016). HIV Interferes with Mycobacterium tuberculosis Antigen Presentation in Human Dendritic Cells. *American Journal of Pathology*. <https://doi.org/10.1016/j.ajpath.2016.08.003>
- Singhal, R., & Myneedu, V. P. (2015). Microscopy as a diagnostic tool in pulmonary tuberculosis. *International Journal of Mycobacteriology*. <https://doi.org/10.1016/j.ijmyco.2014.12.006>
- Sonnenberg, P., Glynn, J. R., Fielding, K., Murray, J., Godfrey-faussett, P., & Shearer, S. (2005). How Soon after Infection with HIV Does the Risk of Tuberculosis Start to Increase ? A Retrospective Cohort Study in South African Gold Miners, 191.
- Toossi, Z., Xia, L., Wu, M., & Salvekar, a. (1999). Transcriptional activation of HIV by Mycobacterium tuberculosis in human monocytes. *Clinical and Experimental Immunology*.
- Tucci, P., Gonz??lez-Sapienza, G., & Marin, M. (2014). Pathogen-derived biomarkers for active tuberculosis diagnosis. *Frontiers in Microbiology*. <https://doi.org/10.3389/fmicb.2014.00549>
- United States Environmental Protection Agency. (2015). *Policy & Guidance*. https://doi.org/978_92_4_150963_3
- Urdahl, K. B., Shafiani, S., & Ernst, J. D. (2011). Initiation and regulation of T-cell responses in tuberculosis. *Mucosal Immunology*. <https://doi.org/10.1038/mi.2011.10>
- Vermeire, J., Roesch, F., Sauter, D., Rua, R., Hotter, D., Van Nuffel, A., ... Verhasselt, B. (2016). HIV Triggers a cGAS-Dependent, Vpu- and Vpr-Regulated Type I Interferon Response in CD4+T Cells. *Cell Reports*. <https://doi.org/10.1016/j.celrep.2016.09.023>
- Walter, N. D., De Jong, B. C., Garcia, B. J., Dolganov, G. M., Worodria, W., Byanyima, P., ... Schoolnik, G. K. (2016). Adaptation of Mycobacterium tuberculosis to Impaired Host Immunity in HIV-Infected Patients. *Journal of Infectious Diseases*. <https://doi.org/10.1093/infdis/jiw364>
- Wang, S., Lifson, M. A., Inci, F., Liang, L. G., Sheng, Y. F., & Demirci, U. (2016). Advances in addressing technical challenges of point-of-care diagnostics in resource-limited settings. *Expert Review of Molecular Diagnostics*. <https://doi.org/10.1586/14737159.2016.1142877>
- Waruk, J. L. M., Machuki, Z., Mesa, C., Juno, J. A., Anzala, O., Sharma, M., ... Kiazzyk, S. (2015). Cytokine and chemokine expression profiles in response to Mycobacterium tuberculosis stimulation are altered in HIV-infected compared to HIV-uninfected subjects with active tuberculosis. *Tuberculosis*. <https://doi.org/10.1016/j.tube.2015.05.001>



LAMPIRAN

Lampiran 1. Persetujuan Etik



KEMENTERIAN RISET, TEKNOLOGI DAN PENDIDIKAN TINGGI
UNIVERSITAS HASANUDDIN
FAKULTAS KEDOKTERAN
RSPTN UNIVERSITAS HASANUDDIN
RSUP Dr. WAHIDIN SUDIROHUSODO MAKASSAR
KOMITE ETIK PENELITIAN KESEHATAN



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REKOMENDASI PERSETUJUAN ETIK

Nomor : 674 / H4.B.4.5.31 / PP36-KOMETIK / 2018

Tanggal: 20 September 2018

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

No Protokol	UH18090562		No Sponsor Protokol	
Peneliti Utama	dr. Fatmawaty Ahmad		Sponsor	Pribadi
Judul Peneliti	Uji Diagnostik Tes Lipoarabinomannan Serum Pada Pasien Suspek Koinfeksi Human Immunodeficiency Virus-Tuberkulosis di RSUP Dr Wahidin Sudirohusodo Makassar			
No Versi Protokol	1		Tanggal Versi	18 September 2018
No Versi PSP			Tanggal Versi	
Tempat Penelitian	RSUP dr. Wahidin Sudirohusodo dan Makassar		RS Universitas Hasanuddin	
Jenis Review	<input checked="" type="checkbox"/> Exempted		Masa Berlaku 20 September 2018 sampai 20 September 2019	Frekuensi review lanjutan
	<input type="checkbox"/> Expedited			
	<input type="checkbox"/> Fullboard Tanggal			
Ketua Komisi Etik Penelitian	Nama	Prof.Dr.dr. Suryani As'ad, M.Sc.,Sp.GK (K)	Tanda tangan	
Sekretaris Komisi Etik Penelitian	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 dilengkap dalam 7 hari dan Laporan 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 2. Data Dasar Penelitian

No	Nama	No. RM	Jenis Kelamin	Umur	Hasil					
					Kultur Sputum	anti HIV	Sputum Mikroskopis			Foto Toraks
							I	II	III	
1	E-S	381557	P	68	Positif MTB	Non Reactive	Negatif	Scanty (1 BTA/100 LPB)	Negatif	Bronchopneumonia suspek spesifik, cardiomegaly disertai dilatatio aortae
2	B--	838910	L	39	Positif MTB	Non Reactive	Positif 2	Negatif	Negatif	TB paru aktif lesi luas
3	M-U	839708	L	32	Positif MTB	Reactive	Positif 3	Positif 3	Positif 1	TB paru lama aktif lesi luas
4	N--	839215	P	44	Negatif	Non Reactive	Negatif	Negatif	Negatif	Pneumonia D, Cor dalam batas normal
5	L--	834619	L	67	Negatif	Non Reactive	Negatif	Negatif	Negatif	Bronchopneumonia bilateral, efusi pleura D
6	A-K	846710	L	76	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, efusi pleura D
7	M--	838389	L	32	Negatif	Non Reactive	Negatif	Negatif	Negatif	Pneumothorax S, Efusi Pleura S, Pneumonia S
8	T--	732217	L	72	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura bilateral, infected bronchiectasis, cardiomegaly disertai tanda-tanda edema paru
9	M--	208682	L	58	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru aktif lesi luas
10	V--	826587	L	64	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, dilatatio et elongatio aortae
11	AKR	798330	L	21	Positif MTB	Non Reactive	Positif 3	Positif 3	Positif 3	TB paru lama aktif lesi luas
12	A-U	838280	L	38	Positif MTB	Non Reactive	Positif 1	Positif 1	Positif 1	TB paru aktif lesi luas, encapsulated efusi pleura D
13	D--	841345	L	61	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, dilatatio aortae
14	SBA	820225	L	70	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi minimal
15	R-L	841394	L	25	Negatif	Reactive	Negatif	Negatif	Negatif	TB paru aktif
16	N--	838047	P	58	Negatif	Non reactive	Negatif	Negatif	Negatif	Efusi pleura S
17	U-M	840397	L	43	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, Emfisema pulmonum, Efusi pleura bilateral
18	R-S	700062	P	31	Positif MTB	Non reactive	Negatif	Positif 1	Scanty (6 BTA/100 LPB)	TB paru lama aktif lesi luas
19	S--	839610	L	55	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas
20	MMD	836789	P	21	Negatif	Non Reactive	Negatif	Negatif	Negatif	Pneumonia S, elevasi diafragma S, Scoliosis Lumbalis sinistroconvex
21	M--	839057	P	72	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif, efusi pleura D, dilatatio et elongatio aortae
			P	20	Positif MTB	Non Reactive	Negatif	Negatif	Negatif	TB paru aktif lesi luas, Cor dalam batas normal
			L	38	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura D, dilatatio aortae
			L	62	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru aktif lesi luas, efusi pleura bilateral terutama kanan
			L	25	Negatif	Non Reactive	Positif 1	Negatif	Positif 1	TB paru lama aktif lesi luas disertai multilple cavitas, efusi pleura S



26	E-S	842780	L	20	Negatif	Non reactive	Negatif	Negatif	Negatif	TB paru aktif lesi luas, efusi pleura S, suspek massa paru S
27	R--	843704	P	59	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura bilateral, Infected bronchiectasis
28	L-D	802274	L	44	Negatif	Non Reactive	Negatif	Negatif	Negatif	Multiple lesi noduler suspek tumor metastasis ke paru
29	I-T	843431	L	63	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, efusi pleura D
30	L-B	842041	L	56	Negatif	Non reactive	Negatif	Negatif	Negatif	TB milier + Efusi pleura D/S
31	S-M	841703	P	68	Negatif	Non Reactive	Negatif	Negatif	Negatif	Pneumonia bilateral, efusi pleura D
32	JDJ	843426	P	68	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura S, TB paru lama aktif lesi luas
33	D-S	783076	L	87	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, efusi pleura minimal S
34	K--	842753	L	58	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas
35	M--	680637	L	58	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura S DD/ Hemothorax
36	H-A	348362	L	64	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas disertai infected bronchiectasis
37	G--	841696	L	27	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura D, dilatatio aortae
38	S--	827492	P	43	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura bilateral terutama D, Aspek Bronchitis
39	D--	844712	P	36	Negatif	Non Reactive	Negatif	Negatif	Negatif	Pneumomediastinum, TB paru lama aktif lesi luas
40	K--	844773	L	61	Negatif	Non Reactive	Negatif	Negatif	Negatif	Observasi multiple lesi noduler suspek metastasis paru, efusi pleura S
41	S--	845209	L	22	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru aktif lesi luas
42	A--	787862	L	64	Negatif	Non Reactive	Negatif	Negatif	Negatif	Hidropneumothorax S, efusi pleura D, Emphysema subcutis
43	R--	845463	P	63	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura D
44	S-R	845798	L	50	Negatif	Non Reactive	Negatif	Negatif	Negatif	Bronchopneumonia suspek spesifik, efusi pleura D
45	D-J	606923	L	43	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, efusi minimal pleura bilateral
46	M-A	845686	L	62	Negatif	Non Reactive	Negatif	Negatif	Negatif	Bronchiectasis
47	S--	845528	L	50	Positif MTB	Non Reactive	Positif 1	Positif 2	Positif 2	TB paru lama aktif lesi luas
48	S--	845948	L	48	Negatif	Reactive	Negatif	Negatif	Negatif	Bronchopneumonia bilateral suspek spesifik, infected bronchiectasis
49	N--	846356	P	21	Positif MTB	Non reactive	Positif 3	Positif 3	Positif 3	TB paru lama aktif lesi luas
50	A-S	846146	L	73	Negatif	Non Reactive	Negatif	Negatif	Negatif	Pneumonia bilateral suspek spesifik, efusi pleura S
			L	20	Positif MTB	Non reactive	Negatif	Negatif	Positif 1	Pneumonia D
			L	48	Negatif	Non Reactive	Negatif	Negatif	Negatif	Infected bronchiectasis, efusi minimal pleura S
			L	70	Negatif	Non Reactive	Negatif	Negatif	Negatif	Bronchopneumonia D suspek spesifik
			L	20	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, pneumonia D, efusi pleura S
			L	43	Negatif	Non Reactive	Negatif	Negatif	Negatif	Tanda-tanda edema paru
			P	66	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, efusi pleura bilateral



57	H--	848684	P	53	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas disertai infected bronchiectasis, efusi pleura bilateral
58	I-S	850736	L	52	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas
59	M-H	847208	L	67	Negatif	Non reactive	Negatif	Negatif	Negatif	Pneumothorax D
60	UDB	612319	L	72	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB paru lama tenang
61	N-K	850371	P	53	Negatif	Non Reactive	Negatif	Negatif	Negatif	Hidropneumothorax S
62	M--	771409	L	25	Negatif	Non reactive	Negatif	Negatif	Negatif	Multiple pulmonary bullae bilateral, TB paru lama aktif lesi luas disertai atelektasis pulmo S
63	N--	836820	P	32	Positif MTB	Reactive	Negatif	Negatif	Negatif	Tidak tampak kelainan radiologik pada foto thorax ini
64	M-F	846124	L	34	Negatif	Non Reactive	Negatif	Negatif	Negatif	Efusi pleura D, cardiomegaly
65	M-A	846065	L	57	Positif MTB	Non Reactive	Negatif	Positif 1	Negatif	TB paru lama aktif lesi luas
66	S--	837598	L	49	Negatif	Non Reactive	Negatif	Negatif	Negatif	TB milier
67	M-S	823917	P	34	Negatif	Reactive	Negatif	Negatif	Negatif	TB paru lama aktif lesi luas, efusi pleura S
68	S-L	847992	P	38	Positif MTB	Non Reactive	Positif 1	Scanty (5 BTA/100 LPB)	Positif 1	TB paru lama aktif lesi luas
69	UFU	647053	P	21	Positif MTB	Non Reactive	Positif 1	Positif 1	Positif 1	TB paru lama aktif lesi luas
70	A--	845409	L	30	Negatif	Reactive	Negatif	Negatif	Negatif	Pneumocystis pneumonia carinii
71	S--	845948	L	48	Negatif	Reactive	Negatif	Negatif	Negatif	Bronchopneumonia bilateral suspek spesifik
72	FPR	698486	L	22	Positif MTB	Non Reactive	Positif 2	Positif 3	Positif 2	TB paru aktif lesi luas



Lampiran 3. *Curriculum Vitae*

CURRICULUM VITAE

A. DATA PRIBADI

Nama : dr. Fatmawaty Ahmad
 Tempat dan tanggal lahir : Ujung Pandang, 19 September 1983
 Agama : Islam
 Pekerjaan : Dokter
 NIP : -
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 Alamat : Jl. Perintis Kemerdekaan III, BTN Hamzy
 Blok S/1 Makassar

B. RIWAYAT PENDIDIKAN

NO.	STRATA	INSTITUSI	TEMPAT	TAHUN TAMAT
1	SD	SD Islam Athirah	Makassar	1995
2	SMP	SLTP Negeri 7	Makassar	1998
3	SMA	SMA Negeri 17	Makassar	2001
4.	Dokter	FK Unhas	Makassar	2007
5	Spesialis (sementara)	Bagian Patologi Klinik FK Unhas	Makassar	2014-sekarang

C. RIWAYAT PEKERJAAN

No	Kedudukan	Instansi	Tempat	Periode
1	Dokter Umum	RSUD Lanto Dg Pasewang	Jeneponto	2007-2008
2	Dokter PTT	Puskesmas Barana	Jeneponto	2008-2010
3	Dokter PTT	Puskesmas Bangkala	Jeneponto	2009-2010
4	Dokter Umum	RS Antam	Pomalaa	2010-2011
5	Research Assistant	Eijkman Institute for Molecular Biology	Sumba Barat Daya	Januari – Juli 2012
6	Research Assistant	Ina Respond	Makassar	2012 - sekarang

