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LAMPIRAN

1. Pemeriksaan ELISA



dr.welly kulkel IL.17 - SkanIt 3.1

Home | Layout | Protocol | Results | Reports

New | Open... | Save | Save As... | Import... | Export... | Settings... | Verification... | Help | Disconnect | Plate Out | Plate In | Start

Recent Sessions

- dr.welly kulkel IL.17
- nuri
- Creatinin urin plate 2
- Creatinin urin plate 1
- New Session_180
- LeptinHM117 2018 half plate
- LeptinHM117 2018
- Demo3: Kinetic session
- Demo2: Dual wavelength session
- Demo1: Single wavelength session

Session Summary
dr.welly kulkel IL.17

Ready to run

Layout

Protocol Shake1, Photometric

Calculations QuantitativeCurveFit

Reports <Not defined>

Multiskan FC (96) - 357-994120 - Connected | Disconnect | admin | 12:29 PM 2/27/2020

dr.welly kulkel IL.17 - SkanIt 3.1

Home | Layout | Protocol | Results | Reports

Fill With... | Edit... | Paste | New Plate | Show Original... | Preview... | Start

Fill | Samples | Plates | Layout

96-well plate | Plate 1

	1	2	3	4	5	6	7	8	9	10	11	12
A	Cal_0001 1/1 Assay 320 mg/L	Un_0004 1/1 Assay	Un_0012 1/1 Assay	Un_0020 1/1 Assay	Un_0028 1/1 Assay	Un_0036 1/1 Assay	Un_0044 1/1 Assay	Un_0052 1/1 Assay	Un_0060 1/1 Assay	Un_0068 1/1 Assay	Un_0076 1/1 Assay	Un_0084 1/1 Assay
B	Cal_0002 1/1 Assay 160 mg/L	Un_0005 1/1 Assay	Un_0013 1/1 Assay	Un_0021 1/1 Assay	Un_0029 1/1 Assay	Un_0037 1/1 Assay	Un_0046 1/1 Assay	Un_0053 1/1 Assay	Un_0061 1/1 Assay	Un_0069 1/1 Assay	Un_0077 1/1 Assay	Un_0085 1/1 Assay
C	Cal_0003 1/1 Assay 80 mg/L	Un_0006 1/1 Assay	Un_0014 1/1 Assay	Un_0022 1/1 Assay	Un_0030 1/1 Assay	Un_0038 1/1 Assay	Un_0046 1/1 Assay	Un_0054 1/1 Assay	Un_0062 1/1 Assay	Un_0070 1/1 Assay	Un_0078 1/1 Assay	Un_0086 1/1 Assay
D	Cal_0004 1/1 Assay 40 mg/L	Un_0007 1/1 Assay	Un_0015 1/1 Assay	Un_0023 1/1 Assay	Un_0031 1/1 Assay	Un_0039 1/1 Assay	Un_0047 1/1 Assay	Un_0055 1/1 Assay	Un_0063 1/1 Assay	Un_0071 1/1 Assay	Un_0079 1/1 Assay	Un_0087 1/1 Assay
E	Cal_0005 1/1 Assay 20 mg/L	Un_0008 1/1 Assay	Un_0016 1/1 Assay	Un_0024 1/1 Assay	Un_0032 1/1 Assay	Un_0040 1/1 Assay	Un_0048 1/1 Assay	Un_0056 1/1 Assay	Un_0064 1/1 Assay	Un_0072 1/1 Assay	Un_0080 1/1 Assay	Un_0088 1/1 Assay
F	Un_0001 1/1 Assay	Un_0009 1/1 Assay	Un_0017 1/1 Assay	Un_0025 1/1 Assay	Un_0033 1/1 Assay	Un_0041 1/1 Assay	Un_0049 1/1 Assay	Un_0057 1/1 Assay	Un_0065 1/1 Assay	Un_0073 1/1 Assay	Un_0081 1/1 Assay	Un_0089 1/1 Assay
G	Un_0002 1/1 Assay	Un_0010 1/1 Assay	Un_0018 1/1 Assay	Un_0026 1/1 Assay	Un_0034 1/1 Assay	Un_0042 1/1 Assay	Un_0050 1/1 Assay	Un_0058 1/1 Assay	Un_0066 1/1 Assay	Un_0074 1/1 Assay	Un_0082 1/1 Assay	Un_0090 1/1 Assay
H	Un_0003 1/1 Assay	Un_0011 1/1 Assay	Un_0019 1/1 Assay	Un_0027 1/1 Assay	Un_0035 1/1 Assay	Un_0043 1/1 Assay	Un_0051 1/1 Assay	Un_0059 1/1 Assay	Un_0067 1/1 Assay	Un_0075 1/1 Assay	Un_0083 1/1 Assay	Un_0091 1/1 Assay

Description: | Zoom: []

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2. Pemeriksaan Kultur



3. Hasil Deskripsi

No	Nama Pasien	JK	Usia (tahun)	SCORAD	SCORAD SCORE	Hasil Identifikasi	Hasil ELISA IL.17
1	Vega Y	W	14	Ringan	14	Staphylococcus aureus	48,40
2	Petrus P	P	18	Berat	42	Staphylococcus aureus	89,04
3	Syamil	P	5	Sedang	25	Staphylococcus aureus	69,01
4	Ahmad Zaky	P	13	Sedang	23	Staphylococcus aureus	62,44
5	Abd. Halim	P	13	Sedang	22	Staphylococcus aureus	62,90
6	M. Farhan	P	13	Berat	44	Staphylococcus aureus	91,64
7	Buchori H	P	11	Sedang	23	Staphylococcus aureus	69,27
8	Andi Fahmi	P	13	Berat	46	Staphylococcus aureus	148,73
9	M. Ismail	P	14	Sedang	20	Staphylococcus aureus	60,18
10	Firdaus F	P	13	Ringan	12	Staphylococcus aureus	51,48
11	Rizal Aswandi	P	18	Berat	44	Staphylococcus aureus	104,29
12	Ali Gaffar	P	4	Ringan	13	Staphylococcus aureus	52,26
13	Aqilla Khumairah F	W	8	Sedang	18	Staphylococcus aureus	62,23
14	Gizella W	W	11	Sedang	17	Staphylococcus aureus	61,82
15	Humairah	W	7	Berat	43	Staphylococcus aureus	106,91
16	Inayah	W	7	Sedang	19	Staphylococcus aureus	63,91
17	Syahrul	P	18	Sedang	20	Staphylococcus aureus	61,45
18	Zahrotunnisa	W	17	Sedang	25	Staphylococcus saprophyticus	74,16
19	Fayyadh	P	5	Berat	44	Staphylococcus aureus	81,20

20	Krisnove	P	18	Sedang	20	Staphylococcus aureus	60,63
21	Atilah R	P	13	Sedang	23	Staphylococcus aureus	70,04
22	Sella W	W	11	Ringan	13	Staphylococcus saprophyticus	51,48
23	M. Farel	P	12	Berat	41	Bacillus sp	75,50
24	Akilah Fatasya	W	7	Berat	42	Bacillus sp	77,51

4. Hasil Uji Statistik

Chi-Square Tests

	Value	df	Asymptotic Significance (2- sided)
Pearson Chi-Square	1,200 ^a	2	,549
Likelihood Ratio	1,247	2	,536
Linear-by-Linear Association	,068	1	,795
N of Valid Cases	24		

a. 4 cells (66,7%) have expected count less than 5. The minimum expected count is ,67.

Independent T-Test

	IL-17
Mann-Whitney U	36,500
Wilcoxon W	246,500
Z	-,271
Asymp. Sig. (2-tailed)	,786
Exact Sig. [2*(1-tailed Sig.)]	,794 ^b

a. Grouping Variable: Bakteri S. aureus

b. Not corrected for ties.

5. *Informed Consent*

FORMULIR PERSETUJUAN MENGIKUTI PENELITIAN SETELAH MENDAPAT PENJELASAN

Setelah membaca informasi penelitian serta mendengar penjelasan dan menyadari pentingnya penelitian:

“HUBUNGAN S. AUREUS DAN IL-17 SERUM DENGAN TINGKAT KEPARAHAN
DERMATITIS ATOPIK PADA ANAK”

Maka saya yang bertanda tangan di bawah ini:

Nama :
Umur :
Jenis kelamin :
Pekerjaan :
Alamat :

Menyatakan dengan sesungguhnya bahwa saya sebagai Orang Tua/Wali dari :

Nama :
Umur :
Jenis kelamin :

Dengan ini menyatakan SETUJU untuk dilakukan pengambilan sampel darah terhadap anak saya yang diambil dari vena mediana kubiti dengan menggunakan *vacutainer* sebanyak 3 cc (3/5 sendok teh) dengan cara aseptik menggunakan jarum suntik disposibel 3 cc dan dimasukkan dalam *serum separator tube* (SST). Selain itu akan dilakukan apusan pada lesi kulit saya/anak saya (pasien) dan ditaruh ke media transport (Amies Transport Medium). Kemudian darah dan apusan lesi akan di teliti di laboratorium NECHRI oleh Dokter Peneliti di Rumah Sakit Pendidikan UNHAS, Makassar. Saya mengerti sepenuhnya bahwa sampel yang diambil tidak akan mempengaruhi kondisi kesehatan anak saya dan hal ini semata-mata dilakukan untuk kepentingan penelitian. Saya mengetahui bahwa saya berhak untuk menolak ikut serta dalam

penelitian ini tanpa kehilangan hak saya untuk mendapatkan pelayanan kesehatan yang seharusnya saya peroleh.

Semua biaya pemeriksaan dan biaya pengobatan bila terjadi keluhan apapun sehubungan dengan penelitian ini, ditanggung oleh peneliti.

Bila masih ada hal yang masih belum saya mengerti atau saya ingin mendapatkan penjelasan lebih lanjut, saya bisa mendapatkannya dari dokter peneliti. Demikian persetujuan ini saya buat dengan penuh kesadaran dan tanpa paksaan.

Makassar,.....2019

Orang Tua/Wali
	(Nama Lengkap)	(Tanda Tangan)

Saksi
	(Nama Lengkap)	(Tanda Tangan)

6. Keterangan Kelayakan Etik (*Ethical Clearance*)



KEMENTERIAN RISET, TEKNOLOGI DAN PENDIDIKAN TINGGI
UNIVERSITAS HASANUDDIN FAKULTAS KEDOKTERAN
KOMITE ETIK PENELITIAN KESEHATAN
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 : 941/UN4.6.4.5.31/ PP36/ 2019

Tanggal: 14 Oktober 2019

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

No Protokol	UH19080648	No Sponsor	
Peneliti Utama	dr. Welly Wijayanti	Sponsor	
Judul Peneliti	Hubungan S.Aureus dan IL-17 Serum Dengan Tingkat Keparahan Dermatitis Atopik Pada Anak		
No Versi Protokol	2	Tanggal Versi	2 Oktober 2019
No Versi PSP	2	Tanggal Versi	2 Oktober 2019
Tempat Penelitian	RSUP dr. Wahidin Sudirohusodo, RS Universitas Hasanuddin, RS Tadjuddin Chalid , Balai Pengobatan Kulit Sul-Sel dan RS Jejaring di Makassar		
Jenis Review	<input type="checkbox"/> Exempted <input type="checkbox"/> Expedited <input checked="" type="checkbox"/> Fullboard Tanggal 18 September 2019	Masa Berlaku 14 Oktober 2019 sampai 14 Oktober 2020	Frekuensi review lanjutan
Ketua Komisi Etik Penelitian Kesehatan FKUH	Nama Prof.Dr.dr. Suryani As'ad, M.Sc.,Sp.GK (K)	Tanda tangan	
Sekretaris Komisi Etik Penelitian Kesehatan FKUH	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 Lapo 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