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Lampiran 1. Hasil Output SPSS

ROC Curve

Notes

|		
Output Created		08-NOV-2024 20:57:04
Comments		
Input	Data	H:\Kerjaan\proposal MRI CA 125\hasil.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	38
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics are based on all cases with valid data for all variables in the analysis.
Syntax		ROC ADCvalue BY TipeHistopatologi (2) /PLOT=CURVE(REFERENCE) /PRINT=SE COORDINATES /CRITERIA=CUTOFF(INCLUDE) TESTPOS(LARGE) DISTRIBUTION(FREE) CI(95) /MISSING=EXCLUDE.
s	Processor Time	00:00:00,03
	Elapsed Time	00:00:00,08

Case Processing Summary

TipeHistopatologi[a]	Valid N (listwise)
Positive[b]	24
Negative	14

Larger values of the test result variable(s) indicate stronger evidence for a positive actual state.

a. The test result variable(s): ADCvalue has at least one tie between the positive actual state group and the negative actual state group.

b. The positive actual state is Tipe I.

ROC Curve
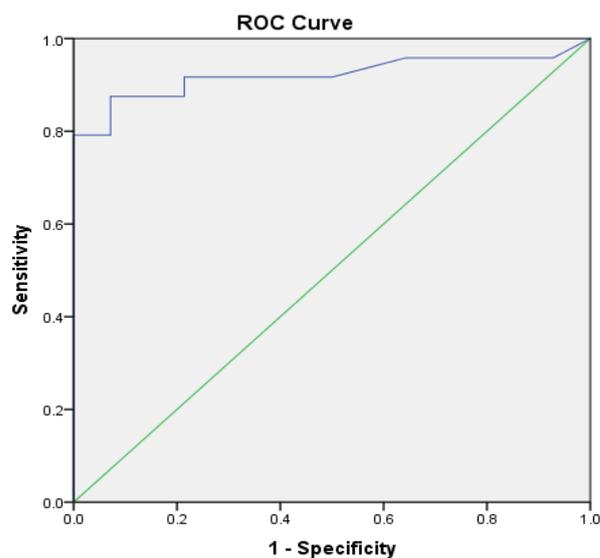
Diagonal segments are produced by ties.

Area Under the Curve

Test Result Variable(s):   ADCvalue

Area	Std. Error[a]	Asymptotic Sig.[b]	Asymptotic 95% Confidence Interval	
			Lower Bound	Upper Bound
.921	.047	.000	.828	1.000

The test result variable(s): ADCvalue has at least one tie

between the positive actual state group and the negative actual

state group. Statistics may be biased.

a. Under the nonparametric assumption

b. Null hypothesis: true area = 0.5

Coordinates of the Curve

Test Result Variable(s):   ADCvalue

Positive if Greater Than or Equal To[a]	Sensitivity	1 - Specificity
-.4500	1.000	1.000
.5800	.958	.929
.6150	.958	.857
.6300	.958	.786
.6550	.958	.714
.6850	.958	.643
.7350	.917	.500
.7850	.917	.429
)0	.917	.286
)0	.917	.214
50	.875	.214

.8700	.875	.143
.9050	.875	.071
.9800	.833	.071
1.0800	.792	.071
1.1700	.792	.000
1.2450	.750	.000
1.2750	.708	.000
1.3400	.667	.000
1.4100	.625	.000
1.4500	.542	.000
1.5250	.500	.000
1.5750	.458	.000
1.5900	.417	.000
1.6300	.375	.000
1.6650	.333	.000
1.6850	.292	.000
1.7050	.250	.000
1.7200	.208	.000
1.7550	.167	.000
1.8000	.125	.000
1.8950	.083	.000
2.0200	.042	.000
3.0700	.000	.000

The test result variable(s): ADCvalue has at least one tie between the positive actual state group and the negative actual state group.

a. The smallest cutoff value is the minimum observed test value minus 1, and the largest cutoff value is the maximum observed test value plus 1. All the other cutoff values are the averages of two consecutive ordered observed test values.

CROSSTABS

/TABLES=TitikpotongADC BY TipeHistopatologi

/FORMAT=AVALUE TABLES

/STATISTICS=CHISQ RISK

/CELLS=COUNT COLUMN

/COUNT ROUND CELL.

Crosstabs

Notes

Output Created		08-NOV-2024 21:00:13
Comments		
Input	Data	H:\Kerjaan\proposal MRI CA 125\hasil.sav
	Active Dataset	DataSet1
	Filter	<none>
	Weight	<none>
	Split File	<none>
	N of Rows in Working Data File	38
Missing Value Handling	Definition of Missing	User-defined missing values are treated as missing.
	Cases Used	Statistics for each table are based on all the cases with valid data in the specified range(s) for all variables in each table.
Syntax		CROSSTABS /TABLES=TitikpotongADC BY TipeHistopatologi /FORMAT=AVALUE TABLES /STATISTICS=CHISQ RISK /CELLS=COUNT COLUMN /COUNT ROUND CELL.
Resources	Processor Time	00:00:00,00
	Elapsed Time	00:00:00,02
	Dimensions Requested	2
	Cells Available	131029

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
TitikpotongADC * TipeHistopatologi	38	100.0%	0	0.0%	38	100.0%

TitikpotongADC * TipeHistopatologi Crosstabulation

			TipeHistopatologi		
			Tipe II	Tipe I	Total
TitikpotongADC	<0.87	Count	12	3	15
		% within TipeHistopatologi	85.7%	12.5%	39.5%
	>0.87	Count	2	21	23
		% within TipeHistopatologi	14.3%	87.5%	60.5%
Total		Count	14	24	38
		% within TipeHistopatologi	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	19.838[a]	1	.000		
Continuity Correction[b]	16.892	1	.000		
Likelihood Ratio	21.414	1	.000		
Fisher's Exact Test				.000	.000
Linear-by-Linear Association	19.316	1	.000		
N of Valid Cases	38				

a. 0 cells (,0%) have expected count less than 5. The minimum expected count is 5,53.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for TitikpotongADC (<0.87 / >0.87)	42.000	6.129	287.814
For cohort TipeHistopatologi = Tipe II	9.200	2.389	35.426
For cohort ...atologi =	.219	.079	.607
...Cases	38		

Lampiran 2. Rekomendasi Persetujuan Etik

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 5790103, Fax : 0411-581431

REKOMENDASI PERSETUJUAN ETIK
Nomor : 854/UN4.6.4.5.31/ PP36/ 2024

Tanggal: 10 Oktober 2024

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

No Protokol	UH24090765	No Sponsor	
Peneliti Utama	dr. Delicia Liliani Langi	Sponsor	
Judul Peneliti	PERBANDINGAN DWI-ADC MAPPING DAN NILAI ADC MRI DENGAN TINGKAT AGRESIVITAS TIPE HISTOPATOLOGI DAN CA125 PASIEN KANKER OVARIUM		
No Versi Protokol	1	Tanggal Versi	3 Oktober 2024
No Versi PSP		Tanggal Versi	
Tempat Penelitian	RS Universitas Hasanuddin Makassar		
Jenis Review	☐ Exempted ☒ Expedited ☐ Fullboard Tanggal	Masa Berlaku 10 Oktober 2024 sampai 10 Oktober 2025	Frekuensi review lanjutan
Ketua KEP Universitas Hasanuddin	Prof. dr. Muh Nasrum Massi,PhD,SpMK, Subsp. Bakt(K)	Tanda tangan	
Sekretaris KEP Universitas Hasanuddin	dr. Firdaus Hamid, PhD, SpMK(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 prokol yang disetujui (protocol deviation / violation)
• Mematuhi semua peraturan yang ditentukan

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Lampiran 3.

Curriculum Vitae

Data Umum:

Nama   : dr. Delicia Liliani Langi

Tempat / Tanggal Lahir   : Mandao/ 15 Desember 1988

Jenis Kelamin   : Perempuan

Alamat   : Jl, Ranggon No, C6, Kec Ujung Pandang. Kel.
                                            Baru, Makassar

Telepon   : +6282123138869

Agama   : Katolik

Status   : Menikah

Pekerjaan   : Dokter

Pendidikan:

2006 – 2011   : **SARJANA KEDOKTERAN** – Guang Xi Medical University,
                        Nanning, China

2016   : **BASIC KNOWLEDGE IN ONCOLOGY COURSE** – Indonesia
                        Society of Oncology Makassar

2016   **: ADVANCED CARDIAC LIFE SUPPORT** – Indonesian Heart
                        Association

2021 - 2024   : **SARJANA PENDIDIKAN DOKTER SPESIALIS** – Universitas
                        Hasanuddin Makassar, Indonesia

Pengalaman Kerja:

2014 – 2015   : Rumah Sakit Bhayangkara TK III, Manado

2014 - 2015   : Puskesmas Bahu, Manado

)20   : Rumah Sakit Stella Maris, Makassar

Karya Ilmiah:

1. Adolescent Hirschsprung's Disease Presenting As Sigmoid Volvulus: A Case Report

2. Perbandingan Dwi-Adc Mapping Dan Nilai Adc Mri Dengan Tingkat Agresivitas Tipe Histopatologi Dan Ca125 Pasien Kanker Ovarium

3. Advanced Prostate Adenocarcinoma with High PSA and Metastatic Spread: A Case Report Highlighting the Role of F-18 PSMA PET/CT in Precision Staging

Simposium/ Acara Ilmiah:

1. Pertemuan Ilmiah Cardiovascular Department PERKI Manado, 2014

2. Konas III Psikiatri Biologi & Psikofarmakologi with Psikoneuroimunologi Innovation and Integration of Biological Psychiatry & Psycopharmacology in Treating Mental Disorder, PDSKJI, 2015

3. Ilmiah Berkala Rs. Siloam Makassar, 2016

4. Pendidikan Kedokteran Berkelanjutan (PKB) VIII PAPDI Makassar, 2016

5. Workshop Update Psikoterapi, 2017

6. Simposium Ilmia, IDI, 2017

7. Celebes Nephro-Endo Metabolic Update, 2018

8. Workshop Nasional Wilayah Indondesia Timur. Casemix, Coding, Verivikasi, Internal dan Vedika, ARSSI, 2018

9. Symposium Indonesian Society of Clinical Pathology and Laboratory Medicine (PDS PatKLIn), 2019

10. Radiology Workshop Basic to Advance Musculoskeletal, Dep. Radiologi FK. Unhas, 2023

11. Thoracic Radiology, 2023

12. Workshop Woman and Neuroimaging, 2023

13. Workshop Hands-on Basic Ultrasound of Shoulder, Knee and Ankle, 2023

14. Update on Interventional Radiology Workshop, RSUP UNHAS, 2024