

## LAMPIRAN 1



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 : 992/UN4.6.4.5.31/ PP36/ 2024

Tanggal: 15 Nopember 2024

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

No Protokol	UH24110923	No Sponsor	
Peneliti Utama	<b>dr. Fajri Nurjamil</b>	Sponsor	
Judul Peneliti	Perbandingan Regimen Respon Therapy Menggunakan Doxorubicin Dan Cisplatin Terhadap qEASL pada Pasien Intermediate Stage Hepatocellular Carcinoma		
No Versi Protokol	1	Tanggal Versi	<b>8 Nopember 2024</b>
No Versi PSP		Tanggal Versi	
Tempat Penelitian	RSUP Dr.Wahidin Sudirohusodo Makassar		
Jenis Review	<input type="checkbox"/> Exempted <input checked="" type="checkbox"/> Expedited <input type="checkbox"/> Fullboard Tanggal	Masa Berlaku	Frekuensi review
		15 Nopember 2024 sampai 15 Nopember 2025	lanjutan
Ketua KEP Universitas Hasanuddin	<b>Prof. dr. Muh Nasrum Massi, PhD, SpMK, Subsp. Bakt(K)</b>	Tanda tangan	
Sekretaris KEP Universitas Hasanuddin	<b>dr. Firdaus Hamid, PhD, SpMK(K)</b>	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 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 prokol yang disetujui (protocol deviation / violation)
- Mematuhi semua peraturan yang ditentukan

## LAMPIRAN 2

### JK \* Kemoterapi

#### Crosstab

			Kemoterapi		Total
			Cisplatin	Doxorubisin	
JK	Laki-laki	Count	21	25	46
		% within Kemoterapi	72.4%	89.3%	80.7%
	Perempuan	Count	8	3	11
		% within Kemoterapi	27.6%	10.7%	19.3%
Total		Count	29	28	57
		% within Kemoterapi	100.0%	100.0%	100.0%

#### Crosstab

			Kemoterapi		Total
			Cisplatin	Doxorubisin	
UsiaKat	25-45 tahun	Count	3	9	12
		% within Kemoterapi	10.3%	32.1%	21.1%
	46-55 tahun	Count	17	9	26
		% within Kemoterapi	58.6%	32.1%	45.6%
	56-65 tahun	Count	7	9	16
		% within Kemoterapi	24.1%	32.1%	28.1%
	>65 tahun	Count	2	1	3
		% within Kemoterapi	6.9%	3.6%	5.3%
Total		Count	29	28	57
		% within Kemoterapi	100.0%	100.0%	100.0%

### Means

[DataSet3] H:\Kerjaan\Hasil hepatokarsinoma\gabungan cisplatin.sav

Report

Volume

TACI	Mean	N	Std. Deviation	Minimum	Maximum	Median
Pre	762.0690	29	480.42310	64.00	1911.00	637.0000
1	704.6207	29	549.87397	57.00	1934.00	548.0000
2	581.5000	16	459.39090	55.00	1448.00	446.0000
3	729.0000	10	633.63046	29.00	1735.00	651.5000
4	680.6000	5	648.07044	33.00	1446.00	496.0000
Total	702.5955	89	519.33499	29.00	1934.00	542.0000

### NPar Tests

#### Kruskal-Wallis Test

**Test Statistics<sup>a,b</sup>**

	Volume
Chi-Square	1.592
df	4
Asymp. Sig.	.810

a. Kruskal Wallis Test

b. Grouping Variable:

TACI

**Means**

[DataSet3] H:\Kerjaan\Hasil hepatokarsinoma\gabungan doxorubisin.sav

**Report**

Volume

TACI	Mean	N	Std. Deviation	Median	Minimum	Maximum
Pre	704.7143	28	638.55038	551.0000	55.00	2838.00
1	850.0357	28	722.57679	633.0000	62.00	2854.00
2	808.8889	18	807.23871	658.5000	31.00	2901.00
3	705.6923	13	524.32963	877.0000	27.00	1496.00
4	648.2500	8	481.78441	678.0000	68.00	1489.00
Total	762.6632	95	665.25579	633.0000	27.00	2901.00

**NPar Tests****Kruskal-Wallis Test****Test Statistics<sup>a,b</sup>**

	Volume
Chi-Square	.572
df	4
Asymp. Sig.	.966

a. Kruskal Wallis Test

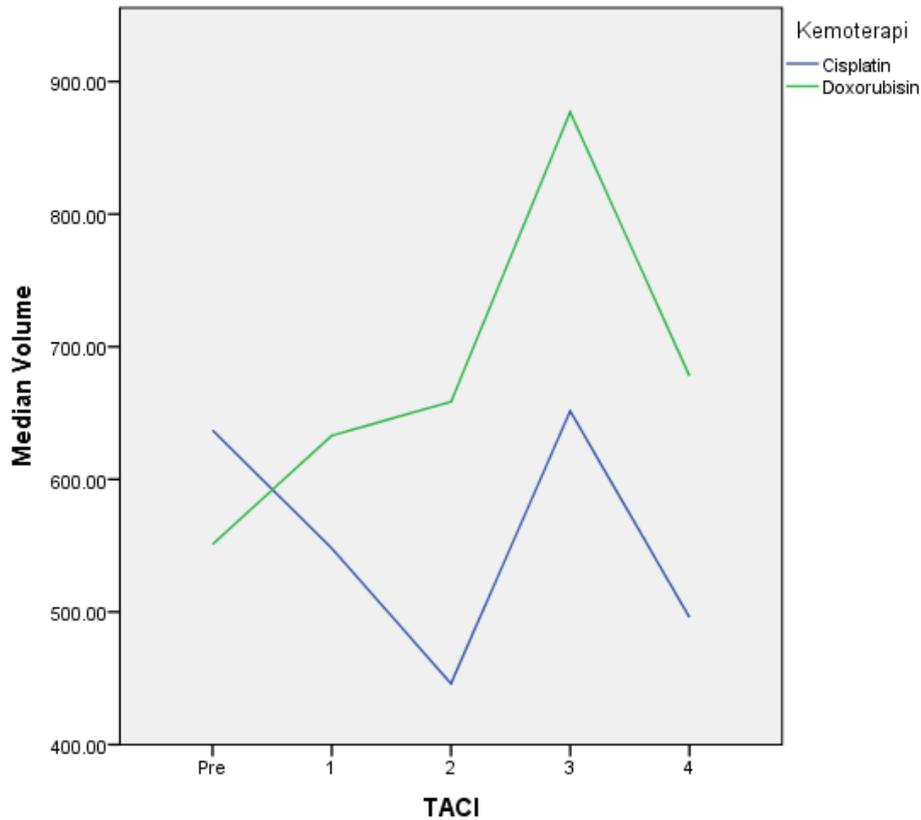
b. Grouping Variable:

TACI

**NPar Tests****Mann-Whitney Test****Test Statistics<sup>a</sup>**

	Volume
Mann-Whitney U	4198.000
Wilcoxon W	8203.000
Z	-.082
Asymp. Sig. (2-tailed)	.935

a. Grouping Variable: Kemoterapi



**Crosstabs**

[DataSet2] H:\Kerjaan\Hasil hepatokarsinoma\gabungan cisplatin.sav

**qEASL \* TACI Crosstabulation**

			TACI				Total
			1	2	3	4	
qEASL	PR	Count	1	1	1	0	3
		% within TACI	3.4%	6.3%	10.0%	0.0%	5.0%
	SD	Count	28	14	7	5	54
		% within TACI	96.6%	87.5%	70.0%	100.0%	90.0%
	PD	Count	0	1	2	0	3
		% within TACI	0.0%	6.3%	20.0%	0.0%	5.0%
Total		Count	29	16	10	5	60
		% within TACI	100.0%	100.0%	100.0%	100.0%	100.0%

**Chi-Square Tests**

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	7.839 <sup>a</sup>	6	.250
Likelihood Ratio	7.762	6	.256
Linear-by-Linear Association	.682	1	.409
N of Valid Cases	60		

a. 9 cells (75,0%) have expected count less than 5. The minimum expected count is ,25.

**Crosstabs**

[DataSet3] H:\Kerjaan\Hasil hepatokarsinoma\gabungan doxorubisin.sav

**qEASL \* TACI Crosstabulation**

			TACI				
			1	2	3	4	Total
qEASL	PR	Count	2	1	1	1	5
		% within TACI	7.1%	5.6%	7.7%	12.5%	7.5%
	SD	Count	24	14	9	6	53
		% within TACI	85.7%	77.8%	69.2%	75.0%	79.1%
	PD	Count	2	3	3	1	9
		% within TACI	7.1%	16.7%	23.1%	12.5%	13.4%
Total		Count	28	18	13	8	67
		% within TACI	100.0%	100.0%	100.0%	100.0%	100.0%

**Chi-Square Tests**

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.571 <sup>a</sup>	6	.860
Likelihood Ratio	2.537	6	.864
Linear-by-Linear Association	.247	1	.619
N of Valid Cases	67		

a. 8 cells (66,7%) have expected count less than 5. The minimum expected count is ,60.

**Crosstabs**

[DataSet1] H:\Kerjaan\Hasil hepatokarsinoma\PreTACI dan TACI1.sav

**qEASL \* Kemoterapi Crosstabulation**

			Kemoterapi		
			Cisplatin	Doxorubisin	Total
qEASL	PR	Count	1	2	3
		% within qEASL	33.3%	66.7%	100.0%
	SD	Count	28	24	52
		% within qEASL	53.8%	46.2%	100.0%
	PD	Count	0	2	2
		% within qEASL	0.0%	100.0%	100.0%
Total		Count	29	28	57
		% within qEASL	50.9%	49.1%	100.0%

**Chi-Square Tests**

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.624 <sup>a</sup>	2	.269
Likelihood Ratio	3.403	2	.182
Linear-by-Linear Association	.190	1	.663
N of Valid Cases	57		

a. 4 cells (66,7%) have expected count less than 5. The minimum expected count is ,98.

**Crosstabs**

[DataSet5] H:\Kerjaan\Hasil hepatokarsinoma\TAC12.sav

**qEASL \* Kemoterapi Crosstabulation**

			Kemoterapi		Total
			Cisplatin	Doxorubisin	
qEASL	PR	Count	1	1	2
		% within qEASL	50.0%	50.0%	100.0%
	SD	Count	14	14	28
		% within qEASL	50.0%	50.0%	100.0%
	PD	Count	1	3	4
		% within qEASL	25.0%	75.0%	100.0%
Total	Count		16	18	34
	% within qEASL		47.1%	52.9%	100.0%

**Chi-Square Tests**

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.885 <sup>a</sup>	2	.642
Likelihood Ratio	.929	2	.629
Linear-by-Linear Association	.587	1	.444
N of Valid Cases	34		

a. 4 cells (66,7%) have expected count less than 5. The minimum expected count is ,94.

**Crosstabs**

[DataSet6] H:\Kerjaan\Hasil hepatokarsinoma\TAC13.sav

**qEASL \* Kemoterapi Crosstabulation**

			Kemoterapi		Total
			Cisplatin	Doxorubisin	
qEASL	PR	Count	1	1	2
		% within qEASL	50.0%	50.0%	100.0%
	SD	Count	7	9	16
		% within qEASL	43.8%	56.3%	100.0%
	PD	Count	2	3	5
		% within qEASL	40.0%	60.0%	100.0%
Total	Count		10	13	23
	% within qEASL		43.5%	56.5%	100.0%

### Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	.060 <sup>a</sup>	2	.971
Likelihood Ratio	.060	2	.971
Linear-by-Linear Association	.055	1	.815
N of Valid Cases	23		

a. 4 cells (66,7%) have expected count less than 5. The minimum expected count is ,87.

### Crosstabs

[DataSet7] H:\Kerjaan\Hasil hepatokarsinoma\TAC14.sav

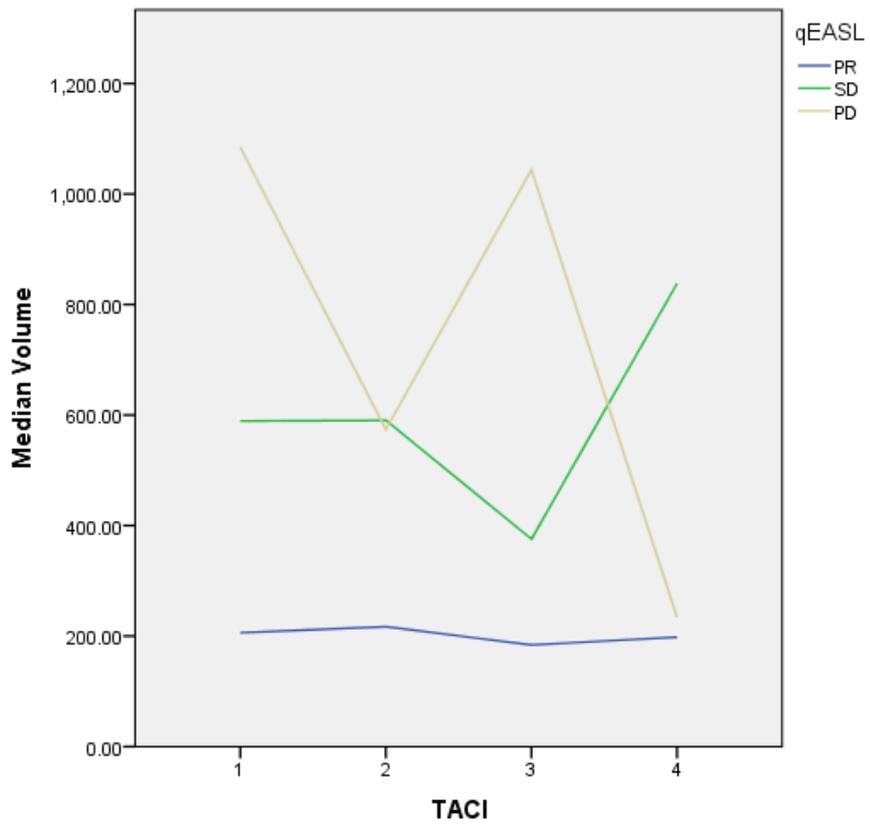
### qEASL \* Kemoterapi Crosstabulation

			Kemoterapi		Total
			Cisplatin	Doxorubisin	
qEASL PR	Count		0	1	1
	% within qEASL		0.0%	100.0%	100.0%
SD	Count		5	6	11
	% within qEASL		45.5%	54.5%	100.0%
PD	Count		0	1	1
	% within qEASL		0.0%	100.0%	100.0%
Total	Count		5	8	13
	% within qEASL		38.5%	61.5%	100.0%

### Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	1.477 <sup>a</sup>	2	.478
Likelihood Ratio	2.165	2	.339
Linear-by-Linear Association	.000	1	1.000
N of Valid Cases	13		

a. 5 cells (83,3%) have expected count less than 5. The minimum expected count is ,38.



### **LAMPIRAN 3 CURICULUM VITAE**

#### **Data Umum**

Nama : dr. Fajri Nurjamil  
Tempat/ Tanggal Lahir : Kelurahan Baro Yaman, 12 Mei 1986  
Jenis kelamin : Laki-laki  
Alamat: Jalan Medan – Banda Aceh, Kelurahan Gampong Lada, Kecamatan Mutiara Timur. Kab.Pidie – Aceh. 24173  
Telepon : +6282198137879  
Agama : Islam  
Status : Menikah  
Pekerjaan : Dokter

#### **Pendidikan:**

2004 - 2008: **SARJANA KEDOKTERAN** – Universitas Abulyatama Aceh - Indonesia  
2008 - 2011: **PENDIDIKAN PROFESI DOKTER** – Universitas Abulyatama Aceh - Indonesia  
2021-Sekarang: **PENDIDIKAN DOKTER SPESIALIS** – Universitas Hasanuddin, Makassar-Indonesia

#### **Pengalaman Kerja:**

2012-2013: Dokter tenaga sukarela di Puskesmas Delima.Kab Pidie – Aceh  
2013 – 2015: Dokter PTT Pusat Kemenkes RI di Kab.Asmat – Papua  
2015 – 2021: Dokter PTT Daerah Kab.Asmat - Papua

#### **Karya Ilmiah/Research Papers:**

1. **Perbandingan respon terapi doxorubicin dan cisplatin menggunakan qEASL pada pasien intermediate stage hepatocellular carcinoma**

#### **Symposium / Acara Ilmiah:**

1. **PIT PDSRI XVI Sumatera utara – Medan 2023**
2. **Poster Competition PIT PDSRI XVI Sumatera utara – Medan 2023**
3. **Symposium “Raising A Better Abdominal Diagnostic Imaging” Banda Aceh 2023**
4. **Peserta fotografi di Symposium “Raising A Better Abdominal Diagnostic Imaging” Banda Aceh 2023**