

DAFTAR PUSTAKA

1. Preterm Labor and Preterm Birth [internet]. American College of Obstetricians and Gynecologists; 2013 [update 2013 May; cited 2013 nov 8]. Available from <http://www.acog.org/~media/For%20Patients/faq087.pdf>.
2. Manuaba I.B.G., Manuaba Chandranita, Manuaba Fajar. Pengantar Kuliah Obstetri. Jakarta: EGC; 2007
3. Profil Kesehatan Indonesia Tahun 2011 [internet]. Kementerian Kesehatan Republik Indonesia; 2011 [cited 2013 Des 26]. Available from <http://www.depkes.go.id/downloads/Profil2011-v3.pdf>
4. Wijayanegara H. Prematuritas. Bandung: PT. Refika Aditama; 2009.
5. Expanding Maternal and Neonatal Survival (EMAS) 2012 – 2016 [Internet]. Departemen Kesehatan Indonesia; 2013 [cited 2014 maret 1]. Available from <http://www.gizikia.depkes.go.id/archives/emas/expanding-maternal-and-neonatal-survival-emas-2012-2016>
6. Musbikin. Panduan Ibu Hamil dan Melahirkan. Jakarta: Mitra pustaka; 2005.
7. Latifah L, Anggraeni M.D. hubungan kehamilan pada usis remaja dengan kejadian prematuritas, berat bayi lahir rendah dan asfiksia. Purwokerto: Universitas Soedirman; 2009.
8. Prediksi Persalinan Preterm [internet]. Health Technology Assessment Indonesia; 2010 [cited 2014 Jan 12]. Available from <http://buk.depkes.go.id/index.php?option=com>
9. Soehermawan D. Faktor Risiko Partus Prematurus Di RSUP Dr. Kariadi Semarang Tahun 2002. Semarang: Universitas Diponegoro; 2002.
10. Herawati, Susi. Kadar Progesteron estriol Saliva pada Ancaman Persalinan Prematur [disertasi]. Semarang: Universitas Diponegoro.

11. Iams J. Prediction and Early Detection of Preterm Labor. The American College of Obstetricians and Gynecologists [internet]. 2003 [cited 2014 Feb 11]: 101(2):402-12.
12. Novak Z, Vodusek V, Steblovnik L, Kavsek G. Extermly Preterm Delivery: Prediction and Prevention. TMJ [internet]. 2008 [cited 2014 Feb 11]: 59(2)
13. Snegovskikh V, Park JS, Norwitz E. Endocrinology of Parturition. Endocrinol Metab Clin N Am [internet]. 2006 [cited 2014 Feb 11]; 35:173-91.
14. Jusuf, Jenny. Efektifitas dan Efek Samping Ketolorac sebagai Tokolitik pada Ancaman Persalinan Prematur: Tinjauan Perbandingan dengan Nifedipin [disertasi]. Semarang : Universitas Diponegoro; 2008.
15. Destaria, Selvi. Perbandingan Luaran Maternal dan Perinatal Kehamilan Trimester Ketiga Antara Usia Muda dan Usia Reproduksi Sehat. Semarang: Universitas Diponegoro; 2011.
16. Zubaidi, Rahardian. Perbandingan Luaran Maternal dan Perinatal Ibu Usia Tua dengan Ibu Usia Reproduksi. Semarang: Universitas Diponegoro; 2011.
17. Damayanti AR, pramono BA. Luaran maternal dan perinatal pada usia lebih dari 35 tahun di RSUP Dr. Kariadi Semarang tahun 2008. Semarang: Universitas Diponogoro; 2008.
18. Prawiroharjo, Sarwono. Ilmu Kebidanan. Jakarta: Bina Pustaka Sarwono Prawiroharjo; 2009.
19. Prenatal Monitoring and Care [internet]. National Healthy Mother, Healthy Babies Coalition (HMHB); 2012 [cited 2014 Jan 21]. Available from <http://www.hmhb.org/virtual-library/interviews-with-experts/preeclampsia/>
20. Turner J.A. Diagnosis and Management of Pre-eclamsia: An Update. International Journal of Womens Health [internet]. 2010 [cited 2014 Feb 11]; 2:327-337. Available from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2990902/>

21. Ambarwati W.N., Irdawati. Hubungan Preeklamsia dengan Kondisi Bayi yang dilahirkan secara Sectio Caesaria di RSUD DR. Moewardi Surakarta. Surakarta: Universitas Muhamadiyah Surakarta; 2009.
22. Aufdenblatten M, Baumann M, Raio L, Dick B, Frey B.M, Schneider H, dkk. Prematurity is related to high placental cortisol in preeclamsia. *Pediatric research* [internet]. 2009 [cited 2014 maret 8]: 65(2)198-202. Available from International Pediatric Research Foundation.
23. Cardiovascular disease (CVDs) [internet]. World Health Organization (WHO); 2013 [cited 2014 Jan 29]. Available from <http://www.who.int/mediacentre/factsheets/fs317/en/index.html>
24. Supriyono M. Faktor-faktor risiko yang berpengaruh terhadap kejadian penyakit jantung koroner pada kelompok usia < 45 tahun. Semarang: Universitas Diponegoro; 2008.
25. Classes of Heart Failure [internet]. American Heart Association; 2011 [cited 2014 Feb 11]. Available from http://www.heart.org/HEARTORG/Conditions/HeartFailure/AboutHeartFailure/Classes-of-Heart-Failure_UCM_306328_Article.jsp
26. Sudoyo A.W, Setiyohadi B, Alwi I, Simadibrata M, Setiati S. Buku Ajar Ilmu Penyakit Dalam. Jakarta: Interna Publishing; 2009.
27. Your Guide To Anemia [internet]. U.S. Department of Health and Human Services; 2011 [cited 2014 Jan 29]. Available from <http://www.nhlbi.nih.gov/health/public/blood/anemia-yg.pdf>
28. Worldwide prevalence of anaemia 1993-2005 [internet]. World Health Organization (WHO); 2008 [cited 2014 Jan 29]. Available from http://whqlibdoc.who.int/publications/2008/9789241596657_eng.pdf
29. Pregnancy and Tyroid Disease [internet]. U.S. Department of Health and Human Services; 2012 [cited 2014 Jan 2014]. Available from http://www.endocrine.niddk.nih.gov/pubs/pregnancy/Pregnancy_Thyroid_Disease_508.pdf
30. Garry D. Penyakit Tiroid pada Kehamilan. Bandar Lampung. 2013; 40(7):206.

31. Benerjee S. Thyroid Disorders in Pregnancy. Association of Physicians India. 2011; 59.
32. Sanjaya I.N.A. Kadar Thyroid Peroxydase Antibodi pada Abortus Imminens [disertasi]. Semarang: Universitas Diponegoro; 2013.
33. Terraz J.P, Alvarez S.I, Sanchez G.R. Thyroid Hormones According to Gestational Age in Pregnant Spanish Women. BioMed Central [internet]. 2009 [cited 2014 Feb 12]; 2 : 237. Available from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2788578/#!po=31.8182>
34. Kamus Istilah Kependudukan dan Keluarga Berencana [internet]. 2011; [cited 2014 Jan 31]. Available from : Direktorat Teknologi Informasi dan Dokumentasi Badan Kependudukan dan Keluarga Berencana Nasional (BKKBN).
35. Cunningham F.G, Leveno K.J, Bloom S.L, Hauth J.C, Rouse D.J, Spong C.Y. Obstetri Williams. Jakarta: Penerbit Buku Kedokteran EGC; 2013.
36. Wolf Kirschner and Klaus Friese. Strategies in the Prevention of Preterm Births During and Before Pregnancy. Intech Europe; 2012 [cited 2014 Jan 31] InTech, Available from: <http://www.intechopen.com/books/preterm-birth-mother-and-child/strategies-in-the-preventionof-preterm-births-during-and-before-pregnancy>
37. Coltart CEM, Festin M. Antibiotics for preterm rupture of membranes [internet]. World Health Organization (WHO); 2011 [cited 2014 Jan 2014]. Available from http://apps.who.int/rhl/pregnancy_childbirth/complications/prom/cd001058_coltartc_com/en/index.html
38. Anterpartum Haemorrhage [internet]. Royal College of Obstetricians and Gynaecologists; 2011 [cited 2014 Feb 1]. Available from http://www.rcog.org.uk/files/rcog-corp/GTG63_05122011APH.pdf
39. Maharani I. Hubungan Kadar Hemoglobin pada perdarahan Antepartum dengan Skor Apgar. Semarang: Universitas Diponegoro; 2012.
40. [http://www.mshc.org.au/portals/_default/uploads/fact_sheets/Bacterial_Vaginosis_\(BV\)_a4.pdf](http://www.mshc.org.au/portals/_default/uploads/fact_sheets/Bacterial_Vaginosis_(BV)_a4.pdf)

41. Lubis M.P. Kehamilan Kembar (Gemelli) [disertasi]. Medan: Universitas Sumatra Utara; 2010.
42. Anggarawati D. Studi Prevalensi dan Keberhasilan Terapi Vaginosis Bakterialis Pada Ibu Hamil [disertasi]. Semarang: Universitas Diponegoro; 2003.
43. Konsensus Infeksi Saluran Kemih pada Anak [internet]. Ikatan Dokter Anak Indonesia (IDAI) Unit Kerja Koordinasi (UKK) Nefrologi; 2011 [cited 2014 Feb 2] . Available from http://pustaka.unpad.ac.id/wp-content/uploads/2013/12/Pustaka_Unpad_Konsensus_-Infeksi_-Saluran.pdf.pdf
44. Kusnawara Y. Hubungan Infeksi Saluran Kemih dengan Partus Prematurus [disertasi]. Semarang: Universitas Diponegoro; 2001.
45. Kalalo L.P, Aryati, Subagjo B. Pola Bakteri dan Kepekaan Antibiotik Wanita Hamil dengan Bakteriuria Simtomatik. Indonesian Journal of Clinical Pathology and Medical Laboratory [internet]. 2006 [cited 2014 Feb 2]; 12(3):103-109. Available from <http://journal.unair.ac.id/filerPDF/IJPPML-12-3-01.pdf>
46. Maternal mortality ratio [internet]. World Health Organization (WHO); 2004 [cited 2014 Feb 3]. Available from <http://www.who.int/healthinfo/statistics/indmaternalmortality/en/>
47. Fibriana, Arulita. Faktor-Faktor Risiko yang Mempengaruhi Kematian Maternal [disertasi]. Semarang: Universitas Diponegoro; 2007.
48. Rukmini, Wiludjeng L.K. Gambaran Penyebab Kematian Maternal di Rumah Sakit. Surabaya: Pusat Penelitian dan Pengembangan dan Kebijakan Kesehatan Departemen Kesehatan RI; 2006.
49. Kusumawati Y. Faktor-faktor Risiko Yang Berpengaruh Terhadap Persalinan Dengan Tindakan [disertasi]. Semarang: Universitas Diponegoro; 2006.
50. Mahesa Y. Gambaran Klaim Bermasalah Gakin dan SKTM Pada Pelayanan Rawat Inap di RSUD Pasar Rebo Tahun 2008 [internet]. Jakarta: Universitas Indonesia [cited 2014 Feb 2]. Available from

<http://lontar.ui.ac.id/file?file=digital/125765-S-5661-Gambaran%20klaim-Literatur.pdf>




51. Rotter T., Kinsman L. James E.L., Machotta A. Gothe H., Willis J. et al. Clinical Pathway : Effect On Professional Practice, Patient Outcomes, Lenght of stay and Hospital Cost [internet]. The Cochrane Collaboration; 2010 [cited 2014 Feb 2]. Available from <http://apps.who.int/rhl/reviews/CD006632.pdf>
52. Pencegahan dan Penatalaksanaan Asfiksia Neonatorum [internet]. Health Technology Assesment Departemen Kesehatan Republik Indonesia; 2008 [cited 2014 Jan 12]. Available from <http://buk.depkes.go.id/index.php?option=com>
53. Oxorn H, Forte WR. Ilmu Kebidanan: Patologi dan Fisiologi Persalinan. Yogyakarta: Yayasan Essentia Medica; 2010.
54. Carolus W, Rompis J, Wilar R. Hubungan Apgar Skor dan Berat badan Lahir dengan Sepsis Neonatorum. Manado: Universitas Samratulangi; 2013
55. Guidelines on Optimal Feeding of Low Birth- Weight Infants in Low – and Middle- Income Countries [internet]. World Health Organization (WHO); 2011 [cited 2014 Feb 2]. Available from http://www.who.int/maternal_child_adolescent/documents/9789241548366.pdf
56. Indarso F. Hipoglikemia Pada Bayi Baru Lahir [internet]. Fakultas Kedokteran UNAIR Surabaya; 2006 [cited 2014 Feb 2]. Available from <http://old.pediatrik.com/isi03.php?page=html&hkategori=pdt&direktori=pdt&filepdf=0&pdf=&html=07110-ztvf267.htm>
57. Bayuningsih R. Efektifitas Penggunaan Nesting dan posisi Prone Terhadap Saturasi Oksigen dan Frekuensi Nadi pada Bayi Prematur di Rumah Sakit Umum Daerah (RSUD) Kota Bekasi. Jakarta: Universitas Indonesia; 2011

58. Neonatal Sepsis [internet]. A Service of the U.S. National Library of Medicine National Institute of Health; 2011 [cited 2014 Feb 2]. Available from http://medicastore.com/penyakit/403/Sepsis_Neonatorum.html
59. Sepsis in the Newborn [internet]. 2013 [cited 2014 Feb 2]. Available from http://www.merckmanuals.com/home/childrens_health_issues/problems_in_newborns/sepsis_in_the_newborn.html?qt=sepsis%20newborn&alt=sh
60. Kosim M.S. Gawat Darurat Neonatus pada Persalinan Preterm. Sari Pediatri [internet]. 2006 [cited 2014 Feb 2]: 7(4)225-231. Available from <http://saripediatri.idai.or.id/pdf/7-4-9.pdf>
61. Gunaseragan, Darishini P. Gambaran Bayi Baru Lahir Dengan Hiperbilirubinemia Di RSUP H. Adam Malik Pada Tahun 2011 [internet]. 2013 [cited 2014 Feb 2]. Available from <http://repository.usu.ac.id/bitstream/123456789/37957/4/Chapter%20II.pdf>
62. Ernawati, Aeda. Faktor-faktor yang Berhubungan dengan Persalinan Sectio Caesarea di Kabupaten Pati-Studi pada RSUD RAA Soewondo dan Rumah Sakit Islam Pati [internet]. 2013 [cited 2014 Jul 6]. Available from <http://litbang.patikab.go.id/index.php/jurnal/247-faktor-faktor-yang-berhubungan-dengan-persalinan-sectio-caesarea-di-kabupaten-pati-studi-pada-rsud-raa-soewondo-dan-rumah-sakit-islam-pati>
63. Annisa, Silvia. Faktor-faktor risiko persalinan seksio sesarea di RSUD Dr. Adjidarmo Lebak pada bulan oktober-desember 2010 [internet]. 2010 [cited 2014 Jul 6]. Available from http://perpus.fkik.uinjkt.ac.id/file_digital/Silvia%20Aulia%20Annisa.pdf
64. Sadler T.D. Langman medical embriology. Jakarta : EGC; 2010.
65. Poma, Pedro. Premature rupture of membranes. The national medical assotiation [internet]. 1996 [cited 2014 Jul 6]: 88(1).
66. Joy, Saju. Caesarean delivery. Medscape [internet]. 2014 [cited 2014 Jul 6]. Available from: <http://emedicine.medscape.com/article/263424-overview#showall>

67. Marsidi, Erza. Karakteristik ibu yang mengalami persalinan dengan seksio sesarea yang dirawat inap di rumah sakit umum daerah sidikalang tahun 2007 [internet]. 2007 [cited 2014 Jul 6]. Available from <http://repository.usu.ac.id/bitstream/123456789/14620/1/09E00837.pdf>
68. Kuklina E.V., Ayala C., Callaghan W. Hypertensive diodeers and savere obstetric morbidity in United States. American college of obstericians and gynecologists [internet]. 2009 [cited 2014 Jul 06]: 6(113):1299-1306.
69. Fahrudin. Analisa beberapa faktor ririko kejadian asfiksia neonatorum di kabupaten purworejo [disertasi]. Semarang: Universitas Diponegoro; 2003.
70. Koura G., Quedraogo S., Le Port A., Watier L., Cottrel G., Guera J., et al. Anaemia during pregnancy: impacton birth outcome and infant haemology level during the first 18 month of life. Tropical medicine and international health [internet]. 2012 [cited 2014 Jul 6]: 3 (17):283-291.
71. Owais A., Kalsoom U., Sughra U., Hadi U., Imran M.,. Effect of maternal anaemia on birth weight. J Ayub med coll abbotabad [internet]. 2011 [cited 2014 Jul 6]: 23(1):77-79.
72. Jayant D., Phalke., Bangal VB., Peeyuusha D., Shushen B. Maternal risk faktors for low birth wight neonates: a hospital based case-cotrol study in rural area of western maharashtra, India. National Journal of Community Medicine. 2011 [cited 2014 Jul 6]: 2(3): 394-398.
73. Dhananjaya C.D., Kiran B. Clinical profile of hypoglicemia in newborn babies in a rural hospital. International Journal of biological and medical research. 2011 [cited 2014 Jul 6]: 2(4): 1110-1114.
74. Simbolon, Densa. Faktor risiko sepsis pada bayi baru lahir di RSUS Curup Kabupaten Rejang Lebong. Bul. Panel Kesehatan. 2008 [cited 2014 Jul 6]: 3(36): 127-134.
75. Mauliku N.E., Nurjanah A. Faktor-faktor pada ibu bersalin yang berhubungan dengan kejadian hiperbilirubin pada bayi baru lahir di rumah sakit Dustra Cimahi tahun 2009. Jurnal kesehatan kartika. 2009 [cited 2014 Jul 6]: 29: 16-25.

76. Giraldo P.C., Araújo E.D., Junior J.E., Amaral R.L.C., Passos M.R.L., Gonçalves A.K. The prevalence of urogenital infections in pregnant women experiencing preterm and full-term labor. *Hindawi publishing cooperation* [internet]. 2011 [cited 2014 Jul 6]: 2012. Available from : <http://www.hindawi.com/journals/idoj/2012/878241/>
77. Dongol S., Singh J., Shrestha S. Clinical Profile of Birth Asphyxia in Dhulikhel Hospital: A Retrospective Study. *Journal of Nepal pediatrics society* [internet]. 2010 [cited 2014 Jul 6]: 30(3). Available from : <http://www.nepjol.info/index.php/JNPS/article/view/3916/3324>
78. Lee A.C.C. dkk. Risk factor for neonatal mortality due to birth asphyxia in southern Nepal. *National Public of Health* [internet]. 2008 [cited 2014 Jul 6]:121(5): 1381-1390. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2377391/>

Lampiran 1. Ethical Clearance

	<p>KOMISI ETIK PENELITIAN KESEHATAN (KEPK) FAKULTAS KEDOKTERAN UNIVERSITAS DIPONEGORO DAN RSUP dr KARIADI SEMARANG Sekretariat : Kantor Dekanat FK Undip Lt.3 Jl. Dr. Soetomo 18. Semarang 50231 Telp/Fax. 024-8318350</p>										
<p>ETHICAL CLEARANCE No. 142 /EC/FK-RSDK/2014</p>											
<p>Komisi Etik Penelitian Kesehatan Fakultas Kedokteran Universitas Diponegoro/ RSUP Dr. Kariadi Semarang, setelah membaca dan menelaah Usulan Penelitian dengan judul :</p>											
<p>FAKTOR RISIKO PREMATURITAS YANG BERPENGARUH TERHADAP LUARAN MATERNAL DAN PERINATAL BERDASARKAN USIA KEHAMILAN STUDI KASUS DI RSUP DR. KARIADI SEMARANG TAHUN 2013</p>											
<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">Peneliti Utama</td> <td style="width: 10%;">:</td> <td>Cahya Suspimantari</td> </tr> <tr> <td>Pembimbing</td> <td>:</td> <td>dr. M. Besari Adi Pramono, M.Si.Med,Sp.OG(K)</td> </tr> <tr> <td>Penelitian</td> <td>:</td> <td>Dilaksanakan di RSUP Dr.Kariadi Semarang.</td> </tr> </table>			Peneliti Utama	:	Cahya Suspimantari	Pembimbing	:	dr. M. Besari Adi Pramono, M.Si.Med,Sp.OG(K)	Penelitian	:	Dilaksanakan di RSUP Dr.Kariadi Semarang.
Peneliti Utama	:	Cahya Suspimantari									
Pembimbing	:	dr. M. Besari Adi Pramono, M.Si.Med,Sp.OG(K)									
Penelitian	:	Dilaksanakan di RSUP Dr.Kariadi Semarang.									
<p>Setuju untuk dilaksanakan, dengan memperhatikan prinsip-prinsip yang dinyatakan dalam Deklarasi Helsinki 1975, yang diamended di Seoul 2008 dan Pedoman Nasional Etik Penelitian Kesehatan (PNEPK) Departemen Kesehatan RI 2011</p>											
<p>Peneliti harus melampirkan 2 kopi lembar Informed consent yang telah disetujui dan ditandatangani oleh peserta penelitian pada laporan penelitian. Peneliti diwajibkan menyerahkan :</p> <ul style="list-style-type: none"> - Laporan kemajuan penelitian (clinical Trial) - Laporan kejadian efek samping jika ada - Laporan ke KEPK jika penelitian sudah selesai & dilampiri Abstrak Penelitian. 											
<p>Semarang, 10 APR 2014</p>											
<p>Komisi Etik Penelitian Kesehatan Fakultas Kedokteran Undip-RSUP Dr. Kariadi Sekretaris,</p>											
											
<p>Dr. dr. Selamat Budjijitno, M.Si.Med,Sp.B,Sp.B(K),Onk,FICS NIP. 197108072 008121 001</p>											

Lampiran 2. Surat izin penelitian



**KEMENTERIAN PENDIDIKAN DAN KEBUDAYAAN
UNIVERSITAS DIPONEGORO
FAKULTAS KEDOKTERAN**

Jl. Prof. H. Soedarto, SH – Tembalang – Semarang
Telepon 024-76928010, Fax. 024-76928011, Email : dean_fmdu@undip.ac.id

Nomor : 1204 /UN7.3.4/D1/PP/2014
Lampiran : 1 bendel
Perihal : Permohonan ijin penelitian dan pengambilan data rekam medik

04 MAR 2014

Yth. Direktur Utama
RSUP Dr. Kariadi
Semarang

Dengan hormat,

Bersama ini kami hadapkan mahasiswa Fakultas Kedokteran Universitas Diponegoro :

Nama : Cahya Suspimantari
NIM : 22010110120024
Semester : VIII (delapan)

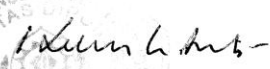
Mohon diijinkan melakukan penelitian dan meminjam data rekam medik di RSUP Dr. Kariadi Semarang, dalam rangka penyusunan Karya Tulis Ilmiah mahasiswa. Terlampir proposal mahasiswa yang bersangkutan.

Judul/ Topik : Faktor Risiko Prematuritas yang Berpengaruh terhadap Luaran Maternal dan Perinatal Berdasarkan Usia Kehamilan (Studi Kasus di RSUP Dr. Kariadi Semarang Tahun 2013)

Pembimbing : dr. M. Besari Adi Pramono, M.Si.Med, Sp.OG(K)

Atas perhatian dan kerjasamanya diucapkan terima kasih.

a.n Dekan
Pembantu Dekan I,


dr. Herman Kristanto, MS, Sp.OG(K)
NIP. 196305051989031003

Tembusan :

1. Dekan (sebagai laporan)
2. Ketua Tim Karya Tulis Ilmiah
3. Kepala Bagian Diklit RSUP Dr. Kariadi Semarang
4. Kepala Instalasi Rekam Medik RSUP Dr. Kariadi Semarang
5. Pembimbing
6. Mahasiswa Yang Bersangkutan

Lampiran 3. Output SPSS

Crosstabs

1. Usia * Persalinan tindakan * Usia kehamilan

Crosstab

Usia kehamilan				Persalinan tindakan		Total
				Dengan tindakan	Tanpa tindakan	
28 - < 32 minggu	Usia	beresiko	Count	1	4	5
			Expected Count	,9	4,1	5,0
			% within Persalinan tindakan	50,0%	44,4%	45,5%
	tidak beresiko	Count	1	5	6	
		Expected Count	1,1	4,9	6,0	
		% within Persalinan tindakan	50,0%	55,6%	54,5%	
Total	Count	2	9	11		
	Expected Count	2,0	9,0	11,0		
	% within Persalinan tindakan	100,0%	100,0%	100,0%		
32 - < 37 minggu	Usia	beresiko	Count	1	15	16
			Expected Count	4,3	11,7	16,0
			% within Persalinan tindakan	5,3%	28,8%	22,5%
	tidak beresiko	Count	18	37	55	
		Expected Count	14,7	40,3	55,0	
		% within Persalinan tindakan	94,7%	71,2%	77,5%	
Total	Count	19	52	71		
	Expected Count	19,0	52,0	71,0		
	% within Persalinan tindakan	100,0%	100,0%	100,0%		

Chi-Square Tests

Usia kehamilan		Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
28 - < 32 minggu	Pearson Chi-Square	,020 ^b	1	,887	1,000	,727
	Continuity Correction ^a	,000	1	1,000		
	Likelihood Ratio	,020	1	,887		
	Fisher's Exact Test					
	Linear-by-Linear Association	,019	1	,892		
	N of Valid Cases	11				
32 - < 37 minggu	Pearson Chi-Square	4,433 ^c	1	,035	,052	,030
	Continuity Correction ^a	3,185	1	,074		
	Likelihood Ratio	5,456	1	,020		
	Fisher's Exact Test					
	Linear-by-Linear Association	4,371	1	,037		
	N of Valid Cases	71				

a. Computed only for a 2x2 table

b. 4 cells (100,0%) have expected count less than 5. The minimum expected count is ,91.

c. 1 cells (25,0%) have expected count less than 5. The minimum expected count is 4,28.

Risk Estimate

Usia kehamilan		Value	95% Confidence Interval	
			Lower	Upper
28 - < 32 minggu	Odds Ratio for Usia (beresiko / tidak beresiko)	1,250	,058	26,869
	For cohort Persalinan tindakan = Dengan tindakan	1,200	,098	14,690
	For cohort Persalinan tindakan = Tanpa tindakan	,960	,545	1,690
	N of Valid Cases	11		
	32 - < 37 minggu	Odds Ratio for Usia (beresiko / tidak beresiko)	,137	,017
For cohort Persalinan tindakan = Dengan tindakan	,191	,028	1,323	
For cohort Persalinan tindakan = Tanpa tindakan	1,394	1,114	1,743	
N of Valid Cases	71			

2. Usia * Berat bayi lahir * Usia kehamilan

Crosstab

Usia kehamilan				Berat bayi lahir		Total
				BBLR	Normal	
28 - < 32 minggu	Usia	beresiko	Count	5		5
			Expected Count	5,0		5,0
			% within Berat bayi lahir	45,5%		45,5%
	tidak beresiko	Count	6		6	
		Expected Count	6,0		6,0	
		% within Berat bayi lahir	54,5%		54,5%	
	Total	Count	11		11	
		Expected Count	11,0		11,0	
		% within Berat bayi lahir	100,0%		100,0%	
32 - < 37 minggu	Usia	beresiko	Count	7	9	16
			Expected Count	8,3	7,7	16,0
			% within Berat bayi lahir	18,9%	26,5%	22,5%
	tidak beresiko	Count	30	25	55	
		Expected Count	28,7	26,3	55,0	
		% within Berat bayi lahir	81,1%	73,5%	77,5%	
	Total	Count	37	34	71	
		Expected Count	37,0	34,0	71,0	
		% within Berat bayi lahir	100,0%	100,0%	100,0%	

Chi-Square Tests

Usia kehamilan		Value	df	Asy mp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
28 - < 32 minggu	Pearson Chi-Square	. ^b				
	N of Valid Cases	11				
32 - < 37 minggu	Pearson Chi-Square	,579 ^c	1	,447		
	Continuity Correction ^a	,227	1	,634		
	Likelihood Ratio	,579	1	,447		
	Fisher's Exact Test				,572	,317
	Linear-by-Linear Association	,571	1	,450		
	N of Valid Cases	71				

a. Computed only for a 2x2 table

b. No statistics are computed because Berat bayi lahir is a constant.

c. 0 cells (,0%) have expected count less than 5. The minimum expected count is 7,66.

Risk Estimate

Usia kehamilan		Value	95% Confidence Interval	
			Lower	Upper
28 - < 32 minggu	Odds Ratio for Usia (beresiko / tidak beresiko)	. ^a		
	N of Valid Cases	71		
32 - < 37 minggu	Odds Ratio for Usia (beresiko / tidak beresiko)	,648	,211	1,989
	For cohort Berat bayi lahir = BBLR	,802	,438	1,470
	For cohort Berat bayi lahir = Normal	1,238	,736	2,082

a. No statistics are computed because Berat bayi lahir is a constant.

Logistic Regression

1. asfiksia

Case Processing Summary

Unweighted Cases ^a		N	Percent
Selected Cases	Included in Analysis	71	100,0
	Missing Cases	0	,0
	Total	71	100,0
Unselected Cases		0	,0
Total		71	100,0

a. If weight is in effect, see classification table for the total number of cases.

Dependent Variable Encoding

Original Value	Internal Value
Ya	0
Tidak	1

Block 0: Beginning Block

Variables not in the Equation

			Score	df	Sig.
Step 0	Variables	perd.ante	1,712	1	,191
		Gemeli	3,279	1	,070
		ISK	2,692	1	,101
	Overall Statistics	8,804	3	,032	

Block 1: Method = Backward Stepwise (Likelihood Ratio)

Variables in the Equation

		B	S. E.	Wald	df	Sig.	Exp(B)
Step 0	Constant	1,317	,291	20,530	1	,000	3,733

Omnibus Tests of Model Coefficients

		Chi-square	df	Sig.
Step 1	Step	8,560	3	,036
	Block	8,560	3	,036
	Model	8,560	3	,036

Classification Table^{a,b}

Observed			Predicted		
			Asfiksia		Percentage Correct
			Ya	Tidak	
Step 0	Asfiksia	Ya	0	15	,0
		Tidak	0	56	100,0
Overall Percentage					78,9

a. Constant is included in the model.

b. The cut v alue is ,500

Classification Table^c

Observed			Predicted		
			Asfiksia		Percentage Correct
			Ya	Tidak	
Step 1	Asfiksia	Ya	4	11	26,7
		Tidak	5	51	91,1
Overall Percentage					77,5

a. The cut v alue is ,500

Model Summary

Step	-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
1	64,659 ^a	,114	,177

a. Estimation terminated at iteration number 5 because parameter estimates changed by less than ,001.

Variables in the Equation

	B	S.E.	Wald	df	Sig.	Exp(B)	95,0% C.I. for EXP(B)		
							Lower	Upper	
Step 1	perd.ante	1,093	,663	2,717	1	,099	2,982	,813	10,932
	Gemeli	1,701	,926	3,374	1	,066	5,478	,892	33,634
	ISK	1,426	,699	4,162	1	,041	4,162	1,058	16,376
	Constant	-5,945	2,639	5,077	1	,024	,003		

a. Variable(s) entered on step 1: perd.ante, Gemeli, ISK.

Model if Term Removed

Variable	Model Log Likelihood	Change in -2 Log Likelihood	df	Sig. of the Change	
Step 1	perd.ante	-33,774	2,888	1	,089
	Gemeli	-33,957	3,255	1	,071
	ISK	-34,427	4,195	1	,041

Logistic Regression

2. Berat bayi lahir

Case Processing Summary

Unweighted Cases ^a		N	Percent
Selected Cases	Included in Analysis	71	100,0
	Missing Cases	0	,0
	Total	71	100,0
Unselected Cases		0	,0
Total		71	100,0

a. If weight is in effect, see classification table for the total number of cases.

Dependent Variable Encoding

Original Value	Internal Value
BBLR	0
Normal	1

Block 0: Beginning Block

Classification Table^{a,b}

Observed			Predicted		
			Berat bayi lahir		Percentage Correct
			BBLR	Normal	
Step 0	Berat bayi lahir	BBLR	37	0	100,0
		Normal	34	0	,0
Overall Percentage					52,1

a. Constant is included in the model.

b. The cut value is ,500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)
Step 0	Constant	-,085	,238	,127	1	,722	,919

Variables not in the Equation

			Score	df	Sig.
Step 0	Variables	Anemia	4,262	1	,039
		KPD	1,580	1	,209
		Gemeli	2,560	1	,110
Overall Statistics			7,684	3	,053

Block 1: Method = Backward Stepwise (Likelihood Ratio)

Omnibus Tests of Model Coefficients

		Chi-square	df	Sig.
Step 1	Step	8,214	3	,042
	Block	8,214	3	,042
	Model	8,214	3	,042
Step 2 ^a	Step	-1,144	1	,285
	Block	7,070	2	,029
	Model	7,070	2	,029

a. A negative Chi-squares value indicates that the Chi-squares value has decreased from the previous step.

Model Summary

Step	-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
1	90,086 ^a	,109	,146
2	91,230 ^a	,095	,126

a. Estimation terminated at iteration number 4 because parameter estimates changed by less than ,001.

Classification Table^a

Observed			Predicted		
			Berat bayi lahir		Percentage Correct
			BBLR	Normal	
Step 1	Berat bayi lahir	BBLR	23	14	62,2
		Normal	12	22	64,7
Overall Percentage					63,4
Step 2	Berat bayi lahir	BBLR	23	14	62,2
		Normal	12	22	64,7
Overall Percentage					63,4

a. The cut value is ,500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)	95,0% C.I. for EXP(B)	
								Lower	Upper
Step 1	Anemia	,984	,508	3,744	1	,053	2,674	,987	7,242
	KPD	,558	,524	1,134	1	,287	1,747	,626	4,876
	Gemeli	1,670	1,149	2,112	1	,146	5,315	,559	50,566
	Constant	-5,601	2,530	4,901	1	,027	,004		
Step 2	Anemia	1,023	,504	4,124	1	,042	2,782	1,036	7,468
	Gemeli	1,671	1,144	2,133	1	,144	5,319	,565	50,108
	Constant	-4,902	2,415	4,120	1	,042	,007		

a. Variable(s) entered on step 1: Anemia, KPD, Gemeli.

Model if Term Removed

Variable		Model Log Likelihood	Change in -2 Log Likelihood	df	Sig. of the Change
Step 1	Anemia	-46,971	3,857	1	,050
	KPD	-45,615	1,144	1	,285
	Gemeli	-46,404	2,721	1	,099
Step 2	Anemia	-47,750	4,271	1	,039
	Gemeli	-46,993	2,756	1	,097

Variables not in the Equation

			Score	df	Sig.
Step 2 ^a	Variables	KPD	1,144	1	,285
	Overall Statistics		1,144	1	,285

a. Variable(s) removed on step 2: KPD.

Lampiran 4. Identitas mahasiswa

IDENTITAS MAHASISWA

Nama : Cahya Suspimantari
 NIM : 22010110120024
 Tempat/tanggal lahir : Bekasi, 10 September 1992
 Jenis kelamin : Perempuan
 Alamat : Jl. Aru 2 blok D8 no. 62/63, Jatiasih Indah-Bekasi
 Nomor Teleponn : (021) 8214246
 Nomor HP : 085710021024
 e-mail : cahyasuspimantari@yahoo.com

Riwayat Pendidikan Formal

- | | | | |
|-------------|-------------------------|-------------|--------|
| 1. SD | : SD Negeri Jatirasa 03 | Lulus tahun | : 2004 |
| 2. SMP | : SMP Negeri 9 Bekasi | Lulus tahun | : 2007 |
| 3. SMA | : SMA Negeri 2 Bekasi | Lulus tahun | : 2010 |
| 4. FK UNDIP | : Masuk tahun | | : 2010 |

Keanggotaan Organisasi

- | | |
|-------------|-------------------------|
| 1. Maladica | Tahun 2011 s/d sekarang |
|-------------|-------------------------|