

LAMPIRAN

Lampiran 1. Jadwal Penelitian

No .	Kegiatan	2024								202 5
		Me i	Ju n	Ju l	Ag u	Se p	Ok t	No v	De s	Jan
1.	Pembuatan Draft Proposal Skripsi									
2.	Proses Bimbingan									
3.	Sidang Seminar Proposal Skripsi									
4.	Perbaikan Proposal Skripsi									
5.	Pengumpul an Data									
6.	Analisis Data									
7.	Sidang Seminar Hasil									

Lampiran 2. Kuesioner Pengetahuan Diabetes Melitus Tipe 2 (DKQ24)

NO.	PERTANYAAN	YA	TIDAK	TIDAK TAHU
1.	Makan terlalu banyak gula dan makanan manis lainnya merupakan penyebab diabetes			
2.	Penyebab umum diabetes adalah kurangnya insulin yang efektif dalam tubuh.			
3.	Diabetes disebabkan karena kegagalan ginjal mencegah gula masuk ke dalam kencing			
4.	Ginjal memproduksi insulin			
5.	Pada diabetes yang tidak diobati, jumlah gula dalam darah biasanya meningkat			
6.	Jika saya menderita diabetes, anak-anak saya berpeluang lebih besar menderita diabetes juga			
7.	Diabetes dapat disembuhkan			
8.	Kadar gula darah puasa 210 adalah terlalu tinggi.			
9.	Cara terbaik untuk memeriksa diabetes adalah dengan tes kencing			
10.	Olah raga teratur akan meningkatkan kebutuhan atas insulin atau obat diabetes lainnya.			
11.	Ada dua jenis utama diabetes: Tipe 1 (tergantung pada insulin) dan Tipe 2 (tidak tergantung pada insulin)			
12.	Insulin bekerja disebabkan karena makan terlalu banyak			
13.	Obat lebih penting daripada diet dan olah raga untuk mengendalikan diabetes			
14.	Diabetes sering menyebabkan peredaran darah yang tidak baik			
15.	Luka dan lecet pada penderita diabetes sembuhnya lebih lama			
16.	Penderita diabetes harus sangat berhati-hati saat memotong kuku kaki			
17.	Penderita diabetes harus membersihkan luka dengan yodium (betadine) dan alkohol			
18.	Cara memasak makanan sama pentingnya dengan makanan yang dimakan oleh penderita diabetes			
19.	Diabetes dapat merusak ginjal			
20.	Diabetes dapat menyebabkan mati rasa pada tangan, jari-jari dan kaki			
21.	Gemetaran dan berkeringat merupakan tanda tingginya kadar gula darah			
22.	Sering kencing dan haus merupakan tanda rendahnya kadar gula darah			
23.	Kaos kaki yang ketat boleh dipakai oleh penderita diabetes			
24.	Diet diabetes sebagian besar terdiri dari makanan-makanan khusus			



Table 5-0-5 Psychometric properties of the Indonesian version of DKQ-24 instrument

No.	Item and Correct Answer	Difficulty Factor	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
1.	Eating too much sugar and other sweet foods is a cause of diabetes. [No]	0.05	-0.027	0.609
2.	The usual cause of diabetes is lack of effective insulin in the body. [Yes]	0.46	0.416	0.559
3.	Diabetes is caused by failure of the kidneys to keep sugar out of the urine. [No]	0.18	0.334	0.576
4.	Kidneys produce insulin. [No]	0.17	0.388	0.569
5.	In untreated diabetes, the amount of sugar in the blood usually increases. [Yes]	0.90	0.206	0.594
6.	If I am diabetic, my children have a higher chance of being diabetic. [Yes]	0.59	0.321	0.574
7.	Diabetes can be cured. [No]	0.36	0.285	0.579
8.	A fasting blood sugar level of 210 is too high. [Yes]	0.80	0.277	0.582
9.	The best way to check my diabetes is by testing my urine. [No]	0.49	0.211	0.590
10.	Regular exercise will increase the need for insulin or other diabetic medication. [No]	0.17	0.244	0.587
11.	There are two main types of diabetes: Type 1 (insulin-dependent) and Type 2 (non-insulin dependent). [Yes]	0.35	0.282	0.580
12.	An insulin reaction is caused by too much food. [No]	0.17	0.319	0.578
13.	Medication is more important than diet and exercise to control my diabetes. [No]	0.40	0.260	0.583
14.	Diabetes often causes poor circulation. [Yes]	0.76	0.114	0.602
15.	Cuts and abrasions on diabetes heal more slowly. [Yes]	0.76	0.039	0.611
16.	Diabetics should take extra care when cutting their toenails. [Yes]	0.95	0.034	0.605
17.	A person with diabetes should cleanse a cut with iodine and alcohol. [No]	0.06	-0.078	0.613
18.	The way I prepare my food is as important as the foods I eat. [Yes]	0.70	-0.050	0.624
19.	Diabetes can damage my kidneys. [Yes]	0.81	0.201	0.591
20.	Diabetes can cause loss of feeling in my hands, fingers and feet. [Yes]	0.83	0.055	0.607
21.	Shaking and sweating are signs of high blood sugar. [No]	0.17	0.143	0.598
22.	Frequent urination and thirst are signs of low blood sugar. [No]	0.53	-0.033	0.625
23.	Tight elastic hose or socks are not bad for diabetics. [No]	0.45	0.297	0.577
24.	A diabetic diet consists mostly of special foods. [No]	0.22	0.138	0.599

Lampiran 3. Kuesioner Prediksi Risiko DMT2 (AUSDRISK)

1. Your age group

- Under 35 years ☐ 0 points
 35 – 44 years ☐ 2 points
 45 – 54 years ☐ 4 points
 55 – 64 years ☐ 6 points
 65 years or over ☐ 8 points

2. Your gender

- Female ☐ 0 points
 Male ☐ 3 points

3. Your ethnicity/country of birth:

3a. Are you of Aboriginal, Torres Strait Islander, Pacific Islander or Maori descent?

- No ☐ 0 points
 Yes ☐ 2 points

3b. Where were you born?

- Australia ☐ 0 points
 Asia (including the Indian sub-continent), Middle East, North Africa, Southern Europe ☐ 2 points
 Other ☐ 0 points

4. Have either of your parents, or any of your brothers or sisters been diagnosed with diabetes (type 1 or type 2)?

- No ☐ 0 points
 Yes ☐ 3 points

5. Have you ever been found to have high blood glucose (sugar) (for example, in a health examination, during an illness, during pregnancy)?

- No ☐ 0 points
 Yes ☐ 6 points

6. Are you currently taking medication for high blood pressure?

- No ☐ 0 points
 Yes ☐ 2 points

7. Do you currently smoke cigarettes or any other tobacco products on a daily basis?

- No ☐ 0 points
 Yes ☐ 2 points

If you scored 6-11 points in the AUSDRISK you may be at increased risk of type 2 diabetes. Discuss your score and your individual risk with your doctor. Improving your lifestyle may help reduce your risk of developing type 2 diabetes.

8. How often do you eat vegetables or fruit?

- Every day ☐ 0 points
 Not every day ☐ 1 point

9. On average, would you say you do at least 2.5 hours of physical activity per week (for example, 30 minutes a day on 5 or more days a week)?

- Yes ☐ 0 points
 No ☐ 2 points

10. Your waist measurement taken below the ribs (usually at the level of the navel, and while standing)

Waist measurement (cm)

For those of Asian or Aboriginal or Torres Strait Islander descent:

- | Men | Women | |
|------------------|-----------------|-----------------------------------|
| Less than 90 cm | Less than 80 cm | ☐ 0 points |
| 90 – 100 cm | 80 – 90 cm | ☐ 4 points |
| More than 100 cm | More than 90 cm | ☐ 7 points |

For all others:

- | Men | Women | |
|------------------|------------------|-----------------------------------|
| Less than 102 cm | Less than 88 cm | ☐ 0 points |
| 102 – 110 cm | 88 – 100 cm | ☐ 4 points |
| More than 110 cm | More than 100 cm | ☐ 7 points |

Add up your points

Your risk of developing type 2 diabetes within 5 years*:

- ☐ **5 or less: Low risk**
 Approximately one person in every 100 will develop diabetes.
- ☐ **6-11: Intermediate risk**
 For scores of 6-8, approximately one person in every 50 will develop diabetes. For scores of 9-11, approximately one person in every 30 will develop diabetes.
- ☐ **12 or more: High risk**
 For scores of 12-15, approximately one person in every 14 will develop diabetes. For scores of 16-19, approximately one person in every 7 will develop diabetes. For scores of 20 and above, approximately one person in every 3 will develop diabetes.

*The overall score may overestimate the risk of diabetes in those aged less than 25 years.

If you scored 12 points or more in the AUSDRISK you may have undiagnosed type 2 diabetes or be at high risk of developing the disease. See your doctor about having a fasting blood glucose test. Act now to prevent type 2 diabetes.

Lampiran 4. Surat Izin Etika Penelitian

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Komite Etik Penelitian Kesehatan
Fakultas Kedokteran dan Ilmu Kesehatan
Universitas Pertahanan Republik Indonesia

ETHICS COMMITTEE APPROVAL

Ref. No. 24- 00- 040

Title of the Research Protocol : Hubungan Tingkat Pengetahuan Diabetes Melitus Tipe 2 dengan Prediksi Risiko Diabetes Melitus Tipe 2 pada Pegawai di Lingkungan Fakultas Kedokteran dan Ilmu Kesehatan Universitas Pertahanan RI

Document(s) Approval and revision : Protocol, Informed Consent

Principle Investigator (PI) : Regina Yorinda Marvella

Participating Investigator : 1. dr. Handrian Rahman Purawijaya, Sp. Em. M.A.R.S.
2. Ismalia Husna, S.Si., M.Biomed
3. dr. Dani Pramudya, Sp.Em.
4. dr. Venty Muliana Sari Soeroso, M.Sc., M.Si, Med. CIQaR

Date of Approval : 29 Agustus 2024

Valid for : 1 year from the date of approval

Institution(s)/place(s) of research : Kampus Universitas Pertahanan Republik Indonesia, Kawasan IPSC Sentul, Kabupaten Bogor, Jawa Barat

The Medical Research Ethics Committee of Indonesian Defence University (MREC Unhan RI) states that the document above meets the ethical principle outlined in the International and National Guidelines on ethical standards and procedures for researches in human being.

The MREC Unhan RI has the right to monitor the research activities at any time.

The PI is obliged to submit the final report upon the complementary of study.

Panel's Vice Chairperson



Dr. Arif Budi Witarto, B.Eng., M.Eng.

Panel's Secretary



Zahwa Arsy Azzahra, M.Sc(Bioethics).

Lampiran 5. Dokumentasi Pengambilan Data



Lampiran 6. Data SPSS

Kode skor kuesioner 1 * Kode skor kuesioner 2 Crosstabulation						
			Kode skor kuesioner 2			Total
			low risk	intermediate risk	high risk	
Kode skor kuesioner 1	kurang	Count	1	5	7	13
		Expected Count	1.4	5.1	6.5	13.0
		% within Kode skor kuesioner 1	7.7%	38.5%	53.8%	100.0%
		% within Kode skor kuesioner 2	14.3%	20.0%	21.9%	20.3%
		% of Total	1.6%	7.8%	10.9%	20.3%
	cukup	Count	3	12	13	28
		Expected Count	3.1	10.9	14.0	28.0
		% within Kode skor kuesioner 1	10.7%	42.9%	46.4%	100.0%
		% within Kode skor kuesioner 2	42.9%	48.0%	40.6%	43.8%
		% of Total	4.7%	18.8%	20.3%	43.8%
	baik	Count	3	8	12	23
		Expected Count	2.5	9.0	11.5	23.0
		% within Kode skor kuesioner 1	13.0%	34.8%	52.2%	100.0%
		% within Kode skor kuesioner 2	42.9%	32.0%	37.5%	35.9%
		% of Total	4.7%	12.5%	18.8%	35.9%
Total		Count	7	25	32	64
		Expected Count	7.0	25.0	32.0	64.0
		% within Kode skor kuesioner 1	10.9%	39.1%	50.0%	100.0%
		% within Kode skor kuesioner 2	100.0%	100.0%	100.0%	100.0%
		% of Total	10.9%	39.1%	50.0%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)	Point Probability
Pearson Chi-Square	.564 ^a	4	.967	.980		
Likelihood Ratio	.574	4	.966	.980		
Fisher's Exact Test	.714			.993		
Linear-by-Linear Association	.051 ^b	1	.821	.901	.461	.097
N of Valid Cases	64					

a. 3 cells (33.3%) have expected count less than 5. The minimum expected count is 1.42.

b. The standardized statistic is -.227.

Correlations

			Kode skor kuesioner 1	Kode skor kuesioner 2
Kendall's tau_b	Kode skor kuesioner 1	Correlation Coefficient	1.000	-.014
		Sig. (2-tailed)	.	.906
		N	64	64
	Kode skor kuesioner 2	Correlation Coefficient	-.014	1.000
		Sig. (2-tailed)	.906	.
		N	64	64
Spearman's rho	Kode skor kuesioner 1	Correlation Coefficient	1.000	-.014
		Sig. (2-tailed)	.	.910
		N	64	64
	Kode skor kuesioner 2	Correlation Coefficient	-.014	1.000
		Sig. (2-tailed)	.910	.
		N	64	64

Golongan Umur

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	dibawah 35 tahun	20	31.3	31.3	31.3
	35-44 tahun	18	28.1	28.1	59.4
	45-54 tahun	12	18.8	18.8	78.1
	55-64 tahun	13	20.3	20.3	98.4
	diatas dari 65 tahun	1	1.6	1.6	100.0
	Total	64	100.0	100.0	

Merokok

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	tidak	50	78.1	78.1	78.1
	ya	14	21.9	21.9	100.0
	Total	64	100.0	100.0	

obat darah tinggi

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	tidak	54	84.4	84.4	84.4
	ya	10	15.6	15.6	100.0
	Total	64	100.0	100.0	

Aktivitas Fisik

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	ya	44	68.8	68.8	68.8
	tidak	20	31.3	31.3	100.0
	Total	64	100.0	100.0	

Lingkar Pinggang

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	normal	24	37.5	37.5	37.5
	berlebih	20	31.3	31.3	68.8
	sangat berlebih	20	31.3	31.3	100.0
	Total	64	100.0	100.0	



Konsumsi sayur dan buah

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	setiap hari	30	46.9	46.9	46.9
	tidak setiap hari	34	53.1	53.1	100.0
	Total	64	100.0	100.0	



Keturunan DM

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	tidak	45	70.3	70.3	70.3
	ya	19	29.7	29.7	100.0
	Total	64	100.0	100.0	

Lampiran 7. Izin Penelitian

FAKULTAS KEDOKTERAN DAN ILMU KESEHATAN PRODI SARJANA KEDOKTERAN

NOTA DINAS

NOMOR : B/ND/ 2024 /IX/2024/Ked

Kepada : Yth. Dekan FKIK Unhan RI
Dari : Kepala Program Studi Sarjana FKIK Unhan RI
Hal : Permohonan Izin Pengambilan Data Penelitian Skripsi

1. Dasar:
 - a. Keputusan Rektor Universitas Pertahanan Republik Indonesia Nomor: KEP/260/XII/2023 tanggal 11 Desember 2023 tentang Program Kerja dan Anggaran Universitas Pertahanan TA. 2024.
 - b. Keputusan Rektor Unhan RI Nomor: KEP/215/VIII/2021 tanggal 27 Agustus 2021 tentang Kalender Akademik Program Sarjana (S1) *Cohort* II Unhan RI Tahun Akademik 2021 s.d. 2024.
 - c. Surat permohonan izin pengambilan data skripsi tanggal 14 Oktober 2024.
2. Sehubungan dasar di atas, dengan hormat diberitahukan bahwa Kadet Mahasiswa *Cohort* II Prodi Sarjana Kedokteran akan melaksanakan pengambilan data skripsi pada : (daftar nama Kadet dan judul penelitian terlampir).
 - a. Hari/Tanggal : periode bulan Oktober s.d. November 2024
 - b. Tempat : Kampus Unhan RI
3. Berkenaan hal tersebut, mohon dapatnya Dekan FKIK mengizinkan kegiatan dan meneruskan surat kepada Karo Akademik Unhan RI untuk memberikan izin kepada Kadet Mahasiswa.
4. Demikian mohon menjadikan periksa.

Bogor, 17 Oktober 2024
Kepala Program Studi Sarjana Kedokteran



Tembusan:
1. Wadep II FKIK Unhan RI
2. Pit. Wadep II FKIK Unhan RI
3. Pit. Kasubbag Umum FKIK Unhan RI.

dr. Lila Irawati Tjahjo Widuri, M.Kes., Sp. An-TI., Subsp. IC(K)
Kolonel Laut (K/W) NRP 12434/P

Lampiran Nota Dinas Prodi Ked FKIK Unhan RI

Nomor : B/ND/ 202 /X/2024/Ked

Tanggal : 7 Oktober 2024

LAMPIRAN NAMA KADET PESERTA PENGAMBILAN DATA PENELITIAN SKRIPSI

NO	NAMA KADET	NIM	JUDUL PENELITIAN	DOSEN PEMBIMBING I	DOSEN PEMBIMBING II
1.	Regina Yorinda Marvella	320210101064	Hubungan Tingkat Pengetahuan Diabetes Melitus Tipe 2 dengan Prediksi Risiko Diabetes Melitus Tipe 2 pada Pegawai di Lingkungan Fakultas Kedokteran dan Ilmu Kesehatan Universitas Pertahanan RI	dr. Handrian Rahman Purawijaya, Sp.Em., M.A.R.S	Ismalia Husna,S.Si., M.Biomed

Bogor, 7 Oktober 2024
Kepala Program Studi Sarjana Kedokteran



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