

LAMPIRAN

Lampiran 1. Format Pengkajian Resep Secara Administrasi

Administrasi											
No	Nama Dokter	SIP	Alamat Dokter	Paraf Dokter	Nama Pasien	Alamat Pasien	Umur Pasien	Jenis Kelamin	Berat Badan	Tanggal Resep	Nomor telepon
1	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
2	-	-	✓	✓	✓	-	✓	-	-	✓	✓
3	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
4	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
5	-	-	✓	✓	✓	-	-	-	-	✓	✓
6	-	-	✓	✓	✓	-	-	-	-	✓	✓
7	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
8	-	-	✓	✓	✓	-	-	-	-	✓	-
9	-	-	✓	✓	✓	-	✓	-	-	✓	-
10	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
11	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
12	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
13	✓	-	✓	✓	✓	-	-	-	-	✓	✓
14	-	-	✓	✓	✓	-	-	-	-	✓	✓
15	-	✓	✓	✓	✓	-	✓	-	-	✓	✓
16	✓	-	✓	✓	✓	-	-	-	-	✓	✓
17	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
18	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
19	-	-	✓	✓	✓	-	-	-	-	✓	✓
20	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
21	✓	✓	✓	✓	✓	-	-	-	-	✓	-
22	✓	-	✓	✓	✓	-	✓	-	-	✓	✓
23	-	-	✓	✓	✓	-	✓	-	-	✓	✓
24	-	-	✓	✓	✓	-	✓	-	-	✓	✓
25	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
26	✓	✓	✓	✓	✓	-	-	✓	-	✓	✓
27	-	-	✓	✓	✓	-	✓	-	-	✓	-
28	✓	✓	✓	✓	✓	✓	-	-	-	-	✓
29	-	-	✓	✓	✓	-	✓	-	-	✓	✓
30	✓	-	✓	✓	✓	✓	✓	-	-	✓	✓
31	-	-	✓	✓	✓	✓	✓	-	-	✓	✓
32	✓	✓	✓	✓	✓	-	✓	-	-	✓	-
33	✓	✓	✓	✓	✓	-	-	-	-	✓	-
34	-	-	✓	✓	✓	-	-	-	-	✓	-
35	✓	✓	✓	✓	✓	-	-	-	-	✓	-
36	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
37	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
38	✓	-	✓	✓	✓	-	-	-	-	✓	✓
39	-	-	-	✓	✓	-	✓	-	-	✓	✓
40	-	-	✓	✓	✓	-	-	-	-	✓	✓
41	✓	✓	✓	✓	✓	✓	-	-	-	✓	✓
42	✓	✓	✓	✓	✓	✓	-	-	-	✓	✓
43	-	-	✓	✓	✓	✓	✓	-	-	-	-
44	✓	✓	✓	-	✓	-	✓	-	-	✓	✓
45	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
46	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
47	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
48	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
49	-	-	✓	✓	✓	✓	✓	-	-	✓	-
50	-	-	✓	✓	✓	✓	✓	-	-	✓	✓

Administrasi

No	Nama Dokter	SIP	Alamat Dokter	Paraf Dokter	Nama Pasien	Alamat Pasien	Umur Pasien	Jenis Kelamin	Berat Badan	Tanggal Resep	Nomor telepon
51	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
52	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
53	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
54	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
55	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
56	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
57	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
58	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
59	-	-	✓	✓	✓	-	-	-	-	✓	✓
60	✓	-	✓	✓	✓	-	✓	-	-	✓	✓
61	-	-	✓	✓	✓	-	✓	-	-	✓	✓
62	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
63	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
64	✓	✓	-	✓	✓	-	✓	-	-	✓	-
65	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
66	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
67	-	-	✓	✓	✓	✓	✓	-	-	✓	✓
68	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
69	-	-	✓	✓	✓	-	✓	-	-	✓	-
70	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
71	✓	✓	-	✓	✓	✓	✓	-	-	✓	✓
72	✓	✓	-	✓	✓	✓	✓	-	-	✓	-
73	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
74	-	-	✓	✓	✓	-	✓	-	-	-	✓
75	✓	-	✓	✓	✓	-	✓	-	-	✓	-
76	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
77	✓	✓	-	✓	✓	✓	-	-	-	✓	✓
78	✓	✓	✓	-	✓	✓	-	-	-	-	-
79	✓	✓	✓	✓	✓	-	-	-	-	✓	✓
80	-	-	✓	✓	✓	-	-	-	-	✓	-
81	-	-	✓	✓	✓	-	-	-	-	-	✓
82	-	-	-	✓	✓	✓	✓	-	-	-	-
83	✓	-	✓	✓	✓	✓	✓	-	-	✓	✓
84	✓	✓	✓	✓	✓	-	✓	-	-	✓	-
85	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
86	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
87	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
88	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
89	-	-	-	✓	✓	-	-	-	-	✓	-
90	-	-	✓	✓	✓	✓	-	-	-	✓	✓
91	-	-	✓	✓	✓	✓	-	-	-	✓	-
92	-	-	✓	✓	✓	-	✓	-	-	-	-
93	-	-	✓	✓	✓	-	✓	-	-	-	-
94	-	-	✓	✓	✓	-	✓	-	-	✓	✓
95	-	-	✓	✓	✓	✓	✓	-	-	✓	-
96	✓	✓	-	✓	✓	✓	✓	-	-	✓	-
97	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
98	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
99	✓	✓	✓	✓	✓	✓	✓	-	-	-	-
100	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓

Administrasi

No	Nama Dokter	SIP	Alamat Dokter	Paraf Dokter	Nama Pasien	Alamat Pasien	Umur Pasien	Jenis Kelamin	Berat Badan	Tanggal Resep	Nomor telepon
101	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
102	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
103	✓	-	✓	✓	✓	✓	✓	-	-	✓	-
104	-	-	-	✓	✓	✓	✓	-	-	✓	✓
105	✓	✓	✓	✓	✓	-	✓	-	-	✓	-
106	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
107	✓	✓	✓	✓	✓	-	-	-	-	✓	-
108	✓	✓	✓	✓	✓	✓	-	✓	-	✓	✓
109	✓	✓	-	✓	✓	✓	✓	-	-	✓	-
110	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
111	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
112	-	-	✓	✓	✓	✓	✓	-	-	✓	✓
113	✓	✓	✓	✓	✓	-	✓	-	-	✓	-
114	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
115	-	-	✓	✓	✓	✓	✓	-	-	✓	✓
116	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
117	-	-	✓	✓	✓	✓	✓	-	-	✓	✓
118	-	-	✓	✓	✓	-	✓	-	-	✓	-
119	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
120	-	-	✓	✓	✓	-	✓	-	-	✓	✓
121	✓	✓	✓	✓	✓	-	✓	-	-	✓	-
122	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
123	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
124	✓	✓	✓	✓	✓	✓	✓	-	-	-	✓
125	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
126	-	-	✓	✓	✓	-	✓	-	-	✓	✓
127	-	-	✓	✓	✓	-	✓	-	-	✓	-
128	-	-	-	✓	✓	-	✓	-	-	-	✓
129	✓	✓	-	✓	✓	✓	✓	-	-	✓	✓
130	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
131	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
132	-	-	✓	✓	✓	-	✓	-	-	✓	✓
133	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
134	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
135	✓	✓	✓	✓	✓	✓	✓	-	-	✓	-
136	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
137	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
138	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
139	✓	✓	✓	✓	✓	✓	✓	-	-	-	✓
140	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
141	-	-	✓	✓	✓	-	✓	-	-	✓	✓
142	-	-	✓	✓	✓	-	✓	-	-	✓	✓
143	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
144	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
145	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
146	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
147	✓	✓	✓	✓	✓	-	✓	-	-	✓	✓
148	-	-	✓	✓	✓	-	✓	-	-	✓	✓
149	✓	✓	✓	✓	✓	✓	✓	-	-	✓	✓
150	-	-	✓	✓	✓	✓	✓	-	-	✓	✓

Lampiran 2. Format Pengkajian Resep Secara Farmasetik

Farmasetik		
No	Bentuk sediaan	Kekuatan Sediaan
1	✓	✓
2	✓	✓
3	✓	✓
4	✓	✓
5	✓	✓
6	✓	✓
7	✓	✓
8	✓	-
9	✓	✓
10	✓	✓
11	✓	✓
12	-	✓
13	✓	✓
14	✓	✓
15	✓	✓
16	✓	✓
17	✓	✓
18	✓	✓
19	-	✓
20	✓	✓
21	✓	✓
22	✓	✓
23	✓	-
24	✓	✓
25	✓	-
26	-	✓
27	✓	✓
28	✓	-
29	✓	-
30	✓	✓
31	-	✓
32	✓	-
33	✓	-
34	✓	-
35	-	✓
36	✓	✓
37	✓	✓
38	✓	✓
39	✓	✓
40	✓	✓
41	✓	✓
42	✓	✓
43	✓	-
44	✓	✓
45	✓	✓
46	✓	✓
47	✓	✓
48	✓	-
49	✓	✓
50	✓	✓

Farmasetik		
No	Bentuk sediaan	Kekuatan Sediaan
51	✓	✓
52	✓	✓
53	✓	-
54	✓	✓
55	-	✓
56	✓	✓
57	✓	✓
58	✓	✓
59	✓	✓
60	✓	✓
61	✓	-
62	✓	✓
63	✓	✓
64	✓	✓
65	-	✓
66	✓	✓
67	✓	-
68	✓	✓
69	✓	✓
70	✓	-
71	✓	✓
72	✓	-
73	✓	-
74	✓	✓
75	✓	✓
76	✓	✓
77	✓	✓
78	✓	✓
79	✓	✓
80	✓	-
81	✓	✓
82	✓	✓
83	✓	✓
84	✓	-
85	✓	-
86	✓	-
87	✓	-
88	✓	✓
89	✓	✓
90	-	✓
91	✓	✓
92	✓	✓
93	✓	✓
94	✓	✓
95	✓	-
96	✓	✓
97	✓	✓
98	✓	✓
99	✓	✓
100	✓	✓

Farmasetik		
No	Bentuk sediaan	Kekuatan Sediaan
101	✓	✓
102	✓	-
103	✓	✓
104	-	✓
105	✓	✓
106	✓	-
107	✓	✓
108	✓	-
109	✓	✓
110	✓	-
111	✓	-
112	-	✓
113	✓	✓
114	✓	-
115	✓	-
116	✓	✓
117	✓	✓
118	✓	-
119	✓	✓
120	✓	✓
121	-	-
122	✓	✓
123	✓	✓
124	✓	✓
125	✓	✓
126	✓	-
127	-	✓
128		-
129	✓	✓
130	✓	✓
131	✓	-
132	✓	✓
133	✓	✓
134	✓	-
135	✓	✓
136	-	✓
137	✓	-
138	✓	✓
139	✓	✓
140	✓	-
141	✓	-
142	✓	✓
143	✓	✓
144	✓	-
145	✓	✓
146	✓	✓
147	✓	-
148	✓	-
149	✓	✓
150	✓	-

Lampiran 3. Surat Permohonan Izin Penelitian



Fakultas Farmasi
Universitas
Bhakti Kencana

Bandung, 18 Desember 2021

022 7830 760 022 7830 768

contact@bhaktikencana.id

Nomor : 1513/03.FF/UBK/XII/2021

Lamp : 1 Lembar

Perihal : Permohonan Izin Penelitian

Kepada Yth.

Pimpinan Apotek K24 Cibaduyut

di

Tempat

Dengan Hormat,

Sehubungan akan diselenggarakannya Penelitian Tugas Akhir bagi mahasiswa Program Studi DIII Farmasi, Fakultas Farmasi, Universitas Bhakti Kencana T.A 2021/2022, dengan ini kami mengajukan permohonan izin penelitian di tempat yang Bapak/Ibu Pimpin. Adapun *timeline* kemajuan tugas akhir terlampir dan berikut ini adalah nama mahasiswa yang akan Menyusun Proposal Tugas Akhir:

Nama	: Muhammad Akbar Syuhada
NPM	: 191FF01003
Judul Penelitian	: Pengkajian Kelengkapan Resep
Dosen Pembimbing	: apt. Elis Susilawati, M.Si.
Metode Penelitian	: Pengkajian Resep

Besar harapan kami, kiranya Bapak/Ibu berkenan mengizinkan permohonan ini. Atas perhatian dan kerjasamanya kami ucapkan terima kasih.

Mengetahui,

Dekan Fakultas Farmasi



Dr. apt. Patonah, M.Si.

NIK. 02012010051

Bandung, 18 Desember 2021

Ketua Program Studi DIII Farmasi



apt. Ika Kurnia Sukmawati, M.Si.

NIK. 02005010038

Lampiran 4. Surat Keterangan Bebas Akademik

Dok. No. 09.9.00/FRM-4/FF-SPMI



Jl. Soekarno Hatta No 754 Bandung
☎ 022 7830 760, 022 7830 768
✉ bku.ac.id contact@bku.ac.id

SURAT KETERANGAN

Perihal : Memenuhi persyaratan Akademik

Saya yang bertanda tangan dibawah ini menerangkan mahasiswa
berikut:

Nama : Muhammad Akbar Syuhada

NPM : 191FF01003

Telah memenuhi persyaratan akademik untuk mengikuti Sidang Karya Tulis Ilmiah

Demikian surat keterangan ini dibuat untuk digunakan sesuai dengan keperluannya.

Bandung, 10 Juni 2022

Kabag Akademik dan Kemahasiswaan

A blue ink signature, appearing to read "Arief", is written over a circular official stamp. The stamp contains the text "UNIVERSITAS BHAKTI KENCANA" and "FAKULTAS FARMASI" around a central emblem.

(Arief Pebriyanto, S.S)

Keterangan :

IPK : 3.3910 ($\geq 2,75$ (S1&D3); $\geq 3,00$ (PSPA))

Σ Nilai D : 1 (Max. 2)

Σ Nilai E : 0 (Harus 0)

Lampiran 5. Surat Keterangan Bebas Laboratorium



UPT-LAB
Unit Pelayanan Terpadu Laboratorium
Universitas Bhakti Kencana

Jl. Soekarno Hatta No 754 Bandung
☎ 022 7830 760, 022 7830 768
✉ bku.ac.id 📧 contact@bku.ac.id

No Doc: 09.17.00/FRM-3/UPT LAB_SPMI

SURAT KETERANGAN BEBAS LABORATORIUM

Saya yang bertanda tangan dibawah ini :

Nama : Sri Lestari Kartikawati, M.Keb.

NIK : 02003040113

Jabatan : Kepala UPT Laboratorium

Menerangkan bahwa mahasiswa dibawah ini :

Nama : Muhammad Akbar Syuhada

NPM : 191FF01003

Fakultas : Farmasi

Program Studi : D3 Reguler

Telah bebas kewajiban prihal segala sesuatu di UPT Laboratorium Universitas Bhakti Kencana.

Bandung, 9 Juni 2022

Kepala UPT Laboratorium



Sri Lestari Kartikawati, M.Keb.

