
KTI Devi Setiani

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Lampiran

1. Contoh resep

Dr. [REDACTED]
DOKTER SPESIALIS ANAK

Praktek :
Apotek Salim Farma
Jl. Margacinta No. 129
Telp. 7563219 Bandung

Rumah :
[REDACTED]
[REDACTED] (astra)
[REDACTED] ng Bandung

Kantor :
Bag. Anak RSHS
Telp 2034426
Bandung

Bandung, 16-10-2024

R/

Rykel drop ft
(Titrir) / 0,1 ml - 0,02 ml
pr

0 Rues drop ft
/ 200,6 ml
pr botol

258293
112 1700

Pro : Azales Umur 1860
Alamat : (10.9.4)
Obat tidak boleh diganti tanpa sepengetahuan Dokter

2. Form ceklis

SKRINING RESEP 20		
	Kriteria pemeriksaan	check list
Administratif	1. Nama dokter	✓
	2. SIP	-
	3. Alamat Dokter	✓
	4. No telp dokter	✓
	5. paraf dokter	✓
	6. Nama pasien	✓
	7. Umur pasien	✓ 36th
	8. Jenis kelamin pasien	-
	9. Berat badan pasien	✓
	10. Tanggal penulisan resep	✓
Farmasetik	1. Bentuk sediaan	✓
	2. Kekuatan sediaan	-
	3. Stabilitas obat	-
	4. Inkompatibilitas	-
Klinis	1. Dosis obat	✓
	2. Aturan pakai	✓
	3. Cara pemakaian obat	-
	4. Lama penggunaan obat	-
	5. Duplikasi/polifarmasi	-
	6. Alergi/Efeksamping obat	-
	7. Kontra indikasi	-
	8. Interaksi obat	-

3. Data pengkajian

Pengkajian Resep Obat Flu dan Batuk Dari Dokter Spesialis Anak di Apotek Salim Farma Bandung																	
Administratif										Farmasetik				Klinis			
No Resep	Nama Dokter	No SIP Dokter	Alamat Dokter	No Telp Dokter	Paraf Dokter	Nama Pasien	Umur Pasien	Jenis Kelamin Pasien	Berat Badan Pasien	Tanggal Penulisan Resep	Bentuk sediaan	kekuatan sediaan	stabilitas	Inkompatibilitas obat	Dosis Obat	Aturan Pakai	Duplikasi obat
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