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Analisis biaya dan keefektivitasan Ondansetron dan Deksametasone dalam menekan mual dan muntah pasca bedah pada bedah rawat jalan
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SURAT PERNYATAAN PERSETUJUAN

Saya yang bertanda tangan dibawah ini :

Nama : Umur :

Jenis kelamin : No. CM :

Alamat :

Menyatakan dengan sesungguhnya bahwa setelah mendapat penjelasan yang sejelas-jelasnya tentang prosedur, manfaat dan efek samping serta berkesempatan bertanya mengenai hal-hal dalam penelitian yang berjudul.

“ANALISIS BIAYA DAN KEEFEKTIVITASAN ONDANSETRON DAN DEKSAMETASONE DALAM MENEKAN MUAL DAN MUNTAH PASCA BEDAH PADA BEDAH RAWAT JALAN”

Saya menyetujui diri saya sendiri/keluarga saya ikut dalam penelitian tanpa paksaan dan tanpa ada sanksi yang mengikat.

Demikian pernyataan ini saya buat dengan sebenar-benarnya dan tanpa paksaan serta tekanan dari siapapun.

Yogyakarta ,.....2006

Saksi

Yang menyatakan

(.....)

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Penanggung Jawab Penelitian

(dr. Kurnianto Trubus P)