

Original Research**The Relationship between Therapeutic Communication and Patient Satisfaction with Nursing Care****Mestiana Br. Karo¹, Romita L. Gaol^{2*}**^{1,2}Nursing Study Program STIKes Santa Elisabeth Medan, Indonesia**ABSTRACT**

Background: *Therapeutic communication is an essential approach to establishing mutual trust between nurses and patients while delivering accurate information. It is expected to enhance patients' understanding of their illness and contribute to positive changes in their condition. Patient satisfaction reflects their evaluation of the healthcare services received, based on a comparison between expectations and actual experiences. This study aims to investigate the connection between therapeutic communication and patient satisfaction with nursing care.*

Methods: *This study employed a descriptive correlational design with a cross-sectional approach. The population consisted of 150 individuals, of which 66 participants were selected using purposive sampling. Data were collected using a therapeutic communication questionnaire and a patient satisfaction questionnaire. Data analysis was conducted using the Spearman Rank test.*

Results: *The results of the study showed that most patients in the Lidwina-Yosep Room perceived the nurses' therapeutic communication as good, and the majority expressed satisfaction with the nursing services received. Statistical analysis yielded a p-value of 0.015 ($p < 0.05$) and a correlation coefficient (r) of 0.298, indicating a significant and positive correlation between therapeutic communication and patient satisfaction.*

Conclusion: *The study found that nurses' therapeutic communication in the Lidwina-Yosep Room at Santa Elisabeth Hospital Medan was generally effective, as perceived by most patients. It is recommended that nurses continue to develop and strengthen their therapeutic communication skills to further improve patient satisfaction.*

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INTRODUCTION

According to Maila (2021) satisfaction is a patient's feeling that arises from the performance of the health services obtained, after the patient compares it with what is expected. According to Vanchapo and Magrifoh (2022) a person's satisfaction can be seen from the quality of a product expected from the buyer. The patient will be satisfied if the

service received is at least the same or more than the patient expected. Patients will reuse services that have been received.

An initial survey conducted on January 19, 2024, in the Lidwina-Yosep Room at Santa Elisabeth Hospital Medan involved 10 respondents who completed a 24-item questionnaire regarding patient satisfaction. The findings revealed that seven patients were moderately satisfied, citing timely service and effective communication from nurses. One patient reported being fully satisfied due to the nurses' attentiveness, support, and professional appearance. However, two patients expressed dissatisfaction, highlighting the nurses' unavailability during toileting needs and poor maintenance of bathroom cleanliness and facilities.

Patient dissatisfaction can be attributed to various factors, including service quality, pricing (caring aspects), location, facility design, and communication. The interaction between nurses and patients during hospital shifts plays a crucial role in shaping patient satisfaction. A strong relationship between nurses and patients enables hospitals to better understand and meet the needs of patients while minimizing errors that could lead to patient dissatisfaction. Common causes of dissatisfaction include unfriendly behavior, lack of smiles, indifference, rushed communication, poor responsiveness, and failure to adequately serve patients (Baan, 2020).

Patients are said to be satisfied if the quality of service is good. If it is successfully fulfilled, it will be able to cause a sense of satisfaction (client satisfactio) with health service satisfaction at the level of perfection of health services in causing a sense of satisfaction in patients. Patients feel happy with the expectations and reality with the services provided are fulfilled, namely the friendliness of the officers, the accuracy of information, the responsiveness of the officers, the fulfillment of the necessary facilities, and the success of the environment (Baan, 2020).

According to Ariyanti (2022) Nursing services to patients are implemented through the application of therapeutic communication. This type of communication refers to interpersonal communication, which requires specific skills in interacting effectively with patients. It goes beyond merely exchanging information and plays a vital role in enhancing the patient's motivation during the healing process. Without adequate motivational support, therapeutic communication may face barriers that hinder the patient's recovery.

The role of nurses in health services is very important in helping to solve the problems faced by patients. Nurses are the health care professionals most intimately involved with patients, as they are the ones who spend each day by their side. Success in providing care depends on the close relationship between nurses and patients. Good therapeutic communication skills will increase nurses' confidence in providing health services to patients. They can increase care satisfaction in their work (Khoir et al., 2020).

Communication can be considered an essential component of nursing that can allow them to understand, evaluate, and focus on each patient. nurses' effective terauphetic communication represents their ability to know what to do during interactions with patients. Communication increases patients' knowledge, allowing them to use self-health techniques, ultimately affecting their health and well-being. Ultimately, therapeutic communication between nurses and patients can promote positive treatment outcomes (Lee et al., 2022).

Nurses who have therapeutic communication skills will not only establish a relationship of trust, safety, and comfort to patients and families but can also provide professional satisfaction in the service of providing information and improving the image

of the nursing profession. Patient satisfaction is commonly used as an indicator to measure hospital performance and quality, because patient satisfaction strongly influences health outcomes patient resistance and malpractice lawsuits (Nisa et al., 2022).

According to Putri and Ngasu (2021), based on phenomena that occur in the world of nursing caring can be accepted as a value of discipline, respect for others, providing attention, caring, and being empathetic. Caring behavior can provide benefits for nursing services including patient satisfaction. Caring can provide financial benefits for the nursing service industry (Putri & Ngasu 2021).

Based on this background, the author is interested in examining the relationship between therapeutic communication of nurses and the satisfaction of nursing services of patients in the Lidwina-Yosep Room. The novelty of this research lies in its focus on specific hospital ward settings and the use of the latest data from the year 2024. This aspect has not been studied in previous research, thereby providing up-to-date and contextual knowledge regarding the impact of therapeutic communication by nurses on patient satisfaction. The results of this study can serve as a relevant reference for enhancing the quality of nursing services through effective communication.

MATERIALS AND METHOD

The design that will be used in this author's thesis is a correlation research design with a cross-sectional approach method, because the author will collect data from both variables at one time. Correlation research design is a study that aims to determine the relationship and level of relationship between two or more variables without any attempt to influence these variables. The research was conducted at Santa Elisabeth Hospital Medan, North Sumatra, from April 24 to May 11, 2024. The location was chosen due to its accessibility and suitability for meeting the sample requirements.

The population are patients who are treated in the Lidwina-Yosep room, totaling 105 patients in the Yosep room in the last 2 months 107, in the Lidwinan room in the last 2 months so that the total population is 212 patients. The sampling was conducted using the Vincent Formula, resulting in a total sample size of 66 participants. The sampling technique employed is purposive sampling, which applies specific criteria to obtain research samples. The inclusion criteria were patients who were conscious (composed mentis) and had a minimum length of stay of three days. The exclusion criteria included: patients who were unwilling or unable to provide informed consent.

This study examines therapeutic communication (independent variable) and its effect on patient satisfaction (dependent variable) in the Lidwina-Yosep Room using bivariate analysis. Data were collected using systematic research instruments. In this study, data were gathered using structured questionnaires administered to respondents to obtain the necessary information.

Validity therapeutic communication instruments of nurses using research instruments Khairul (2020) with a calculated r value $(0.347-0.798) > r$ table (0.316) . With this value, the instrument can be used as a data collection tool. The validity of the patient satisfaction instrument was adopted from researcher Khairul (2020) with a calculated r value $(0.364-0.819) > a$ table (0.361) , so that it can be used as a data collection tool.

The reliability test for nurses' therapeutic communication in nursing actions carried out by Khairul (2020) obtained an alpha cronbach value of $0.857 > t$ table (0.514) , this value shows a reliable instrument and can be used as a data collection. The results of the patient satisfaction variable reality test that has been researched by Khairul (2020)

obtained an alpha cronbach value of 0.944 (r table = 0.514). The results of the variable analysis show that the research instrument is reliable.

The therapeutic communication instrument with a Likert scale consists of 19 questions with 3 answer options, namely always (3), rarely (2), and never (1). Statements from 1-4 are statements from the pre-interaction stage, statements 5-9 are included in the orientation stage statement, statements 10-15 are included in the work stage, and statements 16-19 are included in the termination stage. The interval values were determined using a statistical formula based on the range and number of categories. The total range of scores was 38, calculated from the difference between the highest and lowest observed values. With a classification into three categories, the class width (P) was calculated as approximately 12. Based on this, the therapeutic communication scores were categorized as follows: Poor (19–31), Fair (32–44), and Good (45–57).

The patient satisfaction instrument consists of 25 items measured using a 4-point Likert scale: Very Satisfied = 4, Satisfied = 3, Dissatisfied = 2, and Very Dissatisfied = 1. The total score is then categorized into three satisfaction levels: Satisfied = 3, Moderately Satisfied = 2, and Dissatisfied = 1. Items 1–5 assess responsiveness, 6–10 assess assurance, 11–15 assess tangibles, 16–20 assess empathy, and 21–25 assess reliability. The score range is 72, derived from the difference between the highest and lowest possible scores, and divided into three categories. Using a class width (P) of 18, the satisfaction levels are defined as follows: Dissatisfied (25–49), Moderately Satisfied (50–75), and Satisfied (76–100).

The author analyzes the data by using the IBM SPSS Statistic Version 26 for windows computer application tool. The Spearman Rank test was employed at a 95% confidence level to assess the relationship between therapeutic communication and satisfaction with nursing services. This study employs the Spearman Rank test; therefore, normality testing was not conducted.

The author has conducted an ethical review of the research to assess its ethical feasibility. Research permits were obtained from the Santa Elisabeth School of Health Sciences in Medan in 2024 with the number 097/KEPK-SE/PE-DT/IV/2024. This research applies ethical principles, including respecting autonomy, maintaining the confidentiality of data, ensuring safety and justice, and upholding scientific integrity.

RESULTS

This section presents the research findings on the relationship between therapeutic communication and patient satisfaction with nursing services. The analysis results are presented in the form of tables and narrative descriptions. Below are the findings:

Table 1. Characteristics based on Age, Gender, Religion, Occupation, Status, and Last Education (n = 66 Nursing Students)

Characteristics	n	%
Age (years)		
15-25	19	28.8
26-35	20	30.3
36-45	11	16.7
46-55	9	13.6
56-65	5	7.6
66-75	2	3.0
Total	66	100

Characteristics	n	%
Gender		
Male	24	36.4
Female	42	63.6
Total	66	100
Religion		
Islam	12	18.2
Protestant Christianity	43	65.2
Catholic	10	15.1
Buddhism	1	1.5
Total	66	100
Occupation		
Farmers	5	7.6
Civil Servant	7	10.6
Self-employed	46	69.7
Labor	8	12.1
Total	66	100
Status		
Married	38	57.6
Unmarried	28	42.4
Total	66	100
Last Education		
Elementary School	1	1.5
Junior High School	6	9.1
High School	33	50.0
Bachelor's Degree	26	39.4
Total	66	100

Note: n = number of observations; % = percentage

Table 1. presents the characteristics of the participants. Most respondents were aged 26–35 years (30.3%) and were predominantly female (63.6%). The majority adhered to Protestant Christianity (65.2%), were self-employed (69.7%), and married (57.6%). In terms of education, most had completed high school (50.0%) or held a bachelor's degree (39.4%).

Table 2. Distribution of Respondents Based on Therapeutic Communication and Respondents Satisfaction with Nursing (n = 66 Nursing Students)

Variable	n	%
Therapeutic Communication		
Good enough	9	13.6
Good	57	86.4
Total	66	100.0
Satisfaction		
Quite satisfied	27	40.9
Satisfied	39	59.1
Total	66	100.0

Note: n = number of observations; % = percentage

Table 2. describes the distribution of respondents based on their perceptions of therapeutic communication and satisfaction with nursing services. The data show that the majority of respondents (86.4%) rated therapeutic communication as good, while a smaller portion (13.6%) perceived it as good enough. In terms of satisfaction, 59.1% of respondents reported being satisfied, and 40.9% reported being quite satisfied. These findings indicate that most nursing students evaluated both therapeutic communication and satisfaction with nursing services positively.

Table 3. Relationship Between Communication and Satisfaction (n = 66 Nursing Students)

Variable Pair	Spearman's rho (r)	p-value (2-tailed)
Communication–Satisfaction	0.298	0.015*

Note: Spearman's rho test was used; $p^* < 0.05$ (statistically significant)

The findings in Table 3. show a statistically significant relationship between therapeutic communication and satisfaction with nursing services among nursing students in the Lidwina-Yosep Room. Based on the Spearman's rho test, a correlation coefficient (r) of 0.298 and a p-value of 0.015 ($p < 0.05$) were obtained. This indicates a positive and weak correlation, meaning that as the quality of therapeutic communication improves, the level of satisfaction with nursing services also tends to increase, although the strength of the relationship is relatively low.

DISCUSSION

Therapeutic Communication Among Respondents in The Lidwina-Yosep Room

The majority of respondents perceived therapeutic communication as being in the good category, while only a few rated it as quite good. This indicates that most respondents view the therapeutic communication in nursing services positively. The researchers found that most nursing services demonstrate effective therapeutic communication. Because nurses regularly engage with patients directly, the quality of care is closely tied to how well they build personal rapport, which is essential for a strong nurse patient relationship.

Evidence of this includes nurses' thorough assessment of patients' conditions and concerns, deliberate planning of nursing interventions, and the ability to remain calm and regulate emotions during patient interactions. Additionally, nurses clarify each planned action, maintain eye contact during conversations, check on patients' feelings following interventions, remind and inform patients about upcoming examinations or follow-up care, and courteously greet patients and their families upon entering and leaving the room.

This opinion is in line with the theory Soleman and Cabu (2021) therapeutic communication is able to form a trusting relationship, foster empathy and caring attitudes towards patients, prevent problems. Therapeutic communication provides professional satisfaction in nursing services and can improve the image of the nursing profession and the image of the hospital. Assumptions are supported by research Mongi (2020), it states that nurses' therapeutic communication is demonstrated through four key aspects: authenticity, empathy, respect, and concreteness. The stronger each of these aspects is, the more effective the therapeutic communication becomes. Additionally, therapeutic communication encompasses not only verbal but also non-verbal forms of interaction.

This research is in line with Fitriani (2021) which states that where the better the therapeutic communication provided by the nurse, the more satisfied the patient feels. This is because with the implementation of good therapeutic communication, the patient

will be open, relaxed and feel comfortable when explaining his complaints, there is trust in the nurse. This suggests that therapeutic communication is quite good because nurses greet and introduce themselves when first interacting with patients, nurses ask for names or favorite nicknames, and nurses give promises or contracts first before continuing communication with patients.

The assumption is supported by Agustina et al. (2022) therapeutic communication is the first step to foster mutual trust and patients, with great community skills, the need will continue to improve the quality of patients. The assumption is supported by Agustina et al. (2022) an important role in nursing services is how a nurse overcomes patient complaints such as providing information on the patient's illness. It is seen that the level of hospital success can be seen in terms of communication between the nurse and the accompanying family, where when the patient asks about complaints about what the patient is experiencing, the nurse will provide feedback that reduces the patient's issue.

Patient Satisfaction Among Respondents in The Lidwina-Yosep Room

The results showed that most respondents expressed a satisfied level of response, with fewer indicating they were only quite satisfied. This suggests that, overall, patient satisfaction in the Lidwina-Yosep Room of Santa Elisabeth Hospital Medan falls within the satisfied category. This suggests that patients in the Lidwina-Yosep Room of Santa Elisabeth Hospital Medan are satisfied with the services provided.

The results of this study indicate that nursing services that lead to patient satisfaction include instances when nurses provide information about available facilities, instructions for use, and the regulations applicable in the hospital. Satisfaction also arises when nurses promptly attend to patients upon their arrival in the inpatient ward, arrive on time when needed, and provide clear explanations regarding prohibited matters during treatment. Additionally, nurses regularly visit patients to check vital signs, such as blood pressure, temperature, pulse, respiration, and infusion fluids, as well as to maintain the cleanliness and organization of the medical equipment used.

This study aligns with the theory proposed by Rizkiawan et al. (2024) which emphasizes that patient satisfaction occurs when the patient's wants, needs and expectations are met, causing satisfaction. This assertion is supported by Febres-Ramos and Mercado-Rey (2020) who found that approximately 60 percent of patients were satisfied with the services they received. Patient satisfaction or dissatisfaction is closely linked to perceptions of safety and empathy throughout the care process, since genuine empathy can be felt by patients from the first contact until discharge. Therefore, it is essential to develop strategies that create a health system delivering high-quality services that foster both subjective and objective satisfaction.

In our setting, patients report high satisfaction with nursing care, attributing this to nurses' friendly attitudes, prompt and courteous responses to inquiries, and ability to provide comfort and reassurance. Karaca and Durna (2020) reinforce this finding, reporting that 63.9 percent of patients rated their care as excellent and recommending that nurses further enhance their commitment to effective communication. Likewise, Fajrah (2021) observed that 97.7 percent of inpatients covered by the national health insurance scheme at Anuntaloko Regional General Hospital were satisfied with nursing services. These patients noted that adequate room equipment, streamlined service processes, and rapid response by staff met their needs and expectations. Meeting patient expectations leads to satisfaction, stressing the need for empathy and service improvement.

Relationship between Therapeutic Communication and Nursing Service Satisfaction

Shows that therapeutic communication with nursing service satisfaction in the Lidwina-Yosep Room of Santa Elisabeth Hospital Medan Year 2024, it can be concluded that there is a relationship between therapeutic communication and nursing service satisfaction in the Lidwina-Yosep Room of Santa Elisabeth Hospital Medan Year 2024. Patients say that communication applied by nurses to patients is therapeutic communication which has the aim of healing patients.

According to this it suggests that the relationship between communication and patient satisfaction is closely intertwined during shifts at the hospital. This behavior is a factor that has an impact on patient satisfaction. There is a strong bond with patients as customers, then the hospital as a service change can understand the needs of patients and try to fulfill them and minimize errors that result in disappointment.

This study is in line with Rizkiawan et al. (2024) the important role of communication in influencing patient satisfaction. Effective communication includes providing information, addressing patient concerns, and promptly memefulfill their needs. Communication serves as a channel for the exchange of information, ideas, and emotions to foster trusting relationships.

The implementation of therapeutic communication by nurses can lead to patient satisfaction. Good communication helps patients feel comfortable and calm in the treatment room. The success of therapeutic communication can be measured by the number of patients willing to receive treatment and the satisfaction they report. This success is closely tied to the nurses' responsibility to apply therapeutic communication with patients. Quality therapeutic communication follows operational standards and meets patient expectations (Khairul, 2020).

The limitation of this study is that it was conducted only in the Lidwina-Yosep room, thus the results cannot be generalized to other rooms or hospitals. This study also focuses solely on therapeutic communication and patient satisfaction. Other variables that may affect patient satisfaction were not examined. Factors such as the physical environment, nursing workload, or length of hospitalization have not been included in this study.

The recommendation of this study is that nurses are advised to improve their communication skills, especially in establishing emotional relationships and conveying clear information to patients. The hospital is expected to use the results of this research as evaluation material in improving the quality of nursing services, especially in terms of nurse interpersonal communication. Follow-up research can be done in other treatment rooms or different hospitals to get a broader picture and compare the results.

CONCLUSION

The results of the study showed that the therapeutic communication carried out by nurses to patients in the Lidwina-Yosep Room was relatively good. Most patients are satisfied with the nursing services they receive. In addition, there was a significant relationship between nurses' therapeutic communication and patients' satisfaction levels with nursing services in space. It is hoped that the results of this study can be an input for inpatient room services to be able to communicate effectively to inpatient patients and increase patient satisfaction in hospitals.

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