

RELATIONSHIP OF NURSES' THERAPEUTIC COMMUNICATION AND PATIENT SATISFACTION AT SANTA ELISABETH HOSPITAL MEDAN 2024

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ABSTRACT

Kepuasan pasien merupakan perasaan senang atau kecewa atas pelayanan yang diterima adapun hal-hal yang dapat mengakibatkan ketidakpuasan pasien keterlambatan dalam memberikan perawatan, komunikasi yang kurang baik, perasaan diabaikan dan fasilitas rumah sakit yang kurang memadai. Komunikasi terapeutik perawat merupakan kemampuan perawat dalam membantu menghadapi kecemasan serta mengatasi gangguan psikologis pasien yang mempunyai tujuan spesifik yaitu tujuan untuk mencapai kesembuhan. Tujuan penelitian ini adalah untuk mengetahui hubungan komunikasi terapeutik perawat dengan kepuasan pasien di Rumah Sakit Santa Elisabeth Medan. Metode yang digunakan dalam penelitian ini adalah deskriptif korelasi kuantitatif dengan pendekatan *cross sectional*. Teknik pengambilan sampel yang digunakan adalah *purposive sampling*, dengan jumlah sampel 56 orang dengan kriteria pasien minimal 2 hari dan maksimal 7 hari rawat inap. Instrumen penelitian yang digunakan adalah lembar kuesioner komunikasi terapeutik perawat dan kuesioner kepuasan pasien. Hasil penelitian didapatkan bahwa komunikasi terapeutik perawat pada pasien di Rumah sakit Santa Elisabeth Sebagian besar baik (83.9%) sedangkan pada kuesioner kepuasan pasien rawat inap internis didapatkan bahwa kepuasan pasien mayoritas puas (76.8%). Analisa data dengan uji statistik *spearman rank* diperoleh nilai $p = 0,001$ dimana $p < 0,05$, $r = 0,568$ yaitu menunjukkan bahwa ada hubungan antara komunikasi terapeutik perawat dengan kepuasan pasien di Rumah Sakit Santa Elisabeth Medan. Disarankan agar memperoleh pasien yang puas perawat harus mempertahankan fasilitas pelayanan rumah sakit, sikap empati, dan komunikasi terapeutik yang baik.

Kata kunci: Komunikasi Terapeutik Perawat, Kepuasan pasien

ABSTRACT

Patient satisfaction is a feeling of pleasure or disappointment with the service received. The things that can cause patient dissatisfaction are delays in providing care, poor communication, feelings of being ignored, and inadequate hospital facilities. Nurse therapeutic communication is the ability of nurses to help deal with anxiety and overcome psychological disorders in patients who have a specific goal, namely the goal of achieving recovery. The purpose of this study is to determine the relationship between nurse therapeutic communication and patient satisfaction. The method used in this study is descriptive correlation with a cross-sectional approach. The sampling technique used is purposive sampling, with a sample size of 56 people with the criteria of patients with a minimum of 2 days and a maximum of 7 days of hospitalization. The research instruments used are nurse therapeutic communication questionnaire sheets and patient satisfaction questionnaires. The results of the study shows that nurse therapeutic communication with patients is mostly good (83.9%), while in the inpatient satisfaction questionnaire, the majority of patient satisfaction is found to be satisfied (76.8%). Data analysis with the Spearman rank statistical test obtains a p value = 0.001 where $p < 0.05$, $r = 0.568$ indicating that there is a relationship between nurse therapeutic communication and patient satisfaction. It is recommended that in

order to obtain satisfied patients, nurses must maintain hospital service facilities, empathy, and good therapeutic communication.

Keywords: Nurses, Therapeutic Communication, Patient satisfaction

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INTRODUCTION

A health service is said to be of high quality if it is able to cause satisfaction for the patients it serves. Patient satisfaction is not only seen from how the facilities and infrastructure available in health services but also how nurses serve patients well according to their competence, then how to communicate and be friendly to patients without considering the patient's status. If the patient feels satisfied after being hospitalized, then the patient does not need to be transferred to another hospital. Satisfaction is one of the indicators of the quality of service provided by hospitals as capital to get more patients and be loyal Rahayu, S., & Nurlaela Wati, L. (2023).

Some factors that can affect patient satisfaction include patient comfort, patient relationships with healthcare workers, staff capabilities, and the cost of health facilities (Tanjung, et al 2023). Patient satisfaction that is still not up to standard has an impact on the number of hospital visits, the behavior of health workers to clients will also affect client satisfaction, in order to achieve client satisfaction, it is necessary to improve standards in maintaining the quality of health services and infrastructure so that it can affect client satisfaction (Adi Santosa, Erma Gustina, & Syntia Rahutami 2023).

In Indonesia, data from the Indonesian Ministry of Health (2018) recorded that the level of public satisfaction with hospital services is around 40-60%. Around 60% of hospitals in Indonesia have not met the needs of efficient services and have not implemented service standards that are acceptable and accessible to every community (Soumokil, Y., Syafar, M., & Yusuf, A. 2021).

Based on the results of interviews at the time of the initial survey that the author had conducted in the St. Joseph room of Santa Elisabeth Hospital Medan, information was obtained from 8 patients that the factors that caused patient dissatisfaction were: based on the *Responsiveness dimension*, 62.5% felt dissatisfied, namely 6 out of 8 people said that there was a lack of information related to the patient's illness The *assurance dimension* (25%) 2 out of 8 people said they were dissatisfied because nurses cared less about patient complaints. Empathy dimension (75%) 6 out of 8 people said that patients were dissatisfied because the nurse considered everything normal and reasonable to the patient's complaints, the answer from the nurse always said the effect of the treatment, and if the patient believed about the disease, the nurse did not provide good communication to the patient. Reliability Dimension (75%), 6 out of 8 people said they were not satisfied because if the patient had been allowed by the doctor to go home, waiting for the files was very long and the time was stretched out so that the patient was bored.

The level of satisfaction of inpatient clients can be affected by various factors, including the quality of services, the physical environment of the hospital, interaction with medical personnel, communication and information provided, as well as the cost and accessibility of services Dissatisfied patients are closely related to the negative impact of the attitude and behavior of staff in the hospital, including; delays in services provided by doctors and nurses, Doctors are difficult to find, nurses who are less communicative and informative, complicated medical record processes, speech and

indifference during the service process, and cleanliness in the hospital environment are classified as not up to standard (Solikhah, N., Rosidi, E., & Pranata, Y., 2025).

Patient dissatisfaction while being treated in the hospital is caused by several factors, one of which is about less effective communication to patients when providing health services to patients. If the results felt by the patient are below expectations, the patient will feel disappointed, dissatisfied and even dissatisfied, but on the other hand, if it is in accordance with expectations, the patient will be satisfied and if the performance exceeds expectations, the patient will be very satisfied, the satisfaction that occurs in the patient because the expectations that exist in the patient are met (Lestari, W., Rizany, I., & Setiawan, H. 2021).

Nurse-centered communication to patients as well as responsiveness and sensitivity to patient needs and convey information, providing therapy and a supportive environment for patients. In addition, empathy, greeting and touch are very important, especially in conducting patient-centered therapeutic communication. A nurse's ability to recognize a patient's problem, and respond patiently, communicating to understand the patient's wishes, can help patients understand and overcome their illness effectively (Meikayanti, N. M. K., Sukmandari, N.M.A., & Dewi, S.P. 2021).

Good therapeutic communication skills, nurses will more easily establish a relationship of mutual trust with patients, and this will be more effective for nurses in providing professional satisfaction in nursing care and each hospital's patient satisfaction is influenced by one of the communication factors. Good therapeutic communication will provide individual satisfaction by the patient, which will ultimately affect patient satisfaction with the services provided in the hospital. Based on the background description above, the author is interested in conducting a research entitled "The Relationship between Nurse Therapeutic Communication and Patient Satisfaction at Santa Elisabeth Hospital Medan in 2024.

RESEARCH METHODS

The type of research design used in this study uses descriptive correlation quantitative with the *cross sectional approach method*. The population in this study is all internist inpatients at St. Elisabeth Hospital Medan, including the Internist room with a total of 678 people, while the total sample is 56 people (Medical records of Elisabeth Hospital Medan, 2024). The inclusion criteria in this study are: Patients are hospitalized for a minimum of 2 days and a maximum of 7 days, Be at least 17 years old and willing to be a respondent, Patients with *compas mentis* consciousness and Patient in the class III internist inpatient room (Saint Joseph, Santa Lidwina.). Total sample are 56 people. The independent variable in this study was nurse therapeutic communication. The dependent variable in this study is patient satisfaction. In this study, the researcher used a questionnaire instrument.

This research was carried out in the class III Internist Inpatient Room of Santa Elisabeth Hospital Medan, including the room of Saint Joseph, Santa Lidwina, which is located at Jln. Haji Misbah No. 7 North Sumatra. The research was carried out on September 13 - November 21, 2024. Primary data is data obtained from research through observation, interviews, examinations, questionnaires, and questionnaires to patients in the class III internist inpatient room (R. St. Lidwina, St. Yosef) Santa Elisabeth Hospital Medan in 2024. Secondary data is data taken by researchers from the medical records of Santa Elisabeth Hospital Medan.

The research instruments used were nurse therapeutic communication questionnaires and patient satisfaction questionnaires. Based on the validity test from the book Nursalam (2020) which has been researched by (Khairul 2017) with a validity test value with a value of r calculation greater than r table (0.3610). Therefore, the researcher did not conduct a validity test on the questionnaire. The researcher

did not conduct a reliability test because it used a standard questionnaire from a book (Nursalam 2020) that had been researched by (Khairul 2017) on the variable of Therapeutic Communication of nurses with a *Cronbach's Alpha* value of 0.835 while for the patient satisfaction questionnaire the result of *Cronbach's Alpha* was obtained which was 0.825. Therefore, the nurse therapeutic communication questionnaire and patient satisfaction were declared reliable. The results of the reliability test conducted on the nurse therapeutic communication questionnaire with patient satisfaction had an *alpha value* of >0.7 . Analysis univariat examined the independent variables of nurse therapeutic communication and the dependent variable of patient satisfaction at Santa Elisabeth Hospital Medan. Bivariate analysis to explain how two variables relate to each other: the therapeutic communication variable as an independent variable and patient satisfaction as a dependent variable. For bivariate analysis, a *statistic spearman rank* test is used. This is a statistical test used to determine the degree of relationship in situations where each ordinal and data source between variables is not the same. This research has been worthy of an ethics test from the research ethics commission of the Santa Elisabeth College of Health Sciences Medan with the number No.: 218/KEPK-SE/PE-DT/X/2024.

RESULTS AND DISCUSSION

Table 1 Distribution of Respondents Demographic Characteristics Based on Age, Gender, Religion, Occupation, Status and Last Education in the Class III Internist Inpatient Room of Santa Elisabeth Hospital Medan 2024

Age Characteristics	(F)	(%)
15-19 years old	4	7.1
20-24 years old	5	8,9
25-59 years old	25	44,6
>60 years old	22	39,3
Gender		
Men	28	50.0
Female	28	50.0
Religion		
Islam	9	16.1
Khatolik	8	14.3
Kristen	39	69.6
Work		
Students	7	12.5
Pensioner	4	7.1
Farmer	27	48.2
Self employed	18	32.1
Status		
Single	10	17.9
Marry	46	82.1
Education		
D3	3	5.4
Student	7	12.5
SMA	46	82.1
Total	56	100

Table 2 Distribution of Nurse Therapeutic Communication in Class III Internist Inpatients of Santa Elisabeth Hospital Medan in 2024 (n=56)

Therapeutic communication	Frequency	Percentage (%)
Good	47	83.9
Pretty good	7	12.5
Not Good	2	3.6
Total	56	100.0

Table 3 Distribution of Nurse Therapeutic Communication Based on Pre-Interaction, Orientation, Work and Termination Dimensions in Inpatients of Santa Elisabeth Hospital Medan (n=56)

Category	F	%
Pre-interaction		
Good	52	92.5
Pretty Good	3	5.4
Not good	1	1.8
Orientation		
Good	40	71.4
Pretty good	16	28.6
Work		
Good	53	94.6
Pretty good	3	5.4
Termination		
Good	49	87.5
Pretty good	7	12.5
Total	56	100

Table 4. Distribution of Frequency of Satisfaction of Class III Internist Inpatients at Santa Elisabeth Hospital Medan in 2024 (n=56)

Patient Satisfaction	Frequency	Percentage (%)
Satisfied	43	76.8
Quite satisfied	12	21.4
Dissatisfied	1	1.8
Total	56	100.0

Table 5. Distribution of Inpatient Satisfaction Frequency Based on Responsiveness, Assurance, Tangibles, Empathy, Reliability Dimensions (n=56)

Category	F	%
Responsiveness (Daya Tangggap)		
Satisfied	39	69.6
Quite satisfied	16	28.6
Dissatisfied	1	1.8
Assurance (Jaminan)		
Satisfied	38	67.8
Quite satisfied	17	30.4
Dissatisfied	1	1.8

Tangibles (Kenyataan)		
Satisfied	39	69.5
Quite satisfied	16	28.6
Dissatisfied	1	1.8
Empathy		
Satisfied	42	75.0
Quite satisfied	12	21.4
Dissatisfied	2	3.6
Reliability (Keandalan)		
Satisfied	39	69.6
Quite satisfied	15	26.8
Dissatisfied	2	3.6
Total	56	100

Table 6. The Relationship between Nurse Therapeutic Communication and Class III Internist Inpatient Satisfaction at Santa Elisabeth Hospital Medan in 2024

Satisfaction								p-value	rho	
Therapeutic communication	Satisfied		Quite satisfied		Dissatisfied		Total		0,001	0,568
	f	%	f	%	f	%	F	%		
Good	41	73.2	6	10.7			47	83,9		
Pretty Good	2	3.6	5	8.9			7	12.5		
Not Good	0	0	1	1.8	1	1.8	2	3.6		
Total	43	76,8	10	17.9	3	5.4	56	100		

Based on the results of the Spearman Rank Statistics test, $p\text{Value}=0.01$ where ($p>0.05$) and $\rho\text{ value} = 0.586$, this shows that there is a moderate relationship and a positive pattern, which means that the better the therapeutic communication of nurses, the higher the patient satisfaction of the class III internist inpatient room at Santa Elisabeth Hospital Medan. Thus, H_0 was rejected and H_a was accepted, which means that there is a relationship between nurse therapeutic communication and patient satisfaction in the class III internist inpatient room of Santa Elisabeth Hospital Medan in 2024.

DISCUSSION

Based on the results of the research conducted in the class III internist inpatient room of Santa Elisabeth Hospital Medan from 56 respondents it was obtained that nurse therapeutic communication was mostly good as many as 47 respondents (83,9%), this can be seen from several phases of nurse therapeutic communication in the pre-interaction phase that most nurses have been able to explore the patient's situation and complaints, and the orientation phase: The nurse greets and introduces herself when interacting with the patient/family for the first time, the nurse also asks about the complaints experienced by the patient and in the work phase, the nurse explains every action taken to the patient.

This result is supported by a study Sophia, A., Hadiyanto, H., & Andriani, R. (2023) in the Nyi Ageng Serang inpatient room of Sekarwangi Hospital, the results of nurses' therapeutic communication were

in the good category, respondents received good implementation of therapeutic communication, effective communication was simple, short and direct and nurses always greeted when leaving the patient's room.

A total of 6 respondents (10.7%) said that therapeutic communication was quite good, this happened because the nurse's response in taking action was slow so that the patient took a long time to get treatment, and the patient also said that when the old nurse came so that the patient felt unnoticed in addition to the emotional factor of the patient who felt anxious and worried about his health condition. In line with research (Jusliawati et al., 2023) which said that therapeutic communication is quite good, this occurs because the nurse's response in taking action is slow so that the patient takes a long time to get treatment, as well as an inadequate environment, in addition to the emotional factor of the patient who feels anxious about his health condition.

And in line with the research (Nurwahyuni et al., 2024) which said that many respondents stated that nurses have carried out therapeutic communication by carrying out the phases of therapeutic communication, namely the orientation phase, the work phase, and the termination phase. However, some patients also said that the nurse lacked communication in a therapeutic manner when going to take action, the nurse did not explain to the patient the action to be taken.

According to the researcher's assumption from the questionnaire answers distributed to the respondents in general, the therapeutic communication of nurses in the orientation, work, and termination phases is good, but there are still some respondents who feel quite good in the orientation phase, there are still nurses who do not introduce themselves when they are going to take action and do not explain the purpose and purpose of the action to be carried out, so that the patient's own family initiative wants to ask. In the work phase, the patient stated that the nurse only focused on the actions taken and there was no communication that the nurse made to the patient and in the termination phase, the nurse did not say hello to the patient but just left the room, this became material to be improved in the future so that therapeutic communication at Santa Elisabeth Hospital Medan was getting better and bringing satisfaction to the patient.

Based on the results of research from 56 respondents showed that patient satisfaction in the inpatient room was mostly in the satisfied category of 43 people (76.8%), this can be seen from several dimensions in patient satisfaction has been applied well, the *responsiveness* of the nurse immediately handles the patient when needed, such as when there is a bell from the patient's room, the nurse is immediately responsive to come to the patient's room and offer help to the patient, Nurses provide information about all nursing actions that will be carried out, nurses always maintain neatness and appearance, nurses are able to handle care problems appropriately and professionally.

The patient's assurance *dimension* is also satisfied because the nurse pays attention to the complaints submitted by the patient. Nurses always greet and smile when meeting patients. Reality *Dimension (tangibles)* Nurses provide information about all treatment actions that will be carried out on patients, Nurses always maintain the cleanliness and neatness of the room occupied by patients. Empathy *Dimension* Nurses often see and check my condition and measure the patient's pressure, temperature, pulse, breathing, and fluids, Nurses are attentive and supportive of the patient's condition and easy to contact when the patient needs help. Reliability *Dimension* Nurses are able to handle your care problems appropriately and professionally Nurses provide information on available facilities, how to use them and the rules that apply in the hospital. According to the theory (Viera & Garcia, 2019) the factors that affect patient satisfaction are one of the qualities of the product or service, Patients will feel satisfied if their expectations are met or will feel very satisfied if their expectations exceed

expectations. The approach that nurses take personally to patients with a friendly and communicative attitude will satisfy the inner feelings of a patient. In line with the research conducted (Suwito & Priyantari, 2022) which said that patients feel satisfied with the service and nurses treat patients not only as helpers and patients, but as family so that patients feel satisfied with the services at Tk. II Kartika Husada Pontianak Hospital in the inpatient room.

The researcher assumes that in general, patient satisfaction is already in the satisfied category, this is because nurses can provide patient needs while the patient is treated and nurses offer help to patients when patients need help. However, there are still respondents in the category who are quite satisfied because there are still nurses who do not empathize with clients, nurses do not come immediately when needed by patients, this is material to be improved in the hospital so that patient satisfaction in the hospital is increasing because with the more satisfied the patient, the patient will be more comfortable during treatment and give a good assessment of the hospital.

Based on table of the results of the cross-tabulation of nurses' therapeutic communication with class III internist inpatient satisfaction, it can be seen that 47 respondents (83.9%) received good therapeutic communication and satisfied satisfaction 41 respondents (73.9%) and from respondents who received good therapeutic communication 41 respondents (73.%) and satisfied satisfaction 6 respondents (10.7%) with fairly good therapeutic communication 2 (3.6%) respondents and satisfied 5 respondents (8. 9%), while respondents who received poor therapeutic communication and dissatisfied 2 respondents (3.6%) with poor therapeutic communication 1 (1.8%) respondents and dissatisfied 1 respondent (1.8%) respondents (1.8%)

Based on the results of the spearman Rank statistical test a value of $r=0.586$ and a value of $p=0.001$ ($p,<0.05$) was obtained, thus H_0 was rejected and H_a was accepted, which means that there is a relationship between nurse therapeutic communication and patient satisfaction in the class III internist ICU of Santa Elisabeth Hospital, Medan, in 2024. Then a correlation efficacy value was obtained (0.001) between nurse therapeutic communication and patient satisfaction in the class III internist inpatient room of Santa Elisabeth Hospital Medan in 2024. The results of this study show that nurse therapeutic communication is related to the level of satisfaction of inpatients at Santa Elisabeth Hospital Medan.

This study is supported by Fajrah (2021) about the relationship between nursing services and the satisfaction of inpatients participating in the national health insurance at the Anuntaloko regional general hospital where respondents were satisfied with nursing services. This is because the services provided are able to meet the needs, desires, and expectations of patients such as adequate equipment in the inpatient room, unconvoluted service flows, and officers in providing fast/precise services. If the services provided are in accordance with expectations, patients will feel satisfied.

The researcher assumes based on the results of the study both from the variables of nurse therapeutic communication and patient satisfaction that nurses in general are able to provide satisfaction to patients by quickly responding to every complaint submitted by patients, and responding to patient needs, namely by responding immediately when the patient rings *the bell* and provide information to patients regarding examinations/follow-up actions for patient treatment and are easy to meet if patients are in difficulty. This is a way for patients to remain comfortable in the hospital in undergoing treatment but there are still patients who are quite satisfied with the hospital staff, perhaps in terms of service it needs to be improved, namely by making training for newly employed nurses so that new nurses are more professional in the field, and it may also be necessary to update facilities and infrastructure, And it is necessary to make a more varied food menu for patients starting from

morning absorption to patient dinner, this will also increase the satisfaction of patients who are treated in the hospital because patient satisfaction is not only in terms of good communication but also in terms of service, infrastructure and menus served to patients are very closely related to patient satisfaction.

CONCLUSION

Nurse therapeutic communication with patients at Santa Elisabeth Hospital Medan in 2024 was obtained in the good category by 47 respondents (83.9%). Patient satisfaction at Santa Elisabeth Hospital Medan in 2024 was obtained in the satisfied category of 44 respondents (78.6%). There was a significant relationship between nurse therapeutic communication and patient satisfaction at Santa Elisabeth Hospital Medan with a value of $p\text{ value} = 0.01$ ($p = <0.05$) and a value of $r = 0.586$.

SUGGESTIONS

It is hoped that the next researcher can conduct further research with the title of this study or with other variables such as nurses' perception in achieving patient satisfaction.

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