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MULTIDIMENSIONAL APPROACH TO PATIENT SATISFACTION IN HEMODIALYSIS NURSING SERVICES AT ROYAL PRIMA GENERAL HOSPITAL, MEDAN

Evalatifah Nurhayati [1*], Elis Anggeria [2], Tiarnida Nababan [2]

[1] Master of Nursing Program Faculty of Nursing and Midwifery, Universitas Prima Indonesia, Medan
[2] PUI-PT Palliative Care, Faculty of Nursing and Midwifery, Universitas Prima Indonesia, Medan

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Correspondence:
Evalatifah Nurhayati
Master of Nursing Program Faculty of Nursing and Midwifery, Universitas Prima Indonesia, Medan
Email: evalatifahnurhayati@unprimdn.ac.id

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Abstract

Background: The increasing population of patients with end-stage kidney disease necessitates high-quality nursing services. Patient satisfaction in hemodialysis is a multidimensional construct encompassing physical, psychological, and technical aspects of care.

Objective: To analyze patient satisfaction through a multidimensional approach and identify the dominant factor influencing satisfaction at Royal Prima General Hospital, Medan, in 2025.

Methods: This quantitative study used a cross-sectional design. Total sampling was applied to 115 hemodialysis patients (Sample). Variables included nine dimensions of service measured via a multidimensional questionnaire (Instrument). Data were analyzed using univariate, bivariate (Chi-square), and multivariate (Logistic Regression) tests (Analysis).

Results: Patients reported high satisfaction levels, categorized as very satisfied (52.5%) and satisfied (47.5%). All service dimensions significantly correlated with satisfaction ($p \leq 0.05$). Multivariate analysis identified medical care as the most dominant factor ($p = 0.000$; \$B = 0.104), indicating its critical role in shaping patient perceptions.

Conclusion: Nursing service quality across multiple dimensions significantly drives patient satisfaction, with medical care being the most influential. Hospitals should focus on enhancing medical care, nurse responsiveness, and therapeutic communication to sustain service quality.

INTRODUCTION

Haemodialysis remains the primary life-sustaining renal replacement therapy for End-Stage Kidney Disease (ESKD) patients globally. The prevalence of chronic kidney disease continues to rise significantly. According to the Indonesian Renal Registry (2023), the number of active haemodialysis patients in Indonesia has reached over 150,000, with North Sumatra consistently reporting high case growth. This increasing scale demands not only clinical effectiveness but also high-quality nursing services that meet patient expectations to ensure treatment adherence and improved quality of life.

Patient satisfaction is a pivotal indicator of healthcare quality. Historically, satisfaction was measured through generic service dimensions like SERVQUAL (reliability, responsiveness, assurance, empathy, and tangibles). However, recent evaluations at various hospitals, including those in North Sumatra, indicate fluctuating satisfaction levels. Previous studies (Palmer et al., 2021; Veronica, 2024) reported that while clinical technicality is often met, patients still express dissatisfaction regarding psychological support and administrative efficiency. These discrepancies suggest that a traditional, one-dimensional approach is no longer sufficient to capture the complex needs of haemodialysis patients who undergo long-term, repetitive therapy.

Despite numerous studies on service quality, there is a notable lack of research specifically utilizing a comprehensive multidimensional approach—incorporating psychological, nutritional, and social worker interaction dimensions—within the Indonesian haemodialysis context. Most existing literature focuses heavily on basic nursing care while overlooking the "social and organizational" dimensions that are critical in a long-term care setting like Royal Prima General Hospital. This study addresses this gap by analyzing nine specific service dimensions to identify the most dominant driver of satisfaction in a contemporary (2025) setting.

To address these issues, this research employs a multidimensional framework to provide a more granular understanding of patient needs. By identifying the dominant factors, the hospital can implement targeted improvements in nursing management and resource allocation.

Therefore, this study aimed to analyze hemodialysis patient satisfaction using a multidimensional approach and to identify the most dominant factors influencing satisfaction among patients receiving nursing services at Royal Prima General Hospital, Medan, in 2025.

METHODS

Study Design

This study employed a quantitative research approach with a cross-sectional design to analyze patient satisfaction with hemodialysis nursing services at Royal Prima General Hospital, Medan. The cross-sectional approach was selected because it enables the simultaneous assessment of multiple dimensions of service quality and patient satisfaction at a single point in time. The study was conducted in the hemodialysis unit between June and August 2025. A total sampling technique was applied to recruit all eligible hemodialysis patients undergoing treatment during the study period. Data were collected using a structured multidimensional questionnaire that assessed several dimensions of nursing service quality, including facilities and service organization, nursing care, psychological and administrative support, social work services, medical care, nutritional care, medication supply, admission processes, and head nurse attention. The collected data were analyzed using univariate, bivariate, and multivariate statistical methods to determine the relationship between service dimensions and overall patient satisfaction as well as to identify the most dominant predictors influencing satisfaction.

Settings and Participants

This study was conducted in the haemodialysis unit of Royal Prima General Hospital, Medan, Indonesia, between June and August 2025. The hospital is one of the referral healthcare facilities providing routine haemodialysis services for patients with End-Stage Kidney Disease (ESKD). The haemodialysis unit operates continuously to accommodate patients requiring long-term renal replacement therapy and comprehensive nursing care. The study setting was selected because of the increasing number of haemodialysis patients and the need to evaluate patient satisfaction using a multidimensional perspective of nursing service quality.

The target population consisted of all patients undergoing haemodialysis treatment at Royal Prima General Hospital during the study period. A total sampling technique was applied to include all eligible patients who met the inclusion criteria. Initially, 115 patients were identified as the study population; however, only 61 patients successfully participated and completed the questionnaire, resulting in a response rate of 53%. Patients were included if they were aged 18 years or older, had undergone haemodialysis treatment for at least three months, were clinically stable during data collection, and were willing to participate by providing informed consent. Patients who experienced severe clinical instability, cognitive impairment, or communication difficulties during the data collection process were excluded from the study. The final sample was considered representative of the active haemodialysis patient population receiving nursing services at the hospital during the research period.

Instruments and Data Collection

Data were collected using a structured multidimensional questionnaire designed to assess patient satisfaction with haemodialysis nursing services. The instrument consisted of nine dimensions of service quality, including facilities and service organization, nursing and assistant care, psychological and administrative attention, contact with social work personnel, medical attention and care, nutritional care and attention, medication supply and quality, admission process features, and attention provided by the head nurse. Patient satisfaction was measured using a Likert-scale response format ranging from “fairly satisfied” to “very satisfied.” In addition, empathy was assessed using the Jefferson Scale of Empathy, while several other service dimensions were evaluated using a researcher-developed questionnaire adapted from multidimensional healthcare service quality standards.

Prior to the main study, the instrument underwent validity and reliability testing through a pilot study involving 20 haemodialysis patients outside the main sample. The validity test demonstrated that all questionnaire items met the required corrected item-total correlation value (>0.444), while the reliability analysis showed satisfactory internal consistency with Cronbach’s alpha coefficients greater than 0.70 for all dimensions. These results confirmed that the instrument was valid and reliable for measuring patient satisfaction in the haemodialysis setting.

Data collection was conducted systematically in three stages. The first stage involved obtaining ethical approval and administrative permission from the hospital management. The second stage

included coordination with the head nurse and healthcare staff to identify eligible participants based on the inclusion criteria. In the final stage, questionnaires were distributed directly to patients during their haemodialysis sessions, particularly during rest periods to minimize disruption to clinical care. Each respondent was given approximately 15–20 minutes to complete the questionnaire, and the researchers remained available to provide clarification whenever necessary. All participants provided informed consent prior to participation, and confidentiality was maintained throughout the study process.

Data Analysis

The collected data were analysed using IBM SPSS Statistics through univariate, bivariate, and multivariate statistical procedures. Univariate analysis was performed to describe the demographic characteristics of respondents and the distribution of patient satisfaction across each service dimension using frequencies, percentages, means, and standard deviations.

Bivariate analysis was conducted using the Chi-square test to examine the relationship between each dimension of nursing service quality and overall patient satisfaction. A significance level of $p < 0.05$ was used to determine statistically significant associations between variables.

Furthermore, multivariate analysis was performed using multiple logistic regression to identify the most dominant factors influencing patient satisfaction after controlling for potential confounding variables. Variables that showed significant associations in the bivariate analysis were included in the regression model. The results were presented as regression coefficients (B), standardized coefficients (Beta), t-values, and significance values to determine the strongest predictors of patient satisfaction among haemodialysis patients at Royal Prima General Hospital, Medan.

Ethical Consideration

This study was conducted in accordance with the ethical principles outlined in the Declaration of Helsinki. Ethical approval was obtained from the Health Research Ethics Committee of Universitas Prima Indonesia with ethical clearance number No. 008/KEPK/UNPRI/VII/2025 prior to data collection. Permission to conduct the study was also obtained from the management of Royal Prima General Hospital, Medan.

All participants received a complete explanation regarding the objectives, procedures, benefits, and potential risks of the study before participation. Written informed consent was obtained from all respondents, and participation was entirely voluntary. Participants were informed of their right to withdraw from the study at any time without any consequences for their treatment or healthcare services.

To ensure confidentiality and anonymity, respondents' identities were not recorded on the questionnaires, and all collected data were coded and stored securely for research purposes only. The researchers also ensured that the data collection process did not interfere with the patients' haemodialysis treatment or clinical condition.

RESULTS

Univariate Analysis of the Multidimensional Approach

The results of this study were obtained in June and August 2025 regarding the Analysis of Hemodialysis Patient Satisfaction Based on a Multidimensional Approach in Nursing Services at Royal Prima General Hospital in Medan in 2025. These results were obtained using univariate, bivariate, and multivariate analyses.

Table 1. Patient Satisfaction Based on Dimension.

Dimension	Category	f	%
Dimension 1: Facilities and service organization	Satisfied	26	42.6
	Very satisfied	35	57.4
	Total	**61**	**100.0**
Dimension 2: Care Provided by Nurses and/or Assistants on Duty	Satisfied	31	50.8
	Very satisfied	30	49.2
	Total	**61**	**100.0**
Dimension 3: Attention to Psychological and Administrative Issues	Satisfied	42	68.9
	Very satisfied	19	31.1
	Total	**61**	**100.0**
Dimension 4: Contact and Social Work Personnel	Satisfied	37	60.7
	Very satisfied	24	39.3
	Total	**61**	**100.0**
Dimension 5: Medical Attention and Care	Fairly satisfied	5	8.2
	Satisfied	35	57.4
	Very satisfied	21	34.4
	Total	**61**	**100.0**
Dimension 6: Nutritional Care and Attention	Fairly satisfied	7	11.5
	Satisfied	37	60.7
	Very satisfied	17	27.9
	Total	**61**	**100.0**
Dimension 7: Supply and Quality of Medicines	Fairly satisfied	11	18.0
	Satisfied	34	55.7
	Very satisfied	16	26.2
	Total	**61**	**100.0**
Dimension 8: Process Features of Reception	Fairly satisfied	8	13.1
	Satisfied	26	42.6
	Very satisfied	27	44.2
	Total	**61**	**100.0**
Dimension 9: Attention and Care Provided by the Head Nurse	Fairly satisfied	6	9.8
	Satisfied	32	52.5
	Very satisfied	23	37.7
	Total	**61**	**100.0**
Hemodialysis Patient Satisfaction	Satisfied	29	47.5
	Very satisfied	32	52.5
	Total	**61**	**100.0**

Analysis of the 61 respondents (Table 1) reveals a predominantly positive perception of hemodialysis services. Overall, 52.5% of patients categorized their experience as "Very Satisfied," while 47.5% were "Satisfied."

The absence of "Dissatisfied" ratings suggests that the basic clinical standards at Royal Prima General Hospital are well-maintained. Notably, Dimension 1 (Facilities) had the highest excellence rating (57.4% Very Satisfied), indicating that the physical environment is a major strength. Conversely, Dimension 7 (Medication Supply) and Dimension 8 (Admission Process) showed higher "Fairly Satisfied" percentages (18.0% and 13.1%), pointing to administrative bottlenecks that require management's attention.

Bivariate Analysis

Based on the results of the study conducted on respondents at Royal Prima General Hospital in Medan regarding "Analysis of Hemodialysis Patient Satisfaction Based on a Multidimensional Approach to Nursing Services at Royal Prima General Hospital in Medan in 2025".

The Chi-Square test results (Table 2) confirm that all nine dimensions of the nursing service have a significant relationship with overall patient satisfaction ($p<0.05$).

The consistent significance ($p = 0.000$ to 0.001) across all dimensions confirms that patient satisfaction in hemodialysis is truly multidimensional. It is not solely dependent on clinical outcome but is deeply integrated with psychological support, social worker interaction, and the head nurse's leadership. This justifies the hospital's need to maintain high standards across all contact points, not just in technical nursing.

The results obtained are as shown in the table below:

Table 2. Multidimensional Hemodialysis Patient Satisfaction Analysis (Royal Prima General Hospital, Medan, 2025).

Dimension	Category	Satisfied (N / %)	Very Satisfied (N / %)	Total (N / %)	p-value
1. Facilities and Service Organization	Satisfied	22 (36.1%)	4 (6.6%)	26 (42.6%)	**0.001**
	Very Satisfied	7 (11.5%)	28 (45.9%)	35 (57.4%)	
2. Nursing and Assistant Care	Satisfied	23 (37.7%)	8 (13.1%)	31 (50.8%)	**0.001**
	Very Satisfied	6 (9.8%)	24 (39.3%)	30 (49.2%)	
3. Psychological and Administrative Attention	Satisfied	28 (45.9%)	14 (23.0%)	42 (68.9%)	**0.001**
	Very Satisfied	1 (1.6%)	18 (29.5%)	19 (31.1%)	
4. Contact and Social Work Personnel	Satisfied	28 (45.9%)	9 (14.8%)	37 (60.7%)	**0.001**
	Very Satisfied	1 (1.6%)	23 (37.7%)	24 (39.3%)	
5. Medical Attention and Care	Fairly Satisfied	5 (8.2%)	0 (0%)	5 (8.2%)	**0.001**
	Satisfied	23 (37.7%)	12 (19.7%)	35 (57.4%)	
	Very Satisfied	1 (1.6%)	20 (32.8%)	21 (34.4%)	
6. Nutritional Care and Attention	Fairly Satisfied	6 (9.8%)	1 (1.6%)	7 (11.5%)	**0.001**
	Satisfied	22 (36.1%)	15 (24.6%)	37 (60.7%)	

	Very Satisfied	1 (1.6%)	16 (26.2%)	17 (27.9%)	
7. Medication Supply and Quality	Fairly Satisfied	10 (16.4%)	1 (1.6%)	11 (18.0%)	**0.000**
	Satisfied	17 (27.9%)	17 (27.9%)	34 (55.7%)	
	Very Satisfied	2 (6.9%)	14 (43.8%)	16 (26.2%)	
8. Admission Process Features	Fairly Satisfied	8 (13.1%)	0 (0%)	8 (13.1%)	**0.000**
	Satisfied	16 (26.2%)	10 (16.4%)	26 (42.6%)	
	Very Satisfied	6 (9.8%)	22 (36.2%)	27 (44.2%)	
9. Head Nurse Attention and Care	Fairly Satisfied	6 (9.8%)	0 (0%)	6 (9.8%)	**0.000**
	Satisfied	19 (31.1%)	13 (21.3%)	32 (52.5%)	
	Very Satisfied	4 (6.6%)	19 (31.1%)	21 (37.7%)	

Multivariate Analysis

Based on the results of the study conducted on respondents at Royal Prima General Hospital in Medan regarding "Analysis of Hemodialysis Patient Satisfaction Based on a Multidimensional Approach to Nursing Services at Royal Prima General Hospital in Medan in 2025," the results of the multivariate analysis obtained are as shown in the table below:

Table 3. Multiple Linear Regression - Final Model (Significant Predictors Only).

Variable	Unstandardized Coefficients (B)	Std. Error	Standardized Coefficients (Beta)	t	Sig.
Constant	0.860	0.312	–	2.756	0.008
Dimension 3: Psychological and Administrative Attention	0.047	0.017	0.231	2.838	0.006*
Dimension 4: Contact and Social Work Personnel	0.045	0.010	0.335	4.275	0.000*
Dimension 5: Medical Attention and Care	0.104	0.017	0.499	6.083	0.000*

Note: All predictors significant at $p \leq 0.01$.

To determine which factor contributes most significantly to satisfaction when all variables are considered simultaneously, a Multiple Logistic Regression was applied (Table 3).

The model identified Medical Attention and Care (Dimension 5) as the most dominant predictor ($B = 0.104$; $p = 0.000$). While other factors like psychological support and social work are significant, the professionalism and responsiveness of medical care remain the primary driver of satisfaction. This means that improvements in medical staff's clinical communication and attentiveness will yield the highest increase in overall patient satisfaction scores.

DISCUSSION

The Multidimensional Nature of Patient Satisfaction

This study confirms that patient satisfaction in haemodialysis is a multidimensional construct. Bivariate analysis showed that all nine dimensions ranging from facilities to head nurse attention—significantly correlate with satisfaction. These findings align with the SERVQUAL model, where Tangibles, Reliability, Responsiveness, Assurance, and Empathy collectively form the patient's perception of quality. At Royal Prima General Hospital, the high "Very Satisfied" rating in the Facilities dimension (57.4%) suggests that the hospital's investment in modern infrastructure serves as a crucial "first impression" or halo effect, positively influencing other service perceptions.

The Primacy of Medical Care as the Dominant Factor

The most pivotal finding of this research is that Medical Attention and Care (Dimension 5) is the most dominant predictor of satisfaction (B = 0.104$; p = 0.000). While administrative and facility factors are important, haemodialysis patients—who undergo high-risk, repetitive, and life-sustaining therapy—prioritize Technical Quality (clinical accuracy) above all else.

This follows Herzberg's Two-Factor Theory: dimensions like facilities and administration act as "hygiene factors" (their absence causes dissatisfaction), whereas Medical Care acts as a "motivator" that drives high satisfaction. Patients perceive the doctor's competence and the precision of the dialysis process as a direct guarantee of their safety and longevity. This aligns with research by Palmer et al. (2021), which posits that in chronic care, the patient-physician trust bond is the strongest anchor for service loyalty.

The Role of Psychosocial and Administrative Support

Interestingly, the multivariate model also retained Psychological Attention and Social Work Personnel as significant predictors. This highlights a unique characteristic of haemodialysis care: because it is a long-term treatment, patients face immense social and emotional burdens. The presence of social workers who assist with insurance (BPJS/Administrative) and emotional counselling provides "Functional Quality" that clinical care alone cannot offer. This finding addresses the Research Gap identified in the introduction: that Indonesian haemodialysis patients require a support system that goes beyond just the dialysis machine.

Limitations and Response Rate

A limitation of this study is the final sample size of 61 respondents from an initial population of 115. This 53% response rate was primarily due to the clinical instability of some patients during the data collection period—a common challenge in end-stage kidney disease research. Despite this, the total sampling approach within the accessible population ensures that the data remains representative of the current service dynamics at Royal Prima General Hospital.

IMPLICATION AND LIMITATION

The findings of this study provide important implications for nursing management and healthcare services in hemodialysis settings. The study confirms that patient satisfaction is a multidimensional construct influenced not only by technical and clinical care but also by psychosocial, organizational, and administrative factors. Medical attention and care emerged as the most dominant predictor of satisfaction, indicating that improving clinical communication, responsiveness, and professional competence among healthcare providers should become a priority for hospital management. In addition, the significant influence of psychological support and social work services highlights the importance of integrating holistic and patient-centered care approaches into routine hemodialysis services. Hospitals are encouraged to strengthen therapeutic communication, counseling services, and administrative assistance programs to reduce patient anxiety and improve long-term treatment adherence. These findings may also serve as a reference for developing quality improvement strategies and nursing service evaluation models in chronic care settings.

Several limitations of this study should be acknowledged. First, the study used a cross-sectional design, which only captured patient satisfaction at a single point in time and did not allow for the evaluation of changes in satisfaction over the course of long-term hemodialysis treatment. Second, the final sample size was relatively limited, with only 61 respondents participating from the total eligible population, primarily due to patient clinical instability during data collection. This may affect the generalizability of the findings. Third, the study relied on self-reported questionnaires, which may be subject to response bias and social desirability bias, as participants may have tended to provide favorable responses regarding healthcare services. Finally, the study was conducted in a single hospital setting, which may limit the applicability of the results to other healthcare institutions with different organizational systems, patient characteristics, and service cultures.

CONCLUSION

Patient satisfaction with haemodialysis nursing services at Royal Prima General Hospital, Medan, was found to be multidimensional and significantly influenced by various aspects of healthcare delivery, including medical care, nursing services, psychological support, administrative processes, and organizational factors. Overall, most patients reported high levels of satisfaction with the services provided. Among all service dimensions, medical attention and care emerged as the most dominant factor influencing patient satisfaction, highlighting the importance of professional competence, effective communication, and responsiveness of healthcare providers in long-term haemodialysis treatment.

The findings suggest that improving the quality of clinical care alone is insufficient to achieve optimal patient satisfaction. A holistic and patient-centred approach that integrates psychosocial support, therapeutic communication, and efficient administrative services is essential in enhancing the overall experience of haemodialysis patients. Therefore, hospitals should continuously strengthen

nursing competencies, interdisciplinary collaboration, and supportive care services to improve patient outcomes, treatment adherence, and quality of life among patients undergoing chronic haemodialysis therapy.

AUTHOR CONTRIBUTION

Evalatifah Nurhayati : Conceptualization, methodology, data curation, formal analysis, writing – original draft.

Elis Anggeria : Conceptualization, methodology, writing – review & editing, and supervision.

Tiarnida Nababan : Data curation, formal analysis, writing – original draft.

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Evalatifah Nurhayati : None.

Elis Anggeria : None.

Tiarnida Nababan : None.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest regarding the publication of this research. This study was conducted independently, and no financial support or personal relationships influenced the results or conclusions presented in this manuscript.

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Table Captions

Table 1. Patient Satisfaction Based on Dimension.

Table 2. Multidimensional Hemodialysis Patient Satisfaction Analysis (Royal Prima General Hospital, Medan, 2025).

Table 3. Multiple Linear Regression - Final Model (Significant Predictors Only).