

The relationship between nurse behavior, waiting time, and preoperative education with preoperative patient satisfaction central surgical installation

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ABSTRACT

In context service health, satisfaction patient be one _ indicator main in evaluate quality services provided by the house Sick. Installation service _ surgery central own role crucial in the treatment process patient before operation. Factors _ like behavior nurse, time wait, and preoperative education has identified as a number of possible factors _ influence satisfaction patients in the preoperative phase. Study This aim for know connection behavior nurse, time wait, and preoperative education with satisfaction preoperative patients in the installation surgery central. Research methods This use approach quantitative. The research location is at Patut Regional Hospital Obedient Patju, West Lombok. Respondent in research This totaling 97 people. The data collection method uses questionnaire. Research result show There is connection between behavior nurse with satisfaction patient, p This showed from r value is 0.417. Variable time wait also show There is connection with satisfaction patient, p This showed from r value is 0.624. In aspect Preoperative education also shows _ There is connection between time Wait with satisfaction patient, p This showed from r value is 0.282. Percentage satisfaction patients who are influenced by behavior nurse, time wait, and pre- operative education at the installation Central Surgery viz amounting to 51.4%, the rest 48.6 % is influenced by other variables that are not researched .

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INTRODUCTION

In the context of health services, patient satisfaction is one of the main indicators in assessing the quality of services provided by hospitals. Services in central surgical installations have a crucial role in the patient care process before surgery (Fitria et al., 2023) . Factors such as nurse behavior, waiting time, and preoperative education have been identified as factors that can influence patient satisfaction in the preoperative phase. (Young et al., 2024) ; (Ruud et al., 2024) . A nurse is someone who has graduated from higher education in nursing, both at home and abroad, which is recognized by the government in accordance with the provisions of laws and regulations . Nursing

is a noble profession. Why not, caring for sick patients is not an easy job. Not everyone can have the patience to serve people who are suffering from illness. Nurses need special abilities and social care which includes intellectual, technical and interpersonal skills which are reflected in caring or affection/love behavior. (Guerrero et al., 2024) . Thus, a nurse is an individual (a professional) who has the ability, responsibility and authority to provide nursing services/care at various levels of nursing services. (Almarhabi et al., 2024) . Nurse behavior, including aspects of communication, empathy, and interpersonal skills, always get spotlight and has a significant impact on patient perceptions of service quality House Sick (Sabetsarvestani & Geçkil, 2024) . Understanding nurse behavior is a key element in understanding the dynamics of interactions between nurses and patients. Good nursing behavior, such as empathy, patience, and effective communication, can directly influence patient perceptions of the quality of services provided (Sebaeng et al., 2023) ; (Graça et al., 2023) ; (Pérez - Rugosa et al., 2024) . Therefore, exploring the relationship between nursing behavior and patient satisfaction may provide valuable insights for improving nursing practices in hospitals.

Likewise with waiting times, where long periods can increase patients' levels of anxiety and discomfort, and potentially impact their satisfaction. Waiting time is a factor that is often a source of discomfort for patients in the health care process (Bassett et al., 1997) ; (Yousef et al., 2024) . Long waiting times can not only increase patient anxiety levels, but can also reduce their satisfaction with the services they receive. The length of patient waiting time reflects how the hospital is manage service components accordingly with the patient's situation and expectations (Ben Natan et al., 2024) . According to the Indonesian Ministry of Health Number: 129/Menkes/SK/II/2008 concerning waiting time for services, the time required starts from the patient registering at the outpatient registration site, until being served by a doctor at the follow-up polyclinic . Ideally time The wait lasts approximately or equal to 60 minutes. Waiting time can also be interpreted as the total time spent by customers/patients waiting at the Outpatient Installation , the time between the first patient registering until they receive an examination/service by a doctor at the destination polyclinic , and the time that passes between the appointment time that has been determined and the time when the patient arrives. receive an initial evaluation by a Health officer (Ammentorp et al., 2005) . Good and quality service is reflected in friendly, fast and comfortable service (Getachew et al., 2024) . Therefore, assessing the effect of waiting time on preoperative patient satisfaction is an important aspect in efforts to improve the efficiency and quality of health services, especially in the context of surgical installations which require timely and well-coordinated processes.

Apart from behavior nurse and time wait, other aspects have an influence to satisfaction patient is preoperative education. _ Pre-operative education is the provision of information from the anesthetist to the patient and the patient's family (Bang et al., 2024) . Education This containing various information about surgery, preparation before surgery to post-operative care. This education is needed to reduce the anxiety of patients who will undergo surgery (Brossier et al., 2024) . Information given to patients pre-operatively includes the purpose of the operation, type of anesthesia and surgical risks (Almutary & Almashi, 2024) . Comprehensive preoperative education can provide patients with a better understanding of the surgical procedure, minimize uncertainty, and increase patient confidence in the care they will receive (Vergara-Merino et al., 2023) . Next, preoperative education _ hold role important in prepare patient in a way physical and mental for undergo procedure operation. Level of understanding patient about procedure necessary operations and preparations _ can in a way direct influence trust self and satisfaction they to care received _ (Bang et al., 2023) . Some previous studies with similar topics include, first, the research on "Perceptions and Actual Practice among Nurses Working in Surgical Units" (Almutary & Almashi, 2024). The findings of this study indicate that pre-operative education delivery may be influenced by nurses' perceptions. The second study is on "Patient Satisfaction in Pediatric Surgical Care" (Espinel et al., 2014). This study states that patient care experience is a crucial measure in

assessing the quality of pediatric surgical care. However, findings related to patient satisfaction and care experience may be limited due to the lack of validated tools for measurement. The third study discusses "Preoperative Anxiety in the Surgical Transfer and Waiting Area" (Dziadzko et al., 2022). Its findings suggest that patients complain about insufficient information and an uncomfortable environment in the waiting area. To reduce anxiety, they primarily request warm blankets/music (physical/sound barriers), and additional sedatives. The three studies mentioned share a common focus on various aspects of preoperative care and its impact on patient satisfaction within surgical settings. Firstly, Almutary & Almashi's study investigates the perceptions and actual practices of nurses working in surgical units, particularly examining how preoperative education delivery is influenced by nurses' perceptions. Similarly, the study titled "Patient Satisfaction in Pediatric Surgical Care" by Espinel et al. underscores the importance of patient care experience as a pivotal measure in evaluating the quality of pediatric surgical care. Both studies shed light on the significance of understanding healthcare providers' behaviors and attitudes in shaping patients' experiences and satisfaction levels. Furthermore, Dziadzko et al.'s research on preoperative anxiety in the surgical transfer and waiting area accentuates the challenges patients face due to insufficient information and uncomfortable waiting environments, emphasizing the need for strategies to mitigate preoperative anxiety effectively. However, despite these similarities, there are notable differences between these studies and the research titled "The relationship between nurse behavior, waiting time, and preoperative education with preoperative patient satisfaction central surgical installation." The latter seems to focus on a broader scope, encompassing various factors such as nurse behavior, waiting time, and preoperative education, and their collective impact on preoperative patient satisfaction specifically within a central surgical installation. While Almutary & Almashi's study delves into nurses' perceptions and practices, the mentioned research appears to examine a wider range of variables that may influence patient satisfaction, including waiting times and the effectiveness of preoperative education programs. Therefore, while all studies share the common goal of understanding and improving preoperative care and patient satisfaction, the specific focus and variables analyzed may vary, highlighting the diverse perspectives and approaches within this field of research.

Based on background behind that has been outlined important done study For identified the relationship between nurse behavior, waiting time, and preoperative education with patient satisfaction in central surgical installations. The findings from this research can provide valuable insight for hospital management in improving the quality of service, as well as provide input for nurses and other health workers to improve interaction and service to patients. (Huang & Huang, 2023) . Thus, it is hoped that this research can make a significant contribution in efforts to improve patient experience and satisfaction in the preoperative phase. With understand connection between behavior nurse, time wait, and preoperative education with satisfaction preoperative patient, home _ Sick can identify areas of need improved and develop appropriate intervention strategies _ For increase experience patients and quality maintenance in a way whole.

RESEARCH METHOD

research uses a quantitative approach, because the data obtained will later be translated into numbers and analyzed using statistics. Quantitative research is research that involves calculations or numbers or quantities. This research uses a correlational research design . According to (Arikunto, 2015) Correlation research itself is intended to determine whether or not there is a relationship between two or more variables. Research design can seen in figure 1. The selection of variables is based on the results of established previous research (Dziadzko et al., 2022);(Espinel et al., 2014);(Almutary & Almashi, 2024). Research This carried out at the Patut Regional General Hospital Obedient Patju West Lombok Regency. This location chosen Because based on results observation there is a number of problem related with satisfaction patient at home Sick the. Data

collection using questionnaire. Data analyzed use descriptive statistical methods and inferential statistics using SPSS software.

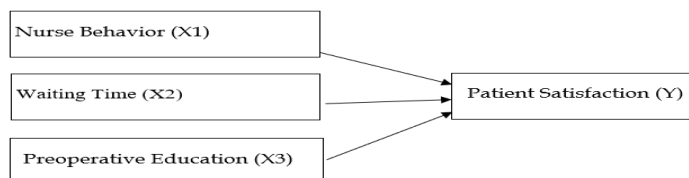


Figure 1. Research design

Population in study This is preoperative patients totaling 3,058 patients. Retrieval method sample in study This based on criteria inclusion that is criteria specifically that meets characteristic features sample will researched. Criteria inclusion the that is preoperative patients who have enter room surgery at Patut Regional Hospital Obedient Patju West Lombok Regency. Formula used For determine sample is Slovin's formula. From calculations Slovin's formula then obtained amount amounted to 96.83 however number the rounded so that obtained amount sample as many as 97 preoperative patients.

Hypothesis testing using the correlation test. Use of correlation tests used For understand connection between variable X with Variable Y. Variable independent) in study This that is behavior nurse , time wait , and preoperative education . Variable This is assumed variables own potency For influence or explain variation in satisfaction preoperative patients . Variable Y (variable dependent) in study This is satisfaction preoperative patients . Correlation test used For determine is there is relationship and how much strong connection between variables the . With using the correlation test , researchers can know is there is connection between behavior nurse with satisfaction preoperative patients . If the correlation test show exists correlation significant positive between behavior nurses and satisfaction patient , p That can show that behavior more nurses Good correlated with level satisfaction more patients tall . Likewise , test the correlation can used For evaluate connection between time waiting and preoperative education with satisfaction preoperative patients . Thus , test the correlation play role important in help researcher For understand connection between variables key in study that , so can give valuable insight For improvement and development service in Installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency . On analysis this , value coefficient correlation can calculated with use spss with see r value (Arikunto, 2015) .

RESULTS AND DISCUSSIONS

Descriptive Analysis

Research data includes the dependent variable, namely patient satisfaction (Y), as well as independent variables, namely patient perception/assessment of nurse behavior (X1), waiting time (X2), and preoperative education (X3). In this section, the data for each variable that has been processed is described for know mean, minimum, maximum and standard deviation values .

Descriptive Statistics Behavior Nurse Variable. Following can served analysis of related data with variable behavior Nurse at Installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency.

Table 1. Descriptive _ statistics nursing behavior variable

N	Valid	97
	Missing	0
Mean		45.01
Std. Deviation		6,381
Minimum		32

Maximum

60

Descriptive statistics perception patient to behavior Nurse at Installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency in table 1 shows that of 97 participating patients _ in study this, no there is missing data, which is meaningful all data collected with Good. Average score perception patient to behavior nurse is of 45.01, with standard deviation amounting to 6,381. This result show that in a way overall, patient give adequate assessment _ positive to behavior caring nurse _ they before procedure operation. Standard relative deviation _ low show that part big score perception patient tend is at in close range _ with average, though variation in perception also occurs. Lowest score recorded _ in study This is 32, while score highest is 60. It is show exists significant variation _ in perception patient to behavior Nurse at Installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency. This result give description that part big patient own positive perception _ to behavior nurse, however there are also some small patients who have more perception _ low or different.

Descriptive Statistics Waiting Time Variable

Following can served results analysis to Variable Waiting Time in Installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency.

Table 2. Descriptive _ statistics waiting time variable

N	Valid	97
	Missing	0
Mean		25.78
Std. Deviation		3,327
Minimum		19
Maximum		34

Descriptive statistics on patient perceptions of waiting time at the Central Surgical Installation of Patut Patuh Patju Hospital, West Lombok Regency in table 2 shows that of the 97 patients who were subjects in this study, there was no missing data, so all data can be considered properly. Based on this data, it was found that the average patient perception score regarding waiting time was 25.78. These results illustrate that overall, patients gave a positive assessment of the waiting time before they underwent surgical procedures at the installation. A standard deviation of 3.327 indicates how far the waiting time variable scores are spread from the mean. With this value, it can be seen that most of the waiting time scores are in the range of ± 3.327 from an average of 25.78. These data indicate that the majority of patients had a uniform experience in their satisfaction with wait times. However, the range of waiting time scores from minimum to maximum, namely from 19 to 34, confirms that there is variation in the level of patient satisfaction with waiting times. This indicates that some patients gave a lower assessment while others gave a higher assessment of their waiting time before the surgical procedure .

Descriptive Statistics Preoperative Education Variable

Following can served results analysis to Variable preoperative education at the installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency.

Table 3. Descriptive statistics preoperative education variable

N	Valid	97
	Missing	0
Mean		41.68
Std. Deviation		5,765
Minimum		29
Maximum		58

Descriptive statistics about perception patient to Preoperative Education in Installation _ Patut Hospital Central Surgery Obedient Patju West Lombok Regency in table 3, was found that

the average perception patient to variable preoperative education _ is amounting to 41.68. This result give description that in a way overall, patient give adequate assessment _ positive towards the educational process before undergo procedure operation. Standard deviation of 5,765 indicates how much Far score variable preoperative education _ spread than average. With mark it is us see that part big score variable preoperative education _ is at in range ± 5.765 from an average of 41.68. This matter show that majority patient own relative experience _ uniform in satisfaction they to preoperative education. _ Range score variable preoperative education _ from minimum to maximum, ie from 29 to 58, shows variation level evaluation patient to preoperative education. _ Despite the average score variable preoperative education _ is Enough high, variety This show that There is a number of the patient who gave it more assessment _ low while others deliver more assessment _ tall on the preoperative education process. By general, patient give positive assessment _ to education before operations, p This can show that effort giving education before home surgery _ Sick the has succeed reach satisfactory standards _ for part big patient.

Descriptive Statistics Variable Patient Satisfaction

Before presents descriptive data statistics about variable satisfaction patients at the installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency, important For understood that satisfaction patient No only indicator from quality services provided by a _ House sick, but also a reflection from experience underlying individual. _ For get clear picture _ about level satisfaction patients at the installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency can seen descriptive satisfaction statistics patients in table 4.

Table 4. Descriptive statistics of satisfaction variable

N	Valid	97
	Missing	0
Mean		50.69
Std. Deviation		5,665
Minimum		37
Maximum		66

Based on score data satisfaction patients at the installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency, found that the average score satisfaction patient is amounting to 50.69. Fairly average value tall This show that in a way general, patient give positive assessment _ to experience they are at home Sick This . Standard deviation of 5,665 indicates how much Far score satisfaction patient spread than average. With mark it is us can see that part big score satisfaction patient is at in range ± 5.665 from an average of 50.69. This matter show that majority patient own relative experience _ uniform in satisfaction they . Range score satisfaction patient from minimum to maximum is from 37 to 66. Quite a range big This show exists variation in level satisfaction patient . A number of patient give more score _ low , while others deliver more score _ tall to experience they are at home Sick . By Overall , this data give positive picture _ about satisfaction patients at the installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency .

Hypothesis testing

Hypothesis testing use Pearson correlation . Pearson correlation test results coefficient Pearson correlation (r), for measure strength and direction connection between two variables . However , for know is coefficient correlation the significant in a way statistics , necessary carry out hypothesis testing to mark correlation . Coefficient correlation used in study This is behavior nurse (X1), time wait (X2), and preoperative education (X3) have positive influence _ or negative to satisfaction patient (Y) as well For look for know how much big influence or connection between behavior nurse (X1) time wait (X2), and preoperative education (X3) with satisfaction patient (Y). There are some possible steps _ done For evaluate is there is connection between two variables in

the correlation test , one of them with notice mark coefficient correlation (r): Coefficient Pearson correlation (r) measure strength and direction connection between two variables . The r value ranges from -1 to +1. A value close to +1 indicates connection strong positive , whereas _ a value close to -1 indicates connection strong negative . _ A value close to 0 indicates that No There is a linear relationship between two variables . Following hypothesis that would tested in study This :

a) There is a significant relationship between nurse behavior and preoperative patient satisfaction, b) There is a significant relationship between waiting time and preoperative patient satisfaction, c) There is a significant relationship between preoperative education and preoperative patient satisfaction.

Table 5. Correlation of nursing behavior variables

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.417 ^a	.174	.165	5,176

Based on table 5 , the coefficient of the relationship between X1 and Y shows a positive relationship of 0.417. The positively charged relationship coefficient shows that nurse behavior has a positive correlation of 41.7% with patient satisfaction. In this context, a correlation of 0.417 indicates that the better the nurse's behavior, the higher the level of patient satisfaction. In other words, patients tend to be more satisfied if they experience better nursing behavior, such as a friendly attitude, good service, high level of concern, and effective communication. The interpretation of "41.7%" in the statement refers to the percentage of variation in patient satisfaction that can be explained by variations in nursing behavior. That is, approximately 41.7% of the variation in patient satisfaction can be explained by variations in nurse behavior. From the results of the analysis that have been presented, the first hypothesis: There is a significant relationship between nurse behavior and preoperative patient satisfaction is declared acceptable. However, it is important to remember that correlation does not imply a cause-and-effect relationship, meaning that this positive correlation does not directly state that nurse behavior causes patient satisfaction. It is possible that other factors also contribute to patient satisfaction, but in the context of this analysis, there is a significant positive relationship between nurse behavior and patient satisfaction.

Table 6. Waiting time variable correlation test

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.624 ^a	.390	.383	4,448

Based on table 6 , the coefficient of the relationship between X2 and Y shows a positive relationship of 0.624. The positively charged relationship coefficient shows that waiting time has a positive correlation of 62.4% with patient satisfaction. The positive correlation between the waiting time variable (X2) and patient satisfaction (Y) is 0.624, indicating that there is a positive relationship between waiting time and patient satisfaction. In this context, a correlation of 0.624 indicates that the shorter the waiting time, the higher the level of patient satisfaction. This means that patients tend to be more satisfied if they experience shorter wait times before receiving services. The interpretation of "62.4%" in the statement refers to the percentage of variation in patient satisfaction that can be explained by variations in wait times. Thus, approximately 62.4% of the variation in patient satisfaction can be explained by variation in waiting times. This shows that waiting time has a significant influence on patient satisfaction, where increasing or decreasing waiting time can have a significant impact on the level of patient satisfaction. From the results of the analysis that have been presented, the second hypothesis: There is a significant relationship between waiting time and preoperative patient satisfaction is declared acceptable. However, it is also important to remember that correlation does not imply a cause-and-effect relationship. This means that this positive correlation does not directly imply that waiting time causes patient satisfaction. It is possible that other factors also influence patient satisfaction. However, in the

context of this analysis, there is a significant positive relationship between waiting time and patient satisfaction

Table 7. Correlation test for preoperative education variables

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.282 ^a	.080	.070	5,463

Based on table 7, the coefficient of the relationship between X3 and Y shows a positive relationship of 0.282. The positively charged relationship coefficient shows that preoperative education has a positive correlation of 28.2% with patient satisfaction. The positive correlation between the preoperative education variable (X3) and patient satisfaction (Y) is 0.282, indicating that there is a positive relationship between preoperative education and patient satisfaction. In this context, a correlation of 0.282 indicates that the better the quality of preoperative education provided to patients, the higher the level of patient satisfaction. The interpretation of "28.2%" in the statement refers to the percentage of variation in patient satisfaction that can be explained by variations in preoperative education. Thus, approximately 28.2% of the variation in patient satisfaction can be explained by variation in the quality of preoperative education received by patients. This shows that preoperative education has a significant influence on patient satisfaction, where increasing the quality of preoperative education can increase the overall level of patient satisfaction. From the results of the analysis that has been presented, the third hypothesis: There is a significant relationship between preoperative education and preoperative patient satisfaction is declared acceptable. However, it should be remembered again that correlation does not imply a cause-and-effect relationship. This means that this positive correlation does not directly state that preoperative education causes patient satisfaction. It is possible that other factors also influence patient satisfaction. However, in the context of this analysis, there is a significant positive relationship between preoperative education and patient satisfaction .

Discussion

Based on results research that has been done behavior nurse relate tightly with satisfaction patient Behavior This can form communication, caring, behavior sold, up to giving positive information _ to patient. Behavior nurses are very important in fulfil satisfaction patient, p This be one _ indicator quality service at a House Sick. Behavior displayed by nurses _ is with provide a feeling of comfort, attention, love affection, care, maintenance health, giving encouragement, empathy, interest, love, trust, protect, presence, support, give touch and ready help as well as visit patient (Galletta et al., 2022) . Theory of Human Care reveals that There is ten carative factors that can reflect behavior from a nurse (Kim & Lee, 2023) . Ten factor the are : human altruistic (prioritizing values _ _ humanity), plantingpak trust - hope , develop sensitivity self self and others, relationships each other trust and each other helpful , expression positive and negative feelings , solutions _ systematic problems , learning processes interpersonal teaching, supportive environment , fulfillment need base human , and existential phenomenological (Riegel et al., 2018) . Behavior nurse is results from culture, values , experiences and relationships nurse with patient (Zhou et al., 2022) . When the nurse deal with health and disease in in practice, then ability nurse in service will the more develop (Iwanowicz-Palus et al., 2022) . Attitude nurse in practice related nursing _ with concern is with presence , touch love darling , always listen and understand client (Taleghani et al., 2022) .

Waiting time is frequent problem _ give rise to complaint patients in some House Sick. Length of time Wait patient can reflect How House Sick in manage component appropriate service _ with situation and expectations patient. Good and quality service _ reflected from friendly, fast and comfortable service _ (de Matos et al., 2024) . Waiting time patient is one of potential components _ give rise to dissatisfaction. Waiting time patient reflect How clinic , center health, and home Sick manage component customized service _ with situation and expectations patient

(Wu et al., 2024) . Research result This in line with research conducted by (Mamballikalam et al., 2024) that there is correlation between satisfaction patient and time Wait. Respondents who report time tend to wait a long time No satisfied with service House Sick. By whole results study This show that percentage satisfaction patients who are influenced by behavior nurse, time wait, and pre- operative education at the installation Patut Hospital Central Surgery Obedient Patju that is amounting to 51.4%. The rest 48.6 % is influenced by other variables that are not researched like influence environment, influence facilities, influence quality service, and so on. Satisfaction patient is mark subjective from quality service provided, though _ thereby in give evaluation patient behave objective. No satisfaction patient often found in experience related daily activities with attitudes and behavior officers , for example difficult doctor _ found , delay service nurses and doctors , cleanliness environment , etc. (Amankwah et al., 2023) ; (Akthar et al., 2023) .

CONCLUSION

Based on the research results and discussion that have been presented, the conclusion of this research is that there is a relationship between nurse behavior and patient satisfaction. with an r value of 0.417 is found connection between time Wait with satisfaction patient with the r value is 0.624, and there is connection between time Wait with satisfaction patient with r value is 0.282. Behavior nurse and time Wait role important in increase satisfaction patient, temporary preoperative education _ need attention more for increase satisfaction patient. With so, effort repair in behavior nurse, management time efficient wait, and upgrade quality preoperative education _ can help increase satisfaction patients at the installation Patut Hospital Central Surgery Obedient Patju West Lombok Regency. Based on the conclusions presented, the suggestions from this research include Patut Regional Hospital Obedient Patju to pay attention preoperative education delivered by nurses , especially in educational media , materials _ education , and competence nurse related giving preoperative education ; _ pay attention and improve service related with time Wait preoperative patients , cause _ time wait, it really affects you satisfaction patient ; increase quality Preoperative Education _ Because preoperative education _ play role important in prepare patient For operations , and results study show that quality preoperative education _ can influence satisfaction patient ; as well as evaluate behavior nurse to patient Because behavior good communication _ between nurse with patient will reminded quality service and satisfaction patient .

This research makes an important contribution to understanding the factors that influence preoperative patient satisfaction and provides direction for efforts to improve preoperative services at the hospital. Limitations of this study include the limited sample size, which may affect the generalizability of the results, as well as the data collection method which may have limitations in accurately measuring the variables studied. The possibility of measurement error, whether from nurse behavior, waiting time, or patient satisfaction, also needs to be considered. In addition, external factors such as individual patient characteristics and environmental factors can also influence research results. There are also temporal and local limitations in which this research was conducted, which may limit the generalizability of the results to a particular context or time. Recognizing these limitations, future research can improve design and methodology to produce more robust and reliable findings.

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