

## INFLUENCE OF THE QUALITY OF PHARMACY SERVICES AND NON-PHARMACY ON THE DECISION TO REDEEM THE PRESCRIPTION AND ITS IMPACT ON RETREATMENT OF GENERAL OUTPATIENT AT PASAR MINGGU HOSPITAL

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### ABSTRACT

*The study examines the influence of pharmaceutical and non-pharmaceutical service quality on prescription redemption decisions and subsequent re-treatment decisions among general outpatients at Pasar Minggu Regional Hospital. The hospital has faced challenges, including a decline in outpatient visits and filled prescriptions, affecting its revenue during the 2022-2023 period. Patient perceptions of the pharmacy services significantly impact their decision to return for further medical care. The research aims to assess both direct and indirect effects of service quality on prescription redemption and re-treatment decisions. The study employs a verification approach with a cross-sectional design, using accidental sampling to survey 342 general outpatients between October 2023 and February 2024. Data were analyzed descriptively and inferentially using SEM PLS 3.0, encompassing both outer and inner model analyses through PLS Algorithm, Bootstrapping, and Blindfolding techniques. The findings reveal that the quality of pharmaceutical and non-pharmaceutical services significantly influences the decision to redeem a prescription ( $P = 0.000$ ). Moreover, non-pharmaceutical service quality and the decision to redeem a prescription significantly affect the decision to re-medicate ( $P = 0.002$  and  $0.000$ , respectively). However, pharmaceutical service quality alone does not positively impact repeat treatment ( $P = 0.041$ ). Both service variables have a significant indirect effect on re-treatment decisions through the mediating role of prescription redemption ( $P = 0.000$ ).*

### KEYWORDS

*Pharmaceutical Services, Quality of Pharmaceutical Services, Non-Pharmaceutical Services, Decisions to Redeem Prescriptions, Decisions to Re-Medicate*



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## INTRODUCTION

A series of health service activities that are directly provided to patients individually or in groups aim to improve the health status of the community, both including curative, preventive, promotive, rehabilitative, and/or palliative efforts . A hospital is a form of service facility consisting of a medical service section, a medical support service section, a nursing section and non-medical support services which are responsible for the health sector for all groups of society. In addition to being capital-intensive, labor-intensive, technology-intensive, and regulation-intensive, it is also an effort for independence in facing competition in the hospital business industry as a result of the globalization era. Hospitals have an obligation to implement health services with good quality, patient-oriented according to service standards while still focusing on patient safety.

Pasar Minggu Hospital is a hospital owned by the Jakarta Regional Government in South Jakarta that has been providing health services since 2015 for all levels of society. During the period of 2022 and 2023, there was a decrease in the number of outpatient general patient visits .

**Table 1. Average data on general outpatient visits per month**

Types of Guarantors	Years of Service		
	2019	2022	2023
General Outpatient	4381	1770	2355
% of the overall number of outpatients	14%	11%	10%

Another condition that occurs at Pasar Minggu Hospital is that not all drug prescriptions input by doctors are redeemed by patients to the Pharmacy Installation. Based on the search of data on general outpatient visits and prescription receipts in 2019, 2022 and 2023, it is known that not all general outpatients who receive treatment are input prescriptions by doctors and it turns out that the number is significant. In 2019, only 43% of patients received prescriptions, in 2022 around 54% and in 2023 around 51% of patients. The reason is because of various things ranging from the prescribed drugs that have not been included in the hospital's drug list, the lack of understanding of doctors for drug items available to general patients, long waiting times so that patients do ask for manual prescriptions. In addition, the possibility of other causes needs to be investigated more deeply to reduce the incidence of prescriptions not being input by doctors.

**Table 2. Average prescription data per month of general outpatients**

Average number of prescriptions per month of general outpatient (Sheet)		
Year 2019	Year 2022	Year 2023
1897	952	1165

The data in the table above shows that the number of drug sales from general outpatient prescriptions in 2023 has increased by around 17% compared to 2022

even though it has not been able to reach the number of prescriptions in 2019. Outpatient general patient drug prescription services have an important role which is the final phase of the service flow of patients who make medical visits to hospitals. The increasing number of prescriptions encourages the service performance of the pharmaceutical unit to the maximum. The results of another study concluded that the availability of drugs had a significant effect on the satisfaction and loyalty of outpatients (Nurmiwiyati et al., 2020). Another study states that the level of patient knowledge affects the decision to purchase drug products (Ronauli & Indriani, 2020). Customer complaint data in 2022 and 2023 regarding the availability of drugs, waiting times for prescription services and the attitude of officers in providing pharmaceutical services, one of which is due to the limited number of pharmacists in prescription assessment activities and drug education activities. This can affect the quality of pharmaceutical services in outpatient care which refers to the results of the study that the presence of pharmacists has a good influence on pharmaceutical services.

Five dimensions of service quality according to Zeithaml et al., (2018) are measured to determine the magnitude of the gap between the perception of desired service quality and the reality obtained. The five dimensions are the reliability dimension, namely the reliability of officers in carrying out pharmaceutical services using the pharmaceutical information technology system so as to reduce service waiting time. The assurance dimension is the guarantee provided in carrying out pharmaceutical services so that there is trust from patients in the services provided. The dimensions of tangibles describe the physical appearance of the rooms, officers and facilities used in pharmaceutical services. The empathy dimension is the care and attention of officers given to patients when performing pharmaceutical services. Finally, the responsiveness dimension is to describe the officer's response to all patient complaints related to services at the pharmacy unit of Pasar Minggu Hospital. In

The quality of the service provided can meet the patient's expectations so that the service provider must know the service process from the beginning to the final stage and understand the patient's expectations. Patients will give a satisfied perception when they meet customer expectations. Research by Irmawati and corroborated by the conclusion of the study from Wibowo that the quality of service has an influence on the decision to treat where patients become satisfied because their needs are met and get a pleasant experience from quality services that exceed the perception expected by patients (Irmawati, 2011; Wibowo, 2017). The positives received when the patient received treatment and redeemed the prescription at the Outpatient Pharmacy Installation made the patient believe so that the patient would decide to return for a repeat visit. The results of the research from Novia, 2020 and strengthened by the conclusion of the research from Kusnaeti, 2016 that the quality of quality service has a positive impact where customers will be interested in returning to outpatient treatment at Pasar Minggu Hospital (Kusniati et al., 2016; Novia et al., 2024).

From the previous description, it is known that the services provided must be in accordance with the applicable pharmaceutical service standards, while from a non-pharmaceutical point of view, the services provided meet five aspects of the

service quality dimension. It is hoped that it will be able to increase drug sales through prescription redemption at the Pharmacy Installation which has an impact on the patient's desire to return for treatment and will increase hospital revenue so that services in the pharmacy unit cannot be separated from the overall health services provided at the hospital. Therefore, the researcher wants to conduct research on the influence of the quality of pharmaceutical services and non-pharmaceutical services on the decision to redeem prescriptions and its impact on the re-treatment of general outpatients at Pasar Minggu Hospital.

## RESEARCH METHOD

From the type of data used, this study is included in quantitative research with an explanatory level of associative research that explains the relationship between two or more variables. From the objective, the research is a verifiable research with a cross sectional approach. The research instrument with the survey method uses a questionnaire. The data was processed statistically descriptively and inferentially using SEM PLS 3.0 software including three stages in determining the statistical results of PLS (Partial Least Square), namely Outer Model evaluation (Measurement evaluation), Godness of Fit testing and Inner Model evaluation (Structural Model Evaluation) (Muhson, 2022) (Duryadi, 2021).

## RESULT AND DISCUSSION

### Overview of Respondent Characteristics

**Table 3. Characteristics of Research Respondents**

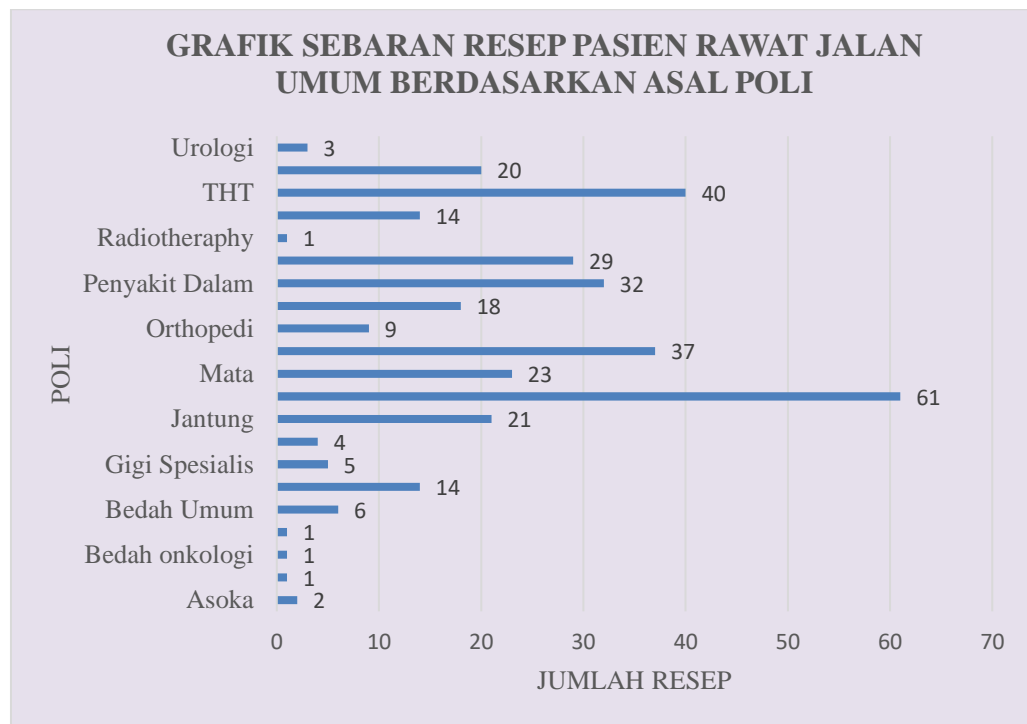
Characteristics Respondents	Code	Rincian	Sum	Percentage (%)
Gender	1	Male	107	31,29
	2	Woman	235	68,71
Age	1	18 - 25 Years	66	19,3
	2	26 - 55 Years	205	59,94
	3	>55 years	71	20,76
Education	1	Smp	24	7,02
	2	Sma	102	29,82
	3	Diploma	42	12,28
	4	Strata-1	154	45,03
	5	Strata-2	20	5,85
Work	1	Students / Students	29	8,48
	2	ASN	32	9,36
	3	Employee	117	34,21
	4	Self employed	33	9,65

	5	Others	131	38,30
Type	1	2nd visit	181	52,92
Number of visits	2	> visit 2 x	161	47,08

Source : Research data processing results

From the above results, most of the respondents are female, aged between 26-55 years, the largest percentage have a bachelor's education, but most do not mention their specific employment status. A total of 181 general patients were the second visit for outpatient treatment, which was around 52.92%. The remaining 161 patients or 47.08% were more than 2 medical visits as outpatients. Many things cause patients to no longer re-see treatment.

**Recipe distribution data**



**Figure 1. Distribution Chart of General Outpatient Prescriptions by poly**

Prescription distribution data can be used as reference data related to the priority management of drugs for general outpatient services. This can also be used as input to the Hospital Therapy Pharmacy Committee in conducting an annual evaluation of independent poly drugs in the hospital formulary. Genital Skin Poly is the highest amount of Poly for prescriptions redeemed by its patients. This can happen because Genital Skin Poly in addition to providing treatment services for patients' diseases also provides skin beauty care services so that patients who get a prescription will usually immediately redeem the prescription at the place where they are treated and carry out treatment. Furthermore, it was followed by the ENT poly, Obgyn, Internist and psychiatry poly. This can be a recommendation for

health service owners to prioritize the development of services from polyclinics that provide large income for hospitals. Radiotherapy Poly and Surgical Poly either general surgery or specialist surgery being the poly that serves the least general outpatients. This can be understood because it is related to the problem of the amount of financing for examinations and drugs that must be borne by patients, so most of them use BPJS guarantees.

### **Descriptive Statistical Analysis of Research Variables**

- a. The variables of pharmaceutical services, both the dimension of managing drug availability and clinical pharmacy services, are in a very high category so that services that have been carried out in pharmacies can be accepted and assessed very well by general outpatient respondents. The drug management dimension had the highest average score of 4.763 in indicators related to drug packaging and indicators related to drug expiration dates with the lowest average value of 4.681. The dimension of clinical pharmacy services is the indicator of providing drug education, which is 4.749 and the indicator with the highest average score of 4.795 regarding checking drugs before handing them over and identifying patients when handing over drugs.
- b. Non-pharmaceutical service variables have five service dimensions with their respective indicators. All dimensions have a very high category for all indicators, where the reliability dimension with the highest value in the indicator of reliable personnel using a computer with a value of 4,480 and the lowest average value of 4,439 for the waiting time for prescriptions. The assurance dimension had the highest average value in the indicator of hospitality implementation by pharmacy officers of 4.509 and the lowest indicator value in the ability to explain service flow of 4.439. The third dimension is tangible/physical evidence, the highest average score on the indicator of officers using personal identity is 4.529 and the lowest score is 4.503 with indicators regarding the location of the pharmacy. In the fourth dimension of empathy, the highest average score was 4.558 about the friendliness of the officers and the lowest average score of 4.465 was about prioritizing geriatric patients, disabilities and the elderly. The last dimension is the responsiveness dimension, the highest average score is in the indicator of the ability to communicate well with patients at 4.538 and the indicator of responding quickly to complaints from patients as the indicator with the lowest average value of 4.509

The data above provides an overview that the non-pharmaceutical service variables for all its dimensions are considered very good by general outpatient respondents. This may influence patients to redeem prescriptions at the pharmacy installation after receiving treatment from a doctor.

- c. Decision Variable redeem recipe

The first dimension about Extended decision making with four indicators is in the very high value category with the highest score of 4.582 regarding easy-to-understand drug education and the lowest indicator of 4.488 regarding timely drug delivery. The second dimension is Limited

decision making with the largest average value of 4,520 on the indicator having a previous positive experience as a reason to redeem the recipe and the lowest average value on the redeem recipe indicator because it is close to the poly room of 4,480. The last dimension, namely Habitual decision making with the highest average value of 4,554, is in the indicator "I am used to immediately redeeming drug prescriptions at pharmaceutical installations after treatment" and the lowest value of 4,512 for "relatively constant drug prices encourage me to redeem prescriptions".

d. Retreatment Variables

The transactional interest dimension with the highest average value of 4,401 is "General outpatient treatment at Pasar Minggu Hospital according to my needs" and the indicator with the lowest average value is "I want to re-treat as a general outpatient" of 4,330. The second dimension is the referential interest dimension with the highest average value of 4.401 for the indicator "I will give a positive response to general outpatient services" and the lowest average value is "A recommendation from a friend makes me want to revisit general outpatient treatment" of 4.208. The next dimension is the dimension of preferential interest with the highest average value of 4.395 is in the indicator "I choose to receive general outpatient treatment at Pasar Minggu Hospital from another hospital" and the lowest average value of the indicator "I will make general outpatient treatment at Pasar Minggu Hospital as the main choice" with a value of 4,330. The last dimension of the re-treatment variable is the exploratory interest "I will make general outpatient treatment at Pasar Minggu Hospital as the main choice" has the highest average value of 4,243 and the indicator "I read the testimonials of patients who have received general outpatient treatment at Pasar Minggu Hospital" with the lowest average value of 4,237.

**PLS Statistical Analysis**

*Analisis Outer model*

**Table 4. Data from the Construct Reliability & Validity test of the research questionnaire**

Variable	Cronbach's Alpha	Composite Reliability	Average Variance Extracted (AVE)
Re-Medicating (BU)	0,941	0,948	0,587
Recipe Redemption Decision (KM)	0,952	0,958	0,677
Non-Pharmaceutical Services (YNF)	0,966	0,969	0,636
Pharmaceutical Services (YF)	0,937	0,948	0,695

Source: research data processing results

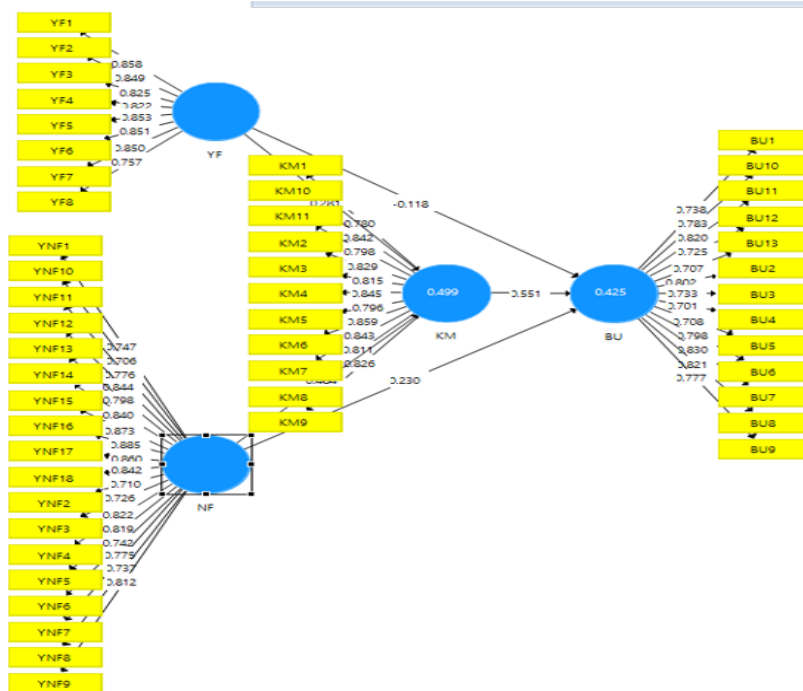


Figure 2. Outer loading test results

Table 5. Data on the results of the discriminatory validity test (test Fornell-Larcker Criterion)

Variable	Re-Medicating (BU)	Decision to redeem the recipe (KM)	Non-pharmaceutical services (YNF)	Pharmaceutical Services (YF)
Re-Medicating (BU)	0,766			
Recipe Redemption Decision (KM)	0,635	0,822		
Non-Pharmaceutical Services (YNF)	0,522	0,676	0,797	
Pharmaceutical Services (YF)	0,377	0,613	0,686	0,834

Source: Research data processing results

The results of the research data analysis showed that all the variable constructs and indicators were able to represent each of the variables and were consistent in measuring the latent variables. It can be concluded if all of the above variables are valid and reliable.



**Inner Model Analysis**

**Table 6. Data on the results of the Determination Coefisien Test**

Variable	R Square Adjusted
Pharmaceutical services, Non-pharmaceutical services and the decision to redeem prescriptions $\square$ re-treatment	0,420
Pharmaceutical services, Non-pharmaceutical services $\square$ decision to redeem prescriptions	0,496

Source: Research data processing results

The results of the analysis test showed that the high influence of pharmaceutical services and non-pharmaceutical services on the decision to redeem prescriptions was 0.496 or 49.6% in the moderate category and the rest was influenced by other factors that were not analyzed, namely 50.4%. The magnitude of the influence of pharmaceutical services, non-pharmaceutical services and the decision to redeem prescriptions on re-treatment was 0.420 or 42.0% in the moderate category and the remaining 58% was influenced by other factors that were not studied.

**Table 7. Data from the path coefficient test and T test on direct influence**

Variable Relationship	Original Sample (O)	T Statistics ( O/STDEV )	P Values
The Decision to Redeem the Prescription-> Retake	0,551	8,995	0,000
Non-Pharmaceutical Services -> Re-treatment	0,230	3,074	0,002
Non-Pharmaceutical Services -> Decision to Redeem Prescriptions	0,484	7,319	0,000
Pharmaceutical Services -> Re-treatment	-0,118	2,064	0,041
Pharmaceutical Services -> Prescription Redemption Decision	0,281	4,660	0,000

Source: Research data processing results

The value of (O) Original Sample shows the direction of the relationship between variables in all research samples. The t-statistics value is used to show the significance where the tstatistical value must be  $>1.96$ .

1. The Effect of Pharmaceutical Services on Prescription Buying Decisions

The results of the data analysis showed that the pharmaceutical service variable had a positive influence on the decision to redeem prescriptions. The better the quality of pharmaceutical services provided, the more it will affect patients to redeem prescriptions so that they can increase the number of prescriptions redeemed at pharmaceutical installations. Pharmaceutical services have a significant influence on the decision to redeem prescriptions for patients.

2. The Effect of Non-Pharmaceutical Services on the Decision to Redeem Prescriptions

Non-pharmaceutical services have a positive and significant effect on the patient's decision to redeem the prescription. Tangible, reliability, responsiveness, assurance, and empathy are dimensions in assessing service quality in general. With regard to tangible, the physical appearance of the staff, the neatness and appearance of the pharmacy staff in implementing good hospitality when serving also play an important role so that patients will be more likely to return to redeem the prescription. Regarding reliability, the reliability of officers in providing services where all pharmacy officers are expected to be able to use existing technology so as to speed up the service process. Consistency in service over time is also important because it makes patients feel more comfortable to redeem prescriptions in outpatient pharmacy installations. Related to responsiveness, When customers feel that pharmacy staff are responding quickly to questions, complaints or expectations for help with their problems, this creates a pleasant experience and increases trust. In terms of assurance, customers want confidence that they will get quality pharmaceutical services, regardless of class and always prioritize the existence of Geriatric and Disability groups. The empathy aspect by showing deep attention to customer needs, being able to understand the patient's needs individually, listening well, and providing empathetic support can build a strong relationship between pharmacists and patients so that they can improve the decision to redeem prescriptions.

3. Effect of the Decision to redeem a prescription on Re-treatment

Patients who redeem their prescriptions for the first time, they interact directly with the pharmacist, experience getting education using the prescribed drugs, and the perceived effects of using the drugs can have an impact on their perception so that they can make the decision to re-take treatment. Positive experiences during the prescription redemption process, including the level of satisfaction with the service by the outpatient pharmacy installation staff can influence the decision to re-medicate.

4. The Effect of Pharmaceutical Services on Re-treatment

Pharmaceutical service variables have a significant negative effect on patients' desire to re-medicate. This shows that the quality of pharmaceutical

services is not a determining factor that has a direct influence on the increase in the number of re-treatment from general outpatients. Many other factors influence the increase in general outpatient interest in revisiting. The hospital image factor influences the interest of patients in re-treatment. This is in accordance with the conclusion of the study which states that the image of the hospital has a positive and significant influence on loyalty that makes patients return to the hospital (Eftitah et al., 2023; Parmin, 2017). Another study from Laely, (2016) states that the trust factor has a significant influence on loyalty. Trust will grow when patients feel satisfied and fulfilled what their expectations are. Sophisticated and complete medical equipment owned by the hospital can also be a reason for patients to make follow-up visits.

5. The Effect of Non-Pharmaceutical Services on Re-Treatment.

The results of the study showed that there was a positive and significant influence of non-pharmaceutical services on patient re-treatment, which meant that the better non-pharmaceutical services included 5 dimensions of service quality, namely tangible, reliability, assurance, empathy, and responsiveness played a role in influencing patients to re-medicate.

**Table 8. Values of Path Coefficients and t-Test on Indirect Influence**

Relationship between variables	Original sample (O)	T statistics	P values	Categories mediation
Pharmaceutical Services -> Prescription Redemption Decision -> Re-treatment	0,267	5,789	0,000	Partial Mediasi
Non-Pharmaceutical Services -> Prescription Redemption Decision -> Re-treatment	0,155	4,324	0,000	Partial Mediasi

Source : research data processing results

6. The Effect of Pharmaceutical Service Quality on Re-treatment with Mediation of Prescription Redemption Decision

The results of the study showed that there was an influence of pharmaceutical services on re-treatment through the mediation of the decision to redeem prescriptions. If patients have difficulty getting the prescribed medication, they may be reluctant to repeat the medication. The patient's desire to get health services until he reaches a state of recovery and is better than before through quality medicines according to the doctor's prescription and the provision of drug education by officers properly and clearly will encourage patients to return to treatment.

7. The Effect of Non-Pharmaceutical Service Quality on Re-treatment with

### Mediation of Prescription Redemption Decision

The results of the study showed that there was an influence of non-pharmaceutical services on re-treatment through the decision to redeem prescriptions. This shows that tangible refers to the physical aspects of health services, such as clean facilities, modern medical equipment, and the appearance of officers. Patients who feel that the physical environment of health services is adequate will feel more confident to re-see treatment because they believe that the treatment they receive is of high quality. The reliability aspect refers to the ability of healthcare providers to provide consistent and effective care. Patients will be more likely to re-see treatment if they feel that the treatment they receive is reliable and consistent in providing the expected results. The assurance aspect refers to the patient's condition that the patient will receive safe and effective treatment. Patients need to be confident that the healthcare provider has enough expertise and knowledge to handle their condition properly. If patients feel confident in the guarantee, they will be more likely to decide to redeem the prescription at the outpatient pharmacy installation and subsequently re-medicate. The empathy aspect is the ability of healthcare providers to understand and respond to the emotional and psychological needs of patients. This can increase their desire to decide to redeem the prescription at the pharmacy and subsequently re-medicate. The responsiveness aspect refers to the ability of healthcare providers to respond to patients' needs and desires quickly and effectively. Patients will feel valued and prioritized if they feel that their complaints or questions are answered quickly and adequately.

### *Model Fit Testing*

It is a test of the model's validity, judging from the SRMR (Standard Roots Mean square Residual) value of  $<0.08$  which states the large difference between the observed correlation and the expected.

**Table 9. Data from the Model Conformance Test**

<b>Variable</b>	<b>Saturated Model</b>	<b>Estimated Model</b>
<b>SRMR</b>	0,049	0,049
<b>d_ULS</b>	3,056	3,056
<b>d_G</b>	2,225	2,225
<b>Chi-Square</b>	3791,322	3791,322
<b>NFI</b>	0,773	0,773

Source: Research data processing results

From the table above, it is known that the SRMR value produced  $< 0.08$  so that the model used meets the requirements and the resulting NFI value is 0.773 or around 3%.

## CONCLUSION

The conclusion of this research are : 1. There was a significant influence on the quality of pharmaceutical services on the decision to redeem prescriptions for general outpatients at Pasar Minggu Hospital. 2. There was a significant influence on the quality of non-pharmaceutical services on the decision to redeem prescriptions for general outpatients at Pasar Minggu Hospital. 3. There was a significant influence of the decision to redeem the prescription on the re-treatment of general outpatients at Pasar Minggu Hospital. 4. There was no effect on the quality of pharmaceutical services on the re-treatment of general outpatients at Pasar Minggu Hospital. 5. There is a direct influence on the quality of non-pharmaceutical services on the re-treatment of general outpatients at Pasar Minggu Hospital. 6. There was a significant influence of the quality of pharmaceutical services on the variables of re-treatment of general outpatients at Pasar Minggu Hospital through the mediation of the decision to redeem prescriptions. 7. There is a significant influence on the quality of non-pharmaceutical services through the mediation of the variable of the decision to redeem prescriptions on the interest of general outpatients to re-treat at Pasar Minggu Hospital

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