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Article

# Patients' Satisfaction Regarding Oral Healthcare Services in the North-East Region of Romania: A Questionnaire Survey

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**Abstract:** This research addresses a gap in the literature by conducting a comprehensive analysis of patients' level of satisfaction with dental care. **Methods:** By combining quantitative and qualitative survey methods with the PSQ questionnaire this study aims to augment ongoing initiatives to enhance dental patients' experiences by painting a more comprehensive depiction of patients' level of satisfaction; **Results:** When asked about their overall level of satisfaction 77,1% of the patients said they received excellent services from the office personnel and 72,2% said they trust their doctors; **Conclusions:** Assessing patient satisfaction in the realm of dental services quality is crucial for enhancing service quality and accuracy, benefiting both patients and dentists, and ultimately improving public health.

**Keywords:** oral health; dental management; quality of life; patient satisfaction; quality management; dental services

## 1. Introduction

Defining and measuring satisfaction is a challenging task due to its complexity. It is a psychological phrase that can be assessed via time and personal experience [1]. It indicates the extent to which expected objectives have been achieved. Satisfaction includes cognitive and emotional aspects and is influenced by past experiences, expectations, and social connections [2,3]. Recently, there has been a growing emphasis on patient-centered care in the healthcare industry, emphasizing the significance of comprehending and improving patient happiness. Dental treatments, being a crucial part of healthcare, must meet these expectations, thus high-quality dental services are essential for maintaining patient health, satisfaction, and general well-being [4,5].

The quality of dental care has a direct impact on patients' oral health results and also plays a significant role in shaping their perception of the service provided, which in turn affects their loyalty and the probability of referring the service to others [6].

Although there is agreement on the significance of patient satisfaction in dental care, the research indicates a lack of thorough comprehension regarding the aspects that influence it [7]. Prior research has mostly concentrated on clinical results and the technical proficiency of dental practitioners, frequently neglecting aspects like interpersonal communication, service availability, and the dental practice environment [8,9].

Educational institutions benefit both students and patients by providing training opportunities for students and addressing patients' dental care needs. It is crucial to assess patient satisfaction with the dental services offered to meet patient expectations, enhance patient cooperation, and maintain the dental institution's performance [10]. Enabling students to fulfill their clinical requirements promptly, as contented patients are more likely to comply and attend their visits. While dental clinics and hospitals prioritize patient satisfaction, educational settings prioritize student learning, which may occasionally lead to impaired patient satisfaction [11].

This study fills a need in the literature by providing an in-depth evaluation of dental treatment satisfaction among patients. Dental professionals and healthcare authorities can enhance the quality of care and patients' experiences by recognizing and addressing the complex factors that contribute to satisfaction.

In order to fill these gaps, this study uses a mixed-methods approach to investigate the factors that contribute to dental patients' satisfaction with their treatment in more depth. More sophisticated understandings that are specific to different patient demographics and situations are needed since patients' weights assigned to different satisfaction factors vary.

The purpose of this research is to add to the continuing efforts to improve dental patients' experiences by providing a more complete picture of patient satisfaction through the use of quantitative and qualitative surveys with the help of PSQ questionnaire.

## 2. Materials and Methods

### ✓ Research design

This study aims to thoroughly investigate patient satisfaction with dental services. Due to the lack of dependable data on patient satisfaction in the multifaceted dental care system in Romania, our study focused on assessing patient satisfaction in a university dental clinic in Iasi and the factors that impact it. The research seeks to encompass a wide range of factors affecting patient satisfaction by quantitative methods. The quantitative aspect includes a structured survey to measure the significance of different satisfaction factors in order to obtain a more profound understanding of patient experiences and perceptions.

### ✓ Survey instrument

The data were collected through the Patient Satisfaction Questionnaire consisting of 46 items (PSQ-46), which is a Likert response scale ranging from strongly agree to strongly disagree with five points (total agree/total disagree). The questions are divided into 6 dimensions to measure satisfaction towards physicians (20 items), access (8 items), nurses (4 items), appointments (4 items), facilities (4 items), and a separate subscale of six items to measure overall satisfaction with the service provided by the practice. PSQ was translated from English into Romanian following existing guidelines to maintain equivalence [12].

### ✓ Participants

The study sample consists of patients who received dental services within the last 10 months. Participants were recruited from medical center of Gr.T.Popa Dental University, Iasi, Romania, including urban and suburban areas to ensure diversity in demographics and healthcare experiences. Inclusion criteria included adults aged 18 and above who had visited the dental clinic at least once in the past year. A total of 306 survey respondents were selected to represent various age groups, genders, and socioeconomic statuses.

### ✓ Data collection

A self-administered questionnaire was developed based on a review of the literature, translated in Romanian language and validated. The questionnaire included items on factors contributing to

satisfaction and dissatisfaction like frequency of dental visits, quality of dental services, the role of communication with dental staff, information on waiting room, etc.

Descriptive statistics were used to summarize demographic information and responses to survey items. Inferential statistics, including regression analysis, were employed to identify significant predictors of patient satisfaction.

The study received approval from the Institutional Review Board of UMF Gr.T.Popa Iasi- Nr. 318/30.05.2023. Participants were informed about the study's purpose, their rights, and confidentiality measures prior to data collection. Informed consent was obtained from all participants, and personal identifiers were removed from the data to ensure anonymity.

✓ Inclusion criteria

- patients who completed their treatment and willingly consented to participate in the study.
- patients aged eighteen years or older.

✓ Exclusion criteria

- patient unwilling to participate in the study and unable to provide informed consent.

✓ Statistical analysis

Following data entry into an Excel spreadsheet, the statistical software for the social sciences, version 29, (Inc. Chicago, Illinois, USA) was used for processing.

Percentages, means and standard deviation were calculated for qualitative and quantitative data. Chi-square test (X<sup>2</sup>) was performed to statistically analyze qualitative data. A p-value of 0.05 was considered.

### 3. Results

The study group consisted of 306 patients, predominantly women (58.5%), from urban areas (63.1%), with high school or university education (89.9%); half of the patients were over 50 years old (50.3%), and a third (34.6%) were aged between 30 and 50 years. Additionally, half of the patients were employed (51.3%), and among the others, the majority were retirees (35.9%); almost half of the patients had between 5 and 10 visits to the dentist (44.8%), a third had between 1 and 5 visits (30.4%), and a quarter of the patients (24.8%) had more than 10 visits to the dentist (Table 1).

**Table 1.** Demographic characteristics of the study sample.

Study Group	Variables	n	%
gender	masculine	127	41.5
	feminine	179	58.5
age	18-30	46	15
	30-50	106	34.6
	50-70	154	50.3
occupation	employee	157	51.3
	no job	18	5.9
	retired	110	35.9
	student	21	6.9
domicile	urban	113	63.1
	rural	193	36.9
education	elementary school	31	10.1
	high school	153	50.0
	university	122	39.9

Regarding the general level of satisfaction, about three-quarters of patients believe they receive the best care from the staff working in the office (77.1%), have absolute trust in doctors (72.2%), and feel completely satisfied with how they are treated in the office (74.5%). Questions with negative connotations were unfavorably received by patients, who expressed their partial or total

disagreement with them; thus, it emerges that the vast majority of patients are satisfied with their doctor (77.1%), while 64.1% believe that there are not even specific things that dissatisfy them in their interaction with the doctor, and 68.6% of patients do not wish to change their medical office. It can therefore be stated with certainty that the vast majority of patients declare a high overall satisfaction score in Table 2.

**Table 2.** Patient responses to the first section of the questionnaire - General satisfaction level (frequency distributions).

General Satisfaction: Answers	Stongly Agree		Agree		Neutral		Disagree		Total Disagree	
	n	%	n	%	n	%	n	%	n	%
GS1: Patients receive the best care from the staff working in this office.	18	5.9	218	71.2	62	20.3	6	2.0	2	.7
GS2: I have absolute trust in doctors.	18	5.9	203	66.3	77	25.2	6	2.0	2	.7
GS3: I am not satisfied with my doctor	2	.7	6	2.0	62	20.3	216	70.6	20	6.5
GS4: There are one or two things about this procedure that I am not satisfied with.	2	.7	37	12.1	71	23.2	178	58.2	18	5.9
GS5: I feel perfectly satisfied with how I am treated.	16	5.2	212	69.3	70	22.9	6	2.0	2	.7
GS6: I've been thinking about changing the office	1	.3	28	9.2	67	21.9	192	62.7	18	5.9

This overall satisfaction score is reflected in the specific opinions of patients towards doctors, investigated in the 2nd section of the questionnaire. Here too, it is found that about three-quarters of patients believe that the doctor clearly explains what is wrong before any treatment (76.5%), that the doctor explains how the disease will affect the patients' health (77.1%), is careful to check everything during the medical examination (77.1%) and asks the patient about how the disease affects their daily life (77.1%), does everything necessary to reach a diagnosis (77.2%), makes the patient feel at ease (72.5%), is understanding (77.1%) and knows when further tests are necessary (79.1%) – thus, everything related to the professionalism and empathy of doctors is positively appreciated by the vast majority of patients.

Also, over 60% of patients believe that doctors perform enough tests to find out what is wrong (62.4%), are interested in their condition (64.4%), offer them the opportunity to talk about their problems (62.4%), and show genuine interest in their issues (67.0%). In full correlation with these observations, it is noteworthy that negative or critical statements about doctors are rejected by patients, who express their agreement with these statements only in very low percentages. Thus, only 12.4% of patients think that the doctor does not tell them enough about the treatment, only 7.6% of them believe they have not received enough information from the doctor, only 2.7% of patients feel that the doctor makes them feel like they are wasting his time, 3.6% do not feel confident discussing their problems with the doctor, and 2.7% feel that the doctor wants to get rid of them as soon as possible, while 12.8% of patients think that the doctor sometimes fails to appreciate how sick they are.

Therefore, patients believe that the doctor is indifferent to them only in isolated cases, and only a small percentage of patients (between 10 and 15%) are willing to admit that the doctor withholds some information from them or is not sufficiently empathetic towards their pathology and problems; however, it is clear that the vast majority of patients have favorable opinions about communication with the doctor – Table 3.

**Table 3.** Patient responses to the second section of the questionnaire – Opinions about doctors (frequency distributions).

Doctors: Answers	Stongly Agree		Agree		Neutral		Disagree		Total Disagree	
	n	%	n	%	n	%	n	%	n	%
D1: The doctor clearly explains everything before any treatment	18	5.9	216	70.6	64	20.9	6	2.0	2	.7
D2: The doctor performs enough tests	17	5.6	173	56.5	83	27.1	32	10.5	1	.3
D3: The doctor does not tell me enough about the treatment.	3	1.0	35	11.4	97	31.7	153	50.0	18	5.9
D4: The doctor fully explains how the disease will affect my health	18	5.9	218	71.2	31	10.1	37	12.1	2	.7
D5: The doctor carefully examines me	13	4.2	223	72.9	31	10.1	36	11.8	3	1.0
D6: The doctor is always interested.	14	4.6	183	59.8	88	28.8	18	5.9	3	1.0
D7: The doctor always asks about how my disease affects my daily life	11	3.6	225	73.5	31	10.1	37	12.1	2	.7
D8: Sometimes I feel like I didn't get enough information from the doctors	2	.7	21	6.9	81	26.5	186	60.8	16	5.2
D9: Sometimes the doctor makes me feel like I'm wasting his time	2	.7	6	2.0	88	28.8	200	65.4	10	3.3
D10: I don't feel confident discussing my problems with the doctor	3	1.0	8	2.6	92	30.1	185	60.5	18	5.9
D11: The doctor seems to want to get rid of me as soon as possible	2	.7	6	2.0	62	20.3	218	71.2	18	5.9
D12: The doctor gives me every chance to talk about all my problems	14	4.6	177	57.8	107	35.0	6	2.0	2	.7
D13: The doctor sometimes fails to appreciate how sick I am	2	.7	37	12.1	31	10.1	221	72.2	15	4.9
D14: The doctor shows a real interest in my problems	12	3.9	193	63.1	62	20.3	37	12.1	2	.7
D15: The doctor does everything necessary to arrive at a diagnosis.	17	5.6	219	71.6	31	10.1	37	12.1	2	.7
D16: The doctor always makes me feel at ease.	15	4.9	207	67.6	45	14.7	37	12.1	2	.7
D17: The doctor is very understanding	18	5.9	218	71.2	31	10.1	37	12.1	2	.7
D18: The doctor knows when additional examinations are necessary	18	5.9	224	73.2	56	18.3	6	2.0	2	.7
D19: Even when the doctor is busy, I am examined	11	3.6	147	48.0	114	37.3	32	10.5	2	.7
D20: I don't feel rushed when I'm with the doctor	12	3.9	219	71.6	42	13.7	31	10.1	2	.7

Regarding the appointment service, it is noted that more than three quarters of patients (76.8%) consider it easy to obtain an appointment at a convenient time; on the other hand, however, only 41.8% of patients find that appointments are easy to make whenever they need them or that it is easy to reach the doctor of their choice (38.2%), also recording a relatively low percentage of patients who believe that it is often difficult to get a doctor's appointment (12.8%). Therefore, in general, patients consider it simple to schedule an appointment at the clinic when they wish, although only 40% of them maintain this opinion when it comes to more specific situations, believing that they can easily schedule even when they have a specific need or when they want to meet with a certain doctor – Table 4.

**Table 4.** Patient responses to the third section of the questionnaire – Opinions about appointments (frequency distributions).

Appointments:	Stongly Agree		Agree		Neutral		Disagree		Total Disagree	
	n	%	n	%	n	%	n	%	n	%
A1: It's easy to get an appointment at a convenient time	18	5.9	217	70.9	32	10.5	37	12.1	2	.7
A2: Appointments are easy to make whenever I need them	18	5.9	110	35.9	139	45.4	37	12.1	2	.7
A3: It is often difficult to get a doctor's appointment	2	.7	37	12.1	136	44.4	113	36.9	18	5.9
P4: It's easy to see the doctor of my choice	16	5.2	101	33.0	150	49.0	37	12.1	2	.7

Patients' evaluations of the accessibility in the clinic are slightly more reserved; thus, the majority of patient agreement was only manifested in relation to items 6 and 7, namely that the receptionists explain things clearly (77.1%) and that they ask the right questions (also 77.1%). Otherwise, just over half of the patients (54.0%) consider that the clinic has the necessary facilities to deal with emergencies that occur outside of business hours, and most statements regarding the clinic's accessibility received from patients either neutral reactions, which are probably evidence that they have not faced such situations, or reactions of partial or even total disagreement.

Thus, patients generally consider that interaction with the receptionists in the clinic during business hours is of high quality and fully satisfactory, but generally do not interact with them outside of business hours (75.8% of patients had a neutral attitude towards the possibility of discussing privately with the receptionists, which means that, probably, they did not attempt to initiate such action). On the other hand, about half of the patients most likely faced the need to resolve emergencies and had a favorable interaction with the clinic in such situations, and about a third of the patients needed to discuss privately with the doctor and had a positive interaction with them, while another third probably did not face such situations, giving neutral responses to the items that targeted them; there is also a smaller percentage of patients who probably faced such situations but did not obtain the interaction they wished for from the doctor – Table 5.

**Table 5.** Patient responses to the fourth section of the questionnaire – Opinions about accessibility (frequency distributions).

Accessibility:	Stongly Agree		Agree		Neutral		Disagree		Total Disagree	
	n	%	n	%	n	%	n	%	n	%
A1: I feel it is easy to talk to my doctor over the phone	18	5.9	105	34.3	103	33.7	78	25.5	2	.7
A2: The doctor is always available to give advice over the phone	12	3.9	101	33.0	100	32.7	91	29.7	2	.7
A3: It is easy to get advice over the phone	10	3.3	96	31.4	146	47.7	52	17.0	2	.7
A4: I am satisfied with the after hours service	18	5.9	85	27.8	168	54.9	34	11.1	1	.3
A5: The office has facilities to deal with emergencies that occur outside of opening hours	6	2.0	159	52.0	102	33.3	37	12.1	2	.7
A6: Receptionists explain things to me clearly	9	2.9	227	74.2	62	20.3	7	2.3	1	.3
A7: Receptionists ask patients the right questions	18	5.9	218	71.2	62	20.3	6	2.0	2	.7

A8: I can speak to a receptionist privately if I wish	3	1.0	32	10.5	232	75.8	38	12.4	1	.3
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Patients' opinions towards nurses in dental offices are also generally favorable. Thus, 56.6% of patients believe that the nurse is always very soothing, while the rest, 40.8%, are neutral towards this statement, with only 2.7% disagreeing with it. On the other hand, the vast majority of patients (77.1%) believe that the nurse explains things to them carefully, 45.8% of them think that the nurse listens to their problems attentively, and another 57.5% believe that the nurse treats them with empathy.

Very small percentages of patients have negative opinions about nurses: only 2.7% think that they do not explain things carefully, only 2.3% feel that they make them feel like they are wasting their time, and 12.8% (a somewhat higher percentage) believe that the nurse does not always listen attentively when they talk about their problems – Table 6.

**Table 6.** Patient responses to the fifth section of the questionnaire – Opinions about nurses (frequency distributions).

Nurses:	Stongly Agree		Agree		Neutral		Disagree		Total Disagree	
	n	%	n	%	n	%	n	%	n	%
N1 : Nurses do not take care to explain things carefully	2	.7	6	2.0	62	20.3	218	71.2	18	5.9
N2: The nurse does not always listen carefully when I talk about my problems	2	.7	37	12.1	127	41.5	122	39.9	18	5.9
N3: Nursing is always very reassuring	18	5.9	155	50.7	125	40.8	6	2.0	2	.7
N4: The nurse makes me feel like I'm wasting her time	2	.7	5	1.6	123	40.2	160	52.3	16	5.2

The last questions of the survey addressed the facilities offered by the dental office. This time, all four items are phrased negatively to highlight any deficiencies of the office; patient responses are divided into roughly equal proportions indicating agreement or disagreement with these statements, with a percentage of patients (between 16 and 35%) remaining neutral. It can be noted that 40.5% of patients believe the office could benefit from some improvements, especially in the waiting room area. The main issue reported by patients is the lack of seating in the waiting room - 56.3% of them pointed out this aspect; also, 34.0% of patients find the waiting room uncomfortable, and 34.3% think that the seats in the waiting room are uncomfortable. It thus clearly emerges that patients' unfavorable opinions primarily target the reduced capacity of the waiting room and, next, the seats, perceived as uncomfortable – Table 7.

**Table 7.** Patient responses to the sixth section of the questionnaire – Opinions about facilities (frequency distributions).

Facilities:	Stongly Agree		Agree		Neutral		Disagree		Total Disagree	
	n	%	n	%	n	%	n	%	n	%
F1: The office could use some improvements	4	1.3	120	39.2	49	16.0	115	37.6	18	5.9
F2: The waiting room is uncomfortable	3	1.0	101	33.0	106	34.6	78	25.5	18	5.9
F3: There are not enough seats in the waiting room	2	.7	170	55.6	55	18.0	61	19.9	18	5.9
F4: The seats in the waiting room are uncomfortable	5	1.6	100	32.7	84	27.5	106	34.6	11	3.6

Based on the responses recorded in the survey, we calculated, using arithmetic means, quantitative scores at the level of each patient, reflecting their general opinion towards the six dimensions evaluated by the survey, namely general satisfaction and opinions about doctors, the

appointment system, the level of accessibility in the office, the behavior of the nurses, and the facilities offered.

These general scores have a variation range between 1 and 5, with the value 1 meaning a completely favorable opinion and the value 5 meaning a completely unfavorable opinion towards each of the investigated dimensions (to obtain such a result, the questionnaire items that targeted negative aspects were recoded, so that patient responses have uniform meanings across the entire survey). For the interpretation of the calculated quantitative scores, I used the corresponding interquartile ranges, as in Table 8.

**Table 8.** Interquartile ranges used.

		<b>Range</b>
<b>1</b>	Strongly agree	<b>1.00-1.80</b>
<b>2</b>	Agree	<b>1.81-2.60</b>
<b>3</b>	Neutral	<b>2.61-3.40</b>
<b>4</b>	Disagree	<b>3.41-4.20</b>
<b>5</b>	Stongly diagree	<b>4.21-5.00</b>

**Table 9.** The overall satisfaction score of patients - total and comparative by demographic characteristics.

<b>General Satisfaction</b>		<b>N</b>	<b>Media</b>	<b>Standard Error of the Mean</b>	<b>std.dev</b>	<b>Min</b>	<b>Max</b>	<b>Mean</b>	<b>Mann-Whitney / Kruskal-Wallis Test</b>
<b>Total</b>		306	2.2789	.03459	.60503	1.00	5.00	2.0000	
<b>Gender</b>	female	179	2.2225	.05068	.67803	1.00	5.00	2.0000	U+ = 8717.000
	male	127	2.3583	.04216	.47517	1.83	4.00	2.1667	p < .001**
<b>Age</b>	18-30	46	2.1993	.13051	.88514	1.00	5.00	2.0000	H++ = 5.410
	30-50	106	2.3349	.05755	.59250	1.00	4.00	2.0000	p = .067
	50-70	154	2.2641	.04062	.50405	1.00	4.83	2.1667	
<b>Mediu</b>	rural	113	2.1283	.04643	.49351	1.00	4.00	2.0000	U+ = 9420.500
	urban	193	2.3670	.04655	.64674	1.00	5.00	2.0000	p = .037*
<b>Education</b>	elementary school	31	2.3656	.10237	.56996	1.00	3.33	2.0000	H++ = 5.037
	high school	153	2.1449	.04503	.55695	1.00	4.00	2.0000	p = .081
	university	122	2.4249	.05771	.63748	1.83	5.00	2.0833	
<b>Occupation</b>	employee	157	2.3715	.05083	.63685	1.00	5.00	2.0000	H++ = 25.707
	no job	18	2.3148	.12560	.53287	2.00	3.33	2.0000	p < .001**
	retired	110	2.2545	.04509	.47287	1.00	4.00	2.1667	
	student	21	1.6825	.15639	.71668	1.00	4.00	2.0000	
<b>Appointments</b>	1- 5	93	2.5072	.08245	.79511	1.00	5.00	2.0000	H++ = 6.766
	5- 10	137	2.2494	.04443	.52007	1.00	3.33	2.1667	p = .034*
	>10	76	2.0526	.03710	.32342	1.00	2.67	2.0000	

Mann-Whitney U+ / Kruskal-Wallis H++; p < .05\*; p < .01\*\*

#### 4. Discussion

Donabedian outlines four distinct rationales for examining patient satisfaction. Satisfaction is a goal of care, a result of care, an outcome, can enhance the impact of care by increasing patient compliance, and is the patient's evaluation of the care received.

Studies on patients' satisfaction with their dental care have been around since at least the 1980s, but up until recently, researchers have mostly concentrated on how socio-demographic factors affect patients' opinions of their dentists.

Researchers at multiple institutes have studied patient satisfaction with dental care. Patient satisfaction is influenced by various aspects beyond treatment quality, including facilities, personnel demeanor, and fundamental environmental requirements [13]. Most patients seeking treatment at dental training schools were between the ages of 30 and 40 in the majority of the studies [14]. More than half of the participants in this study were aged between 50-70 years (50.3%). This area requires development and should be addressed by the public health department and college management. Health camps should be organized to raise awareness of the services available in our institution among the younger population in the region.

The notion of consumerism, which involves incorporating the patient's perspective in the evaluation of services, has become more prominent in the last years. Patients can contribute to assessing the quality of oral health care by establishing standards of care, offering information for evaluation, and expressing satisfaction or dissatisfaction with the care received [15–17]. Most replies came from female patients (68%) because there was a higher volume of patients in the female division. This aligns with the findings of Naguib et al.'s study [18], in contrast to Habib et al.'s study, where the female response rate was 55.7% [19].

Patients' happiness has been studied at several dental schools throughout different countries. The investigations revealed that the primary reason for seeking care in these clinics is due to the perceived high quality of service and the patients' health concerns [20–23]. Patients who struggled to schedule appointments easily expressed a low level of satisfaction. The patients in the survey expressed a high level of satisfaction with their appointments ( $p = .034$ ). They were also happy with the appointment selections that worked well with their schedule (35.9%).

The reception desk and team typically handle appointments and are the initial point of contact for patients at the clinics. They play a crucial role in the team, and the high satisfaction levels noted in our study are promising. It is important to relay positive feedback to the reception team.

When it comes to the facilities, it has been discovered that patients are more satisfied when the facilities are nice, modern, and have comfortable waiting areas. Compared to studies conducted by Al-Refeidi et al. [24] and Balhaddad et al., [25] this finding is significantly lower, and it is similar to a study conducted by Naguib et al. [18].

Several factors that affect dental patients' happiness have been studied. One of the most important factors is the dentist's communication abilities, which should include thorough explanations of procedures and treatments [9]. Bradshaw et al. found that patients are more satisfied when treatments are provided quickly and there is less waiting time [24]. Not only that, but the dental clinic's physical setting, such as the comfort of the waiting rooms and the level of cleanliness, is also crucial [25].

One of the most important things a healthcare provider may have is good communication skills so they can ensure their patients are satisfied with the treatment they receive. A high degree of satisfaction has been linked to the dentist's attitude and care for the patient's demands, according to previous research [26,27]. Consumers' willingness to use dentistry clinics is an area where little empirical data is available, according to Pinkerton et al. [28]. Despite widespread agreement that surveys of patients' opinions are useful for gauging the quality of healthcare providers' and facilities' offerings, Holden et al. [29] found that researchers have paid surprisingly little attention to how satisfied dental patients are with their treatment. Othman and Abdel Razak [30] discovered that 45.6% of patients were satisfied with their dentists' ability to explain treatment plans to them before they began. In the same manner, 70,6% of patients in our study reported being satisfied with how the doctor clearly explains everything before any treatment.

This might be because the study is taking place in a classroom setting, where teaching students how to properly communicate and engage with patients is a major emphasis. Patients dislike dentists who start treatments without explaining them, as pointed out by Hellyer [31].

A prior study stated that unhappiness with the way patients were treated by their dentists was frequently cited as the reason for switching dentists by 46% of the dentists polled. Patients reported being "unhappy with dentist" as the primary motivation for seeking out a new dentist in more current research [32].

The care our patients receive is of the utmost importance to us. This led to very positive feedback from our patients about the treatment they received. Thus, 69.3% of our patients felt perfectly satisfied with how they were treated.

The limitation of this study was five-point Likert scale that can provide wide ranges of responses.

## 5. Conclusions

According to the study's findings, participants were satisfied with the services, staff, treatment, and patient-dentist interaction in dental clinics run by the college of dentistry in Iasi University.

To maintain a high level of satisfaction and make further improvements, patient satisfaction should be evaluated on a regular basis. Additionally, more qualitative research is needed to identify the psychological, behavioral, and social aspects that contribute to dental patients' satisfaction with their treatment.

Assessing patient satisfaction in the realm of dental services quality is crucial for enhancing service quality and accuracy, benefiting both patients and dentists, and ultimately improving public health.

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