INTRODUCTION

Rabies is a 100% fatal, yet preventable, zoonotic disease, caused by rabies virus & spread by the bite or lick of rabid animals to humans. Every year, more than 15 million people worldwide receive a post-bite vaccination, which is estimated to prevent hundreds of thousands of rabies deaths. Roughly 36% of world’s rabies deaths occur in India each year. An animal bite case requires post-exposure injectable prophylaxis given over multiple visits. In government institutions, due to excessive load of patients & reduced monetary expenditure, patient influx is high. High patient influx with a low specialist-to-patient ratio may lead to compromised patient satisfaction.

Patient satisfaction is a measure of the extent to which a patient is content with the health care which they received from their health care provider. Patient satisfaction is a performance indicator for any health care institute. It is a proxy but very effective indicator to measure the success of doctors & patients. It affects clinical outcomes, patient retention & medical malpractice claims. Dissatisfied patients not only implies loss of business/investment but also increased number of malpractices/law suits. Patient satisfaction surveys represent real-time feedback for providers and show opportunities to improve services/decrease risks.
The study was done with the intention to identify the gaps in the patient care in terms of level of patient’s satisfaction at anti rabies clinic of a tertiary care hospital of Gwalior city, which could be further utilized to improve the patient care services.

**OBJECTIVES**

The objective of the study was to understand the level of patient satisfaction among patients attending animal bite clinic. To identify the factors related to the patient satisfaction.

**MATERIAL AND METHODS**

The present study was a cross sectional study carried out at anti-rabies clinic of a tertiary care hospital of Gwalior city for the duration of three months from March – May 2017. Only newcases of animal bite, attending anti-rabies clinic selected as study participants using convenience sampling method. Only those cases that were willing to participate were included in the study. A pre-designed, pre-tested and structured questionnaire was used for data collection. Study tool comprised of general information of patients like age, sex, address etc., registration time, waiting time for OPD consultation, interaction with doctor and staff, problem solving attitude of doctor, process and time consumed for taking medicines and injections, financial burden for treatment and total time elapsed for treatment etc.

Ethical approval to conduct the research work was obtained from Institutional Ethics Committee of our college. All newly registered animal bite cases were interviewed at the end of their treatment using the study tool after taking informed consent. Confidentiality of the study participants was ensured throughout the study.

After collection of required information from all the participants it was compiled and analyzed. Each response was rated using a five point Likert scale, ranging from strongly disagree to strongly agree. Data was compiled & analyzed manually and interpretations were made accordingly.

**RESULTS**

Gender wise majority of the participants were male. Overall maximum were belong to the age group of 20 years or less (35.71%) followed by 21-30 years (24.28%).

**Table 1: Age and genderwise distribution of participants**

<table>
<thead>
<tr>
<th>Age group (Years)</th>
<th>Male (n=106) (%)</th>
<th>Female (n=34) (%)</th>
<th>Total (n=140) (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>≤ 20</td>
<td>44 (41.50)</td>
<td>06 (17.64)</td>
<td>50 (35.71)</td>
</tr>
<tr>
<td>21-30</td>
<td>24 (22.64)</td>
<td>10 (29.41)</td>
<td>34 (24.28)</td>
</tr>
<tr>
<td>31-40</td>
<td>14 (13.20)</td>
<td>02 (5.88)</td>
<td>16 (11.42)</td>
</tr>
<tr>
<td>41-50</td>
<td>16 (15.09)</td>
<td>04 (11.76)</td>
<td>20 (14.28)</td>
</tr>
<tr>
<td>More than 50</td>
<td>08 (7.54)</td>
<td>12 (35.29)</td>
<td>20 (14.28)</td>
</tr>
</tbody>
</table>

The above table shows that nearly two third participants were satisfied with the process of OPD registration. About 87.14% patients were responded that the waiting time was not more than 5 minutes before consultation in OPD. Most of the patients (84.27%) were agreed with the statement that the treating doctor was polite and listening the patient’s complaint. Most of the patients disagreed with the statement that doctor used medical terminology without explaining their meaning. 112 (80%) patients were satisfied with the treatment prescribed. 41.42% patients agreed with the fact that treatment did not cause any financial burden.
However approximately equal percentage patients were disagreeing with it. 81.42% patients agreed that their queries have been successfully answered by the doctor. 62.85 % patients responded that they did not have to wait for more than 10 minutes for receiving TT injection. 40% patients stated that they got the injection issued without any hassle from the medical store while 35.7% patients disagreed with it. For the behaviour of staff working in injection room, 78.57% patients agreed that staff was courteous, friendly and gave medication without any hurry. Overall 80% patients agreed that the behavior of staff other than doctor was also satisfactory and 78.57% were satisfied with overall medical care received. Out of total 92.86% patients elapsed more than 30 minutes between arrival in hospital and leaving after taking treatment.

### DISCUSSION

Consumer satisfaction is recognized as an important parameter for assessing the quality of patient care services being delivered by healthcare organizations. Satisfaction regarding the attitude of providers toward these services is expected to affect treatment outcome and prognosis. Patient satisfaction is thus, a multidimensional concept and a subjective phenomenon that is linked to perceived needs, expectations and experience of care.

The present study was carried out in anti-rabies OPD of a tertiary care hospital with the intention to know the experience and perception of patients utilizing OPD services.

In our study, about three fourth patients were male and majority belongs to age group of 20 years or less. Majority of the patients were found satisfied with the OPD registration process.

87.14% of the patients responded that the average waiting time before consultation with doctor in OPD was 5 minutes. Sodani PR et al. found that most of the patients (54%) at district hospital waited less than 10 minutes for the doctor; but Tiwari J et al. in a tertiary care hospital study reported that 46% had waiting time of 30 to 60 min for consulting a doctor. Andrabi SA et al. in 2012 reported that the major dissatisfaction in an out-patients department was the long waiting time and overcrowded registration.

Majority of the patients (84.27%) satisfied with the treating doctor. They found the doctor was polite and listening the patient’s complaint. Sodani et al. found that the majority of the respondents (above 85%) observed doctor’s behaviour as good, and they also felt that the doctor has given adequate time to see the patients. Prasanna KS et al. also recorded 81% of the respondents saying that the communication by the doctor was good. Attributes that hold steady for good doctor–patient relationship are sympathy and kindness, good communication between patients and doctors and patience and shared responsibility in managing illness of the patient. In a study by Acharya & Acharya, 82.8% of the respondents showed that the approach of the doctor is personal, 93.2% of the subjects were satisfied with the examination by the doctor, and it was simple and easy to understand in 60% of the cases.

Nearly 78.58% patients reported that the staff was courteous, friendly and gave medication without any hurry. Staff behaviour, particularly polite and courteous behaviour has been accepted as a necessity for hospital OPD services. Pawar found 90% patients remarked that OPD staff was courteous and friendly, indicating politeness of paramedical staff in service hospitals, the finding being similar to this study. A survey conducted at 13 acute care hospitals in Ireland revealed that effective communication and clear explanation had the strongest impact in improving the overall patient satisfaction among other attributes of care.

### CONCLUSION

Despite certain constraints, majority of the patients have expressed overall satisfaction with OPD Services. However certain percentage of patients presented that they were having financial burden for receiving care. As the study was done at tertiary level health facility where most of the beneficiaries were belong to lower socio economic class so that hospital authorities should ensure availability of necessary medicines to all to minimize their cost of treatment.

Moreover, the hospital authority may develop plan from similar surveys to identify improvement opportunities followed by continuous monitoring to assess the degree of sustainable improvement achieved, such monitoring being co-ordinated by use of checklists and protocols.

### REFERENCES


