SATISFACTION OF CANCER PATIENTS ABOUT NURSING CARE

SATISFAÇÃO DOS PACIENTES ONCOLÓGICOS ACERCA DOS CUIDADOS DE ENFERMAGEM LA SATISFACCIÓN DE LOS PACIENTES ONCOLÓGICOS ACERCA DE LOS CUIDADOS DE ENFERMERÍA

Larissa Cristina Rodrigues Alencar¹, Ana Hélia de Lima Sardinha², Adriana Gomes Ferreira Nogueira³, Lívia Maia Pascoal⁴, Isaura Letícia Tavares Palmeira Rolim⁵

ABSTRACT

Objective: to assess the satisfaction of cancer patients about nursing care. **Method:** this is a bibliographic study of type integrative review with searches on the databases MEDLINE, Cochrane, LILACS and Virtual Libraries-BVS and SCIELO. We selected studies published between 2007 and 2017, and present themselves in the form of figures. **Results:** we identified, initially, 802 articles, which culminated in the final sample of 13 studies analyzed in full. Demonstrate, in most studies, as users satisfied with the care received by the nursing staff. **Conclusion:** reveals that evaluate the quality of nursing care, under the perspective of patients, allows to analyze the problems from different perspectives, as well as seek consensual solutions. **Descriptors:** Patient Satisfaction; Nursing Care; Cancer; Nursing; Nursing Oncology; Quality of Health Care.

RESUMO

Objetivo: conhecer a satisfação dos pacientes com câncer acerca dos cuidados de enfermagem. **Método:** trata-se de um estudo bibliográfico do tipo revisão integrativa com buscas nas bases de dados COCHRANE, MEDLINE, LILACS e Bibliotecas Virtuais-BVS e SCIELO. Selecionaram-se os estudos publicados entre 2007 e 2017, e se apresentam em forma de figuras. **Resultados:** identificaram-se, inicialmente, 802 artigos, que culminaram na amostra final de 13 estudos analisados na íntegra. Evidenciam-se, na maioria dos estudos, os usuários como satisfeitos com o atendimento recebido pela equipe de Enfermagem. **Conclusão:** revela-se que avaliar a qualidade dos cuidados de Enfermagem, sob a ótica dos pacientes, permite analisar os problemas de diferentes perspectivas, além de buscar soluções consensuais. **Descritores:** Satisfação do Paciente; Cuidados de Enfermagem; Câncer; Enfermagem; Enfermagem Oncológica; Qualidade da Assistência à Saúde.

RESUMEN

Objetivo: evaluar el grado de satisfacción de los pacientes con cáncer acerca de los cuidados de enfermería. **Método:** se trata de un estudio bibliográfico del tipo revisión integradora, con búsquedas en las bases de datos MEDLINE, COCHRANE, LILACS y bibliotecas virtuales-BVS y SCIELO. Se seleccionaron los estudios publicados entre 2007 y 2017, y se presentan en forma de cifras. **Resultados:** se identificaron, inicialmente, 802 artículos, que culminaron en la muestra final de 13 estudios analizados en su totalidad. Demostrar, en la mayoría de los estudios, ya que los usuarios satisfechos con la atención recibida por el personal de enfermería. **Conclusión:** revela que evalúan la calidad de la atención de enfermería, bajo la perspectiva de los pacientes, permite analizar los problemas desde diferentes perspectivas, así como de buscar soluciones consensuadas. **Descriptor:** Satisfacción del Paciente; Cuidados de Enfermería; Cáncer; Enfermería; Enfermería Oncológica; Calidad de la Asistencia Clínica.

¹Master's Student, Federal University of Maranhão/UFMA. São Luís (MA), Brazil. Email: laracr.alencar@hotmail.com ORCID iD: <https://orcid.org/0000-0003-1793-7775>; ^{2,3,4,5}Doctors, Federal University of Maranhão/UFMA. São Luís (MA), Brazil. Email: anahsardinha@ibest.com.br ORCID iD: <https://orcid.org/0000-0002-8720-6348>; Email: adrianagn2@hotmail.com ORCID iD: <https://orcid.org/0000-0002-7107-1151>; Email: livia_mp@hotmail.com ORCID iD: <https://orcid.org/0000-0003-0876-3996>; Email: leticiaaprolim@yahoo.com.br ORCID iD: <https://orcid.org/0000-0002-8453-2543>

INTRODUCTION

It is known that cancer is a disease that stands in the profile of morbidity and mortality in the whole country. It currently occupies the second place as a cause of death and sets itself up as a public health problem, since it was responsible for 7.6 million deaths, a total of 58 million throughout the world, which represents 13% of all deaths.¹

Subject treatment of cancer to factors ranging from diagnostic confirmation of the disease and the staging, until the individual and psychological characteristics of the patient, and could occur different therapeutic approaches: hormone therapy, surgical procedures, radiotherapy and chemotherapy.²

It is perceived that to recognize the impact of the disease and treatment on the life of patients with cancer is vital for the planning of actions aimed to adequate care for their needs. It is recognized, by nurses, the importance of the various cancer treatments; however, the priorities should not only be in the management of the disease, but is extended to the built environment around them.³

It is understood by patient's satisfaction the comparison of his expectations with the perceptions about the encounter with the actual service.⁴ It has adopted the assessment of patient satisfaction by health institutions as a strategy to get a set of perceptions related to the quality of care received with which it acquires information that benefit the organization of these services.⁵

Enables the identification, with more ease, by conducting research of patient's satisfaction, to the managers and professionals, of the aspects that need more attention, seeking options to adequate the care to meet the needs of users.

Have been renewed, through changes in the context of the world stimulated by a concern with the safety of the patient, the demands of patients and relatives with the improvement of the quality in organizations providing health services.⁶ The objective is, through participatory approaches focused on users, to engage them in the process of evaluation, so that the results are considered in strategies for improvement of services.⁷

It is essential to be provided quality care, knowing the satisfaction of users, because, from it, you can identify the aspects that need to be modified to improve the quality of care, as well as to identify the positive points of services developed.

OBJECTIVE

- To assess the satisfaction of patients with cancer about Nursing Care.

METHOD

This is a bibliographic study of type integrative review.⁸⁻⁹ Constituted the following steps: defining the research question; data collection by the search engines in literature, in electronic databases, with the establishment of the inclusion and exclusion criteria for selecting the sample; preparation of a data collection instrument with the information of interest to be extracted from the studies, as the level of evidence, the place of research, the authors and year of publication, objectives, methods, principal results and conclusions; critical analysis of the sample; data interpretation and presentation of evidenced results.¹⁰

It was established the following guiding question: How is the satisfaction of patients with cancer about Nursing Care?

Performed the searches in the databases Cochrane Library, MEDLINE, Latin American and Caribbean Literature in Health Sciences - LILACS and Virtual Libraries-BVS and Scientific Electronic Library Online - Scielo, in October 2017.

Set the Descriptors in Health Sciences (DeCS): "Patient's Satisfaction"; "Cancer"; "Nursing care". It should be emphasized that the DeCS crosses were performed using the Boolean connector "AND" in English, for the Cochrane Library and SCIELO, and in Portuguese, to the BVS, in the following order: Patient's Satisfaction AND Cancer AND Nursing Care.

Adopted the following inclusion criteria for the selection of studies: full articles available for free; published in Portuguese, English or Spanish; between the years 2007 and 2017. Excluded editorials, letters to the editor, abstracts, and the opinion of experts, reviews, books, and chapters of books, theses and dissertations.

Made the search through online access, finding 802 articles; and, after the application of the inclusion criteria, constituted the final sample by 13 articles. It was used as an aid, at this step, the flowchart PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses), as shown in figure 1.

Figure 1. Flowchart of the selection of the studies. São Luis (MA), Brazil, 2017.

Held during the searches, a pre-selection of the studies, by means of thorough reading titles and abstracts; to identify, presented with the question of the revision and inclusion and exclusion criteria adopted. We performed the following reading, in its entirety, of articles pre-selected.

RESULTS

The sample was composed by 13 articles, including studies from different States and Countries. The majority of researches was in the hospital environment (8 articles), two in

outpatient care, one in homecare, a study with consultation via telephone and a review of the literature.

Focus, in figures 2 and 3, the level of evidence, the author(s) and the year, the objective of the study, the location of the research, methodology, results and implications for nursing.

Article's number	Evidence level	Author/Year	Research's place
1	V	Cruz et al./ 2014 ¹¹	Brasilia
2	III	Madeleen et al./2014 ¹²	Netherlands
3	V	Charalambous et al./2014 ¹³	Cyprus and Greece
4	III	Nicolaije et al./2015 ¹⁴	Netherlands
5	V	Freitas et al./2014 ¹⁵	Goiania
6	V	Baryam et al./2014 ¹⁶	Turkey
7	V	Kadmon et al./2015 ¹⁷	Israel
8	V	Berglund et al./2015 ¹⁸	Stockholm
9	IV	Keeley et al./2015 ¹⁹	Philadelphia
10	V	Golden/2014 ²⁰	Philadelphia
11	V	Scrymgeour, et al./2013 ²¹	New Zealand

12	V	Contreras; Veras/2011 ²²	Colombia
13	V	Fonseca et al./2007 ²³	São Paulo

Figure 2. Characterization of the articles according to the level of evidence, author/year and place of research. São Luis (MA), Brazil, 2017.

Article's number	Objective	Method	Results	Conclusions
1	Patients' opinions about weekly phone calls offered by nursing staff.	Qualitative. Sample: 22 patients undergoing chemotherapy, most women between 40 and 50 years old, housewives, from the Federal District and with low schooling.	Satisfaction before the phone calls received, mainly due to direct contact with professionals from nursing, to build trust and greater control of the treatment.	The weekly nursing consultation via telephone, allowed the clarification of doubts and facilitated the recovery of the patient at home, in addition to providing greater security for families and caregivers.
2	Compare the satisfaction of patients with digestive system cancer about the monitoring carried out by nurses with conventional care.	Randomized. Sample: 168 patients, male, 64-67 years old, singles, with basic education.	Resulted in satisfaction unchanged over time, in patients with upper gastrointestinal tract cancer.	Patients who received home care from nurses were significantly more satisfied than those who received conventional treatment.
3	Evaluate and compare patients' satisfaction with nursing care in two cities in Europe.	Joint study. Sample: 498 patients. In Cyprus: 51-60 years old, male. In Greece: age 61-70 years old, female.	Patients attributed great importance to the influence of interpersonal aspects and were confident about their satisfaction.	Proved the importance of cultural competence in European health systems.
4	Evaluate longitudinally the impact of a Survival Assistance Plan (SCP) on the results reported by the patient in routine clinical practice.	Randomized. Sample: from 296 patients (75%) 221 were eligible, completed the first questionnaire. After six months, 158 patients and, after 12 months, 147 patients completed the questionnaire.	Showed no evidence of benefit of Survival Assistance Plan (SCP) on satisfaction with information and care.	The use of the SCP's increased the concerns of patients, the emotional impact and the symptoms experienced.
5	Evaluating the quality of nursing care, patient satisfaction and the correlation between them.	Quantitative. Sample: 275 patients. Aged 41-50, married/stable male employees, years of study > 9.	The patients were satisfied with the care received in the areas assessed: Professional, technical and educational.	Allowed the identification of strengths and weaknesses in the field of study, providing subsidies for the reorganization of assistance activities, management and teaching.
6	Evaluate the quality of life of breast cancer patients undergoing chemotherapy and evaluate the satisfaction of nursing care.	Transversal. Sample: 105 patients. Most women, housewives, who are absent from work due to illness, stage 1 of cancer.	The patients were very satisfied with the nursing care they received at the hospital.	Indicate areas in which the care in Turkey is meeting the needs of patients with breast cancer, as the availability of the nurse and the patient's respect for privacy. But also areas where we could improve, as the clarification of patient information.
7	Check the impact of care established by the specialist nurse in breast	Quantitative. Sample: 321 women, married, with upper	In most areas investigated, women considered great general contribution of nurses (87%). It was found that 53%	Develop the role of the specialist nurse in breast cancer is necessary and really

	cancer treatment.	during	education degree, Jewish.	full	of women received information about the position of own nurse.	critical. The support of the nurse specialist is an important part of the patient's capacity to manage his diagnosis and related care.
8	Evaluate the satisfaction of nursing and the association between the continuity of care and information received during treatment.	the	Quantitative. Sample: 962 patients, aged 45 and 64 years old, female.		Most patients claims to be satisfied with the nursing care. More than 90% assessed interpersonal modes of nurses and care at the clinic as "good", the waiting time as "acceptable" and the duration of the appointments as "enough".	Patients' satisfaction with the clinics run by nurses was stable over time.
9	Determine the difference in patients' satisfaction with the general care of nursing and nursing care realized when using a standard protocol of nursing care.	the	Experimental. Sample: 158 patients. 60.3 years old as average age, male, Caucasian, complete high school, married.		Patients reported satisfaction with nursing care. The level of satisfaction was higher after the implementation of the standard protocol of nursing care.	Evidence that the use of a standard protocol for nursing care can improve patient satisfaction.
10	Evaluate, in literature, knowledge about the role of advanced practice nursing in Pediatric Oncology.	in	Literature review with 12 items available, from 2000-2013, to respond to the question: What is the knowledge about the role of the nurse in advanced practice in Pediatric Oncology?		The care provided by nursing-professional teams proved to be effective, efficient and comprehensive. In addition to the shorter hospital stays and reduced costs, Nursing professionals' teams offer greater quality and continuity of care and improve patient satisfaction.	Nursing professionals provide safe, effective and efficient care in adult and pediatric environments for inpatients.
11	Evaluate the effectiveness of the pilot project of the program of cancer care continuity.	the	Quantitative. Sample: 31 participating patients in continuity of care project.		The results indicated that patients were satisfied with the relational continuity components of the project, but there were gaps in aspects of management and informational continuity of care.	Participants were pleased with the continuity of cancer care program. In particular, they felt that the most useful aspects of the program were expended by support professionals and the clarification of questions and information regarding treatment.
12	Determine the perception of quality of care according to the dimension of satisfaction and experience with care to patients who receive treatment in the Oncology Unit of a health institution.	the	Quantitative. Sample: 75 patients, mostly women, average of 43.6 years old, complete high school, medium/high social class.		The evaluation by the patients was classified as: excellent (58.7%) followed by very good (29.3%), good (10.7%) and regular (1.3%).	Most patients have a positive evaluation of nursing care in relation to the dimensions of satisfaction and experience.
13	Evaluate the level of satisfaction of cancer patients received care in outpatient Chemotherapy to Adults from Hospital São Paulo.	the	Quantitative. Sample: 105 patients, with a predominance of women, ages 41 to 60 years old, married, with incomplete elementary school.		Users ' evaluation was positive with both the nursing care (54% very good and 46% good), as with the global service (50% very satisfied and 46% satisfied).	The level of satisfaction expressed by users related mainly with organizational accessibility, the cozy atmosphere and the assistance process on the dimensions of professional/client interaction and

Figure 3. Characterization of the articles according to the purpose, method, results and conclusions. São Luis (MA), Brazil, 2017.

DISCUSSION

You must prioritize the provision of quality assistance to customer with diagnosis of neoplasia to nursing care, because nurses have constant contact with the patient, with the opportunity to become closer to those who receive the care, as well as understand the aspirations and expectations of that individual, as well as foster care with quality.²⁴

Showed predominantly customers research participants satisfied with the care received, listing the positive aspects and also those that needed to be strengthened or even who were absent and needed. It should be emphasized, in studies conducted in Europe, the importance of the provision of information about the disease and treatment for the patients and their families, as well as the need to establish a bond between professionals and patients, generating confidence and security.¹³

Systematized by reading the corpus analysis, the articles identified in three empirical categories: Nursing Care established; instruments for assessing patient satisfaction; influencing variables of patients' satisfaction about the nursing care.

♦ Nursing care set

It presents, as mentioned by the studies, a diversity of environments and modalities of care developed by nursing staff, in particular, by nurses and, although each category has its peculiarities, users' satisfaction prevailed. It stands out; however, that it revealed specific aspects of these assessments are for the improvement of the assistance, whether for the recognition of good performance of professionals.

It was evaluated in a study conducted in Brasília,¹¹ the nursing consultation via telephone to patients submitted to antineoplastic chemotherapy in which the majority of malignant neoplasms was cervix, followed by breast cancer and rectum. It explains that, despite not being a conventional treatment, all interviewees reported satisfaction in front of the phone monitoring received, mainly due to the possibility of having direct contact with nursing professionals, to the construction of trust and to greater control of the treatment.

It offers, by means of a call for routine monitoring of patients, the possibility of

continuity of the guidelines, the strengthening of health education, the assessment of patient access to treatment, a reduction in the number of visits to emergency and, for some patients, this means helps deliver an emotional bridge between their home and the hospital.²⁵ It appears that the use of the telephone as an important method in the nurse-patient communication²⁶

It was evidenced another modality of care, the visits led by specialized nurses in cancer care in the Department of Oncology, gastroenterology and surgery in Holland,¹² with experience of more than ten years, which focused mainly on the relief of suffering and the complaints of the patients. This study was compared between home care and conventional care. It was found that both patients and relatives of the group led by nurses were more satisfied with the follow-up than those who received the conventional monitoring, highlighting the time of consultation and the convenience of being assisted in their own residence.

Prominent among the eight research conducted with users hospitalized^{3-7, 9,11-2}, the care provided by specialist nurses in breast cancer; the care within the specialization of Advanced Nursing in Pediatric Oncology: randomized study with 12 hospitals in the Netherlands¹⁴ comparing the care provided by means of an assistance plan for survival (SCP) and usual care in patients with gynecological cancer; project of continuity of care and the evaluation of a protocol of nursing care in oncology patients.

It appears that the satisfaction perceived by the patient as a product of hospital care and a fundamental element as a valid indicator of quality of care and perception, because it is the central axis of active and effective interaction between nurses and patients.²⁷ It is noteworthy that, in Nursing, there is a concern with the perception of care in the different areas of hospital care, perhaps because the own mechanism of the health care system makes it more difficult for the challenge of focusing on the person cared for.²⁸

Found themselves under outpatient clinic, two surveys: Ambulatory care conducted by nurses held in Stockholm¹⁸ and in São Paulo.¹³ We emphasize that the time spent in consultations and the interpersonal

relationship between the professional and the client.

Provides, by appropriate interpersonal relationship between nurse and patient, not only the identification of needs for care, but also, the clarification of the possible effects of the treatment and how to manage them, contributing to the reduction of anxiety and the increase in adherence to treatment.²⁹

♦ Evaluation tools of patients' satisfaction

It is believed that one of the aspects that provide varying perspectives of evaluation performed by patients are the instruments used in research, because the studies used different instruments to measure satisfaction, including since questionnaires preparation itself, scales, up to semi-structured interviews.

It was observed that the use of questionnaires, among them: structured questionnaires based on questionnaire of Verschuur³⁰ containing three general propositions related to the procedure of monitoring, nine questions regarding satisfaction with the content of the visit and a rating from one to ten for overall satisfaction and the weight of the visit.¹²

It is also used, the Brazilian version of Patient Satisfaction Instrument,³⁰ called instrument of patient satisfaction,³¹ which evaluates technical-professional, educational and confidence. Contain, in the professional field, seven items that address technical issues of care and education, there are seven items that deal with situations related to the attitudes of nurses in front of the patient. It adds up, still, the domain trust, which covers 11 situations on the interpersonal relationship between nurse and patient. Respond to these items in a scale of measure Likert type, with five alternatives ranging from "completely agree" and "strongly disagree".

We analyzed the questionnaire based on the Ipswitch Patient Questionnaire,³² the perceptions of Australian women about the role of the specialist nurse in breast cancer, including questions about the training, availability and accessibility; coordination of care; the provision of information; the psychosocial and emotional support. Include in the questionnaire European Organization for Research and Treatment of Cancer (EORTC Quality of Life Qlq- INFO 25), items related to the waiting time, continuity of care, the duration of the visit, the information and interpersonal relationship.

Included in the structured interviews, issues related to the continuity of nursing

care, the development and the supply of resources, assistance and training of patients. It was built in a study conducted in São Paulo,²³ a structured interview and based, primarily, on a specific job,³³ validated by seven experts to assess patient satisfaction regarding components of structure, process and results,³⁴ which were evaluated: The behavior of nurses during the consultation, the performance of nursing technicians and auxiliaries, the time spent in care, guidelines provided by the nurse, your access to the service and structural conditions.

It was found that, despite the diversification of methods used, it was possible to carry out the assessment of patients' satisfaction about the nursing care where patients have expressed opinions, are directed by questionnaires or freely by means of structured interviews, listing the positive and negative aspects.

Demonstrate the creation and use of specific instruments for the evaluation of nursing care, since they provided the assessment criteria, which are characteristic of the practices carried out by nurses, providing contextualized information in reality. Warns, for which there is an assurance of the quality of nursing care, that the instruments used in the studies should be applied in routine care, receiving the evaluation of the own recipients of the service, as observed in studies conducted in Philadelphia¹⁹ and in New Zealand.²¹

♦ Influents of patients' satisfaction variables about the nursing care

Highlights are the variables that influence the satisfaction and/or dissatisfaction among customers, both positive aspects, as in the negative, because, in spite of studies being carried out in different places of the world, the variables identified are similar.

It is understood that the trust in relationships between the patient and the provider is an aspect that may influence the patient's satisfaction and is not considered a "new theme" in the literature. It is demonstrated in studies that "trust" is a theme that patients evaluate several years ago and reported this characteristic as important for the patient's satisfaction.^{13,15}

It is pointed, with evidence, that the greatest time of permanence in the hospital may be related to higher levels of patient satisfaction,³⁵ corroborating studies that claim that the greater the time of permanence, more opportunities to develop a better relationship between the caregiver and the patient and, consequently, a better

assessment of the capacities and skills of professionals providing the care.¹⁵

It is inferred that the difficulty of access to healthcare services can do with that patients consider very satisfactory, because it is seen as “a favor” provided by professionals, and they can also infer that, if they deem the service as unsatisfactory, may fail to receive such care. Realizes the need for users to recognize the use of health services as a right and, as such, regardless of its assessment on the service, he will continue to receive assistance. Requires that the patients if put in a critical situation and participatory process before the institution and not as if they were receiving a favor.^{15,36}

Details that the availability of nurses, when requested, as well as respect for the privacy of patients, as well as the demonstration of concern, the delivery of aid to minimize the pain experienced and the provision of sufficient time to care are variables that influence positively the satisfaction. Justify the proper time and greater availability of training in the first consultation by the fact that, at the moment, the nurse collects data, performs the physical examination and guides patients and families about the treatment and side effects. Focus, however, in the follow-up appointments, the assessment of the current situation, especially regarding the effects presented after chemotherapy, and the effectiveness of the measures used to manage them, as well as the strengthening of them, when necessary.^{17-8,28}

Indicates, in relation to the care process, that the professional interaction/client pointed to two variables that influenced the positive evaluation of the quality of care: the technical capacity of the professional, which depends on the knowledge and judgment used in strategic decisions appropriate for providing the care, in addition to the competence for the implementation of this process, and the appropriate interpersonal relationship, it is important to encompass the affability and the interest of providers of assistance to patients and the incentive to which they decide to actively participate in the treatment and care offered.³⁷

Adds that the appropriate interpersonal relationship between nurse and patient not only allows the identification of the care needs as well as the clarification about the treatment and possible effects, contributing to decrease anxiety and increase adherence to treatment. It should be emphasized that, for such, the nurse needs to develop skill in communication and remember that technology is important, without forgetting

the human aspect and the good relationship between client and service provider, this being a differential in the quality of care.^{29,38}

It should be emphasized, on the information, which showed its deficiency in some works as a variable that needs to be improved. It reinforces, then the need for nursing professionals to explain the reasons for which the examinations were requested. It is demonstrated, by deficiency in information, no answer, on the part of these professionals, one of the rights of patients.¹⁵

Provided by means of the studies analyzed, a reflection on the patients' satisfaction regarding the nursing care received in different environments in cancer treatment and in different regions of the world. It involves, in care, since the conventional treatment with hospitalization until the continuity of care through consultation via telephone.

CONCLUSION

Notes the predominance of users satisfied with the care received by nurses, in spite of the different localities, cultural realities and access to health services. Cover, by the care provided by nurses, various forms of interventions, such as consultations, hospital care, homecare, monitoring via telephone, highlighted in the studies, as well as the ways to check the satisfaction of care with the use of specific instruments, structured interviews and questionnaires which provided the knowledge of the main characteristics influencing for positive evaluation, as the availability of nurses, the interpersonal relationship client/professional built and the establishment of a bond of trust.

Allow, by the quality of nursing care, under the perspective of patients, the analysis of problems from different perspectives and the search for consensual solutions. Stresses the need for constant monitoring of the patients' satisfaction for adequacy of health care services as an important element for obtaining opinions and suggestions of patients, because they are the recipients of care.

It is hoped that the results of this research, if applied in practice, could contribute with a more reliable evaluation of reality in which they are established health services, allowing the improvement of the care practice. It should be emphasized that the topic is broad, may constitute an object of study for future investigations.

This study is limited by the loss of studies indexed in different databases of examined and the sample that includes only, complete

articles published in scientific journals, excluding dissertations, theses, official documents and the gray literature, which may have resulted in the inadvertent deletion of some studies.

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Corresponding Address

Larissa Cristina Rodrigues Alencar
Condomínio Torre do Sol
Alameda V, Bloco K, Ap.402
Bairro Bequimão
CEP: 65061-000 – São Luís (MA), Brazil