Natural Resources for Human Health
eISSN: 2583-1194

Original Research

**Received** 21 July 2026
**Revised** 25 Aug 2026
**Accepted** 10 Sep 2026

Natural Resources for Human Health 2026, Vol.6(22s): 983–992

**KEYWORDS:**
Remote patient experience, patient satisfaction, healthcare quality, telehealth, digital health, patient engagement.

# The Impact of Remote Patient Experience Services on Healthcare Quality and Patient Satisfaction: A Systematic Review

Sami Musallam Alsaedi[1], Mohammed Alshehri[2], Awad Aziz Almutairi[3], Salah Salem Alamri[4], Waleed Salem Althaqafi[5], Tariq Yahya Alhakami[6], Ali Ibrahem Alghamdi[7], Mohsen Hussain Abotaleb[8], Mazen Mohammed Alamri[9], Adel Alawaji[10], Ali Masad Almutairi[11], Fahad Ebrahem Alzubaidi[12]

[1]Health Administration Technician, Ministry of National Guard, Jeddah
[2]Health Information Technician, Ministry of National Guard, Jeddah
[3]Health Information Technician, King Abdulaziz Medical City, Jeddah
[4]Health Administration Technician, King Abdulaziz Medical City, Jeddah
[5]Health Information Technician, King Abdulaziz Medical City, Jeddah
[6]Health Administration Technician, Ministry of National Guard, Jeddah
[7]Health Administration Technician, Ministry of National Guard, Jeddah
[8]Health Administration Technician, Ministry of National Guard, Jeddah
[9]Health Administration Technician, Ministry of National Guard, Jeddah
[10]Health Information Technician, Ministry of National Guard, Jeddah
[11]Health Administration Technician, King Abdulaziz Medical City, Jeddah
[12]Health Administration Technician, Ministry of National Guard, Jeddah

## ABSTRACT:

**Background:** Remote patient experience services are increasingly integrated into healthcare delivery through telehealth, digital communication, remote monitoring, and patient portals. These services may improve access, convenience, communication, patient engagement, and the overall quality of care.

**Objective:** This systematic review aimed to assess the impact of remote patient experience services on healthcare quality and patient satisfaction and to identify factors affecting patients' experiences with remotely delivered care.

**Methods:** Relevant studies evaluating remote patient experience services and their effects on patient satisfaction, healthcare quality, accessibility, communication, and patient engagement were identified through electronic database searches. Eligible studies were critically assessed, and their findings were synthesized narratively.

**Results:** The reviewed evidence generally demonstrated that remote patient experience services were associated with improved patient satisfaction and perceived healthcare quality. Benefits included greater convenience and accessibility, reduced travel and waiting time, improved communication, and increased patient engagement. Satisfaction was also influenced by ease of use, reliability of technology, provider responsiveness, privacy, and continuity of care.

**Conclusion:** Remote patient experience services can contribute to better healthcare quality and higher patient satisfaction when they are accessible, reliable, patient-centered, and supported by effective communication. Continuous evaluation of patient feedback is important for optimizing these services and improving the overall healthcare experience.

Natural Resources for Human Health
eISSN: 2583-1194

## I. INTRODUCTION

Healthcare delivery has increasingly shifted from traditional face-to-face models toward technology-enabled and remotely delivered services. Telehealth, telemedicine, remote patient monitoring, patient portals, and digital communication allow patients to interact with healthcare professionals without being physically present in healthcare facilities. These services can improve access to care, reduce travel and waiting time, and provide greater convenience for patients, particularly those facing geographical or mobility-related barriers (Kruse et al., 2017).

Patient experience is an important component of healthcare quality because it reflects how patients perceive the care they receive, including communication, accessibility, responsiveness, coordination, respect, and involvement in decision-making. Evaluating patient experience can provide healthcare organizations with important information for identifying weaknesses in service delivery and developing quality-improvement strategies (Mohammed et al., 2016).

Remote healthcare has introduced new factors that can influence patient experience. In addition to the quality of clinical care, patients may evaluate the usability of digital platforms, reliability of technology, internet connectivity, privacy, communication with healthcare professionals, and ease of accessing services. Although remote services can overcome several traditional barriers to healthcare, technical difficulties and limited digital literacy may negatively affect the patient experience (Kruse et al., 2017).

Patient satisfaction is one of the most frequently assessed outcomes of remote healthcare. It is influenced by convenience, accessibility, communication, perceived effectiveness, waiting time, technical performance, and the relationship between patients and healthcare providers. Previous evidence has generally demonstrated favorable levels of satisfaction with telehealth, particularly when patients perceive remote services as convenient, accessible, and easy to use (Kruse et al., 2017; Mair & Whitten, 2000).

Recent evidence also suggests that patients are generally satisfied with telemedicine consultations, although considerable differences exist between studies in the methods and instruments used to measure satisfaction. Such variation makes it difficult to compare findings and highlights the importance of reliable and standardized approaches to evaluating patient experience (Chagas et al., 2024). Similarly, remote patient monitoring can support continuous follow-up and patient engagement, but its success depends on technological usability, reliability, and effective communication between patients and healthcare professionals.

The quality of communication is particularly important in remote healthcare because the absence of direct physical interaction may influence the patient–provider relationship. Effective communication can improve trust, understanding, shared decision-making, and patient participation, whereas technical interruptions or difficulties communicating concerns may reduce perceived quality of care (Mair & Whitten, 2000).

Despite the growing use of remote patient experience services, evidence remains heterogeneous because studies differ in healthcare settings, patient populations, technologies, and outcome measures. Therefore, a systematic evaluation is needed to clarify how remote patient experience services influence healthcare quality and patient satisfaction. This systematic review aims to assess their impact, with particular attention to accessibility, communication, convenience, patient engagement, technological usability, and overall perceptions of healthcare quality.

### Rationale and Hypothesis

### Rationale

The increasing use of remote patient experience services has changed the way healthcare is accessed and delivered. Although telehealth, remote monitoring, digital communication, and patient portals can improve accessibility and convenience, their effects on healthcare quality and patient satisfaction may differ according to the technology used, healthcare setting, patient characteristics, and quality of communication. Existing studies have reported generally positive patient experiences, but differences in assessment methods and service characteristics make the overall evidence difficult to interpret. Therefore, a systematic review is needed to summarize the available evidence and identify the major factors associated with positive or negative remote patient experiences. The findings may help healthcare organizations improve the design and implementation of remote services and promote more patient-centered, accessible, and high-quality healthcare.

**Hypothesis**

Remote patient experience services are associated with improved healthcare quality and higher patient satisfaction compared with conventional or less digitally supported healthcare delivery, particularly through improved accessibility, convenience, communication, patient engagement, and continuity of care.

## II. LITERATURE REVIEW

### 1. Remote Patient Experience and Digital Healthcare

The rapid development of digital health technologies has transformed traditional healthcare delivery. Telehealth, telemedicine, remote patient monitoring, patient portals, mobile health applications, and digital communication allow patients to receive healthcare services and communicate with healthcare professionals without being physically present in healthcare facilities. These services can improve accessibility, convenience, continuity of care, and communication while reducing travel and waiting time. However, the effectiveness of remote healthcare depends on the quality of technology, organizational support, and the ability to maintain patient-centered care (Kruse et al., 2017; Wang et al., 2022).

Patient experience represents patients' perceptions of their interactions with healthcare services and professionals. It includes communication, accessibility, responsiveness, involvement in decision-making, coordination, respect, and the extent to which healthcare services meet individual needs. Because these factors influence patients' perceptions of care, patient experience has become an important component of healthcare quality and an important source of information for quality-improvement activities (Mohammed et al., 2016).

Digital patient experience extends these concepts to technology-mediated healthcare interactions. Patients may evaluate not only the clinical care they receive but also the usability of digital platforms, reliability of technology, quality of communication, privacy, and ease of accessing information. Wang et al. (2022) emphasized that digital patient experience is influenced by patient characteristics, technology functionality, interaction design, and organizational factors. Therefore, digital healthcare should be designed around patients' needs rather than focusing only on technological capabilities.

### 2. Telemedicine and Patient Satisfaction

Patient satisfaction is one of the most frequently assessed outcomes of telemedicine. It reflects the extent to which healthcare services meet patients' expectations and needs and may be influenced by convenience, accessibility, communication, perceived effectiveness, technical performance, and the relationship between patients and healthcare professionals.

Early research generally demonstrated favorable patient attitudes toward telemedicine. Mair and Whitten (2000) reported that patients were generally satisfied with telemedicine services across different healthcare settings. However, the authors also identified limitations in the available evidence, including small study populations and differences in study methodology and satisfaction measures. These limitations demonstrated the need for more consistent approaches to evaluating patient satisfaction.

Kruse et al. (2017) similarly found that patients were generally satisfied with telehealth services. Convenience, reduced travel, improved access, lower costs, and effective communication were important factors contributing to satisfaction. Nevertheless, technical problems, concerns about the quality of remote interactions, and limitations in physical examination could negatively influence patients' experiences.

More recent evidence continues to support generally positive experiences. Chagas et al. (2024) found high levels of satisfaction with telemedicine in their systematic review and meta-analysis, although considerable variation existed between studies. The authors emphasized that many studies used different or nonvalidated questionnaires, limiting the ability to compare satisfaction across healthcare settings.

### 3. Remote Patient Monitoring

Remote patient monitoring is an important component of remote healthcare and allows patients' health information to be collected outside conventional healthcare facilities and transmitted to healthcare professionals. This approach can facilitate continuous follow-up, improve communication, and potentially allow healthcare professionals to identify changes in patients' conditions earlier.

Patient experience with remote monitoring depends on both clinical and technological factors. Rhoden et al. (2022) found generally favorable patient experiences with telemedicine-based remote patient monitoring but identified substantial variation in the instruments used to assess satisfaction. This variation makes it difficult to compare outcomes between studies and highlights the need for reliable measurement tools.

Pannunzio et al. (2024) also found considerable variation in the assessment of patient and staff experiences with remote patient monitoring. Important areas included usability, quality of care, technology, communication, adherence, and perceived benefits. These findings indicate that evaluation of remote monitoring should consider the complete patient experience rather than focusing only on clinical outcomes.

**4. Technology Usability and Patient Engagement**

The usability and reliability of digital technologies are major determinants of remote patient experience. Complicated interfaces, poor internet connectivity, technical interruptions, and inadequate technical support can cause frustration and reduce patients' willingness to continue using remote services. In contrast, simple interfaces, clear instructions, reliable systems, and appropriate support can improve satisfaction and engagement.

Leonardsen et al. (2020) reported that patients' experiences with technology-enabled care were affected by usability, technological functionality, independence, empowerment, and perceived security. Patients may perceive digital technology as beneficial when it makes healthcare more accessible and gives them greater control over their care. However, technical difficulties may create additional barriers and negatively influence their experience.

Patient engagement is also an important outcome of remote healthcare. Digital platforms can provide patients with easier access to health information and opportunities to participate in monitoring and decision-making. Wang et al. (2022) emphasized that personalization, clear information, effective navigation, and user-centered design can improve digital patient experience and encourage patient participation.

**5. Communication and Patient-Centered Care**

Communication is a fundamental component of patient experience in both traditional and remote healthcare. In remote settings, communication may occur through video consultations, telephone calls, secure messaging, electronic portals, and other digital platforms. Effective communication can improve understanding, trust, shared decision-making, and patient participation, whereas technical interruptions or limited interaction may negatively affect the patient–provider relationship.

Kim et al. (2024) identified communication, information exchange, patient involvement, and the relationship between patients and healthcare professionals as important components of patient-centered care. These findings highlight the importance of maintaining meaningful communication when healthcare is delivered remotely.

Patients also value being treated as individuals and receiving adequate information about their condition and treatment. Havana et al. (2023) reported that patients considered professional presence, involvement in care, information provision, and positive relationships with healthcare professionals important components of patient-centered care. These principles should remain central when healthcare services are transferred to digital environments.

**6. Healthcare Quality and Patient Feedback**

Patient experience provides important information about healthcare quality that may not be captured by clinical outcomes alone. Feedback can identify problems related to accessibility, communication, responsiveness, coordination, continuity, and patient involvement. Therefore, patient experience measures can be used to support quality-improvement programs.

Gleeson et al. (2016) found that patient experience data can support quality improvement when healthcare organizations systematically collect, analyze, and act on the information obtained. Simply collecting patient feedback is insufficient if the results are not translated into changes in healthcare processes.

Wong et al. (2020) similarly reported that patient feedback can contribute to improvements in patient-centered care, including communication, continuity, education, and responsiveness. In remote healthcare, regular assessment of patient experience can therefore help organizations identify technical and organizational problems and develop appropriate solutions.

**7. Accessibility and Convenience**

Improved accessibility is one of the major potential advantages of remote healthcare. Patients can receive consultations and follow-up without traveling to healthcare facilities, which may be particularly beneficial for patients living in remote areas, those with mobility limitations, and patients requiring frequent follow-up. Remote services can also reduce travel costs and waiting time and provide greater flexibility in scheduling.

However, digital access is not equally available to all patients. Differences in internet connectivity, access to smartphones or computers, digital literacy, and technical support can affect patients' ability to use remote services. Wang et al. (2022) emphasized that patient capabilities and environmental factors should be considered when designing digital healthcare services. Therefore, remote healthcare should aim to reduce existing barriers without creating new forms of inequality.

**8. Privacy, Security, and Trust**

Privacy and security are important components of patient experience in digital healthcare. Remote services require patients to share personal and health information through electronic systems, which may raise concerns about confidentiality and unauthorized access. Such concerns can affect patients' trust in digital healthcare and their willingness to use remote services.

Healthcare organizations should therefore ensure appropriate security measures, confidentiality, transparent data-use policies, and clear communication about how patients' information is protected. Trust is also influenced by patients' perceptions of technological reliability and the responsiveness of healthcare professionals when problems occur.

**9. Measurement of Patient Satisfaction and Experience**

One of the major limitations in the current literature is the lack of standardization in measuring patient satisfaction and experience. Different studies use different questionnaires, definitions, scales, and outcome domains. This creates difficulties when comparing findings and determining which components of remote healthcare have the greatest effect on satisfaction.

Guo et al. (2024) highlighted the need for reliable and comprehensive instruments to evaluate satisfaction with telemedicine. Chagas et al. (2024) similarly reported considerable variation in the tools used to measure satisfaction with telemedicine. Standardized and validated measurement approaches would allow healthcare organizations to monitor patient experience more consistently and compare outcomes across different remote healthcare services.

**10. Overall Impact on Healthcare Quality and Patient Satisfaction**

Overall, the literature suggests that remote patient experience services can have a positive effect on healthcare quality and patient satisfaction, particularly by improving accessibility, convenience, communication, continuity, and patient engagement. However, these benefits are not automatic and depend on reliable technology, appropriate service design, effective communication, patient support, and consideration of individual patient needs.

Remote healthcare should therefore be considered as a patient-centered model rather than simply a technological replacement for face-to-face care. Continuous collection and evaluation of patient feedback can help healthcare organizations identify weaknesses and improve both the technological and human aspects of remote services. Despite the generally positive evidence, differences in study designs, patient populations, technologies, and measurement instruments remain important limitations. These issues support the need for a systematic review to clarify the overall impact of remote patient experience services on healthcare quality and patient satisfaction.

## III. METHODS

### Study Design

This systematic review was conducted to evaluate the impact of remote patient experience services on healthcare quality and patient satisfaction. The review followed a structured approach for identifying, selecting, assessing, and synthesizing relevant published evidence. The methodology was developed according to the principles of the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines to promote transparency and reproducibility.

### Search Strategy

A comprehensive literature search was conducted in major electronic databases, including PubMed/MEDLINE, Scopus, Web of Science, ScienceDirect, and Google Scholar. The search focused on studies addressing remote patient experience services, healthcare quality, and patient satisfaction. Search terms were combined using Boolean operators AND and OR.

The main search terms included: *"remote patient experience," "digital patient experience," "telehealth," "telemedicine," "remote patient monitoring," "virtual care," "digital healthcare," "patient satisfaction," "patient experience," "healthcare quality," "patient engagement,"* and *"quality of care."* Reference lists of relevant articles and systematic reviews were also screened to identify additional eligible studies.

### Eligibility Criteria

Studies were included when they evaluated remote or technology-enabled healthcare services and reported outcomes related to patient experience, patient satisfaction, healthcare quality, accessibility, communication, patient engagement, or perceived quality of care. Quantitative, qualitative, mixed-methods studies, and relevant systematic reviews were considered when they provided information directly related to the review objectives.

Studies were excluded when they were unrelated to remote healthcare or patient experience, focused exclusively on technical development without patient-related outcomes, were editorials, letters, conference abstracts without sufficient data, or did not provide relevant information regarding patient satisfaction or healthcare quality. Duplicate publications were also removed.

### Study Selection

All retrieved records were screened for relevance based on their titles and abstracts. Potentially eligible articles were subsequently assessed through full-text review. Studies that met all predetermined eligibility criteria were included in the final qualitative synthesis. The selection process was documented according to the PRISMA framework.

### Data Extraction

Data were extracted from eligible studies using a standardized approach. The extracted information included the author and publication year, study design, country or healthcare setting, sample characteristics, type of remote healthcare service, method of patient experience assessment, patient satisfaction outcomes, healthcare quality outcomes, and main findings. Additional information regarding factors influencing patient experience, such as accessibility, communication, usability, technical problems, privacy, and patient engagement, was also recorded.

### Quality Assessment

The methodological quality of the included studies was assessed using appropriate critical appraisal tools according to the study design. The assessment considered factors such as study methodology, participant selection, outcome measurement, data collection, potential sources of bias, and the appropriateness of the analysis. Quality assessment was used to interpret the strength and reliability of the available evidence.

### Data Synthesis

Because of expected differences between studies in terms of populations, healthcare settings, remote technologies, outcome measures, and assessment instruments, findings were primarily synthesized using a **narrative approach**. Results were organized according to major themes, including patient satisfaction, healthcare quality, accessibility and convenience, communication, patient engagement, technology usability, remote patient monitoring, and factors influencing the overall patient experience. Where appropriate, similarities and differences between studies were identified and compared.

### Ethical Considerations

As this study involved analysis of previously published literature and did not involve direct recruitment or interaction with human participants, ethical approval was not required. All included studies were appropriately cited, and the findings were reported according to the available published evidence.

## IV. RESULTS

The reviewed studies generally showed that remote patient experience services were associated with improved patient satisfaction and perceived healthcare quality. The main benefits were related to accessibility, convenience, communication,

continuity of care, and patient engagement. However, technical problems, poor usability, limited digital literacy, and privacy concerns could negatively influence the patient experience.

**Table 1.** Main characteristics of the reviewed evidence

| Evidence area | Main focus |
|---|---|
| **Telemedicine** | Satisfaction, accessibility, communication |
| **Remote patient monitoring** | Follow-up, engagement, continuity |
| **Digital healthcare** | Usability, accessibility, patient experience |
| **Patient-centered care** | Communication, involvement, individualized care |
| **Patient feedback** | Quality improvement and service evaluation |

The reviewed evidence covered different forms of remote healthcare, particularly telemedicine, remote patient monitoring, and digital healthcare platforms. The literature increasingly evaluates not only patient satisfaction but also accessibility, usability, communication, engagement, and perceived quality of care.

**Table 2.** Effects of remote patient experience services

| Outcome | Main finding |
|---|---|
| **Patient satisfaction** | Generally improved |
| **Accessibility** | Improved access to healthcare |
| **Convenience** | Reduced travel and waiting |
| **Communication** | Improved when technology was reliable |
| **Patient engagement** | Supported involvement in care |
| **Continuity of care** | Facilitated ongoing follow-up |
| **Healthcare quality** | Generally perceived as improved |

Remote services generally had a positive effect on patient satisfaction and perceived healthcare quality. Convenience and improved access were among the most consistent benefits. Remote monitoring and virtual follow-up also supported continuity and patient engagement. However, these benefits depended on effective communication and appropriate integration of technology into healthcare delivery.

**Table 3.** Factors affecting patient experience

| Factor | Effect |
|---|---|
| **Ease of use** | Improves satisfaction |
| **Technical reliability** | Supports effective communication |
| **Provider responsiveness** | Increases trust and satisfaction |
| **Communication quality** | Improves patient-centered care |
| **Privacy and security** | Supports confidence in digital services |
| **Digital literacy** | May influence successful use |
| **Technical support** | Helps overcome technology-related problems |

Patient experience was influenced by both technological and healthcare-provider factors. Easy-to-use and reliable systems were associated with better experiences, whereas technical difficulties and limited digital skills could reduce satisfaction. Provider responsiveness, clear communication, privacy, and adequate technical support were also important for maintaining trust and perceived quality.

Overall, the findings indicate that remote patient experience services can improve healthcare quality and patient satisfaction when they are accessible, reliable, easy to use, and supported by effective patient-centered communication. Technology alone, however, does not guarantee a positive experience; successful implementation also requires appropriate organizational support and attention to patients' individual needs.

## V. DISCUSSION

The present systematic review showed that remote patient experience services generally have a positive effect on patient satisfaction and perceived healthcare quality. Telemedicine, remote patient monitoring, and other digital healthcare services were mainly associated with improved accessibility, convenience, communication, engagement, and continuity of care. However, these benefits depended on the reliability and usability of the technology and the quality of interaction between patients and healthcare professionals.

The findings are consistent with Kruse et al. (2017), who reported generally favorable patient satisfaction with telehealth, particularly because of improved convenience and reduced travel. Similarly, Mair and Whitten (2000) found that patients were generally satisfied with telemedicine, although satisfaction varied according to the type and quality of the service. These findings suggest that remote healthcare can be a valuable alternative or complement to conventional care when it effectively meets patients' needs.

Accessibility and convenience were among the most important benefits identified in this review. Remote services can reduce geographical and transportation barriers and allow patients to receive follow-up from home. However, limited digital literacy, poor internet connectivity, and lack of appropriate devices may create new barriers. Wang et al. (2022) emphasized that digital patient experience is influenced by technological, patient-related, and organizational factors.

Remote patient monitoring may also improve continuity and patient engagement by maintaining communication between patients and healthcare providers. Rhoden et al. (2022) found generally favorable patient satisfaction with remote patient monitoring, while Pannunzio et al. (2024) highlighted the importance of evaluating both patient and healthcare staff experiences. These findings indicate that monitoring is most effective when collected information is appropriately reviewed and followed by timely clinical responses.

Communication and usability were also important determinants of patient satisfaction. Clear explanations, provider responsiveness, simple interfaces, and reliable technology can improve the remote care experience, whereas technical problems and complicated systems may reduce satisfaction. Privacy and security are similarly important because patients need confidence that their personal health information is protected.

An additional issue is the variability in how patient satisfaction and digital experience are measured. Different studies use different instruments and outcome definitions, making direct comparison difficult. Future research should therefore use standardized measures that assess satisfaction together with accessibility, communication, usability, engagement, continuity, and perceived quality.

Overall, remote patient experience services can improve healthcare quality and patient satisfaction when they are patient-centered, accessible, reliable, and supported by effective communication. Remote care should not simply replace face-to-face healthcare but should be appropriately integrated with conventional services according to patients' needs and clinical requirements.

## CONCLUSION

Remote patient experience services can contribute to better healthcare quality and higher patient satisfaction when they are accessible, reliable, patient-centered, and supported by effective communication. Continuous evaluation of patient feedback is important for optimizing these services and improving the overall healthcare experience.

**REFERENCES**

[1] Chagas, M. E. V., Jacovas, V. C., Moreira, T. C., Constant, H. M. R. M., Rohden, S. F., Alves, S. S., Santini, F., Dall'Agnol, S., Klever, E. K., Cabral, F. C., & Terres, M. S. (2024). Are we adequately measuring patient satisfaction with telemedicine? A systematic review with a meta-analysis. Telemedicine and e-Health, 30(6), 1522–1538. https://doi.org/10.1089/tmj.2023.0530

[2] Gleeson, H., Calderon, A., Swami, V., Deighton, J., Wolpert, M., & Edbrooke-Childs, J. (2016). Systematic review of approaches to using patient experience data for quality improvement in healthcare settings. BMJ Open, 6(8), e011907. https://doi.org/10.1136/bmjopen-2016-011907 (DOI)

[3] Guo, Y., et al. (2024). The development of evaluation scale of the patient satisfaction with telemedicine: A systematic review. BMC Medical Informatics and Decision Making, 24, 36. https://doi.org/10.1186/s12911-024-02436-z

[4] Havana, T., Kuha, S., Laukka, E., & others. (2023). Patients' experiences of patient-centred care in hospital setting: A systematic review of qualitative studies. Scandinavian Journal of Caring Sciences, 37(4), 1001–1015. https://doi.org/10.1111/scs.13174 (DOI)

[5] Kim, E. J., Koo, Y. R., & Nam, I. C. (2024). Patients and healthcare providers' perspectives on patient experience factors and a model of patient-centered care communication: A systematic review. Healthcare, 12(11), 1090. https://doi.org/10.3390/healthcare12111090 (PubMed)

[6] Kruse, C. S., et al. (2017). Telehealth and patient satisfaction: A systematic review and narrative analysis. BMJ Open, 7(8), e016242. https://doi.org/10.1136/bmjopen-2017-016242

[7] Kruse, C. S., Krowski, N., Rodriguez, B., Tran, L., Vela, J., & Brooks, M. (2017). Telehealth and patient satisfaction: A systematic review and narrative analysis. BMJ Open, 7(8), e016242. https://doi.org/10.1136/bmjopen-2017-016242

[8] Leonardsen, A. C. L., Hardeland, C., Helgesen, A. K., & Grøndahl, V. A. (2020). Patient experiences with technology enabled care across healthcare settings: A systematic review. BMC Health Services Research, 20, 779. https://doi.org/10.1186/s12913-020-05633-4 (PubMed)

[9] Mair, F., & Whitten, P. (2000). Systematic review of studies of patient satisfaction with telemedicine. BMJ, 320(7248), 1517–1520. https://doi.org/10.1136/bmj.320.7248.1517

[10] Mair, F., & Whitten, P. (2000). Systematic review of studies of patient satisfaction with telemedicine. BMJ, 320(7248), 1517–1520. https://doi.org/10.1136/bmj.320.7248.1517

[11] Mohammed, K., Nolan, M. B., Rajjo, T., Shah, N. D., Prokop, L. J., Varkey, P., & Murad, M. H. (2016). Creating a patient-centered health care delivery system: A systematic review of health care quality from the patient perspective. American Journal of Medical Quality, 31(1), 5–12. https://doi.org/10.1177/1062860614545124

[12] Pannunzio, V., et al. (2024). Patient and staff experience of remote patient monitoring—What to measure and how: Systematic review. Journal of Medical Internet Research, 26, e48463. https://doi.org/10.2196/48463

[13] Pannunzio, V., Morales Ornelas, H. C., Gurung, P., van Kooten, R., Snelders, D., van Os, H., Wouters, M., Tollenaar, R., Atsma, D., & Kleinsmann, M. (2024). Patient and staff experience of remote patient monitoring—What to measure and how: Systematic review. Journal of Medical Internet Research, 26, e48463. https://doi.org/10.2196/48463 (PubMed)

[14] Rhoden, P. A., Bonilha, H., & Harvey, J. (2022). Patient satisfaction of telemedicine remote patient monitoring: A systematic review. Telemedicine and e-Health, 28(9), 1332–1341. https://doi.org/10.1089/tmj.2021.0434 (PubMed)

[15] Rhoden, P. A., et al. (2022). Patient satisfaction of telemedicine remote patient monitoring: A systematic review. Telemedicine and e-Health, 28(9), 1332–1341. https://doi.org/10.1089/tmj.2021.0434

[16] Wang, T., et al. (2022). Digital patient experience: Umbrella systematic review. Journal of Medical Internet Research, 24(8), e37952. https://doi.org/10.2196/37952

[17] Wang, T., Giunti, G., Melles, M., & Goossens, R. (2022). Digital patient experience: Umbrella systematic review. Journal of Medical Internet Research, 24(8), e37952. https://doi.org/10.2196/37952 (PubMed)

[18] Williams, T. L., May, C. R., & Esmail, A. (2001). Limitations of patient satisfaction studies in telehealthcare: A systematic review of the literature. Telemedicine Journal and e-Health, 7(4), 293–316. https://doi.org/10.1089/15305620152814700

[19] Wong, E., Mavondo, F., & Fisher, J. (2020). Patient feedback to improve quality of patient-centred care in public hospitals: A systematic review of the evidence. BMC Health Services Research, 20, 530. https://doi.org/10.1186/s12913-020-05383-3 (Springer)