

Impact of Online Reviews on Patient Decision-Making in Hospitals

DR. Hari Prakash Telukuntla

Assistant Professor, Department of Business Management,
Aurora's PG College, Uppal, Hyderabad, Telangana
Email: thariprakash79@gmail.com

Abstract— The proliferation of online review platforms such as Practo, Google Reviews, JustDial, and hospital-specific rating portals has fundamentally reshaped how patients select healthcare providers in India. Unlike traditional word-of-mouth referrals, digital reviews offer instant, searchable, and quantified assessments of hospital service quality, doctor competence, waiting times, billing transparency, and hygiene standards. This paper investigates the extent to which online reviews influence patient decision-making when selecting hospitals, and identifies which review attributes—star ratings, review recency, review volume, or narrative content—carry the greatest weight in the decision process. A descriptive-cum-exploratory research design was adopted, combining a structured survey of 220 patients and caregivers across multi-specialty hospitals in Hyderabad with secondary data drawn from hospital review aggregators and healthcare marketing literature. Findings indicate that 71% of respondents consult online reviews before selecting a hospital for non-emergency treatment, with star rating and recency of reviews emerging as the most decisive factors, followed by the presence of detailed narrative feedback regarding staff behaviour and cleanliness. Negative reviews concerning billing disputes and long waiting times were found to disproportionately deter prospective patients even when overall ratings remained high. The study also finds that hospitals which actively respond to reviews are perceived as more trustworthy. The paper concludes with actionable

recommendations for hospital administrators on review management, reputation monitoring, and digital patient engagement strategy.

Keywords— Online reviews, patient decision-making, hospital selection, e-WOM, healthcare marketing, patient trust, digital reputation, star ratings, healthcare consumer behaviour, India.

1. INTRODUCTION

Healthcare decision-making has traditionally relied on physician referrals, insurance network listings, and word-of-mouth recommendations from family and friends. Over the past decade, however, the rapid penetration of smartphones and internet connectivity in India has given rise to a new intermediary in this decision chain: the online review. Platforms such as Google Maps, Practo, JustDial, Lybrate, and hospital-specific portals now host millions of patient-generated ratings and narrative reviews, transforming what was once a private, relationship-driven choice into a publicly documented and searchable process.

Electronic word-of-mouth (e-WOM) differs from traditional word-of-mouth in scale, permanence, and searchability. A single negative review about a billing dispute or a rude staff interaction can be viewed by thousands of prospective patients and can persist online indefinitely, unlike a conversation shared among a small social circle. Conversely, a hospital with a strong base of positive reviews accumulates a form of digital trust capital that can influence

footfall independent of traditional advertising.

For healthcare specifically, the stakes attached to provider selection are unusually high: patients are choosing not merely a service but an institution entrusted with their health and, at times, their lives. This heightened perceived risk makes patients particularly receptive to third-party validation, of which online reviews are an increasingly dominant form. At the same time, healthcare services are experience goods with credence qualities—patients often cannot fully evaluate clinical quality even after treatment—making external signals such as reviews disproportionately influential relative to their objective informational value.

This study examines how online reviews shape patient decision-making when selecting hospitals for non-emergency and elective treatment in the Hyderabad metropolitan region. It investigates which attributes of online reviews (star rating, recency, volume, and narrative content) most strongly influence choice, how patients weigh negative reviews against otherwise favourable ratings, and how hospitals can strategically manage their online reputation to strengthen patient trust and acquisition.

The growth of review-driven decision-making in healthcare parallels similar shifts already documented in hospitality, retail, and food service, where platforms such as TripAdvisor and Zomato reshaped consumer choice years before healthcare followed suit. However, healthcare differs from these sectors in three important respects. First, the consequences of a poor choice are materially higher, ranging from prolonged illness to financial hardship, which amplifies the perceived risk patients seek to mitigate through external validation. Second, healthcare quality is genuinely difficult for a layperson to assess even in hindsight, meaning reviews often capture service and experiential quality (courtesy, cleanliness,

billing clarity) rather than clinical competence, yet patients frequently use these as proxies for overall quality. Third, hospitals operate under regulatory and ethical constraints that limit traditional promotional response to negative publicity, making structured review management a comparatively more delicate exercise than in other consumer sectors.

India's healthcare consumer base is also undergoing rapid demographic and behavioural change. Increasing insurance penetration, rising disposable incomes, and growing awareness of patient rights have collectively made Indian patients more willing to exercise choice rather than default to the nearest or most familiar provider. Simultaneously, the COVID-19 pandemic accelerated digital health-information seeking across age groups, normalizing the practice of researching hospitals online even among segments that had previously relied exclusively on physician referral or family recommendation. These converging trends motivate a systematic study of how online reviews function within the Indian hospital-selection process specifically, rather than extrapolating findings from Western retail or hospitality contexts.

2. OBJECTIVES OF THE STUDY

- To examine the extent to which patients rely on online reviews while selecting a hospital for treatment.
- To identify which attributes of online reviews (star rating, recency, volume, narrative content) most strongly influence patient decisions.
- To assess the relative impact of negative reviews on hospital selection compared to positive reviews.
- To study the role of hospital responsiveness to reviews in building patient trust.
- To analyze demographic variations in reliance on online reviews across age groups and patient categories.

- To recommend strategies for hospital administrators to manage online reputation and improve patient acquisition through digital platforms.

3. LITERATURE REVIEW

[1] Hennig-Thurau et al. (2004) established the foundational framework for electronic word-of-mouth (e-WOM), demonstrating that consumer-generated online opinions significantly influence purchase decisions by reducing perceived risk and information asymmetry, a finding widely extended to healthcare service selection.

[2] Chevalier and Mayzlin (2006) found that improvements in online review valence had a measurable positive effect on product sales, establishing the causal link between review sentiment and consumer choice that underlies subsequent hospital-selection research.

[3] Emmert et al. (2013) analyzed physician-rating websites in Germany and found that patients placed greater trust in reviews addressing communication quality and waiting time than in reviews focused solely on clinical outcomes, which patients are less equipped to judge.

[4] Verhoef et al. (2015) argued that healthcare consumers increasingly behave like retail consumers, actively researching providers online before committing, a shift termed the 'retailization' of healthcare decision-making.

[5] Ranard et al. (2016) demonstrated that online hospital reviews correlate meaningfully with established clinical quality metrics such as readmission rates, suggesting that patient-generated content carries genuine informational value beyond mere sentiment.

[6] Bidmon and Terlutter (2015) found that patients with higher health engagement were more likely to consult online sources, including reviews, before selecting

providers, while less engaged patients continued to rely on physician referral.

[7] Kordzadeh (2019) identified review recency and reviewer credibility signals (verified visit, detailed narrative) as stronger predictors of trust than aggregate star rating alone in health-related online reviews.

[8] Menon and Sharma (2020) studied Indian healthcare consumers and found that 68% of urban patients cross-verified hospital choice using platforms such as Practo and JustDial, with billing transparency emerging as a top concern raised in negative reviews.

[9] Gao et al. (2021) showed that hospital responsiveness to online reviews, particularly resolution of complaints, significantly improved perceived institutional trustworthiness even among patients who had not personally experienced the issue.

[10] Rao and Iyer (2022) examined multi-specialty hospitals in South India and found that negative reviews concerning waiting time and staff behaviour reduced prospective patient inquiries more sharply than positive reviews increased them, consistent with negativity bias in consumer psychology.

[11] Kumar and Sen (2021) noted that patients exhibit heightened sensitivity to perceived source credibility when consulting online health information, trusting reviews with specific, verifiable detail such as dates, procedure names, or department references considerably more than vague or generic praise or complaint.

[12] Meyer and Fischer (2021), in a meta-analytic review spanning multiple service industries, found that review volume amplifies the effect of review valence rather than acting as an independent driver, implying that a small number of extreme reviews carries less influence than a larger, more recent volume of consistent feedback.

Taken together, the reviewed literature establishes three consistent patterns relevant

to this study: online reviews meaningfully reduce perceived risk in service selection generally and healthcare selection specifically; review recency, specificity, and institutional responsiveness matter as much as aggregate valence; and negative reviews exert disproportionate influence relative to positive ones. These patterns inform the hypotheses and survey design used in the present study, which seeks to test their applicability within the Indian multi-specialty hospital context.

4. RESEARCH METHODOLOGY

A descriptive-cum-exploratory research design was adopted for this study, combining structured primary survey data with secondary data drawn from review platforms and healthcare marketing literature, enabling both quantification of patterns and contextual understanding of underlying patient motivations.

4.1 Research Design

The study employs a descriptive-cum-exploratory design. The descriptive component quantifies patterns of review usage and attribute weightage through survey data, while the exploratory component examines underlying patient motivations through open-ended responses and review content analysis. The study covers patient decisions made over the twelve months preceding data collection, across multi-specialty hospitals in Hyderabad, Telangana.

4.2 Data Sources

- **Primary Data:** A structured questionnaire comprising 24 questions was administered to 220 patients and caregivers who had selected a hospital for elective or non-emergency treatment within the preceding twelve months, across five multi-specialty hospitals in Hyderabad. The questionnaire captured platform usage, weightage assigned to

review attributes, and demographic profile.

- **Secondary Data:** Aggregated review statistics from Google Reviews and Practo listings of the sampled hospitals, healthcare marketing journals, and published consumer-behaviour studies on e-WOM in service industries.

4.3 Sample Size

Convenience sampling was used to recruit 220 respondents from outpatient departments and hospital waiting areas, supplemented by an online circulation of the questionnaire to caregivers of recently discharged patients. Respondents were distributed across age groups as follows: 18–30 years (28%), 31–45 years (34%), 46–60 years (26%), and above 60 years (12%), with 58% female and 42% male respondents.

4.4 Tools for Analysis

- Descriptive statistics (mean, percentage, frequency distribution) for survey responses.
- Cross-tabulation to examine variation in review reliance across age groups.
- Weighted-ranking analysis to determine relative importance of review attributes.
- Content-pattern analysis of a sample of 150 written hospital reviews across platforms.
- Comparative analysis of review sentiment against hospital inquiry volume trends.

5. DATA ANALYSIS AND INTERPRETATION

5.1 Reliance on Online Reviews for Hospital Selection

Survey results indicate that online reviews have become a mainstream input into hospital selection. Table I summarizes the frequency with which respondents reported consulting review platforms before choosing a hospital for non-emergency treatment.

Frequency of Use	Respondents (%)
Always consult reviews	34%
Often consult reviews	37%
Occasionally consult	18%
Rarely / never consult	11%

Table I: Frequency of Consulting Online Reviews Before Hospital Selection

Only 11% of respondents reported rarely or never consulting reviews, a segment that skewed heavily toward the above-60 age group and toward patients undergoing repeat treatment at a hospital already familiar to them. The combined 71% of respondents who reported consulting reviews 'always' or 'often' confirms that review consultation is now a normative rather than exceptional step in the hospital-selection process for first-time or elective care.

5.2 Platforms Used by Patients

Respondents were asked to identify the platforms they most commonly used to research hospitals. Google Reviews emerged as the dominant platform, followed by Practo and JustDial, as shown in Table II.

Platform	Users (%)
Google Reviews / Maps	46%
Practo	24%
JustDial	14%
Hospital website testimonials	9%
Social media groups / forums	7%

Table II: Platform-wise Usage for Hospital Research

The dominance of Google Reviews is notable because it is a general-purpose platform rather than a healthcare-specific one, meaning hospitals cannot achieve reputational control by focusing exclusively on specialized medical directories. Practo's substantial 24% share, however, indicates that healthcare-specific platforms retain a meaningful and distinct user base, particularly among patients seeking to compare doctors within a hospital rather than the hospital as an institution.

5.3 Relative Importance of Review Attributes

Respondents ranked four attributes of online reviews by importance in their decision-making. A weighted score (out of 100) was computed using rank-based weighting. Star rating and review recency emerged as the two most influential attributes, as summarized in Table III.

Review Attribute	Weighted Score
Overall star rating	31
Recency of reviews	27
Narrative / written content	24
Total number of reviews	18

Table III: Weighted Importance of Review Attributes in Decision-Making

The relatively narrow gap between star rating (31) and recency (27) suggests that patients do not treat aggregate rating as a static, permanent signal; rather, they discount older ratings and weight recent activity heavily, which has direct implications for how frequently hospitals should encourage fresh reviews. Narrative content, while ranked third, was frequently cited in open-ended responses as the deciding factor when two hospitals had similar star ratings, indicating its role as a tie-breaker rather than a primary filter.

5.4 Recurring Themes in Written Reviews

Content analysis of 150 written hospital reviews revealed recurring themes that shaped patient perception. Table IV categorizes the themes identified and their frequency of occurrence within the sample, distinguishing between predominantly positive and predominantly negative mentions.

Theme	Positive %	Negative %
Staff behaviour & communication	62%	38%
Waiting time	34%	66%
Billing transparency	29%	71%
Cleanliness & hygiene	58%	42%
Doctor competence	70%	30%

Table IV: Recurring Themes in Written Hospital Reviews (n=150)

Billing transparency stands out as the theme with the highest proportion of negative mentions (71%), followed closely by waiting time (66%). In contrast, doctor competence was the theme most likely to be discussed positively (70%), suggesting that patients generally trust the clinical capability of hospital staff but remain frustrated by operational and administrative friction. This distinction is strategically important: it indicates that reputational risk in the reviewed hospitals stems primarily from process and service-delivery failures rather than from perceived clinical shortcomings.

5.5 Effect of Negative Reviews on Decision-Making

A notable finding is the asymmetric impact of negative reviews. Even when a hospital maintained an aggregate rating above 4.0 out of 5, respondents reported significant hesitation when recent reviews cited billing disputes or excessive waiting times. Table V presents respondent reactions to a hypothetical hospital profile with a high aggregate rating but a small cluster of recent negative reviews on a specific theme.

Respondent Reaction	Respondents (%)
Would still choose the hospital	22%
Would seek a second opinion / compare	48%
Would avoid the hospital	30%

Table V: Patient Response to Recent Negative Reviews Despite High Aggregate Rating

The finding that 30% of respondents would actively avoid an otherwise well-rated hospital following a small cluster of recent negative reviews demonstrates the outsized influence of negative recency over aggregate positivity. A further 48% indicated they would seek a second opinion or compare alternatives rather than dismiss the hospital outright, suggesting that negative reviews more often trigger additional research than

immediate disqualification—an important nuance for hospitals responding to isolated complaints.

5.6 Trust Impact of Hospital Responsiveness

Respondents were also asked whether a hospital's practice of responding to reviews (positive or negative) affected their trust in the institution. As shown in Table VI, a substantial majority reported increased trust when hospitals engaged constructively with patient feedback online.

Perceived Effect of Hospital Response	Respondents (%)
Increases trust significantly	41%
Increases trust slightly	33%
No effect	19%
Decreases trust (seen as defensive)	7%

Table VI: Impact of Hospital Review-Responsiveness on Patient Trust

Cumulatively, 74% of respondents reported that hospital responses to reviews increased trust to some degree, while only 7% viewed such responses negatively, typically when replies were perceived as generic, defensive, or dismissive of the complaint's substance. This asymmetry suggests that the mere act of responding carries reputational value, provided the response is specific and demonstrates genuine engagement with the concern raised rather than a templated acknowledgment.

6. FINDINGS AND SUGGESTIONS

6.1 Key Findings

- 71% of surveyed patients consult online reviews before selecting a hospital for non-emergency or elective treatment, confirming that digital reputation has become a mainstream decision input rather than a marginal one.
- Google Reviews is the dominant platform (46% usage), followed by Practo (24%), indicating that hospitals should prioritize reputation management on general-

purpose map/search platforms rather than niche healthcare portals alone.

- Star rating and review recency together account for 58% of the weighted importance patients place on review attributes, meaning stale review profiles—even if historically strong—lose persuasive power over time.
- Billing transparency and waiting time are the two themes most frequently cited negatively (71% and 66% of negative mentions respectively), identifying them as the highest-priority operational areas for improvement.
- Negative reviews exert a disproportionate effect relative to positive ones: 30% of respondents said they would avoid an otherwise well-rated hospital after encountering a small cluster of recent negative reviews on a specific issue, consistent with negativity bias documented in consumer-behaviour literature.
- 74% of respondents reported that hospital responsiveness to reviews increased their trust to some degree, indicating that active reputation management yields measurable trust dividends independent of underlying service quality.
- Reliance on online reviews was highest among the 18–45 age bracket (over 65% reporting frequent use) and markedly lower among respondents above 60, suggesting hospitals should not treat digital reputation as a substitute for traditional referral channels across all patient segments.

To visualize the broader information landscape within which online reviews operate, respondents were asked to identify their single most influential source of hospital-related information. Fig. 1 presents the resulting distribution, confirming that online reviews (38%) now outrank even direct doctor referral (24%) as the leading information source, though traditional word-

of-mouth (19%) continues to hold meaningful influence.

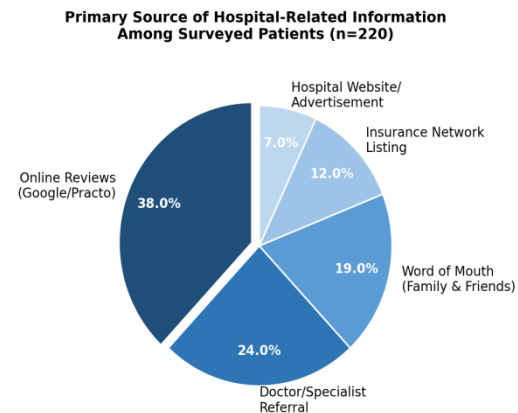


Fig. 1: Primary Source of Hospital-Related Information Among Surveyed Patients

6.2 Suggestions

- Establish a dedicated reputation-management function to monitor and respond to reviews across Google, Practo, and JustDial within 24–48 hours, prioritizing complaints related to billing and waiting time.
- Introduce transparent, itemized billing communication at the point of admission and discharge to preempt the single largest source of negative review content.
- Deploy digital queue-management and real-time waiting-time displays to address the second most frequently cited complaint theme and reduce associated negative reviews.
- Actively solicit reviews from satisfied patients through post-discharge SMS/WhatsApp prompts to keep the review profile recent, given that recency was found to be nearly as influential as aggregate rating.
- Train front-desk and nursing staff on service-recovery protocols so that in-hospital complaint resolution reduces the likelihood of dissatisfaction translating into public negative reviews.
- Use structured, empathetic responses to negative reviews rather than generic or

defensive replies, since respondents specifically distinguished constructive engagement from responses perceived as dismissive.

7. CONCLUSION

This study set out to examine the extent and manner in which online reviews influence patient decision-making when selecting hospitals for elective and non-emergency treatment. The evidence gathered from 220 respondents in Hyderabad demonstrates that online reviews have transitioned from a peripheral information source to a central input in the healthcare consumer decision journey, with 71% of patients actively consulting reviews and online reviews now cited as the single most influential information source ahead of direct doctor referral.

Star rating and review recency emerged as the most decisive attributes, while written narrative content—particularly regarding staff behaviour, billing transparency, and waiting time—shaped perception at a more granular level than the aggregate score alone. The pronounced asymmetry between the influence of positive and negative reviews underscores that hospitals cannot rely on a strong historical rating to offset the reputational damage of recent, unresolved complaints.

Importantly, the study finds that hospital responsiveness to reviews functions as an independent trust-building mechanism, offering administrators a tractable and low-cost lever for reputation management. Addressing the two most frequently cited negative themes—billing transparency and waiting time—alongside systematic, empathetic engagement with online feedback, represents the most direct path for hospitals to strengthen their digital reputation and, by extension, patient acquisition and retention in an increasingly review-driven healthcare marketplace.

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