

Gerry Lynch Memorial Scholarship

Professionalism in Medicine *A Student Perspective*

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Professionalism is a hot topic in medicine today. The importance of medical professionalism has been at the educational forefront since my first day of Memorial University medicine. During our orientation, we had a faculty member speak about professionalism and what it will mean to us as students and future physicians. I had never been formally introduced to the topic prior to this particular speaker. It amazed me that, in the midst of welcoming students and inspirational speeches, there was an introduction to a topic so vital to the medical profession that it was necessary to include on the first day! The sheer notion of this implied an importance that sparked my curiosity and I began to question how the profession has evolved to what it is today.

In a traditionally respected profession such as medicine, why would a topic like professionalism be so relevant today? I would imagine that an orientation to medical school 50 years ago did not begin with a speaker discussing the importance of professionalism. My grandmother talks of a time when the Doctor's word was golden and his actions were miraculous. What has changed so drastically in medicine in the last century?

I believe that the underlying principles of medicine have not changed, but the world in which these principles apply is significantly different. The world today is media-driven and there is an expectation from the public to be fully informed of news worldwide. In our technological era, the media reports stories from the moment they occur and broadcasts them worldwide almost instantly. Unfortunately, media coverage tends to be skewed towards wrongdoings and crime, highlighting the few outliers who have deviated from the norm. We live in a society where scandal is sensationalized. The old adage "it only takes one bad apple to spoil the barrel" can easily be applied to

professionals in today's society. The integrity of an entire profession can be compromised by the mistakes of just a few members. It is up to the remaining members and future physicians to work diligently to ensure that the reputation is properly upheld. These inevitable forces of change in society today create renewed challenges on medicine's commitment to the patient. More than ever, this places the onus on medical professionals to be consistently accountable for their actions and to maintain a dedicated quality of care in which patient needs come first. I believe that it is the responsibility of all physicians to ensure that they maintain professionalism in all of their working relationships and within the realms of community living.

Cruess and Cruess (668) state that public dissatisfaction with current healthcare practices has created a window of opportunity to redefine medicine's contract with society. The challenges facing medicine today have sparked the establishment of "A Physician Charter for Medical Professionalism in the New Millennium"(Brennan 243). This charter was created through the collaborative efforts of international medical organizations (Brennan 243). The charter complements both the Hippocratic Oath and the Code of Ethics to create a guide that places a new emphasis on the philosophical foundations of medicine (Bratulic, 2002). At the core of this charter are three fundamental principles: the principle of primacy of patient welfare, the principle of patient autonomy, and the principle of social justice (Brennan 243). The principle of primacy of patient welfare deals with putting patient needs first. This is increasingly important in today's society where often "bottom-line" business strategies can encroach upon judgment. The doctor-patient relationship is based in trust. In order to maintain this trust, physicians must make patient-care decisions without compromise from external

sources. The second principle of patient autonomy focuses on the importance of patients being fully informed about their healthcare. With proper information, patients can make decisions for themselves based on what options are available. The principle of social justice deals with physician responsibility to ensure every patient has equal access to the necessary health care resources.

From the aforementioned three core principles in the Charter, ten commitments were then established (Brennan 243). These commitments can be considered as a set of professional responsibilities for all physicians to strive to uphold (Brennan 243). As a senior medical student, I believe that to be a true professional in medicine, four focus areas of life must be considered: personal knowledge and skills, physician-patient relationships, interprofessional relationships, and community relationships. These encompass the ten professional responsibilities put forward in the Charter. There is an inherent simplicity in the organization of physician obligations into these four realms of life.

The first focus area in medical professionalism involves a personal commitment to expert knowledge and proficient skills. Medicine is an ever-changing profession, and consequently, physicians must be committed to lifelong learning. Keeping updated with knowledge and skills is essential to ensuring that patients receive the best healthcare possible. The commitment to professional competence states that not only are physicians responsible for ensuring their medical knowledge and skills are maintained, but that there is an obligation for the profession to provide appropriate educational opportunities to help achieve this goal (Brennan 243). Physicians also have a commitment to scientific knowledge (Brennan 243). They have a duty to recognize unanswered questions in

patient populations, promote research, and ensure new knowledge is used appropriately. Patients today are commonly prepared for appointments with a wealth of internet information on their particular condition. Doctors must be knowledgeable to guide their patients with evidence-based information and direct them to credible resources.

The second area of medical professionalism deals with the essence of the physician-patient relationship. This relationship is truly unique and has many intrinsic challenges. Trust is the basis of every good doctor-patient relationship. Sullivan (675) states that “trust is the confidence that physicians will put patients’ welfare ahead of all other considerations.” To enable appropriate healthcare, patients must feel secure that their own best interest is the catalyst of the decision-making process. Physicians have a commitment to honesty with patients (Brennan 243). Patients must be honestly and completely informed so that they may make their own best healthcare decisions. Treatment risks should be discussed with patients and if medical error occurs, the doctor has a responsibility to report that incident to avoid future repetition. The commitment to patient confidentiality is particularly important with electronic health records (Brennan 243). Any breach in confidentiality would destroy the trust-based physician-patient relationship. Caution should be used to ensure that patient information is available only to those directly involved in the treatment program. Physicians also have a commitment to maintaining appropriate relations with patients (Brennan 243). Stemming from the magnitude of trust, there is an inherent vulnerability in the relationship between patient and doctor. Physicians need to recognize this vulnerability to ensure that patients are never exploited for any reason. Secondary to preventing patient exploitation, doctors have a commitment to maintaining trust by managing conflicts of interest (Brennan 243).

Temptations for financial or personal gain constantly threaten the medical professional. Pharmaceutical companies, for example, work to influence the prescribing practices of physicians by sponsoring meals and providing educational trinkets. Doctors must be objective to uncover their own motives. If the patient is not the core of a decision, then that physician should re-evaluate their choice and do what is best for their patient.

The third area of professionalism involves interactions with other healthcare providers. Maintaining good, functional relationships with other healthcare professionals is of utmost importance to providing complete and effective patient care. Mutual respect among professions is essential for open and honest communication. Physicians need to possess the necessary interpersonal skills to interact positively with other doctors and healthcare disciplines. The commitment to improving quality of care deals with the responsibility to constantly seek out more effective methods of patient care (Brennan 243). Physicians have to partner with other healthcare professionals to ensure that patient care is maximized and to help create solutions to problems that may arise. In society today, patients often need coordinated care from their doctor, nurse, physiotherapist, occupational therapist, pharmacist and social worker, for example. It is critical that these disciplines work as a synchronized team to ensure that patient needs are fulfilled as best possible with the use of current knowledge and technology. When a need is recognized as not being adequately met, steps need to be implemented to optimize care for that particular patient and for those who may be in a similar situation in the future. The commitment to professional responsibilities reinforces the importance of collaboration between physicians (Brennan 243). Doctors must be respectful of each other to allow clear communication about patient care. Physicians are also responsible to participate in

the process of self-regulation to ensure that members are maintaining the reputation of the entire profession.

The final focus area of professionalism is community-based. Health is not simply the treatment of disease. The WHO defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (Ustun 802). As a doctor, there is a commitment to improving access to care in a community and a commitment to a just distribution of finite resources (Brennan 243). Physicians must advocate on behalf of their community when relevant healthcare needs are not met. Patients should have equal access to resources regardless of education, laws, finances, geography and social discrimination (Brennan 243). Physicians should be involved in advocating healthy policy for public health and preventative medicine. Furthermore, physicians must realize that their social activities within a community are constantly being scrutinized. This can be particularly challenging in rural communities where patient encounters occur regularly outside clinic appointments. In order for advice to be respected and followed, patients need to see a physician's personal support in that advice. For example, it would be difficult for a doctor to advocate for moderate alcohol consumption when he or she spends every night at the local pub. This is not to say that a physician could never socialize publicly and remain a professional, but rather that as a medical professional, one must make every attempt to maintain personal integrity. Where does the job end and personal life begin? Although often a very slippery slope, this is the very essence of medical professionalism – there is no discrete line. Personal life in the public eye will always be scrutinized. Public accountability is inherent to

medicine, and as a student, I believe that we are guided from day one to strive towards model citizenship.

Looking back on my undergraduate training, I can see that the foundations of medical professionalism were established quite early. To help develop our personal professionalism, we were given an unofficial “code of conduct” on maintaining appropriate demeanor and personal appearance. The necessity of lifelong learning was imparted through the enthusiasm of our faculty in innovative and groundbreaking research. We participated in evidence-based medicine sessions to help decipher which information was pertinent to clinical practice. The importance of establishing and maintaining good patient relationships was absolutely essential to our learning. We began with simulated patient-actor situations and were guided in the art of listening to patients without interruption and remaining nonjudgmental. Gradually we moved to selective patient encounters and then to hospital and clinic encounters during Clerkship. The importance of keeping patient information confidential was stressed even in patient-actor simulations. We were taught to recognize how our own thoughts and motives can affect our decisions. This awareness of the shortcomings innate to human nature will help us to identify and eliminate external influences from patient-care decisions. Throughout the undergraduate program, there were many opportunities to work as a collaborative team with other healthcare providers. We respected classmates, instructors, patients and other healthcare professionals. Professionalism was not so much a specific teaching topic but rather an integral part of every subject. Even in first year anatomy, it was expected that we show respect for cadavers and pathology specimens. I believe that this integration of professional behaviour into all aspects of medical training allows for

an easier transition into real-life patient encounters. Once possessed, characteristics such as compassion, honesty and respect are lifelong. As medical students, it was stressed that our conduct outside of school was a reflection on the entire class. People who deviated from what was expected would have to face the embarrassment of an informal “peer review” where other classmates would voice disapproval. Our class functioned as a group of professionals in-training. In order to maintain the reputation of the entire class, each member had to be accountable for their individual behaviour.

What is the future of the medical profession? I believe that the future looks bright. Medical students and physicians today have an increased awareness of the importance of professionalism. This level of awareness will help to ensure that the integrity in medicine is sustained. Although it may seem to be a daunting mold for future physicians to fill, the fundamental nature of professionalism is an ongoing one. A professional is a person who constantly works to achieve the highest level of effectiveness within their position. Professionalism is a lifelong commitment – not a perfection easily obtained. Inui (2007) stated that “while professional distress is discomfoting, it does also provide a certain fluidity and capacity for change.” This is one of the greatest attributes of medicine - the capacity to change and grow as society evolves. With peer-review and public scrutiny, we can evolve professionally to make certain that mistakes are never repeated. Through professional awareness and directed action, we have the opportunity to make changes towards a better healthcare tomorrow! I look forward to a lifetime in a profession that takes such pride in establishing, maintaining and constantly improving such high standards of patient care.

Works Cited

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