

## **Professionalism for undergraduates medical curriculum**

Professionalism is an important component of medicine's contract with society. There is a rapid change in the concept of the professionalism of a doctor with the times. Previously, doctors were granted autonomy by the community, with the belief that they would place the welfare of their patients before their own. However, in contemporary society, this autonomy has been challenged by the altered public perception of the role of the doctor. Their behavior is now observed and scrutinized more closely by the media. Doctors' own attitudes towards their vocation have also changed.<sup>1</sup>

Though a small minority of professionals exhibit inappropriate professional behavior, they end up with maligning the entire profession. Medical errors, adverse outcomes, malpractice and inappropriate behavior result when doctors do not adhere to guidelines, have difficult workplace relationships, find themselves inadequate in communication, collaboration and transfer of information, or suffer from low morale.<sup>2</sup>

Evidence showed that students who demonstrate unprofessional behavior during their undergraduate training are more likely to be found guilty of unprofessional actions by the monitoring boards after they graduate.<sup>3</sup> Thus, the need to include teaching and assessment of professionalism in the formal curricula for undergraduate and postgraduate medical training has been globally acknowledged.

Currently, the formal education of medical ethics and professionalism is being delivered through the introduction of Behavioral Sciences subject in medical curriculum of 3<sup>rd</sup> year MBBS in Pakistan. It covers the issues of communication, confidentiality, informed consent, privacy, doctor patient relationship and personal moral view on ethical dilemma. This is delivered as didactic lectures in 3<sup>rd</sup> year MBBS. Assessment is done by a written examination, OSPE and Viva voce at the end of year.

It is generally believed that professionalism and ethics are “caught,” and not “taught.” The medical student is generally taught the “right” treatment for the patient and not the “good” treatment. The “good” treatment is where we add patient's values and preferences also into action. Professionalism and ethics were previously diffused passively to the students through “the hidden curriculum.” In hidden curriculum, students learn by watching their teachers, but it leaves a lot to chance.<sup>3</sup>

This is not to reduce the value of the hidden curriculum but to empower it. Moreover, many a time, after becoming an integral part of medical profession, the enthusiasm or gaining further knowledge and skills goes down in physicians. A kind of stagnation develops. This not only hampers growth of the physician but also may prove catastrophic for the patients too. Hence, major focus of any curriculum on professionalism and ethics should be to develop the acumen of “lifelong learner” in the medical graduate, for his self-growth and growth of the society.

For years, the development of professional values in a doctor was taken for granted and it perhaps held true in the earlier apprenticeship model of physician training. With changing models of physician training, this view has changed. As professionalism is so intrinsic and integral to the medical profession, it should be an explicit part of the medical curriculum. It is now globally agreed that professionalism is a core competency for physicians and cannot be left to informal means to be imbibed. It is well known that what is not assessed is not valued by students. Therefore, institutions need to develop written criteria about what needs to be taught and assessed.<sup>4</sup>

It is important for each institution to define professionalism in its own context. The faculty as well as students should have a clear understanding of the traits, characteristics and qualities that contribute to professionalism. A written statement of curricular outcomes, content (such as ethics, decision making/moral reasoning, humanism, empathy, communication), and an explicit list of knowledge, skills and attitudes guards against delivering conflicting messages to students. Developing an institutional curriculum for professionalism with a feasible and acceptable blueprint for teaching-learning and assessments is also likely to instill a sense of ownership in the faculty, and hence facilitate effective delivery of this curriculum.<sup>5</sup>

Medical graduates have to render their duties as per the needs of the patients and the society. Doctor should be well versed with the society cultural values and, various religious activities of the area where he has to work. Doctors are there to serve the ailing society across the board. Wearing of white medical coat should make them proud to serve the humanity. Dedicated faculty can make the difference to inculcate all these humane values in their learners.

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