# PROFESSIONALISM IN MEDICINE

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"A little professionalism, people. When asking a patient to undress, we do not giggle."

#### What is Professionalism in Medicine?

"Professional competence is the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served."

—Epstein and Hundert

For many, medical professionalism is the "heart and soul of medicine." More than the adherence to a set of medical ethics, it is the daily expression of what originally attracted them to the field of medicine – a desire to help people and to help society as a whole by providing quality health care.

- American Board of Internal Medicine Foundation

#### Word Cloud...



#### Table 1. The professionalism requirements of the Accreditation Council for Graduate Medical Education\*

Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. Residents are expected to:

- Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and on-going professional development
- Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities

<sup>\*</sup> Accreditation Council for Graduate Medical Education. General competencies. Chicago: ACGME, 1999. Available at http://www.acgme.org/outcome/comp/compFull.asp#5; accessed August 16, 2006.

#### The Professionalism Charter

(ABIM, ACP, EFIM; 2002)

The fundamental principles of professionalism:

- □ The primacy of patient welfareAltruism, trust, and patient interest
- Patient autonomy

Empower patients to make appropriate medical decisions

□ Social justice

Societal contract and distributive justice

American Board of Internal Medicine Foundation, American College of Physicians–American Society of Internal Medicine Foundation, European Federation of Internal Medicine. Medical professionalism in the new millennium: a physician charter. Ann Intern Med 2002;136(3):243–246.

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> "Heads, you get a quadruple bypass. Tails, you take a baby aspirin."

#### The Professionalism Charter

(ABIM, ACP, EFIM; 2002)

## Table 2. Professional responsibilities defined by the charter on professionalism\*

- Commitment to professional competence
- Commitment to honesty with patients
- Commitment to patient confidentiality
- Commitment to maintaining appropriate relations with patients
- Commitment to improving quality of care
- Commitment to improving access to care
- Commitment to a just distribution of finite resources
- Commitment to scientific knowledge
- Commitment to maintaining trust by managing conflicts of interest
- Commitment to professional responsibilities

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### Challenges

- Negative role models from the media.
- "Hidden curriculum"
  - Acceptance of hierarchy
  - Lost idealism
  - Cynicism
  - Emotional detachment
- Patient empowerment and the "modern patient"
- Sub specialties

Eringing
[professionalism] back
to the forefront is
essential if [doctors]
are going to maintain
the trust and respect
of the public for
whom we serve.

## Moving from values to behaviors

Table 3. Examples of linking professionalism values to specific behaviors\*

Values	Behaviors	
Responsibility	<ul><li>Follows through on tasks</li><li>Arrives on time</li></ul>	
Maturity	<ul> <li>Accepts blame for failure</li> <li>Doesn't make inappropriate demands</li> <li>Is not abusive and critical in times of stress</li> </ul>	
Communication skills	<ul> <li>Listens well</li> <li>Is not hostile, derogatory, sarcastic</li> <li>Is not loud or disruptive</li> </ul>	
Respect	<ul> <li>Maintains patient confidentiality</li> <li>Is patient</li> <li>Is sensitive to physical/emotional needs</li> <li>Is not biased/discriminatory</li> </ul>	

#### How do we teach professionalism?

- Define the characteristics of expected behavior for the institution
- □ Assessment
  - □incorporate expected behaviors into formative and summative evaluations
  - □360 degree evaluations evaluation by peers, nurses, patients and others
- □ Remediation
  - □Early identification, explaining what is expectable and how the student/resident deviated and developing an explicit remediation plan.

#### The NEW ENGLAND JOURNAL of MEDICINE

#### SPECIAL ARTICLE

## Disciplinary Action by Medical Boards and Prior Behavior in Medical School

Maxine A. Papadakis, M.D., Arianne Teherani, Ph.D., Mary A. Banach, Ph.D., M.P.H., Timothy R. Knettler, M.B.A., Susan L. Rattner, M.D., David T. Stern, M.D., Ph.D., J. Jon Veloski, M.S., and Carol S. Hodgson, Ph.D.

- Case control study correlating students' performance in medical school with subsequent unprofessional behavior defined as disciplinary action be a medical board.
- 235 cases vs. 469 control physicians

Table 4. Adjusted Analyses of Medical-School Predictors of Disciplinary Action among 235 Disciplined Physicians
and 469 Control Physicians.*

	Adjusted Odds Ratio		Population Attributable		
Variable	(95% CI)	P Value	Risk (%)		
Male sex	0.8 (0.5–1.4)	0.46			
MCAT z score	0.6 (0.4–0.8)	0.001	1		
No. of medical school courses not passed					
In years 1–2	1.6 (1.2–2.2)	0.004	7		
In years 3–4	1.1 (0.6–1.8)	0.83			
Unprofessional behavior in medical school (overall rating)	3.0 (1.9–4.8)	<0.001	26		

<sup>\*</sup> CI denotes confidence interval, and MCAT Medical College Admission Test.

"The physician professional is defined not only by what he or she must know and do, but most importantly by a profound sense of what the physician must be"

> Jordan Cohen, MD
>  President of the Association of American Medical Colleges