

# Professionalism in Medical Students

Because professional behavior is a crucial characteristic of physicians, UT Southwestern has the responsibility for the education and evaluation of each medical student in this regard. In March of 2000, an ad hoc committee (the committee) was appointed by the Student Promotions Committee (SPC) to review the assessment of professionalism during medical school. This report outlines the recommendations of the committee.

The education of students about professionalism occurs during the Clinical Ethics in Medicine course, during the Clinical Medicine course, and informally throughout all the clinical courses. The committee endorses the following principles:

1. The education of students about professionalism should also involve the **early recognition** of unprofessional behavior throughout all medical school years.
2. If any medical student is accused of unprofessional behavior, there should be a **system for assessment and addressing deficiencies** in professionalism, including monitoring and/or dismissal from the program.
3. Students must demonstrate the acceptable standard of professionalism required of physicians to be eligible to receive the Medical Doctor degree.

## I. Early Recognition of Unprofessional Behavior

Longitudinal perspective of a student's behavior is necessary for the proper assessment of professionalism. Unprofessional behavior can be difficult to recognize during the basic science classes that provide limited faculty-student contact. Although faculty-student contact is more intense during the clinical years, the short rotations often hinder the ability to recognize unprofessional conduct.

For this reason, the committee believes that two new mechanisms should be created. First, **A Clinical Clerkship Director Forum** would be created where directors would meet regularly and be able to informally share information about unprofessional behaviors and students who have demonstrated unprofessionalism to allow the early recognition of unprofessional behavior. Secondly, **A Professionalism Evaluation Form** should be created to document, in as specific and useful manner as possible, the unprofessional behavior in question to be assessed.

### ***A. Creation of a Clinical Clerkship Director Forum***

The clinical clerkship directors should be given full latitude in structuring this forum. The purpose of this forum should be to identify students who demonstrate unprofessional conduct by reviewing the written evaluation of students at the end of each rotation. Since all clerkships already evaluate student for unprofessional conduct, this review will allow the earlier recognition of deficiencies in professionalism that have not been significant enough to warrant a failing grade. Deficiencies in professionalism that result in a failing grade are automatically reviewed by the SPC.

### ***B. Creation of the Professionalism Evaluation Form***

The "UT Southwestern Professionalism Evaluation Form" (PEF) should be adapted from the one used by University of California at San Francisco Medical School<sup>1</sup>. The committee has created a draft of the PEF that has been approved by the medical student class presidents and the SPC (see appendix A). The next step is approval by the dean. Once the PEF is finalized, implementation should involve an announcement to the faculty and students of the availability and use of the form and its implementation in the next academic year. The committee also recommends that the clinical clerkship directors consider revisiting their own evaluation forms to explore how the indicators of professionalism might better interface with the PEF.

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<sup>1</sup> Papadakis MA. A strategy for the detection and evaluation of unprofessional behavior in medical students. *Acad Med* 1999;74:980-990.

### ***C. Creation of a Code of Professional Conduct***

The SPC has approved a code of professional conduct that should be shared with students early in their first year (see appendix B). One suggestion would be to incorporate the acknowledgement of this code during the “White Coat Ceremony” that currently exists in the Spring of the MS1 year. This allows the students to be aware of the behavior expected of them, now that they have entered a school for professionals.

## **II. The System for Assessment**

When a student is felt to demonstrate unprofessional behavior, the student’s evaluating faculty should document a discussion of the issue with the student, usually in the form of a letter. Unprofessional behavior that the evaluating faculty considers sufficiently severe or continued behavior that is felt to be unprofessional must be documented in the PEF.

To make the documentation of such behavior as objective as possible, two faculty members must complete each PEF. One must be the evaluating faculty, which assures accuracy; nurses, students, and patients submit allegations of unprofessional conduct to the evaluating faculty member. The other person completing the PEF must be a faculty member with a broader perspective in terms of student evaluation. This person could be either a course director or an assoc. dean for student affairs. Course directors complete forms when the unprofessional behavior occurred in the context of a course, unless the course director is the observer; in that case, the assoc. deans for student affairs complete forms with the observing faculty.

Once completed, the PEF must be reviewed with the student. After review with the student, the PEF is submitted through the office of student affairs. The office of student affairs will make the judgment when a student’s unprofessional behavior should be brought to the attention of the SPC.

Once a PEF is brought to the attention of the SPC, it will review the PEF to decide two things: 1) whether the report has merit, and 2) whether and in what manner the behavior should be remediated. The SPC may respond to the PEF deemed to have merit by: 1) allowing the student to proceed in the curriculum while on probation for a defined period, 2) requiring the student to repeat a year, and 3) dismissing the student from school, 4) other remedial measures as deemed appropriate under the circumstances.

The procedure for appeals of decisions made by the SPC is described in the UT Southwestern Medical School catalog.

The course directors and/or the associate dean for student affairs may choose to share the PEF with the Clinical Clerkship Director Forum. In addition, the Forum may submit PEFs on students by following the process described above.

## **III. The System for Addressing and Monitoring Deficiencies**

Students are responsible for addressing the deficiencies in their professionalism. The ADSA will be responsible for developing a plan for ongoing feedback to the student and monitoring of the student’s progress.

# Appendix A: Professionalism Evaluation Form

## The University of Texas Southwestern Medical School

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Student name (type or print legibly)

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Course (Dept. and Course no.)

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Course Director or Student Affairs Dean name

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Evaluating faculty name

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Course Director or Student Affairs Dean signature

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Evaluating faculty signature

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Date

*Circle all appropriate categories. Comments are required with specific incidents. Additional pages may be attached.*

1. **Honesty**
  - a. The student participates in scholastic dishonesty.
  - b. The student misrepresents or falsifies actions and/or information.
2. **Confidentiality:** The student repetitively fails to respect confidentiality issues.
3. **Responsibility:**
  - a. The student needs continual reminders in the fulfillment of responsibilities to patients or to other health care professionals.
  - b. The student fails to or refuses to perform assigned tasks.
  - c. The student is frequently late or absent from scheduled rounds or other teaching activity.
  - d. The student repetitively displays an unprofessional appearance.
  - e. The student is resistant or defensive in accepting criticism.
  - f. The student does not acknowledge his/her own inadequacies.
  - g. The student resists considering or making changes.
  - h. The student does not accept blame for failure, or responsibility for errors.
  - i. The student does not recognize when illness or chemical substances impair his/her judgment.
4. **Respect for Others:**
  - a. The student is disruptive in an educational environment.
  - b. The student inadequately establishes rapport with patients or families.
  - c. The student is often insensitive to the patients', families', colleagues, and/or members of the healthcare team's feelings, needs, or wishes.
  - d. The student engages in inappropriate relationships with their patients or members of their families.
  - e. The student is abusive or critical during times of stress.
  - f. The student demonstrates arrogance.

Please provide details and specific examples of all items listed above (use additional pages, if necessary)

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## **Appendix B: Medical Student Code Of Professional Conduct**

As a student at the University of Texas Southwestern School of Medicine, I understand that it is a great privilege to study medicine. Over the course of my training, I will assume extraordinary responsibility for the health and well-being of others. This undertaking requires that I uphold the highest standards of ethical and compassionate behavior. Accordingly, I have adopted the following statement of principles to guide me throughout my academic, clinical, and research work. I will strive to uphold both the spirit and the letter of this code in my years at UT Southwestern and throughout my medical career.

### **HONESTY**

- I will maintain the highest standards of academic honesty.
- I will neither give nor receive aid in examinations or assignments unless the instructor expressly permits such cooperation.
- I will be truthful with patients and will report accurately all historical and physical findings, test results, and other information pertinent to the care of the patient.
- I will conduct research in an unbiased manner, report results truthfully, and credit ideas developed and work done by others.

### **CONFIDENTIALITY**

- I will regard confidentiality as a central obligation of patient care.
- I will limit discussions of patients to members of the health care team in settings removed from the public ear (e.g., not in elevators, hallways, cafeterias).
- I will be truthful with patients and will report accurately all historical and physical findings, test results, and other information pertinent to the care of the patient according to the patient's wishes.

### **RESPECT FOR OTHERS**

- I will uphold a classroom atmosphere conducive to learning.
- I will treat patients and their families with respect and dignity both in their presence and in discussions with other members of the health care team.
- I will interact with patients in a way that ensures their privacy and respects their modesty.
- I will interact with all members of the health care team in a considerate and cooperative manner.
- I will not tolerate discrimination on the basis of race, gender, religion, sexual orientation, age, disability, or socioeconomic status.
- I will judge my colleagues fairly and attempt to resolve conflicts in a manner that respects the dignity of every person involved.

### **RESPONSIBILITY**

- I will set patient care as the highest priority in the clinical setting.
- I will recognize my own limitations and will seek help when my level of experience is inadequate to handle a situation on my own.
- I will conduct myself professionally - in my demeanor, use of language, reliability, and appearance - in the presence of patients, in the classroom, and in health care settings.
- I will not use alcohol or drugs in any way that could interfere with my clinical responsibilities.
- I will not use my professional position to engage in romantic or sexual relationships with patients or members of their families.

### **EXPECTATIONS OF FACULTY, RESIDENTS, AND FELLOWS**

- I have the right to request clarification regarding assignments and examinations, as well as to raise concerns regarding the appropriateness of a testing environment pursuant to student grievance procedures.
- I cannot be compelled to perform procedures or examinations which are unethical or beyond the level of my training and I have the right to raise such concerns or complaints pursuant to student grievance procedures..

- I have the right not to be harassed and not to be subjected to romantic or sexual overtures from those who are supervising my work and to utilize university policy to address any such concern or complaints.
- I have the right to be challenged to learn, but not to be abused and to raise concerns/complaints pursuant to student grievance procedures.