MD: Professionalism

Preamble

Medicine is one of the oldest of the learned professions. A professional is one who is in command of a specialized body of knowledge and skills, and is given specific rights not typically allowed to the public. Along with those rights, the professional has specific responsibilities or duties not generally expected of the public.

The singularity of medicine is that it deals with human health. Patients are potentially at their most vulnerable when establishing a relationship with a physician. That the patient's relationship with their physician involves a dependency that encompasses life and death adds further to the uniqueness of this relationship.

The label of professional is not a right but must be earned. The special contract physicians have with society has professionalism as its foundation. Professionalism consists of fundamentally important qualities including altruism, compassion and empathy, respect for patients and health care workers, commitment to ongoing excellence, honesty, trustworthiness, integrity, accountability, recognition of limits, collaboration, and duty to society.

Professional development is an ongoing process at all levels of training and practice. The purpose of this document is to outline those elements of professionalism expected of our medical students. It is not meant to be all-encompassing, providing exact guidelines for all possible situations. While this document was developed with medical students in mind, it is generally applicable to all medical professionals.

The goal of the Washington University Medical Center is to provide patient care, medical education, and biomedical research of the highest quality. Accomplishing this goal depends in part, also, on an atmosphere of mutual respect and collegiality among all those who work and study here. This document focuses on the special issues presented by the teacher/learner relationship, as well, and applies to all years of the medical school curriculum.

Guiding Principles of Professionalism

Professional Responsibility

1. Students have a responsibility to actively participate in their education and to work to improve the educational environment for future students.

2. Students should have a willingness to pursue lifelong, self-directed learning, which is an essential attribute of any professional.

3. Students should act responsibly in their personal and academic lives with regard to meeting deadlines, financial obligations and other comparable responsibilities.

4. Preparation for class and during clinical rotations sets a good example for peers, maximizes every student's learning opportunity, and demonstrates respect for the teachers and peers.
   a. Respecting one's peers in a classroom or in the hospital setting includes behaviors such as arriving on time, exhibiting respectful body language, listening attentively, turning off cell phones and allowing all present to engage in discussion.

5. Students should report to the appropriate supervisor potentially serious errors that others have committed.

6. Students should contribute to their community.
   a. Students are encouraged to participate in the first- and second-year teaching groups.
   b. These provide a service to the larger St. Louis community, while teaching students how to communicate with people of diverse backgrounds.
   c. Students are encouraged to serve at the Saturday Neighborhood Health Clinic and other community service and teaching activities.

7. Students should be aware of the larger social and economic context in which disease occurs, and take advantage of opportunities to deepen their knowledge about this topic.

Competence and Self-Improvement

1. In order to function at the expected level, students should attend to their own physical and emotional health.
   a. The experience of being a medical student can be physically and emotionally challenging. Students need to be able to identify when they are overwhelmed to the point where they may not be able to function appropriately. Students are encouraged to seek educational assistance and/or the emotional support of others in these instances.

2. Recognizing and admitting errors in patient care are key to being a good physician.
   a. Students should view mistakes as part of learning. Assuming responsibility for mistakes is critical for professional development.
   b. Developing productive strategies for dealing with mistakes and non-confrontational ways of correcting them is essential.

3. Feedback, advice and criticism from residents, fellows and faculty fosters personal and professional development, and should be taken in the context of mentoring.
a. Students should assume that opinions of their faculty/residents/fellows that may seem unclear are usually solidly founded, and accept feedback regarding their performance openly and maturely from individuals more experienced than they.
b. Students should provide suggestions and examples for improving the mentoring environment by forthrightly evaluating their instructors.

4. Students should identify and correct errors in patient care as soon as possible or notify those who can correct it.

5. Students should balance personal and professional interests.
   a. Students should not over-commit.
   b. Students should communicate schedule conflicts to course directors, lecturers, and/or house staff.

Respect for Others and Professional Relationships

1. Students should conduct themselves with manners and consideration of all others, and be respectful of others' time.

2. While individual effort is important in developing a medical knowledge base, much of what students learn in medical school will depend on a collaborative effort with their peers.
   a. From the first day of medical school, students should encourage each other and collaborate with their peers when appropriate in the learning environments of lectures, small group discussions, and lab sessions. In doing so, they are laying the foundation for the truly collaborative nature of medicine.
   b. During the clinical years, students should understand that their peers are a valuable resource. Likewise, a student should assist peers in patient care responsibilities.
   c. In all cases, students should respect the work and learning opportunities of their classmates and they should share educational opportunities with their peers. Professional behaviors include listening to other’s presentations, and encouraging others’ opportunities to present, ask/answer questions, admit patients, participate in surgical cases/procedures, or perform duties.

3. Respect for the ethnic and cultural diversity of classmates provides for a more nurturing environment for all.
   a. Students should be aware that their classmates come from a wide variety of religious and ethnic backgrounds and that they will have differing lifestyles and viewpoints. This diversity is an important resource in our community, contributing to the personal and professional growth of all.
   b. Students should be sensitive to the importance of these issues and should seek opportunities to enhance appreciation of multiple cultures through dialog, educational opportunities, etc.

4. Students should be supportive of peers during difficult times in their personal and professional lives.
   a. Students must appreciate that their peers may have issues in their personal or professional lives (e.g., family, medical, academic, or administrative problems) that may affect their interactions with others. In these circumstances, students should make every attempt to be sympathetic and to offer their support to those students.

5. Participation and teamwork enhances the educational experience.
   a. The learning process is a partnership between students and faculty. Students should actively participate in this partnership by providing feedback to professors by way of evaluations and surveys.
   b. Contributing to the overall functioning of the team maximizes both learning and patient care in the clinical setting.

6. Understanding the appropriate venues for feedback to house staff/fellows/faculty is critical to successfully resolving conflicts. Students should be aware of the hierarchy of the team, and appropriate mechanisms for handling disagreement with faculty/residents/fellows. Conflicts can be translated into productive outcomes if handled appropriately. For additional helpful information, reference the university Code of Conduct (https://universitycompliance.wustl.edu/code-of-conduct/).

7. Maintaining a professional relationship with teachers (including faculty/residents/fellows and TAs) is important, especially during times when these teachers are in a position to grade or evaluate the student.
   a. Students should avoid behaviors that could potentially be construed as attempting to influence the faculty, for example running personal errands.
   b. The university has specific codes and regulations regarding romantic relationships between a student and a teacher, including faculty/resident/fellows outlined in the Consensual Relationships Policy (https://hr.wustl.edu/items/consensual-relationships/). Students engaged in such relationships should review these codes and avoid any situation that can cause potential conflict of interest in the academic setting.

8. Patients should be treated as individuals in the context of their family, culture and community. Personal bias should be subordinated when possible to further the therapeutic relationship.
a. Use of offensive language or gestures is unacceptable.

b. At times, some religious beliefs will require the use of alternative care approaches.

c. Students, like practicing physicians, should not refuse to participate in the care of a patient with a communicable disease unless this represents a meaningful threat to the student's own health. In contrast, a student who is verbally or physically threatened by a patient may ask to be excused from care of that patient.

9. Students should treat hospital staff with appreciation and respect as they are vital members of the health care team.

Honesty and Integrity

1. Student work should be original.
   a. Only authorized resources should be used during examinations, quizzes or graded course work. WUSM has a zero tolerance policy for plagiarism (https://studentconduct.wustl.edu/academic-integrity/).
   b. When students are aware that a classmate has submitted work that is not their own (cheated), they should discuss this situation with the course director and/or the associate dean for student affairs.

2. Students must respect patients' rights and maintain confidentiality, in accordance with HIPAA guidelines.
   a. Students should be ever aware that patients are ill and have the right to refuse care, particularly when poorly provided.
   b. Patient information should only be discussed with appropriate people at appropriate times.
   c. Patient records should not be photocopied carelessly or removed from appropriate areas.
   d. Patient information should be disposed of appropriately to prevent careless transmission of patient information.

3. Students should clearly communicate their abilities and level of training to patients.
   a. If a student does not know the answer to a patient's question, it is the student's responsibility to admit this lack of knowledge.
   b. Even if other members of the health care team introduce students to patients as "doctor," the student should never do so as it leads to a false perception of expertise on the patient's part.
   c. Students should always be truthful with the house staff and other medical staff in terms of patient care and never compromise patient care as a consequence of personal gain.

4. Students should not participate in any aspect of patient care if under the influence of a substance that may compromise the student's judgment or otherwise cause the patient harm. Likewise, students should report any member of the health care team who may be participating in patient care while under the influence of a judgment-impairing substance.

5. Any student who is impaired by physical or psychological illness should excuse themselves from patient care responsibilities, and should also respect recommendations to do so from colleagues or supervisors.

6. Although students are often tired or under stress, they should attempt to maintain an appropriate level of composure at all times.

7. Students should be appropriately attired for all patient care duties.

8. Students should carefully consider their participation in benefits provided by pharmaceutical companies or other medically-related businesses.

9. Students should respect the laws of federal, state and local governments in both professional and private life.

Transportation Policy for Medical Students on Clinical Assignments

Background

The primary goal of the medical program at Washington University School of Medicine is to provide the highest quality education possible to its students resulting in the development of competent and caring physicians. Among the core curricular activities necessary to accomplish this are intensive and meaningful patient care rotations. Though most clinical assignments will be located on the Barnes-Jewish Hospital/Washington University campus, some required clinical assignments are located off campus. In keeping with LCME standards 5.5 and 6.4, this is to ensure appropriate resources for clinical instruction in both ambulatory and inpatient settings with adequate numbers and types of patients.

Policies

A listing of clinical rotations requiring transportation will be available to students. This list will be updated annually by the Office of Medical Student Education (OMSE). All students are required to make themselves aware of these rotations well in advance so that they are familiar with travel requirements. Gas, mileage, parking fees, and ride or public transportation fares are not reimbursed by the school.

In order to more equitably distribute both on and off campus assignments, a system for centrally monitoring students' travel for off-campus clinical assignments will be available to clinical course directors and will be overseen by the Clinical Curriculum Committee (CCC). When applicable, students will have the opportunity to submit their ranked choices for clinical assignments in advance. A record of student choice with subsequent alignment and nonalignment with clinical assignment will be included in this system.
Medical students will be required to travel to off-campus clinical rotations when these are assigned by the clinical rotation course director. In order to avoid inequitable distributions of these assignments, a student’s stated lack of access to a private vehicle should not be considered in and of itself when creating these assignments. Students who do not have access to a private vehicle will consult the “Guidelines” section of this policy item for recommended options.

If a student believes that they have been unfairly assigned, they should discuss it first with the clinical course director. If the issue is not resolved to satisfaction, they may approach the Assistant Dean for Curriculum and Clinical Sciences with their concerns.

**Guidelines**

Clinical course directors should consider a student’s current choice for assignment in the context of the degree to which their prior choices aligned with prior assignments. Clinical course directors should work to accommodate students who indicate a preference for a particular off-campus assignment as opposed to one that is on site.

Course directors should be aware of the significant amount of time incurred by students who are assigned off site in their commutes to and from campus when scheduling required learning activities on campus. When available, telecommunication strategies should be used as a way to mitigate this burden. Clinical courses that require a subset of enrolled students to travel to off-campus assignments are encouraged to consider changes in scheduling that compensate for the lost travel time.

Students without direct access to a car are advised of the following options for travel. These may include carpooling, ride services (e.g., taxi, Uber, Lyft), public transportation, rental car service, or biking/walking. Mutually acceptable trades in clinical assignments between peers can be considered at the discretion of the clinical course director, although there are no guarantees that these can always be accommodated.

*The Washington University School of Medicine Transportation Policy for Medical Students on Clinical Assignments was last approved by the Committee on the Oversight of Medical Student Education on April 6, 2020. All substantive edits to this policy require approval by the Committee on the Oversight of Medical Student Education.*

**Related Policies**

Washington University Abusive Conduct Policy (https://hr.wustl.edu/items/abusive-conduct-policy/)
Washington University Diversity Bias Report Form (http://diversity.wustl.edu/students/mosaic/bias-report-support-system/bias-report-form/)
Assessing Academic Achievement & Professionalism (MD Program) (http://bulletin.wustl.edu/medicine/policies/md-assessment/)