Medical Professionalism in Emergency Medicine Graduate Medical Education

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Objectives

- To identify and describe ACGME/RRC residency curriculum changes addressing ethics and professionalism
- To discuss and analyze representative curriculum cases and the application of the curriculum changes
- To understand and integrate various aspects of Professionalism and their integration into the EM curriculum

Introduction

While professionalism has been a valued constituent in medicine throughout the ages, it carries added significance in modern medicine, in times of greater patient expectations, increased legal and regulatory requirements, increased burdens of medical documentation, financial and reimbursement issues, and increased time pressures. These strains on the modern physician make an understanding of professionalism and its applications essential to the successful and ethical practice of medicine.

Professionalism is a term which embodies numerous qualities of physicians as public servants. Professionalism has been described by The American Board of Internal Medicine as “constituting those attitudes and behaviors that serve to maintain patient interest above physician self-interest.” Professionalism has also been described as “a structurally stabilizing, morally protective force in society.” Professions have been recognized as consisting of three essential characteristics: expert knowledge, self-regulation, and a fiduciary responsibility to place the needs of the client ahead of the self-interest of the practitioner. The concept of Professionalism includes such values as honesty, altruism, service, commitment, suspension of self-interest, commitment to excellence, communication, authority, and accountability. Recent changes in graduate medical education curriculum have focused on the importance of teaching ethics and professionalism to physicians in training.

Rapid advances in technology have the potential to have great impact on education. Many educational sessions can be enhanced, in educational and entertainment value, by the use of multimedia technology. However, technology is not a substitute for preparation and adequate knowledge base of the instructor, or for attention and learning effort on the part of the student.
Highlights of ACGME Program Requirements Relating to Ethics and Professionalism

Professionalism

Residents should be taught the fundamental qualities of professionalism in emergency medicine. These include:

a. Provision of compassionate emergency medical care with the best interest of the patient as the focus of decision making;

b. Respect, regard, integrity, and a responsiveness to the needs of patients and society that supersedes self-interest, that assumes responsibility and acts responsibly, and that demonstrates commitment to excellence and ongoing professional development;

c. Commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices; and

d. Sensitivity and responsiveness to cultural differences, including awareness of their own and their patients’ cultural perspectives.

Interpersonal Skills and Communication

Residency programs must ensure that residents develop appropriate communication skills to effectively create a therapeutic relationship with patients, to educate and provide useful information to patients and families, and to work collaboratively in health care teams for the benefit of their patients.

Evaluation of Residents

At least semiannually, there must be an evaluation of the knowledge, skills, and professional growth of emergency medicine of each resident, using appropriate criteria and procedures.

For additional details, see: www.acgme.org/req
Appendix 2. Other Components of the Practice of Emergency Medicine

Contract Principles
Financial Issues
Operations
Performance Improvement
Pre-Hospital Care
Professionalism
Systems-Based Management
Communication and Interpersonal Issues
Research
Risk Management, Legal, and Regulatory Issues

Professionalism
Death in ED
Ethics
Impairment
Leadership (Leading, Directing and Mentoring)
Personal Well-being
Professional Development and Learning

Communication and Interpersonal Issues
Complaint Management
Conflict Resolution
Interdepartmental and Medical Staff Relations
Team Building
Teaching

For details, see: www.acep.org
**Medicine is, at its center, a moral enterprise grounded in a covenant of trust.**

- Patient-physician covenant, JAMA, 1995 -

Characteristics of the patient

- Ailing
- Dependent
- Incapacitated
- Vulnerable
- Uninformed
- Reliant
- Disadvantaged

Characteristics of the Ideal Physician

- Skilled
- Compassionate
- Trustworthy
- Honest
- Supportive
- Communicative
- Humble

Patient complaints about physicians

- Lack of compassion
- Lack of warmth
- Lengthy waiting times
- Failure to explain things adequately
- Failure to spend adequate time

Patient complaints about physicians

- Lack of compassion (JAMA, 1927)
- Lack of warmth (1960)
- Lengthy waiting times (1960)
- Failure to explain things adequately (1996)
- Failure to spend adequate time (1996)

What is Professionalism?

- “Those attitudes and behaviors that serve to maintain patient interest above physician self-interest”
- (ABIM, 1995)

**Medical Professionalism:**
- “a set of values, attitudes, and behaviors that result in serving the interests of patients and society before one’s own”
- (Ann Intern Med 1991)
“Let his disposition be that of a man of honor, let him behave to all honorable men win a friendly and easy spirit.”

(Hippocrates)

Elements of Professionalism
- Suspension of self-interest
- Honesty
- Technical competence
- Authority
- Accountability
- Communication
- Justice
- Humility

Suspension of self-interest
- Necessary to serve patient’s interests
- Patient-physician interaction should take priority over economic gain, personal pleasure, or egotistical endeavors

Questions
- Is the physician obligated to stay late if patients request it?
- Is the physician obligated to skip meals if there is work to do?
- Is the physician obligated to endure physical or verbal abuse from patients?

Honesty
- With patients
- With staff
- With colleagues
- With organizations
- “Therapeutic privilege”: full disclosure may be deemed unnecessary in certain cases

Questions
- Is the physician ever justified in lying to a patient?
- Is the physician always obligated to reveal the whole truth to patients?
- If faced with a dilemma about protecting the patient’s interest, and honesty to an organization, which takes precedence?

Technical Competence
- The most essential element of Professionalism.
- Dedication to lifelong learning
- Willingness to utilize additional resources as indicated
Authority
- Authority to make medical decisions
- Authority to lead team members effectively
- Appropriate use of authority to serve patients
- Avoid misuse of power

Respect for Autonomy
- Patients have the right to make their own decisions
- May be counter to paternalism
- Dependent on the determination of capacity

Assessing Competency
- Mental status
- Mental abilities
- Understanding of diagnosis
- Understanding of proposed treatment
- Understanding of alternatives
- Ability to verbalize reasons for decision

Accountability
- Responsibility for decisions
- Responsibility for actions
- Responsibility for outcomes (to some degree)

Communication
- Attentiveness
- Eye contact
- Seated position, when possible
- Empathy
- Duty to communicate with family and friends, when appropriate

Breaking Bad News
- Give advance warning
- Utilize a private, quiet setting
- Spend adequate time
- Use clear and succinct language
- Use proper names of patients
- Accept any reaction as normal
- Attempt to resolve guilt feelings
- Use additional consultants and resources

Justice
- Equitable distribution of health care resources
- Cost-effective medical practices
- Stewardship of health care resources, locally, and globally
Humility
• Recognition of insufficiencies in knowledge or technical expertise
• Utilization of resources (information, consultants, referrals)

Barriers to Professionalism in Modern Medicine
• Time constraints
• Financial constraints
• Higher expectations of patients and families
• Medicolegal concerns
• Federal, state, and institutional laws, policies, and guidelines

Issues with Minors
• Consent for treatment
• Confidentiality
• Drug and alcohol screening
• Pregnancy and STDs

The Difficult Patient
• Intoxication
• Drug influences
• Altered mental status
• Refusal of treatment
• Demanding specific treatment
• Psychiatric patients

Confidentiality: Pitfalls
• Conversations with colleagues
• Telephone inquiries
• Medical records
• Computerized information
• Wall charts
• **Remediation of Residents**
  1. Selection of resident candidates
  2. Modeling among faculty
  3. Teaching of professional skills – didactic and mentoring
  4. Evaluation of professionalism skills
  5. Feedback
  6. Concrete goals and expectations
  7. Concrete consequences of failure to improve
  8. Follow-through of consequences, both positive and negative

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“We are here not to get all we can out of life for ourselves, but to try to make the lives of other happier. It is not possible for anyone to have better opportunities to live this lesson than you will enjoy. The practice of medicine is an art, not a trade; a calling, not a business; a calling in which your heart will be exercised equally with your head.”

*Sir William Osler*
Sample Resident Evaluation Items Relating to Professionalism

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1. Provides empathic patient care
2. Possesses appropriate fund of knowledge
3. Applies knowledge through sound clinical judgment
4. Possesses appropriate technical expertise with diagnostic and therapeutic procedures
5. Communicates effectively with patients, families, and staff
6. Shows appropriate sensitivity and responsiveness to individual patient differences, including culture, ethnicity, age, gender, and disabilities.
7. Is honest in dealings with patients and colleagues
8. Demonstrates appropriate accountability for actions
9. Exhibits appropriate conflict resolution skills
10. Complies with regulatory, institutional, and departmental policies
11. Demonstrates exemplary work ethic and commitment to quality patient care
References


www.acep.org

www.acgme.org/req

www.saem.org