Professionalism

Theory/Concepts/Rationale

1. American Board of Internal Medicine Foundation, American College of Physicians, European Federation of Internal Medicine. Medical professionalism in the new millennium: a physician charter. Ann Intern Med 2002;136:243-6.
Professionalism is described in terms of the principles on which it is based and the professional responsibilities it engenders.

2. Gruen RL, Arya J, Cosgrove EM, Cruess RL, Cruess SR, Eastman AB, et al. Professionalism in surgery. J Am Coll Surg 2003;197:605-8.
This paper describes the meaning of professionalism for surgeons.

3. Hauck FR, Zyzanski SJ, Alemagno SA, Medalie JH. Patient perceptions of humanism in physicians: effects on positive health behaviors. Fam Med 1990;22:447-52.
The results of this study indicate that patients who perceive their physician as being humanistic are more likely to engage in positive health behaviors.

4. Hickson GB, Federspiel CF, Pichert JW, et al. Patient complaints and malpractice risk. JAMA 2002;287:2951-7.
This study indicates that physicians' unprofessional behavior is related to subsequent litigation.

5. Pellegrino ED. Professionalism, profession and the virtues of the good physician. Mt Sinai J Med 2002;69:378-84.
In this article, the author discusses the moral dimensions of professionalism and suggests that virtue can be taught.

6. Surdyk PM, Lynch DC, Leach DC. Professionalism: identifying current themes. *Current Opinion in Anaesthesiology* 2003;16:597-602.
The writers discuss the five relationships through which professionalism is manifested and summarize developments in fostering medical professionalism.

Teaching-Learning

7. Brownell AKW, Cote L. Senior residents' views on the meaning of professionalism and how they learn about it. Acad Med 200l;76:734-7.
Residents describe professionalism and report learning most about it from observing role models.

8. Culhane-Pera KA, Reif C. Ramsey's five levels of cultural competence: conceptualizing Bennett's model into curricular objectives for multicultural medical education. Annals of Behavioral Science and Medical Education 2003;9:106-13.
The writers present their multicultural curriculum in terms of its theoretical framework, goals and objectives, and how it is integrated into residents' daily activities.

9. Ginsburg S, Regehr G, Lingard L. To be and not to be: the paradox of the emerging professional stance. Med Educ. 2003 Apr;37(4):350-7.
This study explores professional lapses and how learners respond to these situations.

10. Gordon J. Fostering students' personal and professional development in medicine: a new framework for PPD. Med Educ. 2003 Apr;37(4):341-9.

The author describes a framework for fostering professionalism that addresses cognitive, affective and metacognitive processes.

11. Klein EJ, Jackson JC, Kratz L, et al. Teaching professionalism to residents. Acad Med 2003;78:26-34.
A curriculum for teaching professionalism to pediatric residents is described.

12. Larkin GL. Mapping, modeling, and mentoring: charting a course for professionalism in graduate medical education. Camb Q Healthc Ethics 2003;12:167-77.
Practical suggestions for developing and implementing a GME professionalism curriculum are presented.

13. Markakis KM, Beckman HB, Suchman AL, Frankel RM. The path to professionalism: cultivating humanistic values and attitudes in residency training. Acad Med 2000;75:141-50.
This multi-component curriculum includes case conferences that address challenging psychosocial issues in patient care, a mentor program, and a resident-support group.

14. Rosenfeld JC. Utilizing community leaders to teach professionalism. Current Surgery 2003 March/April;60(2):222-224.
The writer describes how community leaders teach professionalism to surgery residents.

Assessment

15. Arnold E, Blank L, Race K, Cipparrone N. Can professionalism be measured? The development of a scale for use in the medical environment. Acad Med 1998;73:119-21.
Development and implementation of an instrument to assess professionalism in the educational environment are described.

16. Arnold L. Assessing professional behavior: yesterday, today, and tomorrow. Acad Med 2002;77:502-15.
The writer reviews techniques that have been used to assess medical professionalism and suggests system-level approaches to improvement.

17. Barry D, Cyran E, Anderson RJ. Common issues in medical professionalism: room to grow. Am J Med 2000;108:136-42.
This paper reports the results obtained from a vignettes-based professionalism assessment.

18. Butterfield PS, Mazzaferri EL. A new rating form for use by nurses in assessing residents' humanistic behavior. J Gen Intern Med 1991;6:155-61.
The writers describe an instrument that nurses have used to assess resident professionalism.

19. DeHaes J, Oort F, Oosterveld P, ten Cate O. Assessment of medical students' communicative behaviour and attitudes: estimating the reliability of the use of the Amsterdam Attitudes and Communication Scale through generalisability coefficients. Patient Educ Counsel 2001;45(1):35-42.
An instrument that has been used to directly observe and assess professionalism is described.

20. Ginsburg S, Regehr G, Hatala R, McNaughton N, Frohna A, Hodges B, et al. Context, conflict, and resolution: a new conceptual framework for evaluating professionalism. Acad Med 2000;75(10 suppl):S6-11.

Approaches to assessing professionalism are reviewed in terms of types of assessors and conceptual issues pertinent to assessing professionalism are presented.

21. Gordon J, Assessing students' personal and professional development using portfolios and interviews. Med Educ. 2003 Apr;37(4):335-40.
The author describes the use of a portfolio and interview to ascertain student progress in a personal and professional development course.

22. Hall MA, Zheng B, Dugan E, Camacho F, Kidd KE, Mishra A, et al. Measuring patients; trust in their primary care providers. *Med Care Res Review* 2002; 59:293-318.
The measurement characteristics of the Wake Forest Physician Trust Scale are described.

23. Musick DW, McDowell SM, Clark N, et al. Pilot study of a 360-degree assessment for physical medicine & rehabilitation residency programs. Am J Phys Med Rehabil 2003;82:394-402.
This article indicates that it is feasible to use a 360-degree evaluation to assess resident physician professionalism and reveals variables that can bias assessment.

24. Stern DT. Values on call: a method for assessing the teaching of professionalism. Acad Med 1996;71(10 suppl):S37-9.
An approach to directly observing and analyzing professionalism in the educational environment is described.