

The Practice of Medical Ethics and Professionalism of Recent Medical Graduates in Internal Medicine Wards in Bangladesh

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Abstract:

Background: Medical education is continuously changing aiming to produce physicians who will be ethical and professional in their practice. However, we do not know about our future physicians, the recent medical graduates, what extent they are practicing medical ethics and professionalism in their daily life. The current study was conducted to assess the practice of medical ethics and professionalism of recent medical graduates in Internal Medicine Wards in Bangladesh. The findings of the study will help to enhance medical ethics and professionalism practice.

Materials and Methods: In this qualitative research study, 31 recent medical graduates were included from Internal Medicine ward to observe practice and 308 recent medical graduates to conduct opinion survey. An observational check list and a semi-structured questionnaire were used to collect data from 7 medical colleges under 4 universities in Bangladesh from January '18 to June '19.

Results: Thirty one (31) recent medical graduates were observed for practice, of whom 54.8% were male. The recent medical graduates re-assessed the history, performed proper physical examinations and asked about laboratory investigations in 71.3%, 83.1% and 80% of previously admitted patients. The mean daily follow up time spent per patient was 5.5 minutes. During receiving 133 newly admitted patients recent medical graduates sought permission in 88%, listened carefully in 88.7%, took history properly in 62.4%, give sufficient time in 63.2%, completed history writing in 66.9%, avoided abuse of voice in 86.5% and responded the patient's questions in 67.7% cases. They used folded movable screen as a measure of maintaining privacy in 52.6% of cases. They discussed with the seniors and among themselves in 91% and 40.6% of cases respectively. The average time required from arrival at ward to attend by recent medical graduates was 9.2 minutes and to complete history and physical examination was 18 minutes per patient. More than three-quarter of the recent medical graduates (85.4%) felt a need for a separate module on "medical ethics and professionalism" in the curriculum, albeit 54.2% graded themselves that they always practiced ethics.

Conclusion: There was a gap in practicing medical ethics and professionalism in the apprenticeship life of recent medical graduates. These recent medical graduates will be a practicing physician one day. So, steps should be taken in medical education to enhance medical ethics and professionalism practice of physician.

Key Word: Medical education, Recent medical graduates, Medical ethics and professionalism.

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I. Introduction

Internship is the learning period where the interns i.e. the recent medical graduates come in close contact with the patients for the very first time, especially in Internal Medicine ward. After successfully completion of training period they become a fully practicing physician. The physicians are very important part of the health care system. They have some duties to the patients--professional, legal and moral duties. However, there are many complaints about unethical and unprofessional behavior against physicians all over the world. The unethical and unprofessional practices among the physicians are also evident in Bangladesh. Bangladesh Medical and Dental Council (BMDC) follows a curriculum, "Curriculum for Undergraduate Medical Education in Bangladesh—update 2012", where a student needs five years to pass MBBS. The students study medical ethics mainly in Forensic Medicine in third year of MBBS course. After passing MBBS, students have to complete internship training period which is for one year, having 19 weeks for medicine, 19 weeks for surgery, 12 weeks for obstetrics and gynaecology, and 2 weeks in the community. ¹ Then recent medical graduates are eligible for practice. However, there are some problems in under-graduate medical education, such as defective curriculum planning, irrelevant and out-of-date contents, inadequate exposure during clinical training, vague internship training programme and lack of competency based internship training programme etc. ² One of the most important issues is that the interns have to enter their professional life without any training on specific

topics. As a result, they are not competent enough to differentiate what must do or what should not do. The medical internship period becomes a period for writing the discharge certificates, follow-up notes and some other activities. Thus, the goals do not fulfill the internship objective to prepare a competent and humane physician. This should be the period when the future physicians will be able to identify, analyze and solve the ethical and professional problems that arise in the daily practice. For fulfilling this objective curriculum must be changed according to need. However, there is limited research on practicing medical ethics and professionalism. The current study was conducted to assess the practice of medical ethics and professionalism of recent medical graduates in Internal Medicine Wards in Bangladesh. The findings of the study will help to integrate medical ethics and professionalism in the current curriculum, according to needs.

II. Material And Methods

This qualitative observational study was carried out on recent medical graduates who were freshly passed MBBS course. The participants were doing internship in the Department of Internal Medicine. All the participants were more than 18 years of ages.

Study Design: A qualitative research consisting qualitative observational study and opinion survey.

Study Location: This study was conducted in tertiary care teaching hospitals at Dhaka Medical College (DMC), Armed Forces Medical College (AFMC), Chittagong Medical College (CMC), Abdur Rahim Medical College (ARMC), Green Life Medical College (GLMC), Bangladesh Medical College (BMC) and Khwaja Yunus Ali Medical College (KYAMC).

Study Duration: January, 2018 to June, 2019.

Sample size: Thirty-one (31) recent medical graduates were observed who were willing to participate. Three hundred and eight (308) recent medical graduates were included for opinion survey.

Subjects & selection method: Thirty-one (31) recent medical graduates were included to assess practice and 308 recent medical graduates to conduct opinion survey. As recent medical graduates were freshly passed, so, the influence of medical education in their professional life could be easily assessed.

Procedure methodology

An observation check list was used to assess the practice of medical ethics and professionalism of recent medical graduates in Internal Medicine Ward. Observation of the daily routine activities of recent medical graduates was carried out during their duty time.

The recent medical graduates attended the newly admitted patients, took proper history and advised laboratory investigations as soon as they admitted to the ward. Besides these they had some duties to previously admitted patients such as to keep daily progress report, writing discharge certificates, attending morning session, journal club and above all performing all duties in a professional and ethical way.

After obtaining informed consent, well-designed check list was used to collect the data of the practice of medical ethics and professionalism of recent medical graduates. The activities of recent medical graduates were in in-door departments. They were observed for medical ethics and professionalism practice while giving follow up and receiving new patients in Internal Medicine ward. Three hundred and eight (308) recent medical graduates were included in opinion survey.

Research instruments: A check list was prepared on the basis of the routine activities which should be done. A self administered semi-structured written questionnaire was used to assess opinion of recent medical graduates towards medical ethics and professionalism. The check list and the questionnaire were field-tested. Some modifications were made according to the findings of field-test and instruction of the supervisor to make the study feasible and informative. The check list included background characteristics such as age, gender, duration of observation and information about medical colleges; and the activities carried out routinely by recent medical graduates.

Statistical analysis

Data were analyzed using SPSS (version 20) and only descriptive statistics such as frequencies, percentages, mean and standard deviation was calculated.

III. Result

Total thirty one (31) recent medical graduates, of whom 54.8% were male, were observed for assessing the practice of medical ethics and professionalism in Internal Medicine ward (Table 1).

Table 1: Background characteristics of recent medical graduates

Characteristics	Institutions	Recent medical graduates, N (%)
Gender		
• Male		17 (54.8)
• Female		14 (45.2)
Bangladesh University of Professionals		
• Government	Armed Forces Medical College	5 (16.1)
Chittagong University		
• Government	Chittagong Medical College	4 (12.9)
Dhaka University		
• Government	Dhaka Medical College	6 (19.4)
• Private	1. Bangladesh Medical College	4 (12.9)
	2. Green Life Medical College	4 (12.9)
Rajshahi University		
• Government	Md. Abdur Rahim Medical College	4 (12.9)
• Private	Khaja Yunus Ali Medical College	4 (12.9)
Hours of observations	Mean ± SD	6.7±2.2

A. Daily routine activities towards patients who admitted previously

Among the 195 previously admitted patients males (55.9%) were more. The recent medical graduates re-assessed the history and performed proper physical examinations in 71.3% and 83.1% of previously admitted patients. The recent medical graduates asked about laboratory investigations in 80% cases. The mean daily follow up time required was 5.5±3.4 minutes, ranging from 2-20 minutes (Table 2).

Table 2 Characteristics of patients who had been admitted previously and the activities carried out by recent medical graduates

Activities	Performed; N (%)	Not performed; N (%)	Not applicable; N (%)
Re-assessment history	139 (71.3)	56 (28.7)	
Proper physical examination	162 (83.1)	33 (16.9)	
Checking laboratory investigation	156 (80)	22 (11.3)	17 (8.7)
Duration of follow up (in minutes)			
Mean ± SD	5.5±3.4		
Minimum	2		
Maximum	20		

B. Activities towards newly admitted patients

The 31 recent medical graduates were observed during receiving 133 newly admitted patients. Sixty-eight (51.1%) out of 133 newly admitted patients were female. All the female patients accompanied by female attendant or husband. The recent medical graduates sought permission in 88% of cases before starting physical examination and listened carefully in 88.7% cases. The recent medical graduates took history properly in 62.4% cases. However, they did not give sufficient time in 36.8% cases. They completed history writing in 66.9% cases. The recent medical graduates ensured comfort in most of the cases (98.5%). Proper physical examinations were done in 94.7% of cases. The recent medical graduates advised newly admitted patients for laboratory investigations to do in their own hospitals in almost all of the cases. Majority of the recent medical graduates avoided abuse of voice (86.5%) and responded the patient's questions (67.7%). They used screen as a measure of maintaining privacy in 52.6% of cases. The participants discussed with the seniors and among themselves in 91% and 40.6% of cases respectively. They discussed with the nurses were very less in number (Table 3).

Table 3 Activities carried out by recent medical graduates during receiving new patients

Characteristics & Activities	Performed; N (%)	Not performed; N (%)	Not applicable; N (%)
Gender of patients			
• Male	65 (48.9)		
• Female	68 (51.1)		
Presence of attendant with female patients*			
• Husband	23 (17.3)		
• Female attendant	63 (47.4)		
Taking of permission before physical examination	117 (88.0)	16 (12.0)	
Listens carefully	118 (88.7)	15 (11.3)	
Gives sufficient time in history taking	84 (63.2)	49 (36.8)	
Takes history properly	83 (62.4)	50 (37.6)	
Completes history writing	89 (66.9)	44 (33.1)	
Response to patient's question	90 (67.7)	14 (10.5)	29 (21.8)
Uses screen as a measure of maintaining privacy	70 (52.6)	63 (47.4)	

Ensuring comfort of the patient	131 (98.5)	2 (1.5)	
Does proper physical examination	126 (94.7)	7 (5.3)	
Advising laboratory investigation to do in their own hospital	100 (75.2)	8 (6.0)	25 (18.8)
Discussing with seniors for knowing more	121 (91.0)	12 (9.0)	
Discussing with other interns for knowing more	54 (40.6)	79 (59.4)	
Discussing with nurses for knowing more	6 (4.5)	127 (95.5)	
Avoided abuse of voice with patient	115 (86.5)	9 (6.8)	9 (6.8)

* Some female patients accompanied by both husband and female attendants

The recent medical graduates gave advice about treatment, follow up and diet in 81.2%, 47.4% and 73.7% of cases (Figure 1).

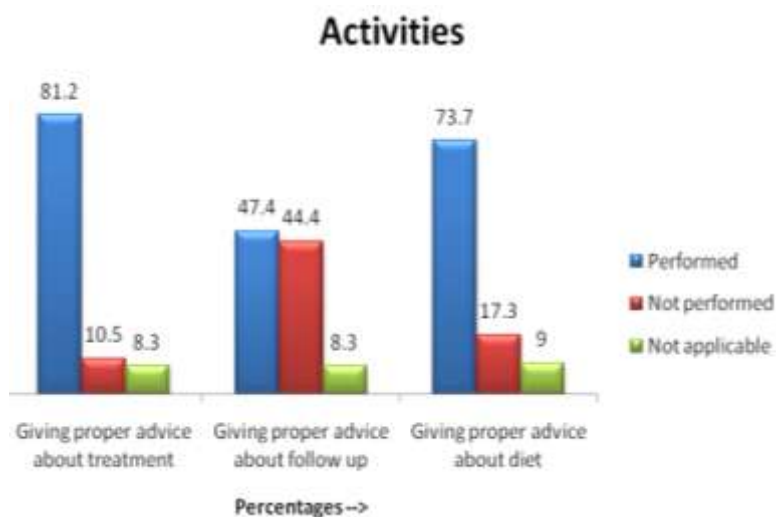


Figure 1: Percentage of giving advices by recent medical graduates

The recent medical graduates assured the patients more than their attendants. The patients got assurance in 75.9% and patients' attendants got assurance in 57.9% of cases (Figure 2).

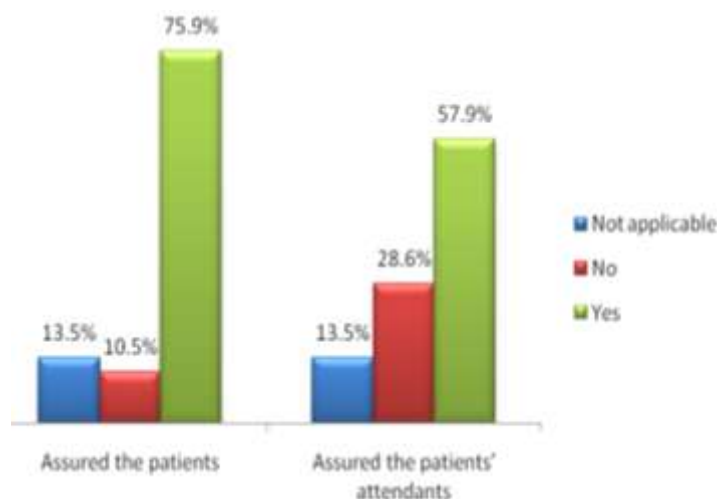


Figure 2: Percentage of giving reassurance by recent medical graduates

The findings of this study indicate that the average time required for getting information from arrival of patient 5.2 ± 5.1 minutes. The recent medical graduates took 4 ± 4.3 to attend the patients after getting information. The time from arrival at ward to attend by recent medical graduates was 9.2 ± 6.5 minutes. The time from attend by recent medical graduates to finish were 18 ± 8.2 minutes. So, from arrival of the patients to finish the first bed side consultation the procedure needed 27.2 ± 9.9 minutes (Figure 3).

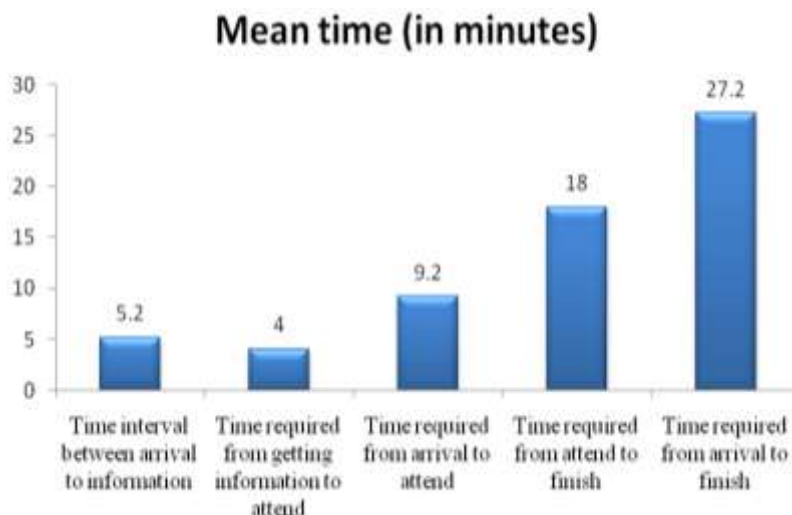


Figure 3: Mean required time for receiving new patients

Majority of the recent medical graduates (85.4%) felt a need for a compulsory module on “medical ethics and professionalism” in the curriculum (Figure 4).

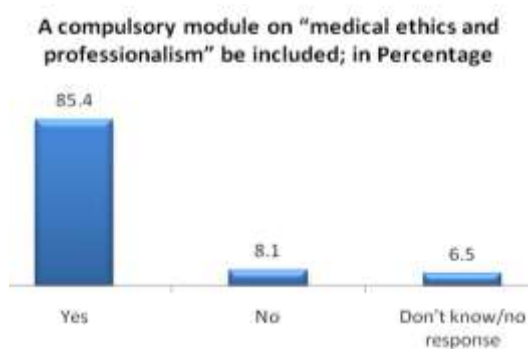


Figure 4: Distribution of the recent medical graduates according to their opinion about a compulsory module

More than half of the recent medical graduates (54.2%) thought that they always practiced ethics, though more than one-third (39.6%) thought that they could not practice ethics all the time (Figure 5).

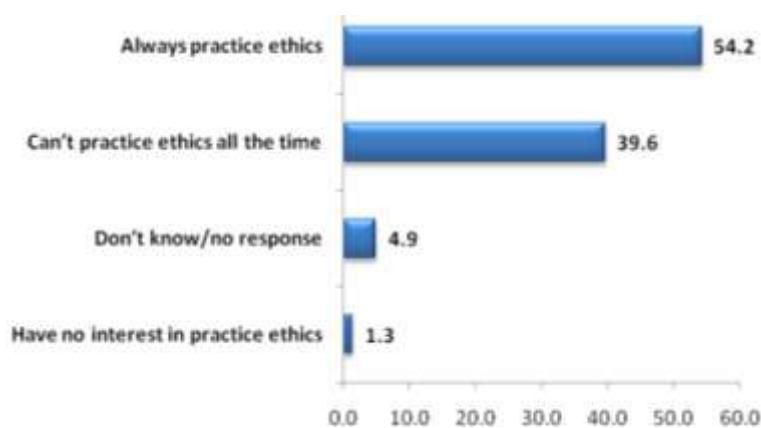


Figure 5: Distribution of the recent medical graduates according to their grading by themselves

IV. Discussion

The data analyzed and presented in this research article are daily activities of recent medical graduates in the in-door department of Medicine wards of both public and private medical colleges. It was observed that a part of recent medical graduates might not give much importance on these routine activities. Internship period is the time to build the foundation of future physician.

A. Daily routine activities towards patients who admitted previously

Similar to the findings of this study, the re-assessment of history and physical examination were missing or incomplete by the interns in 36.3% and 17.6% patient notes respectively in Pakistan. The assessment of laboratory investigation was also incomplete in 39.8% cases.³ However, this percentage should be 100%. The mean daily follows up time required were 5.5 minutes in this study.

B. Activities towards newly admitted patients

All the newly admitted female patients had attendants, either accompanied by female attendant or husband. Female attendants accompanied more with the female patients than their husband. The recent medical graduates sought permission in 88% cases.

The recent medical graduates listened carefully in most of the cases in present study. Active listening is a fundamental and necessary core clinical skill. So, it must be included in curriculum with an expectation that the medical students could be "listening clinicians".⁴

The recent medical graduates did not take history properly and complete history writing in all cases in this study. A patient may be inaccurately diagnosed, mistreated or suffering for a long period due to lack of taking good history and proper physical examination. Also, lack of proper history taking and physical examination can produce an incompetent physician.

The recent medical graduates did not tell about treatment, diet and follow up advice in all cases in this study. However, in another study in our country, 86.6% of physicians working in in-door departments explained the treatment.⁵ Advice on diet could enhance communication between patients and their physicians. Physicians should adopt counseling practices and discuss healthy behavior.⁶ However, there were some challenges for physicians in providing dieting advice such as lacking of education or training in nutrition and time constraints.⁷ Patient felt confident and increases the effectiveness of previous treatment by getting follow up advice.

Majority recent medical graduates avoided abuse of voice with the patients in 86.5% of cases in the current study. More than three-quarter (75.7%) of in-door patients were satisfied with service providers' behavior in Bangladesh.⁵ However, 22.4% of physicians thought that they had the right to shout at a patient.⁸

The recent medical graduates used screen as a measure of maintaining privacy in 52.6% in this study. Privacy is a right of patients, both males and females.

Physicians have to bear "life-long learning" attitude to be professional. Learning is incomplete without sharing. Good communication reduces medical errors. The recent medical graduates discussed with the seniors and other recent medical graduates were not as expected. Communication and teamwork are the backbones of health care. The nurse-physician relationship is important for developing collegial and collaborative relationship.⁹

The recent medical graduates did not response the patient's questions in 10.5% cases in the current study. More than one-fifth of in-door patients (21.6%) reported that service providers did not answer to the patient's questions in another study of Bangladesh.⁵

The patients and patients' attendants did not get assurance in 10.5% of cases in this study. Assurance helps in better treatment outcome. The participants were not taught properly about giving assurance to patients and patients' attendants. Most information came from patients' attendants than patients. They act as source of information and as an advocate for the patients.¹⁰

The mean time from attend by recent medical graduates needed to finish the first bed time consultation was 18 minutes in this study. Another study in Bangladesh, found that 78.8% of patients said that they had been given adequate time during history taking.⁵ However, average consultation time found in Bangladesh was 48 second whereas 22.5 min in Sweden.¹¹ The studies of the past three decades found that physician spent 13 to 24 minutes with patients. Surveys from the 1990s found the average was 17 minutes, though some studies claimed the real number was about to 10 minutes. It was found that the U.S. physicians spent 13 to 28 minutes with patients in the year 2018.¹² In Iran, the average time per patient was 4-6 minutes. The physicians were instructed to increase the time up to 15 minutes for general physicians, 20 minutes for specialists, and 30 minutes for psychiatrists.¹³ However, it is hopeful that our recent medical graduates used to give expected time while receiving newly admitted patients.

Majority of the recent medical graduates thought that they always practiced ethics also felt a need for a separate compulsory module on "medical ethics and professionalism" in the curriculum in this study. Social Sector Management Foundation (2016) stated that 18.8% of service providers and managers marked "poor education" and "poor training" as barriers of effective organizational culture.⁵ So, this is the high time to give emphasis on education and training of medical ethics and professionalism. The duties and activities of an intern

should be adjusted to the learning goals and aims as they are the future physician. The interns must be taught ethics and professionalism from the internship.¹⁴

V. Conclusion

The findings of the study revealed that there was a gap in practice of medical ethics and professionalism of recent medical graduates in Internal Medicine Wards in Bangladesh. The recent medical graduates did not perform their duties as expected. From the review of curriculum it was revealed that there was a gap between the time when the medical students learnt and when they practiced. Along with that, there was a demand for inclusion of separate compulsory module on “medical ethics and professionalism” in the curriculum.

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