MEDICAL PROFESSIONALISM
Medical Student Responsibilities

A student shall be dedicated to providing competent medical service with compassion and respect for human dignity. In all instances, the student must maintain the dignity of the person, including respect for the patient’s modesty and privacy.

1. NONDISCRIMINATION

It is unethical for a student to refuse to participate in the care of a person based on race, religion, ethnicity, socioeconomic status, gender, age, or sexual preference. It is also unethical to refuse to participate in the care of a patient solely because of medical risk, or perceived risk, to the student. It is not, however, unethical for the pregnant student to refuse to participate in activities that pose a significant risk to her fetus.

2. CONFIDENTIALITY

The patient’s right to the confidentiality of his or her medical record is a fundamental tenet of medical care. The discussion of problems or diagnoses of a patient by professional staff/medical students in public violates patient confidentiality and is unethical. Under no circumstances can any medical record be removed from the institution, nor is photocopying of the record permitted. For presentations or rounds, students are permitted to extract information but not copy wholesale parts of the chart.

3. PROFESSIONAL Demeanor

The student should be thoughtful and professional when interacting with patients and their families. Inappropriate behavior includes the use of offensive language, gestures, or remarks with sexual overtones. Students should maintain a neat and clean appearance, and dress in attire that is generally accepted as professional by the patient population served. Under pressure of fatigue, professional stress or personal problems, students should strive to maintain composure. The student should seek supportive services when appropriate.

4. MISREPRESENTATION

A student should accurately represent herself or himself to patients and others on the medical team. Students should never introduce themselves as “Doctor” as this is clearly a misrepresentation of the student’s position, knowledge, and authority.

5. HONESTY

Students are expected to demonstrate honesty and integrity in all aspects of their education and in their interactions with patients, staff, faculty, and colleagues. They may not cheat, plagiarize, or assist others in the commission of these acts. The student must assure the accuracy and completeness of his or her part of the medical record and must make a good-faith effort to provide the best possible patient care. Students must be willing to admit errors and not knowingly mislead others or promote himself or herself at the patient’s expense. The student is bound to know, understand, and preserve professional ethics and has a duty to report any breach of these ethics by other students or health care providers through the appropriate channels. The student should understand the protocol of these channels.
6. CONSULTATION
Students should seek consultation and supervision whenever their care of patient may be inadequate because of lack of knowledge and/or experience.

7. CONFLICT OF INTERESTS
When a conflict of interest arises, the welfare of the patient must at all times be paramount. A student may challenge or refuse to comply with a directive if its implementation would be antithetical to his or her own ethical principles, when such action does not compromise patient welfare. Gifts, hospitality, or subsidies offered by medical equipment, pharmaceutical or other manufacturers or distributors should not be accepted if acceptance would influence the objectivity of clinical judgment. Students interactions with commercial interests should conform to the American Medical Association (AMA) guidelines.

8. SEXUAL MISCONDUCT
The student will not engage in romantic, sexual, or other nonprofessional relationships with a patient, even at the apparent request of a patient, while the student is involved with the patient's care. The student is not expected to tolerate inappropriate sexual behavior on the part of other medical personnel or patients.

9. IMPAIRMENT
The student will not use alcohol or drugs in a manner that could compromise patient care. It is the responsibility of every student to protect the public from an impaired colleague and to assist a colleague whose capability is impaired because of ill health. The student is obligated to report persons of the health care team whose behavior exhibits impairment or lack of professional conduct or competence, or who engage in fraud or deception. Such reports must conform to established institutional policies.

10. CRITICISM OF COLLEAGUES
It is unethical and harmful for a student to disparage without good evidence the professional can we fix, competence, knowledge, qualifications, or services of a colleague to a review (judicial) body, staff, students or a patient. It is also unethical to imply in word, gesture, or deed that a patient has been poorly managed or mistreated by a colleague without tangible evidence. Professional relations among all members of the medical community should be marked with civility. Thus, scholarly contributions should be acknowledged, slanderous comments and acts should be avoided, and each person should recognize and facilitate the contributions of others to the community. The medical student will deal with professional, staff, and peer members of the health team in a cooperative and considerate manner.

11. RESEARCH
The basic principle underlying all research is honesty. Scientists have a responsibility to provide research results of high quality; to gather facts meticulously, to keep impeccable records of work done; to interpret results realistically, not forcing them into preconceived molds or models; and to report new knowledge through appropriate channels. Co-authors of research reports must be well-enough acquainted with the work of their coworkers that they can personally vouch for the integrity of the study and validity of the findings, and must have been active in the research itself. Plagiarism is unethical. To consciously incorporate the words of others, either verbatim or through paraphrasing, without appropriate acknowledgment is unacceptable in scientific literature.
12. EVALUATION
Students should seek feedback and actively participate in the process of evaluating their teachers (faculty as well as house staff). Students are expected to respond to constructive criticism by appropriate modification of their behavior. When evaluating faculty performance, students are obliged to provide prompt, constructive comments. Evaluations may not include disparaging remarks, offensive language, or personal attacks, and should maintain the same considerate, professional tone expected of faculty when they evaluate student performance.

13. TEACHING
The very title "Doctor" -- from the Latin docere, "to teach" -- implies a responsibility to share knowledge and information with colleagues and patients. It is incumbent upon those entering this profession to teach what they know of the science, art, and ethics of medicine. It includes communicating clearly with and teaching patients so that they are properly prepared to participate in their own care and in the maintenance of their health. The following are not specific responsibilities of students; they are physicians' responsibilities, although students are frequently asked to take these on.

14. DISCLOSURE
In general, full disclosure is a fundamental ethical requirement. The patient must be well informed to make health care decisions and work intelligently in partnership with the medical team. Information that the patient needs for decision making should be presented in terms the patient can understand. If the patient is unable to comprehend, for some reason, there should be full disclosure to the patient’s authorized representatives.

15. INFORMED CONSENT
Students are to understand the importance of the obligation to obtain informed consent from patients, but are not responsible for obtaining such consent. It is the physician’s responsibility to ensure that the patient, or his/her surrogate, be appropriately informed as to the nature of the patient’s medical condition, the objectives of proposed treatment alternatives, and risks involved. The physician’s presentation should be understandable and unbiased. The patient’s or surrogate’s concurrence must be obtained without coercion.

*Recommendations & Guidelines from Students, Organization of Student Representatives OSR/AAMC*