

Patients Attitude toward Professionalism Practiced by Dental Students

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Abstract

Background: Professionalism includes working within a regulatory framework with adherence to ethical practice; situational judgement and awareness; the ability to interact and communicate with patients as well as inter-professionally; and the commitment to continually enhance and improve the knowledge, values, skills and understanding required to provide consistently high-quality dental care. The objective of the study was to assess patient attitude towards professionalism practiced by dental students. **Materials and Methods:** A self administered validated questionnaire was given to N = 170 patients reporting to Asan Memorial Dental college and Hospital. They were asked to respond to questions regarding student behaviour and communication during treatment. Data was entered in Excel and analysed using SPSS Version 23. **Results:** Most of the younger age group patients agreed that the student's attire inspired assurance in their abilities and also confidence level was increased by students of younger and middle age group. Simple languages used by the students helped them understand technical terms easily and it helped them clarify their doubts. Most of the male patients agreed that the first impression of the students and the way of receiving them in clinics increased their confidence level. **Conclusion:** Inculcating professionalism right from the beginning of the dental education will be the root cause in moulding up professional dentist in the further run.

Keywords: Attitude, dental students, interns, patients, professionalism

INTRODUCTION

Professionalism is expressed in various ways including the dimensions of competence ranging from comprehensions of basic biology, principles to clinical skill; engagement which includes behavior and attribute pertaining to empathy and communication, reliability which pertains to timely access to competence, dignity; which includes treatment of patients, clinical staffs and self.^[1]

Over the years, professionalism in health care had several definitions, many of which are ambiguous. Three broad components of professionalism were introduced by *Walsh*, suggesting proper appearance, behavior, and conversation are essential for successful relationship.^[2] Patients are likely to discuss health issues with "well-groomed health-care professionals who have "professional tone voice" and "confident expression."^[1]

Patient satisfaction is one of the primary goals of dental treatment, and professionalism is an important criterion for judging the patient satisfaction and success of dental treatment. Plenty of investigations have been carried out on

professionalism by physicians, but unfortunately, very few on dental health-care providers.

In view of the cited situation, the purpose of the study is to evaluate professionalism practiced by dental interns during clinical practice.

MATERIALS AND METHODS

The study was conducted in Asan Memorial Dental College and Hospital, Chengalpet. A cross-sectional study design was employed to include 170 patients, Sample size for the current study was calculated using Openepi statistical software using study conducted by Abdulaziz Alshahrani.^[1]

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Before commencement of the study approval was obtained from Institutional Scientific Review Committee of Asan Memorial Dental College and Hospital. Inclusion criteria include patients with age 18 and above and exclusion criteria include patient with a history of psychological disorders. Self-administered questionnaires were given to the patients in native language or English at the end of their dental procedures was adopted from the studies conducted by Abdulaziz Alshahrani *et al.*^[1] It contains 17 questions and used a 5 point Likert scale for recording data. Completed questionnaires were tabulated and analyzed

using IBM, SPSS, Version 23 (Chicago USA) to assess for significance across age and gender.

RESULTS

Age and gender distribution of the study population are given in Tables 1 and 2. *N* = 106 (62.4%) study population aged <36 years contributed the major of the study, there is equal distribution among study population with regards to gender.

The responses of the survey conducted to evaluate the patient's attitude regarding professionalism practiced by dental students are given in Table 3. Majority of the patients agreed *N* = 148 (87%) that the first impression and the way they were received in the clinics by the students affected their confidence level (Questions-1 and 2). When asked about their physical appearance, *N* = 129 (74%) of the patients conveyed that the attire inspired assurance in the students professional abilities (Question-3). In addition to attire, students behavior increased the comfort level in *N* = 142 (83%) patients (Question-4) and their overall conduct excluded competence in the professional skills *N* = 141 (83%) (Question-7). Majority of the patients *N* = 115 (67.6%) (Question-5) agreed that effective time management showed the competence level of students. *N* = 150 (88.2%) patients agreed that students had maintained an orderly work environment (Question-6).

Table 1: Distribution of study subjects according to age

| Age (years) | n (%) |
|-------------|------------|
| <36 | 106 (62.4) |
| 36-50 | 40 (23.5) |
| >50 | 24 (14.1) |
| Total | 170 (100) |

Table 2: Distribution of study subjects according to gender

| Gender | n (%) |
|--------|-----------|
| Male | 85 (50) |
| Female | 85 (50) |
| Total | 170 (100) |

Table 3: Professionalism of the dental students as perceived by the study population

| Questions | Strongly agree, n (%) | Somewhat agree, n (%) | Strongly disagree, n (%) | Some what disagree, n (%) | Don't know, n (%) |
|--|-----------------------|-----------------------|--------------------------|---------------------------|-------------------|
| First impression of the students affected my confidence | 95 (55.9) | 53 (31.2) | 14 (8.2) | 3 (1.8) | 5 (2.9) |
| The way of receiving me in the clinic also affected my confidence level | 71 (41.8) | 76 (44.7) | 15 (8.8) | 0 | 8 (4.7) |
| Students attire inspired assurance in his/her abilities | 65 (38.2) | 61 (35.9) | 23 (13.5) | 5 (2.9) | 16 (9.4) |
| student's behavior increased my comfort level | 90 (52.9) | 52 (30.6) | 13 (7.6) | 11 (6.5) | 4 (2.4) |
| Effective time management showed the competence level of the student | 56 (32.9) | 59 (34.7) | 31 (18.2) | 11 (6.5) | 13 (7.6) |
| Maintained and an orderly work environment | 82 (48.2) | 68 (40) | 7 (4.1) | 11 (6.5) | 2 (1.2) |
| The overall conduct of student conveyed competence and increased comfort level | 74 (43.5) | 67 (39.4) | 20 (11.8) | 4 (2.4) | 5 (2.9) |
| The overall behavior of student improved my perception of dentist in general | 67 (39.4) | 64 (37.6) | 23 (13.5) | 5 (2.9) | 11 (6.5) |
| I was asked to read the entire informed consent form before signing it | 98 (57.6) | 43 (25.3) | 11 (6.5) | 5 (2.9) | 13 (7.6) |
| My chief complaint was heard fully and in detail | 129 (75.9) | 22 (12.9) | 14 (8.2) | 5 (2.9) | 0 |
| I was informed about the diagnosis; treatment options, the duration of the treatment before the start of the treatment | 103 (60.6) | 48 (28.2) | 11 (6.5) | 5 (2.9) | 3 (1.8) |
| I was informed about the risks and benefits of the treatment procedure | 84 (49.4) | 54 (32.8) | 17 (10) | 8 (4.7) | 7 (4.1) |
| Simple language used helped me understand technical terms effectively | 93 (54.7) | 54 (31.8) | 13 (7.6) | 5 (2.9) | 5 (2.9) |
| my questions were encouraged and clearly answered | 95 (55.9) | 59 (34.7) | 12 (7.1) | 2 (1.2) | 2 (1.2) |
| My assumptions where clarified by clear facts | 81 (47.6) | 68 (40) | 10 (5.9) | 3 (1.8) | 8 (4.7) |
| My culture and religious sentiments were respected | 61 (35.9) | 47 (27.6) | 8 (4.7) | 11 (6.5) | 43 (25.3) |
| I was informed about my rights in accepting or rejecting the treatment plan | 106 (62.4) | 28 (16.5) | 10 (5.9) | 10 (5.9) | 16 (9.4) |

The overall behavior of the students improved their perception of the dentist, in general, was agreeable by $N = 131$ (77%) patients, whereas $N = 28$ (16%) patients did not agree and $N = 11$ (6.5%) patients did not know (Question-8). Almost $N = 142$ (83%) patients agreed to read the entire consent form before signing it (Question-9). While investigating patients awareness of treatment details, nearly $N = 151$ (88%) of the patients agreed that their chief complaint was fully heard (Question-10) and even slightly higher percentage $N = 151$ (89%) were informed about the diagnosis, treatment options, and duration of the treatment before the start of the treatment procedures (Question-11). $N = 32$ (18%) patients were not informed about the risks and benefits of the treatment (Question-12). $N = 149$ (87%) patients reported that students used simple language while communicating with them and the students answered their questions and clarified their doubts regarding the treatment procedures (Questions-13, 14, and 15). The students received a positive response $N = 108$ (63%) regarding respecting the patients cultural and religious sentiments (Question-16). Around $N = 134$ (79%) patients were informed about their rights to accept or reject the treatment plan (Question-17).

Most of the younger age group patients $N = 88$ (<36 years) accepted that the students attire inspired assurance in their abilities and also their confidence level increased by students behavior which is statistically significant ($P < 0.05$) than middle age group $N = 25$ (36–50 years) and older age group $N = 12$ (>50 years).

Communication-based analysis revealed that $N = 93$ (87.7%) of the younger age group (<36–50 years), $N = 37$ (93%) of middle age group (36–50 years) agreed that the simple language used by the students helped them understand technical terms easily, they also gave a positive response regarding the clarification of their doubts which is statistically significant than older age group ($P < 0.05$).

On overall gender based analysis, most of the males agreed $N = 79$ (93%) that the first impression of the students and they way of receiving them in the clinic affected their confidence showed statistically significant results than female ($P < 0.05$).

DISCUSSION

Professionalism is multifactorial and an important factor in engendering a sense of comfort and confidence during dental treatment. Although the first impression is important, communication skills, behavior, and attitude may have a greater impact on the overall relationship between the patient and the health-care provider.^[1] As described by Taylor, the patient's first impression of a physician can have a strong influence on perceptions of the care provider's competence level and expectations of the care delivered in future.^[3]

The essential factors that determine the patient's first impression include the way of receiving them in the first appointment. The ambience of the receiving area and the way

the clinical personal dressed. Eighty-five percent ($n = 148$) of the patients agreed that the students first impression had a strong influence on the perception of the students competence similar to the study conducted by Alshahrani *et al.*,^[1] regarding the first impression (89%). Around 74% ($n = 127$) of patients believed that the students attire improved assurance in their abilities. The high approval rate in this regard is because, at Asan Memorial Dental College, it is mandatory to maintain the professional dress code in the clinics.

As described by Brosky *et al.*,^[4] the nonverbal communication attributed to a dental care providers attire/appearance can also play a major role in the patient/doctor relationship. Positive first impression, professional dress code, and an overall level of professionalism portrayed by the dental health-care provider can increase patient's feelings of comfort and confidence, thus leading to an improved experience within the dental setting. These positive patient attitude can lead to an increase in exchange of information between the patient and the dental health-care provider in turn leading to more efficient and improved delivery of dental care.

On verbal responses analysis, high positive responses (89%) were received which indicates effective student patient interaction which was similar to the study conducted by Nagappan and John (93.8%).^[5] In our opinion, behavior is not limited to verbal and nonverbal communication of the dentist, but it also includes effective time management and orderly work environment, the present study showed that (67.6%) & (88%) of the students were effective in time management and orderly work environment respectively which was similar to the study conducted by Brosky *et al.*^[4] This is because case appointments were managed by the clinic, they are under constant supervision during procedures and also the advancement in dental technologies.

Neutral responses were received on religious and cultural sentiments, as the patients are treated equally without any discrimination on gender, age, caste, and creed and always respecting their values on religious and cultural sentiments and results were similar to the study conducted by Alshahrani *et al.*^[1]

Further studies have to be carried out to evaluate the level of professionalism exhibited by the students during the provision of varying kinds of dental treatment during a comprehensive dental care for the patient.

CONCLUSION

Inculcating professionalism right from beginning of dental education and training will be the root cause of molding up students as a professional dentist. Students from the educational institution participated in the present study exhibited a good code of conduct and professionalism in rendering dental treatment to the patients visiting the hospital.

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Conflicts of interest

There are no conflicts of interest.

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