We would like to start from ‘that’ inclined plan which leads us gradually to fulfil ourselves as health workers, or our training to become so.

I am sure that most of us have embarked on this journey with great enthusiasm, driven by the desire to quickly become a good doctor, a good nurse, a good physical therapist and so on, but I suppose also that each of us has already experienced the moment that this enthusiasm is restrained by the first difficulties, when it seems that our goal becomes a real challenge.

In fact we know that training a professional in our field today requires a big commitment. Perhaps one of the greatest difficulty is knowing how to cope with the amount of scientific knowledge which should enter into our culture. However we also know that this is not the only jurisdiction that is required, since professionalism, to be complete, must also be extended in other directions.

Hence the question: “What do we exactly need to become professional?”
To give a short answer to this question, which will be discussed more in detail tomorrow, let’s briefly analyze the picture given by Paul S. Mueller on “medical professionalism” in his article “Incorporating Professionalism into medical education: the Mayo clinic experience.”

According to this definition (image) the clinical skills are, as we might expect, the basis on which professionalism finds its foundation. After that, just as a basic element, communication skills and legal and ethical knowledge. Finally, humanism (a term that could be rendered as “humanity,” excellence (providing services to the highest level available today), responsibility and altruism are represented as pillars on which to stand and through which professionalism is completed. I think that in this definition, reflecting for a moment, each one of us can find almost all our daily efforts.
A goal so complex in fact explains the need on our part of continuous search of professionalism and tools to achieve it; research which becomes particularly “intense” when we move from simple students to active participants in our profession.

All of us have also experience that this search is not a “personal affair”, but requires constant help from others.
It is precisely this, as we will hear later, and as we all know, the most critical point, where both positive and negative experiences can importantly affect our future.

In fact, we are all aware of the need of help to apply our technical knowledge (gained from books) on the working field. For example, putting into practice a physical therapy technique, prescribing a therapy, laying down a diagnosis... we know how important it is that these theoretical learning find practical completion, thanks to the advice and help of our teachers or all those more expert than us or persons who support us in the medical field. As a matter of fact, we encounter enormous difficulties and dissatisfaction in times when this teaching is lacking because we know that our professionalism may pay the consequences.
However, professionalism won’t be measured only on technical skills, even if they were well learnt.

The other attributes of professionalism, not technical ones, are in fact just as essential requirements for the service that each of us is called to offer to patients. But if technical knowledge need time and effort to be taught and consolidated, how much more these other aspects of professionalism.

However, it’s our common experience that the teaching of these skills is often overshadowed or left to the discretion of teachers/professors or individual tutor. In addition, and more dangerous, it also happens that these skills are not only not taught (to us), but misleading examples are given by the tutor through which the provision of services formally correct and personal success, paradoxically, have the right to overtake the respect and "care/healing", understood in its original sense, of the patient.

Surely the existence of these situations reveals a lack of importance, during formal training, attributed to these matters and also explains the difficulties faced by those among us who are not satisfied with a purely technical education, but aim and choose to commit to learning a true and global professionalism.

I have personally encountered several times some difficulty and much concern about the lack of uniformity and accessibility of education considered "extra."
On the other hand, I’ll always remember very well a doctor with whom I was doing an internship. One day, he shook my hand warmly and looking into my eyes told me: "It is in this way that we have to greet our patients when they arrive, it is a “crucial” moment; if we don’t do so the whole consultation might take a wrong direction."

And I did not need to wait to become a doctor to understand that he was right: I had the confirmation under my eyes, in the patients who trusted and cooperated well with him since their first visit.

"A handshake: something so trivial!", I thought, but I had never thought that it could be important. After that I had the feeling that I had received a significant contribution to my education. This is just an example but it gives an idea of how important it is that professionalism is intentionally taught us in all its aspects.

For this reason, as students, we expect much from teachers, but this expectation does not focus only on their technical and theoretical teachings.

Consciously or sometimes unconsciously, in fact, we expect that the same teachers who are able to captivate our attention in the classroom for their clear lesson, also pay attention and time to teach us how to relate well with colleagues, how to communicate with patients, how to deal with ethically sensitive situations … to help us, in short, to ensure that our attitude to professionalism become daily practice and that besides making us feel fully realized as health workers, let us be truly at the service of health.

For this "missing link", we risk, in fact, not to give a worthy accomplishment to all the efforts that we every day address to our professional growth, and to remain "incomplete" health professionals, even seemingly prepared from a technical standpoint, but at the same time, far from the expectations and needs of patients. The objectivity of this risk leads us then to ask ourselves some questions.

First, can we expect a greater training effort from our universities and our teachers?

And, if it is true that we students already possess, as a result of many factors, an attitude of professionalism, what can we do, from our part, to bring reality closer to our own expectations?
Bibliography

