

Seventeen years of knowledge for teaching medical professionalism during the COVID-19 outbreak

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To the Editor

The virus that caused the severe acute respiratory syndrome (SARS) outbreak 17 years ago is similar to that of the recent COVID-19 outbreak. The SARS virus was unprecedented and spread across 30 countries, triggering mass panic and ultimately infecting over 8000 people and killing over 900. In 2019, a novel coronavirus, which was later named COVID-19, was detected in China. It rapidly spread worldwide, forcing governments to instate unanticipated travel bans. In the planning of epidemic prevention and control, clinical teachers and medical students must understand the impact of racial or ethnic variation in diseases toward various symptoms and treatment reactions. Infectious diseases are constantly evolving by the hour. Therefore, quick response to this threat is extremely necessary.–

Well-trained and experienced teams of officials could quickly recognise the crisis and almost all medical management structures could address the pandemic-related stresses. During this critical period, we must be cautious of non-professional behaviours, such as disrespecting one's students, learners or peers; using inappropriate language; labelling others because of the disease; discriminating against race; inappropriately using social media and failing to adhere to government policies or cooperate with medical teams. Sometimes, we might make difficult decisions under uncertainty and time constraints. Teachers who set poor examples through improper teaching conduct or attitudes negatively influence the professional development of their students. Such teachers must

be both culturally appropriate and sensitive to the population. But for now, medical students have been largely sidelined from patient care during the crisis. These aspects should currently be given considerable attention. Although, in the interest of student safety, it is advisable to limit student direct contact with known or suspected cases of COVID-19, but as technology advances and recordings become more common in healthcare, these will be novel medical simulation scenarios. It is still a good time to educate students on COVID-19 should the students eventually be needed for patient care. To develop a strong sense of professionalism, clinical teachers should talk to students about the critical elements of the impact of outbreaks on geographic differences, medical care quality and efficacy. Since the SARS outbreak 17 years ago, we should now have better approaches for teaching medical professionalism in times of epidemic prevention.

Correction notice This letter to the editor incorrectly included a reference to the following paper. It has now been removed. Janssens S, Simon R, Barwick S, *et al*. Leadership sharing in maternity emergency teams: a retrospective cohort study in simulation. *BMJ Simul Technol Enhanc Learn* 2020;6:135–9.

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