



Performance of the Medical Students in the Hospitals: A Qualitative Survey

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Abstract

Background and Objective: The ethical behavior of students in medical sciences universities reflects the respected values of the educational system of these universities. Appropriate ethical behavior in medical universities leads medical students to adopt an appropriate paradigm and apply this type of behavior to society after graduation. The purpose of this article is to identify medical students' perceptions of ethical behavior. The present study was conducted with the aim of explaining the Ethical Behavior of Medical Students in the Hospital.

Methods: The present study was performed with a qualitative approach using conventional content analysis for data analysis. Sampling was performed in an easy and accessible manner by selecting 19 students from Shiraz School of Nursing and Midwifery. The data collection method was a semi-structured interview. Word-of-mouth recorded interviews were implemented. Content analysis (using MAXQDA software) was used to reduce the data, record the data, obtain the analytical code, and finally identify the issues.

Results: The findings of the data analysis ended in the following categories: conscientiousness (including conscientiousness in the educational environment, conscientiousness in the Hospital and conscientiousness in society), respect and benevolence (including respect and benevolence in the educational environment, respect and benevolence).

Conclusion: Overall, students' perceptions in this study showed that, based on their perceptions, ethical behavior encompasses a wide range of contexts. They overlap with these themes. It was clear to the students that observing ethical behavior in the Hospital was more important than the non-clinical setting

Keywords: Hospital, Medical Sciences, Ethical Behavior, Conscientiousness, Charity.

Background and Objective

The most important sign of commitment to societal health is paying more attention to the field of medical education. Nowadays, one of the serious issues in medical education is paying more attention to the field of professional ethics, and high attention is paid to ethical behaviors in prestigious medical universities around the world. In order to be a successful, ethical and competent physician, we require accurate scientific education and research in medical universities. To achieve this goal, special attention should be paid to ethical behavior in teaching medical students. Otherwise, the product of medical universities will be doctors who have no moral obligation. This lack of moral obligation will cause irreparable damage to the health of all people. The special place of medical universities in educating the growing generation of medicine is not hidden from anyone. Over the past years, Iranian universities of medical sciences have trained physicians who have maintained the country's health system.

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Unfortunately, in recent years, the spiritual and moral aspects of medicine have diminished. It seems that man, tired of modernity, has now reverted to moral values. Moral behavior is a set of socially accepted actions and behaviors that are learned through reward and punishment¹. Ethical behavior in the organization is a reflection of the values of individuals and it is a fundamental attitude in eliminating the moral anomalies of the organization². Physicians and medical students should also be aware of their ethical duties if they make on-line recommendations to any health care organization or pharmaceutical product^{3,4}. Human dignity is very important, but in many cases the budget of health care systems is not commensurate with it⁵. Although many people show that morality is important to them, they consider it a personal issue and contrary to professional behavior⁶. Ethical behavior is the most important axis of the medical profession and consequently, in most medical faculties, medical ethics education is one of the main and mandatory courses for medical students⁷. While knowledge and competencies are the main goals of formal medical education, understanding professional values and ethical behavior is essential for the growth and development of medicine and the training of a good physician⁸. In order to increase ethical behaviors among employees, it is better for managers to know how the relationship between ethical identity and the level of ethical behavior increases; they must act in such a way that they can train or select employees based on the characteristics of ethical behavior. There is a relationship between moral identity and increasing the level of moral behavior, and in addition, moral identity leads to less lying behavior⁹. A common tool for regulating ethical behavior is to develop a code of ethics to be used as a written framework and to shape behaviors accordingly¹⁰. Organizational

ethical virtues have certain characteristics that increase transparency in the dimensions of ethical culture and ethical behaviors¹¹. Ethical behavior is an essential element in a number of leadership theories, including transformational leadership theory¹². It is an ethical behavior that motivates employees to provide better and more desirable services to their customers without expediency. Ethical behavior encourages employees to pursue tasks and causes one not to accept undesirable pressure from politicians or other pressure groups. The important point is that supporting ethical behavior in the organization has a positive effect on employees' trust in the company's actions and policies. Ethical behavior encourages employees to perform tasks for the improvement and health of citizens, the environment, their organization, and in general for future generations¹³. Managers who are themselves ethical are more likely to exercise more self-control in ethical behavior than managers who act in moral manner ostensibly or merely in correspondence with organizational norms¹⁴. Moral behavior, health, and moral reasoning are the most important predicting variables of moral metacognition. The results show that more organizational pressure for employees' participation in ethical behaviors and ethical feelings, leads to more ethical behaviors of high-ranking employees in the organization¹⁴. In organizations, it is assumed that if one cares about "morality", then one's behavior will also be moral. Researchers believe that the effective essence of leadership is moral behavior. One of the factors related to moral metacognition is moral behavior. Moral behavior is a set of socially accepted actions and behaviors that are learned through reward and punishment¹⁵. The moral behavior of students of medical universities in the hospital reflects the respected values of the educational system of these universities, and this type of behavior will affect the way

these students work after graduation. As seen in the research of Shadpour and her colleagues¹⁶, ethics is one of the most important characteristics of a physicians in their students, patient and colleagues, so the need to address this issue is very important. Therefore, our aim in this study is whether appropriate ethical behavior in medical universities causes medical students to receive a good model and apply this type of behavior in society after graduation. Does medical ethics education affect the moral behavior of medical students in the hospital?

Method

We conducted the present study with a qualitative approach using content analysis of interviews with the students of anesthesiology, operating room, nursing and midwifery of Shiraz Faculty of Nursing and Midwifery (Hazrat Fatemeh Al-Zahra) for identifying medical students' understanding of ethical behavior in the hospital. The study population was Shiraz medical students in the hospital. The participants were 19 students of anesthesiology, operating room, nursing and midwifery of Hazrat Fatemeh Al-Zahra Nursing and Midwifery Faculty in Shiraz. We selected them by sampling method at convenience. In the present research, in order to observe sampling with maximum diversity, the participants were students with different characteristics (age, gender, culture, place of birth, etc.); they were training in the hospital. The data collection method was semi-structured interview. First, the interview started with a general question about medical ethics and the interview process was guided based on the participants' answers. The time and place of the interviews determined by agreement of the participants, but it was usually conducted at the Faculty of Nursing. The duration of the interviews ranged from 30 to 70 minutes. The researcher conducted all the interviews from recording, typing, reviewing

to coding. Then it was analyzed. Therefore, at first read each interview carefully to gain a basic understanding, underline its important statements, and record it in code (initial coding). For the initial coding, it was used the words of the participants themselves and the signifying codes (researcher's perceptions of the utterances). Then it was summarized the codes that were conceptually similar to each other to clarify the meaning and categorized them into a number of categories and subcategories. In fact, it was performed data analysis simultaneously and continuously with data collection. The data collection process continued until data saturation and finally 7 main themes were obtained. In this research, it was evaluated the accuracy and robustness of the study using the proposed criteria of Guba and Lincoln. For credibility, the researcher had sufficient participation and close interaction with the participants. The review was conducted by participants and external observers. The researcher examined the consistency (dependability) of the data by performing measures such as review by supervisors, consulting professors and experts. Confirmability was done by discarding the previous beliefs and prejudices of the researcher. In addition, the findings were confirmed by the participants.

Results

The participants consisted of 19 students of anesthesiology, operating room, nursing and midwifery of Shiraz Faculty of Nursing and Midwifery (Hazrat Fatemeh Al-Zahra) (Table 1). The age of the students was between 21 and 24 years. All of these students were training in the hospital. Our aim was to explore the understanding of medical students in the hospital about ethical behavior. Findings consisted in identifying 7 themes that include 1- Conscientiousness 2- Respect and benevolence 3- Compassion 4-

Honesty 5- Law-Orientation 6- Respectful behavior 7- Confidentiality (Table 2).

Table 1. Field of study and number of research participants

Row	Field of study	Number
1	Anesthesiology	8
2	Operating room	5
3	Nursing	4
4	Midwifery	2

Table 2. Themes and subthemes identified from interview analysis

Main theme	Subtheme	Codes
Conscientiousness	Conscientiousness in the educational environment	Not postponing duties, arriving early in class, not leaving the training place before class time, not wasting training time with inappropriate wanderings
	Conscientiousness in the hospital environment	Not shirking the responsibility, attending the internship early, not leaving the training place before the end of the internship, preferring the patient's interests to his / her personal interests, not having the effect of low student welfare facilities in serving the patient, not spending a lot of time for resting and lunch during the hospital internship, expressing hopeful words to the patient, working lovingly, cheering the patient, calming the patient, using all the power to heal the patient
	Conscientiousness in society	Not putting duties on the shoulders of others, not refusing to work hard, not using tricks, not accepting bribery, being kind to parents, being kind, having patience, working hard, saving, respect for the environment, respect for rights of Animals
Respect and benevolence	Respect and benevolence in the educational environment	Not reminding classmates' indebtedness, observing etiquette in the presence of professors and students, not making fun of students, friendly warning a classmate's mistake
	Respect and benevolence in the hospital environment	Treating the patient well, guiding strangers in the hospital, Not reminding nurses' indebtedness, not making fun of hospital staff, not insulting patients, doing good to the patient
	Respect and benevolence in the society	Greeting, apologizing for mistakes, Respect for others, Commitment to ethical principles
Compassion	Compassion in the hospital environment	Being kind to the patient, not being angry with the patient, listening to the patient, preferring the comfort of others over one's own well-being, loving the patient unconditionally, helping the poor patients, introducing the financially weak patients to rich relatives and friends, Staying with unaccompanied patients, buying medicine for patients with personal money, comforting the patient and treating the patient and family well, being kind, being ethical, loving the patient, treating the patient well
	Compassion in the society	Helping people to cross the street, riding people without vehicles, giving money to the weak, calculating the cost of rent for the poor, loving others, making time for others, sacrificing without any expectations, sharing our experiences with others, not pursuing personal interests
Honesty	Honesty in the educational environment	Not cheating on exams, not indulging in illness for being absent from class, not registering other people's medical achievements in our own name, informing students' medical malpractice to professors, making good promises to classmates
	Honesty in the hospital environment	Not indulging in illness for absenteeism in internship, not lying to patients, not providing false and misleading information to patients,

Main theme	Subtheme	Codes
		reporting medical malpractice to hospital officials, not misbehaving to patients
	Honesty in society	Not being afraid to tell the truth, doing what they say, being transparent, fighting for what they believe, not showing off, not swearing falsely, not praising a person out of self-interest, not judging unjustly in favor of a friend, not hiding our personal mistakes, not hiding the personal mistakes of others, not blaming others for our mistakes,
Lawfulness	Lawfulness in the hospital	Not misusing hospital equipment for personal work, not bringing friends and relatives to the hospital without the permission of the authorities, not giving hospital drugs to friends, not using medical equipment and expired drugs for patients
	Lawfulness in non-medical centers	Paying attention to traffic signs, not using hospital medicines in the dormitory, not using mobile phones in the classroom despite the teacher's warning, not doing personal activities in class, not abusing the position, respecting the rules set in the society, reporting violations of Faculty policies by others to officials, not using the university Internet for personal use in email and web browsing
Respectful behavior	Respectful behavior in the hospital environment	Apologizing to nurses for mistakes, admiring nurses, not insulting patients' beliefs, not dumping occupancy and polluting the hospital premises, not quarreling with patients (while they were right), listening fully and patiently Patient, talking kindly to the patient, good manners with the patient, comforting the patient, good treatment of the patient, providing the possibility of presence of persons accompanying to relieve the patient's loneliness
	Respectful behavior in the educational environment	not making fun of skin color, accent and the way students dress, not making fun of university professors and students, not giving ugly titles (stupid, crazy, etc.) to their friends, not offending friends, not quarreling with classmates (while they were right)
Confidentiality	Confidentiality in Hospital	Not disclosing patients' confidential information, not telling patients' private matters to other students, not showing patients' photos to relatives
	Confidentiality in the dormitory	Talking less, not telling patients' private issues at home, not revealing students' secrets for friends in dormitory, not providing classmate student card information to others, not giving classmate score to others

Theme 1: Conscientiousness

Based on their experiences, participants described what happened in relation to conscientiousness or the importance of this issue. They have responded to this in education, hospitals and the society. They have emphasized ethical behaviors, such as being in class early, prioritizing the patient's interests over personal desires, and being patient. [Students often arrive late for class like my roommate. Will he become a good

conscientious? I do not think. He just says that I am smart and you are cowards (participant No. 5). One of my friends, who is also very good scientifically but avoids doing practical work in internships, says that he does not like working with patients. He hates working in a hospital. I tell him you finally have to learn practical work. He says my job is to get a score (participant No. 12). My own father is an employee of an office and was a manager for a few years, but now he is a simple employee. He tells me that during his career he has never refused to work hard and had the opportunity to take

big bribes, but he feared God. I'm proud of him. He always says that we, who are all healthy in our house, are the result of not eating people's rights (participant No. 1)].

Theme 2: Respect and benevolence

Based on their experiences, participants described what happened in relation to Respect and benevolence or the importance of this issue. They have responded to this in education, hospitals and the society. They considered good and emphasized ethical behaviors such as observing etiquette in the presence of professors and adhering to the observance of ethical principles and not insulting patients and moving in the direction of the good of the patient. [Reza does not greet most professors and his score is always good. He does not believe in respect at all. Forcibly he may greet some people. He does not even greet the anesthesia staff. One day one of the staff beat him and embarrassed him. (Participant No. 8). Some nurses are immoral and impatient. One day one of them called a patient stupid. In short, it was a bad fight. The next day, when we went to the internship, we found out that the patient was a relative of one of the university doctors. In short, I do not know what happened to that nurse. But one must control oneself and never insult the patient. The patient is in pain (participant No. 10). In the society, I see people giving their seats to the elderly on the bus or subway, or helping them on the street, or putting people in their cars on a rainy night. Oh I remember. The father of one of my friends, whose father was a retired Pasdar, picked up two people on a rainy night out of pity, but those scoundrels took him to the side road to steal his money. "Of course he had some money," and they killed him. My friend was very, very upset. He had been in court for several years. He said that the two cowards are addicted and

have no one in the courtroom to support them. Did he really do something immoral if he did not pick up? One does not know what to do in these situations (participant No. 2)].

Theme 3: Compassion

Based on their experiences, participants described what happened in relation to Compassion or the importance of this issue. They have reacted to this on the hospital and society. They considered good and emphasized moral behaviors such as being kind, self-sacrificing and giving money to weak people. For example, [one of the operating room staff is so kind and compassionate that sometimes others make fun of him. Of course, he does his job a little slowly. But he talks to the patient well and gives them morale and it is very good. Most operating room staff are impatient. When I see him, I feel good because it reduces the patient's stress (participant No. 15). We have relatives who respect others very much. Some people make fun of him, but I like him because he is very calm and patient. It calms you down. She is a nurse. Good luck patient (participant No.16)].

Theme 4: Honesty

Based on their experiences, participants described what happened in relation to Honesty or the importance of this issue. They have responded to this on education, hospital and the society. They have considered good and emphasized moral behaviors such as not cheating on exams and not indulging in illness to be absent from internships and not to hide our personal mistakes. For example, [I do not like cheating in the classroom. But my friends make fun of me and say you are incompetent. I feel that cheating on an exam is no different from stealing. Fraud is an

unsociable work (participant No. 3). My friend's relative is a doctor and has an office. From time to time, he is absent from class or internships and receives a letter of treatment from his relative. That's not a good thing to do. But he is used to it. Probably one day he will get stuck in this job (participant No. 11). With my high school friends we have gone to the cinema, and my friend picked up some chips in a shop until the shopkeeper dared. Whatever he did, I did not eat from it. Now the same person has become a bad addict. My father says that one day the forbidden bread will work somewhere (participant No. 7)].

Theme 5: Lawfulness

Based on their experiences, participants described what happened in relation to Lawfulness or the importance of this issue. They have responded to this in the areas of lawfulness in hospital and in non-medical centers. They considered good and emphasized ethical behaviors such as reporting violations of college rules and policies by others to officials, not engaging in personal activities during school hours and respecting the rules set in the society. For example, [some people follow the law when others are aware of it, but they have nothing to do with the law at all unless there is someone. One day in internship, I saw a nurse trying to connect the drip head to a patient without rubbing alcohol on its head. Of course, he connected it, but until he was unconscious, I closed drip and secretly changed the patient's drip with one of the other students. I was afraid to tell him why he did that. Oh, we are students and they are staff. They fill our prescription (participant No. 4). Some do not care if the police are there or not. They always observe. My dad is very severe about this. On the contrary, sometimes my mother complains about my father's lawfulness and says that we should

not be greedy for the law (participant No. 13)].

Theme 6: Respectful behavior

Based on their experiences, participants described what happened in relation to Respectful behavior or the importance of this issue. They have reacted to this in the areas of hospital and education. They considered good and emphasized ethical behaviors such as treating the patient well and not making fun of skin color, students' accent and manner of dressing, and not arguing with patients. For example, [I saw a few cases where a patient who comes to the operating room says that he wants to see his surgeon, and the staff also says that it is okay or that he will come later. But the patient faints without seeing his surgeon. What does it really mean? I told this to the surgeon once. He told me not to worry, I know what he wanted. So where does respect for the patient mean? Put ourselves in its place (participant No. 19). I greet and bow whenever I see professors, but some classmates do not even greet if the teacher is not paying attention. Some of them do not see the need for this and say that if we read our lesson well, we do not need anyone. I oppose them and consider it obligatory to respect everyone, even the servants of the faculty and the hospital (Participant No. 6)].

Theme 7: Confidentiality

Based on their experiences, participants described what happened in relation to Confidentiality or the importance of this issue. They have reacted to this in the areas of hospital and dormitory. They considered good and emphasized ethical behaviors such as not disclosing patients' confidential information, talking less and not showing patients' photos to relatives. For example, a

medical student in a hospital must be patient's confident. But some do not. For example, my friend describes most of what happens in the operating room to his dormitories and his family with great pomp and is proud of it. This is a very wrong thing to do because the things that happen in the operating room are a personal matter (participant No. 9). Most students unfortunately want to know the score of others and as soon as they understand this, they tell it to others. There are many fights in the dormitory. Is this a secret? How can a student who reveals his friend's secrets keep the patient's secrets in the future? I was shocked by this issue because some of my grades got bad, especially in the first semester, and I even got into a fight with a friend (p participant No. 18).

Discussion

The most important sign of commitment to the societal health is paying attention to the field of medical education. Nowadays, one of the serious issues in medical education is paying more attention to the field of professional ethics; in prestigious medical universities around the world, considerable attention is paid to ethical behaviors. In order to educate a successful, ethical and competent physician, we require accurate scientific education and research in medical universities. To achieve this goal, we should pay special attention to ethical behavior in educating medical students in the hospital. Otherwise we will have physicians and paramedics who have no moral obligation. This lack of moral obligation will cause irreparable damage to the health of all people. Fortunately, in recent years, one of the priorities of medical universities is to pay close attention to professional and ethical behaviors. Participants in our research expressed their views on the factors and causes of ethical and immoral behaviors

in the medical and paramedical fields. They were confused about confidentiality everywhere, especially in the hospital; for example, they were inconsistent in reporting medical errors of their friends.

In research of White conducted a Descriptive-Analytical research entitled Association of Ethical Reasoning and Nurses' Ethical Behavior and Health with Their Moral Metacognition. He concluded that moral behavior, health, and moral reasoning are the most important predictors of moral metacognition¹⁷. In study of Zabihi et al conducted a descriptive correlational research entitled "Study of the relationship between ethical development by managers and the health of the organization"¹⁸. He concluded that there is a relationship between the development of ethical behavior in the workplace and the health of the organization. Therefore, in order to maintain the health of the organization, we suggest that people with good records and good morals be replaced in management positions. Based on ethical rules and codes that express the do's and don'ts of the organization, an ethical charter should be developed and communicated to all employees. Codes and ethical policies based on them should be reviewed with the participation of employees¹⁹. They conducted a qualitative research entitled "Operating room as a strong foundation of ethics and service in the medical profession (an introduction to the principles, responsibilities, requirements, merits, challenges and ethical and professional solutions in operating rooms)". They concluded that identifying, explaining, promoting, institutionalizing, and adhering to the principles, values, ethical and professional foundations and their specific instances in operating rooms is an urgent and permanent necessity; they are the highest values of the sacred profession of medicine²⁰. In research of Adel et al

conducted a descriptive correlational research entitled Analysis of organizational variables related to employee's ethics²¹. They concluded that, among the research variables, organizational self-esteem, organizational justice and three components of spirituality in the workplace, i.e. meaningful work, alignment with organizational values and sense of solidarity, respectively, had the greatest effect on ethical behavior. In Study of Roozitalab conducted a Qualitative research entitled designing a Model of Professional Ethics for Physicians with a Delphi Model²². They concluded that the results of this study could be a useful ethical model for the Ministry of Health and other institutions where professional ethics is part of their remit²². In Rahimnia et al research, conducted a quantitative research entitled Teaching Ethics in Medical Education. They concluded that medical students evaluate positively the ethical education and prefer hospital learning methods²³. In study of Rahimi & Baharloui conducted a review entitled the need for originality-based independence in medical ethics²⁴. They concluded that originality is central to many models of the independence in the philosophical theories²⁴. In this regard, Esmaili say that the formed personality of the physician, which has been created under the influence of different variables, ultimately plays an important role in his professional ethics and behavior; but the considerations of indigenous, religious and local culture of individuals should not be ignored from the list of influential factors²⁵. "Unprofessional behavior" is a term that encompasses a variety of behaviors (from rudeness to deception, etc.). The concept of "disruptive physician" first introduced in the United States refers to a physician whose unprofessional behavior can lead to problems in the workplace, reduce moral behavior among other employees, and covertly and overtly reduce patient care. In

this regard, Fazel et al argue that confidentiality is a fundamental necessity for maintaining trust between patients and health care providers²⁶. Patients should expect that their health information they provide will be kept confidential unless there is a convincing reason. Confidentiality is a legal obligation arising from the case law and requires the internal instructions of health care providers. They also list the moral dilemmas that medical students face as follows: common moral dilemmas among medical students, the appropriate way students are introduced to patients, patient satisfaction with student participation in counseling and treatment, sharing patient's confidential information with medical institutions, inexperience in carrying out agendas, reaction to criminal behavior by patients, contact examinations of patients under anesthesia, conflicts between medical education and patient care, poor medical observation, concealment of senior colleagues' mistakes when senior colleagues have a morally damaging role, physical or verbal assault by patients, medical treatment for relatives, friends and medical students without complying with the relevant laws and disclosure by abused patients. In research of Roozitalab and Majidi state that ethics has long been an integral part of medicine. Ethics in the field of medicine is of double importance from the Islamic point of view, considering the position of medical sciences, which is related to the dignity of existence and the importance of preserving the human soul²⁷. Teaching medical ethics in medical professions is a key issue, because the basis of their relationship with patients is learning ethics. In this regard, Roozitalab et al argue that the main goal of hospital ethics is to improve the patient's quality of life. It seems that education should focus on developing cognitive, behavioral and personality skills²⁸. To this end, ethical education should be included in all stages of physicians' education, including

in medical faculty, residency, and continuing education. Formal education of medical ethics has many benefits for physicians and requires trained hospital physicians to teach it. In this regard, Sari and Ataei state that, due to the use of advanced technologies in medical treatments and complex social developments, the moral issue has a special place in medical sciences today, so its education is necessary. Recently in Iran, medical ethics education based on religious teachings has received much attention²⁹. Therefore, medical ethics as an application system has always been looking for new solutions to solve ethical problems. In this regard, Zamani state that the need for a positive moral atmosphere in the nursing profession is inevitable¹⁴. Creating and maintaining an ethical atmosphere in nurses' performance not only represents how to do the right thing, but also encourages good performance. Paying attention to ethics will require continuous learning and doing good deeds. In study of Khaghanizadeh et al argue that although the number of physicians who engage in immoral behavior is very small compared to the total number of physicians, a bad performance can lead to a loss of public trust and confidence in physicians throughout the society²². Therefore, the need to have committed physicians and aware of how to deal with difficult ethical issues has been one of the main drivers of change in education of medical ethics. In this regard, Rahimnia et al also state that high levels of ethical behavior have been observed in organizations where ethical norms are approved and implemented²³. When these norms become part of the knowledge of the employees of the organization, they will affect the ethical decisions of the employees. The result of such decisions is to make the atmosphere of the organization more ethical. In this regard, Rahimi believe that, considering the significant effect of ethical atmosphere and ethical behavior on trust in

teamwork, it is suggested that universities in particular and other organizations in general, develop and strengthen the ethical atmosphere and ethical behavior so that they can increase trust in teamwork between employees and managers²⁴. In the conclusion of his study, Ismaili states that the ethical behaviors of employees in the organization increase their efficiency, job satisfaction and effectiveness. Therefore, in order to improve and increase the ethical behaviors of employees in organizations, we suggest that ethical behaviors be institutionalized as an important and necessary principle in the workplace and others should be encouraged to perform ethical behaviors. Although the results of qualitative studies cannot be generalized to society, but by knowing the students' views in this regard, we can promote ethical behaviors of medical students in the hospital.

Conclusion

In general, this research showed that based on students' perceptions, moral behavior covers a wide range and should be given more attention. For students, conducting ethical behavior in a hospital setting is more important than in a non-hospital setting. They also disagreed about instances of confidentiality, especially in the hospital setting, and had many questions about the consequences. Therefore, for students, it is very important for educational planners to pay more attention to deeper teaching of ethical points. Educational planners should pay more attention to this subject, especially in hospital settings, and consider mechanisms to ensure the full implementation of ethical behavior, and themselves should be examples for students.

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Conflicts of Interest:

The author declares that, there is no conflict of interest.

Authors' contributions:

Authors have the equal contribution in this article.

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