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Editorial

Digital Professionalism in Healthcare: A Curricular Priority

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Healthcare is increasingly practiced within an environment shaped not only by wards, clinics, operating theatres, and emergency departments, but also by smartphones, messaging applications, telemedicine platforms, digital imaging, electronic health records, and artificial intelligence (AI). In this evolving healthcare landscape, professionalism is expressed as much through digital conduct as through bedside behaviour. A recent widely publicized incident in a public hospital in Lahore has brought this issue into sharp focus. The subsequent disciplinary action reaffirmed that patient dignity, confidentiality, and public trust remain fundamental professional obligations irrespective of the medium through which healthcare professionals communicate or share information [1,2].

Although such incidents are often perceived merely as inappropriate use of social media, they reflect a much broader challenge confronting modern healthcare. Healthcare professionals now work within highly interconnected digital environments where information is exchanged rapidly, communication frequently occurs through informal digital channels, and clinical content can be captured, stored, and disseminated almost instantaneously. Consequently, breaches of professionalism may arise not only from negligence or misconduct but also from inadequate preparation for the ethical and professional complexities of digital practice. The issue therefore extends beyond individual accountability and highlights the need for comprehensive education, supportive institutional culture, and adaptation of professional standards to contemporary healthcare environments [2-6].

Professionalism has always been a defining characteristic of medical practice, encompassing far more than technical competence. Confidentiality, integrity, sound clinical judgment, accountability, compassion, and respect for patient autonomy have long formed the ethical foundation of healthcare. These professional obligations remain unchanged when communication shifts from face-to-face interactions to digital platforms. If anything, digital technologies magnify both the speed and the consequences of poor professional judgment, potentially compromising patient privacy, damaging institutional reputation, and eroding public confidence in the medical profession. Digital professionalism should therefore be regarded not as a new ethical construct but as the modern expression of enduring principles of medical ethics in an increasingly digital healthcare ecosystem [7-10].

The urgency of digital professionalism has intensified because digital technologies are now embedded within routine clinical practice. Healthcare professionals and trainees routinely rely on smartphones, electronic health records, secure messaging platforms, telemedicine systems, cloud-based educational resources, and AI-assisted clinical decision-support tools for patient care, education, research, and communication. International consensus increasingly recognizes that the rapid digital transformation of healthcare has significantly outpaced the formal preparation of healthcare professionals and recommends structured digital health competencies throughout medical education [4]. Recent evidence further identifies digital competence as a core educational domain that is now essential for healthcare professionals across disciplines and healthcare systems worldwide [5,8].

These developments have direct relevance for Pakistan. The Pakistan Medical & Dental Council (PM&DC) has recently strengthened ethics and patient-safety reforms through the implementation of an updated Code of Ethics accompanied by enhanced regulatory oversight [2]. Similarly, the revised undergraduate MBBS curriculum identifies professionalism, ethical conduct, patient safety, accountability, and trust-building as essential competencies expected of every graduating physician [3]. These reforms represent significant progress toward strengthening professional standards. Nevertheless, recent events demonstrate that general discussions of professionalism alone are no longer sufficient unless they are complemented by explicit education addressing professional conduct within digital environments [2,3].

Several challenges associated with digital practice are now routinely encountered in healthcare settings. These include photography or videography within patient-care areas; sharing clinical information through messaging applications; displaying identifiable patient information on electronic devices; circulation of clinical images for educational purposes without appropriate consent or safeguards; inappropriate use of personal mobile devices in sensitive clinical environments; and entering confidential patient information into unsecured digital platforms or AI applications. Importantly, many of these behaviours arise from convenience, educational intentions, or lack of awareness rather than malicious intent. This emphasizes the need for clear institutional policies, standardized guidance, and structured educational interventions that enable healthcare professionals to navigate digital practice responsibly [4,6,7].

Digital professionalism should therefore be explicitly incorporated into both undergraduate and postgraduate healthcare curricula. Undergraduate education should develop competencies related to maintaining confidentiality in digital environments, obtaining informed consent for photography and audio-visual recording, managing professional online identity, responsible engagement with social media, secure digital communication, cybersecurity awareness, and understanding the permanence of digital footprints. Postgraduate education should expand these competencies by addressing specialty-specific digital dilemmas, secure multidisciplinary communication, telemedicine practice, digital teaching and supervision, cybersecurity in healthcare systems, digital leadership, and the ethical integration of artificial intelligence into clinical decision-making. These competencies are likely to be most effectively developed through practical case-based discussions, simulation exercises, reflective learning, and scenario-based ethical decision-making rather than through theoretical ethics instruction alone [3,4,5,8].

At the same time, it is important to acknowledge that digital technologies have transformed healthcare in profoundly beneficial ways. Telemedicine has expanded access to healthcare for underserved populations, digital communication has strengthened interdisciplinary collaboration, electronic health records have improved continuity and coordination of care, and artificial intelligence holds considerable promise for enhancing diagnostic accuracy, clinical efficiency, and evidence-informed decision-making. Excessively restrictive policies could inadvertently hinder innovation and limit these valuable advances. Accordingly, the objective of digital professionalism should not be to discourage the use of digital technologies but rather to ensure that they are used responsibly, ethically, securely, and in ways that consistently protect patient confidentiality, uphold professional integrity, and strengthen public trust [4,7,8].

Healthcare institutions also bear substantial responsibility in fostering digital professionalism. Hospitals, medical colleges, postgraduate training programmes, and professional regulatory bodies should establish clear, practical, and regularly updated policies governing photography, recording, digital communication, electronic documentation, AI-assisted clinical practice, and responsible engagement with social media. Orientation programmes for students, residents, and newly appointed staff should include digital professionalism as a core component of professional development, while senior clinicians and faculty members should consistently model exemplary digital conduct. Because professionalism is acquired as much through observation of institutional culture as through formal teaching, organizations must actively cultivate

environments in which ethical digital practice becomes an integral and expected component of everyday clinical care [2,3,7,10].

The recent Lahore incident should therefore be viewed not as an isolated controversy but as an important reminder that healthcare education, institutional governance, and professional regulation must evolve alongside rapid technological advances. As medicine increasingly occupies both physical and digital spaces, professionalism must likewise be taught, practiced, assessed, and reinforced across both domains. Digital professionalism is no longer an optional extension of medical ethics; it is an indispensable competency for delivering safe, ethical, respectful, trustworthy, and contemporary healthcare in the digital age [4,7,10].

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