## **ORIGINAL ARTICLE**

# Understanding Patient's Predisposition for Physician's apparel: A Cross-sectional Study from Mayo Hospital, Lahore.

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## **ABSTRACT**

Objective: To understand patient's predisposition for physician's apparel

**Methodology:** Using a cross-sectional study design, a total of 96 participants were approached at Mayo Hospital, Lahore. An interview based pre-tested semi structured questionnaire consisting of both open and close ended questions was used for data collection. Data was analyzed using SPSS version 26

**Results:** Out of 96 patients, 48(50%) were male and 48(50%) were female. Out of these 78.1% believed that doctor's dress is important to them. 63.5% of patients preferred name tag and 84.4% preferred whitecoat. The most desired apparel for male physician was western attire with white coat (53.1%) and national attire with white coat for female doctors (54.2%)

**Conclusion:** This study accentuated the patients' predisposition for physician's apparel which can lead to better rapport and ultimately improved healthcare services.

Keywords: physician apparel, patient preference, attire

#### INTRODUCTION

Since the inception of medical profession, a physician's apparel has been considered to be an emblem of esteem and proficiency <sup>[1]</sup>, dating back to Hippocrates <sup>[2]</sup>. As per a study, it was established that patients felt more inclined to open about their issues to physicians who are professionally dressed <sup>[3]</sup>. Therefore, the white coat cemented itself as an elemental part of medical profession during the 20<sup>th</sup> century. It has become evident that white coat helped creating a more conducive environment for doctor-patient relationship and patients perceived such doctors to be more distinguishable, sanitary and professional <sup>[4,5]</sup>. It has been documented that patients prefer their doctors to wear name tags <sup>[6,7,8]</sup>.

This predilection differ according to age <sup>[9]</sup>, geographical location <sup>[10]</sup> and clinical setting<sup>[11]</sup>. A very minimal data is available in Pakistan regarding the predisposition of patients for how the doctors dress. A study carried out in Islamabad found out that patients prefer decent and professional attire along with white coat <sup>[12]</sup>

The aim of their study is to determine whether patients are of view that the doctor's attire plays a significant role in doctor-patient interaction and, if so, what would they regard as the best garb for the optimal interface.

**METHODOLOGY** 

A cross sectional study was done from November 2020 to January 2021 in Mayo Hospital, Lahore which is a tertiary care hospital for providing medical facilities to ailing people of lower socioeconomic class hailing from Lahore and its surrounding localities. A total of 96 patients were included in the study as calculated by using a confidence level of 95%, absolute precision as 10% and estimated response on doctor's attire as 46%[12]. Patients of 18 years or older were approached in medical, surgical, and emergency specialties. They were requested to fill a questionnaire. It included questions both in Urdu and English language. It consisted of two sections. First section comprised of biodata, second section was divided into part A and B. For part A, a total of twelve photographs were shown to the patient. Six were of female doctor and six were of male doctor (Fig.1). Then the patient was asked to rank those photos in order of his preference on the Likert scale ranging from strongly disagree to strongly agree.

Part B consisted of both open and close ended question. The data was then analyzed using SPSS and the results were presented in form of tables and graphs.

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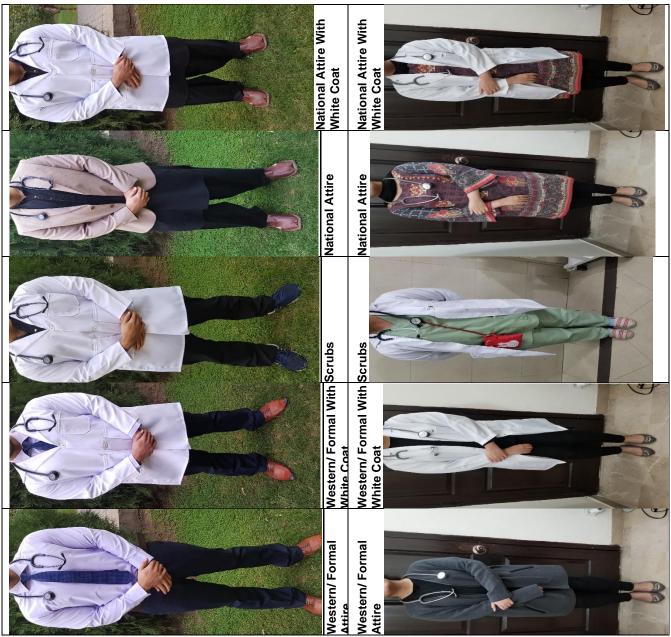
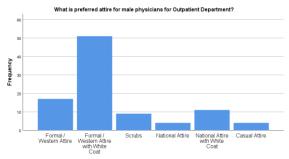


Figure 1

## **RESULTS**

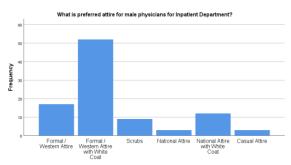
The sample size consisted of 96 patients of which 48 (50%) were male and 48 (50%) were female. The age of respondent included 13 (13%) patients from 18-25 age group, 20 (20.8%) from 26-34 age group, 32 (33.3%) from 35-54 age group, 22 (22.7%) from 55-64 age group and 9 (9.4%) from 65 or above. 39 patients (40.6%) belong to rural area and 57(59.4%) belonged from urban area. As far as employment status is concerned 33 (34.4%) were unemployed, 41 (42.7%) were employed, 4 (4.2%) were retired and 18 (18.8%) fall into other category. Education status wise, 26(27.1%) were illiterate, 24 (25%) had acquired education less than high school, 10 (10.4%) had been to college and 3 (3.1%) had graduated or above.

The patients' preferences were nearly identical for all outpatient, inpatient and emergency departments. For male physicians, formal/western attire with white coat was the most preferred with 53.1% of patients opting for it for outpatient (Fig.2), 54.2% for inpatient (Fig.3) and 49.0% for emergency department (Fig.4). It was followed by formal/western attire at 17.7% for outpatient (Fig.2), 17.7% for inpatient (Fig.3) and 18.8% (Fig.4) for emergency department. Casual attire was the least preferred attire across the board with 4.2% choosing it for outpatient (Fig.2), 3.2% for inpatient (Fig.3) and 4.2% for emergency department (Fig.4).



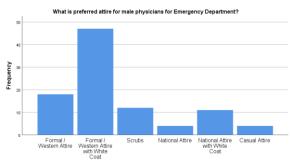
What is preferred attire for male physicians for Outpatient Departmen

Figure 2:



What is preferred attire for male physicians for Inpatient Department'

Figure 3



What is preferred attire for male physicians for Emergency Department

Figure 4

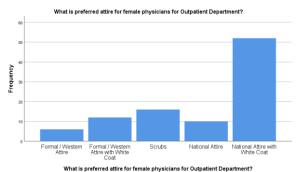


Figure 5

For female physicians, national attire with white coat was picked by the majority of the patients which included 54.2% for outpatient (Fig.5), 57.3% for inpatient (Fig.6) and 58.0% for emergency department (Fig.7). It was followed by scrubs option which had approval rating of 16.7% in

outpatient (Fig.5), 16.7% in inpatient (Fig.6) and 21.9% in emergency department (Fig.7). Casual attire was the least liked with 0% preference in both outpatient (Fig.5) and inpatient (Fig.6) and 1% in emergency department (Fig.7).

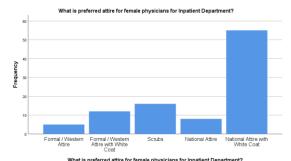
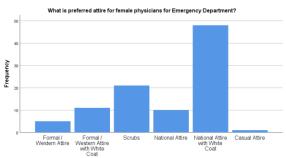


Figure 6



What is preferred attire for female physicians for Emergency Department?

Figure 7

78.1% of patients believed that doctor dress is important to them with only 2.1% patients disagreeing. 63.5% of patients felt that the doctor should wear his name tag. An overwhelming percentage of 84.4 of patients said that their doctor should wear a white coat (Tab.1).

Table 1

Table 1			
	Frequency	Percentage	
My doctor dress is important to me			
Strongly Disagree	0	0	
Disagree	2	2.1	
Neutral	3	3.1	
Agree	16	16.7	
Strongly Agree	75	78.1	
My doctor dresses influence how happy I am with the care I receive			
Strongly Disagree	0	0	
Disagree	2	2.1	
Neutral	6	6.3	
Agree	53	28.1	
Strongly Agree	35	63.5	
My doctor should wear a name tag			
Strongly Disagree	1	1.0	
Disagree	1	1.0	
Neutral	6	6.3	
Agree	27	28.1	
Strongly Agree	61	63.5	
My doctor's clothing is important to generate respect			
Strongly Disagree	2	2.1	
Disagree	8	8.3	
Neutral	12	12.5	
Agree	37	38.5	
Strongly Agree	37	38.5	
My doctor's attire would affect my decision to be treated by him/her?			

Strongly Disagree	4	4.2	
Disagree	40	41.7	
Neutral	16	16.7	
Agree	20	20.8	
Strongly Agree	16	16.7	
The way my doctor dresses reflect	ts his/her kr	nowledge and	
competence?			
Strongly Disagree	2	2.1	
Disagree	16	16.7	
Neutral	23	24.0	
Agree	25	26.0	
Strongly Agree	30	31.3	
My doctor's attire would affect my trust and confidence in him/her?			
Strongly Disagree	1	1.0	
Disagree	1	1.0	
Neutral	11	11.5	
Agree	32	33.3	
Strongly Agree	51	53.1	
My doctor should wear a white coat			
Strongly Disagree	0	0	
Disagree	1	1.0	
Neutral	3	3.1	
Agree	11	11.5	
Strongly Agree	81	84.4	

The patients preferred that their doctors show good care of hygiene with regular laundering. Most of the patients preferred shorter hair length and trimmed nails for male physicians. Tattoos and ear/nose piercings were frowned upon by the patients for male physicians. Longer hair length in female physicians was acceptable by patients.

#### DISCUSSION

It has been showed via previous studies that there are conscious [13,14] and unconscious biases in patients regarding their physician's attire. So, it was not surprising to find out that patients have specific preferences as to what their doctor should wear. White coat is preferred by most of the patients for both their male and female provider (Tab.1) which is consonant with similar studies done regarding this [15,16,17,18,19,20,21]. There is a heterogeneous group of ever-changing preferences regarding this as studies in family practice setup in South Carolina found no predilection [22,23], whereas white coats were preferred in internal medicine and surgical patients in South Carolina and Texas respectively [24,25]. As per Gooden et al [26], patients had a better rapport building with doctors who wore white coats. Similarly, Chae et al [27] reported comparable findings of increased confidence building in patients due to white coats. White coats also aid spotting doctors in a bustling clinical environment in hospitals [26].

Another facet for this white-coat wearing practice is that it has been demonstrated that bacteria and pathogens can be isolated from white coats, neckties and sleeves of medical professionals <sup>[28-36]</sup>. This study has led to "bare below the elbow" (BBE) policy in some countries. On the other hand, data suggests wearing a white coat leads to mere attentiveness to work <sup>[37]</sup>. This information has led to the phenomenon of "enclothed cognition" <sup>[38]</sup>. As a result, a doctor wearing white coat may be more particular about his hygiene <sup>[39,40]</sup>.

A study done by Ridd et al.,<sup>[41]</sup> shows that consultation experience is a fundamental pillar of doctorpatient interaction. The physician's attire as a modifiable variable, can help in enhancement of this relation. There

was not much discrepancy among different age groups and sex regarding attire preferences. Therefore, recommendations cannot be made in future for single-sex wards. Patients preferred their doctors to wear daily laundered clothes which could also help in curbing spread of infection.

Western attire with white coat was mostly preferred for male physicians (Fig.2,3,4). One reason can be that it conveys authority and inspires more trust among patients. Casual dressing was least opted for as this ungroomed appearance can be linked with less competence by patients (Fig.2,3,4). National attire with white coat was preferred for female physicians by the vast majority of the participants (Fig.5,6,7). This can be explained by the religious inclination of the patients which translated to preferring conservative dressing for the female doctors.

The limitations of this study include just one hospital surveyed over brief period of time which could lead to bias. Second, patients, who were receiving care were asked to participate in this study which can lead to a possibility that these predispositions were more about current care rather than attire. Other dynamics of doctor-patient relationship were not studied which could have further helped in eliciting more accurate data [42]. Furthermore, Likert scale was used which ranges from strongly disagree to strongly agree. On one hand, it is a good tool but on the other it is restrictive in understanding patient's actual sentiments. Similarly, patients were shown pictures of physicians who were young and slender which can lead to bias in responses.

Further research work is warranted so that more facets can be studied. A large sample size should be used so there is minimum introduction of bias. Attire for specific specialties can also be investigated. Scrubs were not much preferred by patients which could be due to less awareness among patients of Pakistan which is a third world country. Education of patients and then re-assessing their predilections could yield different results. Alternative options including bare below elbows can be explored. Improved technologies namely antimicrobial fabrics is one another fascinating aspect to be assessed.

Long story short, clinical acumen remains unmatched in treating patients, but a doctors' apparel can go a long way in establishing trust and cementing a harmonious dynamics between a healthcare provider and the patient. In the ever-evolving field of medicine where treatment is being tailored towards each patient's individual needs, a provider's garb is an easily adjustable but a significant element to be considered in this matter. Implementation of such patient's preferred attires in clinical and emergency setting can ultimately reflect as more refined and upgraded healthcare services.

# **CONCLUSION**

Patients prefer their healthcare provided to dress professionally with good grooming habits. A white coat along with name tag is favored by patients. Western attire with white coat is preferred for male doctors while national attire with white coat is fancied for female doctors by patients. This can help inculcate confidence in patients regarding their physician's proficiency, which could help in improving healthcare services in the long run.

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Conflict of interest: None

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