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Original Research Paper

Doctors on Screen: How Medical Dramas Influence Early Career Doctors

Ratnasooriya, S.G., Karunatilake, H.

Abstract

Introduction: Medical dramas are an increasingly popular form of entertainment worldwide. They depict intense decision making, hospital team dynamics, and also ethical dilemmas. For doctors in their early career, such portrayals may influence professional identity, affect specialty interests and even work place behaviour.

Methods: We conducted a descriptive cross sectional survey in February 2025 among 120 early-career doctors (interns, resident house officers and registrars) at the National Hospital of Sri Lanka. A piloted anonymous questionnaire was used to collect demographic details, viewing patterns, self-reported influence on career orientation and behaviour. Descriptive statistics and chi squared tests were used for data analysis.

Results: Participants' mean age was 29 years (SD=2.3); and 54.2% were females. Most (79.2%) were regular viewers, out of which 68.2% were first exposed to medical dramas during undergraduate training. 33.3% reported that medical dramas had influenced their specialty interest. Behavioural modelling, particularly in communication and reasoning was reported by 30.8%, more often among surgical than non-surgical trainees (40.0% vs 21.7% p=0.04). No association was found between viewing frequency and final specialty choice (p=0.7). Majority (78.3%) felt inspired and motivated by these programmes.

Conclusion: Medical dramas may not directly determine career paths, but potentially foster specialty interest and shape aspects of clinical behaviour. Guided reflection within the medical curriculum could help ensure that such influences are realistic and ethical.

Keywords: Medical dramas, Career choice, Clinical behavior, Early career doctors, Media influence, Sri Lanka

Introduction

Media and Professional Identity formation

Media being more than simply entertainment can be a formative socialising force. Bandura's Social Cognitive Theory describes how behaviours are learnt by people not just from direct experiences but also by observing role models - including fictional characters (Bandura,1977). Among medical professionals, portrayals of doctors on screen can act as symbolic mentors. This would particularly be relevant for students and junior doctors whose professional identities are yet to fully evolve.

Medical Dramas and the Informal Curriculum

Much of what is learnt in medicine happens outside formal teaching. Hafferty's "hidden curriculum" concept captures these informal

National Hospital of Sri Lanka, Sri Lanka

Corresponding author: Dr. S.G. Ratnasooriya
Email: sgratnasooriya@gmail.com

influences, which may reinforce or conflict with official training (Hafferty,1988). Medical dramas are a part of this space, presenting stylised versions of clinical encounters, specialty cultures, and ethical dilemmas. While studies show that they can inspire and model positive behaviours (Balasco & Moreto,2012; Czarny et al., 2010; Flores,2002; Pfau *et al.,* 1995; Weaver & Wilson, 2007), concerns have also risen regarding distortion of expectations and normalised unprofessional conduct (Blasco & Moreto, 2012; Flores,2002).

Sri Lankan Context

In Sri Lanka, entry into medicine is based on the fiercely competitive advanced level examination. Training includes a five year undergraduate course followed by an internship of 1 year. Many students watch medical dramas, well before any real-world clinical exposure, potentially allowing fictional portrayals to shape views before facing the reality. However, research with regard to this in South Asia is scarce.

This study investigates whether medical dramas influence specialty preferences and clinical behaviour among early-career doctors in Sri Lanka, and whether there is a difference between doctors in surgical and non surgical career tracts.

Methods

Study design and Setting

A descriptive cross sectional study was carried out in February 2025 at the National Hospital of Sri Lanka.

Results

Participants

Participants included interns, post interns and registrars within three years of graduation, who were working at National Hospital of Sri Lanka at the time of the study. A convenience sampling method was used where all eligible participants were invited to participate via institutional WhatsApp groups which include the intern House Officers' group, Relief House Officers' group and 1st year Registrars' groups. No exclusion criteria were applied beyond the eligibility window. Participation was voluntary and anonymous.

Study Instrument

An 18 item questionnaire was developed based on targeted literature review and input from senior medical educators. It covered demographics, viewing patterns, career influence, and behavioural influence. Content validity was assessed by 3 senior medical educators, and 10 early career doctors piloted the questionnaire for clarity assessment.

Definitions

Regular viewer: has watched at least one hour of medical dramas per week during one year

Behavioural modelling: has adapted behaviours portrayed in these dramas to clinical practice.

Data Collection and analysis

The anonymous, self-administered questionnaire was created using Google Forms. The survey link was shared with all the eligible participants through the above mentioned WhatsApp groups. Participants could reply at their convenience within 2 weeks. Completion of the form was taken as implied consent.

Data was exported into SPSS (version 27) for analysis. Descriptive statistics was used to summarise demographic variables and viewing patterns. Associations within the categorical variables were assessed using chi-squared tests, where significance was set at $p < 0.05$.

Ethical Clearance

Approval was granted by the Ethics Review Committee of the National Hospital of Sri Lanka.

Table 1: Participant profile and viewing habits

Characteristic	n	%
Mean age (years)	29.0±2.3	—
Female	65	54.2
Regular viewers	95	79.2
First exposure – undergraduate	82	68.4
First exposure – pre-medical	17	14.2

Table 2: Most frequently watched medical dramas

Rank	Series	Viewers (n)	% of Regular Viewers
1	*House MD*	49	51.6
2	*The Good Doctor*	35	36.8
3	*Grey's Anatomy*	34	35.8
4	*Hospital Playlist*	14	14.7
5	*Dr. Romantic*	14	14.7

Table 3: Reported impact on career and behaviour

Impact reported	Yes (n)	%
Career orientation influenced	40	33.3
Behaviour modeling reported	37	30.8
Motivation increased	94	78.3

Table 4: Behavioural modelling by specialty stream

Career track	Behaviour Modelling reported n (%)	Behaviour Modelling Not reported n (%)	p-value
Surgical (n=60)	24 (40.0)	36 (60.0)	0.04
Non-surgical (n=60)	13 (21.7)	47 (78.3)	

Table 5: Career and behavioural influence by gender and training stage

Variable	Career influence (%)	Behaviour modelled (%)
Male (n=55)	34.5	32.7
Female (n=65)	32.3	29.2
Intern (n=40)	35.0	32.5
Post-intern (n=50)	32.0	28.0
Registrar (n=30)	33.3	31.0

Discussion

This study set out to explore whether medical dramas hold a significant effect over the self-reported specialty choices and clinical behaviours of Sri Lankan early career doctors currently employed at a tertiary care center (National Hospital of Sri Lanka). While a third of respondents acknowledged that these programmes had shaped their specialty interest, an equally important observation was that such influence was not tied to the viewing frequency. What did emerge however was a meaningful association between surgical career orientation and the tendency to model behaviours seen on screen.

This may be explained using the Social cognitive theory which describes that learning often happens through observation, particularly where the observer perceives the model as being skilled, confident and also successful. Many medical dramas present surgeons in this manner - decisive and technically adept. For trainees who are still forming their professional identity, these portrayals may act as powerful reference points. This sits comfortably alongside Hafferty's notion of the "hidden curriculum", where values and professional norms are picked up informally rather than through explicit introduction (Hafferty;1998).

When regarding these findings alongside work from other countries, certain patterns become clearer. In the United States of America, Czerny and colleagues found that dramas influenced perceptions of professionalism and ethical decision making (Czarny *et al.,* 2010). Australian research suggested that such shows could encourage both admiration for certain specialities and imitation of the observed behaviors (Weaver & Wilson, 2011). In Turkey researchers described a similar tension where students were motivated by what they saw, but were also exposed to ethically questionable practices that were unchallenged on screen (Ozcakar et al. 2015). Studies from South Korea and Japan show comparable trends, particularly the role of domestic dramas in reinforcing the appeal for surgical fields (Kato et al, 2015; Kim & Park, 2017).

In this Sri Lankan study respondents reported a high level of motivational impact (nearly 80%) and this should not be underestimated. In a demanding trainee period, moments of inspiration can be sustaining. At the same time this shows that unfiltered media influence can carry certain risks such as oversimplified depictions of complex care, an emphasis of dramatic interventions over everyday medicine, and normalisation of breaches in consent or confidentiality. Prior analyses of popular dramas have shown such lapses in ethics concerning regularity (Ozcakar et al. 2015).

Yet with structured debriefing, students can learn to separate drama from reality. This is an approach consistent with narrative medicine which uses stories to foster empathy and reflective practice (Charon,2001). Media

literacy training would be a logical complement, which would equip future doctors to critically assess any professional role model they encounter both fictional and otherwise.

Strengths and limitations

This study contributes to a somewhat underexplored area in South Asian Medical Education, with a balanced sample enabling meaningful subgroup comparisons. However, relying on self-reported data carries the possibility of recall bias. The cross sectional design prevents causal conclusions. Generalisability is limited by the use of convenience sampling.

Future Research

Longer term studies, perhaps tracking cohorts from medical school into early clinical practice could be used to shed light on how media influence can affect early career doctors. Comparative work examining the portrayals of specialities including subspecialties across different subspecialties across different countries would also be valuable.

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