

Cutting Edge Education: "Digital Foot Prints: Social Media Use and E-professionalism among Health Care Students in Khammam City"

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Original Article

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ABSTRACT

In the digital age, social media plays a significant role in shaping the professional image of healthcare students. This study explores the impact of digital footprints on e-professionalism among healthcare students in Khammam City. By analyzing social media usage patterns, online behavior, and perceptions of professionalism, the research aims to assess how students manage their online presence and its implications for their future careers. A survey-based approach was used to collect data from healthcare students, focusing on their awareness of digital footprints, ethical considerations, and the influence of social media on professional identity. The findings highlight the need for responsible online engagement and digital literacy training to ensure a positive and professional online presence. This study emphasizes the importance of balancing personal and professional digital interactions to maintain credibility and integrity in the healthcare sector.

Aim: To assess the impact of digital footprints on e-professionalism among healthcare students in Khammam City.

Objectives

To assess the social media use habits and online behaviours of health care students based on age.

To assess the perception of undergraduate dental students on social media use habits and online behaviour based on year of study.

Method: A cross-sectional survey was conducted among 205 dental students, comprising 90 males (43.9%) and 115 females (56.1%), including. The survey included 10 questions exploring social media use and e-professionalism among healthcare students were analyzed based on gender, age, and year of study using chi-square tests to identify statistically significant differences.

Keywords: Digital Footprints, Digital Identity, E-Professionalism, Healthcare Students, Online Behavior, Professionalism in Healthcare, Social Media Usage.

Introduction

In the modern digital era, social media has become an integral part of everyday life, influencing personal interactions, academic pursuits, and professional development. Healthcare students, like other professionals in training, engage with various digital platforms, creating an online presence that reflects their personal and professional identities. While social media offers benefits. including networking numerous opportunities, access to educational resources, and professional engagement, it also raises concerns about digital footprints and e-professionalism. The concept of digital footprints refers to the traces of online activities left by users, including posts, comments, shared content, and interactions. These footprints can have long-term consequences, shaping an individual's reputation, employability, and credibility in the healthcare sector.

E-professionalism refers to the ethical and professional conduct of individuals in the digital space, particularly in professions that demand high ethical standards, such as healthcare. As future medical professionals, healthcare students are expected to uphold principles of integrity, confidentiality, and respect, both offline and online. However, the widespread use of social media presents challenges in maintaining these standards. Inappropriate posts, unverified medical opinions, privacy breaches, or unprofessional conduct on digital platforms can lead to reputational damage and even legal consequences. Many students may not be fully aware of the longterm impact of their online actions, making digital literacy and professional social media use essential components of their education.

This study focuses on healthcare students in Khammam City, analyzing their social media usage patterns, awareness of digital footprints, and understanding of e-professionalism. The research aims to explore whether students actively manage their online presence, the extent of their knowledge regarding digital ethics, and the role of educational institutions in guiding them toward

responsible social media practices. By identifying gaps in awareness and potential risks, this study seeks to emphasize the need for digital professionalism training to prepare students for their future roles in the healthcare industry.

In an era where recruiters, employers, and professional organizations increasingly review online profiles, it is crucial for healthcare students to recognize the significance of responsible online behavior. A well-managed digital footprint can enhance career prospects, build trust with patients and colleagues, and reflect a strong professional identity. On the other hand, careless online activities may lead to negative consequences, affecting both personal growth and professional credibility.

Therefore, this study will provide valuable insights into the relationship between social media use and e-professionalism, highlighting the importance of digital responsibility and ethical conduct among healthcare students. By fostering awareness and encouraging responsible online engagement, the research aims to contribute to the development of a digitally literate and ethically aware future healthcare workforce.

Methodology

- **A) Study Design and Area:** A cross-sectional study was carried out at the tertiary care teaching hospital Khammam.
- **B) Study Population:** The health care students including those first-year to internship dental students who responded to the offline paper print questionnaire survey.
- C) Study Instrument: A self-administered questionnaire was designed based on SOCIAL MEDIA USE AND E- PROFESSIONALISM AMONG HEALTH CARE STUDENT had a total of 10 questions. Each participant has to fill in their demographic data like Name, age, and year of study. Participants have to select one option from the answers provided against questions and the questions were based on social media use and e-professionalism among healthcare students.

- **D) Pilot Study:** A pilot study was conducted on a group of students to assess the validity and reliability of the study.
- **E) Sampling Method:** The sampling method used is a convenience method
- **F)** Inclusion Criteria: The students who were interested in the study and who are willing to participate
- **G)** Exclusion Criteria: students who are not willing to participate are excluded
- **H)** Organizing the Study: The study was designed in a paper-based version of the self-administered questionnaire of 1w questions focusing on knowledge, awareness.

Includes the sections of demographic data: Name, Age, Sex, and Year of study demographic information and asked to answer all questions by selecting one option from the provided answers.

I) Statistical Analysis: Data from the filled questionnaire was conducted in a tabular form in an Excel worksheet and evaluated for analysis. The analysis was performed by SSPS version 29.

Results

A total of 205 students took part in this with females (56.1) and males (43.9). Age of the participants ranging from 18-25 years. In this study, females were more likely to demonstrate perception in dissection room experiences than males. Significantly fourth years showed greater familiarity with advanced applications than first, second, third year, and intern students.

	N	Minimum	Maximum	Mean	Std. Deviation
Age	205	18	25	21.58	1.393

Gender	Frequency	Percent
Male	90	43.9
FEMALE	115	56.1
Total	205	100.0
Year of Study	Frequency	Percent
I BDS	43	21.0
II BDS	22	10.7
III BDS	40	19.5
IV BDS	60	29.3
INTERNS	40	19.5
Total	205	100.0

Distribution and comparison of responses based on gender

Item	Response	Male	es	Fema	les	Chi-Square	P-value
		n	%	n	%	value	
Q1	1	29	32.2	35	30.4	0.346	0.05"
	2	41	45.5	65	56.5		
	3	15	16.6	10	8.6		
	4	5	5.5	5	4.3		
Q2	1	11	23.9	35	76.1	14.247	0.003*
	2	43	45.3	52	54.7		

	3	17	47.2	19	52.8		
	4	19	67.9	9	32.1		
Q3	1	34	34.3	60	65.7	12.865	0.06
	2	20	67.5	13	32.5		
	3	21	42.9	28	57.1		
	4	8	47.1	9	52.9		
	5	5	5.5	3	2.6		
	6	2	2.2	2	1.7		
Q4	1	41	42.3	56	57.7	0.275	0.857
	2	22	46.8	25	53.2		
	3	22	44.3	32	55.7		
	4	5	5.5	2	1.7		
Q5	1	26	44.1	33	55.9	4.609	0.330
	2	20	33.9	39	66.1		
	3	22	50	22	50		
	4	11	45.8	13	54.2		
Q6	1	42	44.7	52	55.3	3.278	0.351
	2	48	55.8	63	44.2		
Q7	1	36	40	54	60	6.154	0.05*
	2	28	59.6	19	40.4		
	3	26	38.2	42	61.8		
	4	0	0	0	0		
Q8	1	18	31.6	39	68.4	6.104	0.04*
	2	30	54.5	25	45.5		
	3	42	45.2	51	54.8		
Q9	1	33	35.9	59	64.1	8.954	0.030*
	2	57	63.3	56	48.6		
Q10	1	41	43.2	54	56.8	0.172	0.918
	2	39	39.0	61	61.0		

P≤0.05 is statistically significant

Distribution and comparison of responses based on year of the study

Ite m	Resp onse	I BD	S		II BDS	III	BDS	IV BDS		S INTE RN		Chi- Val ue	P- Valu e
		n	%	n	%	n	%	n	%	n	%		
Q1	1	10	23.2	6	27.2	1	37.5	1	18.3	10	25	3.335	0.35
						5		1			.0		5
	2	23	53.4	12	54.5	2	50.0	3	58.3	23	57		
						0		5			.5		
	3	8	18.6	3	13.6	3	7.5	1	16.6	5	12		
								0			.5		
	4	2	4.6	1	4.5	2	5.0	4	6.6	2	5.		
											0		
Q2	1	3	6.5	3	6.5	4	8.7	2	50	13	28	33.754	0.01*

								3			.3		
	2	23	24.2	9	9.5	2	24.2	2	28.4	13	13		
						3		7			.7		
	3	10	27.8	8	22.2	6	16.7	7	19.4	5	13		
	,	_	0 =		- 1	_	0 =		40.	0	.9		
	4	7	25	2	7.1	7	25	3	10.7	9	32 .1		
Q3	1	20	20.2	10	10.1	2	20.2	2	28.3	21	21	13.774	0.31
Q3	1	20	20.2	10	10.1	0	20.2	8	20.5	21	.2	15.771	5
	2	7	17.5	4	10	8	20	1	45	3	7.		
								8			5		
	3	11	22.4	8	16.3	8	16.3	1	22.4	11	22		
					_			1		_	.4		
	4	5	29.4	0	0	4	23.5	3	17.6	5	29		
	5	0	0	0	0	0	0	0	0	0	.4 0		
	6	0	0	0	0	0	0	0	0	0	0		
Q4	1	19	19.6	11	11.3	1	19.6	2	29.9	19	19	5.658	0.68
~.	_		27.0		11.0	9	27.0	9			.6	2.230	5
	2	13	27.7	4	8.5	1	23.4	1	29.8	5	10		
						1		4			.6		
	3	11	18	7	11.5	1	16.4	1	27.9	16	26		
						0		7			.2		
0.7	4	0	0	0	0	0	0	0	0	0	0	10.000	2.2.4
Q5	1	15	25.4	6	10.2	1 0	16.9	1 5	25.4	13	22	19.393	0.24 9
	2	7	11.9	9	15.3	1	23.7	2	33.9	9	15		9
		,	11.7	,	13.3	4	23.7	0	33.7	,	.3		
	3	8	18.2	3	6.8	1	25	1	31.8	8	18		
						1		4			.2		
	4	5	20.8	2	8.3	1	4.2	8	33.3	8	33		
											.3		
Q6	1	17	18.1	13	13.8	1	13.8	3	31.9	21	22	10.726	0.55
	2	12	30.8	2	5.1	3	20.5	0	28.2	6	.3 15		3
		12	30.0		5.1	O	20.3	1	20.2	J	.4		
Q7	1	19	21.1	8	8.9	1	13.3	2	31.1	23	25	8.799	0.36
						2		8			.6		0
	2	12	25.5	6	12.8	9	19.1	1	27.7	7	14		
								3			.9		
	3	12	17.6	8	11.8	1	27.9	1	27.9	10	14		
	4	0	0	0	0	9	0	9	0	0	.7 0		
Q8	1	12	21.1	6	10.5	1	19.3	2	36.8	7	12	11.620	0.16
QU	1	12	21.1	U	10.5	1	17.3	1	30.0	,	.3	11.020	9
	2	12	21.8	10	18.2	1	23.6	1	18.2	10	18		
						3		0			.2		
	3	19	20.4	6	6.5	1	17.2	2	31.2	23	24		
						6		9			.7		
Q9	1	19	20.7	7	7.6	1	18.5	2	30.4	21	22	5.445	0.94

						7		8			.8		1
	2	11	28.2	4	10.3	8	20.5	1	25.6	6	15		
								0			.4		
Q10	1	13	13.7	13	13.7	1	20	3	32.6	19	20	11.583	0171
						9		1					
	2	19	35.2	4	7.4	1	20.4	1	22.2	8	14		
						1		2			.8		

P≤0.05 is statistically significant

Discussion

The study assessed social media usage, online e-professionalism behaviour. and among healthcare students in Khammam city. The demographic analysis revealed that participants were primarily between 18 and 25 years old, with a slight female majority (56.1%). Students from all academic levels, including interns, were included. Most students used social media daily, with Instagram and Facebook being the most preferred platforms. The primary reasons for social media use varied, including staying connected with friends, following news, and engaging in educational activities. However, profession networking was less common. The results indicated a moderate awareness professionalism. While a significant portion of students acknowledged the importance of maintaining a professional online presence, some lacked formal education on the subject. A considerable percentage expressed interest in incorporating e-professionalism into the dental curriculum. There was a split in opinions regarding sharing patient-related content online, indicating a need for stricter ethical guidelines. Additionally, a notable number of students had experienced online harassment, which raises concerns about digital safety in professional spaces. Some participants also admitted to posting content they later regretted, reinforcing the need for guidance on digital professionalism.

Conclusion

The study highlights the prevalent use of social media among healthcare students and the varying levels of awareness regarding e-professionalism. While students recognize the importance of maintaining a professional online identity, formal

education on the subject is limited. Integrating eprofessionalism training into the healthcare curriculum could enhance students' understanding of digital ethics, online behavior, and professional conduct. Additionally, promoting awareness about online safety and responsible social media usage is essential for fostering a more professional and secure digital presence among healthcare students.

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