

# ORIGINAL ARTICLE

## Özgün Araştırma

Correspondence address  
Yazışma adresi

**Cicek HOCAOGLU**  
Recep Tayyip Erdogan University,  
Faculty of Medicine,  
Department of Psychiatry,  
Rize, Türkiye  
cicekh@gmail.com

Geliş tarihi / Received : April 19, 2023  
Kabul Tarihi / Accepted : September 11, 2023  
E-Yayın Tarihi / E-Published : May 01, 2024

Cite this article as  
Bu makalede yapılacak atf

**Pusuroglu M, SoyTURK K, Hocaoglu C.**  
Examining the Attitudes of Patients who  
Apply to a Training and Research Hospital  
Psychiatry Outpatient Clinic towards  
Physicians' Attire and Gender

Akd Med J 2024;10(2): 328-335

**Meltem PUSUROGLU**  
Recep Tayyip Erdogan University,  
Faculty of Medicine,  
Department of Psychiatry,  
Rize, Türkiye

ORCID ID: 0000-0002-1970-3262

**Koray SOYTURK**  
Recep Tayyip Erdogan University,  
Faculty of Medicine,  
Department of Psychiatry,  
Rize, Türkiye

ORCID ID: 0000-0001-7008-6928

**Cicek HOCAOGLU**  
Recep Tayyip Erdogan University,  
Faculty of Medicine,  
Department of Psychiatry,  
Rize, Türkiye

ORCID ID: 0000-0001-6613-4317

## Examining the Attitudes of Patients who Apply to a Training and Research Hospital Psychiatry Outpatient Clinic towards Physicians' Attire and Gender

### Bir Eğitim ve Araştırma Hastanesi Psikiyatri Polikliniğine Başvuran Hastaların Hekimlerin Giyimine ve Cinsiyetine Yönelik Tutumlarının İncelenmesi

#### ABSTRACT

##### Objective:

In this study, the preferences of patients who applied to the psychiatric outpatient clinic regarding physicians' appearance and gender were examined.

##### Material and Methods:

A total of 403 patients who applied to the Rize Training and Research Hospital Psychiatric Outpatient Clinic were included in the study. All participants were given a questionnaire that we prepared, which included photos of their physicians' clothing and questions about their appearance and gender.

##### Results:

Of the patients included in the study, 296 (73.4%) were female and 107 (26.6%) were male. The most preferred attire style by patients for both male and female physicians was the white coat. It was found that only the patient's gender had an effect on the choice of physician gender ( $p=0.006$ ). Being female increased the likelihood of choosing a female physician by 3.506 times. It was concluded that other independent variables did not have an effect on the choice of physician gender.

##### Conclusion:

Although there are studies reporting that patients do not attach importance to the appearance of their physicians, they still mostly prefer the white coat. It can be said that the white coat still retains its place as a garment representing medicine and physicians, as it did in ancient times, and is also preferred by patients with mental disorders. In the case of physician gender preference, the preference of female patients for female physicians can be explained by societal values and judgments.

##### Key Words:

Physician, Patient-relationship, Attire, Gender

## ÖZ

### Amaç:

Bu çalışmada, psikiyatri polikliniğine başvuran hastaların, hekimlerin görünümü ve cinsiyetine yönelik tercihleri incelenmiştir.

### Gereç ve Yöntemler:

Çalışmaya Rize Eğitim ve Araştırma Hastanesi Psikiyatri polikliniğine başvuran 403 hasta dahil edilmiştir. Tüm katılımcılara hekimlerinin giyimleri ile ilgili, içerisinde fotoğraflar bulunan ve hekimlerin görünüşleri, cinsiyetleri ile ilgili sorular içeren tarafımızca hazırlanmış bir anket formu uygulanmıştır.

### Bulgular:

Çalışmaya dahil edilen hastaların 296'sı (%73,4) kadın, 107'si (%26,6) erkektir. Hastaların hem erkek hekimde hem de kadın hekimler için en çok tercih ettiği giyim tarzı beyaz önlük olmuştur. Hastaların hekim cinsiyet seçimine sadece hasta cinsiyetinin etkili olduğu saptanmıştır ( $p=0.006$ ). Hastanın cinsiyetinin kadın olması kadın hekim seçme oranını 3,506 kat artırmaktadır. Diğer bağımsız değişkenlerin hekim cinsiyetinin seçimine etkisi olmadığı sonucu elde edilmiştir.

### Sonuç:

Hastaların hekimlerinin görünüşlerinin önemi olmadığını bildirdiği çalışmalar olsa da hastalar yine de en çok beyaz önlüğü tercih etmektedirler. Beyaz önlüğün eski çağlarda olduğu gibi hala hekimliği ve hekimleri temsil eden bir giysi olarak yerini koruduğu, ruhsal bozuklukları olan hastaların da tercihi olduğu söylenebilir. Hekimin cinsiyeti seçiminde ise kadın hastaların kadın hekimleri tercih etmeleri toplumsal değer yargıları ile açıklanabilir.

### Anahtar Kelimeler:

Hekim, Hekim-hasta ilişkisi, Giysi, Cinsiyet

## INTRODUCTION

Although medicine is a scientific discipline that serves humanity in terms of health, it is also a field with a social aspect. Medicine has been serving humanity since ancient times and being a multidisciplinary field, is based on the communication established between the patient and physician (1). Diseases, treatment methods, medications, and the role of physicians have all changed over time. However, the importance of the patient-physician relationship has always been preserved. The human relationship between patients and physicians plays an important role in the treatment process (2).

There are many factors that affect the doctor-patient relationship. Some of these factors may originate from the patient, some from the system, and some from the physician. However, important basic elements that apply to any form of communication involving humans are also applicable to this relationship. Factors such as mutual trust, communication skills, appearance, environment, illness anxiety, time, and many others can affect the quality of this relationship (3). Nonverbal communication is as important as verbal communication in the communication process. There are many nonverbal communication factors such as body language, tone of voice, clothing, appearance, eye contact, etc. which can have a positive or negative impact on the doctor-patient relationship (4). The treatment process can be negatively affected as a result of an improper doctor-patient relationship. The patient may not trust the physician, sufficient medical history may not be obtained, or the treatment process may be negatively affected by unresolved issues (5). While this is a valid situation for every medical discipline, it becomes a particularly noteworthy issue in fields such as psychiatry, where communication is even more crucial. There are studies in the literature regarding patients' preferences for their physicians' attire. Numerous studies have been conducted in various medical fields to investigate patients' attitudes and preferences towards their physicians' attire and gender, yielding conflicting results (6-9).

However, the number of studies examining patients with mental illness' attitudes towards their physicians' attire and gender is limited. Psychiatric patients are a group in which the patient-physician relationship is important. For this reason, it is thought that the clothing styles of physicians may be important. We also think that the white coat still has an important role in medicine. In our research, it was hypothesised that psychiatric patients would prefer white coats. The aim of this study is to contribute to the literature by examining the attitudes of patients seeking treatment in a psychiatric outpatient clinic towards their physicians' attire and gender.

## MATERIAL and METHODS

The study included 403 patients who applied to the adult psychiatry outpatient clinic between March 2022 and June 2022. Patients who met the inclusion and exclusion criteria and gave consent to participate in the study were first informed about the study, and their verbal consent was obtained. Then, a written consent form was filled out. Patients over the age of 18, who applied to Psychiatric Outpatient Clinics for examination and treatment and who agreed to participate in the study were included in the

study. Being in an acute manic or psychotic state, being diagnosed with dementia or mental retardation, being visually and/or hearing impaired, and not giving consent to participate in the study were determined as exclusion criteria. There were no patients who refused to participate or were excluded from the study. Questionnaires containing socio-demographic and clinical characteristics prepared by us were given to the patients, and they were asked to mark the most appropriate option for themselves. The questionnaire includes pictures representing four female physicians and four male physicians (Figure 1).



**Figure 1.** Male and female physician clothing models in the questionnaire

Patients were asked separately about their preferences for the attire of female and male physicians and which physician they would feel more comfortable communicating with. Additionally, patients were also asked about their preference for which gender of physician they would like to receive medical examination from. Prior to the study, approval was obtained from the non-interventional ethics committee Recep Tayyip Erdoğan University (Ethics Committee No: 2022/58).

Throughout the study, compliance with the 1964 Helsinki Declaration and subsequent regulations was ensured. All the participants' rights were protected and written informed consents were obtained.

## Statistical Analysis

The research data was loaded into a computer environment via "SPSS (Statistical Package for Social Sciences) for Windows 25.0 (IBM Corp, Armonk, N.Y. USA)" and evaluated. Descriptive statistics were presented as mean  $\pm$  standard deviation, frequency distribution, and percentage. The normal distribution of the variables was examined using visual methods (histograms and probability plots) and analytical methods (Kolmogorov-Smirnov test/Shapiro-Wilk test). Chi-square test was applied for the evaluation of categorical variables. A binary logistic regression model was established with independent variables that explain the categorical dependent variable. The statistical significance level was accepted as  $p < 0.05$ .

## RESULTS

A total of 403 patients who met the inclusion criteria for the study were included. Of these, 296 (73.4%) were female and 107 (26.6%) were male. The mean age of female patients was 33.05±9.88, while that of male patients was 34.84±9.76. The socio-demographic data of the patients were presented in Table I.

**Table I:** Sociodemographic characteristics of the patients

	Min.	Max.	Mean±SD
<b>Age</b>	18	73	34.14±10.5
<b>Male</b>	18	62	34.84±9.76
<b>Female</b>	18	73	33.05±9.88
<b>Illness Duration</b>	0	26	3.08±4.3
	<b>n</b>	<b>%</b>	
<b>Gender</b>			
<b>Female</b>	296	73.4	
<b>Male</b>	107	26.6	
<b>Marital Status</b>			
<b>Married</b>	240	59.6	
<b>Single</b>	137	34	
<b>Divorced</b>	21	5.2	
<b>Widow</b>	5	1.2	
<b>Region</b>			
<b>Country</b>	84	20.8	
<b>City</b>	319	79.2	
<b>Education</b>			
<b>Primary School</b>	113	28	
<b>Highschool</b>	145	36	
<b>University</b>	132	32.8	
<b>Postgraduate</b>	13	3.2	
<b>Occupation</b>			
<b>Unemployed</b>	192	47.6	
<b>Worker</b>	67	16.6	
<b>Officer</b>	42	10.4	
<b>Student</b>	52	12.9	
<b>Retired</b>	9	2.2	
<b>Others</b>	41	10.2	
<b>Total</b>	403	100	

ures of male and female physicians with different attire including casual wear, uniform, formal wear, and white coat were separately shown to the patients in the questionnaire form. An option for “not important” was also included. Patients mostly chose the “not important” option for their thoughts on physicians’ attire for both genders, and these rates were shown in Table II. Of all patients, 119 (29.5%) preferred white coats for male physicians, while 136 (33.7%) preferred white coats for female physicians. There was no statistically significant difference found in the preferences of female and male patients regarding the attire of female physicians (p=0.217). However, female patients preferred white coats for male physicians at a significantly higher rate than male patients (p=0.010). Two hundred eleven patients (52.4%) preferred female physicians, while 41 (10.2%) preferred male physicians, and 151 (37.5%) stated that the gender of the physician was not important. The physician gender preferences of patients were found to be significantly different based on the patients’ genders (p=0.020). Female patients statistically significantly preferred female physicians more, while male patients preferred male physicians (Table II).

A logistic regression model was established with gender, age, education, marital status, and occupation as independent variables to explain the dependent variable of physician gender preference of patients. Only the gender of patients among the independent variables was found to have an effect on physician gender preference (p=0.006). Having a female gender increases the likelihood of choosing a female physician by 3.506 times. No effect of the other independent variables on physician gender preference was found (Table III).

**Table II:** Gender and clothing preferences in the physicians of female and male patients

		Female patient(n=296)		Male patient(n=107)		Total(n=403)		p
		n	%	n	%	n	%	
<b>Gender of the Physicians</b>	<b>Male</b>	24 <sup>a</sup>	8.1	17 <sup>b</sup>	15.9	41	10.2	<b>0.020</b>
	<b>Female</b>	170 <sup>a</sup>	57.4	41 <sup>b</sup>	38.3	211	52.4	
	<b>No matter</b>	102 <sup>a</sup>	34.5	49 <sup>b</sup>	45.8	151	37.5	
<b>Clothing Preferences (Male Physicians)</b>	<b>Sports wear</b>	21 <sup>a</sup>	7.10	11 <sup>a</sup>	10.30	32	7.90	<b>0.010</b>
	<b>Uniform</b>	56 <sup>a</sup>	18.90	22 <sup>a</sup>	20.60	78	19.40	
	<b>Formal wear</b>	9 <sup>a</sup>	3.00	11 <sup>b</sup>	10.30	20	5.00	
	<b>White coats</b>	97 <sup>a</sup>	32.80	22 <sup>b</sup>	20.60	119	29.50	
	<b>No matter</b>	113 <sup>a</sup>	38.20	41 <sup>a</sup>	38.30	154	38.20	
<b>Clothing Preferences (Female Physicians)</b>	<b>Sports wear</b>	11	3.70	9	8.40	20	5.00	<b>0.217</b>
	<b>Uniform</b>	29	9.80	15	14.00	44	10.90	
	<b>Formal wear</b>	18	6.10	7	6.50	25	6.20	
	<b>White coats</b>	102	34.50	34	31.80	136	33.70	
	<b>No matter</b>	136	45.90	42	39.30	178	44.20	

chi square. p<0.05

<sup>a-b</sup>: differences between groups

**Table III:** Logistic regression modelling of factors affecting patients' gender preferences

	B	Wald	Exp(B)	95%		p value
				Lower	Upper	
<b>Gender(female)</b>	1.254	7.683	3.506	1.444	8.511	<b>0.006*</b>
<b>Marrital status(married)</b>		1.157				0.763
<b>Single</b>	-0.386	0.689	0.68	0.273	1.691	0.407
<b>Divorced</b>	-0.61	0.683	0.543	0.128	2.308	0.408
<b>Age</b>	0.005	0.055	1.005	0.961	1.052	0.814
<b>Education(primary school)</b>		0.432				0.934
<b>High school</b>	-0.266	0.294	0.767	0.294	2.002	0.588
<b>University</b>	-0.328	0.358	0.72	0.246	2.108	0.549
<b>Postgraduate</b>	-0.093	0.006	0.911	0.08	10.361	0.940
<b>Occupation(unemployed)</b>		1.074				0.956
<b>Worker</b>	0.532	0.809	1.702	0.534	5.422	0.369
<b>Officer</b>	0.312	0.206	1.367	0.355	5.268	0.650
<b>Student</b>	0.171	0.073	1.186	0.343	4.101	0.787
<b>Retired</b>	0.488	0.14	1.629	0.126	21.016	0.709
<b>Others</b>	0.538	0.635	1.712	0.456	6.422	0.425

\*p<0.01

### DISCUSSION

According to the study findings, the option “not important” was mostly chosen by patients regarding their preferences for physicians’ attire. Apart from the “not important” option, the white coat was the most preferred attire for both male and female physicians in terms of patients’ thoughts on their attire. Patients stated that the white coat had a more positive effect on the patient-physician relationship for both male and female physicians. There are studies on the attire and appearance of physicians, as well as patients’ thoughts regarding these issues in Turkey and around the world. In a study conducted by Ozer et al., in our country, patients preferred the white coat the most for both male and female physicians’ attire (10). In the same study, it was stated that patients did not attach as much importance to physicians’ attire as physicians thought.

While physicians thought that patients would have different attire preferences, patients’ first choice was towards the white coat. In a study conducted by Sonmez et al., 65.7% of patients expressed their desire to have a close relationship with their physicians, while 3.2% stated that it was not important. In the same study, 50.2% of patients stated that they preferred their physicians to wear a white coat (11). In a study conducted by Guven et al., with 1014 patients in the emergency department, 35.8% of patients preferred the white coat while 26.3% stated that it did not matter to them (12). Similar studies are also available in the world. In a study conducted in England, 62.5% of patients preferred their physicians to wear a white coat (13). Similarly, in a study conducted in the United States, 65% of patients preferred their physicians to wear a white coat (14). In a study conducted in different branches except psychiatry in a hospital, the most preferred attire by patients was the white coat, while the least preferred attire was casual, everyday wear (15). In a study conducted by Landry et al., 69.9% of patients preferred their physicians to wear a white coat (16). In a study where clothing choices and trust in physicians were asked to 586 patients, the

majority of patients stated that they would trust physicians who wear white coats more (17). In a study conducted by Gooden et al., 36% of patients preferred their physicians to wear a white coat, while 19% preferred them not to wear a white coat, and 45% stated that it was not important (18). In a study conducted by Ceri et al., with children and adolescents between the ages of 18, it was stated that children and adolescents also preferred physicians to wear a white coat similar to adults (19). In another study, it was found that while patients preferred physicians to wear white coats, the appearance of physicians rather than their ethnic backgrounds had a greater impact on the patient-physician relationship (20). White coat has been associated with physicians since ancient times. The white coat symbolizes the physician’s care and compassion, and at the same time, along with the white color, it also represents purity and cleanliness (21). Medicine is defined as a challenging profession worldwide. With the increasing burden and challenging working conditions of physicians in the healthcare system, the patient-physician relationship is negatively affected. Nevertheless, at the core of healthcare services lies the patient-physician relationship.

In this relationship where two people come together, all communication skills and elements that affect humanity are important (22). In human relationships, factors that affect appearance such as body posture, speaking style, tone of voice, jewelry, and tattoos are also important, not just attire (23). In a study, 64% of patients stated that physician attire was important. Although it is stated that the physician’s knowledge and skills are more important than attire, it has been concluded that appearance is also significant in establishing a relationship with the physician (24). Although patients may prefer physicians to wear white coats in studies, it has been stated that patient trust and relationships with physicians are not affected by the white coat in a study. There was no significant difference in the satisfaction levels between patients consulted by a group of white-coated physicians and those consulted by

a physician without a coat (25). More than 75% of physicians prefer to wear a white coat in the hospital, while psychiatrists and pediatricians are medical specialties that prefer to wear white coats less. These specialties are concerned that the white coat may have a negative impact on the patient-physician relationship, which is why they prefer to wear it less (26). Although patients worldwide find it more reassuring and appropriate to see white coats on physicians, especially medical students and young physicians, they no longer prefer to wear white coats as much as before (27). On the other hand, although it is believed in some countries that wearing a white coat may increase the risk of infection, studies conducted in almost every country have expressed a common result that patients trust physicians who wear white coats more, establish better relationships with them, and prefer more physicians to wear white coats (17). Another preference that was questioned in our study was related to the gender of physicians.

When asked about their preference for the gender of their physician, a significantly high percentage of female patients preferred a female physician while male patients preferred a male physician. When examining the impact of patients' sociodemographic data on physician gender preference, it was found that only patient gender influenced this choice. Psychiatry is a medical specialty in which patients and physicians establish a closer relationship compared to other specialties. When examining the genders of patients who apply to psychiatric outpatient clinics, it is seen that the female gender is higher in number (28). The reason why female patients prefer a female physician and male patients prefer a male physician may be because they feel closer to someone of the same gender. Although some studies have found that patients place more importance on the physician's knowledge, appearance, and treatment approach than their gender, there are also studies indicating that the physician's gender may be a determining factor in patient physician preference (29-31).

This study also has some limitations. Since it had a cross-sectional design and was conducted in a single center, it is not possible to generalize the results. Comparative studies with larger samples and other areas of expertise are needed. In addition, the patients in the study sample were not separated according to diagnosis groups. For this reason, the effect of mental disorders on patients' preferences has been ignored. This is one of the most important limitations of the research. However, our study, which includes a specific patient group, has a remarkable feature due to its large sample size and limited studies in this field.

## CONCLUSION

In conclusion, there are many factors that affect the patient-physician relationship, including the physician's attire, appearance, gender, and style. The patient-physician relationship is one of the most important steps in the patient's treatment process. A good patient-physician relationship will bring positive developments for both the patient and the physician in the treatment process. Although white coats are not as preferred by physicians as before, it is still important from the patients' perspective. In medical disciplines such as psychiatry where the patient-physician relationship is at the forefront, it is very important to investigate all factors that may affect this relationship. We believe that the results of our study will contribute to the existing literature.

### Ethics Committee Approval:

This research complies with all the relevant national regulations, institutional policies and in accordance with the tenets of the Helsinki Declaration, and has been approved by the Recep Tayyip Erdogan University Medical Faculty Ethical Committee, (approval number: 2022/58).

### Informed Consent:

All the participants' rights were protected and written informed consents were obtained before the procedures according to the Helsinki Declaration.

### Author Contributions:

Concept - Ç.H., M.P.; Design - M.P., K.S.; Supervision - Ç.H.; Resources - M.P., K.S.; Materials - M.P., K.S.; Data Collection and/or Processing - M.P., K.S.; Analysis and/or Interpretation - Ç.H., M.P.; Literature Search - M.P., K.S.; Writing Manuscript - Ç.H., M.P., K.S.; Critical Review - Ç.H.

### Conflict of Interest:

The authors have no conflict of interest to declare.

### Financial Disclosure:

The authors declared that this study has received no financial support.

1. Atıcı E. Hasta-hekim ilişkisi kavramı. Uludağ Üniversitesi Tıp Fakültesi Dergisi 2007; 33(1):45-50.
2. Lázaro J. Doctors' status: changes in the past millennium. Lancet (London, England) 1999; 354 Suppl:Siv17.
3. Atıcı E. Hasta-hekim ilişkisini etkileyen unsurlar. Uludağ Üniversitesi Tıp Fakültesi Dergisi 2007; 33(2):91-6.
4. Atilla G, Oksay A, Erdem R. Hekim-hasta iletişimi üzerine nitel bir ön çalışma. İstanbul Üniversitesi İletişim Fakültesi Dergisi 2012; (43):23-37.
5. Özçakır A. Hekim-hasta ilişkisi: karar verme sürecinde hastanın yeri. Türkiye Klinikleri Tıp Bilimleri Dergisi 2004; 4(24):411-5.
6. Chung H, Lee H, Chang DS, Kim HS, Lee H, Park HJ, Chae Y. Doctor's attire influences perceived empathy in the patient-doctor relationship. P Patient Educ Couns 2012; 89(3):387-91.
7. Landry M, Dornelles AC, Hayek G, Deichmann RE. Patient Preferences for doctor attire: The white coat's place in the medical profession. Ochsner J 2013; 13(3):334-42.
8. Petrilli CM, Mack M, Petrilli JJ, Hickner A, Saint S, Chopra V. Understanding the role of physician attire on patient perceptions: a systematic review of the literature-targeting attire to improve likelihood of rapport (TAILOR) investigators. BMJ open 2015; 5(1):e006578.
9. Petrilli CM, Saint S, Jennings JJ, Caruso A, Kuhn L, Snyder A, Chopra V. Understanding patient preference for physician attire: A cross-sectional observational study of 10 academic medical centres in the USA. BMJ open 2018; 8(5):e021239.
10. Özer Ü, Çeri V, Özgen G, Turan B. Psikiyatri hekimlerinde yeglenen giyim biçimi ve hasta-hekim ilişkisine etkisi/The preferred clothing style in psychiatrists and its effect on the patient-physician relationship. Anadolu Psikiyatri Derg 2016; 17(1):51-5.
11. Sönmez HM, Yollu B, Sevinçok L. Hekimlerin beyaz önlük giymesi hakkında halkın düşünce ve tutumları. Journal of Turgut Ozal Medical Center 2010; 17(1):1-6.
12. Güven R, Kaykısız EK, Öntürk H, Şaşmaz Mİ, Arı A, Eyüpoğlu G, Gürol A. The Importance of a white Coat and Appearance on Emergency Patients. Gümüşhane Üniversitesi Sağlık Bilimleri Dergisi 2019; 8(1):64-9.
13. Tiwari A, Abeysinghe N, Hall A, Perera P, Ackroyd JS. Should doctors wear white coats? The patient's perspective. J Eval Clin Pract 2001; 7(3):343-5.
14. Dunn JJ, Lee TH, Percelay JM, Fitz JG, Goldman L. Patient and house officer attitudes on physician attire and etiquette. Jama 1987; 257(1):65-8.
15. Alarçin EY, Sözen AB, Bozbuğa N, İşsever H. Hekim kıyafetlerine ilişkin hasta tercihleri eğilimi. Sağlık Bilimlerinde İleri Araştırmalar Dergisi 2021; 4(2):7-20.
16. Landry M, Dornelles AC, Hayek G, Deichmann RE. Patient preferences for doctor attire: The white coat's place in the medical profession. Ochsner J 2013; 13(3):334-42.
17. Gherardi G, Cameron J, West A, Crossley M. Are we dressed to impress? A descriptive survey assessing patients' preference of doctors' attire in the hospital setting. Clin Med (Lond) 2009; 9(6):519-24.
18. Gooden BR, Smith MJ, Tattersall SJ, Stockler MR. Hospitalised patients' views on doctors and white coats. Med J Aust 2001; 175(4):219-22.
19. Çeri V, Ertürk N, Narin G, Doğançün B. Çocuk psikiyatristleri nasıl giyinmeli? Çocuk gözünden bir bakış. Yeni Symposium 2015; 53(3) 26-31.
20. Chang DS, Lee H, Lee H, Park HJ, Chae Y. What to wear when practicing oriental medicine: patients' preferences for doctors' attire. J Altern Complement Med 2011; 17(8):763-7.
21. Wear D. On white coats and professional development: the formal and the hidden curricula. Ann Intern Med 1998; 129(9):734-7.
22. Holsinger JW Jr, Beaton B. Physician professionalism for a new century. Clin Anat 2006; 19(5):473-9.
23. Gjerdingen DK, Simpson DE, Titus SL. Patients' and physicians' attitudes regarding the physician's professional appearance. Arch Intern Med 1987; 147(7):1209-12.

24. McKinstry B, Wang JX. Putting on the style: what patients think of the way their doctor dresses. *Br J Gen Pract* 1991; 41(348):270-8.
25. Marques Caetano Carreira L, Dinis S, Correia A, Pereira A, Belo R, Madanelo I, Brito D, Gomes R, Monteiro L, Correia G. Does the white coat influence satisfaction, trust and empathy in the doctor-patient relationship in the General and Family Medicine consultation? Interventional study. *BMJ open* 2021; 11(12):e031887.
26. Farraj R, Baron J. Why do hospital doctors wear white coats?. *J R Soc Med* 1991; 84(1):43.
27. Watson DAR, Chapman KE. What do Australian junior doctors think of white coats? *Med Educ* 2002; 36(12):1209-13.
28. Keskin A, Ünlüoğlu İ, Bilge U, Yenilmez Ç. The Prevalence of psychiatric disorders distribution of subjects gender and its relationship with psychiatric help-seeking. *Noro Psikiyatr Ars* 2013; 50(4):344-51.
29. Mavis B, Vasilenko P, Schnuth R, Marshall J, Jeffs MC. Female patients' preferences related to interpersonal communications, clinical competence, and gender when selecting a physician. *Acad Med* 2005; 80(12):1159-65.
30. Kerssens JJ, Bensing JM, Andela MG. Patient preference for genders of health professionals. *Soc Sci Med* 1997; 44(10):1531-40.
31. Weisman CS, Teitelbaum MA. Physician gender and the physician-patient relationship: Recent evidence and relevant questions. *Soc Sci Med* 1985; 20(11):1119-27.