

Study on the Current Status and Cultivation Path of Professional Feelings of General Practice Medical Students

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Abstract

Objective: This study investigates the current situation of general practice medical students' professional feelings from the perspective of professional feelings, discusses the main factors affecting professional feelings, and provides more scientific and reasonable countermeasures for the training of general practice medical students, so that more general practice medical students can go down and stay. **Methods:** The general practice medical students enrolled in Wenzhou Medical University from 2019 to 2023 were surveyed, and SPSS25.0 statistical software was used for data analysis. **Results:** The professional feelings of general practice medical students were at an upper moderate level. There were significant differences in professional feelings between gender, grade, motivation for applying and whether they had participated in internship/practice ($p<0.05$). The professional feelings of boys, juniors, students who voluntarily applied for the exam due to personal interests, and students who participated in internships/practices were significantly higher than other students. There was no statistical significance for variables such as political appearance, student source, household registration type, father's occupation, annual family income, college entrance examination scores, university academic performance, and whether they had studied medical humanities courses ($P>0.05$). Gender, grade, and whether they have participated in internships/practices are the main factors affecting students' professional feelings. **Conclusion:** Strengthen the value guidance and incorporate the elements of emotional education into the talent training program. highlight practical education and build a "early clinical" practical teaching system; Strengthen humanistic care and build an infiltration emotional cultivation model.

Keywords: general practice medical students, professional feelings, cultivation path

1. Problem Raising and Concept Definition

1.1 Question Raising

Since the launch of the new medical reform in 2009, comprehensively strengthening the construction of grassroots medical and health teams has become the focus of medical and health reform. The report of the 20th National Congress of the Communist Party of China proposed to develop and expand the medical and health team, focusing on rural areas and communities. (Xi Jinping, 2023) At present, positive progress has been made in the training of general practice medical students, with the initial formation of the general practitioner training system, the basic establishment of the training model, the continuous increase of training efforts, and the increasing number of teams (Wu Ning, Cheng Mingxi, Yan Lina, et al., 2018). However, at present, the overall willingness of general practice medical students in our country to leave is high, and the phenomenon of "not being able to go down" and "not being able to stay" is still more prominent, and the loss of general practice medical students is still continuing (Feng Jing, Shen Xin & Gan Yong, 2021). How to realize that general practice medical students can "go down and stay" and be willing to contribute to the grassroots is the primary problem facing the current grassroots medical and health reform.

In 1993, the British Medical Association promulgated the “Doctors of Tomorrow”, which proposed that medical students must meet the requirements of knowledge, skills and professional attitude before they can engage in medical work. The primary and foremost professional attitude of physicians is the professional feelings of physicians. Marxism believes that human consciousness has subjective initiative, and in the face of a series of practical challenges such as material scarcity, general practice medical students with professional feelings can mobilize their strong internal driving force, which drives them to work with enthusiasm in primary medical services.

It can be seen that the growth of general practice medical students is not only closely linked to national policies, but also deeply influenced by their personal spiritual beliefs and values. Therefore, starting from the level of professional feelings, discussing the education of general practice medical students can not only promote the construction of the general practitioner team, but also have a positive role in promoting the rural revitalization strategy.

1.2 Concept Definition

The definition of occupation in the Modern Chinese Dictionary is: “(1) Work that serves society and serves as the main source of livelihood for individuals. (2) Professional, non-amateur.” It (Ruan Zhifu & Guo Zhongxin (eds.), 2009) can be seen that occupation has dual attributes: first, occupation is a way for individuals to obtain livelihood, and in professional activities, individuals can not only serve society, but also achieve the dual goal of self-worth. Second, the profession is professional. The definition of feelings in the Modern Chinese Dictionary is: “(1) Mood. (2) Mind (Ruan Zhifu & Guo Zhongxin (eds.), 2009).” The Chinese Dictionary believes that feelings also have “interest; Interest” (Luo Zhufeng, editor-in-chief, 1986).

For comprehensive research on professional feelings, refer to Tang Zhisong (2019) in the definition of the concept of professional feelings for rural teachers (Tang Zhisong, 2019). The study shows that the professional feelings of general practice medical students cover their professional emotions, attitudes and positions on primary medical services, as well as their understanding of work responsibilities, life missions and pursuits. Specifically, it includes: first, professional love, that is, the love of general practice medical students for the work of general practice medical students; second, professional responsibility, that is, general practice medical students can be serious and responsible in their future work; third, professional self-confidence, that is, the optimistic and positive attitude that general practice medical students can have in their future work; fourth, the sense of professional mission, that is, the persistent pursuit of the ideal doctor in the future work of general practice medical students; fifth, the sense of professional innovation, that is, general practice medical students can take the initiative to research in the future work process and actively seek breakthroughs and progress.

2. Study Design

2.1 Research Objects

In 2024, the research group conducted a questionnaire survey on the current status of professional feelings among general practice medical students of Wenzhou Medical University. A total of 881 questionnaires were collected, of which 657 were valid, and the effective response rate of the questionnaires was 74.6%. The basic characteristics of the sample were as follows: 354 boys (53.9%) and 303 girls (46.1%); 169 freshmen (25.7%), 205 sophomores (31.2%), 113 juniors (17.2%), 110 seniors (16.7%), and 60 seniors (9.1%); 98 CPC members/CPC preparatory party members (14.9%), 400 Communist Youth League members (60.9%), and 159 (24.2%) masses; 231 urban students (35.2%) and 426 rural students (64.8%); 160 (24.4%) had college entrance examination scores above the first line/special control line and above, and 497 (75.6%) had a first-class line/special control line and above; Among the reasons for applying for general medicine, 189 people (28.8%) voluntarily chose personal interest, 80 (12.2%) were required by family members, 88 people (13.4%) were guaranteed to have school, 255 people (38.8%) were considered for employment prospects, it didn't matter, 15 people (2.3%) were randomly chosen, and 30 others (4.6%). 36 (5.5%) had a weighted average score of 90 points or above in the previous academic year, 295 (44.9%) had a score of 80-89, 258 (39.3%) had a score of 70-79, 65 (9.9%) had a score of 60-69, and 3 (0.5%) had a score of less than 60. 549 (83.6%) have studied medical humanities courses (such as medical humanities, medical ethics, doctor-patient communication, medical humanities literacy, etc.), and 108 (16.4%) have not studied. 626 (95.3%) had participated in general practice, and 31 (4.7%) had not participated in it, as shown in Table 1.

2.2 Research Methods

The questionnaire used in this study was designed based on the questionnaire on professional feelings in domestic and foreign academic journals, and after in-depth interview analysis with a number of experts in different fields. Before official use, we conducted a pre-survey of the questionnaire to assess its reliability and validity, and based on feedback, several rounds of revision were carried out to finalize the final version of the questionnaire. The questionnaire used in this study was scored on a five-point Likert scale (5=strongly agree;

4=Agree; 3=neutral; 2=disagree; 1=strongly disagree). After calculation, the internal consistency reliability of each dimension of the occupational sentiment questionnaire was high, and the Cronbach's α value was 0.975. Specifically, the professional passion dimension contains 4 items, with a Cronbach's α coefficient of 0.938, the professional responsibility dimension contains 4 items, and Cronbach's α coefficient is 0.916, the professional mission dimension contains 4 items, and Cronbach's α coefficient is 0.938, the professional confidence dimension contains 4 items, and Cronbach's α coefficient is 0.910, and the professional innovation dimension contains 4 items, Cronbach's The α coefficient is 0.848. These results indicate that the questionnaire has high reliability.

2.3 Questionnaire Testing Method

On the basis of obtaining the consent of the participants, the investigator explained in detail the purpose of the survey, the scope of sampling and the survey process, and conducted a systematic questionnaire survey on the selected group of respondents within a given time. This process ensures transparency in the survey and informed consent from respondents.

2.4 Statistical Processing Methods

SPSS25.0 statistical software was used for data analysis. The metering data is expressed in $\bar{x}\pm s$, and the counting data is expressed as frequency (percentage). The independent sample t-test was used for comparison of data between the two groups. Univariate analysis of variance was used for comparison between multiple groups. Multiple linear regression analysis was used for the analysis of influencing factors. $P<0.05$ was a statistically significant difference.

Table 1. Basic characteristics of samples (n=657)

variable	Value [person (%)]
Gender [Person (%)]	
man	354 (53.9)
woman	303 (46.1)
Grade [Persons (%)]	
Freshman	169 (25.7)
Sophomore	205 (31.2)
Junior	113 (17.2)
Senior	110 (16.7)
Big five	60 (9.1)
Political Landscape [People (%)]	
Member of the Communist Party of China/Preparatory Party member of the Communist Party of China	98 (14.9)
League member	400 (60.9)
masses	159 (24.2)
Household registration type [person(%)]	
town	231 (35.2)
countryside	426 (64.8)
Father's occupation [person(%)]	
Heads of party organs, state organs, mass organizations, social organizations, enterprises and institutions	87 (13.2)
Professional and technical personnel	53 (8.1)
clerks and relevant personnel	24 (3.7)
Social production service and life service personnel	84 (12.8)
Agriculture, forestry, animal husbandry, fishery production and auxiliary personnel	65 (9.9)
Manufacturing and related personnel	118 (18.0)
Military personnel	1 (0.2)

Other practitioners who are inconvenient to classify	182 (27.7)
No job	43 (6.5)
Whether the father is a medical worker [person(%)]	
be	37 (5.6)
not	620 (94.4)
Mother occupation [person (%)]	
Heads of party organs, state organs, mass organizations, social organizations, enterprises and institutions	58 (8.8)
Professional and technical personnel	40 (6.1)
clerks and relevant personnel	33 (5.0)
Social production service and life service personnel	128 (19.5)
Agriculture, forestry, animal husbandry, fishery production and auxiliary personnel	49 (7.5)
Manufacturing and related personnel	90 (13.7)
Other practitioners who are inconvenient to classify	182 (27.7)
No job	77 (11.7)
Whether the mother is a medical worker [person (%)]	
be	44 (6.7)
not	613 (93.3)
College entrance examination results	
One line/special control line and above	160 (24.4)
Below a line/special control line	497 (75.6)
Reasons for applying for general practice [person (%)]	
Personal interest, voluntary choice	189 (28.8)
Family requests	80 (12.2)
Consider the admission score to ensure that you have a good education	88 (13.4)
Consider employment prospects	255 (38.8)
It doesn't matter, just choose whatever you want	15 (2.3)
other	30 (4.6)
In which score range is the weighted average score of compulsory courses in the previous academic year [persons (%)]	
90 points and above	36 (5.5)
80-89 points	295 (44.9)
70-79 points	258 (39.3)
60-69 points	65 (9.9)
60 points or less	3 (0.5)
Have you studied medical humanities courses (such as medical humanities, medical ethics, doctor-patient communication, medical humanities, etc.) [person (%)]	
be	549 (83.6)
not	108 (16.4)
Have participated in general practice internship/practice [person(%)]	
be	626 (95.3)
not	31 (4.7)

3. Findings

3.1 The Professional Feelings and Dimensions of General Practice Medical Students Are at the Middle and

Upper Level

The results showed that the professional feelings score of general practice medical students was (4.02 ± 0.70) , which was above average. From each dimension, from high to low, the sense of professional mission (4.13 points), professional responsibility (4.11 points), professional innovation (4.05 points), professional confidence (3.96 points), and professional love (3.82 points) are in order. Judging from the statistical results, the sense of professional love and professional confidence of general practice medical students is relatively low.

Table 2. Current status of professional feelings of general practice medical students

Professional feelings in various dimensions	N	minimum	maximum	average value	standard deviation
Sense of professional love	657	1.00	5.00	3.8238	.81972
Professional responsibility	657	1.00	5.00	4.1149	.72842
Sense of professional mission	657	1.00	5.00	4.1328	.73028
Professional confidence	657	1.00	5.00	3.9574	.77295
Professional innovation	657	1.00	5.00	4.0521	.70862
Professional feelings (general)	657	1.00	5.00	4.0162	.69655

3.2 Analysis of Differences in the Professional Feelings of General Practice Medical Students

The survey found that there were significant differences in the professional feelings of students of different genders, and men were significantly higher than women. There were significant differences in the professional feelings of students in different grades, and the higher the grade, the lower the professional feelings, and the professional feelings scores of first-year medical students were significantly higher than those of other grades. The difference in students' motivation for applying for the exam led to significant differences in their professional feelings scores. Those students who voluntarily chose to apply based on personal interests had significantly higher scores in terms of professional feelings than those who applied for the exam due to other factors, while students who blindly chose and were required by their parents to apply for the exam had lower scores on professional feelings. The professional feelings scores of students who have participated in general practice-related internships/practices are significantly higher than those who have not participated in internships/practices. The difference in maternal occupation will affect the professional sentiment score of their children, and the difference is statistically significant ($P < 0.05$). There were no significant differences in variables such as political appearance, student origin, household registration type, father's occupation, whether the father was a medical worker, whether the mother was a medical worker, family annual income, college entrance examination scores, university academic performance, and whether they had studied medical humanities courses (such as medical humanities, medical ethics, doctor-patient communication, medical humanistic literacy, etc.) ($P > 0.05$). See Table 3.

Table 3. Descriptive analysis of general practice medical students' professional feelings ($\bar{x} \pm s$)

Constituencies	Professional feelings score	t/F	P
gender		3.267	0.001
man	4.10 \pm 0.69		
woman	3.92 \pm 0.69		
grade		10.473	0.000
Freshman (Class of 2023)	4.22 \pm 0.65		
Sophomore (Class of 2022)	4.06 \pm 0.67		
Junior (Class of 2021)	4.02 \pm 0.64		
Senior (Class of 2020)	3.82 \pm 0.71		
Senior (Class of 2019)	3.66 \pm 0.77		
Political appearance		2.586	0.076
Member of the Communist Party of China/Preparatory Party member of the	3.95 \pm 0.60		

Communist Party of China			
League member	3.99±0.71		
masses	4.12±0.71		
Household registration type		0.527	0.599
town	4.04±0.73		
countryside	4.01±0.68		
Father's profession		1.101	0.360
Heads of party organs, state organs, mass organizations, social organizations, enterprises and institutions	3.97±0.84		
Professional and technical personnel	4.20±0.67		
clerks and relevant personnel	4.13±0.74		
Social production service and life service personnel	4.07±0.62		
Agriculture, forestry, animal husbandry, fishery production and auxiliary personnel	4.09±0.72		
Manufacturing and related personnel	3.99±0.64		
Military personnel	4.45±0.00		
Other practitioners who are inconvenient to classify	3.94±0.67		
No job	3.96±0.73		
Whether the father is a medical officer		1.057	0.291
be	4.13±0.87		
not	4.01±0.69		
Motherhood profession		2.532	0.014
Heads of party organs, state organs, mass organizations, social organizations, enterprises and institutions	4.11±0.87		
Professional and technical personnel	4.17±0.75		
clerks and relevant personnel	3.82±0.56		
Social production service and life service personnel	4.13±0.66		
Agriculture, forestry, animal husbandry, fishery production and auxiliary personnel	3.97±0.71		
Manufacturing and related personnel	4.12±0.54		
Other practitioners who are inconvenient to classify	3.92±0.67		
No job	3.90±0.76		
Whether the mother is a medical officer		1.106	0.269
be	4.13±0.83		
not	4.01±0.69		
College entrance examination results		-.266	0.790
Special control line and above	4.00±0.75		
Below the special control line	4.02±0.68		
Reasons for applying for general medicine		14.507	0.000
Personal interest, voluntary choice	4.33±0.66		
Family requests	3.86±0.74		
Consider the admission score to ensure that you have a good education	3.91±0.67		
Consider employment prospects	3.92±0.62		
It doesn't matter, just choose whatever you want	3.28±0.93		
other	3.94±0.66		

In which score range is the weighted average score of compulsory courses in the previous academic year?		1.901	0.109
90 points and above	4.10±0.81		
80-89 points	4.03±0.66		
70-79 points	4.04±0.70		
60-69 points	3.80±0.76		
60 points or less	3.78±0.96		
Have you studied medical humanities courses (such as medical humanities, medical ethics, doctor-patient communication, medical humanities, etc.)?		0.393	0.695
be	4.02±0.69		
not	3.99±0.74		
Whether they have participated in general practice internships/practices		2.910	0.004
be	4.03±0.68		
not	3.66±0.84		

3.3 Analysis of Influencing Factors of General Practice Medical Students' Professional Feelings

According to the requirements of multiple linear regression analysis for the inclusion of equation variables, disordered multi-categorical variables such as mother's occupation should be set as dumb variables, and the results showed that the P value of gender, grade, and whether they had participated in general practice internship/practice was less than 0.05, which had a significant impact on professional feelings. Compared with men, women's occupational feelings scores were lower, and the occupational feelings scores were negatively correlated with grades, and with the increase of grades, their occupational feelings scores were lower, and the scores of students who participated in the occupational feelings were higher than those who had not participated in general practice internships/practices. See Table 4.

Table 4. Multiple linear regression analysis of general practice medical students' professional feelings

constant and independent variables	B	S.E.	Beta	t	P
constant	4.367	.109		40.212	.000
gender	-.155	.050	-.111	-3.090	.002
grade	-.115	.020	-.212	-5.691	.000
Mother occupation (Reference: Other practitioners who are inconvenient to classify)					
Heads of party organs, state organs, mass organizations, social organizations, enterprises and institutions	.097	.100	.039	.971	.332
Professional and technical personnel	.127	.113	.044	1.125	.261
clerks and relevant personnel	-.154	.121	-.048	-1.269	.205
Social production service and life service personnel	.135	.074	.077	1.824	.069
Agriculture, forestry, animal husbandry, fishery production and auxiliary personnel	.072	.104	.027	.696	.487
Manufacturing and related personnel	.186	.083	.092	2.243	.025
No job	.025	.087	.012	.290	.772
Reasons for your application for general practice (Reference: Considering employment prospects)					
Personal interest, voluntary choice	.395	.063	.257	6.311	.000
Family requests	-.003	.083	-.002	-.038	.969
Consider the admission score to ensure that you have a good education	.067	.080	.033	.841	.401
It doesn't matter, just choose whatever you want	-.537	.173	-.115	-3.094	.002

other	.142	.125	.043	1.138	.256
Have you participated in a general practice internship/practice?	-.422	.119	-.129	-3.554	.000

4. Discussion and Suggestions

4.1 Strengthen Value Guidance and Incorporate Emotional Education Elements into General Practice Training Courses

The results show that there are significant differences in the professional feelings of students with different motivations, and the professional feelings of students who voluntarily choose general majors out of personal interest are significantly higher than those who apply for general majors for other reasons. Qiao Xue et al. (2024) also proposed that the original intention of career choice will affect medical students' professional identity to a certain extent. (Qiao Xue, Yin Yongtian, Luo Wenjun, et al., 2024) The statistics of this study found that only 28.8% of students voluntarily chose the major out of personal interest. Most students choose general practice majors due to employment prospects, parental requirements, score restrictions, etc., and externally driven application motivation may weaken the performance intention of medical orientation students and affect their professional feelings (Wang et al., 2022). Wan Sizhi et al. (2022) also pointed out that many students only view their careers from the perspective of making a living, resulting in low professional feelings.

Therefore, how to strengthen value guidance and help general practice medical students activate their identity after enrollment is an effective way to enhance their professional feelings. Ma Duoxiu (2017) also proposed that the generation of internal emotions is based on the understanding of specific things, and without corresponding cognition as a premise, the corresponding emotions are difficult to stimulate (Ma Duoxiu, 2017). In other words, if GP students lack a basic understanding of the profession and its working environment, it will be difficult for them to develop a corresponding professional feeling. Based on this, it is crucial to offer courses on emotional education. **First, in terms of educational goals**, the connotation of cultivating the professional ability of general practice medical students with "feelings" is further enriched. The training of general practice medical students should highlight the value guidance, establish the concept of emotional education, focus on the training goals of general medical talents, and clearly elaborate the teaching objectives and specific requirements in the guidance of the talent training program, and must pay attention to the three elements of knowledge, ability, and emotional attitude. **The second is to integrate "emotional education" into the curriculum system of general practitioner training.** General practice medical students can inspire and awaken their professional feelings by learning courses on the significance of the general practitioner profession, the current status and future development of primary care. **The third is to activate** identity with "case teaching" in terms of educational methods. Implement the "invite in" strategy, invite outstanding general practice medical students to explain general practice cases, and invite the Health Bureau to interpret social conditions and public opinion, so as to help general practice medical students establish local identity, value recognition and mission practice of their own identity, professional role and social role.

4.2 Highlight Practical Education and Build an "Early Clinical" Practical Education System

The results show that the professional feelings of students who have participated in internships/practice are significantly higher than those who have not participated in internships/practice. This is consistent with the results of relevant studies. Wang Fengqian et al. (2018) also pointed out that students have entered the clinical internship of the hospital and are learning under the guidance of the teacher, and the teaching method that combines theory and practice can enhance students' enthusiasm for learning and perceive the value of the medical profession more deeply to a certain extent (Wang Fengqian, Qu Naiqiang & Niu Qichao, 2018).

In the process of professional socialization of medical students, the internship stage plays a crucial role and is also the golden period for shaping their professional identity. By allowing students to experience doctor-patient communication firsthand, they can deeply understand and respect the value of life, which helps to enhance their sense of identity with their profession (Zhang Lina & Ma Xiaoling, 2016).

On the basis of strengthening professional knowledge training, focusing on the teaching of practice and internship of general practice medical students can not only promote them to seriously devote themselves to primary medical work in the process of internship and practice, but also deepen their experience and recognition of primary medical care, stimulate their sense of mission and responsibility as future general practice medical students, and greatly affect their future employment intentions. Most general practice medical students lack the opportunity and conditions to go deep into the grassroots for normalized practice and experience, which will lead to general practice medical students being emotionally indifferent to the grassroots to a certain extent, and they are reluctant to work at the grassroots level after graduation. Relying on the practical teaching concept of "early general practice, multi-grassroots level, and repeated practice", medical schools enable general practice medical

students to enhance their situational professional ability through personal experience and practical insight by sinking the general practice education base, expanding educational activities and deepening training methods. In this process, cultivate professional emotions, knowledge systems, social interactions and living habits with grassroots characteristics, so as to establish the professional belief of “for the grassroots” and strengthen the professional identity and belief of general practice medical students to serve the grassroots.

4.3 Strengthen Humanistic Care and Build an Immersion Emotional Cultivation Model

The results show that grade is the main factor affecting the professional feelings of general practice medical students, which is consistent with the results of relevant studies. Ding Qinnan (2019) found that there were significant differences in students' professional satisfaction with different grades, and the overall trend was decreasing year by year (Ding Qinnan, 2019). Li Rong et al. (2022) also found that the professional identity of general practice medical students was negatively correlated with grade, and the higher the grade, the lower the professional identity was lower (Li Rong, Wu Ge, Feng Gong, et al., 2022). Through further research, the study learned that after general practice medical students officially entered the professional study, they were affected by the environment around them and gradually reduced their professional self-confidence, which also affected their professional feelings. In the interview with general practice medical students, some students gave feedback: “At the beginning, I thought the general practitioner was very good, but then many people told me that the general practitioner was very hard and had no future in the future, so I slowly lost confidence in this profession.”

It can be seen that the cultivation of general practice medical students' professional feelings should not only pay attention to the boost of “internal driving force”, but also need “external support” full of humanistic care. The famous educator Sukhomlinsky said: “Let every wall of the campus speak, and the whole campus is a big classroom of ideological and moral education, so that wherever students look, it is educational.” Through tangible and intangible forces, we integrate campus culture and medical ritual education, build an immersive education model, and achieve emotional education “moisturizing things silently”. The first is to dig deep into the emotional education resources contained in various general education and professional courses, and consciously integrate the concepts of respect for life, benevolence of doctors, and great health, so as to improve students' humanistic quality. The second is to integrate the characteristics of medical majors, promote students' understanding and growth of the value of life through ritualized educational activities, build professional ceremonial activities such as medical student oath ceremonies, and establish a ritual cultural system covering the entire university education cycle, so that students can enhance their sense of identity and enhance their sense of professional mission and responsibility in life-related ceremonies. The third is to set up campus cultural activities such as adaptation education, professional ideological education, and pre-graduation education for general practice medical students with the characteristics of general medicine.

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