

Extension of the Professional Psychologists Role to Healthcare

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In this transitional year in the United States with regard to Healthcare, it is expected that individuals will receive care and the cases will be more chronic. The National Health Care Act will provide more American citizens with care. This expected increase will allow for those that previously have not sought health care to consider seeking medical attention.

Furthermore, the medical attention is likely to present with more chronic medical need due to the aforementioned restraint on access to medical care. By contrast, in socialized medicine countries, the flow of cases is predicted to remain the same, some change in symptom presentation that is more chronic [1,2].

Presently, Professional Psychologists practicing in health care conduct assessments, provide therapeutic interventions to patients primarily where mental health issues are being considered or have been detected [3]. In the majority of cases, depression and anxiety diagnoses are considered. The symptoms of each condition are sufficiently impactful to the patient's response and care of their medical condition [3,4]. However it is estimated that this is a pivotal point in the patient's health outcome. Specifically, diagnosis and treatment of depression/anxiety symptoms in medical patients results in shorter healing and rehabilitation times [5].

Practicing Psychologists in Medical settings are estimated to be fewer in number than in mental health settings. The World Health Organization has proposed preventative models of healthcare in an effort to ameliorate illness [6]. For example, with education and support for healthcare practices and the design of a means to increase compliance, immunization schedules could be followed and deadly diseases such as rubella could be eradicated [2].

In the United States, the American Psychological Association that approves curriculum, as part of the Accreditation of graduate training in Clinical Psychology. The current comprehensive curriculum allows room for seminars, practicum and research forums for specialized training for work in a Medical setting [7]. Proposed curriculums vary from additional courses for Post Doctoral Training. Results from surveys indicate that the majority of Psychologists does not intend/prefer working in a medical setting. Some recognize the need(s), but the rationale for the low preference is unclear [8,9].

Patients visiting their physicians are accustomed to a medical rationale and treatment for their symptoms. Further, the majority of patients prefer a prescription to a referral for counseling [10]. In a minority of cases, Professional Psychologists prefer their patients to be medication free for the treatment [11].

To recapitulate, the need for Psychological care in Medical settings is present and increasing. The change in some countries, like the United States in Healthcare coverage and the scope of care in socialized medicine is anticipated to continue to increase chronic, complicated illness [2]. At present, a portion of practicing psychologists in Medical settings address patient needs with specialized assessment, treatment and consultation care. The majority curriculum of practicing Psychologists include course work and training in this area. It may be the case that the non-preference for practice in Medical settings will become a necessary extension of the practicing Psychologist role given the projected need(s).

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