

## **Myths & Misconceptions: Treating College Students**

### **Risk Management Tip Provided by Professional Risk Management Services, Inc.**

**Q:** I am in private practice and a number of my patients are college-aged and leave the area – occasionally the state or the country – to attend school. Most of my patients return home over the summer. If these patients need treatment during the academic year, can I continue to treat them while they are away at school? What are the risks?

**A:** While communication technologies and the ease of modern travel make it easier than it used to be to continue treating college students who are away, you should keep in mind the unique characteristics of this patient population and the professional liability risks associated with treating students who attend geographically distant schools.

The transition to college life can be difficult and overwhelming for many students. Although your patients may be clinically stable while at home, even the most stable patients have the potential to decompensate in a new environment. Away from support networks, new stressors can affect your patients' mental health in unpredictable ways, such as precipitating the onset of depression, suicidality, and/or substance abuse.

Foremost, you should consider whether you can provide adequate care to a patient who is physically located at a geographic distance. For example: If the patient were to experience a crisis or need to be seen urgently, what actions would you be able to take? Would you be able to effectively assess the patient's needs and state of mind over the phone? Would you know how to admit this patient to an inpatient facility, if necessary? Would you know how to prescribe medication in a foreign country? What would you do if your patient needed laboratory tests performed pursuant to a prescription?

Where geographic distance prevents you from effectively communicating with and adequately assessing and treating a patient, you are likely to be of limited assistance at the time your services are needed the most. Should there be a bad outcome and subsequent lawsuit, you will be held to the same standard of care as if the patient had been seen in your office.

An additional issue arises when patients travel out of state or out of the country for school. The overall trend among the states is that the practice of medicine takes place where the patient is located. If you treat a patient who is physically located in another state, you could be found to be practicing medicine in that state. If you are found to be doing so without the appropriate license, you may face adverse action by state licensing boards. For patients attending college in a state where you are not licensed, both relevant states' medical boards should be contacted to determine whether your activities would be considered practicing without a license.

The unlicensed interstate practice of medicine may also result in malpractice insurance coverage issues, since coverage is generally predicated on licensure in the state where you practice medicine. Consult your insurance underwriter for clarification of coverage.

The concerns outlined here necessitate determining whether your patients would be better served by having a local psychiatrist responsible for or involved in treatment and then engaging in appropriate planning. When patients consider college choices and/or study-abroad programs, you may need to discuss with them your concerns and recommendations. Students should understand that they must make arrangements for the continuation of their psychiatric care and not simply assume that you will be continuing to treat them regardless of the physical distance.

Patient care can be continued, shared, or transferred for the duration of the school year. Continuing the treatment relationship is not impossible, but it should be done with a proper degree of caution and forethought.

If care is shared, then it needs to be closely coordinated. Communication is vital, and it must be clear to all parties which psychiatrist is responsible for what aspects of care.

Nowadays, most schools offer student health services or refer students to community-based psychiatrists. It may be in the patients' best interests (and therefore everyone else's) to transfer care to a local psychiatrist for the duration of the school year or even for the entire school experience.

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