

## **Telepsychiatry: Moving beyond rural care to enhancing the patient experience**

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Telepsychiatry has been around since the 1960s. It developed out of a lack of providers in rural settings. Since then, it has expanded into other areas of need, including the Veterans Affairs, prison or jail systems, and inpatient psychiatric hospital coverage. Telepsychiatry has the potential to expand beyond need and into convenience and enhanced patient and clinician experience. Telepsychiatry may be one small piece of a large puzzle of lowering physician suicide. As we all know, there are many reasons why physicians and other healthcare professionals do not get psychiatric care. Physicians have the same rate of bipolar, alcohol use disorder, depression, and anxiety as the general population, but the highest suicide rate of all professions in the United States. The physician suicide rate is multifaceted. It includes the moral fatigue caused by working in American hospital systems, administrative burden, education debt, and time spent with electronic medical records over patient care. However, another consideration is their barriers to care: including stigma, lack of private provider, no nearby areas, and hours outside of regular business operation hours. Private telepsychiatry offers physicians, healthcare workers, people of media attention, and anyone else with higher privacy concerns the option to get care. Private telepsychiatry, with personal electronic medical records, allows clinicians to get care without the fear of having their charts accessed. Telepsychiatry gives them access to providers outside of their colleague circle. This talk will be about building a professional-courtesy service-oriented private telepsychiatry practice to reach those healthcare professionals who would not otherwise obtain psychiatric or substance abuse care. America has many telemedicine restrictions with ever-changing rules and today's psychiatrists and psychiatric mental health nurse practitioners have many roadblocks to building a successful telepsychiatry practice.