

12 May 2025

**RE: Testimony on H.237**

Dear Members of the Vermont Legislature,

As a physician specializing in Consultation-Liaison Psychiatry, I am writing to respectfully but strongly oppose any proposed legislation that would permit psychologists to prescribe psychotropic medications in the state of Vermont.

Psychologists are invaluable members of our mental health care teams. I work closely with many, and some are among my most trusted collaborators in caring for complex patients. Their expertise in psychological assessment, psychotherapy, and behavioral interventions is unparalleled. Similarly, I recognize my own limits: despite exposure during medical training, I do not and should not attempt psychological testing or psychotherapeutic techniques outside my expertise. Our patients deserve care from professionals fully trained in the skills they are providing.

I offer these views not only as a psychiatrist but as someone who has worked at the intersection of medicine and psychiatry for more than three decades. I have served as the Medical Director of the Psychiatry Consultation Service at the University of Vermont Medical Center since 1996. My training includes a residency in psychiatry at McLean Hospital, a teaching hospital of Harvard Medical School, and fellowship training in Consultation-Liaison Psychiatry at Massachusetts General Hospital. Every day, my team and I manage complex cases where psychotropic medications interact with serious medical illnesses, requiring nuanced knowledge and continuous monitoring.

Psychopharmacology is no different. The safe and effective use of psychotropic medications is rooted in years of rigorous medical education, beginning in medical school with foundational courses in physiology, pathophysiology, biochemistry, and pharmacology. These are not abstract sciences—they are the bedrock of understanding how medications interact with the complex systems of the human body. That education is deepened during four years of psychiatric residency, and further expanded for other trained professionals including psychiatric nurse practitioners, physician assistants, and non-psychiatrist primary care physicians who also prescribe these medications under well-defined standards.

This is not knowledge that can be adequately acquired in a short

course or supplemental training. Psychotropic medications are not benign. Some carry risks comparable to medications used in cardiology, oncology, or endocrinology. For example, lithium requires careful monitoring for kidney and thyroid dysfunction, and can be toxic at levels only slightly above therapeutic ranges. Antipsychotics can cause severe movement disorders, life-threatening metabolic complications, and cardiac arrhythmias. Antidepressants, in certain contexts, can induce mania, seizures, or suicidal thinking. These are not rare or theoretical concerns—they are realities that medical prescribers manage daily, supported by a deep, continuously updated understanding of medicine.

Moreover, the role of these medical professionals extends beyond prescribing. In emergencies, such as serotonin syndrome, neuroleptic malignant syndrome, or drug-induced arrhythmias, these professionals are trained to rapidly recognize, triage, and manage these conditions in collaboration with other medical specialists. Psychologists, despite their many strengths, are not trained for this level of acute medical intervention.

The proposal to grant prescribing authority to psychologists minimizes the complexity and inherent medical risks associated with psychopharmacology. It risks fragmenting care, confusing patients, and potentially exposing them to harm from well-intentioned but insufficiently trained providers.

Good mental health care is, and should remain, a collaborative endeavor where each professional brings the full depth of their training and expertise to the table. Diluting these standards by allowing non-medically trained psychologists to prescribe powerful medications does not serve our patients' best interests.

I urge you to oppose this legislation.

Respectfully,  
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