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The "Medical Counselor" - a new profession

A discussion of the service that medical counselors employed by a Medical School could render to the University's faculty, students and employees.

by Leo Szilard

A Medical School could render a valuable service to the University's faculty, students and employees by adding to its staff a number of patient oriented physicians, to whom I shall refer here as medical counselors.

These medical counselors would not treat any patients, they would have on file the medical history <sup>and the results of an initial examination</sup> of those who are eligible for their services and elect to make use of their services. If such a person falls ill and contacts a medical counselor, the medical counselor would examine him and then refer him for treatment to a physician who, in his judgement, would be well qualified to handle the case. (It should be noted that the medical counselor might be somewhat limited in this respect by the medical insurance carried by the patient.)

The medical counselor who refers his patient to a doctor may discuss with the doctor what fee should be charged in view of the patient's financial circumstances.

Even though the medical counselor refers his patient for treatment elsewhere, he would remain in overall charge of the case and the doctors treating his patients would be expected to report currently to him on the progress of the treatment. If, in the judgement of the medical counselor, a change of doctor is indicated, he will so advise the doctor of the patient. If, in the judgement of the medical counselor, the patient under treatment would benefit from calling another doctor for consultation he will request such a consultation and he will be present when the consultation take place.

Even though one institution might employ a large number of medical counsellors, once a patient has been seen by a medical counselor he will always see the same medical counselor, unless the patient himself requests that he be transferred.



The medical counselors would be full time employees of the medical school. Fees for consultation with the medical counselor might range from \$5 to \$20, but these fees would be payable to the school rather than to the medical counselor. It is estimated that the medical counselors would spend two-thirds of their working time seeing patients. They would spend one-third of their working time keeping in contact with doctors in private practice, who are attending physicians at hospitals, by accompanying them on their rounds. They would do it for the dual purpose of keeping abreast of the developments in medicine and of evaluating the medical capabilities of the doctors to whom they may refer their patients for treatment.

If the University is very large, it would seem advisable to start a medical counselor service for faculty and employees only and, after such services were established as a going operation, consider whether or not it should be extended to students also. Because the faculty and employees are a more stable and older population, they would probably derive a greater benefit from the services of medical counselors than would the students.