Advice to New Graduates: Get (at Least) One Year of Psychiatric/Mental Health Nursing Experience Before Working in Medical-Surgical Settings

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**Article:**

New graduates are often discouraged from working in psychiatric/mental health settings by “well-meaning” nurses and nursing faculty (especially non-psychiatric/mental health nurses and nursing faculty). Often these individuals advise new graduates that they should get at least one year of medical-surgical nursing experience before working in psychiatric/mental health nursing. The privileged position of medical-surgical nursing (and critical care, emergency care, and others) and their related medical-surgical patients over psychiatric/mental health nursing and their related psychiatric/mental health patients is tiresome to me.

Those who believe that all new graduates should get one year of medical-surgical nursing experience before entering psychiatric/mental health nursing often say that psychiatric/mental health nurses need more experience with medical and surgical problems and treatments so that they can better care for their psychiatric/mental health patients in the future. This same rationale could, and I think *should*, be used with medical-surgical patients with psychiatric/mental health issues. Why do these nurses and nursing faculty who divert new graduates away from psychiatric/mental health nursing care more about the medical issues of psychiatric/mental health patients than they do about psychiatric/mental health issues of their medical-surgical patients? I contend that there are far more patients in medical-surgical settings who have mental health issues (diagnosed or otherwise) and who are prescribed and taking psychiatric medications than there are patients in psychiatric/mental health settings who have a need for various physiological monitors, tubes, and physiological interventions.

Assuming that this is true, more people would benefit if all new nursing graduates had additional expertise in the care of individuals with mental illness and mental health problems. To address this, I propose an alternative and perhaps radical idea: All new graduates interested in medical-surgical nursing (or critical care, emergency departments, etc.) should have at least one year of psychiatric/mental health nursing experience before taking positions in medical-surgical settings. I think that this would benefit more patients than the antiquated and stigmatizing belief that all new graduates should get one year of medical-surgical nursing experience before working in psychiatric/mental health settings.