

The Right to Title: Standardizing 'Dr.' for Allied Health Professionals

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Research Domain: Health Science

Type of the Article: Letter to Editor

Type of Review/ Peer-Reviewers: Peer Reviewed by Asst. Professor: Dr. Senthil kumar and Mr. Manikandan M.

Indexed in: OpenAIRE.

DOI: [10.66159/IJAHS.2025.1302](https://doi.org/10.66159/IJAHS.2025.1302)

Received on: 20/11/2025

Published on: 02/12/2025

How to Cite this Paper:

Annie Caroline, E T, Giridharan, KARTHICK R. The Right to Title: Standardizing 'Dr.' for Allied Health Professionals. INDIAN JOURNAL OF ALLIED HEALTH SCIENCE. 2025Dec7;01(03):4-7.

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To the Editor,

The **Indian Medical Degrees Act** of 1916 serves as a foundational statute in India that regulates Western medical qualifications. Its primary objective is to prevent the misuse of medical titles by individuals lacking appropriate qualifications and to uphold the integrity of medical credentials. This Act established a legal framework to oversee medical degrees and protect public health from fraudulent practitioners [1]. Over the years, it has been integrated into a broader legislative framework, which includes the **Indian Medical Council Act** of 1956 and the contemporary **National Medical Commission (NMC) Act** of 2019. The NMC Act of 2019 is particularly noteworthy because it delineates the standards governing medical education and practice in India. This Act is crucial to ensuring that qualified medical professionals, including holders of the MBBS degree, are properly registered and recognized to practice medicine nationwide [2].

In recent times, a significant debate has emerged regarding the professional identity and standardization for **Allied and Healthcare Professionals (AHPs)** regulated under the **National Commission for Allied and Healthcare Professions (NCAHP) Act** of 2021 [3,4]. Despite the landmark nature of this Act in strengthening the allied health workforce in India, ambiguity persists regarding the usage of the "Dr." prefix for various AHP practitioners, including physiotherapists, occupational therapists, optometrists, radiology and imaging technologists, medical laboratory professionals, emergency and trauma technologists, respiratory therapists, physician associates, Cardio-vascular, Neuroscience and Pulmonary Technology Professionals and others.

Recently proposed draft guidelines permitted **physiotherapists** to use the "Dr." prefix alongside the "PT" suffix to reflect their professional autonomy and advanced clinical competence [5]. However, due to objections raised by multiple stakeholders, this recommendation has been postponed pending further legal and regulatory scrutiny [6]. At present, there is no official government notification providing clear and uniform guidance for all AHP categories concerning the use of the "Dr." title, leading to confusion among professionals, institutions, and the public.

Globally, in countries such as the United Kingdom, the United States, Canada, and Australia, advanced allied health professionals, such as Doctors of Physical Therapy, Doctors of Occupational Therapy, and Doctors of Clinical Laboratory Science, are permitted to use the doctoral title with appropriate designation, fostering transparency and professional respect while avoiding misleading the public. It is essential to recognize that many AHP professionals undergo rigorous education, including degree-level or master-level training, clinical internships, national-level registration, and ongoing competency development, comparable to that of other recognized health sciences.

Therefore, **India** must adopt a standardized and transparent policy that:

1. Clearly defines eligibility criteria for the use of the "Dr." prefix among AHPs based on educational qualifications, professional roles, and clinical autonomy.
2. Is applied uniformly across all disciplines regulated under the NCAHP to eliminate discrimination and confusion.
3. Mandates a discipline-specific suffix (e.g., Dr. (PT), Dr. (OT), Dr. (RT), Dr. (PA)) to ensure ethical clarity and prevent misrepresentation.
4. Provides guidelines for public awareness to educate healthcare consumers regarding the roles and scopes of practice of various professionals.

A unified policy would not only reinforce identity, dignity, and rightful recognition for allied health professionals but also promote interprofessional collaboration and enhance India's healthcare delivery system, particularly amid increasing demand for a competent health workforce beyond physicians and nurses. I respectfully urge the relevant authorities, including the NCAHP, the Ministry of Health and Family Welfare, and other stakeholders, to consider reviewing this matter and to issue a final gazetted notification that supports a fair, ethical, and standardized framework for the use of the "Dr." prefix by AHP professionals who meet clearly defined educational and competency criteria.

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