We read with interest the article, “Hospitalist Perspective of Interactions with Medicine Subspecialty Consult Services.” We applaud the authors for their work, but were surprised by the authors’ findings of hospitalist perceptions of consultation utilization. The authors reported that more hospitalists felt that their personal use of consultation was increasing (38.5%) versus those who reported that use was decreasing (30.3%). The lack of true consensus on this issue may hint at significant variability in hospitalist use of inpatient consultation. We examined consultation use in 4,023 general medicine admissions to the University of Chicago from 2011 to 2015. Consultation use varied widely, with a 3.5-fold difference between the lowest and the highest quartiles of use ($P < .01$). Contrary to the survey findings, we found that the number of consultations per admission actually decreased with each year in our sample. In addition, a particularly interesting effect was observed in hospitalists; in multivariate regression, hospitalists on nonteaching services ordered more consultations than those on teaching services. These findings suggest a gap between hospitalist self-reported perceptions of consultation use and actual use, which is important to understand, and highlight the need for further characterization of factors driving the use of this valuable resource.

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References
