Subspecialty Consultation:

Initial Evaluation:

The consult is basically an admission note with emphasis on the specific organ system that the consultant is expert in. This means that you will use the same format as an inpatient admission, but should provide additional detailed information about the given organ system for which you were asked to render an opinion. Basically, this requires an extremely detailed review of systems about the organ system that you are “expert” in.

That said, the best subspecialists are excellent generalists and often an organ system consultant will identify the problem which is actually outside of there are of expertise!

You should start out your note with the statement “Asked to see this age, race, gender with diagnosis for/to . . .” and give the question that you were asked to answer. Every consult should occur because a specific question needs to be answered. A major difference between the inpatient admission and the consultation is assessment and plan. With a consultation you should render your assessment, usually confining the assessment to the organ system that you are expert in, although occasionally you may have other opinions. The plan is replaced with recommendations. Remember that as a consultant you are only rendering an opinion and not assuming care for the patient. Therefore, you should provide recommendations to the primary care providers and allow them to do with the information what they want. Usually if the person asking for the consult doesn’t follow the recommendations, then the consultant will shortly sign off of the case.

Sign your notes LEGIBLY and put your pager number after your signature.

Daily Follow-up:

The consultant will usually write a daily note. Most commonly this is in the form of a SOAP note for inpatient daily follow-up. The S, O and A parts should be in the same format, but again the P should be replaced with recommendations. Usually the recommendations are confined to the organ system that one is expert in, although providing an opinion on how to manage an abnormal result outside of ones area of expertise is not unheard of.

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