



Calling Consults and Pager Etiquette

Note: All hospitals have different guidelines for how to go about requesting a consult. The following tips are *general* and sufficient at most academic medical centers.

How to request a consult:

Before sending a page:

Before sending a page, *think about what you want to ask the consultant*. The general expectation from the consultant is that you have a *specific* question that they can answer. Requesting a consult “because we thought you should know about this” *is not appropriate*. Additionally, make sure you know the most important components of a patient’s history and tailor these to the consulting service (e.g. if you are paging ID, know pt’s abx and any culture data; for cardiology, know pts cardiac hx, relevant EKG findings, cardiac meds, etc.)

Sending the page:

Look up in the paging directory who is on-call taking consults at the time. If multiple people are listed, *page the most junior clinician*. At most academic centers, residents or fellows will be the initial consultant, and at smaller community hospitals, you may need to page an attending directly.

Be concise, but make sure to include pertinent info. Now is not the time to be long-winded! It is OK to use commonly accepted abbreviations. Make sure to sign the page with your title (MS3/MS4), pager #, and callback phone #.

Example of consult regarding further management of diabetic foot ulcer:

“Dr. Smith, need c/s pt Jones MRN 5555555. 75M w/ DM, HTN now w/ L foot ulcer and poss osteomyelitis. Surgery vs. conservative mgmt?”

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Callback:

Shortly after sending the page (usually within 10-15 min), you should receive a callback from the clinician you paged. You will then need to give a brief (<1 min) summary of the patient’s history and hospital course geared toward the consulting service. Finally, you should end with the question you want answered. The consultant will then provide his/her initial thoughts, and then see the patient later that day.

General Etiquette:

- Call consults early in the day. Sending a consult page at 5PM is frowned upon *unless the consult is needed urgently*.
- When sending a page, **DON’T USE ALL CAPS** and don’t be too casual!!!
- Don’t call consults without first getting approval from your team. Like most things in medicine, consults require a fair amount of administrative work and resources, and should be used only when needed. Not every COPD exacerbation needs to be seen by a pulmonologist!