

What Is a Hospitalist?

By James S. Newman, FACP

What is a hospitalist? Although the term still causes some confusion, it is a question that is heard less often now as the field of hospital medicine continues its astounding growth. This was not the case in 1998 when the term was coined in the *New England Journal of Medicine*. At that time, only a few hundred physicians had dedicated their practice to the hospital care of acutely ill patients. Over the course of the next 10 years, that number swelled to thousands, with predictions of 30,000 practitioners in the next few years.

Hospitalists are providers who dedicate most of their career to the care of hospitalized patients. They focus on clinical management, with an added eye to quality, safety, and utilization. The ranks are filled with physicians, nurse practitioners, and physicians' assistants. Some hospitalists begin their practice directly after residency, although another large demographic group gained decades of experience in more traditional primary care before becoming hospitalists. Most hospitalists are trained in internal medicine, although a significant percentage have family medicine backgrounds. A small percentage from other specialties, including pediatrics, psychiatry, and even dermatology, have also adopted this model of care.

What stimulated this rapid expansion? Initially, hospitalists managed the inpatients of colleagues who needed to increase their outpatient visits. The stress of managing a busier outpatient practice, combined with caring for increasingly more complex hospital patients, became a significant impediment to quality care.

The number of hospitalists began to level off until 2003, when major changes in internal medicine residency requirements were put into place. When the residency governing board, the Accreditation Council for Graduate Medical Education, mandated work hour limits and an increased focus on outpatient training, it left academic medical centers with a large patient population that required medical management. Hospitalists have stepped in to close this gap, and this pressing need has helped fuel the development of the field.

Why is a hospitalist different from a traditional provider? A hospitalist is available to care for patients 24 hours a day, seven days a week. Holidays, nights, and weekends, a hospitalist is on board when a patient needs care. Generally, hospitalists work 12-hour shifts seven days in a row. Evenings may be covered by nonhospitalists, but usually night coverage is done by rotation among a hospitalist group. Many programs have dedicated nocturnists—hospitalists who only work at night.

Hospitalists focus on quality, safety, and resource allocation. They are generally quite active on the medical staff and serve on hospital committees, such as pharmacy and therapeutics or credentialing. Research by hospitalists includes length of stay, readmissions, quality guidelines, and education.

Are there any disadvantages to hospitalists? Continuity of care is one area of concern. Some patients and physicians feel disconnected when another provider manages an acute episode. Inadequate information at admission is a potential problem, and inadequate communication with the outpatient provider at discharge an even greater one. Making sure that the transitions are safe, and avoiding readmission due to miscommunication or lack of education, is an essential part of the role of the hospitalist.

In essence, hospitalists are providers who dedicate their career to care of the hospitalized patient and work toward a safer, higher-quality, evidence-based, patient-centered hospital stay.