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## Impact of Delayed Dermatology Consultation on Inpatient Care

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## **Impact of Delayed Dermatology Consultation on Inpatient Care**

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**Keywords:** dermatology consultation, inpatient care delay, change in diagnosis and management

**Introduction:** Dermatology consultation for inpatient skin disorders enhances care by changing diagnoses, management plans, and reducing length of stay. Our goal is to quantify the time delay from primary team to dermatology consult, and its impact on hospital course as well as overall patient care.

**Methods:** Retrospective chart review of all inpatient dermatology consults from October 1, 2013 to December 31, 2016 at five hospitals within the Detroit Medical Center. Data included demographics, diagnosis, management plans from primary and consulting teams, and timing of initial recognition of skin problem to dermatology and other specialties consultations.

**Results:** 873 consultations met criteria and were included for analysis. Median age was 45 years, 61% were African American, and 51% were female. Of the total, 258 (29.6%) patients had multiple specialties consulted, of which 61 (23.6%) had  $\geq 24$  hours elapse between consultation of another specialty and dermatology. Such delay in dermatology consultation was associated with an increased median length of stay of 7.0 days vs 4.0 days with no delay ( $p < 0.05$ ). Delay was also associated with more referrals from internal medicine or pediatrics (80.3% vs 67.5%) and less from infectious disease (4.9% vs 17.3%) as the primary team.

**Discussion/Conclusion:** Our findings indicated a delay in dermatology consults. Current literature has yet to explore the temporal relationship when a cutaneous finding was discovered between the primary team or dermatology. This study will dictate if timely dermatology consults lead to significant differences in diagnosis and management for patient care.