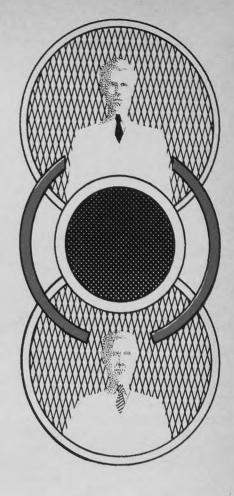
## Family Practice Forum

## On the Consultation Process

Albert Liebman, MD Inger-Lise Silbergleit, MD Milwaukee, Wisconsin



The care of the sick patient frequently involves more than one physician. When this occurs, it is most important that each physician have a clear definition of his role in the patient's management. When these roles are not clearly understood, a cooperative working relationship between the physicians is not established. In addition, the patient may become the recipient of contradictory recommendations and bewildering messages. In such cases, the patient does not receive the best possible medical care.

We are all aware that many patients have difficulty finding a physician to provide true primary care. Such a situation exists because of the long period during which the ratio of family physicians to other medical specialists decreased sharply. We are

also aware that this void frequently forces upon the consulting specialist the burden of assuming part of this responsibility. However, the consulting specialist may, at times, fail to perceive his appropriate role and may engage in inappropriate actions. The training of family physicians is philosophically based upon the principle that a primary care physician with a firm knowledge of the patient from a personal social-psychological standpoint as well as a medical one is in the best position to assess the direction of the patient's care. In doing so, he may need to call on specialists in all fields of medicine for their expert advice.

In order to provide this kind of medical care, it is necessary that the relationship of the family physician to the specialist in the care of patients be clarified. Medical consultation in this context, then, is a request by one physician to another (each a specialist in his own particular discipline) for a medical opinion and advice regarding the patient's care. It is expected that such an opinion and advice will be given to the family physician so that he may utilize this expertise in his

decision-making process. The opinion should be communicated to the family physician and not directly to the patient: the essence of the consultation process is one between physicians. Crucial medical care decisions should be discussed with the patient by the physician who is responsible for his continuing care. Some aspects of medical care need be carried out by only one physician; treatment often is a solo process. There are times when a specific care procedure is delegated to a specialist. This should be communicated to the specialist by the family physician so that the lines of responsibility are clearly defined. At this juncture, the family physician may ask the consultant to communicate directly with the patient regarding the procedure which he has been delegated to carry out (this procedure having been agreed upon in consultation between the family physician and the specialist). Patients can only receive optimum medical care when there is a clear understanding between the family physician and the specialist so that each may contribute his unique skills to the healing of the sick.

From the Department of Family Medicine-Family Practice, Medical College of Wisconsin (formerly Marquette School of Medicine), Milwaukee, Wisconsin. Requests for reprints should be addressed to Dr. Albert Liebman, Director, Family Medicine-Family Practice Department, Deaconess Hospital, 610 North 19th Street, Milwaukee, Wis 53232