Are Urologists Used Differently in Private versus Academic Hospitals? A Comparison of Urologic Consultations in the Transition from a Nonteaching to Teaching Hospital.

INTRODUCTION

- Compared to other specialties, burnout rates in urology are high in training but average post-residency.^{1,2}
- One potential cause for this discrepancy may be the inpatient consult burden in teaching hospitals.
- Bergan Mercy Medical Center—a private (nonteaching) hospital transitioned to an academic (teaching) hospital when it became Creighton University Medical Center – Bergan Mercy (CUMC) in the summer of 2017.
- We sought to determine how often urologic consulting services were used in the private vs academic setting.

METHODS

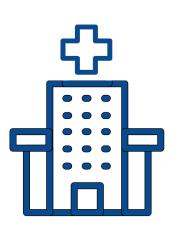
- A retrospective chart review was performed on all inpatient urology consults placed from July 2014 to June 2019.
- To calculate consult rate and account for variation in hospital census, all consults were weighted using patient days.
- To compare monthly rates of private and academic consults, we estimated a piecewise linear regression model with a first-order autoregressive residual covariance structure.

RESULTS



Study Interval July 2014 – June 2019 (**5 years**) **1,882** inpatient urology consults

Bergan Mercy (**Private**) July 2014 – June 2017 (**3 years**) 803 consults



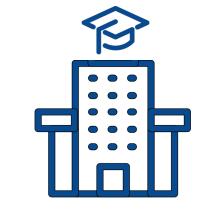
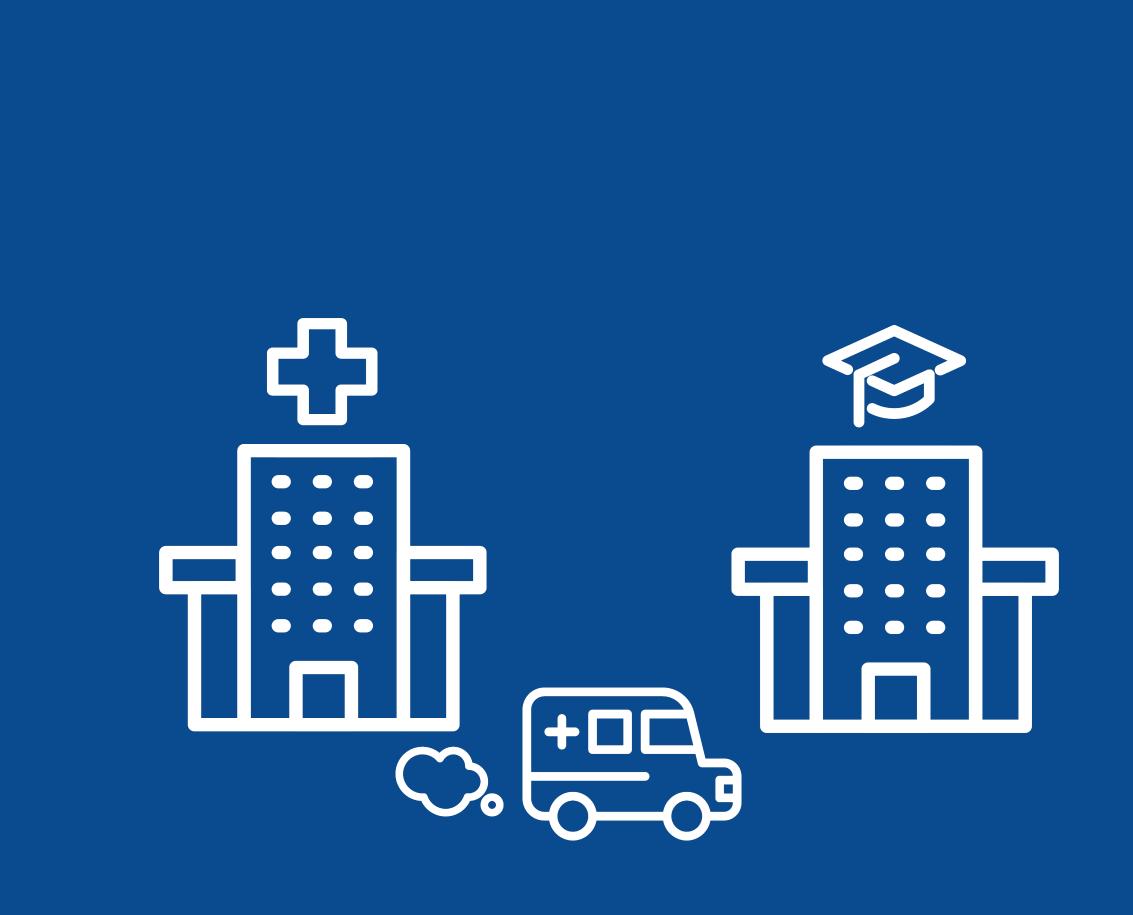


Figure 1. A total of 1,882 urology consults were placed during the study interval with 803 occurring prior to and 1,079 occurring after the transition to academic hospital.







Inpatient urology consults are placed more frequently in academic hospitals than private hospitals. This difference disappears in June, coinciding with the end of the academic year.

RESULTS (continued)

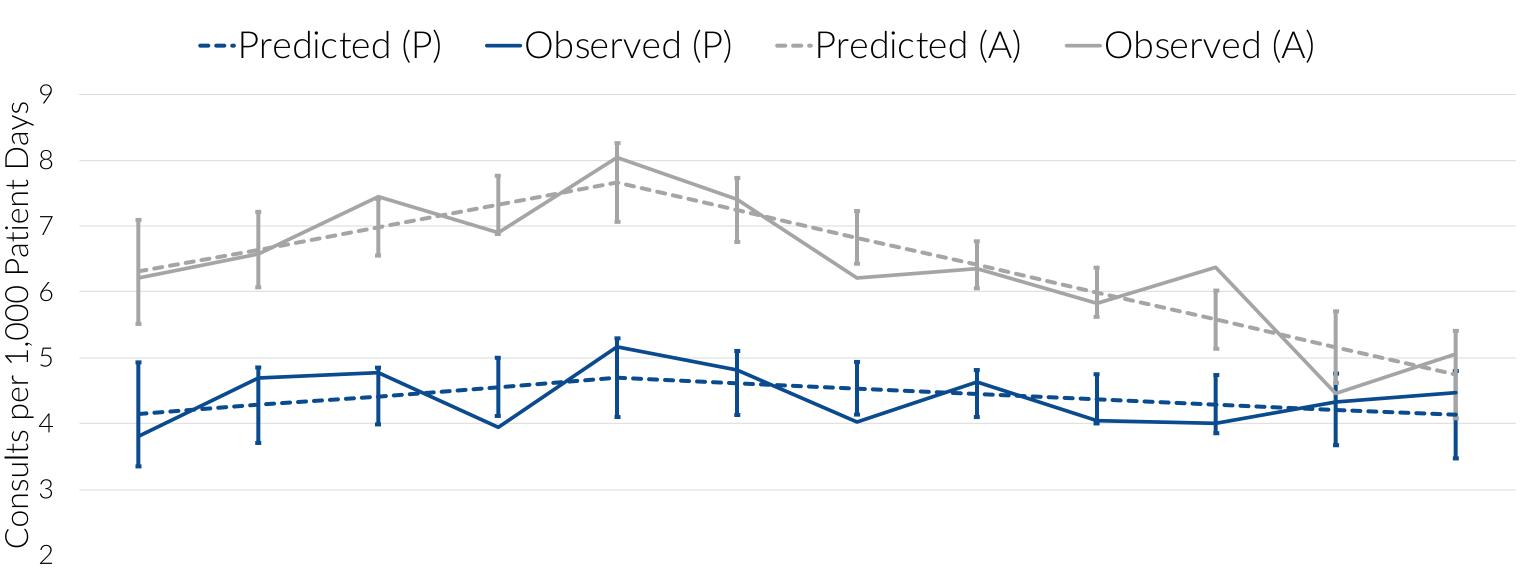


Figure 2. Monthly comparison of private (P) vs academic (A) consult rates arranged from July to June, reflecting the academic year. Solid lines are observed consults. Dashed lines are model-predicted consults. Error bars represent 95% confidence intervals.

- equalized.
- month.

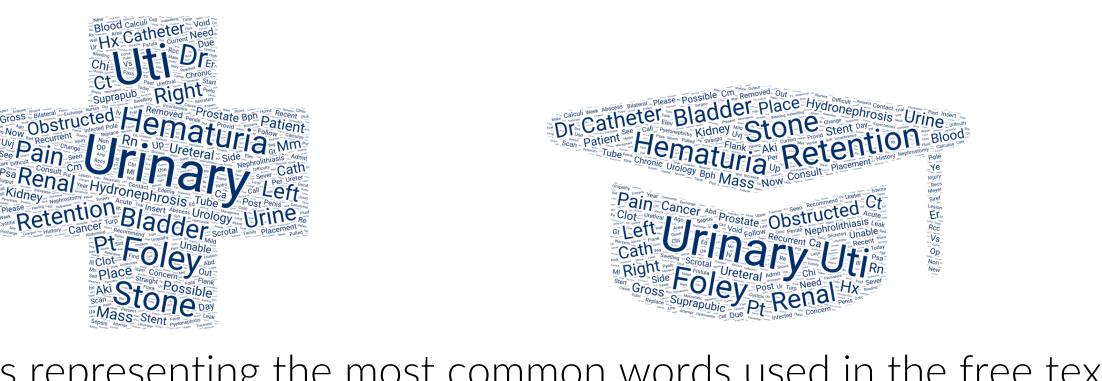


Figure 3. Word clouds representing the most common words used in the free text consult order of all private (cross) and academic (graduation cap) inpatient consults.

- ullet(14%) and urolithiasis (12%).

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• The consult rate was significantly higher in the academic vs private setting until the end of the academic year when rates statistically

The private rate was stable throughout the year, regardless of the

The academic rate rose from July to November and then steadily fell until matching the private rate at the end of the academic year.

The most common private consults were retention (24%), hematuria

The most common academic consults were retention (18%), urolithiasis (18%) and hematuria (14%).

> 1. Dyrbye LN et al. JAMA. 2018;320(11):1114–30. 2. Shanafelt TD et al. Mayo Clin Proc. 2019;94(9):1681–94.



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