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Hospitalists

Tagree with Dr Samoil that hospitalists improve hospital care. In Cambridge, Ont (population 125000), in 2000, we had 55 FPs overseeing 60 patients in the medical ward. This was inefficient. Eighty percent of those FPs resigned and we got hospitalists, who have done a wonderful job. Our FPs still take calls for the hospitalists and are encouraged to see their own patients if they want, and 20% still do.

It's important to note that, in 2000, Ontario FPs were being paid \$17 per hospital visit. When you think that half goes to overhead and half of what's left goes to taxes, we were getting \$5 for the sickest patients in our practice and had to pay \$500 per year to park! Also, we were being forced to take on orphan patients whom we had looked after in-hospital at our practices, in spite of being way over our comfort level.

So you can see why busy FPs get out of hospital work. As one older FP said to me, "the hospital gives me 2% of my pay and 98% of my problems."

> —John W. Crosby, MD CCFP(EM) FRCPC Cambridge, Ont

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Open dialogue

Tfound the debate on hospitalists^{1,2} interesting. ■Unfortunately, it is a rather irrelevant issue for those of us practising in urban areas. Family physicians have not been looking after inpatients at my community hospital for years and I do not see that changing in the future.

A more relevant issue for me and others in my community is the lack of communication between physicians with respect to our hospitalized patients. I was hoping that having hospitalists who were also family physicians would improve this situation. Unfortunately, at my hospital,