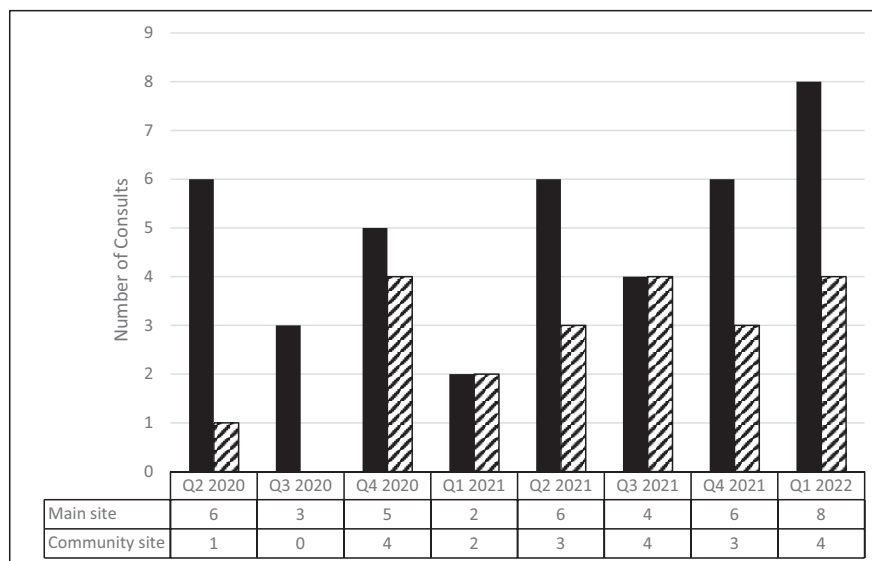


Supplemental Information

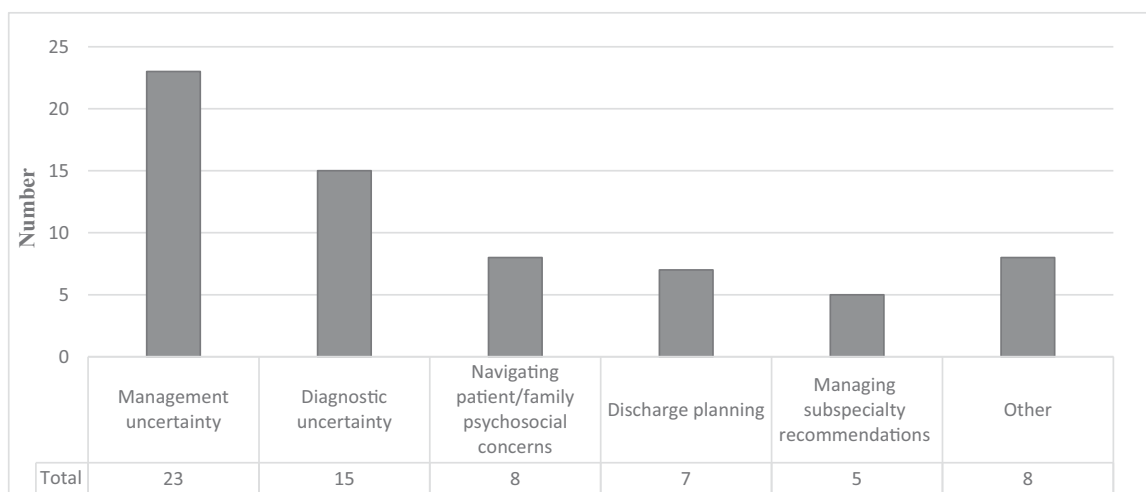
SUPPLEMENTAL TABLE 4 Illustrative Comments from Requesting Hospitalists Postconsultation Surveys

Illustrative Comments	
Indications for Consultations	
Diagnostic uncertainty	It affirmed that the diagnostic path I was going on for my patient made sense given the clinical information I was able to share.
Management uncertainty	This was a very difficult, complex patient and there were no clear answers so having someone readily available to talk things through was helpful.
Navigating patient/family psychosocial concerns	I was able to get timely advice for my patient I could immediately put into practice, main concern was the need for additional social services for the patient.
Prompting subspecialty consultation	I was able to consult an additional service for my patient that was very useful.
Disposition or discharge planning	Discussed the diagnosis and management of MIS-C, specifically indications for admission vs discharge.
Qualities of Consultations	
Timeliness	Helped me think through my thought process. Response was quick so if I needed to change my plan, it would affect patient care.
Providing reassurance	I had already decided, but it helped me feel more comfortable with my decision.
Prompting changes in care	Shortly after this consult I decided to move forward with my plan, which actually expedited the patient's care, leading to timely surgical intervention and transfer.
Engaging community sites	As single in-house attending at community site, I can reach out to someone with similar experience and knowledge. I specifically chose the consultant with more newborn experience.

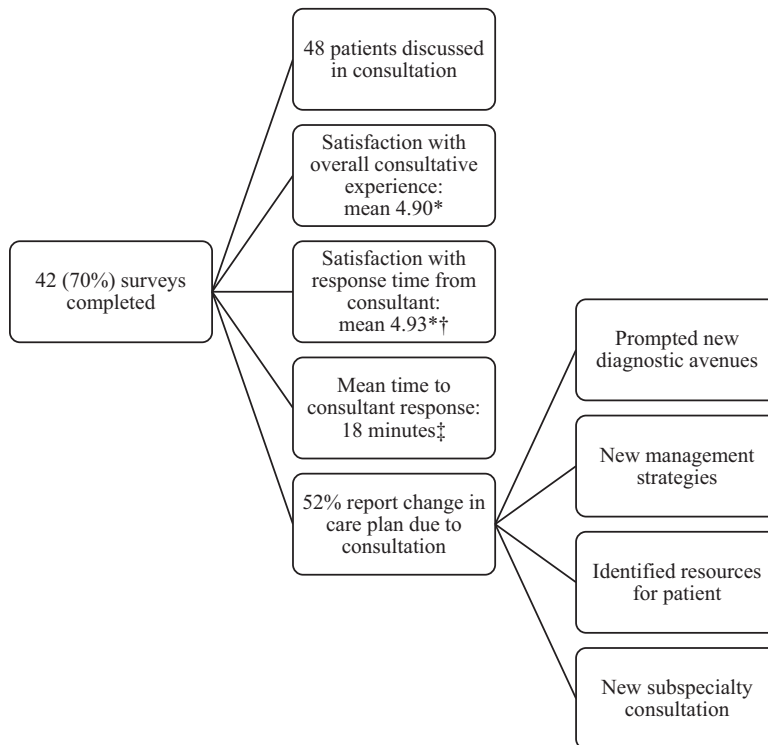
Abbreviation: MIS-C, multisystem inflammatory syndrome in children.



SUPPLEMENTAL FIGURE 1 Number of consultations by clinical site over time. Q1: quarter 1, January–March; Q2: quarter 2, April–June; Q3: quarter 3, July–September; Q4: quarter 4, October–December. Main site: freestanding children's hospital. Community site: combines the 7 affiliate sites.



SUPPLEMENTAL FIGURE 2 Indication for peer consultation as reported by requesting hospitalists.* *Requesting hospitalists can choose more than one indication for consultation.



SUPPLEMENTAL FIGURE 3 Preliminary data from requesting hospitalists postconsultation surveys.

*Likert scoring anchored by 1, very dissatisfied, and 5, very satisfied (min 1.00, max 5.00). † $n = 41$ responses. ‡ $n = 25$ responses, min 0 minutes, max 120 minutes, median 5 minutes, 95% confidence interval, 0-60.