Urgent Care Center or ER?
CITYMD "Know Where to Go" Guide

According to CityMD, some Americans may not be choosing the correct immediate care option when deciding between a visit to the emergency room or an urgent care center.

Through a national survey conducted online by Harris Poll from January 27-31, 2017, CityMD presented over 2,000 Americans ages 18 and older with 8 scenarios, asking which facility would be the best option for immediate medical care: a hospital emergency room or urgent care center.

The responses were used to develop this **"Know Where to Go" Guide**, based on recommendations by CityMD's emergency medicine physicians. Below are the full scenarios, along with insight from CityMD's Chief Medical Officer, Dr. David Shih.

Scenario 1

A 40-year-old woman tripped as she was running for the bus. She had to limp to the bus stop and a significant black-and-blue bruise appeared on her ankle. She wasn't sure if it was sprained or broken. **Where Do You Go? Urgent Care Center.**

Most Americans say that an urgent care center is better than an emergency room for immediate treatment in this scenario (77 percent). However, nearly 1 in 4 (23 percent) answered incorrectly, thinking that this would warrant a trip to the ER.

> **According to Dr. Shih:** These symptoms indicate an orthopedic injury, which would require an X-ray. Many people don't realize that most urgent care centers (and all CityMD locations) are able to provide X-rays and handle orthopedic injuries including sprains and common fractures. Once evaluated and stabilized, the patient would then receive a referral to an orthopedic doctor for follow up. In this scenario, one would visit the ER if the trauma was severe or if the bone was sticking out, which would potentially signal a complex broken bone injury (a compound open fracture). In those scenarios, surgery would be needed.

Scenario 2

A three-year-old girl slipped on hardwood floor and split her chin open. The bleeding wouldn't stop for several minutes and the gash looked really deep. **Where Do You Go? Urgent Care Center.**

More than half of Americans are under the impression that this would warrant a trip to the ER to receive immediate treatment (54 percent) while 46 percent of Americans answered this correctly.

> **According to Dr. Shih**: Any laceration on a child is going to look deep and may seem more serious than it really is. Most lacerations can be treated with stitches or medical glue at an urgent care center as long as there are no neurological issues that require overnight monitoring, prolonged observation, specialist care or specific testing, like an MRI or CAT scan, which urgent care centers do not offer. Family practice and emergency medicine doctors working at urgent cares can handle most laceration repair cases.

Scenario 3

A 30-year-old man suffered a severe head trauma after a bicycle crash. He wasn't wearing a helmet, and is experiencing a loss of consciousness. **Where Do You Go? Emergency Room.**

Most Americans (91 percent) correctly think that this scenario should result in a visit to the ER to receive immediate treatment. However, nearly 1 in 10 (9 percent) would suggest a trip to the urgent care center.

> **According to Dr. Shih:** Loss of consciousness is a worrisome sign for head trauma. Because this is a time-sensitive ailment that may require a trauma work-up, overnight neurological observation/monitoring, and/or more in-depth, specific testing, like a head MRI or CAT scan, the ER is the best place to go. If the man were to visit an urgent care center, he would likely be sent to the ER via ambulance.

Scenario 4

A seven-year-old boy was complaining that he couldn't sleep, and he was coughing and shivering. His fever was 104. **Where Do You Go? Urgent Care Center, unless paired with other medical conditions.**

Americans were somewhat split on this scenario with 46 percent choosing the correct answer, an urgent care center, and 54 percent choosing incorrectly, an emergency room.

> **According to Dr. Shih**: For most of these cases involving a healthy child, they could be seen at the urgent care. The child should be taken to the ER if he or she currently has severe respiratory symptoms, active seizures, an altered mental state (like confusion, lethargy, or fainting) and/or has significant chronic medical problems, like behavioral issues, lung or heart disease. In those scenarios, a child should be taken to the ER for a more in-depth work-up due to potential complications.

Scenario 5

A generally healthy 45-year-old woman has been experiencing sharp pains and heaviness in her chest, which then traveled to her left shoulder. She's also experiencing shortness of breath.
Where Do You Go? Emergency Room.

Most Americans (87 percent) recognize that this scenario depicts a potentially life-threatening situation and chose an emergency room for immediate treatment. The other 13 percent chose incorrectly, thinking this scenario could be treated in an urgent care center.

> **According to Dr. Shih**: Though the woman described is generally healthy and young, she may be experiencing common symptoms for a heart attack. Potential heart attacks are serious and require detailed work-up in the ER – if you're ever concerned about any life- or limb-threatening symptoms or conditions, err on the side of caution and seek ER treatment immediately.

Scenario 6

A 25-year-old woman is experiencing genital pain, sores and pelvic pain. She may have been exposed to a sexually transmitted disease or infection. **Where Do You Go? Urgent Care Center.**

Three-quarters of Americans (75%) believe an urgent care center would be the better option for immediate treatment in this scenario. However, one-quarter of Americans (25%) incorrectly chose the ER as better suited to handle this.

> **According to Dr. Shih:** Since the scenario describes typical symptoms of sexually transmitted diseases or infections, an emergency room visit isn't warranted. Urgent care centers can quickly and efficiently treat a variety of STDs.

Scenario 7

A 34-year-old man has a nosebleed that won't stop. He's also experiencing some pain in his ear.
Where Do You Go? Urgent Care Center.

Half of Americans (50 percent) correctly chose urgent care, while the other half (50 percent) chose the emergency room for immediate treatment in this scenario.

> **According to Dr. Shih**: Because about 9 in 10 nosebleeds can be treated with packing and pressure by a trained clinician, an urgent care center is the best choice for most cases. For the nosebleed cases that do require a higher level of care, due to complicated medical history such as high blood pressure patients and those taking blood thinners, the emergency room may be the better choice.

Scenario 8

At home, a 50-year-old man suddenly had a strange experience with his vision. He lost peripheral vision in his right eye and felt unbalanced with a strong headache. His family has a history of stroke.
Where Do You Go? Emergency Room.

Most Americans (87 percent) recognized that the emergency room is the better place to go for immediate care in this situation. However, 13 percent of Americans incorrectly chose urgent care.

> **According to Dr. Shih**: In this scenario, with or without the family history, the man should visit the emergency room because he's potentially showing symptoms of a stroke, head trauma or an aneurysm. Always go to the ER if there are any sudden neurological or visual deficits. A timely detailed work-up in the ER is absolutely needed.

Survey Methodology

This survey was conducted online within the United States between January 27-31, 2017 among 2,196 adults aged 18+ by Harris Poll on behalf of CityMD via its Quick Query omnibus product. Results were weighted for age within gender, region, race/ethnicity, income, and education where necessary to align them with their actual proportions in the population. Propensity score weighting was also used to adjust for respondents' propensity to be online.

All sample surveys and polls, whether or not they use probability sampling, are subject to multiple sources of error which are most often not possible to quantify or estimate, including sampling error, coverage error, error associated with nonresponse, error associated with question wording and response options, and post-survey weighting and adjustments. Therefore, Harris Poll avoids the words "margin of error" as they are misleading. All that can be calculated are different possible sampling errors with different probabilities for pure, unweighted, random samples with 100% response rates. These are only theoretical because no published polls come close to this ideal.

Respondents for this survey were selected from among those who have agreed to participate in online surveys. The data have been weighted to reflect the composition of the adult population. Because the sample is based on those who agreed to participate in our panel, no estimates of theoretical sampling error can be calculated.

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