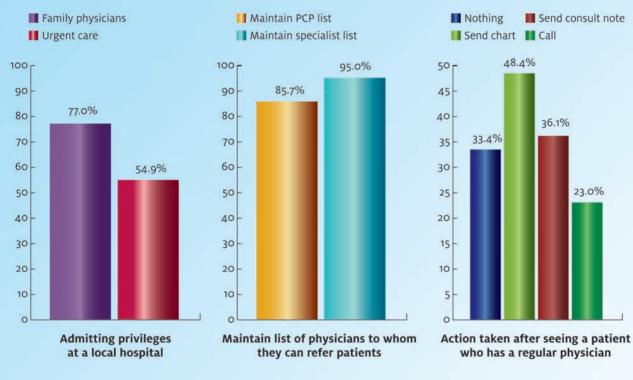
DEVELOPING DATA

n early 2008, UCAOA revamped its annual survey in conjunction with researchers at Massachusetts General Hospital and Harvard University with the goal of assuring that the UCAOA Benchmarking Committee's efforts produced a scientifically valid report.

Over the coming months in Developing Data, *JUCM* will present some of the findings from this landmark survey, to which 436 urgent care centers responded.

In this issue: How deeply is urgent care integrated within the larger U.S. healthcare system? What are the "norms" for admitting privileges and maintaining referral lists among urgent care physicians, and what action do urgent care centers tend to take after seeing patients who have a regular physician?



INTEGRATION WITHIN THE HEALTHCARE SYSTEM

The difference between urgent care and family medicine in the area of admitting privileges is to be expected, due to the nature of the urgent care environment; typically, urgent care clinicians do not follow their patients over time or if they are hospitalized.

Acknowledgment: Data submitted by Robin M. Weinick, PhD, assistant professor, Harvard Medical School and senior scientist, Institute for Health Policy, Massachusetts General Hospital. Dr. Weinick is also a member of the *JUCM* Advisory Board. Financial support for this study was provided by UCAOA.

If you are aware of new data that you've found useful in your practice, let us know via e-mail to *editor@jucm.com*. We'll share your discovery with your colleagues in an upcoming issue of *JUCM*.