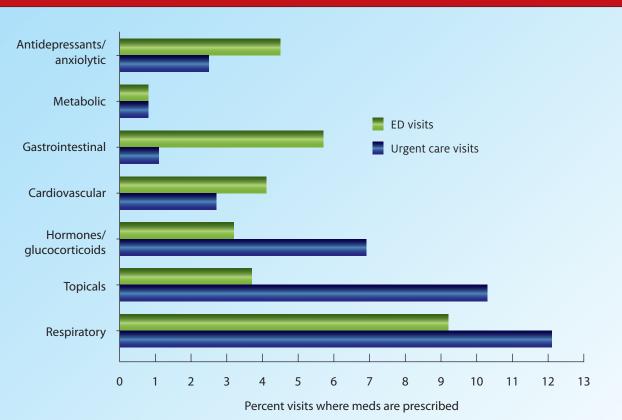
DEVELOPING DATA

n each issue on this page, we report on research from or relevant to the emerging urgent care marketplace. This month, we offer one more snapshot of data presented in a *Health Affairs* article entitled Many Emergency Department Visits Could Be Managed at Urgent Care Centers and Retail Clinics,¹ in which prescribing trends in the urgent care setting are compared with trends in other settings, such as the emergency room and retail clinics.

Below, we share a comparison between urgent care and in the ED in prescribing respiratory agents (e.g., antihistamines and bronchodilators), topical agents (e.g., steroid creams), hormones/glucocorticoids, cardiovascular agents (e.g., antihyper-tensives), gastrointestinal agents (e.g., laxatives, drugs for acid reflux), and metabolic agents (e.g., diabetes medications).



PRESCRIBING OF MISCELLANEOUS CLASSES

Reference

1. Weinick RM, Burns RM, Mehrotra A. Health Affairs. 2010;29(9):1630-1636.

This information may be most valuable to the urgent care practitioner as a barometer of patient preferences when choosing which site best suits their needs.

Whether or not these data reflect what occurs in your facility, "go to school" on them to gain insight into how patients view the capabilities of urgent care as a whole compared with the ED. If they don't know what your capabilities are, educate them.

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*.