



URGENT INTERACTIONS



LETTERS TO THE EDITOR

In response to the January 2024 Letter From the Editor in Chief Joshua W. Russell, “What Happens if We Do Nothing?” is Still the Right Question”

When we as doctors recognize other health concerns in our patient, we need to point them out and emphasize the importance of getting treatment. I recall about 40 years ago when it was said that the family doctor addressed about 6 or so issues at each visit. The sore rib would be addressed, but a quick initiation of treatment for the BP, refill of the metformin, and reassurance about a little insect bite would be given and the patient instructed to follow-up for the BP and DM. It took a few minutes, but the concept of whole-person medicine was preserved. These days, too many primary care doctors treat patients like an urgent care, single-issue patient, and care is dispersed to multiple doctors without concern for the whole person.

David H. Hopper MD
Retired from Urgent Care in Greensboro, NC



“Offer patients something for comfort while they wait. Getting a patient an ice pack buys you orders of magnitude more goodwill when it’s time to discharge them.”

— **Joshua W. Russell, MD, MSc, FUCM, FACEP**
JUCM Editor in Chief



“Reassurance is a big part of healing.”

— **Michael Weinstock, MD**
JUCM Senior Clinical Editor

A WORD OF THANKS

The Journal of Urgent Care Medicine would like to thank the dedicated group of urgent care professionals listed below who graciously contributed their time and insight to review recent articles for publication. The peer reviewer status is worthy of inclusion on your curriculum vitae, so if you’re interested in becoming a peer reviewer, reach out to the JUCM team at: editor@jucm.com.

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