

URGENT CARE OR ER?

That is the Q you now face when a medical crisis strikes—and a recent survey found that 89 percent of people would head to the ER for problems that could be treated at an urgent-care clinic. Those unnecessary ER visits add up: Wait times can be hours longer, and care can cost thousands of dollars more. Use our cheat sheet to determine the right destination for common ailments.

By Jamie Hergenrader

BROKEN BONE

URGENT CARE

Suspect you broke a peripheral bone (foot, ankle, wrist, finger)? Urgent-care docs can X-ray it and put on a temporary splint, then refer you to an orthopedic M.D. for follow-up care and (if needed) a long-term cast.

EMERGENCY ROOM

Hit up the ER for a broken long bone (arm or leg) or centralized one (skull, neck, hip), any break that restricts blood flow (it'll feel numb), or a fracture in which the bone is sticking out of your skin—you'll need a cast and possibly surgery.

FEVER AND VOMITING

URGENT CARE

A temp of up to 102.5°F, with or without vomiting, is likely a temporary bug or the flu. You can ride it out, or if symptoms last longer than 24 hours, see an urgent-care doctor for anti-nausea meds to avoid dehydration.

EMERGENCY ROOM

Hightail it here if that high temp and puking come with sharp abdominal pain or a headache. The former can signal gallbladder issues (which may require surgery); the latter, meningitis (ER M.D.s can confirm with a spinal tap).

ABDOMINAL PAIN

URGENT CARE

Choose this if a previously diagnosed gut problem (such as IBS or acid reflux) is making you more miz than usual and your primary-care M.D. is booked solid.

EMERGENCY ROOM

A severe, out-of-the-blue belly ouch can signal appendicitis, kidney stones, or inflammation in the gallbladder, liver, or pancreas. ER docs have high-tech equipment (CT scanners, MRIs) to ID the cause—and powerful painkillers to make you more comfortable.

CUTS

URGENT CARE

These docs can clean out a shallow cut (you can't see muscle or bone) with an antiseptic to prevent infection, then seal the edges with stitches or medical glue, even on your face.

EMERGENCY ROOM

If you can see bone or the bleeding hasn't stopped after 15 minutes of pressure, head here. Ditto puncture wounds (e.g., you stepped on a nail or an animal bit you); advanced imaging tools let ER docs check for damage to nerves, arteries, or veins.

