An urgent care center is a walk-in clinic focused on the delivery of medical care for minor illnesses and injuries in an ambulatory medical facility outside of a traditional hospital-based or freestanding emergency department. Other names for similar types of facilities include, but are not limited to: after hours walk-in clinics, minute clinics, quick care clinics, minor emergency centers, and minor care clinics. In some instances, facilities have used the term “emergency” in their name or advertisements, for example, “Minor Emergency Clinic” or “We Treat Emergencies.”

Although the Urgent Care Association of America and the American Academy of Urgent Care Medicine have criteria for urgent care clinics, there are limited regulations or state licensing requirements. Criteria may include: that the facility be open 7 days a week, contain multiple exam rooms, have on-site diagnostic equipment, have a licensed physician as a medical director, accept walk-in patients during business hours, treat a broad spectrum of illnesses and injuries and perform minor medical procedures.

Urgent care clinics across the country offer a wide range of care. Some provide levels of care similar to the level of care of an emergency department (ED), including a board certified emergency physician, advanced diagnostic equipment, including CT scan, X-ray, and many onsite laboratory services. The majority of these facilities; however, are staffed by primary care physicians, advanced practice registered nurses and physician assistants, and have limited diagnostic equipment, often only including point-of-care testing and limited medications. Unlike EDs associated with a hospital, urgent care facilities do not have state or federal mandates to see, treat, or stabilize patients without regard for the patient’s ability to pay.

The American College of Emergency Physicians (ACEP) believes that any facility that does not meet the definition of an ED or Freestanding Emergency Department as defined by ACEP, and that advertises itself as providing unscheduled care should:

- not use the word “emergency” or “ER” in its name in any way.
- not use the word “emergency” or “ER” in any advertisements, claims of service, or to describe the type or level of care provided or as an
alternative to an ED. Doing so may be considered a deceptive trade practice, as defined by federal or applicable state law.

- be required to comply with appropriate state or federal licensing requirements that specify staffing and equipment criteria to provide clear information to patients accessing medical care.

ACEP believes that urgent care centers do hold a place in appropriate unscheduled care, but the lack of regulation of facilities has caused confusion for patients and has put the prudent layperson definition of an emergency at risk. Therefore, ACEP encourages all states to have regulations regarding urgent care centers and the use of the word “emergency” that are developed to be consistent with this policy and with input from ACEP chapters in the state.