

Introduction

The past two decades have seen a surge in a new form of medical practice: walk in clinics designed with an emphasis on acute, quick and cheap care. While they went through a phase of many names, most people in America are familiar and personally acquainted with urgent care centers. These urgent care centers focus on acute episodic care with a substantial emphasis on customer service. There is no official definition of what constitutes an urgent care center, but the scope of services provided generally falls between that of a primary care doctor's office and an emergency department. While

urgent care centers may be owned and operated by hospitals or multi-specialty group practices, this report focuses on those that are independently owned or that are part of chains of urgent care centers.

The first "urgent care" centers opened in the United States in the early 1980's., with no more than a handful in operation at the time. Unfortunately, (at least as far as early investors were concerned), the industry rapidly declined, and the few clinics which had opened were largely absorbed into larger hospitals and healthcare groups. Ten years later, in the mid-1990's , the industry again began growing rapidly, quickly growing to between 12,000 and 20,000 centers today. By the UCAOA's estimate, in 2014 approximately two new urgent care centers were opening in the United States each week.

Over the last two decades, urgent care centers have proliferated in the United States, growing to 9,000 facilities as of 2014 (Yee 2013). Such recent and rapid expansion of the industry has been heavily examined by the media, which often attribute growth to a diverse set of market factors such as long wait times for primary care appointments, crowded emergency departments and patient demand for more accessible care, including after-hours appointments (Yee, Lechner, and Boukus 2013).

Yet despite the rapid development of the industry and the great interest sociologists have historically taken in America's health care system, hardly any scholarly research has been done on why these centers are coming to play a major part of the healthcare system or what their patterns of use are. While many are quick to point towards long wait times, and the difficulty of finding doctors in the current healthcare system, the repercussions of the new turn towards urgent care centers.

In the following analysis, I will attempt to situate the rise of such clinics within the existing sociological research, generating hypotheses about why patients are turning towards such centers and away from primary care and/or emergency department use. Drawing on research studying the sociology of medicine and using advanced statistical clustering methods, this thesis seeks to understand what the key characteristics are of individuals choosing to go to urgent care. To do so, I will utilize the clustering method of unsupervised learning in order to better understand if and what subgroups appear within the group of patients who have begun to use urgent care rather than traditional means of procuring healthcare.