

Q2 What is the single most important issue that impacts your practice of emergency medicine?

Answered: 62 Skipped: 8

#	Responses	Date
1	Overcrowding and limited physician coverage	10/31/2015 12:02 AM
2	lack of access to primary care	10/30/2015 8:08 PM
3	Payor re-imbursement barriers to recover payment	10/29/2015 8:49 AM
4	lack of primary care availability to prevent unnecessary ED visits that could be managed in a clinic setting	10/26/2015 7:21 PM
5	long boarding times in our ED	10/26/2015 9:00 AM
6	The adverse impact of EMRs on productivity	10/26/2015 8:38 AM
7	Lack of communication from and to community physicians	10/25/2015 8:49 PM
8	administrative burden and EHR	10/25/2015 6:05 PM
9	Too much government involvement, worthless charting requirements, ICD-10, etc.	10/25/2015 9:49 AM
10	Lack of ability to arrange timely follow-up with primary care	10/25/2015 7:00 AM
11	ED crowding	10/24/2015 11:11 PM
12	Increasing regulation/mandates ie CMS new sepsis	10/24/2015 10:09 PM
13	access to care	10/24/2015 2:45 PM
14	Physician, Nurse, and hospital staffing shortages	10/24/2015 2:30 PM
15	access to care	10/24/2015 2:10 PM
16	pay	10/24/2015 1:45 PM
17	Non-burdensome EMR	10/24/2015 1:25 PM
18	Liability reform	10/24/2015 1:24 PM
19	Availability of resources/personnel	10/24/2015 1:14 PM
20	Pt follow up and addressing of PC issues	10/24/2015 12:56 PM
21	Contract management groups	10/24/2015 12:55 PM
22	resources	10/24/2015 12:53 PM
23	EM reimbursement	10/24/2015 12:39 PM
24	CME requirements for stroke , trauma, and stemi suck up all of my time taking it away from other em aspects	10/24/2015 11:54 AM
25	liability	10/24/2015 11:53 AM
26	Reimbursements, large deductibles	10/24/2015 11:33 AM
27	Support from administration	10/24/2015 11:25 AM
28	lack of trained nursing and other staff	10/21/2015 2:15 PM
29	The emphasis on time metrics on non emergency care given in ED's	10/21/2015 11:38 AM
30	Hospital support to provide quality healthcare	10/20/2015 8:28 PM
31	Behavioral Health patients boarding in the ED	10/20/2015 7:40 PM
32	No rx database.	10/20/2015 4:36 PM
33	reimbursement	10/20/2015 2:00 PM

34	Lack of narcotic registry	10/20/2015 12:36 PM
35	Liability	10/20/2015 11:00 AM
36	CME requirements are onerous	10/20/2015 10:07 AM
37	Too many-but tort reform has to be near the top	10/20/2015 9:16 AM
38	ED Crowding	10/20/2015 7:35 AM
39	Affordable care	10/20/2015 7:16 AM
40	Low reimbursement	10/20/2015 4:50 AM
41	misuse of ED by uninsured or underinsured	10/20/2015 4:21 AM
42	requirements increasing	10/20/2015 12:24 AM
43	Patient volume	10/19/2015 11:46 PM
44	Time requirements CME for all of these TCD. Way too many	10/19/2015 8:01 PM
45	Staffing	10/19/2015 7:54 PM
46	Unrealistic expectations and volumes of patients to "make happy" whether right or wrong medically	10/19/2015 6:52 PM
47	Access to timely primary care/follow up	10/19/2015 5:59 PM
48	lack of payment for services rendered	10/19/2015 4:09 PM
49	Malpractice risk	10/19/2015 4:00 PM
50	tort reform, liability protection	10/19/2015 3:58 PM
51	Improper use of EM services for noon emergent primary care.	10/19/2015 3:46 PM
52	Documentation demons documentation demons	10/19/2015 3:27 PM
53	Lack of prescription monitoring	10/19/2015 3:17 PM
54	Boarding of admitted patients in the emergency department	10/19/2015 2:20 PM
55	Patient care	10/19/2015 2:14 PM
56	Resident rights, tuition repayment	10/19/2015 2:10 PM
57	Access to follow up care for patients	10/19/2015 2:09 PM
58	Access to inpatient beds, especially psychiatric	10/19/2015 1:53 PM
59	Reimbursement	10/19/2015 1:52 PM
60	reimbursement, including high copays for ACA Pts	10/19/2015 1:42 PM
61	Financial solvency	10/19/2015 1:41 PM
62	Increasing requirements	10/19/2015 1:38 PM