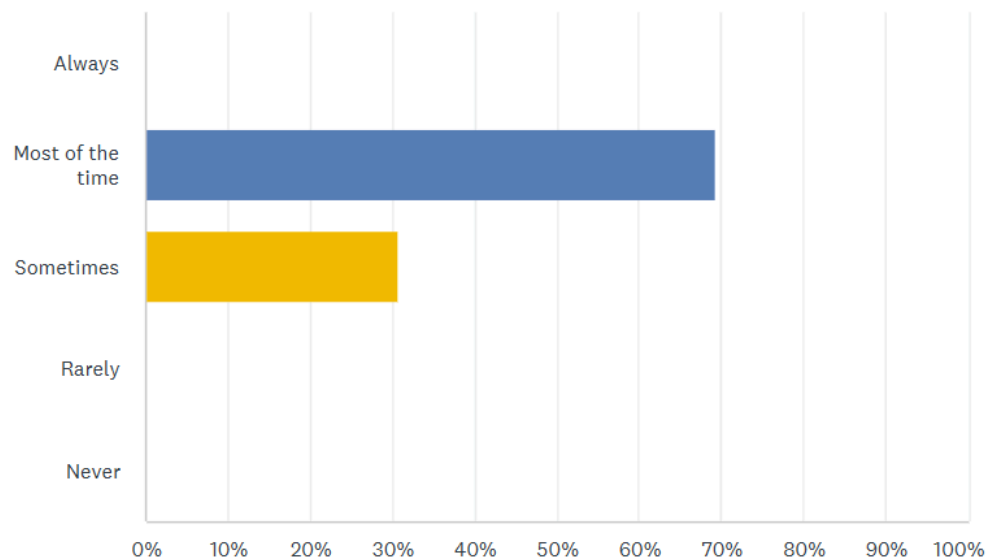


Q1



How often do you feel the current available lab tests (CBC, Renal, liver enzymes, spot glucose, Lipase, troponin, CK, urinalysis, urine pregnancy) meet your needs for providing quality rural emergency care?

Answered: 13 Skipped: 0



Question #1

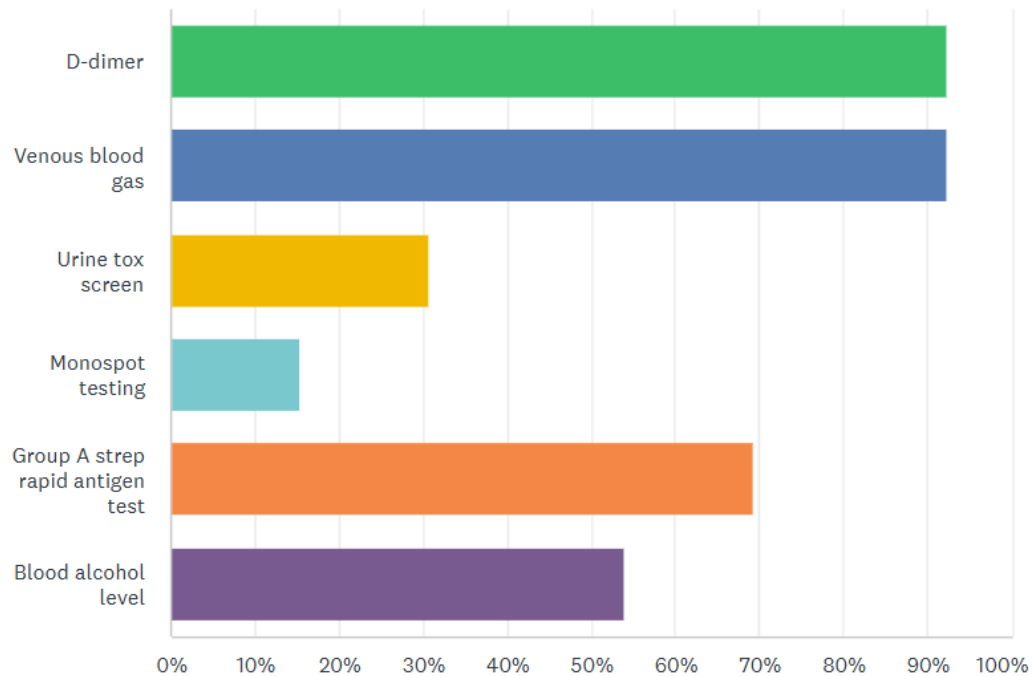
ANSWER CHOICES	RESPONSES	
Always	0.00%	0
Most of the time	69.23%	9
Sometimes	30.77%	4
Rarely	0.00%	0
Never	0.00%	0
TOTAL		13

Q2



Which additional lab tests would most help you provide quality rural emergency care? Select all that apply.

Answered: 13 Skipped: 0



Question #2

ANSWER CHOICES	RESPONSES	
D-dimer	92.31%	12
Venous blood gas	92.31%	12
Urine tox screen	30.77%	4
Monospot testing	15.38%	2
Group A strep rapid antigen test	69.23%	9
Blood alcohol level	53.85%	7
Total Respondents: 13		

Q3



Please enter any other lab tests you believe are essential for rural emergency care that are not listed above.

Answered: 11 Skipped: 2

SPECIFIC TESTING

CRP, BNP

1/16/2026 11:32 AM

CRP, ketones and lactate

1/15/2026 11:56 AM

POC HIV for needle sticks

1/15/2026 09:54 AM

Lactate(if not included in VBG)

1/15/2026 09:08 AM

Crp, serum bhcg

1/14/2026 09:37 PM

There are still rural sites that don't have serum tylenol levels; most of these patients are stable and can avoid transfer if they can get a 4/8hr tylenol level.

1/14/2026 08:59 PM

CRP, BNP

1/14/2026 08:48 PM

Lactate

1/14/2026 08:43 PM

Esr, Crp

1/14/2026 08:43 PM

CRP

1/14/2026 08:33 PM

If sites have urine tox screens and blood alcohol levels, they should also have Tylenol and salicylate levels. Together these form a minimal, coherent overdose screen for suicidal or intoxicated patients. Tylenol and salicylate overdoses are common, often clinically silent early, and medically dangerous if missed. Without these labs, patients cannot be reliably medically cleared for psychiatry, which leads to unnecessary transfers and delays. Adding Tylenol and salicylate levels is low cost, high yield, and directly supports safe VIPER-enabled psychiatric disposition

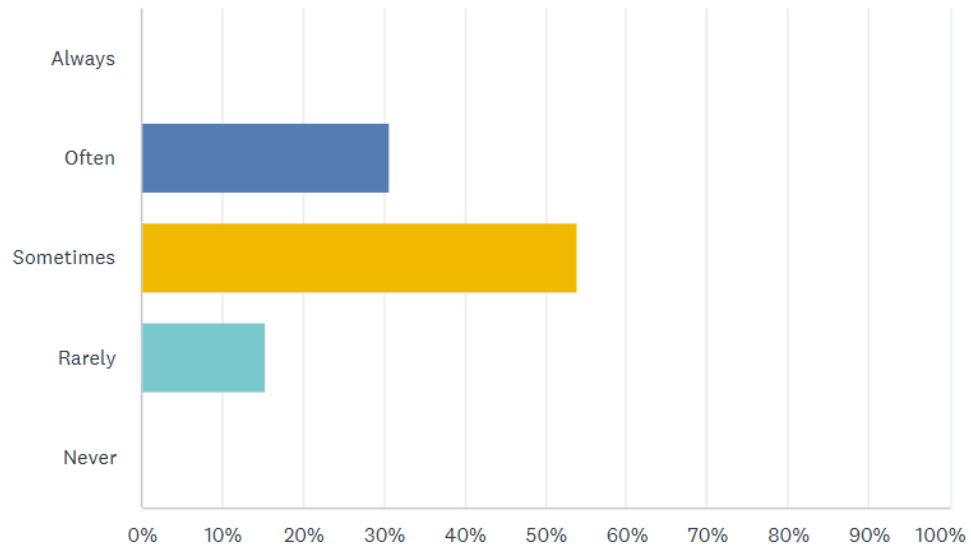
1/14/2026 08:30 PM

Q4



How often do you encounter situations where the lack of certain lab tests delays patient care?

Answered: 13 Skipped: 0



Question #4

ANSWER CHOICES	RESPONSES	
Always	0.00%	0
Often	30.77%	4
Sometimes	53.85%	7
Rarely	15.38%	2
Never	0.00%	0
TOTAL		13

Q5



Please share any additional comments or suggestions regarding lab tests in emergency care.

Answered: 4 Skipped: 9

Question #5

Please share any additional comments or suggestions regarding lab tests in emergency care.

If they can allow us to do a CRP, BNP, D dimer and VBG they will save so much money as I think we will be able to discharge more patients and we will less frequently recommend that they get next day follow up. It will be a huge savings for them and allow us to practice more confidently. These are needed in regular day to day ER practice but even more important with virtual work.

1/16/2026 11:32 AM

Rapid Strep tests would be s great help.Thank you

1/15/2026 09:08 AM

Just to note that there's really no role for UDS in an ED setting - we treat the clinical toxidrome, and immunoassay UDS has both substantial false positives and false negatives.

1/14/2026 08:59 PM

Access to advanced imaging such as CT and US

1/14/2026 08:28 PM