National Hospital Ambulatory Medical Care Survey: 2016 Emergency Department Summary Tables

The Ambulatory and Hospital Care Statistics Branch is pleased to release the most current nationally representative data on ambulatory care visits to hospital emergency departments (ED) in the United States. Estimates are presented on selected hospital, patient, and visit characteristics using data collected in the 2016 National Hospital Ambulatory Medical Care Survey (NHAMCS). NHAMCS is an annual nationally representative sample survey of visits to EDs; outpatient departments; and hospital-based ambulatory surgical centers (ASCs) (starting in 2009), and freestanding ASCs (starting in 2010).

The sampling frame for the 2016 NHAMCS was constructed from IMS Health's annual data product "Healthcare Market Index," updated for the 2016 survey. NHAMCS uses a multistage probability design with samples of primary sampling units (PSUs), hospitals within PSUs, and patient visits within emergency service areas (ESAs) of each selected hospital. A total of 450 hospitals were selected for the 2016 NHAMCS, of which, 361 were in scope and had eligible EDs. Of these, 265 participated, yielding an unweighted ED response rate of 73.4%. A total of 385 ESAs were identified from the EDs. Of these, 271 responded fully or adequately by providing forms for at least one-half of their expected visits based on the total number of visits during the reporting period. In all, 19,467 Patient Record forms (PRFs) were submitted electronically. The resulting unweighted ESA sample response rate was 70.4% (77.9% weighted), and the overall unweighted two-stage sampling response rate was 51.7% (56.2% weighted).

The 2016 NHAMCS was conducted from December 28, 2015, through December 25, 2016. The U.S. Census Bureau was the data collection agent, and developed a computerized instrument to collect NHAMCS data electronically. Census field representatives completed a PRF for a sample of about 100 ED visits during a randomly assigned 4-week reporting period. The content of the PRF is available from: https://www.cdc.gov/nchs/data/ahcd/2016_NHAMCS_ED_PRF_Sample_Card.pdf.

Data processing and medical coding were performed by RTI International in Research Triangle Park, North Carolina. As part of the quality assurance procedure, a 27% quality control sample of ED survey records was keyed and coded independently. Coding error rates ranged between 0.1% and 1.5% for the ED sample. For more details, see the 2016 NHAMCS public-use data file documentation: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf.

Table estimates are based on sample data weighted to produce annual national estimates and include standard errors. The sample weight that is computed for each sample visit considers all stages of survey design. The survey data are inflated or weighted to produce unbiased, national annual estimates. The visit weight includes three basic components: inflation by reciprocals of selection probabilities, adjustment for nonresponse, and population ratio adjustments. Estimates of the sampling variability were calculated using the Taylor series method in SUDAAN, which takes into account the complex sample design of NHAMCS. Detailed information on the design, conduct, and estimation procedures of the 2016 NHAMCS are discussed in the public-use data file documentation.

As with any survey, results are subject to sampling and nonsampling errors. Nonsampling errors include reporting and processing errors as well as biases due to nonresponse and incomplete response. In 2016, race data were missing for 16.1% (unweighted) of ED records, and ethnicity data were missing for 18.2% (unweighted) of ED records. The National Center for Health Statistics uses model-based single imputation for NHAMCS race and ethnicity data. The race imputation, based on research by an internal work group, is restricted to three categories (white, black, and other) because of quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2016 public-use data file documentation.

Beginning in 2016, NHAMCS–ED diagnosis data are coded according to the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM). Five tables (Tables 11, 12, 16, 17, and 26) present estimates of primary diagnoses, injury diagnoses, and primary hospital discharge diagnoses using ICD–10–CM codes, and are different from web tables before 2016 that present diagnosis estimates using the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) coding system. Because there are substantial differences between ICD–9–CM and ICD–10–CM, users should take caution when comparing diagnosis estimates from 2016 with those from previous years.

Beginning with the 2016 NHAMCS–ED, proportion estimates are not presented or are flagged based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions," available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf. Except for estimates of proportions, the following approach is used: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk (*) appears in the tables. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%.

Suggested citation: Rui P, Kang K, Ashman JJ. National Hospital Ambulatory Medical Care Survey: 2016 emergency department summary tables. 2016. Available from: https://www.cdc.gov/nchs/data/ahcd/nhamcs_emergency/2016_ed_web_tables.pdf.

Table 1. Emergency department visits, by selected characteristics: United States, 2016

Characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons[1] (standard error)
All visits	145,591 (8,798)	100.0 (...)	45.8 (2.8)
Ownership			
Voluntary	103,153 (8,592)	70.9 (4.0)	32.4 (2.7)
Government	25,104 (4,678)	17.2 (3.1)	7.9 (1.5)
Proprietary	17,335 (4,868)	11.9 (3.2)	5.5 (1.5)
Metropolitan status[2,3,4]			
MSA	117,189 (8,454)	80.5 (3.2)	42.8 (3.1)
Non-MSA	28,402 (5,057)	19.5 (3.2)	64.5 (11.5)
Geographic region[4]			
Northeast	24,514 (2,991)	16.8 (2.0)	44.2 (5.4)
Midwest	31,428 (3,834)	21.6 (2.4)	46.9 (5.7)
South	53,485 (5,412)	36.7 (2.9)	44.6 (4.5)
West	36,165 (4,940)	24.8 (2.8)	47.9 (6.5)
Teaching hospital			
Yes	21,474 (3,907)	14.7 (2.7)	6.8 (1.2)
No[5]	124,117 (8,898)	85.3 (2.7)	39.0 (2.8)
Trauma center			
Yes	65,863 (7,541)	45.2 (4.4)	20.7 (2.4)
No or blank	79,729 (8,018)	54.8 (4.4)	25.1 (2.5)
Season[6]			
Winter	34,829 (6,443)	23.9 (4.0)	11.0 (2.0)
Spring	28,544 (4,738)	19.6 (3.2)	9.0 (1.5)
Summer	45,543 (6,525)	31.3 (4.0)	14.3 (2.1)
Fall	36,675 (5,226)	25.2 (3.4)	11.5 (1.6)

... Category not applicable.

[1]Visit rates for region are based on the July 1, 2016, set of the estimates of the civilian noninstitutionalized population of the United States as developed by the U.S. Census Bureau Population Division.

[2]MSA is metropolitan statistical area.

[3]Population estimates by MSA are based on estimates of the civilian noninstitutionalized population of the United States as of July 1, 2016, from the 2016 National Health Interview Survey, compiled according to the 2013 Office of Management and Budget definitions of core-based statistical areas. See https://www.census.gov/programs-surveys/metro-micro.html, for more about metropolitan statistical area definitions.

[4]For geographic region and MSA, population denominators are different for each category and so do not add to the total population rate. For other variables, the denominator is the total population.

[5]Teaching status was unknown for 0.9% (weighted) of visits.

[6]Winter is December 22 to March 19, spring is March 20 to June 20, summer is June 21 to September 22, and fall is September 23 to December 21.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 2. Emergency department visits, by patient age, sex, and residence: United States, 2016

Patient characteristic	Number of visits in thousands (standard error)	Percent distribution (standard error)	Number of visits per 100 persons[1] (standard error)
All visits	145,591 (8,798)	100.0 (…)	45.8 (2.8)
Under 15 years	27,436 (2,587)	18.8 (1.2)	45.0 (4.2)
Under 1 year	3,916 (412)	2.7 (0.2)	98.7 (10.4)
1–4 years	9,790 (1,112)	6.7 (0.6)	61.4 (7.0)
5–14 years	13,729 (1,258)	9.4 (0.6)	33.5 (3.1)
15–24 years	20,674 (1,253)	14.2 (0.4)	48.6 (2.9)
25–44 years	40,014 (2,503)	27.5 (0.6)	48.1 (3.0)
45–64 years	34,359 (2,099)	23.6 (0.6)	41.2 (2.5)
65 years and over	23,108 (1,734)	15.9 (0.6)	48.2 (3.6)
65–74 years	10,985 (808)	7.5 (0.3)	38.7 (2.8)
75 years and over	12,123 (1,014)	8.3 (0.4)	62.0 (5.2)
Female	79,595 (4,803)	54.7 (0.5)	49.0 (3.0)
Under 15 years	12,810 (1,244)	8.8 (0.6)	43.0 (4.2)
15–24 years	12,680 (781)	8.7 (0.3)	60.2 (3.7)
25–44 years	22,883 (1,488)	15.7 (0.4)	54.3 (3.5)
45–64 years	18,346 (1,203)	12.6 (0.4)	42.7 (2.8)
65–74 years	5,757 (450)	4.0 (0.2)	38.1 (3.0)
75 years and over	7,119 (601)	4.9 (0.3)	62.3 (5.3)
Male	65,996 (4,119)	45.3 (0.5)	42.5 (2.7)
Under 15 years	14,625 (1,380)	10.0 (0.6)	47.0 (4.4)
15–24 years	7,995 (613)	5.5 (0.2)	37.2 (2.9)
25–44 years	17,131 (1,105)	11.8 (0.3)	41.8 (2.7)
45–64 years	16,013 (982)	11.0 (0.3)	39.6 (2.4)
65–74 years	5,228 (445)	3.6 (0.2)	39.4 (3.3)
75 years and over	5,004 (470)	3.4 (0.2)	61.6 (5.8)
Residence			
Private[1]	135,268 (8,206)	92.9 (1.3)	42.5 (2.6)
Nursing home[2]	2,225 (296)	1.5 (0.2)	159.4 (21.2)
Homeless[3]	1,446 (237)	1.0 (0.2)	263.0 (43.1)
Other	2,427 (427)	1.7 (0.3)	0.8 (0.1)
Unknown or blank	*4,224 (1,720)	* (…)	*1.3 (0.5)
Urban–rural classification[4]			
Large central metro	32,381 (4,057)	22.2 (2.6)	…
Large fringe metro	29,663 (4,489)	20.4 (2.8)	…
Medium metro	34,286 (4,519)	23.5 (2.9)	…
Small metro	12,488 (2,769)	8.6 (1.9)	…
Nonmetropolitan			
Micropolitan	14,550 (2,862)	10.0 (1.9)	…
Noncore (nonmetro)	13,536 (3,010)	9.3 (2.0)	…
Unknown or blank	*8,688 (3,679)	6.0 (2.4)	…

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
[1]Visit rates for age, sex, and private residence are based on the July 1, 2016, set of estimates of the civilian noninstitutionalized population of the United States as developed by the U.S. Census Bureau Population Division.
[2]Visit rates for nursing home residents are based on the 2016 population denominators from the Centers for Medicare and Medicaid Services 2016 Minimum Data Set frequency reports, available from: https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/Minimum-Data-Set-3-0-Public-Reports/Minimum-Data-Set-3-0-Frequency-Report.html.
[3]Visit rates for homeless people are based on the January 2016 estimate of people who were homeless on a given night, as reported in "The 2016 Annual Homeless Assessment Report (AHAR) to Congress," available from: https://www.hudexchange.info/resources/documents/2016-AHAR-Part-1.pdf.
[4]For each record, county of residence was determined using patient ZIP code, and was then matched to the National Center for Health Statistics Urban–Rural Classification Scheme for Counties, available from: https://www.cdc.gov/nchs/data_access/urban_rural.htm.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 3. Emergency department visits, by patient race, age, and ethnicity: United States, 2016

Patient characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons per year (standard error)[1]
All visits	145,591 (8,798)	100.0 (…)	45.8 (2.8)
Race[2,3] and age (years)			
White	106,602 (6,711)	73.2 (1.6)	43.5 (2.7)
Under 15	18,526 (1,709)	12.7 (0.8)	42.0 (3.9)
15–24	14,619 (973)	10.0 (0.4)	46.7 (3.1)
25–44	28,420 (1,842)	19.5 (0.6)	45.5 (3.0)
45–64	25,868 (1,650)	17.8 (0.6)	38.8 (2.5)
65–74	8,869 (717)	6.1 (0.3)	37.2 (3.0)
75 and over	10,300 (914)	7.1 (0.4)	61.4 (5.4)
Black or African American	33,476 (3,195)	23.0 (1.5)	80.4 (7.7)
Under 15	7,497 (1,218)	5.1 (0.7)	81.7 (13.3)
15–24	5,315 (566)	3.7 (0.3)	82.2 (8.8)
25–44	10,076 (917)	6.9 (0.4)	88.4 (8.0)
45–64	7,331 (758)	5.0 (0.4)	71.9 (7.4)
65–74	1,821 (230)	1.3 (0.1)	65.9 (8.3)
75 and over	1,437 (232)	1.0 (0.1)	87.5 (14.2)
Other[3]	5,513 (675)	3.8 (0.5)	17.6 (2.2)
Ethnicity[2]			
Hispanic or Latino	22,936 (2,484)	15.8 (1.3)	40.4 (4.4)
Not Hispanic or Latino	122,656 (7,453)	84.2 (1.3)	47.0 (2.9)
White	87,290 (5,617)	60.0 (1.7)	44.8 (2.9)
Black or African American	30,688 (2,894)	21.1 (1.4)	78.9 (7.4)
Other[3]	4,678 (623)	3.2 (0.4)	17.2 (2.3)

… Category not applicable.

[1]Visit rates are based on the July 1, 2016, set of estimates of the civilian noninstitutionalized population of the United States as developed by the U.S. Census Bureau Population Division.

[2]The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2016, race data were missing for 16.9% (weighted) of visits, and ethnicity data were missing for 19.5% (weighted) of visits. Starting with 2009 data, the National Center for Health Statistics has adopted the technique of model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2016 NHAMCS public-use data file, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf.

[3]Includes Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 4. Wait time at emergency department visits: United States, 2016

Visit characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	145,591 (8,798)	100.0 (...)
Time spent waiting to see a physician, APRN, or PA[1]		
Fewer than 15 minutes	56,822 (4,981)	39.0 (2.4)
15–59 minutes	45,974 (3,425)	31.6 (1.4)
1 hour, but less than 2 hours	14,567 (1,600)	10.0 (0.9)
2 hours, but less than 3 hours	4,715 (588)	3.2 (0.3)
3 hours, but less than 4 hours	1,742 (281)	1.2 (0.2)
4 hours, but less than 6 hours	1,345 (251)	0.9 (0.2)
6 hours or more	750 (183)	0.5 (0.1)
Not applicable	4,415 (464)	3.0 (0.3)
Blank	15,261 (2,882)	10.5 (1.9)
Time spent in the emergency department		
Less than 1 hour	17,588 (1,761)	12.1 (0.9)
1 hour, but less than 2 hours	32,816 (2,462)	22.5 (0.8)
2 hours, but less than 4 hours	49,128 (3,139)	33.8 (0.8)
4 hours, but less than 6 hours	21,940 (1,552)	15.1 (0.7)
6 hours, but less than 10 hours	11,315 (1,064)	7.8 (0.6)
10 hours, but less than 14 hours	2,293 (244)	1.6 (0.1)
14 hours, but less than 24 hours	2,246 (281)	1.5 (0.2)
24 hours or more	1,546 (270)	1.1 (0.2)
Blank	6,719 (1,588)	4.6 (1.1)
Patient arrived in emergency department after business hours[2]		
Yes	84,357 (5,332)	57.9 (0.6)
No	59,887 (3,574)	41.1 (0.5)
Blank	*1,347 (530)	0.9 (0.4)

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
[1]APRN is advanced practice registered nurse. PA is physician assistant. The median wait time to see a physician, APRN, or PA was 17 minutes; the mean wait time to see a physician, APRN, or PA was 42 minutes.
[2]Business hours are defined as Monday through Friday, 8 a.m. to 5 p.m.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 5. Mode of arrival at emergency department, by patient age: United States, 2016

Patient age (years)	Number of visits in thousands	Patient mode of arrival			
		Total[1]	Ambulance	Other	Unknown or blank
			Percent distribution (standard error)		
All visits	145,591	100.0	15.8 (0.7)	81.8 (0.9)	2.5 (0.5)
Under 15	27,436	100.0	4.4 (0.6)	93.5 (1.0)	2.1 (0.6)
Under 1	3,916	100.0	5.2 (1.3)	92.9 (1.6)	2.0 (0.8)
1–4	9,790	100.0	4.5 (0.9)	93.7 (1.2)	1.8 (0.6)
5–14	13,729	100.0	4.1 (0.8)	93.5 (1.1)	2.4 (0.8)
15–24	20,674	100.0	11.2 (1.1)	87.1 (1.3)	1.6 (0.4)
25–44	40,014	100.0	12.8 (0.9)	84.9 (1.0)	2.4 (0.5)
45–64	34,359	100.0	19.0 (1.0)	78.4 (1.2)	2.6 (0.6)
65 and over	23,108	100.0	33.6 (1.3)	62.8 (1.5)	3.5 (0.9)
65–74	10,985	100.0	25.9 (1.6)	70.6 (1.7)	3.6 (1.1)
75 and over	12,123	100.0	40.7 (1.6)	55.8 (1.8)	3.5 (0.9)

[1]Arrival by ambulance was the mode of arrival for 22,936,000 visits; arrival by other mode was the mode of arrival for 119,070,000 visits.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 6. Expected source of payment at emergency department visits: United States, 2016

Payment source	Number of visits[1] (standard error) in thousands	Percent of visits (standard error)
All visits	145,591 (8,798)	...
Private insurance	46,332 (2,961)	31.8 (1.3)
Medicaid or CHIP[2] or other state-based program	54,949 (3,889)	37.7 (1.9)
Medicare	25,916 (1,849)	17.8 (0.9)
Medicare and Medicaid[3]	5,523 (606)	3.8 (0.4)
No insurance[4]	12,287 (1,508)	8.4 (0.9)
Self-pay	11,483 (1,424)	7.9 (0.8)
No change or charity	*1,047 (548)	0.7 (0.4)
Worker's compensation	1,581 (208)	1.1 (0.1)
Other	5,516 (822)	3.8 (0.5)
Unknown or blank	16,584 (4,690)	11.4 (3.0)

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
[1]Total exceeds "All visits" and percentage exceeds 100% because more than one source of payment may be reported per visit.
[2]Children's Health Insurance Program.
[3]Visits are also included in the "Medicaid or CHIP or other state-based program" and "Medicare" categories.
[4]Defined as having only self-pay, no charge, or charity as payment sources.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 7. Triage status of emergency department visits, by selected patient characteristics: United States, 2016

Patient and visit characteristic	Number of visits in thousands	Total	Level 1 (immediate)	Level 2 (emergent)	Level 3 (urgent)	Level 4 (semiurgent)	Level 5 (nonurgent)	No triage[1]	Unknown or blank
			Percent distribution (standard error)						
All visits	145,591	100.0	0.6 (0.1)	8.1 (0.7)	32.4 (2.1)	24.5 (1.5)	4.3 (0.5)	6.5 (1.9)	23.5 (3.7)
Age (years)									
Under 15	27,436	100.0	0.6 (0.3)	4.6 (0.8)	22.4 (2.5)	32.3 (2.9)	7.6 (1.2)	* (…)	24.9 (5.6)
Under 1	3,916	100.0	1.5 (0.8)	4.5 (1.0)	28.7 (3.8)	28.6 (3.1)	8.9 (2.3)	* (…)	19.9 (4.5)
1–4	9,790	100.0	0.4 (0.3)	4.0 (0.9)	23.0 (3.0)	31.2 (3.6)	7.1 (1.5)	6.0 (1.8)	28.2 (6.8)
5–14	13,729	100.0	0.6 (0.3)	5.1 (1.1)	20.2 (2.3)	34.0 (3.1)	7.6 (1.3)	* (…)	23.9 (5.5)
15–24	20,674	100.0	0.5 (0.2)	5.8 (0.8)	31.1 (2.4)	29.0 (2.1)	4.0 (0.7)	* (…)	22.7 (3.7)
25–44	40,014	100.0	0.4 (0.1)	6.8 (0.7)	33.9 (2.1)	25.9 (1.8)	3.7 (0.5)	* (…)	23.4 (3.5)
45–64	34,359	100.0	0.4 (0.1)	10.1 (1.1)	36.4 (2.5)	20.9 (1.5)	3.9 (0.6)	* (…)	22.1 (3.5)
65 and over	23,108	100.0	0.9 (0.2)	13.8 (1.6)	37.1 (3.0)	14.4 (1.4)	2.3 (0.6)	6.6 (1.9)	24.9 (4.2)
65–74	10,985	100.0	0.9 (0.2)	12.6 (1.5)	35.7 (3.2)	16.8 (1.9)	2.8 (0.7)	7.0 (1.9)	24.3 (4.2)
75 and over	12,123	100.0	0.9 (0.3)	14.9 (2.1)	38.4 (3.3)	12.2 (1.4)	1.8 (0.5)	6.3 (1.9)	25.5 (4.5)
Sex									
Female	79,595	100.0	0.5 (0.1)	7.5 (0.7)	34.2 (2.3)	24.0 (1.6)	3.7 (0.5)	6.7 (1.9)	23.5 (3.7)
Male	65,996	100.0	0.6 (0.1)	9.0 (0.8)	30.4 (2.0)	25.1 (1.5)	5.0 (0.7)	6.3 (1.9)	23.6 (3.7)
Race[2]									
White	106,602	100.0	0.5 (0.1)	8.2 (0.7)	33.0 (2.2)	24.7 (1.5)	4.6 (0.6)	6.4 (1.8)	22.6 (3.7)
Black or African American	33,476	100.0	0.7 (0.2)	7.9 (1.2)	30.5 (3.0)	24.5 (2.5)	3.8 (0.5)	* (…)	26.4 (5.8)
Other[3]	5,513	100.0	0.3 (0.2)	8.2 (1.7)	33.6 (4.3)	20.8 (3.1)	2.5 (0.7)	* (…)	23.5 (5.7)
Ethnicity and race[2]									
Hispanic or Latino	22,936	100.0	0.7 (0.3)	5.4 (0.7)	30.5 (2.9)	28.5 (2.7)	6.1 (1.2)	* (…)	23.3 (5.3)
Not Hispanic or Latino	122,656	100.0	0.5 (0.1)	8.6 (0.8)	32.8 (2.2)	23.8 (1.6)	4.0 (0.5)	6.7 (2.0)	23.5 (3.7)
White	87,290	100.0	0.5 (0.1)	8.9 (0.8)	33.5 (2.4)	23.6 (1.6)	4.2 (0.6)	6.5 (1.9)	22.8 (3.9)
Black or African American	30,688	100.0	0.7 (0.2)	8.0 (1.3)	30.7 (3.0)	24.6 (2.5)	3.7 (0.5)	* (…)	25.8 (5.6)
Other	4,678	100.0	0.2 (0.1)	8.3 (1.8)	34.2 (4.5)	20.8 (3.2)	2.1 (0.7)	* (…)	22.4 (6.0)

See footnotes at end of table.

Table 7. Triage status of emergency department visits, by selected patient characteristics: United States, 2016—Con.

Patient and visit characteristic	Number of visits in thousands	Total	Level 1 (immediate)	Level 2 (emergent)	Level 3 (urgent)	Level 4 (semiurgent)	Level 5 (nonurgent)	No triage[1]	Unknown or blank
Expected source of payment[4]			Percent distribution (standard error)						
Private insurance	46,332	100.0	0.6 (0.1)	9.1 (0.9)	33.8 (2.4)	23.6 (1.6)	3.5 (0.7)	7.3 (2.2)	22.1 (3.6)
Medicaid or CHIP[5] or other state-based program	54,949	100.0	0.5 (0.2)	6.8 (0.7)	32.8 (2.0)	28.3 (1.8)	5.3 (0.7)	6.5 (1.8)	19.8 (3.3)
Medicare	25,916	100.0	0.8 (0.2)	13.9 (1.5)	38.8 (2.6)	15.7 (1.4)	2.8 (0.6)	5.9 (1.7)	22.1 (3.5)
Medicare and Medicaid[6]	5,523	100.0	0.4 (0.3)	14.0 (2.4)	40.1 (3.4)	15.9 (2.2)	3.4 (0.9)	* (…)	21.2 (4.5)
No insurance[7]	12,287	100.0	0.5 (0.3)	6.0 (1.0)	31.8 (2.8)	30.3 (2.2)	5.9 (1.3)	* (…)	20.2 (3.7)
Worker's compensation	1,581	100.0	* (…)	* (…)	22.9 (4.6)	34.9 (4.8)	* (…)	* (…)	22.8 (6.3)
Other	5,516	100.0	1.1 (0.7)	11.2 (1.4)	35.8 (3.5)	25.6 (2.8)	3.8 (0.8)	* (…)	17.7 (4.7)
Unknown or blank	16,584	100.0	0.2 (0.1)	7.5 (2.2)	22.6 (5.9)	15.4 (4.4)	2.4 (0.8)	* (…)	* (…)

* Estimate does not meet NCHS standards of reliability.

… Category not applicable.

[1]A visit in which the emergency service area (ESA) coded nursing triage as zero (had admitted to hospital or treated immediately) or visit occurred in ESA that does not conduct triage.

[2]The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics has adopted the technique of model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2016 NHAMCS public-use data file, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf. For 2016, race data were missing for 16.9% (weighted) of visits, and ethnicity data were missing for 19.5% (weighted) of visits.

[3]Includes Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

[4]Total exceeds "All visits" and percentage exceeds 100% because more than one source of payment may be reported per visit.

[5]Children's Health Insurance Program.

[6]Visits also included in both the "Medicaid or CHIP or other state-based program" and "Medicare" categories.

[7]Defined as having only self-pay, no charge, or charity as payment sources.

NOTES: The 2016 Patient Record Form (PRF) requested responses using a 1–5 scale. PRF responses were evaluated with reference to responses on the Ambulatory Unit Record, completed during induction, to the question, "How many levels are in this emergency service area's (ESA) triage system?" ESAs using 3- or 4-level triage systems had their responses rescaled to fit the 5-level system, such that, for 3-level ESAs, responses of 1, 2, and 3 were recoded to 2, 3, and 4. For ESAs using a 4-level system, responses were recoded from 1–4 to 2–5. The rescaling method was determined in consultation with subject-matter experts and was based on record analysis. Rescaling was required for about 5.6% of records, or 7.1% of records with nonmissing data. Triage level was imputed in years prior to 2012. Starting in 2012, triage level has not been imputed. Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 8. Initial blood pressure measurements recorded at emergency department visits for adults, by selected patient characteristics: United States, 2016

Patient characteristic	Number of visits in thousands	Total	Not high (SBP less than 120 mm Hg and DBP less than 80 mm Hg)	Prehypertension (SBP 120–139 mm Hg or DBP 80–89 mm Hg)	Stage 1 hypertension (SBP 140–159 mm Hg or DBP 90–99 mm Hg)	Stage 2 hypertension (SBP greater than or equal to 160 mm Hg or DBP greater than 100 mm Hg)
			Percent distribution(standard error)			
All visits[2]	109,128	100.0	19.2 (0.5)	34.0 (0.6)	27.3 (0.5)	19.5 (0.6)
Age (years)						
18–24	15,293	100.0	29.6 (1.3)	43.8 (1.4)	21.5 (1.3)	5.1 (0.8)
25–44	38,375	100.0	21.1 (0.9)	38.6 (1.1)	27.0 (0.9)	13.4 (0.7)
45–64	33,221	100.0	15.0 (0.8)	30.0 (0.9)	29.7 (0.8)	25.3 (1.0)
65–74	10,563	100.0	14.9 (1.4)	28.1 (1.7)	28.7 (1.5)	28.3 (1.7)
75 and over	11,677	100.0	15.5 (0.8)	22.8 (1.0)	27.9 (1.4)	33.8 (1.5)
Sex						
Female	62,053	100.0	22.3 (0.7)	34.7 (0.8)	25.3 (0.6)	17.8 (0.8)
Male	47,075	100.0	15.1 (0.6)	33.1 (0.9)	30.0 (0.8)	21.7 (0.9)
Race[3]						
White	81,328	100.0	18.7 (0.5)	34.2 (0.7)	27.6 (0.6)	19.5 (0.7)
Black or African American	24,053	100.0	21.3 (1.0)	33.0 (1.2)	26.3 (1.1)	19.4 (0.9)
Other[4]	3,748	100.0	17.9 (2.2)	37.0 (2.5)	26.4 (2.1)	18.7 (2.0)
Ethnicity and race[3]						
Hispanic or Latino	14,184	100.0	20.7 (1.3)	38.7 (1.6)	24.8 (1.8)	15.8 (1.0)
Not Hispanic or Latino	94,944	100.0	19.0 (0.5)	33.3 (0.6)	27.7 (0.6)	20.0 (0.6)
White	69,274	100.0	18.4 (0.5)	33.4 (0.8)	28.0 (0.7)	20.1 (0.7)
Black or African American	22,361	100.0	21.0 (1.0)	32.2 (1.2)	26.7 (1.1)	20.0 (0.9)
Other[4]	3,309	100.0	17.4 (2.2)	37.5 (2.5)	27.0 (2.2)	18.1 (2.3)

[1]SBP is systolic blood pressure. DBP is diastolic blood pressure. Three high blood pressure categories (SBP greater than 120 or DBP greater than 80) are based on "The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure" and correspond to prehypertensive, stage 1 hypertensive, and stage 2 hypertensive ranges. If SBP and DBP fall into two categories, the visit is included in the higher blood pressure category.
[2]Visits by adults (aged 18 and over). Visits where blood pressure was taken represent 96.2% (standard error = 0.9) of all emergency department visits made by adults.
[3]The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2016, race data were missing for 15.1% (weighted) of visits made by adults, and ethnicity data were missing for 18.7% (weighted) of visits made by adults. Beginning with 2009, the National Center for Health Statistics has adopted model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2016 NHAMCS public-use data file, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf.
[4]Includes Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 9. Initial temperature, pulse oximetry, and visit history at emergency department visits: United States, 2016

Visit characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	145,591 (8,798)	100.0 (…)
Temperature		
Febrile: higher than 38.0° C or higher than 100.4°F	4,534 (403)	3.1 (0.2)
Normal: 35.1–38.0° C or 95.1–100.4°F	130,985 (8,014)	90.0 (1.0)
Hypothermic: lower than or equal to 35.0° C or lower than or equal to 95.0°F	* (…)	0.1 (0.0)
Blank	9,927 (1,580)	6.8 (1.0)
Pulse oximetry[1]		
95%–100%	122,051 (8,015)	83.8 (2.0)
Less than 95%	12,148 (1,916)	8.3 (1.2)
Blank	11,393 (1,967)	7.8 (1.3)
Episode of care		
Initial visit	128,606 (7,930)	88.3 (1.7)
Follow-up visit	7,180 (709)	4.9 (0.4)
Unknown or blank	9,805 (2,650)	6.7 (1.7)
Patient seen in this emergency department within the last 72 hours		
Yes	3,878 (372)	2.7 (0.2)
No	127,054 (8,321)	87.3 (2.1)
Unknown or blank	14,659 (3,278)	10.1 (2.2)

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
0.0 Quantity more than zero but less than 0.05.
[1]Normal oxygen saturation as measured by pulse oximetry is 95% or more.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 10. Ten principal reasons for emergency department visits, by patient age and sex: United States, 2016

Principal reason for visit and RVC code[1]		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	...	145,591 (8,798)	100.0 (…)
Stomach and abdominal pain, cramps, and spasms	S545	12,525 (876)	8.6 (0.3)
Chest pain and related symptoms (not referable to body systems)	S050	7,565 (647)	5.2 (0.2)
Fever	S010	5,494 (628)	3.8 (0.3)
Cough	S440	5,146 (483)	3.5 (0.2)
Headache, pain in head	S210	4,104 (359)	2.8 (0.2)
Back symptoms	S905	3,691 (359)	2.5 (0.2)
Pain, site not referable to a specific body system	S055	3,513 (315)	2.4 (0.1)
Shortness of breath	S415	3,444 (408)	2.4 (0.2)
Accident, not otherwise specified	J810	3,216 (350)	2.2 (0.2)
Vomiting	S530	2,769 (274)	1.9 (0.1)
All other reasons[2]	...	94,124 (5,518)	64.6 (0.6)
All visits under age 15 years	...	27,436 (2,587)	100.0 (…)
Female	...	12,810 (1,244)	46.7 (0.8)
Fever	S010	2,212 (365)	8.1 (0.8)
Cough	S440	1,102 (163)	4.0 (0.4)
Stomach and abdominal pain, cramps, and spasms	S545	603 (89)	2.2 (0.3)
Vomiting	S530	596 (99)	2.2 (0.3)
Skin rash	S860	511 (97)	1.9 (0.3)
Symptoms referable to throat	S455	482 (98)	1.8 (0.3)
Accident, not otherwise specified	J810	*341 (115)	1.2 (0.4)
Earache or ear infection	S355	328 (68)	1.2 (0.3)
Injury, other and unspecified type—head, neck, and face	J505	282 (63)	1.0 (0.2)
Headache, pain in head	S210	* (…)	0.7 (0.2)
All other reasons[2]	...	6,164 (610)	22.5 (1.0)
Male	...	14,625 (1,380)	53.3 (0.8)
Fever	S010	2,114 (266)	7.7 (0.7)
Cough	S440	1,348 (216)	4.9 (0.6)
Vomiting	S530	651 (120)	2.4 (0.3)
Skin rash	S860	614 (90)	2.2 (0.3)
Earache or ear infection	S355	506 (112)	1.8 (0.3)
Injury, other and unspecified type—head, neck, and face	J505	467 (121)	1.7 (0.4)
Stomach and abdominal pain, cramps, and spasms	S545	434 (82)	1.6 (0.3)
Laceration or cut of facial area	J210	345 (76)	1.3 (0.3)
Accident, not otherwise specified	J810	336 (80)	1.2 (0.3)
Symptoms referable to throat	S455	266 (70)	1.0 (0.3)
All other reasons[2]	...	7,546 (699)	27.5 (1.0)

See footnotes at end of table.

Table 10. Ten principal reasons for emergency department visits, by patient age and sex: United States, 2016—Con.

Principal reason for visit and RVC code[1]		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits, ages 15–64 years	...	95,048 (5,640)	100.0 (...)
Female	...	53,909 (3,293)	56.7 (0.7)
Stomach and abdominal pain, cramps, and spasms	S545	6,614 (515)	7.0 (0.3)
Chest pain and related symptoms (not referable to body systems)	S050	3,192 (320)	3.4 (0.2)
Headache, pain in head	S210	2,169 (224)	2.3 (0.2)
Pain, site not referable to a specific body system	S055	1,759 (195)	1.9 (0.2)
Back symptoms	S905	1,614 (182)	1.7 (0.2)
Symptoms referable to throat	S455	1,250 (165)	1.3 (0.1)
Cough	S440	1,249 (133)	1.3 (0.1)
Problems of pregnancy	S790	1,208 (183)	1.3 (0.2)
Shortness of breath	S415	1,088 (147)	1.1 (0.1)
Motor vehicle accident, type of injury unspecified	J805	1,022 (148)	1.1 (0.2)
All other reasons[2]	...	32,745 (2,055)	34.5 (0.6)
Male	...	41,139 (2,506)	43.3 (0.7)
Stomach and abdominal pain, cramps, and spasms	S545	3,116 (276)	3.3 (0.2)
Chest pain and related symptoms (not referable to body systems)	S050	2,495 (272)	2.6 (0.2)
Back symptoms	S905	1,453 (157)	1.5 (0.1)
Pain, site not referable to a specific body system	S055	1,302 (154)	1.4 (0.1)
Headache, pain in head	S210	1,136 (143)	1.2 (0.1)
Cough	S440	866 (132)	0.9 (0.1)
Shortness of breath	S415	865 (192)	0.9 (0.2)
Laceration or cut of upper extremity	J225	859 (139)	0.9 (0.1)
Motor vehicle accident, type of injury unspecified	J805	814 (103)	0.9 (0.1)
Other symptoms or problems relating to psychological and mental disorders	S165	755 (110)	0.8 (0.1)
All other reasons[2]	...	27,478 (1,666)	28.9 (0.6)
All visits, ages 65 years and over	...	23,108 (1,734)	100.0 (…)
Female	...	12,876 (976)	55.7 (1.1)
Stomach and abdominal pain, cramps, and spasms	S545	1,083 (162)	4.7 (0.6)
Accident, not otherwise specified	J810	845 (118)	3.7 (0.5)
Chest pain and related symptoms (not referable to body systems)	S050	776 (112)	3.4 (0.4)
Shortness of breath	S415	661 (109)	2.9 (0.4)
Vertigo—dizziness	S225	496 (71)	2.1 (0.3)
General weakness	S020	465 (92)	2.0 (0.3)
Leg symptoms	S920	398 (86)	1.7 (0.4)
Cough	S440	350 (78)	1.5 (0.3)
Nausea	S525	324 (79)	1.4 (0.3)
Other symptoms or problems relating to psychological and mental disorders	S165	315 (77)	1.4 (0.3)
All other reasons[2]	...	7,163 (593)	31.0 (1.3)
Male	...	10,232 (831)	44.3 (1.1)
Chest pain and related symptoms (not referable to body systems)	S050	877 (137)	3.8 (0.5)
Stomach and abdominal pain, cramps, and spasms	S545	675 (130)	2.9 (0.5)
Shortness of breath	S415	639 (138)	2.8 (0.5)
Accident, not otherwise specified	J810	461 (84)	2.0 (0.3)
General weakness	S020	421 (101)	1.8 (0.4)
Vertigo–dizziness	S225	346 (82)	1.5 (0.3)
Back symptoms	S905	* (…)	1.2 (0.3)
Other symptoms or problems relating to psychological and mental disorders	S165	* (…)	1.1 (0.3)
Cough	S440	231 (52)	1.0 (0.2)
Leg symptoms	S920	221 (53)	1.0 (0.2)
All other reasons[2]	...	5,827 (424)	25.2 (0.9)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

[1]Based on "A Reason for Visit Classification for Ambulatory Care" (National Center for Health Statistics, 1979). See the 2016 National Hospital Ambulatory Medical Care Survey public-use data file documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf. Reason for visit is defined by the patient's own words.

[2]Includes all other reasons not listed above, as well as unknown and blank responses.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 11. Primary diagnosis at emergency department visits, by major disease category: United States, 2016

Major disease category and ICD–10–CM code range[1]		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	...	145,591 (8,798)	100.0 (…)
Certain infectious and parasitic diseases	A00–B99	3,672 (303)	2.5 (0.2)
Neoplasms	C00–D49	294 (57)	0.2 (0.0)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50–D89	695 (109)	0.5 (0.1)
Endocrine, nutritional, and metabolic diseases	E00–E89	2,187 (242)	1.5 (0.1)
Mental, behavioral and neurodevelopmental disorders	F01–F99	5,485 (472)	3.8 (0.2)
Diseases of the nervous system	G00–G99	3,202 (260)	2.2 (0.1)
Diseases of the eye and adnexa	H00–H59	1,328 (155)	0.9 (0.1)
Diseases of the ear and mastoid process	H60–H95	3,185 (380)	2.2 (0.2)
Diseases of the circulatory system	I00–I99	4,774 (461)	3.3 (0.2)
Diseases of the respiratory system	J00–J99	14,918 (1,232)	10.2 (0.5)
Diseases of the digestive system	K00–K95	7,968 (538)	5.5 (0.3)
Diseases of the skin and subcutaneous tissue	L00–L99	5,037 (376)	3.5 (0.2)
Diseases of the musculoskeletal system and connective tissue	M00–M99	10,756 (762)	7.4 (0.3)
Diseases of the genitourinary system	N00–N99	8,192 (668)	5.6 (0.2)
Pregnancy, childbirth and the puerperium	O00–O9A	2,553 (259)	1.8 (0.2)
Symptoms, signs, and abnormal clinical and laboratory findings, not elsewhere classified	R00–R99	34,028 (2,207)	23.4 (0.6)
Injury, poisoning and certain other consequences of external causes	S00–T88	29,888 (2,063)	20.5 (0.6)
Injuries to the head	S00–S09	6,477 (563)	21.7 (1.0)
Injuries to the neck	S10–S19	1,135 (160)	3.8 (0.5)
Injuries to the thorax	S20–S29	1,259 (182)	4.2 (0.5)
Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	S30–S39	1,494 (202)	5.0 (0.6)
Injuries to the shoulder and upper arm	S40–S49	1,899 (232)	6.4 (0.6)
Injuries to the elbow and forearm	S50–S59	1,552 (192)	5.2 (0.6)
Injuries to the wrist, hand and fingers	S60–S69	4,305 (374)	14.4 (0.9)
Injuries to the hip and thigh	S70–S79	683 (84)	2.3 (0.3)
Injuries to the knee and lower leg	S80–S89	2,343 (245)	7.8 (0.7)
Injuries to the ankle and foot	S90–S99	3,199 (318)	10.7 (0.7)
Injuries involving multiple body regions or unspecified body region	T07, T14	* (…)	3.7 (0.0)
Effects of foreign body entering through natural orifice	T15–T19	576 (105)	1.9 (0.3)
Burns and corrosions	T20–T32	516 (91)	1.7 (0.3)
Poisoning by, adverse effect of and underdosing of drugs, medicaments and biological substances	T36–T50	1,043 (146)	3.5 (0.5)
Toxic effects of substances chiefly nonmedicinal as to source	T51–T65	552 (104)	1.8 (0.3)
Other and unspecified effects of external causes	T66–T78	1,127 (119)	3.8 (0.4)
Certain early complications of trauma	T79	* (…)	* (…)
Complications of surgical and medical care	T80–T88	598 (110)	2.0 (0.3)
All other diagnoses[2]	...	6,551 (557)	4.5 (0.3)
Unknown or blank	...	877 (168)	0.6 (0.1)

... Category not applicable.

0.0 Quantity more than zero but less than 0.05.

* Estimate does not meet NCHS standards of reliability.

[1]Based on the *International Classification of Diseases,10th Revision, Clinical Modification* (ICD–10–CM). However, certain codes have been combined in this table to better describe the utilization of ambulatory care services. Web tables presenting diagnosis estimates before 2016 used the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) coding system. Because there are substantial differences between ICD–9–CM and ICD–10–CM, users should take caution when comparing diagnosis estimates in this table with those from previous years.

[2]Includes certain conditions originating in the perinatal period (P00–P96), congenital malformations, deformations and chromosomal abnormalities (Q00–Q99), external causes of morbidity (V00–Y99), and factors influencing health status and contact with health services (Z00–Z99).

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2016

Primary diagnosis group[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	145,591 (8,798)	100.0 (...)
Certain infectious and parasitic diseases		
Septicemia (sepsis)	390 (88)	0.3 (0.1)
Human immunodeficiency virus syndrome (HIV, HIV+, HIV positive)	* (...)	0.0 (0.0)
Viral warts, not sexually transmitted	* (...)	* (...)
Acute and chronic viral hepatitis, excluding types B and C	* (...)	* (...)
Acute and chronic viral hepatitis C	* (...)	* (...)
Sexually transmitted infections (STIs) excluding viral hepatitis and HIV	* (...)	0.1 (0.0)
Unspecified viral infection	1,339 (160)	0.9 (0.1)
Dermatophytosis	* (...)	0.1 (0.0)
Candidiasis	249 (58)	0.2 (0.0)
Other systemic infectious and parasitic diseases	1,290 (137)	0.9 (0.1)
Neoplasms[2]		
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism		
Anemias	526 (86)	0.4 (0.1)
Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	* (...)	0.1 (0.0)
Endocrine, nutritional and metabolic diseases		
Acquired hypothyroidism	* (...)	0.0 (0.0)
Disorders of thyroid gland, excluding acquired hypothyroidism	* (...)	0.0 (0.0)
Type 1 diabetes mellitus	* (...)	0.1 (0.0)
Type 2 diabetes mellitus or unspecified	444 (67)	0.3 (0.0)
Other types of diabetes mellitus	* (...)	0.1 (0.0)
Other disorders of endocrine glands	* (...)	0.1 (0.0)
Obesity	* (...)	* (...)
Hyperlipidemias	* (...)	0.0 (0.0)
Volume depletion	727 (134)	0.5 (0.1)
Other nutritional deficiencies and metabolic disorders	538 (106)	0.4 (0.1)
Mental, behavioral and neurodevelopmental disorders		
Dementia, excluding Alzheimer's disease	* (...)	0.1 (0.0)
Alcohol-related disorders, excluding alcohol-related dementia and chronic alcoholic liver disease	1,533 (174)	1.1 (0.1)
Opioid-related disorders	* (...)	0.1 (0.0)
Cocaine-related disorders	* (...)	* (...)
Nicotine dependence	* (...)	* (...)
Other drug-related disorders excluding other drug-related dementia	399 (70)	0.3 (0.0)
Schizophrenia	365 (92)	0.3 (0.1)
Non-mood psychoses, excluding schizophrenia	333 (62)	0.2 (0.0)
Bipolar disorders, excluding those with depression	*224 (73)	0.2 (0.0)
Bipolar disorders, with depression	* (...)	0.0 (0.0)
Depressive disorders, excluding bipolar depression and adjustment reaction with depressed mood	781 (110)	0.5 (0.1)
Acute reaction to stress and adjustment reaction, excluding those with depressed mood	* (...)	0.1 (0.0)
Acute reaction to stress and adjustment reaction with depressed mood	* (...)	0.1 (0.0)
Eating disorders	* (...)	* (...)
Impulse disorders	* (...)	* (...)
Other mood disorders, nonpsychotic mental disorders, behavioral syndromes, and disorders of adult personality and behavior	1,030 (152)	0.7 (0.1)
Attention-deficit/hyperactivity disorders	* (...)	* (...)
Oppositional defiant disorder	* (...)	* (...)
Conduct disorders, excluding oppositional defiant disorder	* (...)	0.1 (0.0)
Autism spectrum disorder	* (...)	* (...)
Other mental disorders	* (...)	0.1 (0.0)

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2016—Con.

Primary diagnosis group[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
Diseases of the nervous system		
Alzheimer's disease	* (...)	0.0 (0.0)
Other degenerative diseases of the nervous system, excluding Alzheimer's disease	* (...)	* (...)
Migraine	1,094 (125)	0.8 (0.1)
Transient cerebral ischemic attacks and related syndromes	309 (73)	0.2 (0.0)
Sleep disorders, excluding sleep apnea (adult, pediatric, obstructive) and non-organic sleep disorders	* (...)	0.0 (0.0)
Carpal tunnel syndrome	* (...)	0.0 (0.0)
Other disorders of the nervous system	1,595 (161)	1.1 (0.1)
Diseases of the eye and adnexa		
Inflammation and disorders of eyelid	* (...)	0.1 (0.0)
Conjunctivitis	649 (101)	0.4 (0.1)
Retinal detachment and other retinal disorders, excluding diabetic retinopathy	* (...)	* (...)
Glaucoma	* (...)	* (...)
Other disorders of the eye and adnexa	510 (88)	0.4 (0.1)
Diseases of the ear and mastoid process		
Disorders of external ear	515 (101)	0.4 (0.1)
Otitis media and eustachian tube disorders	1,944 (270)	1.3 (0.2)
Other disorders of the ear and mastoid process	726 (133)	0.5 (0.1)
Diseases of the circulatory system		
Heart valve disorders	* (...)	* (...)
Essential hypertension	1,016 (147)	0.7 (0.1)
Hypertensive heart disease with heart failure	* (...)	* (...)
Hypertensive heart disease without heart failure	* (...)	* (...)
Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease or unspecified chronic kidney disease	* (...)	* (...)
Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end-stage renal disease (ESRD)	* (...)	* (...)
Hypertensive heart and chronic kidney disease with heart failure and stage 1 through 4 chronic kidney disease or unspecified chronic kidney disease	* (...)	* (...)
Secondary hypertension	* (...)	* (...)
Angina pectoris not stated as with chronic ischemic heart disease	* (...)	0.1 (0.0)
Acute myocardial infarction	251 (55)	0.2 (0.0)
Other acute and subacute ischemic heart disease	* (...)	0.0 (0.0)
Coronary atherosclerosis and other chronic ischemic heart disease (with angina pectoris)	* (...)	0.0 (0.0)
Pulmonary heart disease and diseases of pulmonary circulation	* (...)	0.0 (0.0)
Conduction disorders	* (...)	* (...)
Cardiac dysrhythmias, excluding ventricular fibrillation	950 (139)	0.7 (0.1)
Cardiac arrest and ventricular fibrillation	* (...)	0.1 (0.0)
Heart failure, non-hypertensive	414 (68)	0.3 (0.0)
Pericarditis, endocarditis, myocarditis and cardiomyopathy	* (...)	* (...)
Other and ill-defined heart disease	* (...)	* (...)
Cerebrovascular disease	590 (104)	0.4 (0.1)
Diseases of the arteries, arterioles and capillaries	* (...)	0.1 (0.0)
Varicose veins of lower extremity	* (...)	0.0 (0.0)
Other disorder of circulatory system	826 (135)	0.6 (0.1)

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2016—Con.

Primary diagnosis group[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
Diseases of the respiratory system		
Streptococcal pharyngitis and tonsillitis	704 (138)	0.5 (0.1)
Acute sinusitis	302 (75)	0.2 (0.1)
Acute pharyngitis, except streptococcal pharyngitis	1,631 (219)	1.1 (0.1)
Acute tonsillitis, except streptococcal tonsillitis	306 (71)	0.2 (0.0)
Influenza	527 (140)	0.4 (0.1)
Pneumonia	1,700 (201)	1.2 (0.1)
Acute bronchitis and bronchiolitis	1,542 (192)	1.1 (0.1)
Other acute respiratory infections	3,450 (411)	2.4 (0.2)
Allergic rhinitis	* (...)	0.1 (0.0)
Chronic sinusitis	389 (99)	0.3 (0.1)
Chronic diseases of tonsils and adenoids	* (...)	* (...)
Chronic and unspecified bronchitis	629 (128)	0.4 (0.1)
Emphysema and other chronic obstructive pulmonary disease, including chronic obstructive asthma	1,066 (168)	0.7 (0.1)
Asthma, excluding chronic obstructive asthma	1,777 (196)	1.2 (0.1)
Respiratory failure	* (...)	0.1 (0.0)
Other diseases of the respiratory system	580 (92)	0.4 (0.1)
Diseases of the digestive system		
Diseases of the teeth and supporting structures, excluding dentofacial anomalies and disorders of the jaw	1,683 (182)	1.2 (0.1)
Esophagitis without gastroesophageal reflux disease	* (...)	* (...)
Gastroesophageal reflux disease (with esophagitis)	318 (57)	0.2 (0.0)
Other diseases of the esophagus	* (...)	0.0 (0.0)
Ulcers of stomach and small intestine	* (...)	0.0 (0.0)
Gastritis and duodentitis	490 (92)	0.3 (0.1)
Appendicitis	197 (44)	0.1 (0.0)
Diaphragmatic hernia	* (...)	* (...)
Hernias of abdominal cavity, except diaphragmatic hernia	293 (84)	0.2 (0.1)
Crohn's disease and ulcerative colitis	* (...)	0.1 (0.0)
Complications of surgical and medical care	1,031 (118)	0.7 (0.1)
Intestinal obstructions	268 (62)	0.2 (0.0)
Diverticula of intestine	288 (70)	0.2 (0.0)
Irritable bowel syndrome	* (...)	* (...)
Constipation	854 (135)	0.6 (0.1)
Anal and rectal diseases	286 (60)	0.2 (0.0)
Hemorrhoids and perianal venous thrombosis	* (...)	0.1 (0.0)
Alcoholic liver disease	* (...)	0.0 (0.0)
Other diseases of the liver	* (...)	0.1 (0.0)
Disorders of gallbladder and biliary tract	431 (61)	0.3 (0.0)
Diseases of the pancreas	273 (53)	0.2 (0.0)
Unspecified gastrointestinal bleeding	412 (64)	0.3 (0.0)
Other diseases of the digestive system	451 (81)	0.3 (0.1)
Diseases of the skin and subcutaneous tissue		
Cellulitis	1,932 (214)	1.3 (0.1)
Cutaneous abscess	1,095 (103)	0.8 (0.1)
Other local infections of the skin and subcutaneous tissue	400 (69)	0.3 (0.0)
Contact dermatitis and other eczema	335 (68)	0.2 (0.0)
Psoriasis and other similar disorders	* (...)	* (...)
Urticaria	448 (77)	0.3 (0.0)
Other inflammatory conditions of skin and subcutaneous tissue	423 (89)	0.3 (0.1)
Acne	* (...)	* (...)
Sebaceous cyst	* (...)	0.0 (0.0)
Corns, callosities and other hypertrophic and atrophic skin condition	* (...)	* (...)
Pressure ulcers	* (...)	* (...)
Other disorders of the skin and subcutaneous tissue	277 (50)	0.2 (0.0)

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2016—Con.

Primary diagnosis group[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
Diseases of the musculoskeletal system and connective tissue		
Infectious and inflammatory arthropathies, excluding rheumatoid and juvenile arthritis	331 (59)	0.2 (0.0)
Osteoarthritis	244 (43)	0.2 (0.0)
Acquired deformities of fingers and toes	* (...)	* (...)
Internal derangement of knee	* (...)	0.0 (0.0)
Other joint disorders	2,283 (210)	1.6 (0.1)
Spinal stenosis	* (...)	* (...)
Spondylopathies, excluding spinal stenosis	* (...)	0.1 (0.0)
Intervertebral disc disorders	* (...)	0.1 (0.0)
Low back pain, unspecified	1,327 (164)	0.9 (0.1)
Other conditions of the spine and back, excluding low back pain	2,887 (250)	2.0 (0.1)
Synovitis and tenosynovitis	* (...)	0.0 (0.0)
Soft tissue disorders related to use, overuse and pressure	371 (83)	0.3 (0.1)
Ganglion and cyst of synovium, tendon and bursa	* (...)	0.0 (0.0)
Myalgia and myositis, unspecified	* (...)	0.2 (0.0)
Disorders of bone and cartilage, excluding osteoporosis	260 (57)	0.2 (0.0)
Other diseases of the musculoskeletal system and connective tissue	2,412 (304)	1.7 (0.2)
Diseases of the genitourinary system		
Nephritis, nephrotic syndrome, and nephrosis	* (...)	* (...)
Infections of kidney	381 (83)	0.3 (0.1)
Acute kidney failure	* (...)	0.1 (0.0)
Chronic kidney disease, excluding ESRD	* (...)	0.1 (0.0)
ESRD	* (...)	0.0 (0.0)
Unspecified kidney failure, including uremia not otherwise specified	* (...)	0.0 (0.0)
Calculus of kidney and ureter	981 (133)	0.7 (0.1)
Cystitis	628 (136)	0.4 (0.1)
Urinary tract infection, site not specified	2,638 (279)	1.8 (0.1)
Stress and other specified urinary incontinence, excluding functional	* (...)	* (...)
Other diseases of the urinary system	753 (126)	0.5 (0.1)
Benign prostatic hyperplasia	* (...)	* (...)
Disorders of prepuce	* (...)	* (...)
Other disorders of the male genital system	455 (102)	0.3 (0.1)
Unspecified lump or mass in breast	* (...)	0.1 (0.0)
Disorders of the breast, excluding unspecified lump or mass	* (...)	0.1 (0.0)
Inflammatory disease of female pelvic organs	322 (61)	0.2 (0.0)
Endometriosis	* (...)	* (...)
Genital prolapse (female)	* (...)	* (...)
Dysplasia of cervix (uteri)	* (...)	* (...)
Other noninflammatory disorders of the female genital organs	459 (83)	0.3 (0.1)
Disorders of menstruation and abnormal bleeding	748 (101)	0.5 (0.1)
Menopausal and postmenopausal disorders	* (...)	* (...)
Other disorders of female genital tract	* (...)	0.1 (0.0)
Complications of pregnancy, childbirth, and the puerperium		
Missed abortion	* (...)	* (...)
Other pregnancy with abortive outcome	* (...)	0.2 (0.0)
Supervision of high-risk pregnancy	* (...)	0.0 (0.0)
Pre-existing diabetes mellitus, types 1 and 2, complicating pregnancy	* (...)	* (...)
Early or threatened labor	* (...)	0.0 (0.0)
Other complications of pregnancy	2,230 (245)	1.5 (0.1)
Other complications of childbirth	* (...)	* (...)
Certain conditions originating in the perinatal period		
Sleep apnea of newborn	* (...)	* (...)
Certain other conditions originating in the perinatal period	* (...)	0.1 (0.0)
Congenital anomalies	* (...)	0.0 (0.0)

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2016—Con.

Primary diagnosis group[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
Symptoms, signs, and ill-defined conditions		
Abnormal heart beat and heart sounds	670 (99)	0.5 (0.1)
Epistaxis	523 (99)	0.4 (0.1)
Cough, unspecified	1,099 (153)	0.8 (0.1)
Dyspnea and respiratory abnormalities	1,218 (142)	0.8 (0.1)
Chest pain	5,321 (441)	3.7 (0.2)
Abdominal pain	7,428 (549)	5.1 (0.2)
Unspecified jaundice, edema and other nonspecific skin symptoms	1,463 (148)	1.0 (0.1)
Hematuria	237 (61)	0.2 (0.0)
Symptoms involving the urinary system, excluding hematuria and urinary incontinence	599 (104)	0.4 (0.1)
Age-related cognitive decline, age-related physical debility	* (...)	* (...)
Vertigo and lightheadedness	1,347 (149)	0.9 (0.1)
Fever of other and unknown origin	2,044 (324)	1.4 (0.2)
Headache	2,136 (221)	1.5 (0.1)
Malaise and fatigue	619 (99)	0.4 (0.1)
Syncope and collapse	1,411 (153)	1.0 (0.1)
Convulsions and seizures, not elsewhere classified	622 (102)	0.4 (0.1)
Other symptoms, signs, abnormal findings and ill-defined conditions	7,290 (545)	5.0 (0.3)
Injury and poisoning		
Injury of eye and orbit	496 (84)	0.3 (0.1)
Contusions (bruise, hematoma)	3,630 (393)	2.5 (0.2)
Superficial injuries, excluding contusions (abrasion, blister, external constriction, splinter, superficial bite)	1,611 (266)	1.1 (0.2)
Open wound of head	1,868 (221)	1.3 (0.1)
Open wound of wrist, hand and fingers	1,782 (163)	1.2 (0.1)
Open wound of hip and lower limb	985 (136)	0.7 (0.1)
Open wound, excluding head, hand, fingers, lower limb and internal organs	593 (92)	0.4 (0.1)
Traumatic fracture of shoulder and upper arm (clavicle, scapula, humerus)	617 (134)	0.4 (0.1)
Traumatic fracture of forearm (radius and ulna)	718 (124)	0.5 (0.1)
Traumatic fracture of wrist, hand and fingers (carpal, metacarpals, phalanges)	773 (98)	0.5 (0.1)
Traumatic fracture of hip (head and neck of femur)	* (...)	0.1 (0.0)
Traumatic fracture of ankle (medial malleolus, lateral malleolus, bimalleolar, trimalleolar)	* (...)	0.1 (0.0)
Traumatic fracture of leg, foot and toes, excluding hip and ankle (femur, patella, tibia, fibula, tarsals, metatarsals, phalanges)	730 (100)	0.5 (0.1)
Other traumatic fractures (skull, facial bones, vertebrae, ribs, sternum, pelvis)	901 (120)	0.6 (0.1)
Dislocations, excluding tear of medial meniscus	382 (67)	0.3 (0.0)
Sprains and strains of neck	968 (146)	0.7 (0.1)
Sprains and strains of back	1,095 (141)	0.8 (0.1)
Sprains and strains of wrist and hand	682 (149)	0.5 (0.1)
Sprains and strains of knee	311 (66)	0.2 (0.0)
Sprains and strains of ankle	1,330 (162)	0.9 (0.1)
Sprains and strains, excluding neck, back, wrist, hand, knee, ankle	1,022 (138)	0.7 (0.1)
Concussion	559 (112)	0.4 (0.1)
Intracranial injury, excluding concussion	* (...)	0.1 (0.0)
Internal injury of chest, abdomen and pelvis	* (...)	0.1 (0.0)
Other injuries, excluding burns and poisonings	4,451 (382)	3.1 (0.2)
Burns and corrosions, external and internal, excluding sunburn	516 (91)	0.4 (0.1)
Poisoning due to drugs and biological substances, unintentional	385 (70)	0.3 (0.0)
Poisoning (overdose or wrong substance given or taken in error) due to drugs and biological substances, intentional self-harm	297 (86)	0.2 (0.1)
Poisoning (overdose or wrong substance given or taken in error) due to drugs and biological substances, undetermined intent	* (...)	* (...)
Adverse effects (of correct substance properly administered) of drugs and biological substances	367 (75)	0.3 (0.0)

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2016—Con.

Primary diagnosis group[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
Injury and poisoning		
Toxic effects of substances chiefly nonmedical, accidental (unintentional)	483 (93)	0.3 (0.1)
Toxic effects of substances chiefly nonmedical, intentional self-harm	* (...)	* (...)
Toxic effects of substances chiefly nonmedical, undetermined	* (...)	0.0 (0.0)
Other and unspecified effects of external causes	1,132 (120)	0.8 (0.1)
Complications of surgical and medical care	908 (140)	0.6 (0.1)
External-cause codes		
Accidental (unintentional) injury due to slipping, tripping, stumbling or fall	* (...)	* (...)
Accidental (unintentional) injury due to other and unspecified means	* (...)	* (...)
Supplementary classifications		
Encounter for general adult medical examinations, including routine gynecological examination	290 (60)	0.2 (0.0)
Encounter for routine newborn health examination	* (...)	* (...)
Encounter for routine child examination, excluding newborns	* (...)	0.1 (0.0)
Encounter and observation for suspected conditions ruled out	785 (168)	0.5 (0.1)
Encounter for specific procedures and aftercare and follow-up examination after completed treatment, excluding for injuries	918 (136)	0.6 (0.1)
Potential health hazards related to communicable diseases	* (...)	0.1 (0.0)
Encounter for contraceptive management	* (...)	* (...)
Fertility and genetic counseling and screening	* (...)	0.1 (0.0)
Other encounter related to pregnancy, excluding incidental pregnancy	* (...)	0.0 (0.0)
Postpartum care and examination	* (...)	* (...)
Personal history of cerebral infarction or transient ischemic attack (TIA) without residual deficits	* (...)	* (...)
Potential health hazards related to personal and family history, excluding personal history of pulmonary embolism and personal history of cerebral infarction or TIA without residual deficits	* (...)	0.1 (0.0)
Other factors influencing health status and contact with health services	1,103 (140)	0.8 (0.1)
Uncodable entries[3]	2,423 (313)	1.7 (0.2)
Unknown or blank	877 (168)	0.6 (0.1)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

0.0 Quantity more than zero but less than 0.05.

[1]Based on the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM). Codes have been combined in this table to better describe the utilization of ambulatory care services. For a list of ICD–10–CM codes corresponding to a specific diagnosis group, contact the National Center for Health Statistics Ambulatory and Hospital Care Statistics Branch at ambcare@cdc.gov.

[2]Diagnosis groups for this chapter are not shown due to low sample sizes.

[3]Includes illegible diagnosis, left before being seen, walked out, eloped, left against medical advice, and entries of "none," "no diagnosis," "no disease," and "healthy" as the only entry in the diagnosis item.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 13. Presence of chronic conditions at emergency department visits: United States, 2016

Chronic condition[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	145,591 (8,798)	100.0 (...)
Alcohol misuse, abuse, or dependence	4,700 (379)	3.2 (0.2)
Alzheimer's disease or dementia	1,785 (204)	1.2 (0.1)
Asthma	14,687 (1,037)	10.1 (0.4)
Cancer	3,874 (414)	2.7 (0.2)
Cerebrovascular disease or history of stroke or transient ischemic attack	4,644 (443)	3.2 (0.2)
Chronic kidney disease	3,662 (379)	2.5 (0.2)
Chronic obstructive pulmonary disease	8,164 (752)	5.6 (0.4)
Congestive heart failure	4,111 (337)	2.8 (0.2)
Coronary artery disease, ischemic heart disease or history of myocardial infarction	8,588 (748)	5.9 (0.4)
Depression	14,767 (1,153)	10.1 (0.5)
Diabetes mellitus—Type 1	1,004 (191)	0.7 (0.1)
Diabetes mellitus—Type 2	7,750 (767)	5.3 (0.4)
Diabetes mellitus—Type unspecified	7,835 (774)	5.4 (0.4)
End stage renal disease	1,002 (143)	0.7 (0.1)
History of pulmonary embolism, deep vein thrombosis, or venous thromboembolism	1,728 (229)	1.2 (0.1)
HIV (human immunodeficiency virus) or AIDS (acquired immune deficiency syndrome)	726 (191)	0.5 (0.1)
Hyperlipidemia	12,880 (1,087)	8.8 (0.5)
Hypertension	35,197 (2,383)	24.2 (0.7)
Obesity	5,399 (597)	3.7 (0.3)
Obstructive sleep apnea	2,821 (361)	1.9 (0.2)
Osteoporosis	1,269 (194)	0.9 (0.1)
Substance abuse or dependence	7,411 (874)	5.1 (0.5)
None of the above	74,648 (4,836)	51.3 (1.0)
Blank	1,763 (463)	1.2 (0.3)

... Category not applicable.

[1]Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses. Total exceeds "All visits" and percentage exceeds 100% because more than one chronic condition may be reported per visit.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 14. Injury visits to emergency departments, by selected patient and hospital characteristics: United States, 2016

Patient and hospital characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons per year[1] (standard error)
All injury visits[2]	42,253 (2,676)	100.0 (...)	13.3 (0.8)
Age (years)			
Under 15	8,717 (857)	20.6 (1.3)	14.3 (1.4)
Under 1	437 (72)	1.0 (0.2)	11.0 (1.8)
1–4	2,693 (357)	6.4 (0.7)	16.9 (2.2)
5–14	5,586 (562)	13.2 (0.9)	13.6 (1.4)
15–24	6,918 (512)	16.4 (0.6)	16.3 (1.2)
25–44	11,717 (831)	27.7 (1.0)	14.1 (1.0)
45–64	9,468 (656)	22.4 (0.9)	11.3 (0.8)
65 and over	5,433 (405)	12.9 (0.6)	11.3 (0.8)
65–74	2,440 (243)	5.8 (0.4)	8.6 (0.9)
75 and over	2,993 (252)	7.1 (0.5)	15.3 (1.3)
Female	20,177 (1,296)	47.8 (0.9)	12.4 (0.8)
Under 15	3,856 (431)	9.1 (0.8)	12.9 (1.4)
15–24	3,259 (244)	7.7 (0.4)	15.5 (1.2)
25–44	5,444 (447)	12.9 (0.7)	12.9 (1.1)
45–64	4,359 (347)	10.3 (0.6)	10.1 (0.8)
65–74	1,397 (140)	3.3 (0.3)	9.2 (0.9)
75 and over	1,861 (190)	4.4 (0.4)	16.3 (1.7)
Male	22,076 (1,493)	52.2 (0.9)	14.2 (1.0)
Under 15	4,861 (502)	11.5 (0.8)	15.6 (1.6)
15–24	3,659 (364)	8.7 (0.6)	17.0 (1.7)
25–44	6,272 (468)	14.8 (0.7)	15.3 (1.1)
45–64	5,109 (387)	12.1 (0.6)	12.6 (1.0)
65–74	1,043 (146)	2.5 (0.3)	7.9 (1.1)
75 and over	1,131 (115)	2.7 (0.2)	13.9 (1.4)
Ownership			
Voluntary	29,310 (2,530)	69.4 (4.3)	9.2 (0.8)
Proprietary	7,854 (1,537)	18.6 (3.4)	2.5 (0.5)
Government	5,089 (1,475)	12.0 (3.4)	1.6 (0.5)
Geographic region			
Northeast	7,113 (880)	16.8 (2.0)	12.8 (1.6)
Midwest	9,194 (1,092)	21.8 (2.4)	13.7 (1.6)
South	15,833 (1,804)	37.5 (3.2)	13.2 (1.5)
West	10,114 (1,391)	23.9 (2.8)	13.4 (1.8)
Metropolitan status[3]			
Metropolitan statistical area	33,628 (2,621)	79.6 (3.5)	12.3 (1.0)
Nonmetropolitan statistical area	8,625 (1,563)	20.4 (3.5)	19.6 (3.5)

... Category not applicable.

[1]Visit rates for age, sex, and region are based on the July 1, 2016, set of estimates of the civilian noninstitutionalized population of the United States as developed by the U.S. Census Bureau Population Division.

[2]The definition of injury changed in 2016 due to the switch from the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) coding system for diagnosis data to the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM) coding system. In prior years, injury visits included any-listed reason for visit and diagnosis codes related to injury and poisoning based on ICD–9–CM. In 2016, injury visits included any-listed reason for visit and diagnosis codes related to injury and poisoning based on ICD–10–CM and information indicating that the visit is related to an injury, trauma, overdose, or poisoning based on the Patient Record Form item, "Is this visit related to an injury/trauma, overdose/poisoning, or adverse effect of medical/surgical treatment?" with further consideration of values for visits with no concrete evidence of injury. "All injury visits" includes any-listed reason for visit and diagnosis codes related to injury and poisoning. Injury visits do not include adverse effects and complication codes. Using this definition, injury visits represent 29.0% (standard error = 0.6) of all emergency department visits. For more details, see the 2016 NHAMCS public-use data file documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf.

[3]Population estimates by metropolitan statistical area status are based on data from the National Center for Health Statistics' 2016 National Health Interview Survey, compiled according to the Office of Management and Budget's definition of core-based statistical areas as of February 2013. See https://www.census.gov/programs-surveys/metro-micro.html for more about metropolitan statistical area definitions.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 15. Injury visits to emergency departments, by race, age, and ethnicity: United States, 2016

Patient characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons per year (standard error)[1]
All injury visits[2]	42,253 (2,676)	100.0 (...)	13.3 (0.8)
Race and age (years)[3]			
White	32,044 (2,113)	75.8 (1.6)	13.1 (0.9)
Under 15	6,332 (624)	15.0 (1.0)	14.4 (1.4)
15–24	5,352 (447)	12.7 (0.6)	17.1 (1.4)
25–44	8,584 (653)	20.3 (0.9)	13.8 (1.0)
45–64	7,234 (502)	17.1 (0.8)	10.9 (0.8)
65–74	1,935 (187)	4.6 (0.4)	8.1 (0.8)
75 and over	2,606 (235)	6.2 (0.5)	15.5 (1.4)
Black or African American	8,515 (882)	20.2 (1.6)	20.4 (2.1)
Under 15	1,877 (367)	4.4 (0.8)	20.5 (4.0)
15–24	1,330 (166)	3.1 (0.4)	20.6 (2.6)
25–44	2,652 (324)	6.3 (0.7)	23.3 (2.8)
45–64	1,907 (251)	4.5 (0.5)	18.7 (2.5)
65–74	462 (98)	1.1 (0.2)	16.7 (3.6)
75 and over	287 (62)	0.7 (0.1)	17.5 (3.8)
Other[4]	1,693 (239)	4.0 (0.5)	5.4 (0.8)
Ethnicity[3]			
Hispanic	6,054 (663)	14.3 (1.2)	10.7 (1.2)
Not Hispanic	36,199 (2,324)	85.7 (1.2)	13.9 (0.9)
White	26,948 (1,829)	63.8 (1.7)	13.8 (0.9)
Black or African American	7,852 (799)	18.6 (1.4)	20.2 (2.1)
Other[4]	1,399 (217)	3.3 (0.5)	5.1 (0.8)

... Category not applicable.

[1] Visit rates are based on the July 1, 2016, estimates of the civilian noninstitutionalized population of the United States as developed by the U.S. Census Bureau Population Division.

[2] The definition of injury changed in 2016 due to the switch from the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) coding system for diagnosis data to the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM) coding system. In prior years, injury visits included any-listed reason for visit and diagnosis codes related to injury and poisoning based on ICD–9–CM. In 2016, injury visits included any-listed reason for visit and diagnosis codes related to injury and poisoning based on ICD–10–CM and information indicating that the visit is related to an injury, trauma, overdose, or poisoning based on the Patient Record Form item, "Is this visit related to an injury/trauma, overdose/poisoning, or adverse effect of medical/surgical treatment?" with further consideration of values for visits with no concrete evidence of injury. "All injury visits" do not include adverse effects of medical or surgical treatment. Using this definition, injury visits accounted for 29% (standard error = 0.6) of all emergency department visits in 2016. For more details, see the 2016 National Hospital Ambulatory Medical Care Survey (NHAMCS) public-use data file documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf.

[3] The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2016, race data were missing for 17.1% of injury visits, and ethnicity data were missing for 19.8% of injury visits. Beginning with 2009, the National Center for Health Statistics has adopted model-based single imputation for NHAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2016 NHAMCS public-use data file documentation.

[4] Includes Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 16. Emergency department visits related to injury, poisoning, and adverse effect, by intent: United States, 2016

Intent[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
All injury visits related to injury, poisoning, and adverse effect[2]	45,501 (2,871)	100.0 (...)
Unintentional	29,200 (1,908)	64.2 (1.1)
Self-harm	273 (64)	0.6 (0.1)
Assault	1,619 (160)	3.6 (0.3)
Undetermined or other[3]	1,722 (179)	3.8 (0.3)
Legal intervention or war	* (...)	0.1 (0.1)
Blank cause	12,635 (900)	27.8 (1.0)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

[1]Based on the proposed *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM) external cause-of-injury matrix, available from: https://www.cdc.gov/injury/wisqars/pdf/ICD-10-CM_External_Cause_Injury_Codes-a.pdf.

[2]The definition of visits related to injury, poisoning, and adverse effects changed in 2016 due to the switch from the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) coding system for diagnosis data to the ICD–10–CM coding system. In prior years, injury visits included any-listed reason for visit and diagnosis codes related to injury and poisoning based on ICD–9–CM. In 2016, injury visits included any-listed reason for visit and diagnosis codes related to injury, poisoning, and adverse effects based on ICD–10–CM and information indicating that the visit is related to an injury, trauma, overdose, poisoning, or adverse effect of medical or surgical treatment based on the Patient Record Form item, "Is this visit related to an injury/trauma, overdose/poisoning, or adverse effect of medical/surgical treatment?," with further consideration of values for visits with no concrete evidence of injury. Using this definition, injury visits accounted for 31.3% (standard error = 0.6) of all emergency department visits in 2016.

[3]Other includes certain diagnosis codes for injury visits not captured using the ICD–10–CM external-cause matrix. Common diagnoses in this group include medical and surgical complications, activity of person seeking health care (such as a heart attack while shoveling snow, which resulted from, or was contributed to, by the activity), and place of occurrence of external cause. For more details, see the 2016 National Hospital Ambulatory Medical Care Survey public-use data file documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 17. Emergency department visits related to injury, poisoning, and adverse effect, by mechanism: United States, 2016

Mechanism[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
All injury visits related to injury, poisoning, and adverse effect [2]	45,501 (2,871)	100.0 (...)
Cut or pierce	2,378 (215)	5.2 (0.4)
Drowning or submersion	* (...)	* (...)
Fall	10,481 (729)	23.0 (0.9)
Fire or burn	338 (67)	0.7 (0.1)
Fire or flame	* (...)	0.3 (0.1)
Hot object or substance	222 (48)	0.5 (0.1)
Firearm	* (...)	0.2 (0.1)
Machinery	* (...)	0.4 (0.1)
All transportation	5,221 (426)	11.5 (0.7)
Motor vehicle—traffic	3,692 (334)	8.1 (0.6)
Motor vehicle—nontraffic	290 (74)	0.6 (0.2)
Pedal cyclist, other	264 (62)	0.6 (0.1)
Pedestrian, other	* (...)	0.2 (0.1)
Other land transport	843 (130)	1.9 (0.2)
Other transport	* (...)	0.1 (0.0)
Natural or environmental[3]	1,833 (229)	4.0 (0.4)
Overexertion	296 (74)	0.7 (0.2)
Struck by or against	5,921 (562)	13.0 (0.7)
Other specified[4]	805 (121)	1.8 (0.2)
Unspecified or other[5]	5,310 (423)	11.7 (0.5)
Blank cause	12,635 (900)	27.8 (1.0)

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
0.0 Quantity more than zero but less than 0.05.
[1]Based on the proposed *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM) external-cause of-injury matrix, available from:
https://www.cdc.gov/injury/wisqars/pdf/ICD-10-CM_External_Cause_Injury_Codes-a.pdf.
[2]The definition of visits related to injury, poisoning, and adverse effects changed in 2016 due to the switch from the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) coding system for diagnosis data to ICD–10–CM. In prior years, injury visits included any-listed reason for visit and diagnosis codes related to injury and poisoning based on ICD–9–CM. In 2016, injury visits included any-listed reason for visit and diagnosis codes related to injury, poisoning, and adverse effects based on ICD–10–CM and information indicating that the visit is related to an injury, trauma, overdose, poisoning, or adverse effect of medical or surgical treatment based on the Patient Record Form item, "Is this visit related to an injury/ trauma, overdose/poisoning, or adverse effect of medical/surgical treatment?," with further consideration of values for visits with no concrete evidence of injury. Using this definition, injury visits accounted for 31.3% (standard error = 0.6) of all emergency department visits in 2016.
[3]Includes bites and stings (venomous and nonvenomous), natural or environmental, and other.
[4]Includes child or adult abuse, foreign body, classifiable and not elsewhere classifiable.
[5]Other includes certain diagnosis codes for injury visits not captured using the ICD–10–CM external-cause matrix. Common diagnoses in this group include medical and surgical complications, activity of person seeking health care, and place of occurrence of external cause. For more details, see the 2016 National Hospital Ambulatory Medical Care Survey public-use data file documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc16_ed.pdf.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 18. Selected diagnostic and screening services ordered or provided at emergency department visits: United States, 2016

Diagnostic and screening services ordered or provided	Number of visits[1] (standard error) in thousands	Percent distribution (standard error)
All visits	145,591 (8,798)	...
One or more diagnostic or screening service listed	105,322 (6,490)	72.3 (1.0)
None	38,507 (2,776)	26.4 (1.0)
Blank	1,762 (461)	1.2 (0.3)
Blood tests		
Complete blood count	56,381 (3,726)	38.7 (1.1)
Creatinine or renal function panel	6,646 (1,444)	4.6 (0.9)
Glucose, serum	10,242 (1,733)	7.0 (1.1)
Electrolytes	*3,576 (1,102)	2.5 (0.7)
Prothrombin time (IPT/PTT/INR)[2]	13,038 (1,330)	9.0 (0.7)
Liver enzymes or hepatic function panel	5,705 (1,197)	3.9 (0.8)
Cardiac enzymes	7,897 (1,207)	5.4 (0.7)
Comprehensive metabolic panel	41,186 (3,179)	28.3 (1.3)
Blood culture	4,785 (443)	3.3 (0.3)
Brain natriuretic peptide	4,132 (532)	2.8 (0.3)
D-dimer	2,984 (319)	2.0 (0.2)
Arterial blood gases	*3,058 (1,130)	2.1 (0.8)
Blood alcohol concentration	3,215 (373)	2.2 (0.2)
Basic metabolic panel	15,015 (1,539)	10.3 (1.0)
Lactate	3,240 (531)	2.2 (0.3)
Other blood test	28,390 (2,132)	19.5 (1.2)
Any blood test listed	64,780 (4,033)	44.5 (1.1)
Imaging		
X-ray	49,061 (3,276)	33.7 (0.8)
Computed tomography (CT) scan	25,421 (1,723)	17.5 (0.6)
Abdomen or pelvis	10,377 (730)	7.1 (0.3)
Chest	2,763 (284)	1.9 (0.2)
Head	11,869 (883)	8.2 (0.4)
Other	4,595 (424)	3.2 (0.3)
Intravenous (IV) contrast with CT	6,349 (575)	4.4 (0.3)
Ultrasound	7,635 (730)	5.2 (0.4)
Magnetic resonance imaging (MRI) scan	1,280 (154)	0.9 (0.1)
IV contrast with MRI	* (...)	0.1 (0.0)
Other imaging	1,295 (154)	0.9 (0.1)
Any imaging	70,496 (4,509)	48.4 (0.9)
Examinations and tests		
Cardiac monitor	10,990 (1,190)	7.5 (0.7)
Urinalysis or urine dipstick	38,791 (2,593)	26.6 (0.8)
Electrocardiogram	29,588 (2,130)	20.3 (0.8)
Urine culture	11,862 (1,112)	8.1 (0.6)
Pregnancy/HCG test[3]	12,032 (947)	8.3 (0.5)
Toxicology screen	6,398 (638)	4.4 (0.4)
Influenza test	3,123 (477)	2.1 (0.3)
Throat culture	2,576 (423)	1.8 (0.3)
Wound culture	609 (133)	0.4 (0.1)
Other culture	1,970 (255)	1.4 (0.2)
HIV[4] test	650 (160)	0.4 (0.1)
Other test or service	19,580 (2,082)	13.4 (1.3)

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
[1]Total exceeds "All visits" and percentage exceeds 100% because more than one service may be reported per visit.
[2]PT is prothrombin time. PTT is partial thromboplastin time. INR is international normalized ratio.
[3]HCG is human chorionic gonadotropin.
[4]HIV is human immunodeficiency virus.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 19. Selected procedures at emergency department visits: United States, 2016

Procedure performed	Number of visits[1] (standard error) in thousands	Percent distribution (standard error)
All visits	145,591 (8,798)	...
One or more procedure listed	61,148 (3,700)	42.0 (1.3)
None[1]	80,496 (5,796)	55.3 (1.4)
Blank[2]	3,947 (942)	2.7 (0.6)
Intravenous fluids	36,008 (2,479)	24.7 (1.1)
Cast, splint, wrap	7,188 (585)	4.9 (0.3)
Suturing or staples	3,624 (336)	2.5 (0.2)
Incision and drainage	1,259 (159)	0.9 (0.1)
Nebulizer therapy	4,939 (538)	3.4 (0.3)
Bladder catheter	1,853 (223)	1.3 (0.1)
Pelvic examination	1,957 (458)	1.3 (0.3)
Central line	*878 (499)	0.6 (0.3)
Cardiopulmonary resuscitation (CPR)	* (...)	0.1 (0.0)
Endotracheal intubation	346 (68)	0.2 (0.0)
Skin adhesives	1,226 (180)	0.8 (0.1)
BiPAP or CPAP[3]	814 (188)	0.6 (0.1)
Lumbar puncture	518 (139)	0.4 (0.1)
Other	12,164 (1,302)	8.4 (0.9)

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
0.0 Quantity more than zero but less than 0.05.
[1]The "None" checkbox was marked on the Patient Record form (PRF).
[2]No checkboxes were marked on the PRF.
[3]BiPAP is variable or bi-level positive airway pressure. CPAP is continuous positive airway pressure.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 20. Medication therapy and number of medications mentioned at emergency department visits: United States, 2016

Medication therapy[1]	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	145,591 (8,798)	100.0 (...)
Visits with mention of medication[2]	117,068 (7,163)	80.4 (0.7)
Visits without mention of medication	28,523 (1,960)	19.6 (0.7)
Number of medications provided or prescribed[3]		
0 medications	28,523 (1,960)	19.6 (0.7)
1 medication	32,025 (2,122)	22.0 (0.5)
2 medications	29,320 (2,001)	20.1 (0.4)
3 medications	20,317 (1,381)	14.0 (0.3)
4 medications	14,009 (1,051)	9.6 (0.4)
5 medications	7,804 (548)	5.4 (0.3)
6 medications	5,087 (433)	3.5 (0.2)
7 medications	2,941 (323)	2.0 (0.2)
8 medications	1,803 (228)	1.2 (0.1)
9 medications	1,124 (167)	0.8 (0.1)
10 medications	529 (87)	0.4 (0.1)
11 medications	511 (97)	0.4 (0.1)
12 medications	325 (75)	0.2 (0.1)
13 medications or more	1,272 (278)	0.9 (0.2)

... Category not applicable.
[1]Includes prescription drugs, over-the-counter preparations, immunizations, and desensitizing agents.
[2]Visits at which one or more drugs were given in the emergency department (ED) or prescribed at discharge (up to 30 per visit). Also defined as drug visit.
[3]There were 358,950,000 drug mentions at ED visits in 2016. The average drug mention rate was 2.5 drug mentions per ED visit. For visits with at least one drug mention, the average drug visit rate was 3.1 drugs per visit.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 21. Twenty most frequently mentioned drugs at emergency department visits, by therapeutic drug category: United States, 2016

Drug category[1]	Number of occurrences (standard error) in thousands	Percent of drug mentions[2] (standard error)
Analgesics[3]	100,656 (6,421)	28.0 (0.4)
Antiemetic or antivertigo agents	41,685 (2,671)	11.6 (0.4)
Minerals and electrolytes	34,378 (2,542)	9.6 (0.4)
Miscellaneous respiratory agents	28,301 (2,159)	7.9 (0.3)
Anxiolytics, sedatives, and hypnotics	16,768 (1,128)	4.7 (0.2)
Bronchodilators	13,155 (1,068)	3.7 (0.2)
Adrenal cortical steroids	12,484 (918)	3.5 (0.2)
Antihistamines	11,558 (762)	3.2 (0.1)
Cephalosporins	11,212 (835)	3.1 (0.1)
Anticonvulsants	11,043 (869)	3.1 (0.2)
Penicillins	8,795 (706)	2.5 (0.1)
Dermatological agents	7,099 (680)	2.0 (0.2)
Local injectable anesthetics	7,061 (627)	2.0 (0.1)
Antiarrhythmic agents	6,945 (637)	1.9 (0.1)
Muscle relaxants	6,677 (538)	1.9 (0.1)
Antiparkinson agents	6,511 (552)	1.8 (0.1)
Antiplatelet agents	5,811 (612)	1.6 (0.1)
Macrolide derivatives	5,209 (505)	1.5 (0.1)
Laxatives	4,609 (447)	1.3 (0.1)
Quinolones	4,239 (383)	1.2 (0.1)

[1]Based on Cerner Multum second-level therapeutic drug category (see https://www.cerner.com/solutions/drug-database).
[2]Based on an estimated 358,950,000 drug mentions at emergency department (ED) visits in 2016. Drug mentions are medications given in EDs or prescribed at discharge.
[3]Includes narcotics (11.7%), nonsteroidal anti-inflammatory drugs (10.6%), and other analgesics (including salicylates, analgesic combinations, antimigraine agents, Cox-2 inhibitors, and miscellaneous analgesics) (5.7%).

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 22. Twenty most frequently mentioned drugs at emergency department visits: United States, 2016

Drug name[1]	Number of drug mentions (standard error) in thousands	Percent distribution (standard error)	Percent of drug mentions (standard error)					Therapeutic drug category[3]
			Total	Given in emergency department	Prescribed at discharge	Both given in emergency department and prescribed at discharge	Unknown[2]	
All drug mentions	358,950 (22,723)	100.0 (0.0)	100.0	58.0 (1.5)	31.8 (1.6)	9.8 (0.6)	0.4 (0.1)	...
Sodium chloride	28,197 (2,152)	7.9 (0.3)	100.0	98.7 (0.4)	0.8 (0.3)	0.3 (0.1)	0.2 (0.1)	Minerals and electrolytes, miscellaneous respiratory agents
Ondansetron	23,210 (1,634)	6.5 (0.3)	100.0	66.2 (1.7)	15.0 (1.2)	18.6 (1.2)	0.3 (0.1)	Antiemetic or antivertigo agents
Ibuprofen	21,446 (1,792)	6.0 (0.3)	100.0	31.1 (2.4)	49.4 (2.8)	19.1 (1.6)	0.4 (0.2)	Analgesics
Acetaminophen	14,331 (1,307)	4.0 (0.2)	100.0	47.9 (4.0)	40.2 (4.1)	11.5 (1.1)	0.4 (0.2)	Analgesics
Ketorolac	11,662 (819)	3.2 (0.2)	100.0	91.6 (1.1)	5.2 (1.0)	3.1 (0.6)	0.1 (0.1)	Analgesics
Acetaminophen-hydrocodone	11,229 (898)	3.1 (0.2)	100.0	27.0 (2.0)	56.5 (2.1)	16.2 (1.5)	0.3 (0.2)	Analgesics
Morphine	8,513 (674)	2.4 (0.1)	100.0	98.3 (0.5)	1.3 (0.5)	0.2 (0.1)	0.2 (0.1)	Analgesics
Albuterol	6,907 (597)	1.9 (0.1)	100.0	40.1 (2.6)	40.0 (3.2)	19.7 (2.2)	0.2 (0.1)	Bronchodilators
Diphenhydramine	6,125 (525)	1.7 (0.1)	100.0	68.8 (2.6)	19.4 (2.3)	11.7 (1.6)	0.1 (0.1)	Antiemetic or antivertigo agents, antihistamines, antiparkinson agents, anxiolytics, sedatives, and hypnotics
Hydromorphone	5,733 (523)	1.6 (0.1)	100.0	95.7 (0.9)	1.5 (0.5)	2.8 (0.9)	0.0 (0.0)	Analgesics
Lidocaine	5,265 (544)	1.5 (0.1)	100.0	89.0 (2.4)	7.2 (1.6)	3.8 (1.1)	0.0 (0.0)	Antiarrhythmic agents, local injectable anesthetics
Prednisone	5,222 (464)	1.5 (0.1)	100.0	16.5 (2.5)	56.1 (3.4)	27.4 (3.3)	0.0 (0.0)	Adrenal cortical steroids
Aspirin	5,150 (512)	1.4 (0.1)	100.0	78.5 (3.5)	16.5 (3.4)	4.9 (1.1)	0.1 (0.1)	Analgesics, antiplatelet agents
Tramadol	5,034 (639)	1.4 (0.2)	100.0	18.7 (3.4)	71.0 (3.9)	10.1 (2.0)	0.3 (0.2)	Analgesics
Cephalexin	4,928 (448)	1.4 (0.1)	100.0	11.3 (2.2)	71.0 (3.7)	17.3 (3.1)	0.4 (0.3)	Cephalosporins
Ceftriaxone	4,621 (410)	1.3 (0.1)	100.0	94.9 (1.5)	* (…)	2.1 (0.6)	0.0 (0.0)	Cephalosporins
Azithromycin	4,591 (473)	1.3 (0.1)	100.0	29.6 (2.9)	55.2 (3.5)	15.2 (2.2)	0.0 (0.0)	Macrolide derivatives
Amoxicillin	4,474 (447)	1.2 (0.1)	100.0	12.4 (2.7)	70.7 (3.5)	16.2 (2.4)	0.7 (0.6)	Penicillins
Lorazepam	4,452 (395)	1.2 (0.1)	100.0	83.1 (2.0)	9.3 (1.8)	7.5 (1.1)	0.0 (0.0)	Anticonvulsants, antiemetic or antivertigo agents, anxiolytics, sedatives, and hypnotics
Acetaminophen-oxycodone	4,152 (541)	1.2 (0.1)	100.0	36.8 (3.5)	40.0 (3.7)	23.1 (3.1)	0.1 (0.1)	Analgesics
All other	173,708 (11,677)	48.4 (0.8)	100.0	54.2 (2.0)	36.8 (2.2)	8.3 (0.6)	0.6 (0.2)	...

... Category not applicable.
0.0 Quantity more than zero but less than 0.05.
* Estimate does not meet NCHS standards of reliability.
[1]Based on Cerner Multum terminology, the drug name reflects the active ingredients of a drug mention.
[2]Includes drugs given or prescribed that did not have either the "given in emergency department" or "prescribed at discharge" check boxes marked.
[3]Based on Cerner Multum second-level therapeutic drug category (see https://www.cerner.com/solutions/drug-database).

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 23. Providers seen at emergency department visits: United States, 2016

Type of provider	Number of visits[1] (standard error) in thousands	Percent distribution (standard error)
All visits	145,591 (8,798)	...
Any physician	123,947 (7,426)	85.1 (1.9)
Emergency department attending physician	121,077 (7,439)	83.2 (2.1)
Emergency department resident or intern	11,931 (1,973)	8.2 (1.3)
Consulting physician	13,374 (1,627)	9.2 (1.1)
Registered nurse or licensed practical nurse	136,930 (8,613)	94.1 (1.1)
Any physician seen	117,100 (7,282)	80.4 (2.1)
Physician not seen	19,829 (3,237)	13.6 (1.9)
Nurse practitioner	17,822 (3,295)	12.2 (2.1)
Any physician seen	10,279 (2,306)	7.1 (1.5)
Physician not seen	7,543 (2,170)	5.2 (1.4)
Physician assistant	24,173 (2,682)	16.6 (1.6)
Any physician seen	14,134 (1,997)	9.7 (1.3)
Physician not seen	10,039 (1,567)	6.9 (0.9)
Emergency medical technician	7,856 (1,222)	5.4 (0.8)
Mental health provider	2,357 (376)	1.6 (0.2)
Other	42,461 (4,647)	29.2 (2.7)
Blank	323 (84)	0.2 (0.1)

... Category not applicable.

[1]Total exceeds "All visits" and percentage exceeds 100% because more than one provider may be reported per visit.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 24. Disposition of emergency department visits: United States, 2016

Disposition	Number of visits[1] (standard error) in thousands	Percent of visits (standard error)
All visits	145,591 (8,798)	...
Admitted, transferred, or died		
Admit to this hospital	12,644 (1,110)	8.7 (0.6)
Critical care unit	2,166 (427)	1.5 (0.3)
Stepdown or telemetry unit	*609 (184)	0.4 (0.1)
Operation room	959 (174)	0.7 (0.1)
Mental health or detoxification unit	535 (144)	0.4 (0.1)
Cardiac catheterization laboratory	* (...)	0.1 (0.0)
Other bed or unit	6,004 (670)	4.1 (0.4)
Unknown or blank	2,164 (432)	1.5 (0.3)
Admit to observation unit	2,969 (652)	2.0 (0.4)
Then hospitalized	* (...)	* (...)
Then discharged	2,967 (651)	2.0 (0.4)
Return or transfer to nursing home	555 (91)	0.4 (0.1)
Transfer to psychiatric hospital	1,629 (255)	1.1 (0.2)
Transfer to other hospital	2,357 (291)	1.6 (0.2)
Died in emergency department[2]	270 (61)	0.2 (0.0)
Outpatient follow up		
Return or refer to physician or clinic for follow up	103,713 (6,578)	71.2 (1.5)
No follow up planned	13,030 (2,076)	8.9 (1.2)
Left prior to completing visit		
Left without being seen	1,560 (237)	1.1 (0.2)
Left before treatment complete	1,447 (193)	1.0 (0.1)
Left against medical advice	1,151 (175)	0.8 (0.1)
Other	3,518 (880)	2.4 (0.6)
Blank	1,541 (409)	1.1 (0.3)

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
0.0 Quantity more than zero but less than 0.05.
[1]Total exceeds "All visits" and percentage exceeds 100% because more than one disposition may be reported per visit.
[2]Includes "Dead on arrival".

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 25. Emergency department visits resulting in hospital admission, by selected patient and visit characteristics: United States, 2016

Selected characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Mean length of stay[1] (standard error) in days	Admissions as percent of visits (standard error)
All admissions	12,644 (1,110)	100.0 (...)	4.5 (0.1)	8.7 (0.6)
Age (years)				
Under 15	*413 (133)	3.3 (1.0)	2.4 (0.2)	1.5 (0.5)
15–24	675 (106)	5.3 (0.9)	3.3 (0.3)	3.3 (0.5)
25–44	1,983 (227)	15.7 (1.3)	3.6 (0.2)	5.0 (0.5)
45–64	3,967 (395)	31.4 (1.6)	4.6 (0.2)	11.5 (1.0)
65–74	2,463 (330)	19.5 (1.5)	4.9 (0.3)	22.4 (2.1)
75 and over	3,143 (348)	24.9 (1.7)	5.4 (0.2)	25.9 (1.7)
Residence				
Private	10,889 (1,002)	86.1 (2.1)	4.4 (0.1)	8.1 (0.6)
Nursing home	739 (126)	5.8 (0.8)	5.7 (0.5)	33.2 (3.5)
Homeless	* (...)	1.4 (0.5)	3.5 (0.5)	* (...)
Other	366 (89)	2.9 (0.7)	5.4 (1.3)	15.1 (3.8)
Unknown or blank	*474 (178)	* (...)	6.1 (1.2)	11.2 (1.7)
Expected source of payment[2]				
Private insurance	4,478 (511)	35.4 (2.1)	4.9 (0.3)	9.7 (1.0)
Medicare	5,394 (554)	42.7 (2.2)	5.2 (0.2)	20.8 (1.3)
Medicaid or CHIP[3]	3,845 (497)	30.4 (3.0)	4.0 (0.2)	7.0 (0.7)
No insurance[4]	497 (119)	3.9 (0.9)	4.0 (0.3)	4.0 (0.8)
Mode of arrival				
Ambulance	5,363 (589)	42.4 (2.5)	4.9 (0.2)	23.4 (2.0)
Other	7,281 (683)	57.6 (2.5)	4.3 (0.2)	5.9 (0.5)
Triage category				
Immediate or emergent[5]	3,019 (440)	23.9 (2.6)	4.7 (0.2)	23.8 (2.2)
Other	9,625 (871)	76.1 (2.6)	4.5 (0.2)	7.2 (0.6)
Patient seen in this emergency department during the last 72 hours				
Yes	371 (72)	2.9 (0.6)	4.4 (0.5)	9.6 (1.7)
No, unknown, or blank	12,273 (1,095)	97.1 (0.6)	4.5 (0.2)	8.7 (0.6)

See footnotes at end of table.

Table 25. Emergency department visits resulting in hospital admission, by selected patient and visit characteristics: United States, 2016—Con.

Selected characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Mean length of stay[1] (standard error) in days	Admissions as percent of visits (standard error)
Length of stay (days)				
1–2	3,077 (337)	24.3 (1.6)	...	...
3–4	3,901 (480)	30.9 (2.0)	...	...
5–6	2,073 (255)	16.4 (1.5)	...	...
7–8	860 (117)	6.8 (0.8)	...	...
9–10	462 (75)	3.7 (0.5)	...	...
More than 10	572 (97)	4.5 (0.7)	...	...
Unknown or blank	1,698 (384)	13.4 (3.0)	...	...
Hospital discharge status				
Alive	11,177 (1,074)	88.4 (2.9)	4.4 (0.1)	...
Home or residence	8,611 (819)	77.0 (1.9)	4.0 (0.1)	...
Return or transfer to nursing home	953 (153)	8.5 (1.1)	6.5 (0.4)	...
Transfer to another facility	860 (148)	7.7 (1.0)	4.8 (0.5)	...
Other	* (...)	3.1 (1.0)	4.4 (0.8)	...
Unknown or blank	408 (120)	3.7 (1.0)	7.0 (1.0)	...
Died	257 (55)	2.0 (0.4)	6.7 (1.5)	...
Unknown or blank	*1,210 (386)	* (...)	9.4 (1.9)	...

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
[1]Denominator for length of stay for 10,946,000 visits where this variable was known. Length of stay was unknown for 13.4% (weighted) of visits resulting in admission.
[2]Total exceeds "All visits" and percentage exceeds 100% because more than one source of payment may be reported per visit. Workers compensation, other, and unknown sources of payment are not included in this table, but account for 11.2% of expected sources of payment.
[3]CHIP is Children's Health Insurance Program.
[4]Defined as having only self-pay, no charge, or charity as payment sources. The individual self-pay and no charge or charity categories are not mutually exclusive.
[5]Defined as needing to be seen within 1–14 minutes.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 26. Principal hospital discharge diagnoses for patients admitted through the emergency department, by major disease category: United States, 2016

Major disease category and ICD–10–CM code range[1]		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	...	12,644 (1,110)	100.0 (...)
Certain infectious and parasitic diseases	A00–B99	280 (74)	2.2 (0.5)
Neoplasms	C00–D49	* (...)	1.0 (0.3)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50–D89	* (...)	1.2 (0.3)
Endocrine, nutritional, and metabolic diseases	E00–E89	492 (107)	3.9 (0.8)
Mental, behavioral and neurodevelopmental disorders	F01–F99	612 (136)	4.8 (1.0)
Diseases of the nervous system and sense organs[2]	G00–G99, H00–H95	312 (61)	2.5 (0.4)
Diseases of the circulatory system	I00–I99	1,494 (216)	11.8 (1.2)
Diseases of the respiratory system	J00–J99	1,321 (230)	10.4 (1.5)
Diseases of the digestive system	K00–K95	1,324 (179)	10.5 (1.2)
Diseases of the skin and subcutaneous tissue	L00–L99	234 (56)	1.8 (0.4)
Diseases of the musculoskeletal system and connective tissue	M00–M99	* (...)	2.2 (0.6)
Diseases of the genitourinary system	N00–N99	813 (159)	6.4 (1.0)
Pregnancy, childbirth and the puerperium	O00–O9A	*198 (67)	1.6 (0.5)
Symptoms, signs, and abnormal clinical and laboratory findings, not elsewhere classified	R00–R99	1,852 (192)	14.6 (1.2)
Injury, poisoning and certain other consequences of external causes	S00–T88	792 (133)	6.3 (0.9)
All other diagnoses[3]	...	328 (87)	2.6 (0.7)
Unknown or blank	...	2,037 (439)	16.1 (3.3)

... Category not applicable.

* Figure does not meet NCHS standards of reliability.

[1]Based on the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM). However, certain codes have been combined in this table to better describe the utilization of ambulatory care services.

[2]Sense organs include eye, adnexa, ear, and mastoid process.

[3]Includes certain conditions originating in the perinatal period (P00–P96); congenital malformations, deformations and chromosomal abnormalities (Q00–Q99); external causes of morbidity (V00–Y99); and factors influencing health status and contact with health services (Z00–Z99).

NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.

Table 27. Hospital and emergency department characteristics, by emergency department visit volume: United States, 2016

Hospital and emergency department characteristic	Emergency department annual visit volume[1]			
	Total	Fewer than 20,000	20,000 to 50,000	50,000 or more
	Percent distribution (standard error)			
All emergency departments	100.0 (...)	100.0 (...)	100.0 (...)	100.0 (...)
Hospital characteristic				
Number of days per week that elective surgeries are scheduled				
0–4	13.8 (2.6)	28.9 (4.6)	* (...)	* (...)
5	68.9 (3.1)	62.7 (4.6)	79.7 (5.4)	63.0 (7.0)
6–7	14.9 (2.7)	* (...)	* (...)	31.1 (6.7)
Unknown or blank	2.4 (0.9)	* (...)	* (...)	* (...)
Has bed coordinator				
Yes	59.6 (5.7)	* (...)	* (...)	91.7 (3.2)
No	36.4 (5.7)	* (...)	* (...)	* (...)
Unknown or black	* (...)	* (...)	* (...)	* (...)
How often hospital bed census data are available				
Instantaneously	78.5 (3.8)	71.7 (6.6)	79.8 (5.2)	**89.5 (3.7)
Every 4 hours	* (...)	* (...)	* (...)	* (...)
Every 8 hours	1.8 (1.0)	* (...)	* (...)	* (...)
Every 12 hours	2.1 (1.0)	* (...)	* (...)	* (...)
Every 24 hours	10.0 (3.0)	* (...)	* (...)	* (...)
Other	* (...)	* (...)	* (...)	* (...)
Unknown or blank	* (...)	* (...)	* (...)	* (...)
Has hospitalists on staff				
Yes	**85.4 (5.4)	* (...)	**92.8 (3.2)	**97.2 (2.0)
No	* (...)	* (...)	* (...)	* (...)
Unknown or blank	1.3 (0.6)	* (...)	* (...)	* (...)
Has emergency medicine residency program				
Yes	18.6 (3.1)	* (...)	* (...)	* (...)
No	75.6 (3.5)	**86.1 (5.3)	80.6 (5.0)	* (...)
Unknown or blank	* (...)	* (...)	* (...)	* (...)
Emergency department (ED) characteristic				
ED submits claims electronically				
Yes	**91.8 (2.9)	**92.6 (3.6)	* (...)	**94.0 (2.9)
No	* (...)	* (...)	* (...)	* (...)
Unknown or blank, or refused to answer	* (...)	* (...)	* (...)	* (...)
ED uses electronic medical records or health records				
Yes, all electronic	80.1 (3.8)	* (...)	**84.0 (5.0)	**85.6 (4.3)
Yes, part paper and part electronic	15.2 (3.3)	* (...)	* (...)	* (...)
No	* (...)	* (...)	* (...)	* (...)
Unknown or blank, or refused to answer	* (...)	* (...)	* (...)	* (...)
ED has physically separate observation or clinical decision unit				
Yes	44.6 (5.3)	* (...)	42.7 (6.9)	53.6 (6.9)
No	51.5 (5.1)	* (...)	52.9 (6.8)	40.1 (6.8)
Unknown	* (...)	* (...)	* (...)	* (...)
Admitted patients were ever boarded 2 or more hours in the ED or observation unit while waiting for an inpatient bed				
Yes	66.0 (4.1)	58.3 (6.9)	71.8 (6.9)	71.5 (6.7)
No	26.0 (3.7)	40.2 (6.7)	17.3 (5.0)	* (...)
Unknown or blank	8.0 (2.1)	* (...)	* (...)	* (...)

See footnotes at end of table.

Table 27. Hospital and emergency department characteristics, by emergency department visit volume: United States, 2016—Con.

Hospital and emergency department characteristic	Emergency department annual visit volume[1]			
	Total	Fewer than 20,000	20,000 to 50,000	50,000 or more
Emergency department (ED) characteristic—Con.	Percent distribution (standard error)			
ED went on ambulance diversion in 2015				
Yes	32.1 (4.5)	* (...)	* (...)	* (...)
No	50.6 (5.3)	* (...)	* (...)	30.7 (5.8)
Unknown or blank	17.3 (3.6)	* (...)	17.3 (4.7)	23.2 (6.2)
Ambulance diversion actively managed on a regional level compared with each hospital adopting diversion if and when it chooses[2]				
Yes	48.2 (7.2)	* (...)	* (...)	* (...)
No	43.0 (7.1)	* (...)	* (...)	* (...)
Unknown or blank	* (...)	* (...)	* (...)	* (...)
Hospital continues to admit elective or scheduled surgery cases when ED is on ambulance diversion[2]				
Yes	**83.4 (5.6)	* (...)	* (...)	* (...)
No	* (...)	* (...)	* (...)	* (...)
Unknown or blank	* (...)	* (...)	* (...)	* (...)
ED increased the number of standard treatment spaces in last 2 years				
Yes	17.2 (3.2)	* (...)	* (...)	25.9 (5.5)
No	75.8 (3.9)	**81.6 (6.4)	77.6 (6.1)	61.8 (6.3)
Unknown or blank	* (...)	* (...)	* (...)	* (...)
ED physical space was expanded in last 2 years				
Yes	14.6 (3.1)	* (...)	* (...)	19.5 (5.7)
No	81.4 (3.4)	88.4 (5.5)	79.3 (5.8)	71.3 (6.3)
Unknown or blank	* (...)	* (...)	* (...)	* (...)
ED plans to expand physical space in next 2 years[3]				
Yes	22.2 (3.9)	* (...)	19.6 (5.8)	25.9 (6.0)
No	71.3 (4.1)	* (...)	71.8 (6.5)	62.6 (6.4)
Unknown or blank	6.5 (1.9)	* (...)	* (...)	* (...)
Services ED uses				
Bedside registration	87.9 (3.5)	* (...)	**87.8 (4.7)	**87.8 (4.9)
Kiosk self check-in	* (...)	* (...)	* (...)	* (...)
Computer-assisted triage	52.7 (5.7)	* (...)	* (...)	64.5 (7.1)
Immediate bedding	71.4 (4.3)	* (...)	73.4 (6.0)	* (...)
Advanced triage (triage-based care) protocols	70.3 (4.1)	* (...)	73.6 (5.4)	79.9 (5.2)
Physician or practitioner at triage	37.3 (4.6)	* (...)	* (...)	40.6 (7.1)
Separate fast-track unit for nonurgent care	46.5 (5.3)	* (...)	* (...)	59.5 (6.5)
Separate operating room dedicated to ED patients	* (...)	* (...)	* (...)	* (...)
Electronic dashboard[4]	80.5 (4.4)	* (...)	**79.2 (6.5)	**90.9 (4.6)
Radio frequency identification tracking[5]	18.9 (3.6)	* (...)	22.2 (6.4)	* (...)
Wireless devices by providers	57.9 (4.9)	* (...)	* (...)	76.4 (6.5)
Zone nursing[6]	57.7 (5.1)	* (...)	69.5 (6.0)	* (...)
Pool nurses[7]	66.4 (4.3)	* (...)	61.6 (7.1)	69.8 (5.9)

... Category not applicable.
* Estimate does not meet NCHS standards of reliability.
** Estimate meets NCHS standards of reliability, but its complement does not.
[1]Number of sample records for all EDs (*N* = 228); Fewer than 20,000 (*N* = 62); 20,000 to 50,000 (*N* = 82); 50,000 or more (*N* = 84).
[2]Denominator is the number of EDs on ambulance diversion or for which ambulance diversion status is unknown.
[3]Denominator is number of EDs that did not expand its physical space, including unknown or blank responses, in the last 2 years.
[4]An electronic dashboard displays updated patient information and integrates multiple data sources.
[5]Radio frequency identification tracking shows the exact location of patients, caregivers, and equipment.
[6]Refers to all of a nurse's patients being located in one area.
[7]Pool nurses are those who can be pulled into the ED on demand to respond to surges.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2016.