

1985 Summary: National Hospital Discharge Survey

Hospital Care Statistics Branch, Division of Health Care Statistics

Introduction

With a rate of 148 per 1,000 discharges, 1985 marked the first year since 1971 that the discharge rate has fallen below 150 per 1,000. This is primarily the result of an 11-percent

drop in discharge rates from 1983 to 1985 (figure 1). In addition, the average length of stay for hospitalized patients is continuing to drop. The average stay in 1985 was 6.5 days compared with 7.7 days a decade ago (figure 2).

During 1985 an estimated 35.1 million inpatients, exclud-

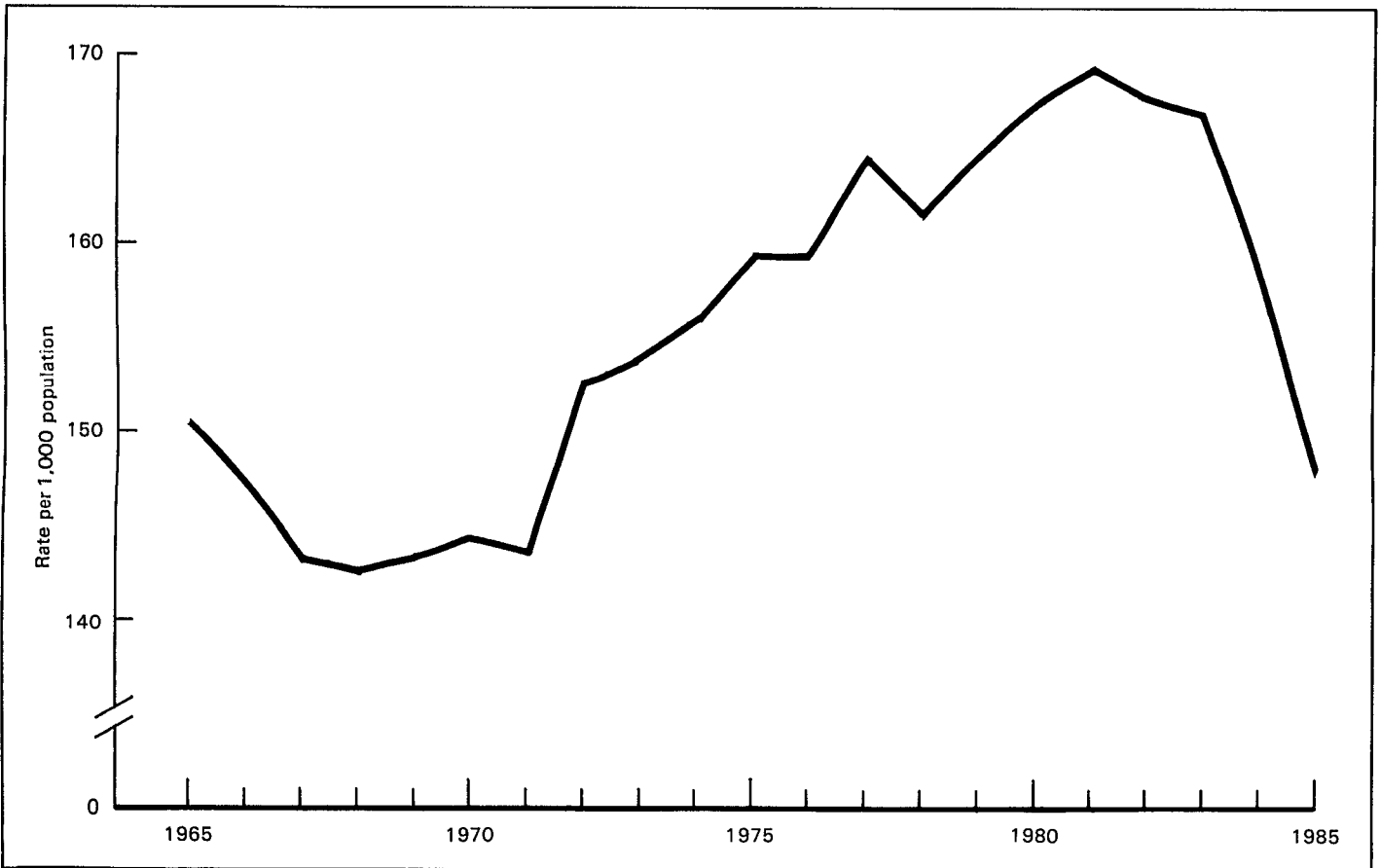


Figure 1. Discharge rate in non-Federal short-stay hospitals: United States, 1965-85



Figure 2. Average length of stay in non-Federal short-stay hospitals: United States, 1965-85

ing newborn infants, were discharged from short-stay non-Federal hospitals in the United States. These patients were hospitalized an average of 6.5 days and used 226.2 million days of inpatient hospital care. Patients hospitalized during 1985 accounted for 148 discharges per 1,000 civilian population.

These and other statistics presented in this report are based on data collected by means of the National Hospital Discharge Survey, a continuous survey that has been conducted by the National Center for Health Statistics since 1965. In 1985, data were abstracted from the medical records of approximately 194,800 patients discharged from 414 short-stay non-Federal hospitals. A brief description of the sample design, data collection procedures, and estimation process, and definition of terms used in this report can be found in the section entitled "Technical notes." A detailed discussion of these items, as well as the survey form used to collect the data, have been published.^{1,2}

Coding of medical data for patients hospitalized is done according to the *International Classification of Diseases, 9th Revision, Clinical Modification*³ (ICD-9-CM). Up to seven diagnoses and four procedures are coded for each discharge. Although diagnoses included in the ICD-9-CM section entitled "Supplementary classification of external causes of injury and poisoning" (codes E800-E999) are used by the National Hospital Discharge Survey, these diagnoses are excluded from this report. The conditions diagnosed and procedures performed are presented here by chapter of ICD-9-CM. Within these

chapters, a few diagnoses and procedures or groups thereof also are shown. These specific categories were selected primarily because of large numbers of occurrences or because they are of special interest. Residual categories of the diagnostic and procedure classes, however, are not included in the tables. More detailed analyses of these data will be presented in later reports in Series 13 of *Vital and Health Statistics*.

In 1985, approximately 17 percent of the hospitals submitted machine-readable data tapes through commercial abstracting services. Preliminary analysis indicates that a greater number of nonsurgical procedures per patient are obtained from these hospitals than from hospitals submitting data in the traditional manual mode (see Technical notes). This has resulted in increases from 1984 to 1985 in the estimates for miscellaneous diagnostic and therapeutic procedures and, therefore, for total procedures.

Data highlights

Utilization by patient and hospital characteristics

The number, rate, and average length of stay of patients discharged from short-stay non-Federal hospitals are shown by selected patient and hospital characteristics in tables 1-3. The 35.1 million patients discharged from short-stay hospitals during 1985 included an estimated 14.2 million males and 20.9 million females. The rates per 1,000 population were 124 for

males and 171 for females, making the rate for females about 38 percent higher than the rate for males. The number and rate of discharges are always higher for females than for males because of the large number of women in their childbearing years (15–44 years of age) who are hospitalized for deliveries and other obstetrical conditions. Excluding deliveries, the rate for females discharged was 139, or only about 12 percent higher than the rate for males.

The average length of stay was 6.9 days for males and 6.2 days for females during 1985. The length of stay for females was shorter than that for males primarily because the average length of stay of the 3.9 million women who were hospitalized for deliveries was only 3.3 days. The average length of stay for females who were not hospitalized for deliveries during 1985 was 6.8 days.

The number of discharges from short-stay hospitals by geographic region during 1985 ranged from 12.3 million in the South Region to 6.5 million in the West Region, and the rates per 1,000 population ranged from 154 in the Midwest Region to 138 in the West Region. Regional differences in the number of discharges are accounted for mainly by variations in population sizes.

Average lengths of stay by geographic region were 5.4 days in the West, 6.0 days in the South, 6.8 days in the Midwest, and 7.7 days in the Northeast.

Discharges from short-stay hospitals were about 40 percent male and 60 percent female in every hospital bed-size group. The average length of stay increased steadily from 5.2 days in the smallest hospitals (6–99 beds) to 7.4 days in the largest hospitals (500 beds or more) for all patients.

During 1985, voluntary nonprofit hospitals provided medical care to an estimated 24.0 million patients, or 68 percent of all patients hospitalized. Hospitals operated by State and local governments cared for 7.8 million patients, or 22 percent of all discharges, and proprietary hospitals operated for profit cared for 3.3 million patients or 9 percent of all discharges. Average lengths of stay were 6.7 days in voluntary nonprofit hospitals, 5.9 days in State and local government hospitals, and 6.3 days in proprietary hospitals.

Utilization by diagnosis

Diseases of the circulatory system ranked first in 1985 among the ICD–9–CM diagnostic chapters as a principal or first-listed diagnosis among patients discharged from non-Federal short-stay hospitals. These conditions accounted for an estimated 5.5 million discharges. Other leading ICD–9–CM diagnostic chapters were supplementary classifications (including females with deliveries) (4.3 million discharges) and diseases of the digestive system (3.9 million discharges). Over 38 percent of the patients discharged from non-Federal short-stay hospitals were included in these three ICD–9–CM diagnostic chapters.

The diagnostic categories presented in this report were selected either because they appear as principal or first-listed diagnoses with great frequency or because the conditions are of special interest. Although many of these categories (such as malignant neoplasms; psychoses; and fractures, all sites) are

groupings of more detailed diagnoses, they are presented as single categories without showing all of the specific diagnostic inclusions.

The number and rate of discharges and average length of stay for each ICD–9–CM diagnostic chapter and selected categories are shown by sex and age in tables 4–6. The most common diagnostic category for all patients was females with deliveries. This was followed by the diagnostic categories heart disease and malignant neoplasms. Excluding females with deliveries, these last two non-sex-specific diagnostic categories were also the most common first-listed diagnoses for each sex.

The most frequent first-listed diagnoses for 1985 varied for the different age groups. For patients under 15 years of age, the most frequent diagnoses were acute respiratory infections, except influenza; pneumonia, all forms; and chronic disease of tonsils and adenoids. Excluding females with deliveries, the most frequent diagnoses for patients 15–44 years of age were fractures, all sites; psychoses; and abortions and ectopic and molar pregnancies. Patients 45–64 years of age were hospitalized most frequently for heart disease. The most common diagnoses for patients 65 years of age and over were heart disease and malignant neoplasms.

The average length of stay for all patients ranged from a low of 1.5 days for the diagnostic category chronic disease of tonsils and adenoids, 1.6 days for patients admitted for sterilization, 2.0 days for the diagnostic category of cataract, and 2.1 days for abortions and ectopic and molar pregnancies to a high of 14.9 days for psychoses, and 14.7 days for fracture of neck of femur. Although the overall average length of stay for females was shorter than that for males, females stayed in the hospital longer than males for many of the specific diagnostic categories shown in this report.

The average length of stay increased with increasing age for most categories of diagnoses shown. Overall, the average length of stay ranged from 4.6 days for patients under 15 years of age to 8.7 days for patients 65 years and over.

Utilization by procedures

One or more surgical or nonsurgical procedures were performed for an estimated 20.7 million of the 35.1 million inpatients discharged from short-stay hospitals during 1985. A total of 36.8 million procedures, or an average of 1.8 per patient who underwent at least one procedure, were recorded in 1985.

Procedures are grouped in the tables of this report by the ICD–9–CM procedure chapters. Selected procedures within these chapters also are presented by specific categories. Some of these categories (such as extraction of lens, open heart surgery, and hysterectomy) are presented as single categories although they may be divided into more precise subgroups.

When grouped by chapters, miscellaneous diagnostic and therapeutic procedures with 8.8 million procedures ranked first among the surgical and nonsurgical procedures performed during 1985. These were followed by operations on the digestive system with 5.7 million procedures performed. Other leading procedures were obstetrical procedures with 4.3 million procedures, operations on the musculoskeletal system with 3.5 million procedures and operations on female genital organs

with 3.3 million procedures. Approximately two-thirds of all procedures performed in 1985 were included in these five ICD-9-CM procedure chapters.

The number and rate of all-listed procedures in 1985 for each ICD-9-CM procedure chapter and selected procedure categories are shown by sex and age in tables 7 and 8. Of the 36.8 million procedures performed during 1985, 14.7 million were for males and 22.1 million were for females. The corresponding rates per 1,000 population were 155 for both sexes, 128 for males, and 180 for females. Of the procedures shown in table 7, some common ones for males were arteriography and angiocardiology and computerized axial tomography;

the most frequently performed procedures for females were episiotomy and cesarean section.

The rate of procedures per 1,000 population increased with advancing age from 37 for patients under 15 years to 387 for patients 65 years of age and over. The most frequently performed procedures for patients under 15 years of age were tonsillectomy with or without adenoidectomy; for patients 15-44 years of age, episiotomy and cesarean section; for patients 45-64 years of age, arteriography and angiocardiology, and computerized axial tomography; and for patients 65 years of age and over, computerized axial tomography and diagnostic ultrasound.

TABLE 1. NUMBER OF INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS BY SELECTED CHARACTERISTICS: UNITED STATES, 1985
(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

SELECTED CHARACTERISTIC	BOTH SEXES	MALE	FEMALE
NUMBER OF PATIENTS DISCHARGED IN THOUSANDS			
TOTAL.....	35,056	14,160	20,896
AGE			
UNDER 15 YEARS.....	2,972	1,698	1,274
15-44 YEARS.....	13,966	4,153	9,813
45-64 YEARS.....	7,610	3,776	3,834
65 YEARS AND OVER.....	10,508	4,533	5,975
REGION			
NORTHEAST.....	7,168	2,998	4,170
MIDWEST.....	9,111	3,734	5,378
SOUTH.....	12,274	4,850	7,425
WEST.....	6,502	2,579	3,923
BED SIZE			
6-99 BEDS.....	5,331	2,118	3,213
100-199 BEDS.....	6,443	2,565	3,878
200-299 BEDS.....	6,953	2,905	4,048
300-499 BEDS.....	8,625	3,459	5,167
500 BEDS OR MORE.....	7,703	3,113	4,590
OWNERSHIP			
NONPROFIT.....	23,984	9,645	14,339
STATE AND LOCAL GOVERNMENT.....	7,776	3,153	4,623
PROPRIETARY.....	3,296	1,362	1,933

TABLE 3. AVERAGE LENGTH OF STAY FOR INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS BY SELECTED CHARACTERISTICS: UNITED STATES, 1985
(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

SELECTED CHARACTERISTIC	BOTH SEXES	MALE	FEMALE
AVERAGE LENGTH OF STAY IN DAYS			
TOTAL.....	6.5	6.9	6.2
AGE			
UNDER 15 YEARS.....	4.6	4.5	4.6
15-44 YEARS.....	4.8	6.1	4.3
45-64 YEARS.....	7.0	6.9	7.1
65 YEARS AND OVER.....	8.7	8.4	9.0
REGION			
NORTHEAST.....	7.7	8.0	7.6
MIDWEST.....	6.8	7.2	6.4
SOUTH.....	6.0	6.4	5.8
WEST.....	5.4	5.9	5.1
BED SIZE			
6-99 BEDS.....	5.2	5.4	5.1
100-199 BEDS.....	5.8	6.2	5.5
200-299 BEDS.....	6.5	6.8	6.3
300-499 BEDS.....	6.8	7.3	6.5
500 BEDS OR MORE.....	7.4	8.0	7.0
OWNERSHIP			
NONPROFIT.....	6.7	7.1	6.4
STATE AND LOCAL GOVERNMENT.....	5.9	6.3	5.6
PROPRIETARY.....	6.3	6.7	6.0

TABLE 2. RATE OF INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY AGE, GEOGRAPHIC REGION, AND SEX: UNITED STATES, 1985
(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

AGE AND REGION	BOTH SEXES	MALE	FEMALE
RATE OF PATIENTS DISCHARGED PER 1,000 POPULATION			
TOTAL.....	147.9	123.5	170.7
AGE			
UNDER 15 YEARS.....	57.2	63.8	50.2
15-44 YEARS.....	125.1	75.4	173.4
45-64 YEARS.....	169.5	176.2	163.4
65 YEARS AND OVER.....	368.3	393.2	351.4
REGION			
NORTHEAST.....	144.1	- - -	- - -
MIDWEST.....	154.3	- - -	- - -
SOUTH.....	151.6	- - -	- - -
WEST.....	137.6	- - -	- - -

TABLE 4. NUMBER OF INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY CATEGORY OF FIRST-LISTED DIAGNOSIS, SEX, AND AGE: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS. DIAGNOSTIC GROUPINGS AND CODE NUMBER INCLUSIONS ARE BASED ON THE INTERNATIONAL CLASSIFICATION OF DISEASES, 9TH REVISION, CLINICAL MODIFICATION)

CATEGORY OF FIRST-LISTED DIAGNOSIS AND ICD-9-CM CODE	TOTAL	SEX		AGE			
		MALE	FEMALE	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER
NUMBER OF PATIENTS DISCHARGED IN THOUSANDS							
ALL CONDITIONS.....	35,056	14,160	20,896	2,972	13,966	7,610	10,508
INFECTIOUS AND PARASITIC DISEASES.....001-139	669	308	361	193	210	95	172
NEOPLASMS.....140-239	2,411	1,008	1,403	69	454	794	1,094
MALIGNANT NEOPLASMS.....140-208,230-234	1,911	892	1,019	43	229	648	991
MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	315	206	110	*	13	132	169
MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	208	*	207	*	35	91	81
ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	1,068	409	659	70	271	279	448
DIABETES MELLITUS.....250	480	194	286	21	128	160	171
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	342	149	193	58	90	56	138
MENTAL DISORDERS.....290-319	1,700	918	782	49	1,014	396	240
PSYCHOSES.....290-299	701	325	376	*6	396	164	135
NEUROTIC AND PERSONALITY DISORDERS.....300-301	195	68	126	*5	120	44	26
ALCOHOL DEPENDENCE SYNDROME.....303	388	312	76	*	239	121	26
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	1,211	537	674	229	305	267	409
DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	425	196	229	64	143	93	126
CATARACT.....366	182	67	114	*	*6	38	138
DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	259	117	142	118	55	47	39
DISEASES OF THE CIRCULATORY SYSTEM.....390-459	5,470	2,783	2,686	35	481	1,728	3,224
ESSENTIAL HYPERTENSION.....401	214	89	124	*	45	84	82
HEART DISEASE.....391-392.0,393-398,402,404,410-416,420-429	3,584	1,910	1,674	20	250	1,204	2,111
ACUTE MYOCARDIAL INFARCTION.....410	755	466	289	*	50	267	436
ATHEROSCLEROTIC HEART DISEASE.....414.0	304	190	114	*	13	134	157
OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	992	549	443	*	67	423	501
CONGESTIVE HEART FAILURE.....428.0	557	247	310	*	11	96	446
CEREBROVASCULAR DISEASE.....430-438	916	416	500	*	34	192	686
DISEASES OF THE RESPIRATORY SYSTEM.....460-519	3,238	1,591	1,647	848	656	612	1,121
ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	464	236	229	229	78	59	98
CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	288	124	164	186	98	*	-
PNEUMONIA, ALL FORMS.....480-486	854	433	421	206	100	147	400
ASTHMA.....493	462	195	266	144	124	97	97
DISEASES OF THE DIGESTIVE SYSTEM.....520-579	3,873	1,839	2,034	346	1,222	1,038	1,267
ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	292	156	137	2	73	86	131
GASTRITIS AND DUODENITIS.....535	203	87	116	15	79	57	51
APPENDICITIS.....540-543	250	143	107	65	148	23	14
INGUINAL HERNIA.....550	384	343	42	47	100	118	120
NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	457	191	266	133	165	66	94
CHOLELITHIASIS.....574	474	140	333	*	162	154	157
DISEASES OF THE GENITOURINARY SYSTEM.....580-629	2,805	958	1,848	101	1,324	646	735
CALCULUS OF KIDNEY AND URETER.....592	325	215	110	*	165	119	39
DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	193	-	193	*	148	43	*
COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	968	...	968	*5	961	*	...
ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	382	...	382	*	378	*	...
DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	542	268	273	58	203	134	147
DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	2,170	939	1,231	70	860	699	542
ARTHROPATHIES AND RELATED DISORDERS.....710-719	465	188	276	18	133	130	183
INTERVERTEBRAL DISC DISORDERS.....722	508	281	227	*	265	191	51
CONGENITAL ANOMALIES.....740-759	269	156	113	150	72	30	17
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	159	82	77	158	*	*	-
SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	534	260	275	85	235	135	79
INJURY AND POISONING.....800-999	3,303	1,800	1,503	398	1,510	603	793
FRACTURES, ALL SITES.....800-829	1,129	550	579	132	398	181	419
FRACTURE OF NECK OF FEMUR.....820	258	62	196	*	11	24	219
SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	237	117	120	*	146	63	25
INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	268	162	107	64	140	31	34
LACERATIONS AND OPEN WOUNDS.....870-904	277	203	74	38	181	35	23
SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	4,324	156	4,168	52	4,098	92	82
PERSONS ADMITTED FOR STERILIZATION.....V25,2	82	*	80	*	81	*	-
FEMALES WITH DELIVERIES.....V27	3,854	...	3,854	11	3,838	*5	...

1/ FIRST-LISTED DIAGNOSIS FOR FEMALES WITH DELIVERIES IS CODED V27, SHOWN UNDER "SUPPLEMENTARY CLASSIFICATIONS."

TABLE 5. RATE OF INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY CATEGORY OF FIRST-LISTED DIAGNOSIS, SEX, AND AGE: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS. DIAGNOSTIC GROUPINGS AND CODE NUMBER INCLUSIONS ARE BASED ON THE INTERNATIONAL CLASSIFICATION OF DISEASES, 9TH REVISION, CLINICAL MODIFICATION)

CATEGORY OF FIRST-LISTED DIAGNOSIS AND ICD-9-CM CODE	TOTAL	SEX		AGE			
		MALE	FEMALE	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER
RATE OF INPATIENTS DISCHARGED PER 10,000 POPULATION							
ALL CONDITIONS.....	1,478.9	1,235.5	1,706.9	571.9	1,250.8	1,695.2	3,683.2
INFECTIOUS AND PARASITIC DISEASES.....001-139	28.2	26.9	29.5	37.2	18.8	21.1	60.2
NEOPLASMS.....140-239	101.7	87.9	114.6	13.3	40.6	177.0	383.3
MALIGNANT NEOPLASMS.....140-208,230-234	80.6	77.8	83.3	8.4	20.5	144.3	347.3
MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	13.3	17.9	8.9	*	1.2	29.4	59.4
MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	8.8	*	16.9	*	3.1	20.2	28.3
ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	45.1	35.7	53.8	13.4	24.3	62.3	156.9
DIABETES MELLITUS.....250	20.2	16.9	23.4	4.1	11.5	35.5	59.9
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	14.4	13.0	15.8	11.1	8.1	12.6	48.3
MENTAL DISORDERS.....290-319	71.7	80.1	63.9	9.4	90.8	88.3	84.3
PSYCHOSES.....290-299	29.6	28.4	30.7	*1.1	35.5	36.6	47.2
NEUROTIC AND PERSONALITY DISORDERS.....300-301	8.2	6.0	10.3	*1.0	10.7	9.7	9.0
ALCOHOL DEPENDENCE SYNDROME.....303	16.4	27.3	6.2	*	21.4	26.9	9.3
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	51.1	46.8	55.1	44.1	27.3	59.5	143.5
DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	17.9	17.1	18.7	12.2	12.8	20.6	44.1
CATARACT.....366	7.7	5.9	9.4	*	*0.5	8.4	48.2
DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	10.9	10.2	11.6	22.7	4.9	10.6	13.8
DISEASES OF THE CIRCULATORY SYSTEM.....390-459	230.8	242.8	219.4	6.8	43.1	385.1	1,130.2
ESSENTIAL HYPERTENSION.....401	9.0	7.8	10.2	*	4.1	18.7	28.8
HEART DISEASE.....391-392.0,393-398,402,404,410-416,420-429	151.2	166.7	136.7	3.8	22.4	268.2	739.8
ACUTE MYOCARDIAL INFARCTION.....410	31.8	40.6	23.6	*	4.5	59.5	152.7
ATHEROSCLEROTIC HEART DISEASE.....414.0	12.8	16.6	9.3	*	1.2	29.9	54.9
OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	41.8	47.9	36.2	*	6.0	94.3	175.6
CONGESTIVE HEART FAILURE.....428.0	23.5	21.5	25.4	*	1.0	21.4	156.3
CEREBROVASCULAR DISEASE.....430-438	38.6	36.3	40.8	*	3.0	42.9	240.3
DISEASES OF THE RESPIRATORY SYSTEM.....460-519	136.6	138.8	134.5	163.1	58.8	136.4	393.1
ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	19.6	20.6	18.7	44.0	7.0	13.2	34.5
CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	12.1	10.8	13.4	35.7	8.8	*	-
PNEUMONIA, ALL FORMS.....480-486	36.0	37.8	34.4	39.7	9.0	32.8	140.3
ASTHMA.....493	19.5	17.0	21.8	27.8	11.1	21.5	34.1
DISEASES OF THE DIGESTIVE SYSTEM.....520-579	163.4	160.4	166.2	66.5	109.4	231.3	444.1
ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	12.3	13.6	11.2	0.4	6.6	19.1	45.9
GASTRITIS AND DUODENITIS.....535	8.6	7.6	9.5	2.8	7.1	12.8	18.0
APPENDICITIS.....540-543	10.5	12.5	8.7	12.5	13.3	5.1	4.8
INGUINAL HERNIA.....550	16.2	29.9	3.4	9.0	9.0	26.2	42.1
NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	19.3	16.7	21.7	25.6	14.7	14.7	32.8
CHOLELITHIASIS.....574	20.0	12.2	27.2	*	14.5	34.3	55.0
DISEASES OF THE GENITOURINARY SYSTEM.....580-629	118.3	83.5	150.9	19.4	118.6	143.9	257.6
CALCULUS OF KIDNEY AND URETER.....592	13.7	18.7	9.0	*	14.8	26.4	13.7
DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	8.1	-	15.8	*	13.2	9.5	*
COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	40.8	...	79.1	*1.0	86.1	*	...
ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	16.1	...	31.2	*	33.8	*	...
DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	22.8	23.4	22.3	11.1	18.2	29.9	51.5
DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	91.6	82.0	100.6	13.4	77.0	155.8	189.9
ARTHROPATHIES AND RELATED DISORDERS.....710-719	19.6	16.4	22.6	3.5	11.9	29.0	64.2
INTERVERTEBRAL DISC DISORDERS.....722	21.4	24.5	18.6	*	23.7	42.6	18.0
CONGENITAL ANOMALIES.....740-759	11.4	13.6	9.2	28.8	6.4	6.7	6.1
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	6.7	7.2	6.3	30.4	*	*	-
SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	22.5	22.6	22.4	16.3	21.1	30.2	27.5
INJURY AND POISONING.....800-999	139.4	157.0	122.8	76.5	135.2	134.4	277.8
FRACTURES, ALL SITES.....800-829	47.6	48.0	47.3	25.3	35.6	40.3	146.8
FRACTURE OF NECK OF FEMUR.....820	10.9	5.4	16.0	0.6	1.0	5.4	76.9
SPRAINS AND STRAINS OF BACK (INCLUDING NECK) INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	10.0	10.2	9.8	0.6	13.1	14.0	8.8
LACERATIONS AND OPEN WOUNDS.....870-904	11.3	14.1	8.7	12.2	12.5	6.8	12.1
LACERATIONS AND OPEN WOUNDS.....870-904	11.7	17.7	6.1	7.3	16.2	7.9	8.1
SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	182.4	13.6	340.5	10.0	367.0	20.4	28.8
PERSONS ADMITTED FOR STERILIZATION.....V25.2	3.5	*	6.6	*	7.2	*	-
FEMALES WITH DELIVERIES.....V27	162.6	...	314.8	2.0	343.8	*1.2	...

1/ FIRST-LISTED DIAGNOSIS FOR FEMALES WITH DELIVERIES IS CODED V27, SHOWN UNDER "SUPPLEMENTARY CLASSIFICATIONS."

TABLE 6. AVERAGE LENGTH OF STAY FOR INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY CATEGORY OF FIRST-LISTED DIAGNOSIS, SEX, AND AGE: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS. DIAGNOSTIC GROUPINGS AND CODE NUMBER INCLUSIONS ARE BASED ON THE INTERNATIONAL CLASSIFICATION OF DISEASES, 9TH REVISION, CLINICAL MODIFICATION)

CATEGORY OF FIRST-LISTED DIAGNOSIS AND ICD-9-CM CODE	TOTAL	SEX		AGE			
		MALE	FEMALE	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER
AVERAGE LENGTH OF STAY IN DAYS							
ALL CONDITIONS.....	6.5	6.9	6.2	4.6	4.8	7.0	8.7
INFECTIOUS AND PARASITIC DISEASES.....001-139	7.0	7.2	6.7	4.1	5.4	8.6	11.2
NEOPLASMS.....140-239	8.2	8.6	7.9	4.2	5.9	8.2	9.4
MALIGNANT NEOPLASMS.....140-208,230-234	8.9	9.1	8.7	5.0	6.9	8.7	9.7
MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	9.2	8.8	9.9	*	7.9	9.1	9.3
MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	7.2	*	7.2	*	5.2	6.5	8.8
ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	7.3	7.5	7.3	5.1	5.9	7.2	8.6
DIABETES MELLITUS.....240-279	8.1	8.0	8.2	5.3	5.9	8.2	10.1
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	6.0	5.9	6.1	3.9	5.4	6.4	7.1
MENTAL DISORDERS.....290-319	12.3	11.5	13.3	20.3	11.8	11.8	13.8
PSYCHOSES.....290-299	14.9	13.1	16.4	*26.3	14.1	15.6	16.0
NEUROTIC AND PERSONALITY DISORDERS.....300-301	10.0	10.4	9.7	*20.5	9.7	8.7	11.0
ALCOHOL DEPENDENCE SYNDROME.....303	10.7	10.7	11.1	*	11.0	9.8	12.3
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	5.4	5.5	5.4	3.6	5.5	5.7	6.3
DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	9.6	9.7	9.6	7.0	7.9	9.6	12.9
CATARACT.....366	2.0	2.0	2.0	*	*2.5	2.2	1.9
DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	2.8	2.6	3.0	2.2	2.7	3.3	4.3
DISEASES OF THE CIRCULATORY SYSTEM.....390-459	7.9	7.5	8.3	7.1	5.9	7.2	8.6
ESSENTIAL HYPERTENSION.....401	4.9	4.4	5.2	*	4.0	4.8	5.6
HEART DISEASE.....391-392.0,393-398,402,404,410-416,420-429	7.3	7.0	7.6	7.9	5.6	6.6	7.9
ACUTE MYOCARDIAL INFARCTION.....410	9.5	9.0	10.3	*	7.1	9.5	9.7
ATHEROSCLEROTIC HEART DISEASE.....414.0	6.6	5.8	7.9	*	4.8	5.3	7.9
OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	5.4	5.3	5.6	*	4.2	4.8	6.1
CONGESTIVE HEART FAILURE.....428.0	8.0	7.8	8.2	*	6.6	7.3	8.2
CEREBROVASCULAR DISEASE.....430-438	10.5	10.0	10.9	*	9.3	11.1	10.4
DISEASES OF THE RESPIRATORY SYSTEM.....460-519	6.0	6.0	6.1	3.2	4.1	7.2	8.7
ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	4.5	4.4	4.6	3.2	4.0	5.3	7.1
CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	1.5	1.5	1.6	1.6	1.4	*	-
PNEUMONIA, ALL FORMS.....480-486	7.9	7.8	8.1	4.3	6.6	8.5	9.9
ASTHMA.....493	4.9	4.5	5.3	3.5	4.3	6.1	6.7
DISEASES OF THE DIGESTIVE SYSTEM.....520-579	6.2	5.7	6.6	3.4	4.8	6.4	8.1
ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	7.1	6.8	7.5	3.6	5.1	6.8	8.6
GASTRITIS AND DUODENITIS.....535	4.8	4.3	5.1	2.9	4.2	4.9	6.0
APPENDICITIS.....540-543	5.0	5.1	4.9	4.3	4.3	7.6	11.7
INGUINAL HERNIA.....550	3.2	3.1	4.0	1.8	2.6	3.1	4.4
NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	4.9	4.6	5.1	3.0	4.7	5.8	7.4
CHOLELITHIASIS.....574	7.5	8.3	7.2	*	6.1	7.0	9.5
DISEASES OF THE GENITOURINARY SYSTEM.....580-629	5.2	5.5	5.0	3.6	4.2	5.1	7.2
CALCULUS OF KIDNEY AND URETER.....592	3.7	3.5	4.2	*	3.1	3.9	6.2
DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	3.7	-	3.7	*	3.7	3.8	*
COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	2.5	...	2.5	*2.1	2.5	*	...
ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	2.1	...	2.1	*	2.2	*	...
DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	7.9	7.6	8.2	4.0	6.6	7.8	11.4
DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	6.7	6.6	6.9	5.4	5.4	6.7	9.1
ARTHROPATHIES AND RELATED DISORDERS.....710-719	7.7	7.0	8.2	6.1	4.1	7.8	10.5
INTERVERTEBRAL DISC DISORDERS.....722	7.3	6.8	7.9	*	6.8	7.4	9.3
CONGENITAL ANOMALIES.....740-759	5.6	5.7	5.5	5.6	4.1	7.8	8.0
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	13.0	12.2	13.8	12.9	*	*	-
SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	3.8	3.7	3.9	3.3	3.3	4.1	5.3
INJURY AND POISONING.....800-999	6.6	6.1	7.3	3.9	5.4	6.7	10.3
FRACTURES, ALL SITES.....800-829	8.7	7.7	9.8	5.0	6.8	7.4	12.4
FRACTURE OF NECK OF FEMUR.....820	14.7	16.6	14.1	*	12.7	12.7	15.0
SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	6.0	5.6	6.4	*	5.7	6.3	7.6
INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	5.6	6.1	4.8	2.6	5.7	6.8	9.5
LACERATIONS AND OPEN WOUNDS.....870-904	4.3	4.4	4.2	3.6	4.2	4.3	6.1
SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	3.3	4.4	3.3	4.7	3.2	3.9	5.7
PERSONS ADMITTED FOR STERILIZATION.....V25.2	1.6	*	1.6	*	1.6	*	-
FEMALES WITH DELIVERIES.....V27	3.3	...	3.3	3.4	3.3	*3.0	...

1/ FIRST-LISTED DIAGNOSIS FOR FEMALES WITH DELIVERIES IS CODED V27, SHOWN UNDER "SUPPLEMENTARY CLASSIFICATIONS."

TABLE 7. NUMBER OF ALL-LISTED PROCEDURES FOR INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY, SEX, AND AGE: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS. PROCEDURE GROUPINGS AND CODE NUMBER INCLUSIONS ARE BASED ON THE INTERNATIONAL CLASSIFICATION OF DISEASES, 9TH REVISION, CLINICAL MODIFICATION)

PROCEDURE CATEGORY AND ICD-9-CM CODE	TOTAL	SEX		AGE			
		MALE	FEMALE	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER
NUMBER OF ALL-LISTED PROCEDURES IN THOUSANDS							
ALL PROCEDURES.....	36,760	14,694	22,066	1,937	14,957	8,838	11,027
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	898	451	447	157	312	242	187
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	95	24	71	*	37	29	25
OPERATIONS ON THE EYE.....08-16	718	309	409	54	93	159	413
EXTRACTION OF LENS.....13.1-13.6	211	79	132	*	*8	42	157
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	180	67	113	*	*	37	139
OPERATIONS ON THE EAR.....18-20	256	130	126	129	70	40	18
MYRINGOTOMY.....20.0	104	60	44	89	*7	*6	*
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	1,173	589	584	306	567	188	111
RHINOPLASTY AND REPAIR OF NOSE.....21.8	193	99	94	*6	139	35	12
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	317	135	183	197	114	*6	*
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	981	582	398	52	168	331	429
BRONCHOSCOPY.....33.21-33.23	195	123	71	13	25	67	89
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	2,414	1,425	989	98	304	973	1,038
OPEN HEART SURGERY.....35.1-35.51, 35.53-36.2, 36.9, 37.10-37.11, 37.32-37.33, 37.5	379	264	114	11	37	193	137
DIRECT HEART REVASCULARIZATION.....36.1	230	172	58	-	15	126	89
CARDIAC CATHETERIZATION.....37.21-37.23	681	439	241	24	79	350	227
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, REPAIR.....37.7-37.8	223	118	105	*	*8	47	167
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	397	190	207	21	96	113	167
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	5,740	2,530	3,210	236	1,870	1,555	2,079
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23, 44.13	207	100	106	*7	47	62	91
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8, 45.6-45.8	282	127	155	*	46	78	155
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	283	150	133	69	173	26	14
HEMORRHOIDECTOMY.....49.43-49.46	123	67	56	*	55	47	19
CHOLECYSTECTOMY.....51.2	475	147	327	*	167	157	150
REPAIR OF INGUINAL HERNIA.....53.0-53.1	416	370	46	53	106	125	131
DIVISION OF PERITONEAL ADHESIONS.....54.5	309	44	265	*	179	59	68
OPERATIONS ON THE URINARY SYSTEM.....55-59	1,729	1,049	679	71	387	451	818
ENDOSCOPES (NATURAL ORIFICE).....55.21-55.22, 56.31, 57.32, 58.22	683	487	195	19	115	173	375
DILATION OF URETHRA.....58.6	119	73	47	*8	21	27	62
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	744	744	...	83	87	160	414
PROSTATECTOMY.....60.2-60.6	367	367	*	81	284
CIRCUMCISION.....64.0	52	52	...	31	*8	*6	*6
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	3,318	...	3,318	14	2,438	605	260
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	525	...	525	*	304	165	54
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	466	...	466	*	461	*6	-
HYSTERECTOMY.....68.3-68.7	670	...	670	*	421	190	60
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01, 69.51	50	...	50	*	48	*	...
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	227	...	227	*	225	*	...
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	349	...	349	*	232	83	33
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	165	...	165	*	56	64	45
OBSTETRICAL PROCEDURES.....72-75	4,304	...	4,304	13	4,287	*	...
EPISIOTOMY WITH OR WITHOUT FORCEPS OR VACUUM EXTRACTION.....72.1, 72.21, 72.31, 72.71, 73.6	1,820	...	1,820	*7	1,812	*	...
CESAREAN SECTION.....74.0-74.2, 74.4, 74.99	877	...	877	*	875	*	...
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	548	...	548	*	546	*	...
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	3,523	1,734	1,789	233	1,543	886	861
OPEN REDUCTION OF FRACTURE.....76.72, 76.74, 76.76-76.77, 76.79, 79.2-79.3, 79.5-79.6	492	251	241	29	215	91	157
OTHER REDUCTION OF FRACTURE.....76.70-76.71, 76.73, 76.75, 76.78, 79.0-79.1, 79.4	240	125	115	62	89	37	51
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5, 81.0	323	191	132	*5	183	108	27
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	97	66	31	*	60	26	10
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	160	86	75	*	66	32	58
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5-81.6	196	60	137	-	11	37	148
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	1,653	658	994	103	674	471	405
MASTECTOMY.....85.4	116	*	114	*	17	50	48
SKIN GRAFT (EXCEPT LIP OR MOUTH).....86.6-86.7	157	96	60	14	62	41	39
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	8,819	4,279	4,540	364	2,024	2,630	3,801
COMPUTERIZED AXIAL TOMOGRAPHY.....87.03, 87.41, 87.71, 88.01, 88.38	1,378	671	707	68	311	349	650
PYELOGRAM.....87.73-87.75	442	242	200	*9	156	133	143
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	1,117	693	425	12	128	514	463
DIAGNOSTIC ULTRASOUND.....88.7	1,234	478	756	49	379	300	506
RADIOISOTOPE SCAN.....92.0-92.1	838	375	463	17	150	249	421

TABLE 8. RATE OF ALL-LISTED PROCEDURES FOR INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY, SEX, AND AGE: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS. PROCEDURE GROUPINGS AND CODE NUMBER INCLUSIONS ARE BASED ON THE INTERNATIONAL CLASSIFICATION OF DISEASES, 9TH REVISION, CLINICAL MODIFICATION)

PROCEDURE CATEGORY AND ICD-9-CM CODE	TOTAL	SEX		AGE			
		MALE	FEMALE	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER
RATE OF ALL-LISTED PROCEDURES PER 100,000 POPULATION							
ALL PROCEDURES.....	15,508.1	12,820.1	18,024.7	3,728.4	13,395.6	19,689.5	38,651.0
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	378.8	393.5	365.0	301.3	279.7	539.4	655.3
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	40.1	20.6	58.3	*	33.0	65.5	88.7
OPERATIONS ON THE EYE.....08-16	303.0	269.4	334.5	104.3	82.9	353.7	1,446.8
EXTRACTION OF LENS.....13.1-13.6	89.2	69.0	108.0	*	*7.1	93.4	551.2
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	76.0	58.4	92.4	*	*	82.2	488.3
OPERATIONS ON THE EAR.....18-20	108.1	113.8	102.7	247.4	62.9	88.6	62.0
MYRINGOTOMY.....20.0	43.8	52.2	35.8	171.5	*6.5	*12.5	*
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	494.9	513.6	477.4	589.4	508.2	418.6	390.6
RHINOPLASTY AND REPAIR OF NOSE.....21.8	81.2	86.1	76.7	*11.9	124.3	79.1	42.7
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	133.9	117.4	149.3	378.4	101.8	*13.3	*
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	413.7	508.1	325.3	100.5	150.9	737.3	1,503.4
BRONCHOSCOPY.....33.21-33.23	82.1	107.5	58.3	25.4	22.8	149.1	311.6
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	1,018.3	1,243.4	807.6	189.5	272.3	2,167.7	3,638.8
OPEN HEART SURGERY.....35.1-35.51, 35.53-36.2, 36.9, 37.10-37.11, 37.32-37.33, 37.5	159.8	230.7	93.4	20.9	33.5	430.5	481.2
DIRECT HEART REVASCULARIZATION.....36.1	97.2	150.5	47.3	-	13.7	281.7	310.6
CARDIAC CATHETERIZATION.....37.21-37.23	287.1	383.2	197.2	46.0	71.2	779.3	797.1
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, REPAIR.....37.7-37.8	94.3	103.0	86.1	*	*7.4	104.7	587.0
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	167.5	165.5	169.3	40.9	85.8	251.7	584.8
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	2,421.7	2,207.2	2,622.5	453.7	1,675.2	3,463.7	7,288.0
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23, 44.13	87.2	87.5	86.9	*12.8	42.2	137.8	319.4
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8, 45.6-45.8	118.8	110.6	126.4	*	41.0	173.6	542.2
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	119.5	130.9	108.7	133.0	155.2	58.5	50.7
HEMORRHOIDECTOMY.....49.43-49.46	52.0	58.8	45.6	*	49.2	105.3	68.2
CHOLECYSTECTOMY.....51.2	200.3	128.6	267.4	*	149.4	349.1	526.4
REPAIR OF INGUINAL HERNIA.....53.0-53.1	175.4	322.5	37.6	102.1	95.2	279.3	458.9
DIVISION OF PERITONEAL ADHESIONS.....54.5	130.3	38.4	216.3	*	160.5	131.2	238.4
OPERATIONS ON THE URINARY SYSTEM.....55-59	729.2	915.4	554.9	137.3	346.9	1,005.5	2,868.8
ENDOSCOPIES (NATURAL ORIFICE).....55.21-55.22, 56.31, 57.32, 58.22	288.0	425.1	159.6	36.5	103.4	385.1	1,315.2
DILATION OF URETHRA.....58.6	50.3	63.3	38.0	*15.6	19.0	61.0	218.9
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	313.7	648.8	...	159.2	77.9	356.4	1,450.7
PROSTATECTOMY.....60.2-60.6	154.7	320.0	*	181.0	996.6
CIRCUMCISION.....64.0	21.9	45.2	...	59.1	*7.6	*14.4	*21.8
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	1,399.6	...	2,709.9	27.5	2,183.1	1,348.6	912.4
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	221.3	...	428.5	*	272.7	367.0	189.5
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	196.8	...	381.1	*	412.6	*12.6	-
HYSTERECTOMY.....68.3-68.7	282.8	...	547.6	*	376.7	423.2	208.7
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01, 69.51	20.9	...	40.5	*	43.0	*	...
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	95.6	...	185.1	*	201.6	*	...
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	147.1	...	284.8	*	207.5	184.7	114.8
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	69.4	...	134.4	*	50.3	141.8	156.0
OBSTETRICAL PROCEDURES.....72-75	1,815.6	...	3,515.5	24.4	3,839.0	*	...
EPISIOTOMY WITH OR WITHOUT FORCEPS OR VACUUM EXTRACTION.....72.1, 72.21, 72.31, 72.71, 73.6	767.9	...	1,486.9	*	1,622.6	*	...
CESAREAN SECTION.....74.0-74.2, 74.4, 74.99	369.9	...	716.2	*	783.4	*	...
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	231.0	...	447.3	*	488.9	*	...
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	1,486.2	1,512.5	1,461.6	448.0	1,381.7	1,974.7	3,017.4
OPEN REDUCTION OF FRACTURE.....76.72, 76.74, 76.76-76.77, 76.79, 79.2-79.3, 79.5-79.6	207.4	218.6	196.9	56.4	192.2	202.8	549.1
OTHER REDUCTION OF FRACTURE.....76.70-76.71, 76.73, 76.75, 76.78, 79.0-79.1, 79.4	101.2	108.8	94.0	119.9	79.7	83.1	179.6
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5, 81.0	136.1	166.5	107.7	*8.7	164.1	240.0	95.1
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	41.0	57.6	25.5	*	54.1	56.8	35.1
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	67.7	74.9	61.0	*	59.6	71.3	203.4
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5-81.6	82.8	52.0	111.6	-	10.2	81.7	519.3
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	697.2	574.5	812.1	198.3	603.2	1,050.1	1,418.2
MASTECTOMY.....85.4	48.9	1.3	*	*	15.2	110.8	168.0
SKIN GRAFT (EXCEPT LIP OR MOUTH).....86.6-86.7	66.1	84.1	49.3	27.6	55.3	92.4	137.1
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	3,720.6	3,733.7	3,708.3	700.2	1,812.7	5,859.0	13,323.8
COMPUTERIZED AXIAL TOMOGRAPHY.....87.03, 87.41, 87.71, 88.01, 88.38	581.2	585.3	577.4	130.2	278.8	777.0	2,278.1
PULVEGRAM.....87.73-87.75	186.4	211.5	163.0	*18.0	139.8	297.1	501.7
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	471.3	604.2	346.8	23.0	114.9	1,144.1	1,623.7
DIAGNOSTIC ULTRASOUND.....88.7	520.5	416.8	617.6	93.7	339.3	668.1	1,775.0
RADIOISOTOPE SCAN.....92.0-92.1	353.6	326.8	378.6	33.3	134.3	555.7	1,477.0

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Technical notes

Survey methodology

Source of data

The National Hospital Discharge Survey (NHDS) encompasses patients discharged from short-stay hospitals, exclusive of military and Veterans Administration hospitals, located in 50 States and the District of Columbia. Only hospitals with six or more beds and an average length of stay of less than 30 days for all patients are included in the survey. Discharges of newborn infants are excluded from this report.

The original universe for the survey consisted of 6,965 hospitals contained in the 1963 National Master Facility Inventory. New hospitals were sampled for inclusion in the survey in 1972, 1975, 1977, 1979, 1981, 1983 and 1985. In all, 558 hospitals were sampled in 1985. Of these hospitals, 82 refused to participate, and 62 were out of scope. The 414 participating hospitals provided approximately 194,800 abstracts of medical records.

Sample design and data collection

All hospitals with 1,000 or more beds in the universe of short-stay hospitals were selected with certainty in the sample. All hospitals with fewer than 1,000 beds were stratified, the primary strata being 24 size-by-region classes. Within each of these 24 primary strata, the allocation of the hospitals was made through a controlled selection technique so that hospitals in the sample would be properly distributed with regard to type of ownership and geographic division. Sample hospitals were drawn with probabilities ranging from certainty for the largest hospitals to 1 in 40 for the smallest hospitals. The within-hospital sampling ratio for selecting sample discharges varied inversely with the probability of selection of the hospital.

In 1985, for the first time, there were two data collection procedures used for the survey. The first was the traditional manual system of sample selection and data abstraction. The second was an automated method used in approximately 17 percent of the sample hospitals; it involved the purchase of data tapes from commercial abstracting services.

In the manual hospitals, sample discharges were selected using the daily listing sheet of discharges as the sampling frame. These discharges were selected by a random technique, usually on the basis of the terminal digit or digits of the patient's medical record number. The sample selection and abstraction of data from the face sheet and discharge summary of the medical records were performed by the hospital staff or by representatives of the National Center for Health Statistics (NCHS). The completed forms were forwarded to NCHS for coding, editing, and weighting procedures.

For the automated hospitals, tapes containing machine-readable medical record data are purchased from commercial abstracting services. These tapes are subject to NCHS sampling, editing, and weighting procedures. A detailed description of the automated process is to be published.

The Medical Abstract Form and the abstract service data tapes contain items relating to the personal characteristics of the patient, including birth date, sex, race, and marital status

Table I. Approximate relative standard errors of estimated numbers of first-listed discharges and all-listed procedures: United States, 1985

Size of estimate	First-listed diagnosis	All-listed procedures
5,000	13.2	17.3
10,000	10.5	14.2
50,000	6.7	9.5
100,000	5.6	8.2
500,000	3.9	6.0
1,000,000	3.4	5.4
3,000,000	2.8	4.6
5,000,000	2.6	4.3
10,000,000	2.4	3.9
20,000,000	2.2	3.6
30,000,000	2.1	...
40,000,000	2.0	...

but not name and address; administrative information, including admission and discharge dates, discharge status, and medical record number; and medical information, including diagnoses and surgical and nonsurgical operations or procedures. Since 1977, patient zip code, expected source of payment, and dates of surgery have also been collected. (The medical record number and patient zip code are considered confidential information and are not available to the public.)

Presentation of estimates

Statistics produced by NHDS are derived by a complex estimating procedure. The basic unit of estimation is the sample inpatient discharge abstract. The estimating procedure used to produce essentially unbiased national estimates in NHDS has three principal components: Inflation by reciprocals of the probabilities of sample selection, adjustment for nonresponse, and ratio adjustment to fixed totals. These components of estimation are described in appendix I of two earlier publications.^{4,5}

Based on consideration of the complex sample design of NHDS, the following guidelines are used for presenting NHDS estimates in this report:

- If the sample size is less than 30, the value of the estimate is not reported. Only an asterisk (*) is shown in the tables.
- If the sample size is 30–59, the value of the estimate is reported but should be used with caution. The estimate is preceded by an asterisk (*) in the tables.

Sampling errors and rounding of numbers

The standard error is a measure of the sampling variability that occurs by chance because only a sample, rather than an entire universe, is surveyed. The relative standard error of the estimate is obtained by dividing the standard error by the estimate itself and is expressed as a percent of the estimate. Relative standard errors for first-listed diagnoses and all-listed procedures are shown in table I. The relative standard errors for region and ownership of hospital are approximately 1½ times larger. The standard errors for average lengths of stay are shown in table II.

NOTE: A list of references follows the text.

Table II. Approximate standard errors of average lengths of stay by number of discharges: United States, 1985

Number of discharges	Average length of stay in days			
	2	6	10	20
	Standard error in days			
10,000.....	0.7	1.2	1.7	2.2
50,000.....	0.3	0.7	1.0	1.4
100,000.....	0.3	0.6	0.9	1.2
500,000.....	0.2	0.5	0.8	0.9
1,000,000.....	0.2	0.5	0.8	0.7
5,000,000.....	0.2	0.5	0.8	...

Estimates have been rounded to the nearest thousand. For this reason detailed figures within tables do not always add to the totals. Rates and average lengths of stay were calculated from original, unrounded figures and will not necessarily agree precisely with rates or average lengths of stay calculated from rounded data.

Tests of significance

In this report, the determination of statistical inference is based on the two-tailed Bonferroni test for multiple comparisons. Terms relating to differences such as "higher" and "less" indicate that the differences are statistically significant. Terms such as "similar" or "no difference" mean that no statistically significant difference exists between the estimates being compared. A lack of comment on the difference between any two estimates does not mean that the difference was tested and found to be not significant.

Definition of terms

Terms relating to hospitals and hospital characteristics

Hospitals—Short-stay special and general hospitals have six or more beds for inpatient use and an average length of stay of less than 30 days. Federal hospitals and hospital units of institutions are not included.

Bed size of hospital—Measured by the number of beds, cribs, and pediatric bassinets regularly maintained (set up and staffed for use) for patients; bassinets for newborn infants are not included. In this report the classification of hospitals by bed size reported by the hospitals is based on the number of beds at or near midyear.

Type of ownership of hospital—Determined by the organization that controls and operates the hospital. Hospitals are grouped as follows:

- *Voluntary nonprofit*—Hospitals operated by a church or another nonprofit organization.
- *Government*—Hospitals operated by a State or local government.
- *Proprietary*—Hospitals operated by individuals, partnerships, or corporations for profit.

Terms relating to hospitalization

Patient—A person who is formally admitted to the inpatient service of a short-stay hospital for observation, care, diagnosis,

or treatment. In this report the number of patients refers to the number of discharges during the year including any multiple discharges of the same individual from one or more short-stay hospitals. Infants admitted on the day of birth, directly or by transfer from another medical facility, with or without mention of disease, disorder, or immaturity, are included. All newborn infants, defined as those admitted by birth to the hospital, are excluded from this report. The terms "patient" and "inpatient" are used synonymously.

Discharge—The formal release of a patient by a hospital; that is, the termination of a period of hospitalization by death or by disposition to place of residence, nursing home, or another hospital. The terms "discharges" and "patients discharged" are used synonymously.

Discharge rate—The ratio of the number of hospital discharges during a year to the number of persons in the civilian population on July 1 of that year.

Days of care—The total number of patient days accumulated at time of discharge by patients discharged from short-stay hospitals during a year. A stay of less than 1 day (patient admission and discharge on the same day) is counted as 1 day in the summation of total days of care. For patients admitted and discharged on different days, the number of days of care is computed by counting all days from (and including) the date of admission to (but not including) the date of discharge.

Rate of days of care—The ratio of the number of patient days accumulated at time of discharge by patients discharged from short-stay hospitals during a year to the number of persons in the civilian population on July 1 of that year.

Average length of stay—The total number of patient days accumulated at time of discharge by patients discharged during the year, divided by the number of patients discharged.

Terms relating to diagnoses

Discharge diagnoses—One or more diseases or injuries (or some factor that influences health status and contact with health services which is not itself a current illness or injury) listed by the attending physician or the medical record of a patient. In the NHDS all discharge (or final) diagnoses listed on the face sheet (summary sheet) of the medical record for patients discharged from the inpatient service of short-stay hospitals are transcribed in the order listed. Each sample discharge is assigned a maximum of seven five-digit codes according to ICD-9-CM.³ The number of principal or first-listed diagnoses is equivalent to the number of discharges.

Principal diagnosis—The condition established after study to be chiefly responsible for occasioning the admission of the patient to the hospital for care.

First-listed diagnosis—The coded diagnosis identified as the principal diagnosis or listed first on the face sheet of the medical record if the principal diagnosis cannot be identified. The number of first-listed diagnoses is equivalent to the number of discharges.

Procedures—One or more surgical or nonsurgical operations, procedures, or special treatments assigned by the phy-

NOTE: A list of references follows the text.

sician to patients discharged from the inpatient service of short-stay hospitals. In the NHDS all terms listed on the face sheet (summary sheet) of the medical record under the captions "operation," "operative procedures," "operations and/or special treatment," and the like are transcribed in the order listed. A maximum of four procedures is coded.

Rate of procedures—The ratio of the number of all-listed procedures during a year to the number of persons in the civilian population on July 1 of that year.

Demographic terms

Age—Refers to the age of the patient on the birthday prior to admission to the hospital inpatient service.

Population—Civilian population is the resident population excluding members of the Armed Forces.

Geographic regions—One of the four geographic regions of the United States corresponding to those used by the U.S. Bureau of the Census:

<i>Region</i>	<i>States included</i>
Northeast . . .	Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, and Pennsylvania
Midwest	Michigan, Ohio, Illinois, Indiana, Wisconsin, Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, and Kansas
South	Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida, Kentucky, Tennessee, Alabama, Mississippi, Arkansas, Louisiana, Oklahoma, and Texas
West	Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada, Washington, Oregon, California, Hawaii, and Alaska.

Symbols

- - - Data not available
 - ... Category not applicable
 - Quantity zero
 - 0.0 Quantity more than zero but less than 0.05
 - Z Quantity more than zero but less than 500 where numbers are rounded to thousands
 - * Figure does not meet standard of reliability or precision (more than 30-percent relative standard error)
 - # Figure suppressed to comply with confidentiality requirements
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