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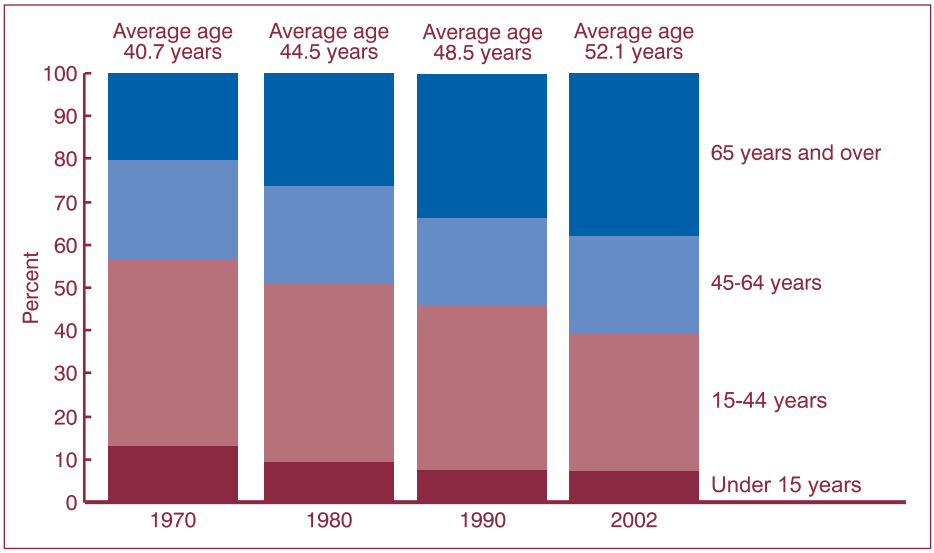
2002 National Hospital Discharge Survey

by Carol J. DeFrances, Ph.D., and Margaret J. Hall, Ph.D., Division of Health Care Statistics

This report presents the most current nationally representative data on inpatient care in the United States. Data are from the National Hospital Discharge Survey (NHDS), the longest continuously running nationally representative survey of hospital utilization.

As seen in the figure on this page, the average age and age distribution of inpatients has changed dramatically from 1970 through 2002. The average age of patients in 1970 was 40.7 years with 20 percent of all inpatients 65 years of age or over. In 2002, the average age had increased to 52.1 years with 38 percent of inpatients being 65 years of age or over. During the same period, the percent of inpatients under 15 years of age declined from 13 to 8 percent and inpatients 15–44 years of age declined from 43 to 32 percent. The percent of inpatients 45–64 years of age was more stable during these 23 years. Advances in anesthesia and pain relief, the development of minimally invasive procedures, the growing availability of ambulatory surgery, and efforts to contain health care costs have contributed to the shift of care from inpatient to outpatient settings (1,2), and technological advances in cardiac surgery resulted in increased



Percent distribution of hospital inpatients by age: United States, selected years, 1970–2002

hospitalization of elderly patients for cardiovascular procedures (3). NHDS data have been used to document dramatic declines in the average lengths of stays for patients from 1970 to 2001 (4). Changes in health care delivery, including advances in medicine and efforts to control costs, successfully reduced average inpatient stays as well as resulted in a larger share of elderly inpatients.

This report presents information about inpatient hospital utilization during 2002 as well as trend data for selected variables. Additional information about hospital utilization and other health topics is available from the National Center for Health Statistics (NCHS) Web site: http://www.cdc.gov/nchs/

Individual-year public-use data files are available for download from the Web site, and a multiyear public-use data file for trend analysis is available on CD-ROM. These and other products can also be obtained by contacting the NCHS Information Dissemination Staff at 301-458-INFO or 1-866-441-NCHS (6247) or by email at NCHSquery@cdc.gov.

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Abstract

Objectives—This report presents national estimates of the use of non-Federal short-stay hospitals in the United States during 2002 and trend data for selected variables. Numbers and rates of discharges, diagnoses, and procedures are shown by age and sex. Average lengths of stay are presented for all discharges and for selected diagnostic categories by age and sex.

Methods—The estimates are based on medical abstract data collected through the 2002 National Hospital Discharge Survey. The survey has been conducted annually since 1965 by the National Center for Health Statistics. Diagnoses and procedures presented are coded using the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM).

Results—Trends in the utilization of non-Federal short-stay hospitals show that the average age and age distribution of inpatients has changed dramatically from 1970 through 2002. In 1970, the average age of all inpatients was 40.7 years compared with 52.1 years in 2002. The percent of discharges aged 65 years and over comprised 20 percent of hospital discharges in 1970 whereas they comprised 38 percent in 2002. During this same period, the percent of inpatients under 15 years of age declined from 13 to 8 percent and inpatients 15–44 years of age declined from 43 to 32 percent. The percent of inpatients aged 45–64 years was more stable during these 23 years.

In 2002, there were an estimated 33.7 million hospital discharges, excluding newborn infants. The discharge rate was 1,174.6 per 10,000 population. The rate of respiratory disease diagnoses among persons 65 years and over was significantly higher than for other age groups and has risen since 1975. There were 42.5 million procedures performed on inpatients during 2002. About one-quarter of all procedures performed on females were obstetrical. Almost one-quarter of all procedures performed on males were cardiovascular.

Keywords: inpatients • diagnoses • procedures • ICD–9–CM

Introduction

This report presents data from the 2002 National Hospital Discharge Survey (NHDS). The survey has been conducted continuously since 1965 by the National Center for Health Statistics (NCHS). The NHDS is the principal source for national data on the characteristics of patients discharged from non-Federal short-stay hospitals. National estimates of hospital use derived from the NHDS are published for each calendar year by NCHS. This report provides an overview of the 2002 data, including the number and rate of discharges and average lengths of stay by age and sex of patients for selected diagnoses (tables 1–7). Average lengths of stay are also presented for selected diagnostic categories. Estimates of the number and rate of selected procedures performed on hospital inpatients are shown by age and sex (tables 8–11).

Detailed data from the NHDS are published in Series 13 of *Vital and Health Statistics*, which includes two reports on trends in hospital use (5,6). Trend data from the NHDS were recently used in a NCHS special report on health care utilization (3). NHDS data have also been used in articles examining important topics of interest in public health and health services research (7–23) and for a variety of activities by governmental, scientific, academic, and commercial institutions. A list of NCHS and other selected publications using NHDS data is available at http://www.cdc.gov/nchs/about/major/hdasd/nhds.htm.

Estimates of the number of procedures shown in this report are for inpatients only. Data on ambulatory surgery are available from the National Survey of Ambulatory Surgery (NSAS), which is also conducted by NCHS. The NSAS was conducted from 1994 through 1996 and covers hospital-based and free-standing ambulatory surgery centers. Data from the 3 years of this survey have been published (24–29).

Information on ambulatory procedures is collected annually in two other NCHS surveys. The National Ambulatory Medical Care Survey obtains information on visits to physicians' offices (30). The National Hospital Ambulatory Medical Care Survey collects data on visits to hospital outpatient and emergency departments (31,32).

Highlights

Patient and hospital characteristics

- Trends in hospital utilization show that from 1970 through 2002, the percentage of discharges aged 65 years and over significantly increased, and the percentages for those under 15 years and those 15–44 years decreased. The percentage of discharges aged 45–64 years decreased between 1970 and 1990 and then increased to its former level (23 percent).
- In 2002, there were an estimated 33.7 million inpatients discharged, excluding newborn infants, from non-Federal short-stay hospitals in the United States (table 1).
- The discharge rate was 1,174.6 per 10,000 population—952.3 for males and 1,388.0 for females (table 6). Males had an average length of stay of 5.3 days compared with 4.6 days for females (table 7).
- The discharge rate per 10,000 population ranged from 955.4 in the West to 1,290.3 in the Northeast region. The average length of stay ranged from 4.4 days in the Midwest to 5.6 days in the Northeast region.
- The average length of stay for children under 15 years old was 4.5 days; for people 15–44 years old, it was 3.7 days; for people 45–64 years old, it was 5.0 days; and for those aged 65 years and over, it was 5.8 days (table 4).
- In 2002, patients under age 15 years made up 8 percent of hospital discharges and used 7 percent of the days of care. The 15–44 year olds comprised 32 percent of discharges and 24 percent of the days of care. For the 45–64 year olds, the percent of discharges and days were both 23 percent. The 38 percent of all discharges who were elderly (those 65 years of age and over) used 45 percent of the days of care (figure 1).

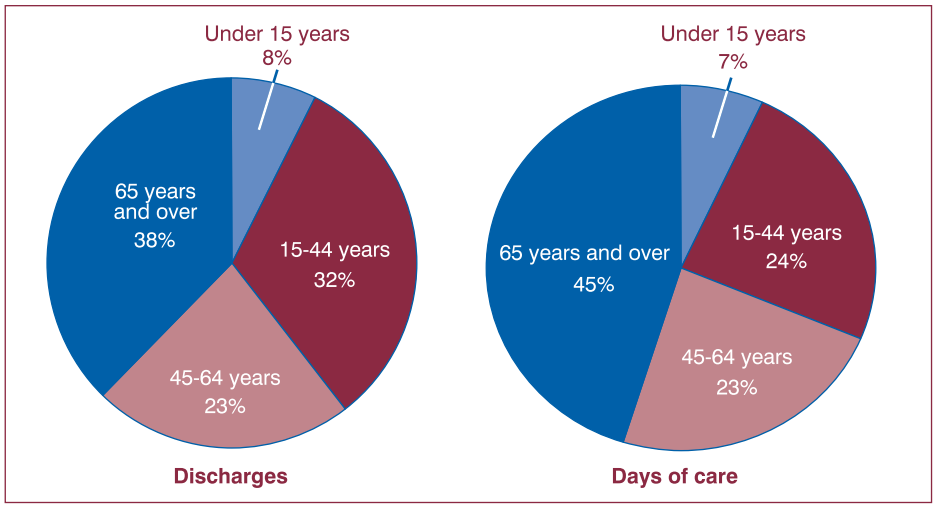

Figure 1. Percent distribution of discharges and days of care by age: United States, 2002

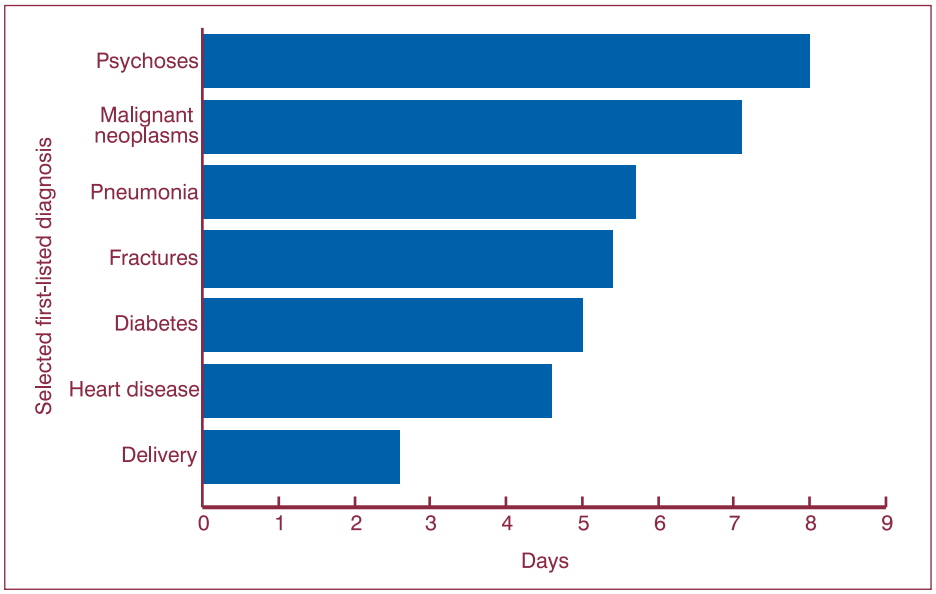

Figure 2. Average length of hospital stay for discharges with selected first-listed diagnosis: United States, 2002

Diagnoses

- Five diagnostic categories each accounted for a million or more discharges. These were heart disease (4.4 million), delivery (4.0 million), psychoses (1.7 million), pneumonia (1.3 million), and malignant neoplasms (1.2 million) (table 2).
- The average length of stay was 2.6 days for delivery, 4.6 days for heart disease, 5.7 days for pneumonia, 7.1 days for malignant neoplasms, and 8.0 days for psychoses (figure 2, table 4).
- Of the 4.4 million discharges for heart disease, 2.8 million or 64 percent were 65 years of age or over. For the elderly, there were 798.7 discharges per 10,000 population with a first-listed diagnosis of heart disease (table 3).
- The rate of respiratory disease diagnoses among persons 65 years of age and over has shown an upward trend from 1975 through 2002 (from 349.4 per 10,000 population to 486.5 per 10,000 population). For the other age groups, there has been a downward trend over the same period (figure 3).
- Nearly one-fifth (4 million) of female discharges were for childbirth (table 5).

Procedures

- During 2002, 42.5 million procedures were performed on hospital inpatients (table 8). Nationally, the rate of procedures was 1,481.4 per 10,000 population (table 9). For males, this rate was 1,197.3, and for females, it was 1,753.9 per 10,000 population (table 11).
- Almost three-fourths of all procedures were in four *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM) chapters: miscellaneous diagnostic and therapeutic procedures, obstetrical procedures, operations of the cardiovascular system, and operations of the digestive system (table 10).
- About one-quarter of all procedures performed on females were obstetrical (figure 4). Repair of current obstetric laceration (1.2 million), followed by cesarean section (1.1 million), were the most frequent obstetrical procedures performed.
- Almost one-quarter of all procedures performed on males were cardiovascular (figure 4). The rate of cardiovascular procedures performed on males was 282.2 per 10,000 population (table 11).
- Males had more cardiovascular procedures than females (4.0 million versus 2.8 million), and females had more operations on the digestive system than males (3.2 million versus 2.4 million) (figure 4).
- Frequent procedures for males were arteriography and angiocardiography, removal of coronary artery obstruction and insertion of stent(s), cardiac catheterization, respiratory therapy, endoscopy of small intestine, coronary artery bypass graft, and diagnostic ultrasound (table 10).
- Frequent procedures for females were repair of current obstetric laceration, cesarean section, arteriography and angiocardiography, artificial rupture of membranes, episiotomy, hysterectomy, and endoscopy of small intestine (table 10).

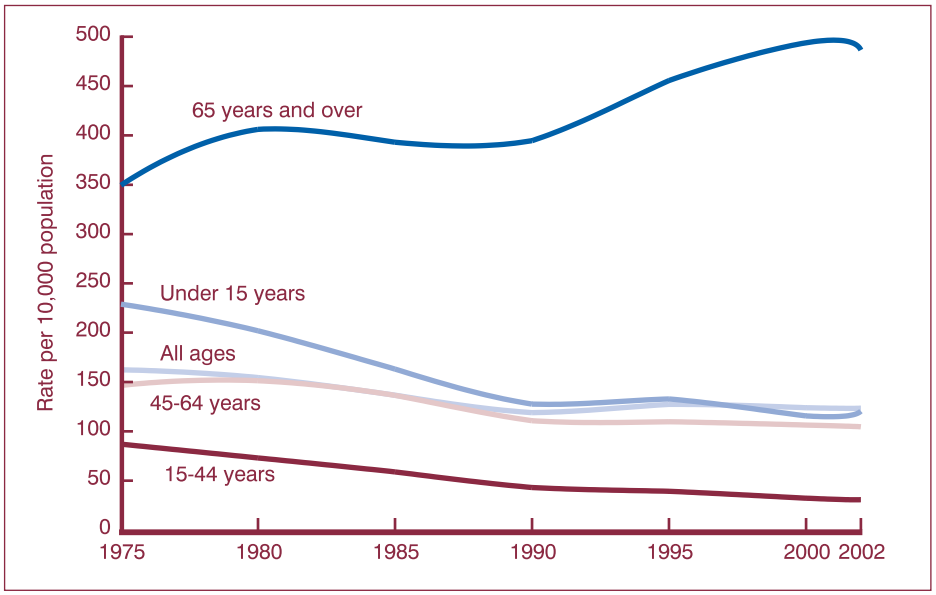

Figure 3. Rate of hospitalization for respiratory disease by age: United States, 1975–2002

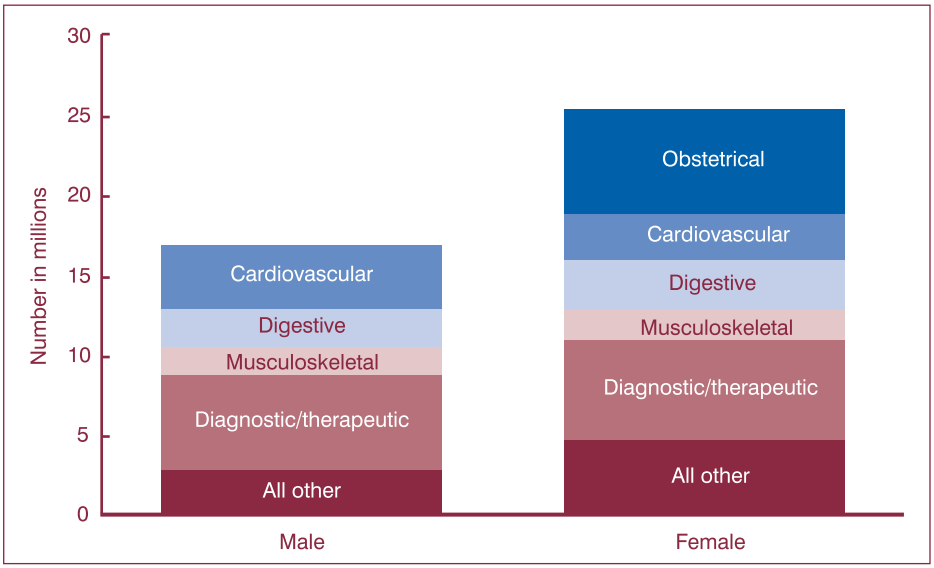

Figure 4. Number of all-listed inpatient procedures by sex: United States, 2002

Methods

Data source

The NHDS collects data from a sample of inpatient records acquired from a national sample of hospitals. Because persons with multiple discharges during the year may be sampled more than once, estimates are for discharges, not persons. Only hospitals with an average length of stay of fewer than 30 days for all patients and general hospitals or children's general hospitals are included in the survey. Federal, military, and Department of Veterans Affairs hospitals, as well as hospital units of institutions (such as prison hospitals) and hospitals with fewer than six beds staffed for patient use, are excluded.

Prior to 1988, the NHDS was based on a two-stage design. The survey was redesigned in 1988 (33). The new sample design uses a modified, three-stage design. Units selected at the first stage consist of either hospitals or geographic areas, such as counties, groups of counties, or metropolitan statistical areas in the 50 States and the District of Columbia. Hospitals are selected from within a sampled geographic area. At the last stage, discharges are selected within sampled hospitals using systematic random sampling. The hospital sampling frame for the redesigned survey was constructed from the SMG Hospital Market Database (34). The hospital sampling frame and sample are updated every 3 years (33).

For 2002, the sample consisted of 504 hospitals, of which 30 were found to be out of scope (ineligible) because they had gone out of business or otherwise failed to meet the criteria for the NHDS universe. Of the 474 in-scope (eligible) hospitals, 445 responded to the survey. Data were collected for approximately 327,000 discharges from the 445 responding hospitals.

Two data collection procedures are used in the survey. One is a manual system in which sample selection and medical transcription from the hospital records to abstract forms are performed by the hospital's staff or by staff of the U.S. Census Bureau on behalf of NCHS. Completed forms are sent to NCHS for coding, editing, and estimation.

The other data collection procedure is an automated system in which NCHS purchases machine-readable medical record data from commercial organizations, State data systems, hospitals, or hospital associations. Records from these sources are systematically sampled by NCHS. In 2002, approximately 40 percent of respondent hospitals provided data through the automated system. A detailed report on the design and operation of the NHDS has been published (33).

The medical abstract form (figure 5) and the automated data contain items that relate to the personal characteristics of the patient. These items include birth date (converted to age), sex, race, ethnicity, marital status, ZIP code, and expected sources of payment. Administrative items such as admission and discharge dates, admission type and source, and discharge status were also included. The medical information about patients includes up to seven diagnoses, as many as four surgical and nonsurgical operations and procedures, and dates of surgery. Medical data are coded according to the ICD–9–CM (35).

For the manual data collection, an ongoing quality control program is conducted on the coding and entering of data from abstracts to machine-readable form. Approximately 10 percent of the abstracts are independently recoded by an NHDS coder, with discrepancies resolved by a chief coder. The overall error rate for records manually coded for the 2002 data year was 0.1 percent for medical (ICD–9–CM) coding and keying and 0.1 percent for demographic coding and keying.

Estimation

Because of the NHDS's complex multistage design, the survey data must be inflated or weighted to produce national estimates. The estimation procedure produces essentially unbiased national estimates and has three basic components: inflation by reciprocals of the probabilities of sample selection, adjustment for nonresponse, and population weighting ratio adjustments. These three components of the final weight are described in more detail in another report (33).

The standard error is primarily a measure of sampling variability that occurs by chance because only a sample rather than the entire universe is surveyed. Estimates of the sampling variability for this report were calculated with SUDAAN software, which takes into account the complex sample design. A description of the software and the approach it uses has been published (36). The standard errors of statistics presented in this report are included in each of the tables.

Use of tables

Discharges are reported by first-listed diagnosis, which is the one specified as the principal diagnosis on the face sheet or discharge summary of the medical record or, if a principal diagnosis is not specified, the first one listed on the face sheet or discharge summary of the medical record. It is usually the main cause of the hospitalization. The number of first-listed diagnoses is the same as the number of discharges.

Estimates of procedures include surgical or nonsurgical operations, diagnostic procedures, and special treatments reported on the medical record. Up to four procedures are coded for each discharge. All-listed procedures include all occurrences of the procedure coded regardless of the order on the medical record. Definitions of the terms used in this report have been published (33).

The diagnoses and procedures appear in separate tables of this report, presented by ICD–9–CM chapter. Within these chapters, subcategories of diagnoses or procedures are shown. These specific categories were selected primarily because of the large number of discharges or because they are of special interest. Data for newborn infants, defined as patients admitted to a hospital by birth, are excluded from this report.

Because of low reliability, estimates with a relative standard error of more than 30 percent or those based on a sample of fewer than 30 records are replaced by asterisks(*). The estimates based on 30–59 patient records are preceded by an asterisk to indicate that they also have low reliability.

Estimates are rounded to the nearest thousand. Therefore, figures within tables do not always add to the totals. Rates and average lengths of stay are calculated from unrounded figures and may not precisely agree with rates or average lengths of stay calculated from rounded data.

Rates are computed using estimates of the civilian population of the United States as of July 1, 2002, based on the 2000 census. The data are from unpublished tabulations provided by the U.S. Census Bureau. This is the second year that the NHDS publications used rates calculated using the 2000 census. The rates for NHDS reports on 1991–2000 data were computed using postcensual estimates of the civilian population based on the 1990 census. Population estimates for the civilian population from the 2000 census were not available until after the 2000 NHDS reports were prepared.

A comparison of the populations based on the 1990 and the 2000 census, and the 2000 NHDS rates calculated using each of these estimates, is included in a recently published NCHS report (37). Researchers studying trends should examine this comparison to assess the effects of using populations based on different census years to calculate rates. Rates from the 1991–2000 reports may not be directly comparable to the 2002 rates.

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Table 1. Number, rate, and average length of stay for discharges from short-stay hospitals by age, region, and sex: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants]

Selected characteristic	Both sexes		Male		Female	
	Number	SE[1]	Number	SE[1]	Number	SE[1]
			Number in thousands			
Total	33,727	1,094	13,389	477	20,338	647
Age						
Under 15 years	2,540	326	1,412	181	1,128	146
15–44 years	10,736	401	2,906	155	7,830	285
45–64 years	7,723	257	3,755	133	3,968	133
65 years and over	12,727	445	5,315	189	7,412	266
Region						
Northeast	6,990	441	2,962	209	4,028	244
Midwest	7,503	719	3,025	295	4,478	431
South	12,994	576	4,947	255	8,048	341
West	6,239	386	2,455	177	3,784	235
			Rate per 10,000 population[2]			
Total	1,174.6	38.1	952.3	33.9	1,388.0	44.2
Age						
Under 15 years	418.7	53.7	454.9	58.4	380.8	49.4
15–44 years	864.2	32.3	466.0	24.8	1,265.7	46.0
45–64 years	1,158.9	38.5	1,158.1	40.9	1,159.7	38.9
65 years and over	3,574.9	124.9	3,598.4	127.7	3,558.3	127.7
Region						
Northeast	1,290.3	81.4	1,130.4	79.6	1,440.1	87.2
Midwest	1,153.5	110.6	948.8	92.6	1,350.4	129.9
South	1,266.5	56.2	988.8	51.1	1,530.7	64.8
West	955.4	59.1	755.7	54.5	1,153.1	71.6
			Average length of stay in days			
Total	4.9	0.1	5.3	0.1	4.6	0.1
Age						
Under 15 years	4.5	0.2	4.4	0.2	4.7	0.3
15–44 years	3.7	0.1	4.9	0.1	3.3	0.1
45–64 years	5.0	0.1	5.2	0.1	4.8	0.1
65 years and over	5.8	0.1	5.8	0.1	5.8	0.1
Region						
Northeast	5.6	0.2	6.1	0.2	5.3	0.2
Midwest	4.4	0.1	4.7	0.1	4.3	0.1
South	4.9	0.1	5.4	0.1	4.6	0.1
West	4.5	0.1	5.0	0.2	4.2	0.2

[1]SE is standard error.

[2]Rates were calculated using U.S. Census Bureau estimates of the civilian population based on the 2000 census.

Table 2. Number of discharges from short-stay hospitals by first-listed diagnosis and age: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	Number	SE[1]	Number	SE[1]	Number	SE[1]	Number	SE[1]	Number	SE[1]
	Number in thousands									
All conditions	33,727	1,094	2,540	326	10,736	401	7,723	257	12,727	445
Infectious and parasitic diseases 001–139	877	45	156	24	204	13	185	12	332	19
Septicemia .038	341	22	12	3	34	6	76	7	219	17
Neoplasms 140–239	1,682	71	33	7	313	16	611	32	725	33
Malignant neoplasms .140–208,230–234	1,208	56	25	6	121	9	419	24	643	29
Malignant neoplasm of large intestine and rectum .153–154,197.5	159	9	*	*	5	1	46	4	107	8
Malignant neoplasm of trachea, bronchus, and lung 162,176.4,197.0,197.3	160	11	*	*	*5	*1	55	5	100	8
Malignant neoplasm of breast .174–175,198.81	85	6	*	*	11	2	36	3	38	4
Benign neoplasms 210–229	427	21	*	*	183	10	178	11	61	5
Endocrine, nutritional and metabolic diseases, and immunity disorders 240–279	1,619	59	187	23	328	17	454	20	649	25
Diabetes mellitus .250	577	24	33	6	147	10	205	10	193	11
Volume depletion 276.5	508	27	129	16	53	6	77	7	249	13
Diseases of the blood and blood-forming organs 280–289	446	24	71	11	106	8	81	6	188	14
Mental disorders 290–319	2,464	360	149	43	1,422	229	620	85	273	22
Psychoses 290–299	1,704	271	*	*	957	167	431	63	224	19
Alcohol dependence syndrome .303	145	26	*	*	87	17	53	10	*	*
Diseases of the nervous system and sense organs 320–389	518	27	81	13	134	10	114	8	189	12
Diseases of the circulatory system 390–459	6,373	224	31	7	434	19	1,871	69	4,037	153
Heart disease 391–392.0,393–398,402,404,410–416,420–429	4,446	164	17	5	273	16	1,313	52	2,843	112
Acute myocardial infarction .410	818	43	*	*	57	7	259	15	501	27
Coronary atherosclerosis 414.0	1,096	60	*	*	48	5	432	27	615	36
Other ischemic heart disease 411–413,414.1–414.9	211	18	*	*	18	3	86	8	107	10
Cardiac dysrhythmias .427	788	31	*	*	45	4	174	9	562	25
Congestive heart failure 428.0	970	38	*	*	32	3	219	14	717	32
Cerebrovascular disease 430–438	942	40	*	*	40	4	229	12	669	32
Diseases of the respiratory system 460–519	3,542	143	730	93	382	20	697	30	1,732	71
Acute bronchitis and bronchiolitis .466	279	28	209	27	8	2	22	4	40	4
Pneumonia 480–486	1,312	56	204	25	116	7	216	12	776	38
Chronic bronchitis .491	520	30	*	*	16	4	161	12	343	20
Asthma .493	484	35	187	27	109	9	109	8	80	9
Diseases of the digestive system 520–579	3,320	117	216	28	839	34	955	39	1,310	56
Appendicitis 540–543	295	18	70	10	155	9	50	5	21	3
Noninfectious enteritis and colitis 555–558	310	18	54	8	89	7	66	6	100	8
Diverticula of intestine .562	262	16	*	*	36	6	77	6	149	11
Cholelithiasis .574	359	16	*	*	116	8	109	9	133	9
Diseases of the genitourinary system 580–629	1,817	66	88	15	580	26	458	20	690	31
Calculus of kidney and ureter .592	176	11	*	*	81	6	62	6	29	5
Complications of pregnancy, childbirth, and the puerperium[2] 630–677	528	38	*	*	524	38	*	*	. . .	. . .
Diseases of the skin and subcutaneous tissue 680–709	601	51	*	*	158	17	151	9	199	13
Cellulitis and abscess 681–682	422	20	41	7	109	8	126	8	147	10

Table 2. Number of discharges from short-stay hospitals by first-listed diagnosis and age: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	Number	SE[1]	Number	SE[1]	Number	SE[1]	Number	SE[1]	Number	SE[1]
	Number in thousands									
Diseases of the musculoskeletal system and connective tissue 710–739	1,736	80	41	10	326	19	598	30	770	43
Osteoarthrosis and allied disorders 715	568	37	*	*	20	3	193	14	356	24
Intervertebral disc disorders 722	353	22	*	*	133	9	153	11	67	8
Congenital anomalies 740–759	178	29	124	26	31	5	15	2	*7	*1
Certain conditions originating in the perinatal period 760–779	166	32	165	32	*	*	*	*	*	*
Symptoms, signs, and ill-defined conditions 780–799	283	27	63	10	99	11	68	8	54	10
Injury and poisoning 800–999	2,697	114	233	35	780	38	621	31	1,063	51
Fractures, all sites[3] 800–829	995	55	68	11	239	17	165	12	524	33
Fracture of neck of femur[3] 820	315	20	*	*	6	1	24	3	282	19
Poisonings 960–989	214	11	18	3	120	8	48	5	28	3
Supplementary classifications V01–V83	4,880	183	75	12	4,073	167	224	16	508	52
Females with deliveries V27	3,951	165	12	3	3,934	164	*5	*1	. . .	. . .

*Figure does not meet standard of reliablility or precision.

. . . Category not applicable.

[1]SE is standard error.

[2]First-listed diagnosis for females with deliveries is coded V27, shown under ‘‘Supplementary classifications.’’

[3]Excludes fractures coded as 733.1, pathologic fracture.

Table 3. Rate of discharges from short-stay hospitals by age and first-listed diagnosis: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]
	Rate per 10,000 population[2]									
All conditions	1,174.6	38.1	418.7	53.7	864.2	32.3	1,158.9	38.5	3,574.9	124.9
Infectious and parasitic diseases 001–139	30.5	1.6	25.8	3.9	16.4	1.1	27.8	1.8	93.1	5.4
Septicemia .038	11.9	0.8	1.9	0.4	2.8	0.5	11.5	1.1	61.4	4.6
Neoplasms. 140–239	58.6	2.5	5.5	1.2	25.2	1.2	91.7	4.7	203.6	9.2
Malignant neoplasms .140–208,230–234	42.1	1.9	4.1	1.0	9.7	0.8	62.9	3.6	180.5	8.2
Malignant neoplasm of large intestine and rectum .153–154,197.5	5.5	0.3	*	*	0.4	0.1	6.8	0.6	30.2	2.2
Malignant neoplasm of trachea, bronchus, and lung 162,176.4,197.0,197.3	5.6	0.4	*	*	*0.4	*0.1	8.3	0.8	28.0	2.3
Malignant neoplasm of breast .174–175,198.81	3.0	0.2	*	*	0.9	0.1	5.5	0.5	10.6	1.1
Benign neoplasms. 210–229	14.9	0.7	*	*	14.7	0.8	26.7	1.6	17.0	1.4
Endocrine, nutritional and metabolic diseases, and immunity disorders. 240–279	56.4	2.0	30.8	3.7	26.4	1.4	68.1	3.1	182.4	7.1
Diabetes mellitus .250	20.1	0.8	5.5	1.0	11.8	0.8	30.7	1.6	54.1	3.0
Volume depletion 276.5	17.7	0.9	21.3	2.6	4.2	0.5	11.6	1.0	70.0	3.7
Diseases of the blood and blood-forming organs 280–289	15.5	0.8	11.7	1.8	8.6	0.7	12.2	0.9	52.7	4.0
Mental disorders 290–319	85.8	12.6	24.5	7.0	114.5	18.4	93.0	12.7	76.8	6.1
Psychoses 290–299	59.4	9.4	*	*	77.0	13.4	64.7	9.5	62.9	5.3
Alcohol dependence syndrome .303	5.1	0.9	*	*	7.0	1.3	8.0	1.5	*	*
Diseases of the nervous system and sense organs 320–389	18.0	0.9	13.3	2.1	10.8	0.8	17.1	1.1	53.2	3.4
Diseases of the circulatory system 390–459	222.0	7.8	5.2	1.2	35.0	1.5	280.7	10.3	1,133.9	43.0
Heart disease 391–392.0,393–398,402,404,410–416,420–429	154.8	5.7	2.7	0.7	22.0	1.3	197.0	7.8	798.7	31.4
Acute myocardial infarction .410	28.5	1.5	*	*	4.6	0.6	38.9	2.3	140.8	7.6
Coronary atherosclerosis 414.0	38.2	2.1	*	*	3.9	0.4	64.8	4.0	172.9	10.0
Other ischemic heart disease 411–413,414.1–414.9	7.3	0.6	*	*	1.5	0.3	12.8	1.3	30.0	2.8
Cardiac dysrhythmias .427	27.5	1.1	*	*	3.6	0.4	26.2	1.4	157.8	6.9
Congestive heart failure 428.0	33.8	1.3	*	*	2.6	0.3	32.8	2.1	201.4	9.0
Cerebrovascular disease. 430–438	32.8	1.4	*	*	3.2	0.3	34.4	1.8	187.9	8.9
Diseases of the respiratory system 460–519	123.4	5.0	120.4	15.3	30.7	1.6	104.6	4.5	486.5	19.9
Acute bronchitis and bronchiolitis .466	9.7	1.0	34.4	4.5	0.7	0.1	3.3	0.5	11.2	1.2
Pneumonia 480–486	45.7	1.9	33.6	4.1	9.3	0.6	32.4	1.8	218.0	10.7
Chronic bronchitis .491	18.1	1.0	*	*	1.3	0.3	24.1	1.9	96.3	5.7
Asthma .493	16.8	1.2	30.8	4.5	8.7	0.7	16.3	1.2	22.5	2.5
Diseases of the digestive system 520–579	115.6	4.1	35.6	4.6	67.6	2.8	143.3	5.9	367.9	15.6
Appendicitis. 540–543	10.3	0.6	11.5	1.7	12.5	0.8	7.5	0.7	5.8	0.8
Noninfectious enteritis and colitis 555–558	10.8	0.6	9.0	1.3	7.2	0.6	9.9	0.9	28.2	2.4
Diverticula of intestine .562	9.1	0.5	*	*	2.9	0.5	11.6	1.0	41.7	3.0
Cholelithiasis .574	12.5	0.6	*	*	9.3	0.6	16.3	1.3	37.4	2.6
Diseases of the genitourinary system 580–629	63.3	2.3	14.6	2.5	46.7	2.1	68.7	3.0	193.9	8.7
Calculus of kidney and ureter .592	6.1	0.4	*	*	6.5	0.5	9.3	0.8	8.2	1.3
Complications of pregnancy, childbirth, and the puerperium[3] 630–677	18.4	1.3	*	*	42.2	3.0	*	*	. . .	. . .
Diseases of the skin and subcutaneous tissue 680–709	20.9	1.8	*	*	12.7	1.3	22.6	1.4	56.0	3.7
Cellulitis and abscess 681–682	14.7	0.7	6.7	1.2	8.8	0.6	18.9	1.2	41.2	2.9

Table 3. Rate of discharges from short-stay hospitals by age and first-listed diagnosis: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]
	Rate per 10,000 population[2]									
Diseases of the musculoskeletal system and connective tissue 710–739	60.5	2.8	6.8	1.6	26.2	1.5	89.8	4.5	216.4	11.9
Osteoarthrosis and allied disorders 715	19.8	1.3	*	*	1.6	0.2	29.0	2.1	99.9	6.8
Intervertebral disc disorders 722	12.3	0.8	*	*	10.7	0.7	22.9	1.7	18.7	2.1
Congenital anomalies 740–759	6.2	1.0	20.5	4.3	2.5	0.4	2.2	0.3	*1.9	*0.4
Certain conditions originating in the perinatal period 760–779	5.8	1.1	27.2	5.2	*	*	*	*	*	*
Symptoms, signs, and ill-defined conditions 780–799	9.9	0.9	10.3	1.7	8.0	0.9	10.1	1.2	15.1	2.7
Injury and poisoning 800–999	93.9	4.0	38.5	5.7	62.8	3.0	93.2	4.6	298.5	14.2
Fractures, all sites[4] 800–829	34.7	1.9	11.2	1.8	19.2	1.4	24.7	1.8	147.2	9.3
Fracture of neck of femur[4] 820	11.0	0.7	*	*	0.5	0.1	3.7	0.5	79.3	5.3
Poisonings 960–989	7.4	0.4	2.9	0.5	9.6	0.6	7.2	0.8	7.9	0.8
Supplementary classifications V01–V83	170.0	6.4	12.4	1.9	327.9	13.4	33.6	2.4	142.8	14.5
Females with deliveries V27	137.6	5.7	2.0	0.4	316.7	13.2	*0.7	*0.2	. . .	. . .

* Figure does not meet standard of reliablility or precision.

. . . Category not applicable.

[1]SE is standard error of rate.

[2]Rates were calculated using U.S. Census Bureau estimates of the civilian population based on the 2000 census.

[3]First-listed diagnosis for females with deliveries is coded V27, shown under ''Supplementary classifications.''

[4]Excludes fractures coded as 733.1, pathologic fracture.

Table 4. Average length of stay for discharges from short-stay hospitals by age and first-listed diagnosis: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	ALOS[1]	SE[2]	ALOS[1]	SE[2]	ALOS[1]	SE[2]	ALOS[1]	SE[2]	ALOS[1]	SE[2]
All conditions	4.9	0.1	4.5	0.2	3.7	0.1	5.0	0.1	5.8	0.1
Infectious and parasitic diseases 001–139	6.4	0.2	3.6	0.3	5.9	0.4	6.7	0.3	7.8	0.4
Septicemia .038	8.3	0.4	4.4	0.5	9.7	1.4	8.4	0.5	8.3	0.5
Neoplasms. 140–239	6.1	0.1	9.7	1.0	4.3	0.2	5.3	0.2	7.3	0.2
Malignant neoplasms .140–208,230–234	7.1	0.1	12.1	1.3	6.6	0.5	6.2	0.2	7.5	0.2
Malignant neoplasm of large intestine and rectum .153–154,197.5	8.7	0.4	*	*	8.0	0.9	7.2	0.5	9.4	0.4
Malignant neoplasm of trachea, bronchus, and lung 162,176.4,197.0,197.3	7.5	0.3	*	*	*5.1	*0.7	7.3	0.4	7.7	0.3
Malignant neoplasm of breast .174–175,198.81	2.9	0.2	*	*	3.4	0.9	2.6	0.2	3.0	0.3
Benign neoplasms. 210–229	3.3	0.1	2.7	0.4	2.7	0.1	3.3	0.1	5.5	0.4
Endocrine, nutritional and metabolic diseases, and immunity disorders. 240–279	4.3	0.1	2.9	0.2	3.5	0.1	4.4	0.2	5.0	0.1
Diabetes mellitus .250	5.0	0.2	3.1	0.3	4.0	0.3	5.2	0.3	5.9	0.3
Volume depletion 276.5	3.8	0.1	2.0	0.1	2.6	0.2	3.9	0.3	4.9	0.2
Diseases of the blood and blood-forming organs 280–289	4.4	0.2	3.4	0.2	5.1	0.4	4.2	0.3	4.3	0.2
Mental disorders 290–319	7.1	0.4	9.2	1.6	6.5	0.4	7.4	0.6	8.5	0.4
Psychoses 290–299	8.0	0.5	7.8	1.1	7.4	0.5	8.8	0.8	9.4	0.4
Alcohol dependence syndrome .303	5.8	0.6	*	*	6.1	0.8	5.0	0.5	8.2	1.5
Diseases of the nervous system and sense organs 320–389	5.1	0.3	4.3	0.7	4.4	0.2	5.9	1.2	5.5	0.3
Diseases of the circulatory system 390–459	4.7	0.1	6.6	0.7	3.9	0.1	4.2	0.1	5.0	0.1
Heart disease 391–392.0,393–398,402,404,410–416,420–429	4.6	0.1	5.6	0.8	3.7	0.1	4.0	0.1	4.9	0.1
Acute myocardial infarction .410	5.6	0.2	*	*	3.9	0.3	4.5	0.2	6.4	0.2
Coronary atherosclerosis 414.0	3.5	0.1	*	*	3.0	0.5	3.3	0.1	3.7	0.1
Other ischemic heart disease 411–413,414.1–414.9	2.6	0.1	*	*	2.1	0.2	2.3	0.2	2.9	0.2
Cardiac dysrhythmias .427	3.6	0.1	4.0	0.7	2.3	0.2	3.0	0.1	3.9	0.1
Congestive heart failure 428.0	5.4	0.1	*	*	4.8	0.2	5.1	0.2	5.5	0.2
Cerebrovascular disease. 430–438	5.3	0.2	*9.6	*1.8	5.3	0.4	5.6	0.4	5.1	0.2
Diseases of the respiratory system 460–519	5.3	0.1	3.2	0.2	4.4	0.2	5.5	0.1	6.3	0.1
Acute bronchitis and bronchiolitis .466	3.4	0.1	3.2	0.2	3.5	0.5	3.4	0.3	4.4	0.3
Pneumonia 480–486	5.7	0.1	3.9	0.5	4.9	0.2	6.0	0.2	6.3	0.1
Chronic bronchitis .491	5.3	0.2	*	*	4.6	0.9	5.0	0.2	5.4	0.2
Asthma .493	3.2	0.1	2.3	0.1	2.9	0.1	3.8	0.2	4.8	0.3
Diseases of the digestive system 520–579	4.9	0.1	3.1	0.2	3.9	0.1	4.8	0.1	5.9	0.1
Appendicitis. 540–543	3.2	0.1	3.3	0.2	2.6	0.1	3.6	0.2	6.4	0.6
Noninfectious enteritis and colitis 555–558	4.7	0.2	2.4	0.2	4.1	0.3	4.7	0.3	6.3	0.5
Diverticula of intestine .562	5.8	0.3	*	*	5.2	0.8	5.4	0.5	6.1	0.3
Cholelithiasis .574	4.0	0.2	*	*	2.9	0.2	3.4	0.2	5.5	0.3
Diseases of the genitourinary system 580–629	3.7	0.1	3.2	0.2	2.7	0.1	3.3	0.1	4.8	0.1
Calculus of kidney and ureter .592	2.2	0.1	*	*	2.1	0.1	2.2	0.1	2.7	0.2
Complications of pregnancy, childbirth, and the puerperium[3] 630–677	2.7	0.1	*	*	2.7	0.1	*	*	. . .	. . .
Diseases of the skin and subcutaneous tissue 680–709	5.3	0.2	3.0	0.1	4.4	0.2	6.0	0.3	6.5	0.3
Cellulitis and abscess 681–682	5.2	0.2	2.9	0.1	4.2	0.2	5.7	0.3	6.1	0.3

Table 4. Average length of stay for discharges from short-stay hospitals by age and first-listed diagnosis: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	ALOS[1]	SE[2]	ALOS[1]	SE[2]	ALOS[1]	SE[2]	ALOS[1]	SE[2]	ALOS[1]	SE[2]
Diseases of the musculoskeletal system and connective tissue 710–739	3.9	0.1	3.5	0.3	3.2	0.1	3.5	0.1	4.6	0.1
Osteoarthrosis and allied disorders 715	4.2	0.1	*	*	3.4	0.2	3.9	0.1	4.4	0.1
Intervertebral disc disorders 722	2.8	0.1	*	*	2.4	0.1	2.7	0.1	3.8	0.2
Congenital anomalies 740–759	5.8	0.5	6.4	0.6	4.1	0.5	4.2	0.4	*5.7	*0.9
Certain conditions originating in the perinatal period 760–779	11.1	1.0	11.2	1.0	*	*	*	*	*	*
Symptoms, signs, and ill-defined conditions 780–799	2.7	0.2	2.9	0.4	2.0	0.1	2.3	0.3	4.0	0.5
Injury and poisoning 800–999	5.3	0.1	4.2	0.3	4.4	0.1	5.7	0.3	6.0	0.2
Fractures, all sites[4] 800–829	5.4	0.1	3.1	0.4	4.6	0.2	5.3	0.2	6.1	0.2
Fracture of neck of femur[4] 820	6.6	0.2	*	*	6.0	0.7	7.1	0.5	6.6	0.2
Poisonings 960–989	2.7	0.1	2.7	0.5	2.2	0.2	3.3	0.4	3.9	0.3
Supplementary classifications V01–V83	3.8	0.1	5.4	0.7	2.7	0.0	7.4	0.4	10.9	0.6
Females with deliveries V27	2.6	0.0	2.7	0.2	2.6	0.0	*2.6	*0.2	. . .	. . .

*Figure does not meet standard of reliablility or precision.

. . . Category not applicable.

[1]ALOS is average length of stay.

[2]SE is standard error of average length of stay.

[3]First-listed diagnosis for females with deliveries is coded V27, shown under ''Supplementary classifications.''

[4]Excludes fractures coded as 733.1, pathologic fracture.

Table 5. Number of discharges from short-stay hospitals by sex and first-listed diagnosis: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	Both sexes		Male		Female	
	Number	SE[1]	Number	SE[1]	Number	SE[1]
	Number in thousands					
All conditions	33,727	1,094	13,389	477	20,338	647
Infectious and parasitic diseases 001–139	877	45	417	24	460	24
Septicemia .038	341	22	156	13	186	14
Neoplasms. 140–239	1,682	71	650	33	1,033	44
Malignant neoplasms .140–208,230–234	1,208	56	579	29	629	30
Malignant neoplasm of large intestine and rectum .153–154,197.5	159	9	76	6	83	6
Malignant neoplasm of trachea, bronchus, and lung 162,176.4,197.0,197.3	160	11	86	7	74	6
Malignant neoplasm of breast .174–175,198.81	85	6	*	*	85	6
Benign neoplasms. 210–229	427	21	49	4	378	19
Endocrine, nutritional and metabolic diseases, and immunity disorders. 240–279	1,619	59	661	24	958	40
Diabetes mellitus .250	577	24	283	13	294	16
Volume depletion 276.5	508	27	204	11	304	19
Diseases of the blood and blood-forming organs 280–289	446	24	192	13	254	16
Mental disorders 290–319	2,464	360	1,236	181	1,227	183
Psychoses 290–299	1,704	271	817	128	887	145
Alcohol dependence syndrome .303	145	26	101	18	44	9
Diseases of the nervous system and sense organs. 320–389	518	27	217	13	301	16
Diseases of the circulatory system 390–459	6,373	224	3,209	118	3,164	115
Heart disease 391–392.0,393–398,402,404,410–416,420–429	4,446	164	2,319	88	2,127	82
Acute myocardial infarction .410	818	43	480	27	338	19
Coronary atherosclerosis 414.0	1,096	60	666	39	429	25
Other ischemic heart disease 411–413,414.1–414.9	211	18	103	10	108	10
Cardiac dysrhythmias .427	788	31	377	20	411	18
Congestive heart failure 428.0	970	38	441	18	529	24
Cerebrovascular disease. 430–438	942	40	432	23	509	23
Diseases of the respiratory system 460–519	3,542	143	1,678	76	1,864	75
Acute bronchitis and bronchiolitis .466	279	28	152	16	127	14
Pneumonia 480–486	1,312	56	618	30	694	30
Chronic bronchitis .491	520	30	230	16	291	19
Asthma .493	484	35	196	21	288	18
Diseases of the digestive system 520–579	3,320	117	1,466	54	1,854	70
Appendicitis. 540–543	295	18	167	11	129	9
Noninfectious enteritis and colitis 555–558	310	18	128	9	182	12
Diverticula of intestine .562	262	16	106	7	157	11
Cholelithiasis .574	359	16	113	9	246	13
Diseases of the genitourinary system 580–629	1,817	66	560	29	1,257	44
Calculus of kidney and ureter .592	176	11	99	7	77	6
Complications of pregnancy, childbirth, and the puerperium[2] 630–677	528	38	. . .	. . .	528	38
Diseases of the skin and subcutaneous tissue. 680–709	601	51	299	31	303	24
Cellulitis and abscess 681–682	422	20	211	12	212	13

Table 5. Number of discharges from short-stay hospitals by sex and first-listed diagnosis: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	Both sexes		Male		Female	
	Number	SE[1]	Number	SE[1]	Number	SE[1]
			Number in thousands			
Diseases of the musculoskeletal system and connective tissue 710–739	1,736	80	747	37	989	46
Osteoarthrosis and allied disorders 715	568	37	221	18	347	22
Intervertebral disc disorders 722	353	22	180	11	174	13
Congenital anomalies 740–759	178	29	97	17	80	13
Certain conditions originating in the perinatal period 760–779	166	32	93	17	73	15
Symptoms, signs, and ill-defined conditions 780–799	283	27	132	14	151	16
Injury and poisoning 800–999	2,697	114	1,331	62	1,366	58
Fractures, all sites[3] 800–829	995	55	433	25	562	34
Fracture of neck of femur[3] 820	315	20	85	7	230	15
Poisonings 960–989	214	11	96	7	118	7
Supplementary classifications V01–V83	4,880	183	403	29	4,477	172
Females with deliveries V27	3,951	165	. . .	. . .	3,951	165

*Figure does not meet standard of reliability or precision.

. . . Category not applicable.

[1]SE is standard error.

[2]First-listed diagnosis for females with deliveries is coded V27, shown under ''Supplementary classifications.''

[3]Excludes fractures coded as 733.1, pathologic fracture.

Table 6. Rate of discharges from short-stay hospitals by sex and first-listed diagnosis: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	Both sexes		Male		Female	
	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]
	Rate per 10,000 population[2]					
All conditions	1,174.6	38.1	952.3	33.9	1,388.0	44.2
Infectious and parasitic diseases 001–139	30.5	1.6	29.7	1.7	31.4	1.6
Septicemia .038	11.9	0.8	11.1	0.9	12.7	0.9
Neoplasms. 140–239	58.6	2.5	46.2	2.3	70.5	3.0
Malignant neoplasms .140–208,230–234	42.1	1.9	41.2	2.1	42.9	2.1
Malignant neoplasm of large intestine and rectum .153–154,197.5	5.5	0.3	5.4	0.4	5.6	0.4
Malignant neoplasm of trachea, bronchus, and lung 162,176.4,197.0,197.3	5.6	0.4	6.1	0.5	5.1	0.4
Malignant neoplasm of breast .174–175,198.81	3.0	0.2	*	*	5.8	0.4
Benign neoplasms. 210–229	14.9	0.7	3.5	0.3	25.8	1.3
Endocrine, nutritional and metabolic diseases, and immunity disorders. 240–279	56.4	2.0	47.0	1.7	65.4	2.7
Diabetes mellitus .250	20.1	0.8	20.1	0.9	20.1	1.1
Volume depletion 276.5	17.7	0.9	14.5	0.8	20.7	1.3
Diseases of the blood and blood-forming organs 280–289	15.5	0.8	13.7	0.9	17.3	1.1
Mental disorders 290–319	85.8	12.6	87.9	12.9	83.8	12.5
Psychoses 290–299	59.4	9.4	58.1	9.1	60.5	9.9
Alcohol dependence syndrome .303	5.1	0.9	7.2	1.3	3.0	0.6
Diseases of the nervous system and sense organs. 320–389	18.0	0.9	15.4	0.9	20.6	1.1
Diseases of the circulatory system 390–459	222.0	7.8	228.2	8.4	216.0	7.8
Heart disease 391–392.0,393–398,402,404,410–416,420–429	154.8	5.7	164.9	6.3	145.2	5.6
Acute myocardial infarction .410	28.5	1.5	34.1	1.9	23.1	1.3
Coronary atherosclerosis 414.0	38.2	2.1	47.4	2.8	29.3	1.7
Other ischemic heart disease 411–413,414.1–414.9	7.3	0.6	7.4	0.7	7.3	0.7
Cardiac dysrhythmias .427	27.5	1.1	26.8	1.4	28.0	1.2
Congestive heart failure 428.0	33.8	1.3	31.4	1.3	36.1	1.6
Cerebrovascular disease. 430–438	32.8	1.4	30.7	1.6	34.8	1.6
Diseases of the respiratory system 460–519	123.4	5.0	119.3	5.4	127.2	5.1
Acute bronchitis and bronchiolitis .466	9.7	1.0	10.8	1.2	8.7	1.0
Pneumonia 480–486	45.7	1.9	44.0	2.1	47.3	2.1
Chronic bronchitis .491	18.1	1.0	16.3	1.2	19.8	1.3
Asthma .493	16.8	1.2	13.9	1.5	19.7	1.3
Diseases of the digestive system 520–579	115.6	4.1	104.3	3.8	126.5	4.8
Appendicitis. 540–543	10.3	0.6	11.9	0.8	8.8	0.6
Noninfectious enteritis and colitis 555–558	10.8	0.6	9.1	0.7	12.4	0.8
Diverticula of intestine .562	9.1	0.5	7.5	0.5	10.7	0.8
Cholelithiasis .574	12.5	0.6	8.0	0.6	16.8	0.9
Diseases of the genitourinary system 580–629	63.3	2.3	39.8	2.0	85.8	3.0
Calculus of kidney and ureter .592	6.1	0.4	7.0	0.5	5.3	0.4
Complications of pregnancy, childbirth, and the puerperium[3] 630–677	18.4	1.3	. . .	. . .	36.0	2.6
Diseases of the skin and subcutaneous tissue 680–709	20.9	1.8	21.2	2.2	20.6	1.6
Cellulitis and abscess 681–682	14.7	0.7	15.0	0.8	14.4	0.9

Table 6. Rate of discharges from short-stay hospitals by sex and first-listed diagnosis: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	Both sexes		Male		Female	
	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]
			Rate per 10,000 population[2]			
Diseases of the musculoskeletal system and connective tissue 710–739	60.5	2.8	53.1	2.6	67.5	3.1
Osteoarthrosis and allied disorders 715	19.8	1.3	15.7	1.3	23.7	1.5
Intervertebral disc disorders 722	12.3	0.8	12.8	0.8	11.8	0.9
Congenital anomalies 740–759	6.2	1.0	6.9	1.2	5.5	0.9
Certain conditions originating in the perinatal period 760–779	5.8	1.1	6.6	1.2	5.0	1.0
Symptoms, signs, and ill-defined conditions 780–799	9.9	0.9	9.4	1.0	10.3	1.1
Injury and poisoning 800–999	93.9	4.0	94.7	4.4	93.2	3.9
Fractures, all sites[4] 800–829	34.7	1.9	30.8	1.8	38.4	2.3
Fracture of neck of femur[4] 820	11.0	0.7	6.0	0.5	15.7	1.0
Poisonings 960–989	7.4	0.4	6.8	0.5	8.0	0.5
Supplementary classifications V01–V83	170.0	6.4	28.7	2.1	305.5	11.8
Females with deliveries V27	137.6	5.7	. . .	. . .	269.7	11.2

*Figure does not meet standard of reliability or precision.
. . . Category not applicable.
[1]SE is standard error of rate.
[2]Rates were calculated using U.S. Census Bureau estimates of the civilian population based on the 2000 census.
[3]First-listed diagnosis for females with deliveries is coded V27, shown under ''Supplementary classifications.''
[4]Excludes fractures coded as 733.1, pathologic fracture.

Table 7. Average length of stay for discharges from short-stay hospitals by sex and first-listed diagnosis: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	Both sexes		Male		Female	
	ALOS[1]	SE[2]	ALOS[1]	SE[2]	ALOS[1]	SE[2]
All conditions	4.9	0.1	5.3	0.1	4.6	0.1
Infectious and parasitic diseases 001–139	6.4	0.2	6.6	0.3	6.1	0.2
Septicemia .038	8.3	0.4	8.8	0.5	8.0	0.5
Neoplasms. 140–239	6.1	0.1	7.0	0.2	5.4	0.1
Malignant neoplasms .140–208,230–234	7.1	0.1	7.3	0.2	6.9	0.2
Malignant neoplasm of large intestine and rectum .153–154,197.5	8.7	0.4	8.5	0.5	8.9	0.4
Malignant neoplasm of trachea, bronchus, and lung 162,176.4,197.0,197.3	7.5	0.3	7.7	0.4	7.3	0.4
Malignant neoplasm of breast .174–175,198.81	2.9	0.2	*	*	2.9	0.2
Benign neoplasms. 210–229	3.3	0.1	4.6	0.2	3.2	0.1
Endocrine, nutritional and metabolic diseases, and immunity disorders. 240–279	4.3	0.1	4.5	0.1	4.1	0.1
Diabetes mellitus .250	5.0	0.2	5.3	0.2	4.7	0.2
Volume depletion 276.5	3.8	0.1	3.8	0.2	3.7	0.1
Diseases of the blood and blood-forming organs 280–289	4.4	0.2	4.3	0.2	4.4	0.2
Mental disorders 290–319	7.1	0.4	7.2	0.4	7.1	0.4
Psychoses 290–299	8.0	0.5	8.1	0.5	7.9	0.5
Alcohol dependence syndrome .303	5.8	0.6	5.5	0.6	6.3	1.0
Diseases of the nervous system and sense organs 320–389	5.1	0.3	5.6	0.7	4.7	0.3
Diseases of the circulatory system 390–459	4.7	0.1	4.6	0.1	4.8	0.1
Heart disease 391–392.0,393–398,402,404,410–416,420–429	4.6	0.1	4.4	0.1	4.7	0.1
Acute myocardial infarction .410	5.6	0.2	5.5	0.2	5.8	0.2
Coronary atherosclerosis 414.0	3.5	0.1	3.5	0.1	3.7	0.1
Other ischemic heart disease 411–413,414.1–414.9	2.6	0.1	2.5	0.2	2.6	0.1
Cardiac dysrhythmias .427	3.6	0.1	3.4	0.1	3.8	0.1
Congestive heart failure 428.0	5.4	0.1	5.5	0.2	5.4	0.1
Cerebrovascular disease. 430–438	5.3	0.2	5.4	0.3	5.2	0.2
Diseases of the respiratory system 460–519	5.3	0.1	5.2	0.1	5.4	0.1
Acute bronchitis and bronchiolitis .466	3.4	0.1	3.3	0.1	3.6	0.2
Pneumonia 480–486	5.7	0.1	5.6	0.2	5.9	0.1
Chronic bronchitis .491	5.3	0.2	5.1	0.3	5.4	0.2
Asthma .493	3.2	0.1	2.7	0.1	3.5	0.1
Diseases of the digestive system 520–579	4.9	0.1	4.9	0.1	4.8	0.1
Appendicitis. 540–543	3.2	0.1	3.3	0.1	3.0	0.1
Noninfectious enteritis and colitis 555–558	4.7	0.2	4.6	0.3	4.7	0.2
Diverticula of intestine .562	5.8	0.3	6.0	0.5	5.6	0.3
Cholelithiasis .574	4.0	0.2	4.7	0.3	3.8	0.2
Diseases of the genitourinary system 580–629	3.7	0.1	4.1	0.1	3.5	0.1
Calculus of kidney and ureter .592	2.2	0.1	2.1	0.1	2.4	0.1
Complications of pregnancy, childbirth, and the puerperium[3] 630–677	2.7	0.1	. . .	. . .	2.7	0.1
Diseases of the skin and subcutaneous tissue 680–709	5.3	0.2	5.0	0.3	5.6	0.3
Cellulitis and abscess 681–682	5.2	0.2	5.1	0.2	5.3	0.2

Table 7. Average length of stay for discharges from short-stay hospitals by sex and first-listed diagnosis: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Diagnostic groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Category of first-listed diagnosis and ICD–9–CM code	Both sexes		Male		Female	
	ALOS[1]	SE[2]	ALOS[1]	SE[2]	ALOS[1]	SE[2]
Diseases of the musculoskeletal system and connective tissue 710–739	3.9	0.1	3.7	0.1	4.1	0.1
Osteoarthrosis and allied disorders 715	4.2	0.1	4.1	0.1	4.2	0.1
Intervertebral disc disorders 722	2.8	0.1	2.4	0.1	3.2	0.1
Congenital anomalies 740–759	5.8	0.5	5.8	0.4	5.8	0.7
Certain conditions originating in the perinatal period 760–779	11.1	1.0	10.8	1.1	11.6	1.6
Symptoms, signs, and ill-defined conditions 780–799	2.7	0.2	2.5	0.2	2.8	0.3
Injury and poisoning 800–999	5.3	0.1	5.4	0.2	5.2	0.1
Fractures, all sites[4] 800–829	5.4	0.1	5.4	0.2	5.4	0.1
Fracture of neck of femur[4] 820	6.6	0.2	7.0	0.4	6.4	0.2
Poisonings 960–989	2.7	0.1	2.9	0.3	2.6	0.1
Supplementary classifications V01–V83	3.8	0.1	8.5	0.4	3.4	0.1
Females with deliveries V27	2.6	0.0	. . .	. . .	2.6	0.0

*Figure does not meet standard of reliability or precision.

. . . Category not applicable.

[1]ALOS is average length of stay.

[2]SE is standard error of average length of stay.

[3]First-listed diagnosis for females with deliveries is coded V27, shown under ''Supplementary classification.''

[4]Excludes fractures coded as 733.1, pathologic fracture.

Table 8. Number of all-listed procedures for discharges from short-stay hospitals by procedure category and age: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Procedure groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Procedure category and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	Number	SE[1]	Number	SE[1]	Number	SE[1]	Number	SE[1]	Number	SE[1]
	Number in thousands									
All procedures	42,533	1,700	2,084	347	14,419	592	10,743	478	15,286	646
Operations on the nervous system 01–05	1,101	82	215	39	337	35	256	17	293	26
Spinal tap 03.31	316	29	142	25	93	8	42	4	39	4
Operations on the endocrine system 06–07	102	8	*	*	30	4	40	5	31	4
Operations on the eye 08–16	86	10	12	3	27	5	21	4	25	4
Operations on the ear 18–20	46	7	19	4	*	*	*7	*1	*	*
Operations on the nose, mouth, and pharynx 21–29	269	19	66	12	93	9	59	8	52	6
Operations on the respiratory system 30–34	1,022	53	57	11	179	13	304	20	482	30
Bronchoscopy with or without biopsy 33.21–33.24,33.27	251	16	15	4	39	4	69	6	127	11
Operations on the cardiovascular system 35–39	6,813	325	210	46	681	36	2,384	126	3,538	180
Removal of coronary artery obstruction and insertion of stent(s) 36.0	1,204	87	*	*	76	9	517	40	608	50
Coronary artery bypass graft[2] 36.1	515	41	*	*	19	4	217	20	279	24
Cardiac catheterization 37.21–37.23	1,328	84	*	*	107	8	555	35	659	47
Insertion, replacement, removal, and revision of pacemaker leads or device 37.7–37.8	420	21	*	*	*	*	47	5	358	19
Hemodialysis 39.95	552	34	*	*	85	7	210	16	251	19
Operations on the hemic and lymphatic system 40–41	354	22	22	5	55	6	130	10	147	11
Operations on the digestive system 42–54	5,597	207	222	39	1,307	56	1,607	68	2,461	105
Endoscopy of small intestine with or without biopsy 45.11–45.14,45.16	1,032	50	16	3	160	11	279	16	577	31
Endoscopy of large intestine with or without biopsy 45.21–45.25	578	34	*	*	76	8	137	10	358	22
Partial excision of large intestine 45.7	263	15	*	*	35	5	79	6	145	10
Appendectomy, excluding incidental 47.0	329	19	70	10	176	11	57	6	25	3
Cholecystectomy 51.2	436	18	*	*	142	8	140	8	151	9
Lysis of peritoneal adhesions 54.5	342	18	*3	*1	143	11	103	7	93	8
Operations on the urinary system 55–59	955	46	38	11	232	15	299	17	386	25
Cystoscopy with or without biopsy 57.31–57.33	173	12	*	*	40	4	52	5	77	8
Operations on the male genital organs 60–64	262	16	18	3	12	2	79	7	152	11
Prostatectomy 60.2–60.6	195	13	*	*	*	*	66	6	128	10
Operations on the female genital organs 65–71	2,161	94	5	1	1,256	59	668	35	231	17
Oophorectomy and salpingo-oophorectomy 65.3–65.6	533	28	*	*	224	15	249	13	60	6
Bilateral destruction or occlusion of fallopian tubes 66.2–66.3	329	20	*	*	329	20	*	*	*	*
Hysterectomy 68.3–68.7,68.9	669	32	*	*	344	19	262	14	63	6
Obstetrical procedures 72–75	6,646	302	21	6	6,617	300	*8	*2	. . .	. . .
Episiotomy with or without forceps or vacuum extraction 72.1,72.21,72.31,72.71,73.6	780	42	*	*	776	42	*	*	. . .	. . .
Artificial rupture of membranes 73.0	901	68	*	*	899	68	*	*	. . .	. . .
Cesarean section 74.0–74.2,74.4,74.99	1,059	52	*	*	1,055	52	*	*	. . .	. . .
Repair of current obstetric laceration 75.5–75.6	1,234	58	*	*	1,228	58	*	*	. . .	. . .

Table 8. Number of all-listed procedures for discharges from short-stay hospitals by procedure category and age: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Procedure groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Procedure category and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	Number	SE[1]	Number	SE[1]	Number	SE[1]	Number	SE[1]	Number	SE[1]
	Number in thousands									
Operations on the musculoskeletal system 76–84	3,442	167	173	31	811	46	1,087	64	1,371	74
Partial excision of bone 76.2–76.3,77.6–77.8	218	14	13	3	67	6	89	8	49	4
Reduction of fracture 76.7,79.0–79.3	606	35	50	8	186	13	122	12	247	18
Open reduction of fracture with internal fixation 79.3	414	25	15	2	129	10	86	9	185	13
Excision or destruction of intervertebral disc 80.5	323	21	*	*	120	9	147	12	55	5
Total hip replacement 81.51	193	15	*	*	11	2	67	7	114	10
Total knee replacement 81.54	381	27	*	*	10	2	131	11	241	19
Operations on the integumentary system 85–86	1,348	93	*	*	388	31	415	27	429	22
Debridement of wound, infection, or burn 86.22,86.28	361	27	*	*	88	8	114	12	140	10
Miscellaneous diagnostic and therapeutic procedures 87–99	12,332	774	890	161	2,382	215	3,381	214	5,679	315
Computerized axial tomography 87.03,87.41,87.71,88.01,88.38	703	94	42	12	157	24	169	25	336	47
Arteriography and angiocardiography using contrast material 88.4–88.5	2,058	130	*	*	194	13	823	55	1,028	73
Diagnostic ultrasound 88.7	773	73	*	*	133	15	192	20	404	40
Respiratory therapy 93.9,96.7	1,070	82	207	53	144	15	243	17	476	34
Insertion of endotracheal tube 96.04	477	25	48	12	62	5	126	8	241	17
Injection or infusion of cancer chemotherapeutic substance 99.25	217	22	34	8	51	8	72	9	61	8

*Figure does not meet standard of reliability or precision.

. . . Category not applicable.

[1]SE is standard error.

[2]The number of discharges with a coronary artery bypass graft was 306,000.

Table 9. Rate of all-listed procedures for discharges from short-stay hospitals by procedure category and age: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Procedure groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Procedure category and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]
	Rate per 10,000 population[2]									
All procedures	1,481.4	59.2	343.7	57.3	1,160.7	47.6	1,612.0	71.7	4,293.7	181.5
Operations on the nervous system 01–05	38.3	2.9	35.5	6.5	27.2	2.8	38.4	2.5	82.3	7.4
Spinal tap 03.31	11.0	1.0	23.4	4.1	7.5	0.7	6.4	0.5	10.9	1.0
Operations on the endocrine system 06–07	3.6	0.3	*	*	2.4	0.3	6.0	0.8	8.6	1.0
Operations on the eye 08–16	3.0	0.3	2.0	0.5	2.2	0.4	3.2	0.6	7.2	1.2
Operations on the ear 18–20	1.6	0.2	3.2	0.7	*	*	*1.0	*0.2	*	*
Operations on the nose, mouth, and pharynx 21–29	9.4	0.7	10.9	2.1	7.4	0.8	8.8	1.2	14.6	1.6
Operations on the respiratory system 30–34	35.6	1.9	9.4	1.8	14.4	1.0	45.6	3.0	135.4	8.4
Bronchoscopy with or without biopsy 33.21–33.24,33.27	8.7	0.6	2.5	0.6	3.2	0.3	10.3	0.9	35.8	3.1
Operations on the cardiovascular system 35–39	237.3	11.3	34.7	7.6	54.8	2.9	357.6	18.9	993.7	50.7
Removal of coronary artery obstruction and insertion of stent(s) 36.0	41.9	3.0	*	*	6.1	0.7	77.6	6.0	170.9	14.1
Coronary artery bypass graft[3] 36.1	17.9	1.4	*	*	1.5	0.3	32.6	3.1	78.4	6.8
Cardiac catheterization 37.21–37.23	46.2	2.9	*	*	8.6	0.6	83.3	5.3	185.0	13.1
Insertion, replacement, removal, and revision of pacemaker leads or device 37.7–37.8	14.6	0.7	*	*	*	*	7.0	0.8	100.5	5.3
Hemodialysis 39.95	19.2	1.2	*	*	6.8	0.6	31.5	2.4	70.5	5.5
Operations on the hemic and lymphatic system 40–41	12.3	0.8	3.6	0.8	4.5	0.5	19.5	1.5	41.2	3.0
Operations on the digestive system 42–54	194.9	7.2	36.6	6.5	105.2	4.5	241.1	10.2	691.3	29.4
Endoscopy of small intestine with or without biopsy 45.11–45.14,45.16	35.9	1.7	2.6	0.6	12.9	0.9	41.8	2.3	162.1	8.6
Endoscopy of large intestine with or without biopsy 45.21–45.25	20.1	1.2	*	*	6.1	0.6	20.6	1.5	100.6	6.1
Partial excision of large intestine 45.7	9.2	0.5	*	*	2.8	0.4	11.9	0.9	40.7	2.8
Appendectomy, excluding incidental 47.0	11.5	0.7	11.5	1.6	14.2	0.9	8.6	0.8	7.2	0.8
Cholecystectomy 51.2	15.2	0.6	*	*	11.4	0.6	21.1	1.2	42.3	2.5
Lysis of peritoneal adhesions 54.5	11.9	0.6	*0.5	*0.1	11.5	0.9	15.4	1.0	26.0	2.3
Operations on the urinary system 55–59	33.2	1.6	6.3	1.7	18.7	1.2	44.8	2.6	108.4	7.0
Cystoscopy with or without biopsy 57.31–57.33	6.0	0.4	*	*	3.2	0.3	7.7	0.7	21.6	2.1
Operations on the male genital organs 60–64	9.1	0.5	2.9	0.5	1.0	0.2	11.9	1.0	42.7	3.0
Prostatectomy 60.2–60.6	6.8	0.5	*	*	*	*	9.9	0.9	35.9	2.7
Operations on the female genital organs 65–71	75.3	3.3	0.8	0.2	101.1	4.7	100.3	5.2	65.0	4.9
Oophorectomy and salpingo-oophorectomy 65.3–65.6	18.6	1.0	*	*	18.0	1.2	37.4	2.0	16.8	1.8
Bilateral destruction or occlusion of fallopian tubes 66.2–66.3	11.5	0.7	*	*	26.5	1.6	*	*	*	*
Hysterectomy 68.3–68.7,68.9	23.3	1.1	*	*	27.7	1.6	39.4	2.1	17.7	1.7
Obstetrical procedures 72–75	231.5	10.5	3.5	1.0	532.6	24.1	*1.2	*0.3	. . .	. . .
Episiotomy with or without forceps or vacuum extraction 72.1,72.21,72.31,72.71,73.6	27.2	1.5	*	*	62.5	3.4	*	*	. . .	. . .
Artificial rupture of membranes 73.0	31.4	2.4	*	*	72.4	5.4	*	*	. . .	. . .
Cesarean section 74.0–74.2,74.4,74.99	36.9	1.8	*	*	84.9	4.2	*	*	. . .	. . .
Repair of current obstetric laceration 75.5–75.6	43.0	2.0	*	*	98.8	4.6	*	*	. . .	. . .

Table 9. Rate of all-listed procedures for discharges from short-stay hospitals by procedure category and age: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Procedure groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Procedure category and ICD–9–CM code	All ages		Under 15 years		15–44 years		45–64 years		65 years and over	
	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]
	Rate per 10,000 population[2]									
Operations on the musculoskeletal system 76–84	119.9	5.8	28.6	5.1	65.3	3.7	163.0	9.6	385.1	20.9
Partial excision of bone 76.2–76.3,77.6–77.8	7.6	0.5	2.2	0.5	5.4	0.5	13.4	1.2	13.7	1.2
Reduction of fracture 76.7,79.0–79.3	21.1	1.2	8.3	1.3	15.0	1.0	18.3	1.7	69.5	5.0
Open reduction of fracture with internal fixation 79.3	14.4	0.9	2.5	0.4	10.4	0.8	12.8	1.3	51.9	3.7
Excision or destruction of intervertebral disc. 80.5	11.3	0.7	*	*	9.7	0.7	22.0	1.8	15.4	1.4
Total hip replacement. 81.51	6.7	0.5	*	*	0.9	0.2	10.1	1.0	32.1	2.8
Total knee replacement 81.54	13.3	0.9	*	*	0.8	0.2	19.6	1.6	67.6	5.3
Operations on the integumentary system 85–86	46.9	3.3	*	*	31.3	2.5	62.3	4.1	120.5	6.2
Debridement of wound, infection, or burn 86.22,86.28	12.6	0.9	*	*	7.1	0.7	17.1	1.8	39.4	2.9
Miscellaneous diagnostic and therapeutic procedures 87–99	429.5	26.9	146.7	26.5	191.8	17.3	507.2	32.1	1,595.3	88.4
Computerized axial tomography 87.03,87.41,87.71,88.01,88.38	24.5	3.3	6.9	1.9	12.6	1.9	25.3	3.8	94.3	13.3
Arteriography and angiocardiography using contrast material 88.4–88.5	71.7	4.5	*	*	15.6	1.0	123.4	8.3	288.7	20.5
Diagnostic ultrasound. 88.7	26.9	2.5	*	*	10.7	1.2	28.8	3.0	113.4	11.2
Respiratory therapy 93.9,96.7	37.3	2.9	34.2	8.7	11.6	1.2	36.4	2.5	133.7	9.6
Insertion of endotracheal tube 96.04	16.6	0.9	7.9	1.9	5.0	0.4	18.9	1.2	67.6	4.8
Injection or infusion of cancer chemotherapeutic substance 99.25	7.6	0.8	5.6	1.3	4.1	0.6	10.9	1.4	17.1	2.2

*Figure does not meet standard of reliability or precision.

. . . Category not applicable.

[1]SE is standard error of rate.

[2]Rates were calculated using U.S. Census Bureau estimates of the civilian population based on the 2000 census.

[3]The rate per 10,000 population of discharges with a coronary artery bypass graft was 11.0.

Table 10. Number of all-listed procedures for discharges from short-stay hospitals by procedure category and sex: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Procedure groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Procedure category and ICD–9–CM code	Both sexes		Male		Female	
	Number	SE[1]	Number	SE[1]	Number	SE[1]
	Number in thousands					
All procedures	42,533	1,700	16,834	782	25,700	974
Operations on the nervous system 01–05	1,101	82	514	40	587	48
Spinal tap 03.31	316	29	161	16	156	15
Operations on the endocrine system 06–07	102	8	30	4	72	6
Operations on the eye 08–16	86	10	47	8	39	5
Operations on the ear 18–20	46	7	24	5	22	4
Operations on the nose, mouth, and pharynx 21–29	269	19	159	13	110	9
Operations on the respiratory system 30–34	1,022	53	583	35	439	24
Bronchoscopy with or without biopsy 33.21–33.24,33.27	251	16	147	12	104	8
Operations on the cardiovascular system 35–39	6,813	325	3,967	211	2,845	127
Removal of coronary artery obstruction and insertion of stent(s) 36.0	1,204	87	802	57	402	33
Coronary artery bypass graft[2] 36.1	515	41	373	32	142	15
Cardiac catheterization 37.21–37.23	1,328	84	799	52	529	34
Insertion, replacement, removal, and revision of pacemaker leads or device 37.7–37.8	420	21	213	15	207	13
Hemodialysis 39.95	552	34	288	20	264	20
Operations on the hemic and lymphatic system 40–41	354	22	178	13	175	11
Operations on the digestive system 42–54	5,597	207	2,350	92	3,247	127
Endoscopy of small intestine with or without biopsy 45.11–45.14,45.16	1,032	50	450	25	582	30
Endoscopy of large intestine with or without biopsy 45.21–45.25	578	34	235	15	343	23
Partial excision of large intestine 45.7	263	15	113	8	150	10
Appendectomy, excluding incidental 47.0	329	19	173	12	156	10
Cholecystectomy 51.2	436	18	143	9	293	15
Lysis of peritoneal adhesions 54.5	342	18	62	5	280	16
Operations on the urinary system 55–59	955	46	454	28	501	27
Cystoscopy with or without biopsy 57.31–57.33	173	12	86	8	87	7
Operations on the male genital organs 60–64	262	16	262	16	. . .	. . .
Prostatectomy 60.2–60.6	195	13	195	13	. . .	. . .
Operations on the female genital organs 65–71	2,161	94	. . .	. . .	2,161	94
Oophorectomy and salpingo-oophorectomy 65.3–65.6	533	28	. . .	. . .	533	28
Bilateral destruction or occlusion of fallopian tubes 66.2–66.3	329	20	. . .	. . .	329	20
Hysterectomy 68.3–68.7,68.9	669	32	. . .	. . .	669	32
Obstetrical procedures 72–75	6,646	302	. . .	. . .	6,646	302
Episiotomy with or without forceps or vacuum extraction 72.1,72.21,72.31,72.71,73.6	780	42	. . .	. . .	780	42
Artificial rupture of membranes 73.0	901	68	. . .	. . .	901	68
Cesarean section 74.0–74.2,74.4,74.99	1,059	52	. . .	. . .	1,059	52
Repair of current obstetric laceration 75.5–75.6	1,234	58	. . .	. . .	1,234	58

Table 10. Number of all-listed procedures for discharges from short-stay hospitals by procedure category and sex: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Procedure groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Procedure category and ICD–9–CM code	Both sexes		Male		Female	
	Number	SE[1]	Number	SE[1]	Number	SE[1]
			Number in thousands			
Operations on the musculoskeletal system 76–84	3,442	167	1,652	84	1,790	91
Partial excision of bone 76.2–76.3,77.6–77.8	218	14	112	8	106	9
Reduction of fracture 76.7,79.0–79.3	606	35	288	18	318	21
Open reduction of fracture with internal fixation 79.3	414	25	186	12	229	15
Excision or destruction of intervertebral disc. 80.5	323	21	171	14	152	11
Total hip replacement. 81.51	193	15	81	8	112	10
Total knee replacement 81.54	381	27	146	14	235	16
Operations on the integumentary system 85–86	1,348	93	616	57	732	42
Debridement of wound, infection, or burn 86.22,86.28	361	27	199	17	161	13
Miscellaneous diagnostic and therapeutic procedures 87–99	12,332	774	5,996	378	6,336	404
Computerized axial tomography 87.03,87.41,87.71,88.01,88.38	703	94	324	44	378	53
Arteriography and angiocardiography using contrast material 88.4–88.5	2,058	130	1,142	74	915	61
Diagnostic ultrasound. 88.7	773	73	347	32	427	43
Respiratory therapy 93.9,96.7	1,070	82	546	44	524	41
Insertion of endotracheal tube 96.04	477	25	247	13	229	15
Injection or infusion of cancer chemotherapeutic substance 99.25	217	22	124	14	94	11

. . . Category not applicable.

[1]SE is standard error.

[2]The number of discharges with a coronary artery bypass graft was 306,000.

Table 11. Rate of all-listed procedures for discharges from short-stay hospitals by procedure category and sex: United States, 2002

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Procedure groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Procedure category and ICD–9–CM code	Both sexes		Male		Female	
	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]
	Rate per 10,000 population[2]					
All procedures	1,481.4	59.2	1,197.3	55.6	1,753.9	66.5
Operations on the nervous system 01–05	38.3	2.9	36.6	2.9	40.0	3.3
Spinal tap 03.31	11.0	1.0	11.4	1.2	10.6	1.0
Operations on the endocrine system 06–07	3.6	0.3	2.2	0.3	4.9	0.4
Operations on the eye 08–16	3.0	0.3	3.4	0.5	2.6	0.4
Operations on the ear 18–20	1.6	0.2	1.7	0.3	1.5	0.3
Operations on the nose, mouth, and pharynx 21–29	9.4	0.7	11.3	0.9	7.5	0.6
Operations on the respiratory system 30–34	35.6	1.9	41.5	2.5	29.9	1.7
Bronchoscopy with or without biopsy 33.21–33.24,33.27	8.7	0.6	10.4	0.8	7.1	0.6
Operations on the cardiovascular system 35–39	237.3	11.3	282.2	15.0	194.2	8.7
Removal of coronary artery obstruction and insertion of stent(s) 36.0	41.9	3.0	57.0	4.1	27.4	2.2
Coronary artery bypass graft[3] 36.1	17.9	1.4	26.6	2.3	9.7	1.0
Cardiac catheterization 37.21–37.23	46.2	2.9	56.8	3.7	36.1	2.3
Insertion, replacement, removal, and revision of pacemaker leads or device 37.7–37.8	14.6	0.7	15.1	1.1	14.2	0.9
Hemodialysis 39.95	19.2	1.2	20.5	1.4	18.1	1.3
Operations on the hemic and lymphatic system 40–41	12.3	0.8	12.7	1.0	12.0	0.7
Operations on the digestive system 42–54	194.9	7.2	167.2	6.6	221.6	8.6
Endoscopy of small intestine with or without biopsy 45.11–45.14,45.16	35.9	1.7	32.0	1.7	39.7	2.0
Endoscopy of large intestine with or without biopsy 45.21–45.25	20.1	1.2	16.7	1.1	23.4	1.6
Partial excision of large intestine 45.7	9.2	0.5	8.1	0.6	10.2	0.7
Appendectomy, excluding incidental 47.0	11.5	0.7	12.3	0.8	10.6	0.7
Cholecystectomy 51.2	15.2	0.6	10.2	0.6	20.0	1.0
Lysis of peritoneal adhesions 54.5	11.9	0.6	4.4	0.3	19.1	1.1
Operations on the urinary system 55–59	33.2	1.6	32.3	2.0	34.2	1.8
Cystoscopy with or without biopsy 57.31–57.33	6.0	0.4	6.1	0.6	6.0	0.5
Operations on the male genital organs 60–64	9.1	0.5	18.6	1.1	. . .	. . .
Prostatectomy 60.2–60.6	6.8	0.5	13.9	0.9	. . .	. . .
Operations on the female genital organs 65–71	75.3	3.3	. . .	. . .	147.5	6.4
Oophorectomy and salpingo-oophorectomy 65.3–65.6	18.6	1.0	. . .	. . .	36.4	1.9
Bilateral destruction or occlusion of fallopian tubes 66.2–66.3	11.5	0.7	. . .	. . .	22.5	1.3
Hysterectomy 68.3–68.7,68.9	23.3	1.1	. . .	. . .	45.7	2.2
Obstetrical procedures 72–75	231.5	10.5	. . .	. . .	453.6	20.6
Episiotomy with or without forceps or vacuum extraction 72.1,72.21,72.31,72.71,73.6	27.2	1.5	. . .	. . .	53.2	2.8
Artificial rupture of membranes 73.0	31.4	2.4	. . .	. . .	61.5	4.6
Cesarean section 74.0–74.2,74.4,74.99	36.9	1.8	. . .	. . .	72.2	3.5
Repair of current obstetric laceration 75.5–75.6	43.0	2.0	. . .	. . .	84.2	4.0

Table 11. Rate of all-listed procedures for discharges from short-stay hospitals by procedure category and sex: United States, 2002—Con.

[Discharges of inpatients from non-Federal hospitals. Excludes newborn infants. Procedure groupings and code numbers are based on the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM)]

Procedure category and ICD–9–CM code	Both sexes		Male		Female	
	Rate	SE[1]	Rate	SE[1]	Rate	SE[1]
			Rate per 10,000 population[2]			
Operations on the musculoskeletal system 76–84	119.9	5.8	117.5	5.9	122.1	6.2
Partial excision of bone 76.2–76.3,77.6–77.8	7.6	0.5	8.0	0.5	7.3	0.6
Reduction of fracture 76.7,79.0–79.3	21.1	1.2	20.5	1.2	21.7	1.4
Open reduction of fracture with internal fixation 79.3	14.4	0.9	13.2	0.9	15.6	1.1
Excision or destruction of intervertebral disc. 80.5	11.3	0.7	12.2	1.0	10.4	0.8
Total hip replacement. 81.51	6.7	0.5	5.8	0.5	7.6	0.6
Total knee replacement 81.54	13.3	0.9	10.4	1.0	16.0	1.1
Operations on the integumentary system 85–86	46.9	3.3	43.8	4.0	49.9	2.9
Debridement of wound, infection, or burn 86.22,86.28	12.6	0.9	14.2	1.2	11.0	0.9
Miscellaneous diagnostic and therapeutic procedures 87–99	429.5	26.9	426.5	26.9	432.4	27.6
Computerized axial tomography 87.03,87.41,87.71,88.01,88.38	24.5	3.3	23.1	3.1	25.8	3.6
Arteriography and angiocardiography using contrast material 88.4–88.5	71.7	4.5	81.3	5.3	62.5	4.1
Diagnostic ultrasound. 88.7	26.9	2.5	24.7	2.3	29.1	3.0
Respiratory therapy 93.9,96.7	37.3	2.9	38.8	3.1	35.8	2.8
Insertion of endotracheal tube 96.04	16.6	0.9	17.6	0.9	15.7	1.0
Injection or infusion of cancer chemotherapeutic substance 99.25	7.6	0.8	8.8	1.0	6.4	0.8

. . . Category not applicable.

[1]SE is standard error of rate.

[2]Rates were calculated using U.S. Census Bureau estimates of the civilian population based on the 2000 census.

[3]The rate per 10,000 population of discharges with a coronary artery bypass graft was 11.0.

OMB No. 0920-0212: Approval Expires 08/31/2005

Notice – All information which would permit identification of an individual or an establishment will be held confidential, will be used only by persons engaged in and for the purposes of the survey, and will not be disclosed or released to other persons or used for any other purpose. Public reporting burden of this collection of information is estimated to average 4 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road, MS D-24, Atlanta, GA 30333, ATTN: PRA (0920-0212)

FORM **HDS-1** (3-27-2003)

U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU
ACTING AS COLLECTING AGENT FOR
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
NATIONAL CENTER FOR HEALTH STATISTICS

MEDICAL ABSTRACT – NATIONAL HOSPITAL DISCHARGE SURVEY

A. PATIENT IDENTIFICATION

1. Hospital number . . . . . [ ][ ][ ][ ]

2. HDS number . . . . . [ ][ ][ ][ ]

3. *(Item deleted)*

4. Date of admission . . . . . Month [ ][ ] – Day [ ][ ] – Year [ ][ ][ ][ ]

5. Date of discharge . . . . . Month [ ][ ] – Day [ ][ ] – Year [ ][ ][ ][ ]

6. Residence ZIP Code . . . . [ ][ ][ ][ ][ ]

B. PATIENT CHARACTERISTICS

7. Date of birth — Month [ ][ ] – Day [ ][ ] – Year [ ][ ][ ][ ]

8. Age – Complete only if date of birth not given — Units [ ][ ][ ]
1 ☐ Years
2 ☐ Months
3 ☐ Days

9. Sex – *Mark (X) one*
1 ☐ Male 2 ☐ Female 3 ☐ Not stated

10. Ethnicity – *Mark (X) one*
1 ☐ Hispanic or Latino 2 ☐ Not Hispanic or Latino 3 ☐ Not stated

11. Race – *Mark all that apply*
1 ☐ White
2 ☐ Black or African American
3 ☐ American Indian or Alaska Native
4 ☐ Asian
5 ☐ Native Hawaiian or Other Pacific Islander
6 ☐ Other – *Specify*
7 ☐ Not stated

12. Marital status – *Mark (X) one*
1 ☐ Married 3 ☐ Widowed 5 ☐ Separated
2 ☐ Single 4 ☐ Divorced 6 ☐ Not stated

C. ADMINISTRATIVE INFORMATION

13. Type of Admission – *Mark (X) one*
1 ☐ Emergency 3 ☐ Elective 5 ☐ Items not available/ unknown
2 ☐ Urgent 4 ☐ Newborn

14. Source of Admission – *Mark (X) one*
1 ☐ Physician referral 7 ☐ Emergency room
2 ☐ Clinical referral 8 ☐ Court/Law enforcement
3 ☐ HMO referral 9 ☐ Other – *Specify*
4 ☐ Transfer from a hospital
5 ☐ Transfer from SNF
6 ☐ Transfer from other health facility 10 ☐ Item not available

15. Status/Disposition of patient – *Mark (X) appropriate box(es)*

Status → Disposition

1 ☐ Alive →
- **a.** ☐ Routine discharge/discharged home
- **b.** ☐ Left against medical advice
- **c.** ☐ Discharged, transferred to another short-term hospital
- **d.** ☐ Discharged, transferred to long-term care institution
- **e.** ☐ Other disposition/not stated

2 ☐ Died
3 ☐ Status not stated

16. Expected source(s) of payment

	Principal *Mark one only*	Other additional sources *Mark all that apply*
1. Worker's compensation	☐	☐
2. Medicare	☐	☐
3. Medicaid	☐	☐
4. Other government payments	☐	☐
5. Blue Cross/Blue Shield	☐	☐
6. HMO/PPO	☐	☐
7. Other private or commercial insurance	☐	☐
8. Self pay	☐	☐
9. No charge	☐	☐
10. Other – *Specify*	☐	☐

☐ No source of payment indicated

(Over)

Figure 5. Medical abstract form for the National Hospital Discharge Survey, 2002

D. MEDICAL INFORMATION

17. Final Diagnoses (including E-code diagnoses) (Enter ICD-9-CM codes as well as narrative if available)

Principal: _____

Other/additional: _____

18. Surgical and Diagnostic Procedures (Enter ICD-9-CM codes as well as narrative if available)

	Date of procedure(s)								
	Month		Day		Year				
Principal: _____									
Other/additional: _____									

☐ NONE

Completed by	Date

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Figure 5. Medical abstract form for the National Hospital Discharge Survey, 2002—Con.

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U.S. DEPARTMENT OF
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Centers for Disease Control and Prevention
National Center for Health Statistics
3311 Toledo Road
Hyattsville, Maryland 20782

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