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1983 Summary: National Hospital Discharge Survey

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Introduction

During 1983 an estimated 38.8 million inpatients, excluding newborn infants, were discharged from short-stay non-Federal hospitals in the United States. These patients were hospitalized an average of 6.9 days and used 268.3 million days of inpatient hospital care. Patients hospitalized during 1983 accounted for 167 discharges and 1,155 days of care 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 1983, data were abstracted from the face sheets of medical records of approximately 206,000 patients discharged from 418 short-stay non-Federal hospitals. A brief description of the sample design, data collection procedures, and estimation process, and definitions 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*.

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 38.8 million patients discharged from short-stay hospitals during 1983 included an estimated 15.6 million males and 23.2 million females. The rates per 1,000 population were 139 for males and 193 for females, making the rate for females about 39 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 160, or only about 15 percent higher than the rate for males.

The average length of stay was 7.4 days for males and 6.6 days for females during 1983. The length of stay for females was shorter than that for males primarily because the average length of stay of the 4.0 million women who were hospitalized for deliveries was only 3.6 days. The average length of stay for females who were not hospitalized for deliveries during 1983 was 7.2 days.

The number of discharges from short-stay hospitals by geographic region during 1983 ranged from 13.9 million in the South Region to 6.6 million in the West Region, and the rates per 1,000 population ranged from 178 in the North Central Region to 146 in the West Region. Regional differences in the number of discharges are accounted for mainly by variations in population sizes and to a lesser extent by variations in the dis-

charge rates. This is apparent when number of discharges and rate of discharges are compared among the regions. Although the rate of discharges per 1,000 population was highest in the North Central and South Regions with no significant difference between them, the number of discharges and the civilian population in the South Region was about 30 percent higher than in the North Central Region.

Average lengths of stay by geographic region were 5.9 days in the West, 6.6 days in the South, 7.2 days in the North Central, and 8.1 days in the Northeast.

Discharges from short-stay hospitals were about 40 percent male and 60 percent female in every hospital bed-size group; females with deliveries accounted for about 10.3 percent of all discharges regardless of hospital size. The average length of stay increased steadily from 5.8 days in the smallest hospitals (6-99 beds) to 7.8 days in the largest hospitals (500 beds or more) for all patients.

During 1983, voluntary nonprofit hospitals provided medical care to an estimated 26.7 million patients, or 69 percent of all patients hospitalized. Hospitals operated by State and local governments cared for 8.2 million patients, or 21 percent of all discharges, and proprietary hospitals operated for profit cared for 3.9 million patients or 10 percent of all discharges. Average lengths of stay were 7.1 days in voluntary nonprofit hospitals, 6.3 days in State and local government hospitals, and 6.8 days in proprietary hospitals.

Utilization by diagnosis

Diseases of the circulatory system ranked first in 1983 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 5.7 million discharges. Other leading ICD-9-CM diagnostic chapters were diseases of the digestive system (4.5 million discharges) and supplementary classifications (including females with deliveries) (4.5 million discharges). Almost 40 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 1983 varied for the different age groups. For patients under 15 years of age, the most frequent diagnoses were acute respiratory infections, ex-

cept influenza and chronic disease of tonsils and adenoids. Excluding females with deliveries, the two most frequent diagnoses for patients 15-44 years of age were abortions and ectopic and molar pregnancies, and fractures, all sites. 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 1.8 days for the diagnostic category chronic disease of tonsils and adenoids, 1.9 days for patients admitted for sterilization, and 2.0 days for the diagnostic category abortions and ectopic and molar pregnancies to a high of 18.0 days for the diagnostic category 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 examined in this report. Some categories for which women had substantially longer stays included psychosis; arthropathies and related disorders; intervertebral disc disorders; and fractures, all sites.

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 9.7 days for patients 65 and over. By diagnosis, stays were highest (when compared with the average length of stay) for patients with fracture of neck of femur (18.0 days) and psychoses (15.4 days).

Utilization by procedures

One or more surgical or nonsurgical procedures were performed for an estimated 21.2 million of the 38.8 million inpatients discharged from short-stay hospitals during 1983. A total of 35.9 million procedures, or an average of 1.8 per patient who underwent at least one procedure, were recorded in 1983.

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.

Operations on the digestive system ranked first among the surgical and nonsurgical procedures (5.8 million) performed during 1983. These were followed by miscellaneous diagnostic and therapeutic procedures (6.3 million).

When grouped by chapters, miscellaneous diagnostic and therapeutic procedures with 6.3 million procedures ranked first among the surgical and nonsurgical procedures performed during 1983. These were followed by operations on the digestive system with 5.8 million procedures performed. Other leading procedures were obstetrical procedures and operations on the female genital organs each with 3.9 million procedures and operations on the musculoskeletal system with 3.8 million procedures. Approximately two thirds of all procedures performed in 1983 were included in these five ICD-9-CM procedure chapters.

The number and rate of all-listed procedures in 1983 for each ICD-9-CM procedure chapter and selected procedure categories are shown by sex and age in tables 7 and 8. Of the 35.9 million procedures performed during 1983, 14.0 million

were for males and 21.9 million were for females. The corresponding rates per 1,000 population were 155 for both sexes, 125 for males, and 183 for females. Of the procedures shown in table 7, the most common ones for males were endoscopies on the urinary system (natural orifice) and repair of inguinal hernia; 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 44 for patients under 15 years to 358 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 cardiac catheterization; and for patients 65 years of age and over, extraction of lens, insertion of prosthetic lens (pseudophakos), and endoscopies of the urinary system (natural orifice).

TABLE 1. NUMBER OF INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS BY SELECTED CHARACTERISTICS: UNITED STATES, 1983 (DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

SELECTED CHARACTERISTIC	BOTH SEXES	MALE	FEMALE
NUMBER OF PATIENTS DISCHARGED IN THOUSANDS			
TOTAL.....	38,783	15,573	23,210
AGE			
UNDER 15 YEARS.....	3,654	2,084	1,570
15-44 YEARS.....	15,269	4,524	10,745
45-64 YEARS.....	8,558	4,159	4,400
65 YEARS AND OVER.....	11,302	4,806	6,496
REGION			
NORTHEAST.....	7,793	3,202	4,591
NORTH CENTRAL.....	10,492	4,310	6,183
SOUTH.....	13,884	5,422	8,462
WEST.....	6,614	2,640	3,974
BED SIZE			
6-99 BEDS.....	6,336	2,523	3,812
100-199 BEDS.....	7,481	2,955	4,525
200-299 BEDS.....	5,990	2,454	3,536
300-499 BEDS.....	10,041	4,024	6,017
500 BEDS OR MORE.....	8,934	3,615	5,319
OWNERSHIP			
NONPROFIT.....	26,726	10,665	16,061
STATE AND LOCAL GOVERNMENT.....	8,190	3,336	4,854
PROPRIETARY.....	3,867	1,572	2,295

TABLE 2. RATE OF INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY AGE, GEOGRAPHIC REGION, AND SEX: UNITED STATES, 1983

AGE AND REGION	BOTH SEXES	MALE	FEMALE
RATE OF PATIENTS DISCHARGED PER 1,000 POPULATION			
TOTAL.....	167.0	138.8	193.2
AGE			
UNDER 15 YEARS.....	70.8	79.0	62.3
15-44 YEARS.....	140.3	84.3	194.8
45-64 YEARS.....	192.2	196.6	188.3
65 YEARS AND OVER.....	412.7	437.2	396.3
REGION			
NORTHEAST.....	157.7	136.0	177.5
NORTH CENTRAL.....	178.4	151.1	204.1
SOUTH.....	176.5	143.4	207.3
WEST.....	145.6	118.5	171.7

TABLE 3. AVERAGE LENGTH OF STAY FOR INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS BY SELECTED CHARACTERISTICS: UNITED STATES, 1983

SELECTED CHARACTERISTIC	BOTH SEXES	MALE	FEMALE
AVERAGE LENGTH OF STAY IN DAYS			
TOTAL.....	6.9	7.4	6.6
AGE			
UNDER 15 YEARS.....	4.6	4.5	4.6
15-44 YEARS.....	5.0	6.2	4.6
45-64 YEARS.....	7.6	7.6	7.6
65 YEARS AND OVER.....	9.7	9.6	9.8
REGION			
NORTHEAST.....	8.1	8.5	7.8
NORTH CENTRAL.....	7.2	7.5	6.9
SOUTH.....	6.6	7.1	6.2
WEST.....	5.9	6.4	5.5
BED SIZE			
6-99 BEDS.....	5.8	5.9	5.7
100-199 BEDS.....	6.4	6.9	6.1
200-299 BEDS.....	6.8	7.1	6.6
300-499 BEDS.....	7.3	7.8	7.0
500 BEDS OR MORE.....	7.8	8.6	7.3
OWNERSHIP			
NONPROFIT.....	7.1	7.6	6.8
STATE AND LOCAL GOVERNMENT.....	6.3	6.7	6.0
PROPRIETARY.....	6.8	7.1	6.5

TABLE 4. NUMBER OF INPATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY CATEGORY OF FIRST-LISTED DIAGNOSIS, SEX, AND AGE: UNITED STATES, 1983
 (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.....	38,783	15,573	23,210	3,654	15,269	8,558	11,302
INFECTIOUS AND PARASITIC DISEASES.....001-139	677	319	358	208	237	91	142
NEOPLASMS.....140-239	2,642	1,136	1,506	70	469	918	1,185
MALIGNANT NEOPLASMS.....140-208,230-234	2,024	993	1,031	44	197	729	1,053
MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	339	210	129	*	12	151	176
MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	244	*	242	*	35	102	107
ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	1,207	431	776	74	295	365	474
DIABETES MELLITUS.....250	675	255	420	27	156	237	255
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	360	152	209	61	87	63	149
MENTAL DISORDERS.....290-319	1,701	874	827	49	950	424	277
PSYCHOSES.....290-299	576	266	311	*5	294	152	125
NEUROTIC AND PERSONALITY DISORDERS.....300-301	264	88	176	*5	164	60	34
ALCOHOL DEPENDENCE SYNDROME.....303	388	295	93	*	227	131	29
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	1,878	795	1,083	313	355	384	825
DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	429	210	219	63	140	90	136
CATARACT.....366	594	211	382	*	15	98	478
DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	360	167	193	186	64	56	54
DISEASES OF THE CIRCULATORY SYSTEM.....390-459	5,654	2,896	2,758	38	530	1,842	3,244
ESSENTIAL HYPERTENSION.....401	330	129	201	*	57	138	135
HEART DISEASE.....391-392.0,393-398,402,404,410-416,420-429	3,597	1,911	1,686	25	256	1,231	2,085
ACUTE MYOCARDIAL INFARCTION.....410	676	424	253	*	43	251	382
ATHEROSCLEROTIC HEART DISEASE.....414.0	466	261	205	*	12	151	303
OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	938	544	394	*	68	437	430
CONGESTIVE HEART FAILURE.....428.0	464	208	255	*	*8	89	363
CEREBROVASCULAR DISEASE.....430-438	860	405	455	*	30	185	641
DISEASES OF THE RESPIRATORY SYSTEM.....460-519	3,632	1,833	1,799	1,076	753	680	1,123
ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	564	287	277	294	90	63	117
CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	397	180	217	270	122	*	*
PNEUMONIA, ALL FORMS.....480-486	837	426	411	242	122	138	335
ASTHMA.....493	459	190	269	136	110	119	94
DISEASES OF THE DIGESTIVE SYSTEM.....520-579	4,530	2,110	2,420	460	1,429	1,236	1,405
ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	352	176	177	*	84	120	147
GASTRITIS AND DUODENITIS.....535	288	120	169	16	117	91	65
APPENDICITIS.....540-543	261	147	114	70	148	26	17
INGUINAL HERNIA.....550	477	429	48	74	128	150	125
NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	584	236	348	186	189	87	122
CHOLELITHIASIS.....574	482	142	340	*	154	160	167
DISEASES OF THE GENITOURINARY SYSTEM.....580-629	3,311	1,080	2,231	136	1,647	760	768
CALCULUS OF KIDNEY AND URETER.....592	330	232	98	*	165	107	55
DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	321	-	321	*	252	66	*
COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-675	1,048	...	1,048	*5	1,041	*	...
ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	492	...	492	*	488	*	...
DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	577	274	303	62	216	145	153
DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	2,432	1,025	1,407	73	984	774	603
ARTHRITIS AND RELATED DISORDERS.....710-719	576	229	347	19	195	165	196
INTERVERTEBRAL DISC DISORDERS.....722	473	266	208	*	254	161	57
CONGENITAL ANOMALIES.....740-759	356	185	171	192	92	47	25
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	209	117	92	209	*	*	-
SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	585	279	306	104	251	140	90
INJURY AND POISONING.....800-999	3,450	1,906	1,544	451	1,617	599	783
FRACTURES, ALL SITES.....800-829	1,090	543	547	147	380	167	396
FRACTURE OF NECK OF FEMUR.....820	230	59	171	*	*9	22	196
SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	311	154	157	*	192	79	37
INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	275	171	105	69	145	30	31
LACERATIONS AND OPEN WOUNDS.....870-904	309	232	77	45	193	41	31
SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	4,532	159	4,373	73	4,317	87	54
PERSONS ADMITTED FOR STERILIZATION.....V25.2	146	*	142	*	143	*	*
FEMALES WITH DELIVERIES.....V27	3,976	...	3,976	11	3,962	*	...

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, 1983
(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.....	1,669.6	1,388.3	1,932.3	708.3	1,403.5	1,922.3	4,127.1
INFECTIOUS AND PARASITIC DISEASES.....001-139	29.2	28.4	29.8	40.4	21.8	20.4	51.7
NEOPLASMS.....140-239	113.7	101.3	125.4	13.6	43.1	206.2	432.9
MALIGNANT NEOPLASMS.....140-208,230-234	87.1	88.5	85.8	8.6	18.1	163.8	384.5
MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	14.6	18.7	10.8	*	1.1	34.0	64.1
MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	10.5	*	20.1	*	3.2	22.9	39.1
ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	52.0	38.4	64.6	14.3	27.1	82.1	173.0
DIABETES MELLITUS.....250	29.0	22.7	34.9	5.2	14.3	53.2	93.2
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	15.5	13.5	17.4	11.9	8.0	14.2	54.5
MENTAL DISORDERS.....290-319	73.2	77.9	68.8	9.5	87.3	95.2	101.3
PSYCHOSES.....290-299	24.8	23.7	25.9	*1.0	27.1	34.1	45.6
NEUROTIC AND PERSONALITY DISORDERS.....300-301	11.3	7.8	14.7	*1.1	15.1	13.5	12.3
ALCOHOL DEPENDENCE SYNDROME.....303	16.7	26.3	7.7	*	20.9	29.4	10.5
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	80.8	70.9	90.1	60.7	32.7	86.3	301.4
DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	18.5	18.7	18.3	12.2	12.9	20.2	49.7
CATARACT.....366	25.6	18.8	31.8	*	1.4	21.9	174.6
DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	15.5	14.9	16.1	36.0	5.9	12.5	19.9
DISEASES OF THE CIRCULATORY SYSTEM.....390-459	243.4	258.2	229.6	7.4	48.7	413.7	1,184.7
ESSENTIAL HYPERTENSION.....401	14.2	11.5	16.7	*	5.3	30.9	49.3
HEART DISEASE.....391-392.C,393-398,402,404,410-416,420-429	154.9	170.4	140.4	4.9	23.5	276.5	761.2
ACUTE MYOCARDIAL INFARCTION.....410	29.1	37.8	21.1	*	3.9	56.4	139.6
ATHEROSCLEROTIC HEART DISEASE.....414.0	20.1	23.3	17.1	*	1.1	33.9	110.6
OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	40.4	48.5	32.8	*	6.3	98.2	156.8
CONGESTIVE HEART FAILURE.....428.0	23.0	18.6	21.3	*	*0.8	20.1	132.7
CEREBROVASCULAR DISEASE.....430-438	37.0	36.1	37.9	*	2.8	41.5	234.1
DISEASES OF THE RESPIRATORY SYSTEM.....460-519	156.4	163.4	149.8	208.5	69.2	152.8	410.0
ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	24.3	25.6	23.1	57.0	8.2	14.1	42.9
CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	17.1	16.0	18.1	52.4	11.2	*	*
PNEUMONIA, ALL FORMS.....480-486	36.0	38.0	34.2	47.0	11.2	30.9	122.2
ASTHMA.....493	19.8	17.0	22.4	26.4	10.1	26.7	34.2
DISEASES OF THE DIGESTIVE SYSTEM.....520-579	195.0	188.1	201.5	89.2	131.3	277.6	513.1
ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	15.2	15.6	14.7	*	7.7	26.9	53.5
GASTRITIS AND DUODENITIS.....535	12.4	10.7	14.0	3.2	10.7	20.4	23.7
APPENDICITIS.....540-543	11.2	13.1	9.5	13.7	13.6	5.8	6.3
INGUINAL HERNIA.....550	20.5	38.3	4.0	14.4	11.8	33.6	45.8
NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	25.1	21.1	29.0	36.1	17.4	19.6	44.5
CHOLELITHIASIS.....574	20.8	12.7	28.3	*	14.2	36.0	60.8
DISEASES OF THE GENITOURINARY SYSTEM.....580-629	142.5	96.3	185.7	26.3	151.4	170.7	280.5
CALCULUS OF KIDNEY AND URETER.....592	14.2	20.7	8.1	*	15.2	24.1	20.2
DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	13.8	-	26.7	*	23.2	14.9	*
COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	45.1	...	87.2	*0.9	95.7	*	...
ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	21.2	...	40.9	*	44.9	*	...
DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	24.9	24.5	25.2	12.1	19.9	32.7	56.0
DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	104.7	91.4	117.1	14.1	90.4	173.8	220.0
ARTHROPATHIES AND RELATED DISORDERS.....710-719	24.8	20.4	28.9	3.8	17.9	37.1	71.7
INTERVERTEBRAL DISC DISORDERS.....722	20.4	23.7	17.3	*	23.4	36.3	20.9
CONGENITAL ANOMALIES.....740-759	15.3	16.5	14.2	37.2	8.5	10.6	9.1
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	9.0	10.5	7.6	40.4	*	*	-
SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	25.2	24.9	25.5	20.2	23.0	31.4	32.9
INJURY AND POISONING.....800-999	148.5	169.9	128.6	87.4	148.7	134.5	286.0
FRACTURES, ALL SITES.....800-829	46.9	48.4	45.6	28.5	34.9	37.5	144.7
FRACTURE OF NECK OF FEMUR.....820	9.9	5.2	14.3	*	*0.9	4.9	71.5
SPRAINS AND STRAINS OF BACK (INCLUDING NECK), INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....846-847	13.4	13.8	13.1	*	17.6	17.8	13.4
LACERATIONS AND OPEN WOUNDS.....850-904	11.8	15.2	8.7	13.3	13.3	6.9	11.4
LACERATIONS AND OPEN WOUNDS.....850-904	13.3	20.7	6.4	8.7	17.7	9.3	11.2
SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	195.1	14.2	364.1	14.2	396.9	19.5	19.9
PERSONS ADMITTED FOR STERILIZATION.....V25.2	6.3	*	11.8	*	13.2	*	*
FEMALES WITH DELIVERIES.....V27	171.2	...	331.0	2.1	364.2	*	...

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, 1983

(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.....	6.9	7.4	6.6	4.6	5.0	7.6	9.7
INFECTIOUS AND PARASITIC DISEASES.....001-139	6.6	6.3	6.8	4.2	4.9	8.3	11.7
NEOPLASMS.....140-239	9.6	10.2	9.2	5.0	6.6	9.1	11.4
MALIGNANT NEOPLASMS.....140-208,230-234	10.7	10.7	10.6	5.7	8.1	9.9	11.9
MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	10.5	10.3	10.7	*	7.9	10.0	11.1
MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	9.4	*	9.4	*	7.4	8.9	10.5
ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	8.7	8.7	8.6	5.5	6.8	8.4	10.5
DIABETES MELLITUS.....250	9.5	9.3	9.6	6.6	7.3	9.3	11.3
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	6.7	5.9	7.2	4.2	6.3	6.7	7.9
MENTAL DISORDERS.....290-319	12.4	12.0	12.9	16.3	12.1	11.9	13.5
PSYCHOSES.....290-299	15.4	14.1	16.6	*15.4	15.5	14.9	16.0
NEUROTIC AND PERSONALITY DISORDERS.....300-301	10.1	10.3	10.0	*15.9	10.2	9.8	9.3
ALCOHOL DEPENDENCE SYNDROME.....303	11.5	11.2	12.5	*	11.7	10.8	12.6
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	5.0	5.4	4.7	3.2	5.6	5.5	5.2
DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	10.5	11.3	9.7	6.9	8.2	11.0	14.2
CATARACT.....366	2.5	2.6	2.5	*	2.4	2.4	2.6
DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	3.0	2.7	3.3	2.3	2.9	3.5	5.1
DISEASES OF THE CIRCULATORY SYSTEM.....390-459	9.1	8.8	9.4	6.3	6.5	8.1	10.1
ESSENTIAL HYPERTENSION.....401	6.3	5.8	6.7	*	5.2	5.8	7.4
HEART DISEASE.....391-392.0,393-398,402,404,410-416,420-429	8.6	8.2	8.9	6.5	6.4	7.7	9.4
ACUTE MYOCARDIAL INFARCTION.....410	10.9	10.8	11.1	*	9.4	10.7	11.2
ATHEROSCLEROTIC HEART DISEASE.....414.0	8.4	7.6	9.4	*	4.7	6.4	9.5
OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	6.9	6.5	7.4	*	5.7	6.4	7.6
CONGESTIVE HEART FAILURE.....428.0	9.7	9.4	9.9	*	*5.9	9.3	9.9
CEREBROVASCULAR DISEASE.....430-438	11.7	11.3	12.2	*	12.0	10.7	12.1
DISEASES OF THE RESPIRATORY SYSTEM.....460-519	6.2	6.1	6.2	3.4	4.2	7.2	9.7
ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	4.9	4.5	5.3	3.4	4.1	6.4	8.6
CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	1.8	1.8	1.9	1.7	2.0	*	*
PNEUMONIA, ALL FORMS.....480-486	8.0	7.8	8.3	4.8	6.3	8.6	10.8
ASTHMA.....493	5.5	4.9	5.8	3.7	4.5	6.4	7.9
DISEASES OF THE DIGESTIVE SYSTEM.....520-579	6.6	6.0	7.0	3.6	5.2	6.7	8.8
ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	7.7	7.4	7.9	*	5.3	6.9	9.7
GASTRITIS AND DUODENITIS.....535	5.3	4.4	6.0	3.7	4.9	5.0	6.9
APPENDICITIS.....540-543	5.4	4.9	5.9	4.8	4.6	7.1	11.4
INGUINAL HERNIA.....550	4.1	4.0	4.6	1.7	3.8	4.2	5.6
NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	5.1	5.0	5.3	3.6	5.0	5.7	7.3
CHOLELITHIASIS.....574	8.7	9.4	8.3	*	6.8	8.1	10.9
DISEASES OF THE GENITOURINARY SYSTEM.....580-629	5.6	6.3	5.2	2.6	4.5	5.7	8.2
CALCULUS OF KIDNEY AND URETER.....592	4.5	4.2	5.2	*	3.5	5.0	6.6
DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	3.6	-	3.6	*	3.6	3.9	*
COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	2.5	...	2.5	*1.9	2.5	*	...
ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	2.0	...	2.0	*	2.0	*	...
DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	8.1	7.8	8.4	3.9	6.5	8.4	11.9
DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	7.3	6.8	7.7	5.8	5.8	7.5	9.8
ARTHROPATHIES AND RELATED DISORDERS.....710-719	8.3	7.0	9.1	5.9	4.7	9.2	11.2
INTERVERTEBRAL DISC DISORDERS.....722	8.2	7.2	9.4	*	7.6	8.5	9.9
CONGENITAL ANOMALIES.....740-759	5.9	5.8	6.0	5.6	4.9	7.7	8.4
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	12.8	12.7	12.9	12.8	*	*	-
SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	4.2	4.1	4.3	3.2	3.6	4.4	6.5
INJURY AND POISONING.....800-999	7.2	6.4	8.2	4.3	5.7	7.4	11.7
FRACTURES, ALL SITES.....800-829	10.2	8.9	11.5	5.3	8.1	9.1	14.5
FRACTURE OF NECK OF FEMUR.....820	18.0	18.7	17.8	*	*24.7	16.6	17.9
SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	6.6	5.9	7.3	*	6.3	7.0	7.6
INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	5.5	5.3	5.9	2.9	5.5	7.8	9.0
LACERATIONS AND OPEN WOUNDS.....870-904	4.5	4.3	5.1	3.6	4.3	5.0	6.7
SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	3.5	4.3	3.5	4.3	3.5	4.7	5.3
PERSONS ADMITTED FOR STERILIZATION.....V25-2	1.9	*	1.9	*	1.9	*	*
FEMALES WITH DELIVERIES.....V27	3.6	...	3.6	3.0	3.6	*	...

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, 1983

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.....	35,939	13,993	21,946	2,293	15,214	8,615	9,816
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	923	453	470	143	332	257	192
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	105	28	76	*5	41	36	22
OPERATIONS ON THE EYE.....08-16	1,558	602	956	67	119	295	1,077
EXTRACTION OF LENS.....13.1-13.6	630	227	403	*5	18	106	501
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	516	184	333	*	*7	82	427
OPERATIONS ON THE EAR.....18-20	372	206	166	220	83	43	27
MYRINGOTOMY.....20.0	187	108	79	169	10	*5	*
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	1,503	729	774	451	691	223	138
RHINOPLASTY AND REPAIR OF NOSE.....21.8	263	125	138	13	188	46	15
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	424	187	237	279	140	*5	*
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	970	585	385	74	182	335	378
BRONCHOSCOPY.....33.21-33.23	229	137	91	17	34	76	102
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	1,908	1,147	761	117	232	784	775
OPEN HEART SURGERY.....35.1-35.51, 35.53-36.2, 36.9, 37.10-37.11, 37.32-37.33, 37.5	275	194	82	18	21	148	88
DIRECT HEART REVASCULARIZATION.....36.1	191	145	46	*	11	112	67
CARDIAC CATHETERIZATION.....37.21-37.23	508	326	182	32	61	277	138
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, REPAIR.....37.7-37.8	189	95	95	-	*9	31	150
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	365	181	185	23	85	106	151
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	5,847	2,506	3,341	281	2,003	1,596	1,966
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23, 44.13	246	107	139	*9	52	91	95
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8, 45.6-45.8	248	114	134	*5	28	68	148
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	282	147	135	75	165	28	15
HEMORRHOIDECTOMY.....49.43-49.46	134	76	59	-	64	50	21
CHOLECYSTECTOMY.....51.2	487	147	340	*	167	162	156
REPAIR OF INGUINAL HERNIA.....53.0-53.1	510	456	54	81	134	155	140
DIVISION OF PERITONEAL ADHESIONS.....54.5	298	38	260	*	180	58	57
OPERATIONS ON THE URINARY SYSTEM.....55-59	1,872	1,098	774	95	422	521	834
ENDOSCOPES (NATURAL ORIFICE).....55.21-55.22, 56.31, 57.32, 58.22	800	532	268	31	135	222	411
DILATION OF URETHRA.....58.6	163	80	83	13	37	43	70
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	845	845	...	126	131	178	410
PROSTATECTOMY.....60.2-60.6	357	357	*	81	274
CIRCUMCISION.....64.0	91	91	...	53	19	12	*8
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	3,872	...	3,872	10	2,534	688	240
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	512	...	512	*	314	153	44
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	568	...	568	*	564	*	-
HYSTERECTOMY.....68.3-68.7	672	...	672	-	440	180	53
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01, 69.51	95	...	95	*	93	*	...
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	281	...	281	*	281	*	...
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	632	...	632	*	421	166	44
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	150	...	150	-	58	56	35
OBSTETRICAL PROCEDURES.....72-75	3,914	...	3,914	10	3,902	*	...
EPISIOTOMY WITH OR WITHOUT FORCEPS OR VACUUM EXTRACTION.....72.1, 72.21, 72.31, 72.71, 73.6	1,943	...	1,943	*6	1,937	*	...
CESAREAN SECTION.....74.0-74.2, 74.4, 74.99	808	...	808	*	805	*	...
REPAIR OF CURRENT OBSTETRICAL LACERATION.....75.5-75.6	479	...	479	*	478	-	...
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	3,762	1,826	1,936	249	1,719	964	830
OPEN REDUCTION OF FRACTURE 76.72, 76.74, 76.76-76.77, 76.79, 79.2-79.3, 79.5-79.6	423	218	205	30	150	70	133
OTHER REDUCTION OF FRACTURE.....76.70-76.71, 76.73, 76.75, 76.78, 79.0-79.1, 79.4	237	139	97	70	85	36	42
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5, 81.0	258	142	116	*5	143	89	21
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	147	97	50	*	91	37	15
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	147	79	68	*	74	29	41
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5-81.6	159	51	108	-	*7	34	118
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	1,830	709	1,122	121	740	559	410
MASTECTOMY.....85.4	116	*6	110	*	17	54	44
SKIN GRAFT (EXCEPT LIP OR MOUTH).....86.6-86.7	154	88	66	18	55	42	40
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	6,292	3,077	3,215	302	1,557	2,027	2,366
COMPUTERIZED AXIAL TOMOGRAPHY.....87.03, 87.41, 87.71, 88.01, 88.38	871	431	440	46	212	240	373
PYELOGRAM.....87.73-87.75	453	251	202	18	145	137	153
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	825	508	317	16	104	389	316
DIAGNOSTIC ULTRASOUND.....88.7	695	264	431	31	225	189	249
RADIOISOTOPE SCAN.....92.0-92.1	685	319	367	14	119	230	322

TABLE 8. RATE OF ALL-LISTED PROCEDURES FOR INPATIENTS DISCHARGED FROM SHDRT-STAY HOSPITALS, BY PROCEDURE CATEGORY, SEX, AND AGE: UNITED STATES, 1983

(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	SEX		AGE				
	TOTAL	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.....	15,471.8	12,474.5	18,271.1	4,445.7	13,984.4	19,351.1	35,846.6
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	397.5	404.1	391.4	276.3	305.0	577.7	700.4
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	45.1	25.3	63.5	*10.1	37.9	80.9	81.3
OPERATIONS ON THE EYE.....08-16	670.9	537.1	795.8	129.5	109.4	663.7	3,933.4
EXTRACTION OF LENS.....13.1-13.6	271.1	202.2	335.5	*9.8	16.6	238.4	1,827.9
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	222.3	163.7	277.1	*	*6.8	183.3	1,560.5
OPERATIONS ON THE EAR.....18-20	160.2	184.1	138.0	425.7	76.7	95.7	96.8
MYRINGOTOMY.....20.0	80.6	96.3	65.8	326.7	9.5	*11.0	*
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	646.9	649.9	644.1	874.9	634.7	500.4	504.0
RHINOPLASTY AND REPAIR OF NOSE.....21.8	113.1	111.4	114.8	25.2	173.1	104.3	55.0
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	182.7	167.1	197.3	541.2	128.3	*10.9	*
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	417.5	521.5	320.4	142.7	167.6	753.5	1,381.7
BRONCHOSCOPY.....33.21-33.23	98.5	122.5	76.0	33.6	31.5	169.7	370.8
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	821.3	1,022.4	633.5	227.0	212.9	1,760.7	2,830.6
OPEN HEART SURGERY.....35.1-35.51, 35.53-36.2, 36.6, 37.10-37.11, 37.32-37.33, 37.5	118.6	172.7	68.0	35.3	19.4	332.2	322.1
DIRECT HEART REVASCULARIZATION.....36.1	82.4	129.3	38.5	*	9.7	252.3	246.3
CARDIAC CATHETERIZATION.....37.21-37.23	218.8	290.4	151.8	62.4	55.7	622.9	504.2
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, REPAIR.....37.7-37.8	81.5	84.3	78.9	-	*8.0	69.1	547.6
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	157.3	161.0	153.9	44.0	78.5	238.2	552.4
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	2,517.0	2,233.9	2,781.5	545.0	1,841.2	3,585.7	7,179.8
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23, 44.13	106.0	95.2	116.1	*17.7	47.6	203.5	345.1
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8, 45.6-45.8	106.9	102.0	111.4	*8.9	25.5	153.4	539.4
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	121.4	131.5	112.0	144.9	151.4	62.5	54.1
HEMORRHOIDECTOMY.....49.43-49.46	57.8	67.5	48.8	-	58.8	111.5	75.6
CHOLECYSTECTOMY.....51.2	209.6	131.0	283.0	*	153.8	364.1	570.1
REPAIR OF INGUINAL HERNIA.....53.0-53.1	219.5	406.7	44.6	156.4	123.4	348.5	510.5
DIVISION OF PERITONEAL ADHESIONS.....54.5	128.2	33.5	216.6	*	165.1	130.8	207.1
OPERATIONS ON THE URINARY SYSTEM.....55-59	806.0	979.1	644.4	183.2	388.3	1,170.7	3,046.0
ENDOSCOPIES (NATURAL ORIFICE).....55.21-55.22, 56.31, 57.32, 58.22	344.2	474.1	223.0	60.2	123.9	499.7	1,501.9
DILATION OF URETHRA.....58.6	70.4	71.6	69.2	25.3	34.3	96.6	255.9
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	363.8	753.4	...	244.7	120.2	400.6	1,496.4
PROSTATECTOMY.....60.2-60.6	153.6	318.1	*	183.0	999.1
CIRCUMCISION.....64.0	39.3	81.5	...	102.4	17.4	26.0	*29.2
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	1,666.9	...	3,223.6	19.8	2,697.0	1,545.0	875.7
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	220.5	...	426.4	*	288.7	343.4	160.5
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	244.4	...	472.7	*	518.6	*	-
HYSTERECTOMY.....68.3-68.7	289.4	...	559.7	-	404.1	404.0	192.7
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01, 69.51	41.0	...	79.3	*	85.8	*	...
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	121.0	...	234.0	*	257.9	*	...
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	272.1	...	526.3	*	387.2	372.7	161.1
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	64.5	...	124.8	-	53.5	126.5	129.5
OBSTETRICAL PROCEDURES.....72-75	1,685.1	...	3,258.7	19.6	3,586.5	*	...
EPISIOTOMY WITH OR WITHOUT FORCEPS OR VACUUM EXTRACTION.....72.1, 72.21, 72.31, 72.71, 73.6	836.5	...	1,617.8	*11.6	1,780.1	*	...
CESAREAN SECTION.....74.0-74.2, 74.4, 74.99	347.6	...	672.3	*	740.4	*	...
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	206.3	...	399.0	*	438.9	-	...
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	1,619.5	1,628.3	1,611.4	483.4	1,579.9	2,165.3	3,029.7
OPEN REDUCTION OF FRACTURE.....76.72, 76.74, 76.76-76.77, 76.79, 79.2-79.3, 79.5-79.6	182.1	194.1	170.8	58.4	174.6	157.7	484.2
OTHER REDUCTION OF FRACTURE.....76.70-76.71, 76.73, 76.75, 76.78, 79.0-79.1, 79.4	101.9	124.3	80.9	135.2	81.6	81.0	153.7
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5, 81.0	111.1	126.7	96.5	*10.1	131.5	199.3	76.8
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	63.4	86.5	41.7	*	84.0	83.9	54.9
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	63.2	70.0	56.9	*	68.4	65.2	149.0
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5-81.6	68.4	45.8	89.6	-	*6.7	76.5	429.3
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	788.0	631.6	934.0	234.5	680.2	1,255.7	1,498.5
MASTECTOMY.....85.4	50.0	*5.4	91.7	*	15.6	120.5	162.5
SKIN GRAFT (EXCEPT LIP OR MOUTH).....86.6-86.7	66.3	78.6	54.8	35.0	50.1	93.8	144.1
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	2,708.7	2,742.8	2,676.9	585.3	1,468.3	4,552.3	8,639.7
COMPUTERIZED AXIAL TOMOGRAPHY.....87.03, 87.41, 87.71, 88.01, 88.38	374.8	384.2	366.1	88.4	195.3	538.1	1,362.2
PYELOGRAM.....87.73-87.75	195.0	223.4	168.6	34.2	133.3	307.7	560.0
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	355.2	453.0	263.9	31.3	55.8	874.2	1,152.4
DIAGNOSTIC ULTRASOUND.....88.7	299.0	235.0	358.8	60.9	206.9	424.8	909.0
RADIOISOTOPE SCAN.....92.0-92.1	295.0	284.0	305.2	28.0	109.2	516.1	1,176.5

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⁵National Center for Health Statistics, M. J. Witkin: Utilization of short-stay hospitals by characteristics of discharged patients, United States, 1965. *Vital and Health Statistics*. Series 13, No. 3. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, Dec. 1967.

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 standards of reliability or precision
 - # Figure suppressed to comply with confidentiality requirements
-

Technical notes

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 the 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 universe of the survey consisted of 6,965 short-stay hospitals contained in the 1963 Master Facility Inventory of Hospitals and Institutions. New hospitals were sampled for inclusion in the survey in 1972, 1975, 1977, 1979, 1981, and 1983. In all, 553 hospitals were sampled in 1983. Of these hospitals, 78 refused to participate, and 57 were out of scope. The 418 participating hospitals provided approximately 206,000 abstracts of medical records.

Sample design

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.

Sample discharges were selected within the hospitals 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, a number assigned when the patient was admitted to the hospital. The within-hospital sampling ratio for selecting sample discharges varied inversely with the probability of selection of the hospital.

Data collection and estimation

The sample selection and the transcription of information from the hospital records for abstract forms were performed by the hospital staff or by representatives of the National Center for Health Statistics or by both. The data were abstracted from the face sheets of the medical records. All discharge diagnoses and procedures were listed on the abstract in the order of the principal one, or the first-listed one if the principal one was not identified, followed by the order in which all other diagnoses or procedures were entered on the face sheet of the medical record.

Statistics produced by the 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 the 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}

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 discharges and first-listed diagnoses are shown in table I, relative standard errors for days of care are shown in table II, and relative standard errors for procedures are shown in table III.

Table I. Approximate relative standard errors of estimated numbers of discharges, first-listed diagnosis, and all-listed diagnoses, by selected patient and hospital characteristics: United States, 1983

Size of estimate	Ownership of hospital		
	Proprietary or State and local government	Nonprofit	All other characteristics
	Relative standard error		
5,000	29.6	15.7	15.1
10,000	25.3	14.1	12.6
50,000	18.3	11.4	8.8
100,000	16.2	10.5	7.7
300,000	13.7	9.4	6.4
500,000	12.7	8.9	5.9
1,000,000	11.6	8.4	5.3
3,000,000	11.2	7.8	4.6
5,000,000	9.7	7.5	4.3
10,000,000	9.1	7.2	4.0
20,000,000	8.6	6.9	3.8
30,000,000	8.3	6.8	3.6
40,000,000	8.1	6.7	3.5

Table II. Approximate relative standard errors of estimated numbers of days of care by selected patient and hospital characteristics: United States, 1983

Size of estimate	Proprietary hospitals	All other characteristics
10,000	36.6	24.8
30,000	29.1	18.8
50,000	26.2	16.6
100,000	23.0	14.1
300,000	18.8	10.9
500,000	17.2	9.8
1,000,000	15.4	8.4
3,000,000	13.0	6.8
5,000,000	12.1	6.1
10,000,000	11.0	5.4
50,000,000	9.1	4.1
100,000,000	8.4	3.7
200,000,000	7.8	3.3

NOTE: A list of references follows the text.

Table III. Approximate relative standard errors of estimated numbers of all-listed procedures: United States, 1983

Size of estimate	Relative standard error
5,000	15.9
10,000	13.7
25,000	11.5
50,000	10.2
100,000	9.2
500,000	7.4
1,000,000	6.8
3,000,000	6.1
5,000,000	5.8
10,000,000	5.4
15,000,000	5.2
20,000,000	5.1
25,000,000	5.0

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

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

NOTE: A list of references follows the text.

medical record if the principal diagnosis cannot be identified. The number of first-listed diagnoses is equivalent to the number of discharges.

Procedure—One or more surgical or nonsurgical operations, procedures, or special treatments assigned by the physician 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 are 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.

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

Region	States included
Northeast	Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, and Pennsylvania
North Central	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

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