

National Hospital Ambulatory Medical Care Survey: 2012 Emergency Department Summary Tables

The Ambulatory and Hospital Care Statistics Branch is pleased to release the most current nationally representative data on ambulatory care visits to hospital emergency departments (ED) in the United States. Statistics are presented on selected hospital, patient, and visit characteristics based on data collected in the 2012 National Hospital Ambulatory Medical Care Survey (NHAMCS). NHAMCS is an annual nationally representative sample survey of visits to EDs, outpatient departments, ambulatory surgical centers (ASCs) of nonfederal short-stay and general hospitals (starting in 2009), and freestanding ASCs (starting in 2010). In 2012, additional hospitals were sampled to permit visit estimates in the five most populous states: California, Florida, Illinois, New York, and Texas. State estimates are included for the first time in addition to the tables presenting national estimates.

The sampling frame for the 2012 NHAMCS was constructed from SDI's Healthcare Market Index, updated for the 2010 survey. NHAMCS uses a multi-stage probability design with samples of primary sampling units (PSUs), hospitals within PSUs, and patient visits within emergency service areas (ESAs). A total of 640 hospitals were selected for the 2012 NHAMCS, of which 535 were in scope and had eligible EDs. Of these, 408 participated, yielding an unweighted ED response rate of 76.3%. A total of 544 emergency services areas (ESAs) were identified from the EDs. Of these, 454 responded fully or adequately by providing forms for at least half of their expected visits based on the total number of visits during the reporting period. In all, 29,453 Patient Record forms (PRFs) were submitted. The resulting unweighted ESA sample response rate was 83.5%, and the overall unweighted two-stage sampling response rate was 63.6% (67.4% weighted). Response rates have been adjusted to exclude minimal participants. Among the five states, response rates ranged from 54.6%–71.9% (weighted).

The 2012 NHAMCS was conducted from December 26, 2011, through December 28, 2012. The U.S. Bureau of the Census was the data collection agent for the 2012 NHAMCS. For the first time, NHAMCS was collected electronically using a computerized instrument developed by the U.S. Census Bureau. Hospital staff or Census field representatives completed a PRF for a sample of about 100 ED visits during a randomly assigned 4-week reporting period. The content of the PRF may be viewed here:

http://www.cdc.gov/nchs/ahcd/ahcd_survey_instruments.htm#nhamcs.

Data processing and medical coding were performed by SRA International, Inc., Durham, North Carolina. As part of the quality assurance procedure, a 10% quality control sample of ED survey records was independently keyed and coded. Coding error rates ranged between 0.04% and 1.02% for the 10% ED sample. For further details, see the 2012 NHAMCS Public Use Data File Documentation:

ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf.

Web table estimates are based on sample data weighted to produce annual national estimates and include standard errors. Because of the complex multistage design of NHAMCS, a sample weight is computed for each sample visit that takes all stages of design into account. The survey data are inflated or weighted to produce unbiased national annual estimates. The visit weight includes four basic components: inflation by reciprocals of selection probabilities, adjustment for nonresponse, population ratio adjustments, and weight smoothing. Estimates of the sampling variability were calculated using Taylor approximations in SUDAAN, which take into account the complex sample design of NHAMCS. Detailed information on the design,

conduct, and estimation procedures of 2012 NHAMCS are discussed in the 2012 NHAMCS Public Use Data File Documentation.

As in any survey, results are subject to sampling and nonsampling errors. Nonsampling errors include reporting and processing errors as well as biases due to nonresponse and incomplete response. In 2012, race data were missing for 16.3% (unweighted) of ED records, and ethnicity data were missing for 28.7% (unweighted) of ED records. Tables 4, 8, 9, and 17 present race and ethnicity data and include estimates based on both imputed and reported (known) values and estimates based on reported values only. The National Center for Health Statistics uses model-based single imputation for NHAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 NHAMCS Public Use Data File Documentation.

In the following tables, estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk (*) appears in the tables. The relative standard error (RSE) of an estimate is obtained by dividing the standard error by the estimate itself. The result is then expressed as a percentage of the estimate. Estimates based on 30 or more cases include an asterisk if the RSE of the estimate exceeds 30%.

Table 1. Emergency department visits by selected hospital characteristics: United States, 2012

Selected hospital characteristics	Number of visits in thousands		Percent distribution		Number of visits per 100 persons per year ¹	
	(standard error in thousands)	(standard error of percent)	(standard error of percent)	(standard error of percent)	(standard error of rate)	(standard error of rate)
All visits	130,870	(7,182)	100.0	...	42.4	(2.3)
Ownership						
Voluntary	96,570	(6,660)	73.8	(3.1)	31.3	(2.2)
Government	17,255	(3,342)	13.2	(2.5)	5.6	(1.1)
Proprietary	17,045	(3,362)	13.0	(2.4)	5.5	(1.1)
Metropolitan status ^{2,3,4}						
MSA	111,608	(6,828)	85.3	(2.6)	42.8	(2.6)
Non-MSA	19,261	(3,582)	14.7	(2.6)	40.0	(7.4)
Geographic region ⁴						
Northeast	25,455	(2,661)	19.5	(1.9)	46.3	(4.8)
Midwest	25,822	(3,301)	19.7	(2.2)	38.9	(5.0)
South	52,171	(5,184)	39.9	(2.8)	45.4	(4.5)
West	27,421	(2,593)	21.0	(1.9)	37.8	(3.6)
Selected states ⁴						
California	14,172	(2,105)	10.8	(1.7)	37.8	(5.6)
Florida	8,424	(1,704)	6.4	(1.3)	44.4	(9.0)
Illinois	5,233	(1,090)	4.0	(0.9)	41.3	(8.6)
New York	7,171	(1,102)	5.5	(0.9)	37.1	(5.7)
Texas	12,424	(3,391)	9.5	(2.5)	48.6	(13.3)
Teaching hospital						
Yes	17,097	(2,722)	13.1	(2.0)	5.5	(0.9)
Non-teaching hospital ⁵	113,773	(7,095)	86.9	(2.0)	36.9	(2.3)
Trauma center						
Yes	44,358	(4,742)	33.9	(3.1)	14.4	(1.5)
No or blank	86,511	(6,154)	66.1	(3.1)	28.0	(2.0)

...Category not applicable.

¹Visit rates for region are based on the July 1, 2012, set of the estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

²MSA is metropolitan statistical area.

³Population estimates by MSA are based on estimates of the civilian noninstitutionalized population of the United States as of July 1, 2012, from the 2012 National Health Interview Survey, National Center for Health Statistics, compiled according to the December 2012 Office of Management and Budget definitions of core-based statistical areas. See <http://www.census.gov/population/metro/> for more about metropolitan statistical area definitions.

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

⁵Includes a small percentage of hospitals with unknown or blank teaching status (1.6 percent).

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 2. Emergency department visits by patient age, sex, and residence: United States, 2012

Selected patient characteristics	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Number of visits per 100 persons per year ¹ (standard error of rate)	
All visits	130,870	(7,182)	100.0	...	42.4	(2.3)
Age ¹						
Under 15 years	23,522	(2,299)	18.0	(1.4)	38.5	(3.8)
Under 1 year	3,409	(570)	2.6	(0.4)	86.5	(14.5)
1-4 years	8,631	(895)	6.6	(0.6)	53.8	(5.6)
5-14 years	11,482	(951)	8.8	(0.5)	27.9	(2.3)
15-24 years	20,328	(1,230)	15.5	(0.4)	47.3	(2.9)
25-44 years	37,296	(2,193)	28.5	(0.7)	46.2	(2.7)
45-64 years	28,938	(1,677)	22.1	(0.6)	35.3	(2.0)
65 years and over	20,786	(1,331)	15.9	(0.5)	49.7	(3.2)
65-74 years	8,937	(630)	6.8	(0.3)	37.6	(2.7)
75 years and over	11,849	(779)	9.1	(0.4)	65.5	(4.3)
Sex and age ¹						
Female	72,712	(3,970)	55.6	(0.5)	46.0	(2.5)
Under 15 years	11,475	(1,158)	8.8	(0.7)	38.4	(3.9)
15-24 years	12,229	(762)	9.3	(0.3)	57.4	(3.6)
25-44 years	21,620	(1,228)	16.5	(0.4)	52.7	(3.0)
45-64 years	15,355	(958)	11.7	(0.4)	36.3	(2.3)
65-74 years	4,717	(369)	3.6	(0.2)	37.2	(2.9)
75 years and over	7,316	(497)	5.6	(0.3)	68.0	(4.6)
Male	58,157	(3,333)	44.4	(0.5)	38.6	(2.2)
Under 15 years	12,047	(1,195)	9.2	(0.7)	38.6	(3.8)
15-24 years	8,098	(580)	6.2	(0.3)	37.4	(2.7)
25-44 years	15,676	(1,061)	12.0	(0.4)	39.5	(2.7)
45-64 years	13,583	(821)	10.4	(0.4)	34.2	(2.1)
65-74 years	4,220	(306)	3.2	(0.1)	38.1	(2.8)
75 years and over	4,533	(340)	3.5	(0.2)	61.8	(4.6)
Patient residence						
Private residence ¹	120,969	(6,825)	92.4	(1.0)	39.2	(2.2)
Nursing home ²	2,328	(201)	1.8	(0.1)	165.2	(14.3)
Homeless ³	706	(113)	0.5	(0.1)	111.4	(17.8)
Other	1,654	(243)	1.3	(0.2)	0.5	(0.1)
Unknown or blank	5,212	(1,318)	4.0	(1.0)	1.7	(0.4)

...Category not applicable.

¹Visit rates for age, sex, and private residence are based on the July 1, 2012, set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

²Visit rates for nursing home residents are based on the 2012 population denominators from the Centers for Medicare and Medicaid Services' 2013 Nursing Home Compendium. The denominator is the quarterly estimate of the nursing home population rather than the population using nursing homes during the calendar year.

³Visit rates for the homeless people are based on The 2012 Annual Homeless Assessment Report by the U.S. Department of Housing and Urban Development.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 3. Emergency department visit rate per 100 persons, by patient age, sex, and selected states: United States, 2012

Selected patient characteristics	All states		California		Florida		Illinois		New York		Texas	
	Number of visits per 100 persons per year ¹ (standard error of rate)											
All visits	42.4	(2.3)	37.8	(5.6)	44.4	(9.0)	41.3	(8.6)	37.1	(5.7)	48.6	(13.3)
Age												
Under 18 years	37.6	(3.4)	28.6	(6.6)	23	(5.1)	35.3	(7.9)	33.8	(6.3)	62.3	(27.4)
18-64 years	42.7	(2.4)	35.4	(5.0)	50.6	(11.5)	41.6	(8.7)	37	(5.7)	41.3	(10.4)
65 years and over	49.7	(3.2)	68.9	(12.3)	48.3	(9.1)	50.6	(10.7)	42.9	(7.9)	55.8	(15.8)
Sex												
Female	46.0	(2.5)	40.0	(6.3)	47.6	(9.6)	44.5	(9.0)	40.4	(6.7)	53.8	(14.2)
Male	38.6	(2.2)	35.5	(5.2)	41.0	(8.5)	37.8	(8.3)	33.6	(5.0)	43.3	(12.7)

¹Visit rates for age, sex, and private residence are based on the July 1, 2012, set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 4. Emergency department visits by patient race and age, and ethnicity: United States, 2012

Patient characteristics	Reported plus imputed race and ethnicity					Reported race and ethnicity only				
	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Number of visits per 100 persons per year (standard error of rate) ¹		Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits	130,870	(7,182)	100.0	...	42.4	(2.3)	107,096	(6,768)	100.0	...
Race and age ^{2,3}										
Reported	107,096	(6,768)	81.8	(2.1)	...	...	107,096	(6,768)	100.0	...
Imputed (missing) visits	23,773	(2,886)	18.2	(2.1)	...	...	...	...	...	...
Reported plus imputed										
White	94,385	(5,336)	72.1	(1.6)	39.2	(2.2)	77,998	(5,074)	72.8	(1.8)
Under 15 years	16,032	(1,618)	12.3	(1.0)	35.8	(3.6)	12,641	(1,325)	11.8	(1.1)
15-24 years	14,314	(958)	10.9	(0.4)	44.7	(3.0)	11,482	(885)	10.7	(0.5)
25-44 years	26,485	U.S.	20.2	(0.6)	42.9	(2.6)	21,840	(1,557)	20.4	(0.7)
45-64 years	20,584	(1,233)	15.7	(0.5)	31.0	(1.9)	17,406	(1,223)	16.3	(0.6)
65-74 years	7,016	(516)	5.4	(0.3)	34.8	(2.6)	5,948	(503)	5.6	(0.3)
75 years and over	9,954	(695)	7.6	(0.4)	63.1	(4.4)	8,681	(635)	8.1	(0.4)
Black or African American	31,134	(2,815)	23.8	(1.5)	78.2	(7.1)	24,859	(2,652)	23.2	(1.8)
Under 15 years	6,231	(825)	4.8	(0.5)	67.8	(9.0)	4,466	(661)	4.2	(0.5)
15-24 years	5,310	(545)	4.1	(0.3)	80.3	(8.2)	4,364	(543)	4.1	(0.4)
25-44 years	9,322	(844)	7.1	(0.5)	88.0	(8.0)	7,543	(806)	7.0	(0.5)
45-64 years	7,306	(710)	5.6	(0.4)	75.0	(7.3)	6,077	(655)	5.7	(0.5)
65-74 years	1,530	(244)	1.2	(0.2)	69.5	(11.1)	1,271	(231)	1.2	(0.2)
75 years and over	1,435	(197)	1.1	(0.1)	99.9	(13.7)	1,138	(189)	1.1	(0.2)
Other ³	5,350	(780)	4.1	(0.6)	19.1	(2.8)	4,239	(736)	4.0	(0.7)
Ethnicity ^{2,3}										
Reported	90,188	(6,648)	68.9	(3.2)	...	...	90,188	(6,648)	100.0	...
Imputed (missing) visits	40,682	(4,661)	31.1	(3.2)	...	...	...	...	...	...
Reported plus imputed										
Hispanic or Latino	22,979	(2,506)	17.6	(1.7)	43.9	(4.8)	16,855	(1,963)	18.7	(2.1)
Not Hispanic or Latino	107,891	(6,323)	82.4	(1.7)	42.1	(2.5)	73,332	(6,116)	81.3	(2.1)

...Category not applicable.

¹Visit rates are based on the July 1, 2012, set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.²The race groups, White, Black or African American, and Other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. For 2012, race data were missing for 18.2 percent of visits, and ethnicity data were missing for 31.1 percent of visits. Starting with 2009 data, National Center for Health Statistics has adopted the technique of model-based single imputation for NHAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 NHAMCS Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf.³Other race includes the categories of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 5. Wait time at emergency department visits: United States, 2012

Visit characteristic	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits	130,870	(7,182)	100.0	...
Time spent waiting to see a MD, DO, PA, or NP ¹				
Fewer than 15 minutes	39,242	(2,695)	30.0	(1.8)
15-59 minutes	43,946	(3,046)	33.6	(1.5)
1 hour, but less than 2 hours	14,160	(1,259)	10.8	(0.7)
2 hours, but less than 3 hours	4,526	(461)	3.5	(0.3)
3 hours, but less than 4 hours	1,871	(228)	1.4	(0.2)
4 hours, but less than 6 hours	1,156	(191)	0.9	(0.1)
6 hours or more	725	(129)	0.6	(0.1)
Not applicable	4,109	(381)	3.1	(0.3)
Blank	21,134	(3,916)	16.2	(2.7)
Time spent in the emergency department				
Less than 1 hour	15,448	(1,107)	11.8	(0.6)
1 hour, but less than 2 hours	29,866	(1,749)	22.8	(0.7)
2 hours, but less than 4 hours	43,924	(2,692)	33.6	(0.6)
4 hours, but less than 6 hours	19,811	(1,419)	15.1	(0.5)
6 hours, but less than 10 hours	10,064	(799)	7.7	(0.4)
10 hour, but less than 14 hours	2,312	(245)	1.8	(0.2)
14 hours, but less than 24 hours	1,611	(213)	1.2	(0.2)
24 hours or more	1,024	(143)	0.8	(0.1)
Blank	6,809	(997)	5.2	(0.7)
Patient arrived in emergency department after business hours ²				
Yes	76,984	(4,367)	58.8	(0.6)
No	51,518	(2,801)	39.4	(0.5)
Blank	2,367	(694)	1.8	(0.5)

...Category not applicable.

*Figure does not meet standards of reliability or precision.

¹MD is medical doctor, DO is doctor of osteopathy, PA is physician assistant, NP is nurse practitioner. The median waiting time to see a MD, DO, PA, or NP was 21.4 minutes; the mean waiting time to see a MD, DO, PA, or NP was 43.7 minutes.

²Business hours defined as Monday through Friday, 8 a.m. to 5 p.m.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 6. Mode of arrival at emergency department, by patient age: United States, 2012

Patient age	Number of visits in thousands	Patient's mode of arrival						
		Total	Ambulance		Other		Unknown or blank	
			Percent Distribution (standard error of percent)					
All visits	130,870	100.0	15.6	(0.6)	81.0	(0.7)	3.5	(0.5)
Age								
Under 15 years	23,522	100.0	5.2	(0.5)	91.4	(1.1)	*3.5	(1.0)
Under 1 year	3,409	100.0	5.1	(1.0)	89.7	(2.0)	*5.2	(1.7)
1–4 years	8,631	100.0	4.2	(0.5)	92.5	(1.2)	*3.3	(1.1)
5–14 years	11,482	100.0	5.9	(0.7)	91.1	(1.1)	*3.0	(0.9)
15–24 years	20,328	100.0	10.2	(0.7)	86.1	(1.0)	3.7	(0.8)
25–44 years	37,296	100.0	11.3	(0.6)	85.3	(0.7)	3.4	(0.6)
45–64 years	28,938	100.0	19.5	(1.0)	77.0	(1.0)	3.4	(0.6)
65 years and over	20,786	100.0	34.8	(1.2)	61.8	(1.3)	3.4	(0.6)
65–74 years	8,937	100.0	25.5	(1.7)	70.0	(1.8)	4.5	(0.9)
75 years and over	11,849	100.0	41.8	(1.5)	55.7	(1.6)	2.5	(0.5)

*Figure does not meet standard of reliability or precision.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 7. Expected source(s) of payment at emergency department visits: United States, 2012

Expected source of payment	Number of visits in thousands ¹		Percent of visits (standard error of percent)	
		(standard error in thousand)		
All visits	130,870	(7,182)	...	...
Private insurance	45,896	(3,145)	35.1	(1.3)
Medicaid or CHIP ²	38,551	(2,641)	29.5	(1.3)
Medicare	23,972	(1,615)	18.3	(0.7)
Medicare and Medicaid ³	5,378	(532)	4.1	(0.3)
No insurance ⁴	18,462	(1,354)	14.1	(0.8)
Self-pay	17,631	(1,371)	13.5	(0.8)
No charge or charity	1,058	(276)	0.8	(0.2)
Worker's compensation	1,421	(167)	1.1	(0.1)
Other	5,967	(776)	4.6	(0.6)
Unknown or blank	11,941	(1,971)	9.1	(1.4)

...Category not applicable.

¹Combined total of expected sources of payment exceeds "all visits," and percent of visits exceeds 100% because more than one source of payment may be reported per visit.

²CHIP is Children's Health Insurance Program.

³The visits in this category are also included in both the Medicaid or CHIP and the Medicare categories.

⁴"No insurance" is defined as having only self-pay, or no charge or charity as payment sources. The individual self-pay and no charge or charity categories' are not mutually exclusive.
SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 8. Triage status of emergency department visits, by selected patient characteristics: United States, 2012

Patient and visit characteristics	Number of visits in thousands		Percent distribution (standard error of percent)														
	Total		Level 1 (immediate)		Level 2 (emergent)		Level 3 (urgent)		Level 4 (semiurgent)		Level 5 (nonurgent)		No triage ¹		Unknown or blank		
All visits	130,870	100.0	0.7	(0.1)	7.2	(0.6)	34.7	(1.6)	26.6	(1.5)	4.7	(0.4)	4.7	(1.0)	21.3	(2.7)	
Age																	
Under 15 years	23,522	100.0	*0.7	(0.2)	4.6	(0.6)	24.7	(1.3)	37.7	(1.8)	8.0	(0.8)	4.5	(1.2)	19.7	(2.9)	
Under 1 year	3,409	100.0	*	...	5.4	(1.4)	27.7	(2.5)	35.0	(2.9)	6.1	(1.2)	*4.2	(1.8)	20.6	(4.2)	
1–4 years	8,631	100.0	*	...	3.7	(0.6)	22.7	(1.5)	38.6	(1.9)	9.1	(1.2)	4.4	(1.2)	20.7	(3.1)	
5–14 years	11,482	100.0	*	...	5.1	(0.7)	25.3	(1.4)	37.9	(2.3)	7.8	(0.9)	4.7	(1.2)	18.6	(2.9)	
15–24 years	20,328	100.0	*0.6	(0.2)	4.9	(0.6)	33.2	(2.0)	29.2	(2.0)	5.1	(0.6)	4.4	(1.2)	22.6	(3.2)	
25–44 years	37,296	100.0	*0.6	(0.2)	5.3	(0.6)	34.9	(1.8)	28.0	(1.8)	4.6	(0.4)	4.3	(1.0)	22.3	(2.9)	
45–64 years	28,938	100.0	0.8	(0.2)	9.6	(0.9)	36.5	(1.9)	22.5	(1.6)	3.7	(0.5)	5.6	(1.2)	21.3	(2.7)	
65 years and over	20,786	100.0	1.0	(0.2)	12.4	(1.3)	44.9	(2.5)	14.4	(1.4)	2.2	(0.5)	4.7	(1.3)	20.4	(2.9)	
65–74 years	8,937	100.0	*	...	10.9	(1.5)	43.7	(3.0)	14.9	(1.6)	2.6	(0.6)	4.1	(1.0)	22.9	(3.2)	
75 years and over	11,849	100.0	1.0	(0.3)	13.6	(1.6)	45.8	(2.5)	14.1	(1.4)	1.8	(0.4)	*5.1	(1.6)	18.5	(2.8)	
Sex																	
Female	72,712	100.0	0.7	(0.2)	6.4	(0.6)	36.9	(1.8)	25.6	(1.5)	4.2	(0.4)	4.7	(1.1)	21.4	(2.7)	
Male	58,157	100.0	0.7	(0.1)	8.1	(0.7)	32.1	(1.6)	27.8	(1.6)	5.3	(0.5)	4.7	(1.0)	21.2	(2.8)	
Race ^{2,3}																	
Reported	107,096	100.0	0.7	(0.2)	7.7	(0.7)	36.7	(1.7)	27.3	(1.7)	4.6	(0.4)	4.9	(1.1)	18.0	(2.6)	
Imputed (missing)	23,773	100.0	0.6	(0.2)	4.8	(0.7)	26.0	(3.1)	23.1	(2.9)	5.1	(1.0)	*4.1	(1.7)	36.3	(6.6)	
Reported plus imputed (missing)																	
White	94,385	100.0	0.8	(0.2)	7.6	(0.7)	35.5	(1.8)	25.7	(1.4)	4.5	(0.4)	5.2	(1.3)	20.6	(2.7)	
Black or African American	31,134	100.0	*0.5	(0.2)	5.6	(0.6)	32.3	(2.3)	29.0	(2.5)	5.2	(0.7)	3.5	(0.8)	23.9	(4.4)	
Other ⁴	5,350	100.0	*	...	8.8	(1.5)	35.3	(2.2)	27.9	(2.6)	4.5	(1.2)	3.7	(1.1)	19.4	(3.6)	
Reported only ⁵																	
White	77,998	100.0	0.9	(0.2)	8.2	(0.8)	37.6	(1.9)	26.6	(1.6)	4.4	(0.5)	5.3	(1.4)	17.0	(2.4)	
Black or African American	24,859	100.0	*0.4	(0.2)	6.0	(0.7)	33.7	(2.6)	29.6	(3.0)	5.1	(0.7)	3.7	(1.0)	21.5	(5.1)	
Other ⁴	4,239	100.0	*	...	9.2	(1.9)	36.9	(2.5)	28.2	(3.2)	*5.1	(1.4)	*3.8	(1.3)	*16.3	(4.1)	
Ethnicity ^{2,6}																	
Reported	90,188	100.0	0.6	(0.1)	7.9	(0.7)	35.5	(2.0)	27.3	(1.9)	4.6	(0.5)	5.3	(1.3)	18.8	(3.0)	
Imputed (missing)	40,682	100.0	*0.9	(0.4)	5.7	(0.9)	33.1	(2.9)	24.9	(2.1)	4.9	(0.9)	*3.5	(1.2)	27.0	(4.9)	
Reported plus imputed (missing)																	
Hispanic or Latino	22,979	100.0	*	...	6.1	(0.8)	36.4	(1.9)	28.7	(1.5)	6.5	(0.7)	4.9	(1.3)	17.0	(2.4)	
Not Hispanic or Latino	107,891	100.0	0.8	(0.2)	7.4	(0.7)	34.4	(1.8)	26.1	(1.7)	4.3	(0.4)	4.7	(1.1)	22.3	(3.0)	
Reported only ⁷																	
Hispanic or Latino	16,855	100.0	*	...	6.5	(1.0)	36.5	(2.2)	29.5	(1.9)	6.8	(0.9)	*5.0	(1.6)	15.3	(2.7)	
Not Hispanic or Latino	73,332	100.0	0.7	(0.1)	8.2	(0.8)	35.3	(2.3)	26.8	(2.1)	4.1	(0.5)	5.3	(1.4)	19.6	(3.4)	

Table 8. Triage status of emergency department visits, by selected patient characteristics: United States, 2012

Patient and visit characteristics	Number of visits in thousands		Percent distribution (standard error of percent)													
	Total		Level 1 (immediate)	Level 2 (emergent)	Level 3 (urgent)	Level 4 (semiurgent)	Level 5 (nonurgent)	No triage ¹	Unknown or blank							
Expected source of payment ⁸																
Private insurance	45,896	100.0	0.8 (0.1)	7.9 (0.7)	38.4 (2.2)	23.3 (1.6)	3.7 (0.5)	5.0 (1.4)	20.9 (3.3)							
Medicaid or CHIP ⁹	38,551	100.0	0.7 (0.2)	6.1 (0.7)	30.9 (1.6)	31.1 (2.1)	5.5 (0.5)	5.2 (1.2)	20.5 (2.8)							
Medicare	23,972	100.0	0.9 (0.2)	11.3 (1.3)	42.9 (2.5)	17.5 (1.7)	2.3 (0.3)	4.5 (1.2)	20.6 (3.3)							
Medicare and Medicaid ¹⁰	5,378	100.0	* ...	8.9 (1.8)	40.0 (3.7)	23.2 (3.2)	2.9 (0.8)	*3.7 (1.5)	19.8 (4.0)							
No insurance ¹¹	18,462	100.0	*0.6 (0.2)	5.3 (0.7)	30.5 (2.0)	30.2 (2.3)	5.8 (0.6)	4.7 (1.3)	22.9 (3.7)							
Worker's compensation	1,421	100.0	* ...	* ...	21.8 (3.4)	39.6 (4.2)	* ...	* ...	23.3 (5.3)							
Other	5,967	100.0	* ...	10.7 (2.1)	37.2 (3.3)	23.6 (2.2)	6.2 (1.5)	*4.0 (1.4)	17.6 (3.5)							
Unknown or blank	11,941	100.0	*0.9 (0.3)	6.1 (0.9)	34.6 (2.7)	27.9 (2.3)	5.1 (1.1)	*3.1 (1.1)	22.3 (4.5)							

...Category not applicable.

¹Figure does not meet standard of reliability or precision.¹A visit in which emergency service area (ESA) coded nursing triage to be zero (had admitted to hospital or treated immediately) or visit occurred in ESA that does not conduct triage. Of these visits, 80.5% had nursing triage code zero.²The race groups, white, black or African American, and other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, National Center for Health Statistics has adopted the technique of model-based single imputation for NHAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 NHAMCS Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf. For 2012, race data were missing for 18.2 percent of visits, and ethnicity data were missing for 31.1 percent of visits.³"Reported plus imputed" includes race that was reported directly by emergency departments and imputed values for the 18.2 percent of visits for which race was not reported.⁴Other race includes the categories of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.⁵"Reported only" calculations are based on 107,096 visits (in thousands) with race reported directly by emergency departments. The 18.2 percent of visits for which race was missing are excluded from the denominator so that readers can compare differences between estimates that include and exclude imputed race values.⁶"Reported plus imputed" includes ethnicity that was reported directly by emergency departments and imputed values for the 31.1 percent of visits for which ethnicity was not reported.⁷"Reported only" calculations are based on 90,188 visits (in thousands) with ethnicity reported directly by emergency departments. The 31.1 percent of visits for which ethnicity was missing are excluded from the denominator so that readers can compare differences between estimates that include and exclude imputed ethnicity values.⁸Combined total of expected sources of payment exceeds "all visits" and percent of visits exceeds 100% because more than one source of payment may be reported per visit.⁹CHIP is the Children's Health Insurance Program.¹⁰The visits in this category are also included in both the Medicaid or CHIP and Medicare categories.¹¹No insurance is defined as having only self-pay, no charge or charity as payment sources.

NOTES: The 2012 Patient Record Form (PRF) requested responses using a 1–5 scale. PRF responses were evaluated with reference to responses on the Ambulatory Unit Record, completed during induction, to the question, "How many levels are in this emergency service area's (ESA) triage system?" ESAs using 3 or 4 level triage systems had their responses rescaled to fit the 5 level system, such that, for 3-level ESAs, responses of 1, 2, and 3 were recoded to 2, 3, and 4. For ESAs using a 4-level system, responses were recoded from 1–4 to 2–5. The rescaling method was determined in consultation with subject matter experts and based on record analysis. Rescaling was required for about 7 percent of records, or 10 percent of records with non-missing data. In past years triage level was imputed. This was not done in 2012. Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 9. Initial blood pressure measurements recorded at emergency department visits for adults 18 years and over by selected patient characteristics: United States, 2012

Patient characteristics	Number of visits in thousands	Total	Initial blood pressure ¹							
			Not high (SBP less than 120 mm Hg and DBP less than 80 mm Hg)		Prehypertension (SBP 120–139 mm Hg or DBP 80–89 mm Hg)		Stage 1 hypertension (SBP 140–159 mm Hg or DBP 90–99 mm Hg)		Stage 2 hypertension (SBP greater than or equal to 160 mm Hg or DBP greater than 100 mm Hg)	
			Percent distribution (standard error of percent)							
All visits ²	99,458	100.0	20.4	(0.5)	35.0	(0.5)	26.9	(0.4)	17.7	(0.5)
Age										
18–24 years	15,580	100.0	30.3	(1.3)	44.2	(1.0)	21.2	(1.1)	4.4	(0.6)
25–44 years	35,900	100.0	21.1	(0.8)	39.8	(0.8)	25.8	(0.7)	13.3	(0.7)
45–64 years	27,858	100.0	16.5	(0.7)	30.3	(0.9)	30.1	(0.8)	23.1	(0.8)
65–74 years	8,665	100.0	19.2	(1.2)	25.1	(1.3)	27.5	(1.2)	28.2	(1.5)
75 years and over	11,455	100.0	15.6	(1.1)	26.1	(1.1)	30.0	(1.1)	28.3	(1.2)
Sex										
Female	56,851	100.0	23.4	(0.6)	35.1	(0.6)	24.4	(0.5)	17.1	(0.5)
Male	42,607	100.0	16.4	(0.6)	34.9	(0.9)	30.2	(0.7)	18.5	(0.8)
Race ³										
Reported	82,704	100.0	20.1	(0.5)	35.0	(0.5)	26.8	(0.4)	18.1	(0.6)
Imputed (missing)	16,754	100.0	22.1	(1.2)	34.9	(1.3)	27.6	(1.2)	15.5	(1.1)
Reported plus imputed ⁴										
White	72,933	100.0	20.4	(0.5)	35.2	(0.6)	27.3	(0.4)	17.2	(0.6)
Black	22,720	100.0	19.8	(0.9)	34.8	(0.9)	26.4	(0.8)	19.1	(0.8)
Other ⁵	3,804	100.0	25.9	(2.5)	33.3	(1.9)	22.2	(2.2)	18.6	(1.6)
Reported only ⁶										
White	60,914	100.0	20.2	(0.6)	35.2	(0.6)	27.1	(0.5)	17.5	(0.7)
Black or African American	18,631	100.0	19.2	(0.9)	34.6	(1.0)	26.4	(0.9)	19.9	(0.8)
Other ⁵	3,159	100.0	24.6	(2.9)	34.7	(2.1)	22.4	(2.4)	18.4	(1.7)
Ethnicity ³										
Reported	68,839	100.0	20.5	(0.6)	35.2	(0.6)	26.9	(0.5)	17.4	(0.6)
Imputed (missing)	30,619	100.0	20.3	(0.8)	34.6	(0.9)	26.9	(0.7)	18.3	(0.8)
Reported plus imputed ⁷										
Hispanic or Latino	14,649	100.0	24.4	(1.2)	35.3	(1.1)	24.9	(0.9)	15.5	(1.1)
Not Hispanic or Latino	84,809	100.0	19.8	(0.5)	35.0	(0.6)	27.2	(0.5)	18.1	(0.6)
Reported only ⁸										
Hispanic or Latino	10,796	100.0	23.7	(1.4)	36.1	(1.5)	24.9	(1.1)	15.4	(1.4)
Not Hispanic or Latino	58,043	100.0	19.9	(0.6)	35.0	(0.7)	27.3	(0.6)	17.8	(0.7)

¹SBP is systolic blood pressure. DBP is diastolic blood pressure. Three high blood pressure categories (SBP greater or equal to 120 or DBP greater or equal to 80) are based on the Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure (JNC-7) and correspond to prehypertensive, stage 1 hypertensive, and stage 2 hypertensive ranges. If the SBP and DBP taken fall into two different categories, the visit is included in the higher blood pressure category.

²Visits by adults (18 years of age or over). Visits where blood pressure was taken represent 96.4 percent (SE = 0.8) of all emergency department visits made by adults.

³The race groups, white, black or African American, and other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. For 2012, race data were missing for 18.2 percent of visits, and ethnicity data were missing for 31.1 percent of visits. The National Center for Health Statistics uses model-based single imputation for NHAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 NHAMCS Public Use Data File documentation, available at: http://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf.

⁴Reported plus imputed" includes race that was reported directly by emergency departments and imputed values for the 18.2 percent of visits for which race was not reported.

⁵Other race includes the categories of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

⁶"Reported only" calculations are based on 82,704 visits (in thousands) with race reported directly by emergency departments. The 18.2 percent of visits for which race was missing are excluded from the denominator so that readers can compare differences between estimates that include and exclude imputed race values.

⁷"Reported plus imputed" includes ethnicity that was reported directly by emergency departments and imputed values for the 31.1 percent of visits for which ethnicity was not reported.

⁸"Reported only" calculations are based on 68,839 visits (in thousands) with ethnicity reported directly by emergency departments. The 31.1 percent of visits for which ethnicity was missing are excluded from the denominator so that readers can compare differences between estimates that include and exclude imputed ethnicity values.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 10. Initial temperature, pulse oximetry, and visit history at emergency department visits: United States, 2012

Visit characteristic	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits	130,870	(7,182)	100.0	...
Temperature				
Febrile: more than 38.0°C or more than 100.4°F	4,680	(435)	3.6	(0.2)
Normal: 35.1–38.0°C or 95.1–100.4°F	118,549	(6,809)	90.6	(0.8)
Hypothermic: 35.0°C or less or 95.0°F or less	227	(41)	0.2	(0.0)
Blank	7,413	(1,028)	5.7	(0.8)
Pulse oximetry ¹				
95–100%	108,600	(6,575)	83.0	(1.4)
Less than 95%	9,269	(967)	7.1	(0.6)
Blank	13,000	(1,732)	9.9	(1.4)
Episode of care				
Initial visit	106,510	(6,765)	81.4	(2.1)
Follow-up visit	5,960	(574)	4.6	(0.3)
Unknown or blank	18,399	(2,805)	14.1	(2.1)
Patient seen in this emergency department within the last 72 hours				
Yes	5,147	(675)	3.9	(0.5)
No	107,891	(6,946)	82.4	(2.2)
Unknown or blank	17,832	(2,844)	13.6	(2.2)

...Category not applicable.

¹Normal oxygen saturation as measured by pulse oximetry is 95% or more.
NOTE: Numbers may not add to totals because of rounding.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 11. Ten leading principal reasons for emergency department visits, by patient age and sex: United States, 2012

Principal reason for visit and RVC code ¹		Number of visits		Percent distribution		
		in thousands		(standard error of percent)		
		(standard error in thousands)				
All visits		...	130,870	(7,182)	100.0	...
Stomach and abdominal pain, cramps and spasms	S545	10,386	(633)	7.9	(0.2)	
Chest pain and related symptoms (not referable to body systems)	S050	7,172	(491)	5.5	(0.2)	
Fever	S010	4,766	(587)	3.6	(0.4)	
Cough	S440	4,306	(496)	3.3	(0.3)	
Headache, pain in head	S210	3,812	(300)	2.9	(0.2)	
Back symptoms	S905	3,494	(269)	2.7	(0.1)	
Shortness of breath	S415	3,458	(271)	2.6	(0.2)	
Pain, site not referable to a specific body system	S055	3,044	(256)	2.3	(0.1)	
Vomiting	S530	2,565	(276)	2.0	(0.2)	
Injury, other and unspecified type: head, neck, and face	J505	2,339	(215)	1.8	(0.1)	
All other reasons ²	...	85,528	(4,588)	65.4	(0.7)	
All visits under age 15		...	23,522	(2,299)	100.0	...
Female		...	11,475	(1,158)	48.8	(1.1)
Fever	S010	1,640	(266)	7.0	(0.6)	
Cough	S440	1,036	(172)	4.4	(0.5)	
Stomach and abdominal pain, cramps and spasms	S545	602	(89)	2.6	(0.3)	
Symptoms referable to throat	S455	456	(98)	1.9	(0.4)	
Vomiting	S530	439	(89)	1.9	(0.3)	
Earache, or ear infection	S355	438	(59)	1.9	(0.2)	
Skin rash	S860	368	(65)	1.6	(0.3)	
Injury, other and unspecified type: head, neck, and face	J505	323	(58)	1.4	(0.2)	
Labored or difficult breathing (dyspnea)	S420	291	(75)	1.2	(0.2)	
Injury, other and unspecified type: hand and finger(s)	J570	175	(47)	0.7	(0.2)	
All other reasons ²	...	5,707	(483)	24.3	(1.3)	
Male		...	12,047	(1,195)	51.2	(1.1)
Fever	S010	1,761	(296)	7.5	(0.8)	
Cough	S440	1,107	(246)	4.7	(0.7)	
Vomiting	S530	570	(117)	2.4	(0.4)	
Injury, other and unspecified type: head, neck, and face	J505	494	(82)	2.1	(0.4)	
Stomach and abdominal pain, cramps and spasms	S545	483	(79)	2.1	(0.3)	
Skin rash	S860	401	(58)	1.7	(0.2)	
Earache, or ear infection	S355	357	(50)	1.5	(0.2)	
Labored or difficult breathing (dyspnea)	S420	*327	(110)	1.4	(0.4)	
Symptoms referable to throat	S455	312	(60)	1.3	(0.2)	
Injury, other and unspecified type: hand and finger(s)	J570	208	(54)	0.9	(0.2)	
All other reasons ²	...	6,028	(460)	25.6	(1.3)	
All visits, age 15-64 years		...	86,562	(4,880)	100.0	...
Female		...	49,204	(2,749)	56.8	(0.6)
Stomach and abdominal pain, cramps and spasms	S545	5,613	(382)	6.5	(0.3)	
Chest pain and related symptoms (not referable to body systems)	S050	2,710	(222)	3.1	(0.2)	
Headache, pain in head	S210	2,089	(187)	2.4	(0.2)	
Back symptoms	S905	1,509	(135)	1.7	(0.1)	
Problems of pregnancy	S790	1,345	(148)	1.6	(0.2)	
Pain, site not referable to a specific body system	S055	1,337	(132)	1.5	(0.1)	
Cough	S440	1,118	(148)	1.3	(0.2)	
Shortness of breath	S415	1,105	(105)	1.3	(0.1)	
Symptoms referable to throat	S455	879	(109)	1.0	(0.1)	
Leg symptoms	S920	858	(115)	1.0	(0.1)	
All other reasons ²	...	30,640	(1,709)	35.4	(0.5)	
Male		...	37,358	(2,252)	43.2	(0.6)
Chest pain and related symptoms (not referable to body systems)	S050	2,693	(203)	3.1	(0.2)	
Stomach and abdominal pain, cramps, and spasms	S545	2,351	(186)	2.7	(0.2)	
Back symptoms	S905	1,455	(149)	1.7	(0.1)	
Pain, site not referable to a specific body system	S055	1,234	(128)	1.4	(0.1)	
Headache, pain in head	S210	963	(115)	1.1	(0.1)	
Leg symptoms	S920	786	(93)	0.9	(0.1)	
Cough	S440	742	(98)	0.9	(0.1)	

Table 11. Ten leading principal reasons for emergency department visits, by patient age and sex: United States, 2012

Principal reason for visit and RVC code ¹		Number of visits in thousands		Percent distribution	
		(standard error in thousands)		(standard error of percent)	
Laceration or cut of upper extremity	J225	740	(74)	0.9	(0.1)
Injury, other and unspecified type: head, neck, and face	J505	709	(101)	0.8	(0.1)
Knee symptoms	S925	640	(88)	0.7	(0.1)
All other reasons ²	...	25,045	(1,538)	28.9	(0.6)
All visits, age 65 years and over	...	20,786	(1,331)	100.0	...
Female	...	12,033	(793)	57.9	(0.9)
Chest pain and related symptoms (not referable to body systems)	S050	902	(93)	4.3	(0.4)
Shortness of breath	S415	850	(116)	4.1	(0.5)
Stomach and abdominal pain, cramps and spasms	S545	811	(103)	3.9	(0.4)
Vertigo or dizziness	S225	416	(54)	2.0	(0.2)
Back symptoms	S905	353	(60)	1.7	(0.3)
Leg symptoms	S920	338	(55)	1.6	(0.3)
General weakness	S020	322	(58)	1.6	(0.3)
Headache, pain in head	S210	319	(55)	1.5	(0.2)
Accident, not otherwise specified	J810	311	(66)	1.5	(0.3)
Hip symptoms	S915	293	(47)	1.4	(0.2)
All other reasons ²	...	7,118	(472)	34.2	(0.9)
Male	...	8,753	(593)	42.1	(0.9)
Chest pain and related symptoms (not referable to body systems)	S050	642	(89)	3.1	(0.4)
Shortness of breath	S415	636	(80)	3.1	(0.4)
Stomach and abdominal pain, cramps, and spasms	S545	526	(87)	2.5	(0.4)
General weakness	S020	303	(49)	1.5	(0.2)
Labored or difficult breathing (dyspnea)	S420	273	(62)	1.3	(0.3)
Vertigo or dizziness	S225	245	(47)	1.2	(0.2)
Leg symptoms	S920	192	(35)	0.9	(0.2)
Fever	S010	187	(47)	0.9	(0.2)
Other urinary dysfunctions	S660	186	(41)	0.9	(0.2)
Pain, site not referable to a specific body system	S055	180	(38)	0.9	(0.2)
All other reasons ²	...	5,383	(383)	25.9	(0.7)

...Category not applicable.

* Figure does not meet standards of reliability or precision.

¹Based on A Reason for Visit Classification (RVC) for Ambulatory Care, National Center for Health Statistics. Vital Health Stat 2(78) 1979. See 2012 National Hospital Ambulatory Medical Care Survey public use documentation (ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf). Reason for visit is defined by patient's own words.²Category includes all other reasons not listed above, as well as unknown and blanks.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 12. Primary diagnosis at emergency department visits, classified by major disease category: United States, 2012

Major disease category and ICD-9-CM code range ¹	Number of visits in thousands		Percent distribution		
		(standard error in thousands)	(standard error of percent)		
All visits	...	130,870	(7,182)	100.0	...
Infectious and parasitic diseases	001-139	3,452	(349)	2.6	(0.2)
Neoplasms	140-239	202	(33)	0.2	(0.0)
Endocrine, nutritional, metabolic diseases, and immunity disorders	240-279	1,933	(159)	1.5	(0.1)
Mental disorders	290-319	5,248	(409)	4.0	(0.3)
Diseases of the nervous system and sense organs	320-389	6,263	(403)	4.8	(0.2)
Diseases of the circulatory system	390-459	4,357	(376)	3.3	(0.2)
Diseases of the respiratory system	460-519	12,057	(913)	9.2	(0.4)
Diseases of the digestive system	520-579	7,549	(471)	5.8	(0.3)
Diseases of the genitourinary system	580-629	6,565	(391)	5.0	(0.2)
Diseases of the skin and subcutaneous tissue	680-709	5,097	(385)	3.9	(0.2)
Diseases of the musculoskeletal system and connective tissue	710-739	9,222	(668)	7.1	(0.3)
Symptoms, signs, and ill-defined conditions	780-799	31,664	(2,111)	24.2	(0.6)
Injury and poisoning	800-999	28,076	(1,596)	21.5	(0.5)
Fractures	800-829	3,259	(241)	2.5	(0.1)
Sprains and strains	840-848	5,864	(440)	4.5	(0.2)
Intracranial injury	850-854	560	(102)	0.4	(0.1)
Open wounds	870-897	5,772	(369)	4.4	(0.2)
Superficial injury	910-919	1,637	(134)	1.3	(0.1)
Contusion with intact skin surface	920-924	3,964	(320)	3.0	(0.2)
Foreign bodies	930-939	618	(83)	0.5	(0.1)
Burns	940-949	406	(62)	0.3	(0.1)
Trauma complications and unspecified injuries	958-959	3,232	(275)	2.5	(0.2)
Poisoning and toxic effects	960-989	735	(100)	0.6	(0.1)
Surgical and medical complications	996-999	554	(73)	0.4	(0.1)
Other injuries	...	1,475	(129)	1.1	(0.1)
Supplementary classification ²	V01-V89	3,562	(288)	2.7	(0.2)
All other diagnoses ³	...	4,240	(328)	3.2	(0.2)
Unknown or blank	...	1,381	(234)	1.1	(0.2)

....Category not applicable.

0.0 Quantity more than zero but less than 0.05.

¹Based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No. (PHS) 06-1260). However, certain codes have been combined in this table to better describe the utilization of ambulatory care services.

²Includes general medical examination, routine prenatal examination, and health supervision of an infant or child, and other diagnoses not classifiable to injury or illness.

³Includes diseases of the blood and blood-forming organs (280-289); complications of pregnancy, childbirth, and the puerperium (630-679); congenital anomalies (740-759), certain conditions originating in perinatal period (760-779), entries not codable to the ICD-9-CM (e.g., illegible entries, patient left before been seen, patient was transferred to another facility, health maintenance organization did not authorize treatment, and entries of, "none," "no diagnosis," or "no disease."

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 13. Twenty leading primary diagnosis groups and presence of chronic conditions at emergency department visits: United States, 2012

Primary diagnosis group with ICD-9-CM code(s) and chronic conditions		Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)		
All visits	...	130,870	(7,182)	100.0	...
Primary diagnosis group with ICD-9-CM code(s) ¹					
Abdominal pain	789.0	6,797	(531)	5.2	(0.3)
Chest pain	786.5	5,370	(381)	4.1	(0.2)
Spinal disorders	720-724	4,361	(356)	3.3	(0.2)
Acute upper respiratory infections, excluding pharyngitis	460-461,463-466	4,303	(450)	3.3	(0.3)
Contusion with intact skin surface	920-924	3,964	(320)	3.0	(0.2)
Open wound, excluding head	874-897	3,883	(259)	3.0	(0.2)
Cellulitis and abscess	681-682	3,220	(286)	2.5	(0.2)
Sprains and strains, excluding ankle and back	840-844,845.1,848	2,717	(221)	2.1	(0.1)
Pyrexia of unknown origin	780.6	2,471	(401)	1.9	(0.3)
Rheumatism, excluding back	725-729	2,347	(233)	1.8	(0.1)
Arthropathies and related disorders	710-719	2,266	(212)	1.7	(0.1)
Urinary tract infection, site not specified	599.0	2,260	(198)	1.7	(0.1)
Headache	784.0	2,223	(246)	1.7	(0.2)
Fractures, excluding lower limb	800-819	2,204	(179)	1.7	(0.1)
Sprains and strains of back	846,847	2,004	(201)	1.5	(0.1)
Open wound of head	870-873	1,889	(179)	1.4	(0.1)
Otitis media and eustachian tube disorders	381-382	1,727	(213)	1.3	(0.1)
Asthma	493	1,695	(187)	1.3	(0.1)
Complications of pregnancy, childbirth, and the puerperium	630-679.99	1,650	(166)	1.3	(0.1)
Superficial injuries	910-919	1,637	(134)	1.3	(0.1)
All other diagnoses ²	...	71,882	(3,809)	54.9	(0.6)
Chronic conditions categories ³					
Cancer	...	3,833	(325)	2.9	(0.2)
Cerebrovascular disease or history of stroke or transient ischemic attack (TIA)	...	2,888	(284)	2.2	(0.2)
Chronic obstructive pulmonary disease (COPD)	...	4,046	(331)	3.1	(0.2)
Condition requiring dialysis	...	1,336	(202)	1.0	(0.1)
Congestive heart failure	...	2,582	(254)	2.0	(0.2)
Dementia	...	1,357	(160)	1.0	(0.1)
Diabetes	...	11,350	(986)	8.7	(0.5)
History of heart attack	...	2,679	(262)	2.0	(0.2)
History of pulmonary embolism or deep vein thrombosis (DVT)	...	794	(103)	0.6	(0.1)
HIV infection or AIDS ⁴	...	517	(101)	0.4	(0.1)
None of the above	...	97,741	(5,470)	74.7	(1.9)
Blank	...	10,911	(2,790)	8.3	(2.0)

...Category not applicable.

¹Based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No. (PHS) 06-1260).

²Includes all other reasons not listed above as well as unknown and blanks.

³Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses. Combined total of visits by patients with chronic conditions and percent of visits exceeds 100% because more than one chronic condition may be reported per visit.

⁴HIV is human immunodeficiency virus. AIDS is acquired immune deficiency syndrome.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 14. Presence of chronic conditions at emergency department visits by selected states: United States, 2012

Selected chronic conditions ¹	California		Florida		Illinois		New York		Texas	
	Percent of visits (standard error of percent)									
Cancer	3.4	(0.7)	3.9	(1.0)	3.9	(0.5)	2.5	(0.5)	2.7	(0.9)
Cerebrovascular disease or history of stroke or transient ischemic attack (TIA)	3.0	(0.5)	3.0	(1.1)	2.9	(0.4)	1.8	(0.5)	1.6	(0.6)
Chronic obstructive pulmonary disease (COPD)	2.7	(0.3)	3.0	(0.8)	4.3	(0.4)	3.1	(0.5)	2.7	(0.8)
Condition requiring dialysis	2.1	(0.6)	0.7	(0.2)	0.8	(0.2)	0.5	(0.2)	1.2	(0.4)
Congestive heart failure	2.1	(0.4)	3.3	(1.1)	4.0	(0.5)	1.8	(0.5)	1.5	(0.6)
Dementia	1.4	(0.3)	2.1	(0.6)	1.5	(0.3)	1.4	(0.5)	1.0	(0.4)
Diabetes	10.5	(1.0)	8.7	(1.7)	8.8	(0.9)	8.3	(0.9)	9.2	(1.9)
History of heart attack	1.6	(0.3)	2.9	(1.0)	3.2	(0.5)	1.8	(0.4)	2.7	(1.0)
History of pulmonary embolism or deep vein thrombosis (DVT)	0.5	(0.2)	0.6	(0.2)	0.7	(0.2)	0.3	(0.1)	0.5	(0.3)
HIV infection or AIDS ²	0.8	(0.5)	0.8	(0.5)	0.5	(0.2)	0.4	(0.2)	0.1	(0.1)
None of the above	76.9	(2.0)	77.8	(4.0)	74.7	(2.2)	82.2	(1.6)	75.9	(6.7)
Blank	3.3	(1.2)	2.2	(1.0)	5.9	(3.1)	1.6	(0.4)	9.0	(6.9)

¹Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses. Percent of visits by patients with chronic conditions exceeds 100% because more than one chronic condition may be reported per visit.

²HIV is human immunodeficiency virus. AIDS is acquired immune deficiency syndrome.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 15. Twenty leading primary diagnosis groups for emergency department visits, by patient age and sex: United States, 2012

Principal diagnosis group and ICD-9-CM code(s) ¹	Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)
All visits	...130,870 (7,182)	100.0 ...
All visits, aged under 15 years	... 23,522 (2,299)	100.0 ...
Female	... 11,475 (1,158)	48.8 (1.1)
Acute upper respiratory infections, excluding pharyngitis	460-461,463-466 992 (147)	4.2 (0.4)
Pyrexia of unknown origin	780.6 879 (203)	3.7 (0.6)
Otitis media and eustachian tube disorders	381-382 620 (119)	2.6 (0.4)
Contusion with intact skin surface	920-924 428 (67)	1.8 (0.2)
Open wound, excluding head	874-897 374 (64)	1.6 (0.3)
Asthma	493 370 (79)	1.6 (0.3)
Acute pharyngitis	462 324 (60)	1.4 (0.3)
Abdominal pain	789.0 289 (50)	1.2 (0.2)
Open wound of head	870-873 264 (46)	1.1 (0.2)
Superficial injuries	910-919 250 (54)	1.1 (0.2)
Cough	786.2 242 (65)	1.0 (0.3)
Fractures, excluding lower limb	800-819 242 (43)	1.0 (0.2)
Urinary tract infection, site not specified	599.0 208 (45)	0.9 (0.2)
Streptococcal sore throat	034.0 *203 (85)	*0.9 (0.3)
Sprains and strains, excluding ankle and back	840-844,845.1,848 174 (35)	0.7 (0.2)
Cellulitis and abscess	681-682 159 (35)	0.7 (0.1)
Symptoms involving skin and other integumentary tissue	782 151 (38)	0.6 (0.2)
Conjunctivitis	372.0-372.3 150 (39)	0.6 (0.2)
Unspecified viral and chlamydial infection	079.9 150 (33)	0.6 (0.2)
Constipation	564.0 137 (38)	0.6 (0.2)
All other reasons ²	... 4,867 (452)	20.7 (0.9)
Male	... 12,047 (1,195)	51.2 (1.1)
Acute upper respiratory infections, excluding pharyngitis	460-461,463-466 1,006 (202)	4.3 (0.5)
Pyrexia of unknown origin	780.6 878 (173)	3.7 (0.6)
Otitis media and eustachian tube disorders	381-382 698 (102)	3.0 (0.4)
Open wound of head	870-873 553 (85)	2.4 (0.3)
Asthma	493 408 (82)	1.7 (0.2)
Open wound, excluding head	874-897 405 (74)	1.7 (0.3)
Contusion with intact skin surface	920-924 354 (53)	1.5 (0.2)
Sprains and strains, excluding ankle and back	840-844,845.1,848 306 (76)	1.3 (0.3)
Fractures, excluding lower limb	800-819 291 (45)	1.2 (0.2)
Abdominal pain	789.0 268 (59)	1.1 (0.2)
Unspecified viral and chlamydial infection	079.9 243 (49)	1.0 (0.2)
Acute pharyngitis	462 242 (58)	1.0 (0.2)
Cough	786.2 216 (46)	0.9 (0.2)
Superficial injuries	910-919 189 (37)	0.8 (0.2)
Pneumonia	480-486 *174 (63)	*0.7 (0.2)
Cellulitis and abscess	681-682 172 (38)	0.7 (0.2)
Convulsions	780.3 * ...	* ...
Streptococcal sore throat	034.0 129 (31)	0.6 (0.1)
Sprains and strains of ankle	845.0 * ...	* ...
Noninfectious enteritis and colitis	555-558 *119 (36)	0.5 (0.1)
All other reasons ²	... 5,121 (483)	21.8 (0.9)
All visits, aged 15-64 years	... 86,562 (4,880)	100.0 (0.0)

Table 15. Twenty leading primary diagnosis groups for emergency department visits, by patient age and sex: United States, 2012

Principal diagnosis group and ICD-9-CM code(s) ¹	Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)
Female	... 49,204 (2,749)	56.8 (0.6)
Abdominal pain	789.0 3,761 (310)	4.3 (0.3)
Chest pain	786.5 2,181 (175)	2.5 (0.2)
Spinal disorders	720-724 1,962 (171)	2.3 (0.1)
Complications of pregnancy, childbirth, and the puerperium	630-679.99 1,644 (167)	1.9 (0.2)
Headache	784.0 1,361 (147)	1.6 (0.1)
Acute upper respiratory infections, excluding pharyngitis	460-461,463-466 1,324 (177)	1.5 (0.2)
Contusion with intact skin surface	920-924 1,268 (121)	1.5 (0.1)
Urinary tract infection, site not specified	599.0 1,268 (135)	1.5 (0.1)
Cellulitis and abscess	681-682 1,240 (136)	1.4 (0.1)
Open wound, excluding head	874-897 998 (101)	1.2 (0.1)
Sprains and strains, excluding ankle and back	840-844,845.1,848 996 (121)	1.2 (0.1)
Rheumatism, excluding back	725-729 976 (115)	1.1 (0.1)
Sprains and strains of back	846,847 975 (116)	1.1 (0.1)
Arthropathies and related disorders	710-719 802 (85)	0.9 (0.1)
Diseases of the teeth and supporting structures	520-525 790 (92)	0.9 (0.1)
Migraine	346 790 (84)	0.9 (0.1)
Acute pharyngitis	462 624 (83)	0.7 (0.1)
Noninflammatory disorders of the female genital organs	620,622-624 622 (88)	0.7 (0.1)
Anxiety states	300.0 620 (79)	0.7 (0.1)
Asthma	493 595 (71)	0.7 (0.1)
All other reasons ²	... 24,405 (1,410)	28.2 (0.5)
Male	... 37,358 (2,252)	43.2 (0.6)
Chest pain	786.5 1,922 (172)	2.2 (0.2)
Spinal disorders	720-724 1,754 (184)	2.0 (0.2)
Abdominal pain	789.0 1,714 (198)	2.0 (0.2)
Open wound, excluding head	874-897 1,671 (155)	1.9 (0.2)
Contusion with intact skin surface	920-924 1,347 (167)	1.6 (0.2)
Cellulitis and abscess	681-682 1,244 (157)	1.4 (0.1)
Sprains and strains, excluding ankle and back	840-844,845.1,848 1,098 (116)	1.3 (0.1)
Drug dependence and nondependence abuse of drugs	304-305 935 (106)	1.1 (0.1)
Rheumatism, excluding back	725-729 790 (104)	0.9 (0.1)
Arthropathies and related disorders	710-719 784 (98)	0.9 (0.1)
Sprains and strains of back	846,847 757 (110)	0.9 (0.1)
Acute upper respiratory infections, excluding pharyngitis	460-461,463-466 736 (104)	0.9 (0.1)
Fractures, excluding lower limb	800-819 702 (78)	0.8 (0.1)
Open wound of head	870-873 609 (82)	0.7 (0.1)
Diseases of the teeth and supporting structures	520-525 585 (74)	0.7 (0.1)
Superficial injuries	910-919 541 (57)	0.6 (0.1)
Psychoses, excluding major depressive disorder	290-295,296.0-296.1,296.4-299 541 (112)	0.6 (0.1)
Headache	784.0 493 (83)	0.6 (0.1)
Calculus of kidney and ureter	592 466 (67)	0.5 (0.1)
Anxiety states	300.0 378 (64)	0.4 (0.1)
All other reasons ²	... 18,292 (1,098)	21.1 (0.5)
All visits, aged 65 years and over	... 20,786 (1,331)	100.0 (0.0)
Female	... 12,033 (793)	57.9 (0.9)
Chest pain	786.5 622 (76)	3.0 (0.3)

Table 15. Twenty leading primary diagnosis groups for emergency department visits, by patient age and sex: United States, 2012

Principal diagnosis group and ICD-9-CM code(s) ¹	Number of visits in thousands		Percent distribution (standard error of percent)	
	(standard error in thousands)	(standard error in thousands)	(standard error of percent)	(standard error of percent)
Heart disease, excluding ischemic	91-392.0,393-398,402,404,415-416,420-429	490	(64)	2.4 (0.3)
Abdominal pain		789.0	(70)	2.3 (0.3)
Urinary tract infection, site not specified		599.0	(68)	2.1 (0.3)
Contusion with intact skin surface		920-924	(72)	2.1 (0.3)
Spinal disorders		720-724	(55)	1.9 (0.3)
Arthropathies and related disorders		710-719	(55)	1.7 (0.2)
Fractures, excluding lower limb		800-819	(61)	1.7 (0.3)
Dyspnea and respiratory abnormalities		786.0	(62)	1.6 (0.3)
Syncope and collapse		780.2	(52)	1.4 (0.2)
Rheumatism, excluding back		725-729	(52)	1.4 (0.2)
Open wound, excluding head		874-897	(47)	1.3 (0.2)
Fracture of the lower limb		820-829	(49)	1.1 (0.2)
Dizziness and giddiness		780.4	(37)	1.0 (0.2)
Pneumonia		480-486	(45)	1.0 (0.2)
Headache		784.0	*	* ...
Cellulitis and abscess		681-682	(39)	0.9 (0.2)
Cerebrovascular disease		430-438	(37)	0.8 (0.2)
Chronic and unspecified bronchitis		490-491	(39)	0.8 (0.2)
Essential hypertension		401	(33)	0.8 (0.2)
All other reasons ²		...	5,786 (388)	27.8 (0.8)
Male		...	8,753 (593)	42.1 (0.9)
Chest pain		786.5	(76)	2.4 (0.3)
Dyspnea and respiratory abnormalities		786.0	(72)	1.9 (0.3)
Heart disease, excluding ischemic	91-392.0,393-398,402,404,415-416,420-429	314	(54)	1.5 (0.2)
Abdominal pain		789.0	(47)	1.4 (0.2)
Symptoms involving the urinary system		788	(61)	1.3 (0.3)
Pneumonia		480-486	(46)	1.2 (0.2)
Syncope and collapse		780.2	(48)	1.1 (0.2)
Cellulitis and abscess		681-682	(52)	1.1 (0.2)
Spinal disorders		720-724	(59)	1.0 (0.3)
Fractures, excluding lower limb		800-819	(49)	1.0 (0.2)
Cerebrovascular disease		430-438	(55)	1.0 (0.2)
Specific procedures and aftercare		V50-V59.9	(40)	0.9 (0.2)
Open wound, excluding head		874-897	(39)	0.8 (0.2)
Pyrexia of unknown origin		780.6	*	* ...
Dizziness and giddiness		780.4	*	* ...
Arthropathies and related disorders		710-719	(30)	0.7 (0.1)
Contusion with intact skin surface		920-924	(29)	0.7 (0.1)
Chronic and unspecified bronchitis		490-491	(29)	0.6 (0.1)
Essential hypertension		401	*	* ...
Epistaxis		784.7	*	* ...
All other reasons ²		...	4,340 (296)	20.9 (0.9)

...Category not applicable.

*Figure does not meet standards of reliability or precision.

¹Based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No. (PHS) 06-1260). However, certain codes have been combined in this table to better describe the use of ambulatory care services.

²Includes all other reasons not listed above as well as unknown and blanks.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 16. Injury visits to emergency department by selected patient and hospital characteristics: United States, 2012

Selected patient and hospital characteristics	Number of visits		Percent distribution		Number of visits per 100	
	in thousands	(standard error in thousands)	(standard error of percent)	...	persons per year ¹	(standard error of rate)
All injury visits ^{2,3}	37,427	(2,123)	100.0	...	12.1	(0.7)
Patient characteristics						
Age:						
Under 15 years	7,420	(539)	19.8	(1.0)	12.1	(0.9)
Under 1 year	436	(82)	1.2	(0.2)	11.1	(2.1)
1–4 years	2,339	(191)	6.3	(0.4)	14.6	(1.2)
5–14 years	4,646	(357)	12.4	(0.7)	11.3	(0.9)
15–24 years	6,706	(476)	17.9	(0.6)	15.6	(1.1)
25–44 years	10,656	(678)	28.5	(0.9)	13.2	(0.8)
45–64 years	7,696	(506)	20.6	(0.7)	9.4	(0.6)
65 years and over	4,949	(361)	13.2	(0.6)	11.8	(0.9)
65–74 years	1,972	(181)	5.3	(0.3)	8.3	(0.8)
75 years and over	2,978	(239)	8.0	(0.5)	16.5	(1.3)
Sex and age						
Female	18,495	(1,060)	49.4	(0.9)	11.7	(0.7)
Under 15 years	3,622	(287)	9.7	(0.6)	12.1	(1.0)
15–24 years	2,981	(235)	8.0	(0.4)	14.0	(1.1)
25–44 years	4,894	(315)	13.1	(0.6)	11.9	(0.8)
45–64 years	3,801	(288)	10.2	(0.5)	9.0	(0.7)
65–74 years	1,126	(118)	3.0	(0.3)	8.9	(0.9)
75 years and over	2,071	(192)	5.5	(0.4)	19.3	(1.8)
Male	18,932	(1,170)	50.6	(0.9)	12.6	(0.8)
Under 15 years	3,798	(305)	10.2	(0.6)	12.2	(1.0)
15–24 years	3,725	(299)	10.0	(0.5)	17.2	(1.4)
25–44 years	5,762	(447)	15.4	(0.7)	14.5	(1.1)
45–64 years	3,895	(276)	10.4	(0.4)	9.8	(0.7)
65–74 years	846	(102)	2.3	(0.2)	7.6	(0.9)
75 years and over	907	(100)	2.4	(0.3)	12.4	(1.4)
Hospital characteristics						
Ownership						
Voluntary	27,707	(2,028)	74.0	(3.2)	9.0	(0.7)
Proprietary	5,079	(1,044)	13.6	(2.7)	1.7	(0.3)
Government	4,641	(918)	12.4	(2.4)	1.5	(0.3)
Geographic region						
Northeast	7,847	(976)	21.0	(2.3)	14.3	(1.8)
Midwest	7,222	(851)	19.3	(2.1)	10.9	(1.3)
South	14,366	(1,492)	38.4	(2.9)	12.5	(1.3)
West	7,992	(776)	21.4	(2.0)	11.0	(1.1)
Metropolitan status ^{4,5}						
Metropolitan statistical area	31,499	(1,971)	84.2	(2.7)	12.1	(0.8)
Non-metropolitan statistical area	5,928	(1,106)	15.8	(2.7)	12.3	(2.3)

...Category not applicable.

¹Visit rates for age, sex, ownership, and region are based on the July 1, 2012, set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

²Injury visits includes first-, second-, and third-listed reason for visit, cause of injury, and diagnosis codes related to injury and poisoning. Injury visits do not include adverse effects of medicinal drugs and adverse effects or complications of medical and surgical care. Injury visits represent 28.6% (SE = 0.6) of all emergency department visits.

³Injury visits presented prior to 2010 included visits for a selection of other reason and diagnosis codes relating to various conditions (for example, carpal tunnel syndrome, allergic reactions, alcohol and drug abuse, birth trauma, and others). For more details see the 2012 NHAMCS Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf.

⁴Population estimates by metropolitan statistical area status are based on estimates of the civilian noninstitutionalized population of United States as of July 1, 2012, from the 2012 National Health Interview Survey, National Center for Health Statistics, compiled according to the December 2009 Office of Management and Budget definition of core-based statistical areas. See <http://www.census.gov/population/metro/data/pastmetro.html> for more about metropolitan statistical area definitions.

⁵MSA is metropolitan statistical area.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 17. Injury visits to emergency departments, by race, age, and ethnicity: United States, 2012

Patient characteristics	Number of visits		Percent distribution		Number of visits per 100 persons per year	
	(standard error in thousands)	(standard error of percent)	(standard error of percent)	(standard error of rate) ¹	(standard error of rate) ¹	(standard error of rate) ¹
All injury visits ²	37,427	(2,123)	100.0	...	12.1	(0.7)
Race and age ³						
Reported	30,884	(2,036)	82.5	(2.1)	...	...
Imputed (missing)	6,543	(811)	17.5	(2.1)	...	...
Reported plus imputed ⁴						
White	28,735	(1,700)	76.8	(1.5)	11.9	(0.7)
Under 15 years	5,550	(421)	14.8	(0.8)	12.4	(0.9)
15–24 years	5,066	(381)	13.5	(0.6)	15.8	(1.2)
25–44 years	8,011	(563)	21.4	(1.0)	13.0	(0.9)
45–64 years	5,851	(415)	15.6	(0.6)	8.8	(0.6)
65–74 years	1,638	(157)	4.4	(0.3)	8.1	(0.8)
75 years and over	2,619	(231)	7.0	(0.5)	16.6	(1.5)
Black or African American	7,214	(714)	19.3	(1.4)	18.1	(1.8)
Under 15 years	1,572	(219)	4.2	(0.5)	17.1	(2.4)
15–24 years	1,379	(209)	3.7	(0.5)	20.8	(3.2)
25–44 years	2,152	(208)	5.8	(0.4)	20.3	(2.0)
45–64 years	1,614	(187)	4.3	(0.5)	16.6	(1.9)
65–74 years	235	(59)	0.6	(0.2)	10.7	(2.7)
75 years and over	262	(47)	0.7	(0.1)	18.2	(3.3)
Other ⁵	1,478	(233)	4.0	(0.6)	5.3	(0.8)
Reported only ⁶						
White	23,857	(1,633)	77.2	(1.7)	...	...
Black or African American	5,868	(672)	19.0	(1.6)	...	...
Other ⁵	1,160	(216)	3.8	(0.7)	...	...
Ethnicity ³						
Reported	25,277	(1,940)	67.5	(3.4)	8.2	(0.6)
Imputed(missing)	12,150	(1,421)	32.5	(3.4)	3.9	(0.5)
Reported plus imputed ⁷						
Hispanic	5,638	(509)	15.1	(1.2)	10.8	(1.0)
Not Hispanic	31,788	(1,949)	84.9	(1.2)	12.4	(0.8)
White	23,709	(1,534)	63.4	(1.7)	12.2	(0.8)
Black or African American	6,718	(691)	18.0	(1.4)	18.0	(1.8)
Other ⁵	1,361	(223)	3.6	(0.6)	5.6	(0.9)
Reported only ⁸						
Hispanic	4,002	(411)	15.8	(1.6)	...	...
Not Hispanic	21,275	(1,822)	84.2	(1.6)	...	...

...Category not applicable.

¹Visit rates are based on the July 1, 2012, estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

²The National Hospital Ambulatory Medical Care Survey definition of injury visits, as shown on this table, changed in 2010 and includes first-, second-, and third-listed reason for visit and diagnosis codes that are injury or poison related. Adverse effects and complications are excluded. Reason for visit was coded using A Reason for Visit Classification for Ambulatory Care; diagnosis and external cause of injury were coded using the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD–9–CM), U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition, DHHS Pub No. (PHS) 06-1260. Injury visits, using this definition, accounted for 28.6% (SE = 0.6) of all emergency department visits in 2012. For more details see the 2012 NHAMCS Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf.

³The race groups, white, black or African American, and other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. For 2012, race data were missing for 18.2 percent of visits, and ethnicity data were missing for 31.1% of visits. The National Center for Health Statistics uses model-based single imputation for NHAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 NHAMCS Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf.

⁴Reported plus imputed⁷ includes race that was reported directly by emergency departments and imputed values for the 17.5% of injury visits for which race was not reported.

⁵Other race includes the categories of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

⁶Reported only⁶ calculations are based on 30,884 visits (in thousands) with race reported directly by emergency departments.

⁷Reported plus imputed⁷ includes ethnicity that was reported directly by emergency departments and imputed values for the 32.5% of injury visits for which ethnicity was not reported.

⁸Reported only⁸ calculations are based on 25,277 visits (in thousands) with ethnicity reported directly by emergency departments.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 18. Emergency department injury visits, by body site: United States, 2012

Body site ¹	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All injury visits ^{2,3}	37,427	(2,123)	100.0	...
Head and neck	4,551	(327)	12.2	(0.5)
Traumatic brain injury	436	(70)	1.2	(0.2)
Other head	1,335	(137)	3.6	(0.3)
Face	1,288	(144)	3.4	(0.3)
Eye	530	(69)	1.4	(0.2)
Head, face, and neck unspecified	961	(106)	2.6	(0.2)
Spinal cord	*	...	*	...
Vertebral column	1,419	(152)	3.8	(0.4)
Cervical	741	(86)	2.0	(0.2)
Thoracic and dorsal	145	(34)	0.4	(0.1)
Lumbar	515	(84)	1.4	(0.2)
Other vertebral column	*	...	*	...
Torso	1,583	(143)	4.2	(0.3)
Chest	580	(74)	1.6	(0.2)
Abdomen	*	...	*	...
Pelvis and urogenital	225	(46)	0.6	(0.1)
Trunk	227	(45)	0.6	(0.1)
Back and buttocks	443	(63)	1.2	(0.2)
Upper extremity	6,209	(381)	16.6	(0.6)
Shoulder and upper arm	1,172	(115)	3.1	(0.3)
Forearm and elbow	929	(111)	2.5	(0.3)
Wrist, hand, and fingers	3,679	(267)	9.8	(0.5)
Other and unspecified upper extremity	429	(62)	1.2	(0.2)
Lower extremity	5,492	(392)	14.7	(0.6)
Hip	426	(70)	1.1	(0.2)
Upper leg and thigh	*	...	*	...
Knee	363	(71)	1.0	(0.2)
Lower leg and ankle	1,516	(153)	4.1	(0.3)
Foot and toes	1,291	(120)	3.5	(0.3)
Other and unspecified lower extremity	1,829	(159)	4.9	(0.3)
System-wide	1,796	(157)	4.8	(0.3)
Other and unspecified body site injuries	2,117	(206)	5.7	(0.4)
Injury visit with multiple injury diagnoses	6,765	(507)	18.1	(0.7)
Injury visit without injury diagnoses ⁴	6,970	(457)	18.6	(0.7)
Musculoskeletal conditions	2,115	(193)	5.7	(0.4)
Skin conditions	978	(108)	2.6	(0.3)
Symptoms, signs, ill-defined conditions	1,107	(122)	3.0	(0.3)
Mental disorders	612	(80)	1.6	(0.2)
Observation and evaluation	264	(49)	0.7	(0.1)
All other diagnoses	1,895	(147)	5.1	(0.3)
Unknown ⁵	518	(83)	1.4	(0.2)

...Category not applicable.

*Figure does not meet standard of reliability or precision.

¹Based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition, DHHS Pub No. (PHS 06-1260)). A detailed description of the Barell Injury Diagnosis Matrix: Classification by Region of Body and Nature of the Injury can be found in the 2003 Advance Data report. Available at: http://www.cdc.gov/nchs/injury/ice/barell_matrix.htm. In this table, injury visits with a single injury diagnosis, whether first-, second-, or third-listed, are reported in the relevant body region category; 18.1% of injury visits had multiple injury diagnoses and are shown in a separate row of the table. Injury visits with multiple injury diagnoses can include visits in which there were multiple injuries within a single body site as well as visits in which there were injuries to more than one body site.

²Injury visits includes first-, second-, and third-listed reason for visit, cause of injury, and diagnosis codes related to injury and poisoning. Injury visits do not include adverse effects and complication codes. Injury visits represent 28.6% (SE = 0.6) of all emergency department visits.

³The definition of injury-related visits changed in 2010. Prior to 2010, injury-related visits included visits for adverse effects of medical or surgical care, adverse effects of medicinal drugs, and a broader range of diagnosis codes. For details see the 2012 NHAMCS Public Use Data File Documentation at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc2012_ed.pdf.

⁴"Injury visit without injury diagnosis" include visits where injury status was based on first-, second-, or third-listed reason for visit or cause of injury codes. These are shown by their primary diagnosis group.

⁵Includes blank, uncodable, and illegible diagnoses.

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

Table 19. Emergency department visits related to injury, poisoning, and adverse effect, by intent and mechanism: United States, 2012

Intent and mechanism ¹	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits related to injury, poisoning, and adverse effect ^{1,2}	39,979	(2,259)	100.0	...
Unintentional injuries	28,153	(1,697)	70.4	(1.1)
Falls	9,674	(672)	24.2	(0.8)
Motor vehicle traffic	3,511	(295)	8.8	(0.5)
Struck against or struck accidentally by objects or persons	3,335	(265)	8.3	(0.4)
Overexertion and strenuous movements	1,969	(178)	4.9	(0.4)
Cutting or piercing instruments or objects	1,933	(150)	4.8	(0.4)
Natural and environmental factors	1,671	(173)	4.2	(0.4)
Poisoning	964	(106)	2.4	(0.2)
Foreign body	819	(92)	2.1	(0.2)
Caught accidentally in or between objects	626	(77)	1.6	(0.2)
Fire and flames, hot substances or object, caustic or corrosive and steam	396	(57)	1.0	(0.1)
Pedal cycle, nontraffic	328	(62)	0.8	(0.2)
Motor vehicle, nontraffic and other	250	(53)	0.6	(0.1)
Machinery	172	(37)	0.4	(0.1)
Other transportation	*	...	*	...
Suffocation	*	...	*	...
Other mechanism ³	1,990	(203)	5.0	(0.4)
Mechanism unspecified	336	(58)	0.8	(0.1)
Intentional injuries	2,120	(181)	5.3	(0.4)
Assault	1,655	(147)	4.1	(0.3)
Unarmed fight or brawl, striking by blunt or thrown object	798	(90)	2.0	(0.2)
Cutting or piercing instrument	*	...	*	...
Other and unspecified mechanism ⁴	753	(92)	1.9	(0.2)
Self-inflicted	419	(77)	1.1	(0.2)
Poisoning by solid or liquid substances, gases, and vapors	262	(62)	0.7	(0.2)
Other and unspecified mechanism ⁵	157	(33)	0.4	(0.1)
Other causes of violence	*	...	*	...
Injuries of undetermined intent	502	(84)	1.3	(0.2)
Adverse effects of medical treatment	1,794	(164)	4.5	(0.3)
Medical and surgical complications	1,215	(124)	3.0	(0.3)
Adverse drug effects	579	(83)	1.5	(0.2)
Alcohol and drug use ⁶	201	(41)	0.5	(0.1)
Unknown cause ⁷	7,209	(532)	18.0	(1.0)

...Category not applicable.

*Figure does not meet standard of reliability or precision.

¹Based on "Supplementary Classification of External Cause of Injury or Poisoning" in the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition, DHHS Pub No. (PHS) 06-1260. A detailed description of the ICD-9-CM E-codes used to create the groupings in this table can be found in Appendix Table I.

²The National Hospital Ambulatory Medical Care Survey definition of visits related to injury, poisoning, and adverse effect, as shown in this table, changed in 2010 and includes first-, second-, and third-listed reason for visit, cause of injury, and diagnosis codes related to injury, poisoning, and adverse effects of medical or surgical care or adverse effects of medicinal drugs. Such visits accounted for 30.6% (SE = 0.6) of all emergency department visits in 2012. Reason for visit was coded using A Reason for Visit Classification for Ambulatory Care; diagnosis and external cause of injury were coded using the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM). For more information on why this definition changed, see the 2012 NHAMCS Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc12_ed.pdf.

³Includes drowning, firearms, and other mechanism.

⁴Includes assaults by firearms, explosive, and other mechanism.

⁵Includes injury by cutting and piercing instrument, and other and unspecified mechanism.

⁶Alcohol and drug abuse are not contained in the "Supplementary Classification of External Causes of Injury and Poisoning," but are frequently recorded as a cause of injury or poisoning.

⁷Includes illegible entries and blanks.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 20. Selected diagnostic and screening services ordered or provided at emergency department visits: United States, 2012

Diagnostic and screening services ordered or provided	Number of visits in thousands ¹		Percent of visits	
	(standard error in thousands)		(standard error of percent)	
All visits	130,870	(7,182)	...	...
One or more diagnostic or screening service listed	88,925	(5,280)	68.0	(1.2)
None	35,627	(1,955)	27.2	(0.9)
Blank	*6,318	(1,969)	4.8	(1.5)
Blood tests				
Any blood test listed	52,291	(3,183)	40.0	(1.2)
Complete blood count	45,075	(2,716)	34.4	(1.2)
Glucose	20,063	(2,099)	15.3	(1.4)
Blood urea nitrogen or creatinine	19,689	(2,188)	15.0	(1.5)
Electrolytes	14,889	(1,729)	11.4	(1.2)
Cardiac enzymes	9,681	(929)	7.4	(0.7)
Prothrombin time or international normalized ratio (INR)	8,200	(980)	6.3	(0.7)
Liver function tests	7,989	(903)	6.1	(0.7)
Blood culture	5,448	(522)	4.2	(0.3)
Brain natriuretic peptide (BNP)	3,346	(412)	2.6	(0.3)
Arterial Blood Gases	2,631	(462)	2.0	(0.4)
D-dimer	2,626	(353)	2.0	(0.2)
Blood alcohol concentration	2,488	(262)	1.9	(0.2)
Lactate	1,164	(211)	0.9	(0.2)
Other blood test	31,717	(2,429)	24.2	(1.2)
Imaging				
Any imaging	59,757	(3,744)	45.7	(1.0)
X-Ray	42,859	(2,901)	32.8	(1.1)
Computed tomography scan	20,106	(1,371)	15.4	(0.5)
Head	9,331	(719)	7.1	(0.3)
Abdomen or pelvis	7,193	(527)	5.5	(0.3)
Chest	2,363	(230)	1.8	(0.1)
Other	3,131	(304)	2.4	(0.2)
Ultrasound	4,465	(325)	3.4	(0.2)
Magnetic resonance imaging scan	803	(120)	0.6	(0.1)
Intravenous contrast	350	(691)	0.3	(0.1)
Other imaging	2,163	(324)	1.7	(0.2)
Examinations and tests				
Urinalysis	31,105	(2,065)	23.8	(0.8)
Electrocardiogram	23,369	(1,572)	17.9	(0.7)
Cardiac monitor	9,168	(924)	7.0	(0.6)
Urine culture	8,742	(858)	6.7	(0.5)
Pregnancy test or HCG test ²	7,582	(603)	10.4	(0.6)
Toxicology screen	3,909	(420)	3.0	(0.3)
Influenza test	1,531	(378)	1.2	(0.3)
Wound culture	1,234	(208)	0.9	(0.1)
HIV test ³	*579	(191)	0.4	(0.2)
Other test or service	18,659	(1,701)	14.3	(1.0)

...Category not applicable.

*Figure does not meet standard of reliability or precision.

¹Total exceeds "All visits" because more than one service may be reported per visit.²HCG is human chorionic gonadotropin. Based on 72,712,000 female visits.³HIV is human immunodeficiency virus.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 21. Selected procedures at emergency department visits: United States, 2012

Procedure performed	Number of visits in thousands		Percent distribution	
	(standard error in thousands)		(standard error of percent)	
All visits	130,870	(7,182)	...	...
One or more procedure listed	62,041	(4,060)	47.4	(1.5)
None ¹	65,377	(3,912)	50.0	(1.5)
Blank ²	3,451	(443)	2.6	(0.3)
Intravenous fluids	35,556	(2,566)	27.2	(1.1)
Cast, splint, or wrap	7,307	(611)	5.6	(0.3)
Nebulizer therapy	3,897	(386)	3.0	(0.2)
Suturing or staples	3,659	(260)	2.8	(0.2)
Bladder catheter	2,392	(247)	1.8	(0.2)
Pelvic exam	2,218	(238)	1.7	(0.2)
Skin adhesives	1,671	(235)	1.3	(0.2)
Incision and drainage	1,262	(171)	1.0	
Central line	*434	(144)	*0.3	(0.1)
BiPAP or CPAP ³	333	(76)	0.3	(0.1)
Endotracheal intubation	219	(47)	0.2	(0.0)
Lumbar puncture	169	(48)	0.1	(0.0)
Cardiopulmonary resuscitation	*	...	*	...
Other	15,164	(1,662)	11.6	(1.1)

...Category not applicable.

* Figure does not meet standards of reliability or precision.

0.0 Quantity more than zero but less than 0.05.

¹The "None" checkbox was marked on the Patient Record Form (PRF).

²No checkboxes were marked on PRF.

³BiPAP is variable or bilevel positive airway pressure. CPAP is continuous positive airway pressure.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 22. Medication therapy and number of medications mentioned at emergency department visits: United States, 2012

Medication therapy ¹	Number of visits in thousands		Percent distribution	
	(standard error in thousands)		(standard error of percent)	
All visits	130,870	(7,182)	100.0	...
Visits with mention of medication ²	98,800	(5,968)	75.5	(1.9)
Visits without mention of medication	32,069	(3,095)	24.5	(1.9)
Number of medications provided or prescribed ³				
All visits	130,870	(7,182)	100.0	...
0	32,069	(3,095)	24.5	(1.9)
1	30,116	(1,841)	23.0	(0.8)
2	26,490	(1,736)	20.2	(0.6)
3	17,253	(1,095)	13.2	(0.4)
4	10,642	(781)	8.1	(0.4)
5	6,018	(484)	4.6	(0.3)
6	3,504	(321)	2.7	(0.2)
7	1,737	(200)	1.3	(0.1)
8	1,100	(152)	0.8	(0.1)
9	615	(99)	0.5	(0.1)
10	933	(137)	0.7	(0.1)
11	313	(62)	0.2	(0.1)
12	*	...	*	...

...Category not applicable.

* Figure does not meet standards of precision or reliability.

¹Includes prescription drugs, over-the-counter preparations, immunizations, and anesthetics.

²Visits at which one or more drugs were given in the emergency department (ED) or prescribed at discharge (up to twelve per visit). Also defined as drug visit.

³There were 268,745,420 drug mentions at ED visits in 2012. The average drug mention rate was 2.1 drug mentions per ED visit (SE = 0.07). For visits with at least one drug mention, the average drug mention rate was 2.7 drugs per visit (SE = 0.05).

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 23. Twenty most frequently mentioned drugs by therapeutic drug categories at emergency department visits: United States, 2012

Drug category ¹	Number of occurrence in thousands (standard error in thousands)		Percent of drug mentions ² (standard error of percent)	
Analgesics ³	85,470	(5,589)	31.8	(0.5)
Antiemetic or antivertigo agents	31,789	(2,203)	11.8	(0.3)
Minerals and electrolytes	22,217	(2,237)	8.3	(0.5)
Miscellaneous respiratory agents	16,405	(1,741)	6.1	(0.5)
Anxiolytics, sedatives, and hypnotics	11,771	(763)	4.4	(0.2)
Bronchodilators	9,564	(756)	3.6	(0.2)
Antihistamines	9,283	(708)	3.5	(0.1)
Adrenal cortical steroids	8,395	(628)	3.1	(0.1)
Cephalosporins	8,261	(557)	3.1	(0.1)
Penicillins	7,334	(576)	2.7	(0.1)
Anticonvulsants	7,228	(519)	2.7	(0.1)
Miscellaneous antibiotics	6,224	(484)	2.3	(0.1)
Dermatological agents	5,052	(477)	1.9	(0.1)
Quinolones	4,756	(360)	1.8	(0.1)
Antiplatelet agents	4,719	(392)	1.8	(0.1)
Antiarrhythmic agents	4,540	(378)	1.7	(0.1)
Muscle relaxants	4,482	(376)	1.7	(0.1)
Macrolide derivatives	4,445	(324)	1.7	(0.1)
Local injectable anesthetics	4,400	(374)	1.6	(0.1)
Antiparkinson agents	3,896	(300)	1.5	(0.1)

¹Based on Multum Lexicon second level therapeutic drug category (see <http://www.multum.com/Lexicon.html>).

²Based on an estimated 268,745,000 drug mentions at emergency department (ED) visits in 2012. Drug mentions are medications given in ED or prescribed at discharge.

³Includes narcotic and nonnarcotic analgesics and nonsteroidal anti-inflammatory drugs.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 24. Twenty most frequently mentioned drugs at emergency department visits: United States, 2012

Drug name ¹	Number of drug mentions in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Percent of mentions (standard error of percent)								Therapeutic drug category ³	
					Total	Given in emergency department	Prescribed at discharge	Given in emergency department and prescribed at discharge		Unknown ²				
All drug mentions	268,745	(17,099)	100.0	...	100.0	59.7	(1.1)	29.9	(1.0)	9.4	(0.5)	1.1	(0.3)	...
Ondansetron	17,604	(1,284)	6.6	(0.2)	100.0	79.4	(1.2)	8.3	(0.8)	11.3	(0.9)	*1.0	(0.4)	Antiemetic or antivertigo agents
Sodium chloride	16,348	(1,728)	6.1	(0.5)	100.0	97.9	(0.4)	0.7	(0.2)	*0.6	(0.2)	0.8	(0.2)	Minerals and electrolytes, Miscellaneous respiratory agents
Ibuprofen	16,085	(1,311)	6.0	(0.3)	100.0	30.5	(1.7)	50.6	(2.1)	17.8	(1.2)	*1.0	(0.4)	Analgesics
Acetaminophen-hydrocodone	13,377	(1,044)	5.0	(0.2)	100.0	23.0	(1.3)	59.0	(1.8)	17.5	(1.5)	*0.5	(0.2)	Analgesics
Acetaminophen	10,092	(813)	3.8	(0.2)	100.0	58.3	(2.3)	28.8	(2.2)	11.1	(1.2)	*1.8	(0.6)	Analgesics
Ketorolac	8,212	(560)	3.1	(0.1)	100.0	94.1	(0.9)	2.9	(0.5)	2.8	(0.6)	*0.2	(0.1)	Analgesics
Morphine	7,946	(676)	3.0	(0.2)	100.0	97.9	(0.6)	*1.0	(0.4)	*0.7	(0.3)	*0.4	(0.2)	Analgesics
Hydromorphone	6,712	(669)	2.5	(0.2)	100.0	95.5	(0.9)	2.7	(0.8)	*1.6	(0.5)	*0.2	(0.2)	Analgesics
Acetaminophen-oxycodone	5,743	(643)	2.1	(0.2)	100.0	27.2	(2.4)	48.3	(2.9)	22.9	(2.1)	*1.6	(0.8)	Analgesics
Albuterol	5,339	(484)	2.0	(0.1)	100.0	52.6	(2.9)	30.3	(2.6)	16.3	(1.9)	*0.8	(0.4)	Bronchodilators
Aspirin	4,342	(363)	1.6	(0.1)	100.0	83.5	(1.9)	9.5	(1.4)	5.7	(1.3)	*1.3	(0.7)	Analgesics, Antiplatelet agents
Azithromycin	3,980	(298)	1.5	(0.1)	100.0	31.8	(2.6)	55.4	(2.7)	12.2	(1.9)	*0.6	(0.4)	Macrolide derivatives
Promethazine	3,971	(466)	1.5	(0.1)	100.0	54.5	(3.9)	32.8	(2.3)	11.8	(3.0)	*0.9	(0.5)	Antiemetic or antivertigo agents, Antihistamines
Lorazepam	3,750	(287)	1.4	(0.1)	100.0	84.6	(1.8)	6.4	(1.1)	8.2	(1.4)	*0.8	(0.4)	Anticonvulsants, Antiemetic or antivertigo agents, Anxiolytics, sedatives, and hypnotics
Diphenhydramine	3,735	(285)	1.4	(0.1)	100.0	70.9	(2.5)	17.7	(2.3)	11.3	(1.6)	*0.1	(0.1)	Antiemetic or antivertigo agents, Antihistamines, Antiparkinson agents, Anxiolytics, sedatives, and hypnotics
Ceftriaxone	3,701	(295)	1.4	(0.1)	100.0	94.7	(1.5)	*3.6	(1.4)	*1.4	(0.5)	*0.3	(0.2)	Cephalosporins
Amoxicillin	3,621	(353)	1.4	(0.1)	100.0	8.1	(1.3)	76.3	(2.8)	14.5	(2.1)	*1.1	(0.7)	Penicillins
Prednisone	3,520	(306)	1.3	(0.1)	100.0	24.7	(2.5)	52.2	(3.0)	21.4	(2.4)	*1.7	(0.9)	Adrenal cortical steroids
Lidocaine	3,392	(318)	1.3	(0.1)	100.0	93.4	(1.2)	5.6	(1.2)	*0.7	(0.2)	*0.3	(0.2)	Antiarrhythmic agents, Local injectable anesthetics
Sulfamethoxazole-trimethoprim	3,356	(320)	1.3	(0.1)	100.0	15.0	(2.0)	63.6	(2.5)	20.7	(2.0)	*0.7	(0.4)	Miscellaneous antibiotics, Sulfonamides
All other	123,919	(7,960)	46.1	(0.6)	100.0	55.7	(1.3)	34.7	(1.3)	8.3	(0.5)	1.4	(0.4)	...

...Category not applicable.

*Figure does not meet standards of reliability or precision.

¹Based on Multum Lexicon terminology, the drug name reflects the active ingredients of a drug mention.²Unknown includes drugs given or prescribed that did not have either the "given in emergency department" or "prescribed at discharge" check boxes marked.³Based on Multum Lexicon second level therapeutic drug category (see: <http://www.multum.com/lexicon.html>).

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 25. Providers seen at emergency department visits: United States, 2012

Type of provider	Number of visits in thousands (standard error in thousands)		Percent of visits (standard error of percent)	
All visits	130,870	(7,182)	...	...
Any physician	117,444	(6,458)	89.7	(0.8)
Emergency department attending physician	115,241	(6,393)	88.1	(1.0)
Emergency department resident or intern	8,619	(1,193)	6.6	(1.0)
Consulting physician	9,458	(1,058)	7.2	(0.7)
Registered nurse (RN) or licensed practical nurse (LPN)	120,598	(6,800)	92.2	(1.2)
RN or LPN seen with physician	109,605	(6,145)	83.8	(1.3)
RN or LPN seen without physician	10,993	(1,316)	8.4	(0.8)
Nurse practitioner (NP)	8,216	(1,377)	6.3	(1.0)
NP seen with physician	4,819	(1,142)	3.7	(0.8)
NP seen without physician	3,397	(619)	2.6	(0.4)
Physician assistant (PA)	17,875	(2,236)	13.7	(1.3)
PA seen with physician	12,243	(1,689)	9.4	(1.0)
PA seen without physician	5,632	(968)	4.3	(0.7)
Emergency medical technician	5,616	(682)	4.3	(0.5)
Mental health provider	2,920	(588)	2.2	(0.4)
Other	30,817	(3,098)	23.6	(2.0)
Blank	928	(212)	0.7	(0.2)

...Category not applicable.

NOTE: Combined total of providers seen exceeds "all visits" and percent of visits exceeds 100%, because more than one provider may be reported per visit.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 26. Disposition of emergency department visits: United States, 2012

Disposition	Number of visits in thousands ¹		Percent of visits	
	(standard error in thousands)	(standard error in thousands)	(standard error of percent)	(standard error of percent)
All visits	130,870	(7,182)	...	...
Admitted, transferred, or died				
Admit to this hospital	14,547	(1,206)	11.1	(0.6)
Critical care unit	1,876	(215)	1.4	(0.1)
Stepdown or telemetry unit	988	(201)	0.8	(0.2)
Operation room	711	(94)	0.5	(0.1)
Mental health or detoxification unit	716	(118)	0.6	(0.1)
Cardiac catheterization lab	191	(53)	0.2	(0.0)
Other bed or unit	8,020	(825)	6.1	(0.5)
Unknown or blank	2,044	(345)	1.6	(0.3)
Admit to observation unit	2,420	(416)	1.9	(0.3)
Then hospitalized	871	(183)	0.7	(0.1)
Then discharged	1,549	(324)	1.2	(0.3)
Return or transfer to nursing home	581	(77)	0.4	(0.1)
Transfer to psychiatric hospital	569	(85)	0.4	(0.1)
Transfer to other hospital	1,937	(184)	1.5	(0.1)
Dead in emergency department ²	140	(30)	0.1	(0.0)
Outpatient follow-up				
Return to emergency department	10,069	(1,891)	7.7	(1.4)
Return or refer to physician or clinic for follow-up	88,250	(5,467)	67.4	(1.4)
No follow-up planned	15,010	(1,823)	11.5	(1.4)
Left prior to completing visit				
Left before triage	329	(72)	0.3	(0.1)
Left after triage	2,255	(243)	1.7	(0.2)
Left against medical advice	1,305	(141)	1.0	(0.1)
Other	3,393	(642)	2.6	(0.5)
Blank	640	(144)	0.5	(0.1)

...Category not applicable.

¹Figure does not meet standards of reliability or precision.

0.0 Quantity more than zero, but less than 0.05.

¹Total exceeds "All visits" because more than one disposition may be reported per visit.

²Includes "Dead on arrival."

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 27. Emergency department visits resulting in hospital admission, by selected patient and visit characteristics: United States, 2012

Selected characteristic	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Mean length of stay in days ¹ (standard error in days)		Admissions as percent of visits (standard error of percent)	
All admissions	14,547	(1,206)	100.0	...	4.7	(0.1)	11.1	(0.6)
Age								
Under 15 years	648	(143)	4.5	(1.0)	3.3	(0.3)	2.8	(0.5)
15–24 years	686	(99)	4.7	(0.6)	3.9	(0.7)	3.4	(0.5)
25–44 years	2,413	(264)	16.6	(1.1)	3.8	(0.3)	6.5	(0.6)
45–64 years	4,524	(428)	31.1	(1.2)	5.0	(0.3)	15.6	(1.0)
65–74 years	2,248	(263)	15.5	(1.2)	5.1	(0.3)	25.2	(1.8)
75 years and over	4,027	(371)	27.7	(1.3)	5.1	(0.2)	34.0	(1.8)
Residence								
Private residence	12,358	(1,054)	85.0	(1.5)	4.6	(0.1)	10.2	(0.6)
Nursing home	899	(118)	6.2	(0.7)	6.2	(0.4)	38.6	(3.8)
Other	442	(102)	3.0	(0.6)	6.0	(0.8)	26.8	(4.3)
Homeless	*101	(31)	*0.7	(0.2)	7.3	(1.6)	14.3	(3.3)
Unknown or blank	746	(199)	5.1	(1.3)	4.8	(0.4)	14.3	(2.1)
Expected sources of payment ²								
Private insurance	5,251	(510)	36.1	(2.0)	4.6	(0.2)	11.4	(0.9)
Medicare	6,580	(669)	45.2	(2.1)	5.3	(0.2)	27.5	(1.6)
Medicaid or CHIP ³	3,732	(457)	25.7	(2.2)	5.1	(0.2)	9.7	(0.9)
No insurance ⁴	896	(118)	6.2	(0.7)	4.3	(0.4)	4.9	(0.6)
Mode of arrival								
Ambulance	5,845	(544)	40.2	(1.6)	5.6	(0.3)	28.7	(1.6)
Other	8,702	(752)	59.8	(1.6)	4.2	(0.1)	7.9	(0.5)
Triage category								
Immediate or emergent ⁵	3,243	(424)	22.3	(2.1)	5.4	(0.3)	31.3	(2.4)
Other	8,904	(796)	61.2	(2.8)	4.5	(0.1)	9.6	(0.6)
Unknown or blank	2,400	(512)	16.5	(3.2)	4.9	(0.3)	8.6	(1.5)
Patient seen in this emergency department during the last 72 hours and discharged								
Yes	492	(75)	3.4	(0.5)	3.5	(0.4)	9.6	(1.7)
No, unknown, or blank	14,055	(1,182)	96.6	(0.5)	4.8	(0.1)	11.2	(0.7)
Length of stay								
1–2 days	3,669	(409)	25.2	(1.9)	...	...	...	...
3–4 days	3,652	(383)	25.1	(1.6)	...	...	...	...
5–6 days	1,911	(212)	13.1	(1.1)	...	...	...	...
7–8 days	932	(133)	6.4	(0.7)	...	...	...	...

Table 27. Emergency department visits resulting in hospital admission, by selected patient and visit characteristics: United States, 2012

Selected characteristic	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Mean length of stay in days ¹ (standard error in days)		Admissions as percent of visits (standard error of percent)	
9–10 days	586	(99)	4.0	(0.6)	...	...	...	...
More than 10 days	831	(128)	5.7	(0.6)	...	...	...	...
Unknown or blank	2,965	(587)	20.4	(3.7)	...	...	...	...
Hospital discharge status								
Alive	12,817	(1,142)	88.1	(2.1)	4.7	(0.1)	...	...
Home or residence	10,117	(929)	78.9	(1.5)	4.4	(0.1)	...	...
Return or transfer to nursing home	934	(125)	7.3	(0.8)	6.3	(0.4)	...	...
Transfer to another facility	773	(135)	6.0	(0.8)	7.0	(0.7)	...	...
Other	326	(74)	2.6	(0.5)	5.9	(1.0)	...	...
Unknown or blank	667	(113)	5.2	(0.9)	5.1	(0.9)	...	...
Died	284	(71)	2.0	(0.4)	6.1	(1.0)	...	...
Unknown or blank	1,445	(318)	9.9	(2.2)	4.1	(0.8)	...	...

...Category not applicable.

* Figure does not meet standards of reliability or precision.

¹Denominator for length of stay is 11,581,000 visits where this variable was known. Length of stay was unknown in 20.4% of visits resulting in admission.

²Total exceeds "all visits" because more than one source of payment may be reported per visit. Workers compensation, other, and unknown sources of payment are not included in this table, but account for 13.6% of expected sources of payment.

³CHIP is Children's Health Insurance Program.

⁴No insurance is defined as having only self-pay, no charge, or charity as payment sources. The individual self-pay and no charge or charity categories are not mutually exclusive.

⁵Emergent is needing to be seen within 1–14 minutes.

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table 28. Twenty leading principal hospital discharge diagnosis groups for emergency department visits: United States, 2012

Principal diagnosis group and ICD-9-CM code(s) ¹	Number of visits in thousands (standard error in thousands)	Percent of distribution (standard error of percent)
All visits	14,547 (1,206)	100.0 ...
Heart disease, excluding ischemic	840 (121)	5.8 (0.6)
Chest pain	838 (99)	5.8 (0.5)
Pneumonia	606 (90)	4.2 (0.5)
Cerebrovascular disease	426 (74)	2.9 (0.4)
Psychoses, excluding major depressive disorder	404 (79)	2.8 (0.5)
Ischemic heart disease	343 (59)	2.4 (0.4)
Cellulitis and abscess	340 (64)	2.3 (0.4)
Malignant neoplasms	273 (74)	1.9 (0.5)
Abdominal pain	251 (47)	1.7 (0.3)
Syncope and collapse	219 (43)	1.5 (0.3)
Noninfectious enteritis and colitis	219 (54)	1.5 (0.3)
Fracture of the lower limb	199 (47)	1.4 (0.3)
Disorder of gallbladder and biliary tract	195 (38)	1.3 (0.2)
Urinary tract infection, site not specified	195 (39)	1.3 (0.2)
Diabetes mellitus	188 (44)	1.3 (0.3)
Complications of surgical and medical care, not elsewhere classified	187 (50)	1.3 (0.3)
Chronic and unspecified bronchitis	185 (44)	1.3 (0.3)
Gastrointestinal hemorrhage	180 (51)	1.2 (0.3)
Asthma	173 (42)	1.2 (0.3)
Anemias	173 (35)	1.2 (0.2)
All other diagnoses ²	8,112 (686)	55.8 (1.8)

...Category not applicable.

¹Based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No. (PHS) 06-1260). However, certain codes have been combined in this table to better describe the use of ambulatory care services.

²All other diagnoses includes blanks and unknown diagnoses (11.7%).

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

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey.

Table I. Reclassification of cause-of-injury codes for use with National Hospital Ambulatory Medical Care Survey data

Intent and mechanism of injury	Cause-of-injury code ¹
Unintentional injuries	E800–E848, E850–E869, E880–E929
Falls	E880.0–E886.9, E888
Motor vehicle traffic	E810–E819
Struck against or struck accidentally by objects or persons	E916–E917
Overexertion and strenuous movements	E927
Cutting or piercing instruments or objects	E920
Natural and environmental factors	E900–E909, E928.0–E928.2
Poisoning by drugs, medicinal substances, biologicals, other solid and liquid substances, gases, and vapors	E850–E869
Fire and flames, hot substance or object, caustic or corrosive material, and steam	E890–E899, E924
Machinery	E919
Pedal cycle, nontraffic and other	E800–E807 (.3), E820–E825 (.6), E826.1, E826.9
Motor vehicle, nontraffic	E820–E825 (.0-.5, .7-.9)
Other transportation	E800–E807 (.0-.2, .8-.9), E826 (.0, .2-.8), E827–E829, E831, E833–E845
Suffocation	E911–E913
Firearm missile	E922.0-.3, .8-.9
Drowning or submersion	E830, E832, E910
Foreign body	E914–E915
Caught accidentally in or between objects	E918
Other and not elsewhere classified	E846–E848, E921, E922.4-.5, E923, E925–E926, E928.3-.5, .8, E929.0-.5, .8
Mechanism unspecified	E887, E928.9, E929.9
Intentional injuries	E950–E959, E960–E969, E970–E979, E990–E999
Assault	E960–E969, E979
Unarmed fight or brawl, striking by blunt or thrown object	E960.0, E968.2
Cutting or piercing instrument	E966
Firearms	E965.0–E965.4, E979.4
Other and unspecified mechanism	E960.1, E961–E964, E965.5–E965.9, E967–E968.1, E968.3–E969, E979.0-.3, .5-.9
Self-inflicted	E950–E959
Poisoning by solid or liquid substances, gases, and vapors	E950–E952
Cutting and piercing instrument	E956
Suffocation	E953
Other and unspecified mechanism	E954–E955, E957–E959
Other causes of violence	E970–E978, E990–E999
Injuries of undetermined intent	E980–E989
Adverse effects of medical treatment	E870–E879, E930–E949

¹Based on the "Supplementary Classification of External Causes of Injury and Poisoning" International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM). (U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No.(PHS) 06-1260).