

VITAL & HEALTH STATISTICS

Utilization of Short-Stay Hospitals United States, 1985 Annual Summary

This report presents statistics on the utilization of non-Federal short-stay hospitals based on data collected through the National Hospital Discharge Survey from a national sample of the hospital records of discharged inpatients. Estimates are provided by the demographic characteristics of patients discharged, conditions diagnosed, and surgical and nonsurgical procedures performed, and by geographic region, bed size, and ownership of hospitals that provided inpatient care. Measurements of hospital utilization are given by frequency, rate, percent, and average length of stay.

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Under the legislation establishing the National Health Survey, the Public Health Service is authorized to use, insofar as possible, the services or facilities of other Federal, State, or private agencies.

In accordance with specifications established by the National Center for Health Statistics, the U.S. Bureau of the Census, under a contractual arrangement, participated in planning the survey and collecting the data.

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Symbols

- - - Data not available
 - . . . Category not applicable
 - Quantity zero
 - 0.0 Quantity more than zero but less than 0.05
 - Z Quantity more than zero but less than 500 where numbers are rounded to thousands
 - * Figure does not meet standard of reliability or precision
 - # Figure suppressed to comply with confidentiality requirements
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Utilization of Short-Stay Hospitals

by Edmund J. Graves, Division of Health Care Statistics

Introduction

This report provides national estimates on the utilization of non-Federal short-stay hospitals during 1985. Data are summarized for selected demographic characteristics of the patients discharged, characteristics of the hospitals where the patients were treated, conditions diagnosed, and surgical and non-surgical procedures performed.

The statistics in this report are based on data collected by the National Center for Health Statistics by means of the National Hospital Discharge Survey (NHDS), which is a continuous voluntary survey in use since 1965. The data for the survey are obtained from a sample of inpatient medical records that are obtained from a national sample of short-stay general and specialty hospitals located in the United States.

For the first time, the statistics are based on two data collection procedures. The first was the traditional manual system of sample selection and data abstraction, and the second was an automated method that involved the purchase of data tapes from commercial abstracting services. In 1985, the automated method was used in 17 percent of the hospitals. Preliminary analysis of the automated system indicates that a greater number of nonsurgical procedures per patient are reported by these hospitals than by hospitals submitting data in the traditional mode. This has resulted in increases from 1984 to 1985 in the estimation for miscellaneous diagnostic and therapeutic procedures. It appears that approximately one-half of the increase in that category was because of the change in data collection methodology.

Approximately 194,800 medical records from 414 hospitals were included in the 1985 survey. A brief description of the sample design and the source of data can be found in appendix I. A detailed report on the design of the NHDS was published in 1970.¹

Types of hospital utilization measurements shown are frequencies, rates, and percent distributions of discharges, days of care, and average lengths of stay. The estimates are presented by age, sex, and race of the patients discharged; by expected source of payment, geographic region, bed size, and ownership of the short-stay hospitals (tables 1–6). Statistics on women with deliveries (tables 7–8), conditions diagnosed (tables 9–14), and procedures performed (tables 15–22) also are shown by patient and hospital characteristics. Data for newborn in-

fants are included only in the section “Newborn infant discharges.” Because these data are based on a sample, they may not agree with data on births published in *Vital Statistics of the United States*.

Coding of medical data for patients hospitalized is performed according to the *International Classification of Diseases, 9th Revision, Clinical Modification*² (ICD–9–CM). Earlier data for 1970–78 were coded according to the *Eighth Revision International Classification of Diseases, Adapted for Use in the United States*³ (ICDA). Differences between these two systems are discussed in appendix I under the section entitled “Medical coding and edit.” A maximum of seven diagnoses and four procedures may be coded for each medical record in the sample. Although diagnoses included in the ICD–9–CM section entitled “Supplementary classification of external causes of injury and poisoning” (codes E800–E999) are used by the NHDS, these diagnoses are excluded from this report. The conditions diagnosed and procedures performed are presented here by the major diagnostic chapters and procedure groups of the ICD–9–CM. Within these chapters and groups, some categories of diagnoses and procedures also are shown. These specific categories were selected primarily because of large frequencies or because they are of special interest. Residual categories of diagnoses and procedures, however, are not included in the tables. More detailed analyses of these data will be presented in later reports in Series 13 of the *Vital and Health Statistics* reports.

Familiarity with the definitions used in the NHDS is important for interpreting the data and for making comparisons with statistical data on short-stay hospital utilization that are available from other sources. Definitions of the terms used in this report are presented in appendix II.

Information on short-stay hospital utilization also is collected by another program of the National Center for Health Statistics, the National Health Interview Survey. Estimates from this survey generally are different from those of the NHDS because of differences in collection procedures, population sampled, and definitions. Data from the National Health Interview Survey are published in Series 10 of the *Vital and Health Statistics* reports.

Highlights

- During 1985 an estimated 35.1 million patients, excluding newborn infants, were discharged from non-Federal short-stay hospitals, and an estimated 226.2 million days of care were used.
- The average length of stay for patients discharged from non-Federal short-stay hospitals was 6.5 days in 1985. The average length of stay has declined from 7.3 days in 1980 to 6.5 days in 1985—a decline of about 11 percent.
- With a rate of 148 discharges per 1,000 population, 1985 marked the first time since 1971 that the discharge rate has fallen below 150 per 1,000.
- About 45 percent of all patients discharged during 1985 expected private insurance to pay for at least part of their hospitalization.
- Females with deliveries was the leading cause of hospitalization during 1985. Of the 35.1 million discharges during 1985, 3.9 million (or 11 percent) were for females with deliveries.
- Six procedures were each performed during 1985 more than 1 million times: procedures to assist delivery (2.5 million), endoscopy of the digestive system (1.5 million), biopsy (1.4 million), computerized axial tomography (CAT scan) (1.4 million), diagnostic ultrasound (1.2 million), and arteriography and angiocardiology using contrast material (1.1 million).
- Approximately 16 percent of all patients who were hospitalized had a principal diagnosis of heart disease or malignant neoplasms, but about 46 percent of all deaths that occurred in short-stay hospitals in 1985 were the result of these two diseases.
- The number of patients discharged from short-stay non-Federal hospitals during 1985 for the first-listed diagnosis of cataract dropped from 481,000 in 1984 to 182,000 in 1985—a drop of about 62 percent.
- Approximately 59 percent of all patients discharged from short-stay non-Federal hospitals during 1985 had at least one procedure performed. In 1979 only 51 percent had at least one procedure performed.
- Of the 35.1 million patients discharged from short-stay non-Federal hospitals during 1985, 2.7 percent were known to have been discharged dead.

Utilization by patient characteristics

The number of hospital discharges and the rate of discharges have traditionally been on the rise. Since 1983, changes have been occurring. With a rate of 148 discharges per 1,000 population, 1985 marked the first time since 1971 that the discharge rate has fallen below 150 discharges per 1,000 population. Table A shows important measures of hospital utilization for 1965, 1985, and selected years in between. The number of discharges rose between 1965 and 1983 by about 22 percent, but it decreased approximately 11 percent in the last 2 years. Because of population increases and hospital utilization decreases, the discharge rate is at the same level it was in 1965. In addition, the average length of stay for hospital patients is continuing to drop. The average length of stay in 1985 was 6.5 days compared with 7.7 days a decade ago.

Although the rate of discharges and days of care decreased between 1965 and 1970, these differences were not significant. The decrease was the result of an underestimate of hospital utilization in 1970 because new hospitals that came into the universe of hospitals were not sampled for NHDS prior to 1972.⁴ More information on updating the universe can be found in appendix I.

The total number and rate of discharges and days of care showed a significant decrease when 1985 data were compared with 1984 data (table B). However, this did not hold true for the four age groups. For the number of discharges, only in the age group 45-64 was there a significant decrease when 1985 data were compared with 1984 data; and for the discharge rates, there were decreases in all but the age group 15-44. For the number of days of care, the significant differences were only for those discharges 45 years and over. The average length of stay showed no change in the number of days for totals or for the four age groups.

The 35.1 million patients discharged from short-stay hospitals during 1985 included an estimated 14.2 million males and 20.9 million females (table 1). The rates per 1,000 popula-

Table B. Number and rate of discharges and days of care by age: United States, 1984 and 1985

[Data for non-Federal short-stay hospitals. Excludes newborn infants]

Age	Discharged patients			
	1984	1985	1984	1985
	Number in thousands		Rate per 1,000 population	
All ages	37,162	35,056	158.5	147.9
Under 15 years	3,208	2,972	62.0	57.2
15-44 years	14,533	13,966	132.2	125.1
45-64 years	8,195	7,610	183.3	169.5
65 years and over	11,226	10,508	400.4	368.3
	Days of care			
	1984	1985	1984	1985
	Number in thousands		Rate per 1,000 population	
All ages	244,652	226,217	1,043.5	954.4
Under 15 years	14,367	13,554	277.7	260.8
15-44 years	71,172	67,397	647.3	603.6
45-64 years	58,877	53,541	1,316.8	1,192.8
65 years and over	100,237	91,726	3,574.8	3,215.1
	Average length of stay in days			
	1984	1985		
All ages	6.6	6.5		
Under 15 years	4.5	4.6		
15-44 years	4.9	4.8		
45-64 years	7.2	7.0		
65 years and over	8.9	8.7		

tion were 124 for males and 171 for females, making the rate for females about 38 percent higher than the rate for males. The number and rate of discharges always are higher for females than for males because of the large number of women in

Table A. Selected measures of hospital utilization: United States, 1965, 1970, 1975, 1980, 1983, and 1985

[Data for non-Federal short-stay hospitals. Excludes newborn infants]

Measure of utilization	1965	1970	1975	1980	1983	1985
Number of patients discharged in thousands	28,792	29,127	34,043	37,832	38,783	35,056
Rate of patients discharged per 1,000 population	150.3	144.3	159.2	167.7	167.0	147.9
Number of days of care in thousands	225,011	226,445	262,389	274,508	268,337	226,217
Rate of days of care per 1,000 population	1,174.3	1,121.6	1,227.3	1,217.0	1,155.2	954.4
Average length of stay in days	7.8	7.8	7.7	7.3	6.9	6.5
Percent of patients with surgery and nonsurgical procedures	138.2	139.7	141.7	52.2	54.7	58.9

¹Figures for 1965, 1970, and 1975 should be compared with caution to those for 1980, 1983, and 1985 because data prior to 1979 exclude nonsurgical procedures and the following obstetrical procedures: episiotomy, artificial rupture of membrane, internal version, and outlet and low forceps delivery.

their childbearing years (15–44 years of age) who are hospitalized for deliveries and other obstetrical conditions. Excluding deliveries, the rate for females discharged was 139, or only about 12 percent higher than the rate for males.

Except for children under 5 years of age and women in their childbearing years, annual rates of discharges increased consistently with each older age group for both males and females. This pattern of increase also applies to women in their childbearing years if those who were hospitalized only for deliveries are excluded from the rates. Discharge rates for older patients (65 years of age and over) compared with those for younger patients (under 15 years of age) were more than five times higher for both sexes.

In 1985, male patients used an estimated 97.3 million days of care in short-stay hospitals, compared with 128.9 million days of care used by females (table 1). The rate of days of care per 1,000 population was 849 for males and 1,053 for females, or about 24 percent higher for females than for males. Differences between the rates of days of care for each sex were smaller than for discharges, mainly because the average length of stay for about 3.9 million women who were hospitalized for deliveries was only 3.3 days (table 7). This length of stay compares with an average length of stay of 6.9 days for males and 6.8 days for females who were not hospitalized for deliveries.

The annual number of days of care per 1,000 population increased about 12 times with advancing age from 261 for patients under 15 years of age to 3,215 for patients 65 years of age and over (table 1). The much higher increase in the rate of days of care than of discharges from the youngest to the oldest age group was the result of long average lengths of stay for persons 65 years of age and over (8.7 days). The average length of stay is longer for the aged because of the greater severity of illness in this group. This situation is indicated by larger proportions of older than younger patients with incapacitating chronic illness, and the highest proportion of any age group with multiple diagnoses, both of which result in long average lengths of stay and high annual rates of days of care.

In this report, the race of patients is shown as white and all other. In 1985, 26.4 million patients were identified on the face sheets of the medical records as white and 5.2 million as all other. However, race was not reported for an additional 3.5 million patients. Estimates of number and rates of discharges, days of care, and average lengths of stay are provided. However, all of the race data should be used with caution because of the not-stated category, which for 1985 is approximately 10 percent of all discharges.

The number of days of care in 1985 totaled 172.3 million

for white patients, 34.6 million for all other patients, and 19.3 million for race not stated (table 2). The average length of stay was 6.5 days for white patients, 6.7 for all other patients, and 5.5 for patients with race not stated (table 2).

The expected principal source of payment for all patients discharged from short-stay hospitals is presented in table 3. The expected source of payment recorded on the face sheets of the medical record may not have been the actual source of payment. For example, a patient admitted to a hospital following an automobile accident may have cited Blue Cross as the expected source of payment when, in fact, an automobile insurance company ultimately made restitution.

Private health insurance that consists of Blue Cross and other private or commercial insurance was the expected principal source of payment for approximately 15.7 million discharges from non-Federal short-stay hospitals in 1985, about 45 percent of all discharges. Of these 15.7 million discharges, 98.4 percent were under 65 years of age. The remaining 1.6 percent were 65 years of age and over.

Medicare accounted for 11.3 million discharges (32.4 percent). As expected, 10.0 million (87.8 percent) of these were for patients 65 years and over. Together these two expected sources of payment accounted for 27.1 million discharges (77.2 percent). Even though patients expecting to pay hospital costs through medicare comprised only 32.4 percent of all discharges, they comprised 43.6 percent of all days of care. This was the result of longer hospital stays for patients 65 years and over. This is reflected in the average length of stay—medicare patients were hospitalized an average of 8.7 days, and patients who expected private insurance to pay their hospital stays averaged 5.3 days. The longest average length of stay was noted for medicare patients 65 years of age and over in the Northeast Region (11.0 days). However, lengths of stay of less than 5 days were noted for private insurance patients under 15 years of age in all regions and for those 15–44 years of age in the West and South.

During 1985 there were approximately 3.9 million discharges for women with deliveries (tables 7 and 8). Of these, 35 percent were discharged from hospitals in the South Region, and 52 percent were discharged from hospitals with 300 beds or more. Variation in rates per 1,000 civilian population by region was insignificant, except when comparing the Northeast Region (42.5) with the West Region (57.4). The rate for the Midwest was 50.1, and for the South it was 51.2.

The average length of stay for these women was 3.8 days in the Northeast Region, 3.5 days in the Midwest Region, 3.3 days in the South Region, and 2.6 days in the West Region.

Utilization by hospital characteristics

Discharges from short-stay hospitals by geographic region in 1985 ranged from 6.5 million in the West Region to 12.3 million in the South Region (table 3). Regional differences in the number of discharges are accounted for mainly by variations in population sizes (see appendix I, table III) and, to a lesser extent, by variations in the discharge rates.

The overall rates of regional discharges per 1,000 population in 1985 were 138 for the West Region, 144 for the Northeast Region, 152 for the South Region, and 154 for the Midwest Region (table 5). There were no significant differences for discharge rates among the four regions.

Both the number and the rate per 1,000 population of days of care were lowest in the West Region. The highest number of days of care was in the South Region (tables 4 and 5). The number of days of care ranged from 35.4 million in the West Region to 73.8 million in the South. The rate per 1,000 population was 748 days in the West Region, 912 days in the South Region, 1,042 days in the Midwest Region, and 1,116 days in the Northeast Region.

Average lengths of stay by geographic region were 5.4 days in the West Region, 6.0 days in the South Region, 6.8 days in the Midwest Region, and 7.7 days in the Northeast Region (table 4).

The number of patients discharged from short-stay hospitals and days of care by sex and age of the patients and by geographic region and bed size of hospitals are shown in table 4. The percent distributions of these data are shown in table C.

Discharges from short-stay hospitals for patients of all ages were about 40 percent male and 60 percent female in every hospital bed-size group. Females with deliveries accounted for about 10 percent of the discharges in hospitals with less than 300 beds and 12–13 percent in hospitals with 300 beds or more. The largest percent of patients in each of the bed size groups was of patients ages 15–44 years, and the smallest percent was of those under 15 years of age.

Days of care by sex, age, and bed size of hospital were generally distributed in a fashion similar to discharges (table

C). However, a smaller pattern of days of care than of discharges was recorded for patients 15–44 years of age regardless of bed size; and for patients 65 years and over, a larger percent of days of care than of discharges was recorded for all bed sizes. The differences for those aged 15–44 years were the result of short lengths of stay for females with deliveries. However, for those over 65 years of age the differences were the result of the older patients being hospitalized longer than those under 65 years of age.

The average length of stay for patients discharged from short-stay hospitals in 1985 increased steadily from 5.2 days in the smallest hospitals (6–99 beds) to 7.4 days in the largest hospitals (500 beds or more) (table C). The average length of stay was slightly longer for males than for females in all hospitals except the smaller ones. However, when females who were hospitalized for deliveries are excluded, the average lengths of stay for both sexes were virtually the same. Except for patients under 45 years of age, the average length of stay increased as the age of the patient increased regardless of the size of the hospital.

Approximately 7 out of 10 patients in non-Federal short-stay hospitals were discharged from voluntary nonprofit hospitals operated by church and other nonprofit groups during every year the NHDS was conducted. In 1985, voluntary nonprofit hospitals provided medical care to an estimated 24.0 million patients, or 68 percent of all patients hospitalized. Hospitals operated by State and local governments cared for 7.8 million patients, or 22 percent of all discharges, and proprietary hospitals operated for profit cared for 3.3 million patients, or 9 percent of all discharges (table 6).

The estimated 226.2 million days of care utilized by patients in short-stay hospitals during 1985 were distributed by ownership of hospitals in the following manner: voluntary nonprofit, 159.6 million days, or 71 percent; government, 45.9 million days, or 20 percent; and proprietary, 20.7 million days, or 9 percent. Average lengths of stay were 6.7 days in voluntary nonprofit hospitals, 5.9 days in government hospitals, and 6.3 days in proprietary hospitals.

Table C. Number and percent distribution of patients and days of care and average length of stay for patients discharged from short-stay hospitals by sex and age of patient, according to bed size of hospital: United States, 1985

[Discharges from non-Federal short-stay hospitals. Excludes newborn infants]

<i>Sex and age</i>	<i>Number</i>	<i>All sizes</i>	<i>6-99 beds</i>	<i>100-199 beds</i>	<i>200-299 beds</i>	<i>300-499 beds</i>	<i>500 beds or more</i>
Number of patients discharged in thousands							
All patients discharged	35,056	35,056	5,331	6,443	6,953	8,625	7,703
Sex							
Percent distribution							
Both sexes	35,056	100.0	100.0	100.0	100.0	100.0	100.0
Male	14,160	40.4	39.7	39.8	41.8	40.1	40.4
Female including deliveries	20,896	59.6	60.3	60.2	58.2	59.9	59.6
Female excluding deliveries	17,042	48.6	50.6	49.8	48.8	47.9	47.0
Age							
All ages	35,056	100.0	100.0	100.0	100.0	100.0	100.0
Under 15 years	2,972	8.5	7.4	12.0	7.5	7.3	8.5
15-44 years	13,966	39.8	39.2	39.9	37.2	39.6	42.9
45-64 years	7,610	21.7	20.0	19.9	21.8	22.5	23.5
65 years and over	10,508	30.0	33.4	28.2	33.6	30.6	25.1
Number of days of care in thousands							
All days of care	226,217	226,217	27,838	37,114	45,309	59,079	56,878
Sex							
Percent distribution							
Both sexes	226,217	100.0	100.0	100.0	100.0	100.0	100.0
Male	97,269	43.0	41.1	42.8	43.5	42.8	43.9
Females including deliveries	128,948	57.0	58.9	57.2	56.5	57.2	56.1
Females excluding deliveries	116,308	51.4	53.9	51.5	52.0	51.2	49.8
Age							
All ages	226,217	100.0	100.0	100.0	100.0	100.0	100.0
Under 15 years	13,554	6.0	4.7	9.0	4.9	4.9	6.7
15-44 years	67,397	29.8	31.6	30.7	26.2	28.8	32.3
45-64 years	53,541	23.7	21.2	21.8	23.0	24.4	25.9
65 years and over	91,726	40.5	42.5	38.6	46.0	41.9	35.1
Average length of stay in days							
Total	6.5	6.5	5.2	5.8	6.5	6.8	7.4
Sex							
Male	6.9	6.9	5.4	6.2	6.8	7.3	8.0
Female including deliveries	6.2	6.2	5.1	5.5	6.3	6.5	7.0
Females excluding deliveries	6.8	6.8	5.6	6.0	7.0	7.3	7.8
Age							
Under 15 years	4.6	4.6	3.3	4.3	4.2	4.7	5.8
15-44 years	4.8	4.8	4.2	4.4	4.6	5.0	5.6
45-64 years	7.0	7.0	5.5	6.3	6.9	7.4	8.2
65 years and over	8.7	8.7	6.6	7.9	8.9	9.4	10.3

Utilization by diagnosis

First-listed diagnosis

Diseases of the circulatory system ranked first in 1985 among the ICD-9-CM diagnostic chapters as a principal or first-listed diagnosis among patients discharged from non-Federal short-stay hospitals (table 9). These conditions accounted for an estimated 5.5 million discharges. Other leading ICD-9-CM diagnostic chapters were supplementary classifications, which include females with deliveries (4.3 million discharges); diseases of the digestive system (3.9 million discharges); injury and poisoning (3.3 million discharges); diseases of the respiratory system (3.2 million discharges); and diseases of the genitourinary system (2.8 million discharges). About two-thirds of the patients discharged from non-Federal short-stay hospitals were included in these six ICD-9-CM diagnostic chapters.

It should be pointed out that the estimates for first-listed acute myocardial infarction have increased substantially since 1981 because of a decision to reorder circulatory diagnoses involving acute myocardial infarction. For example, in 1981, 60 percent of acute myocardial infarction diagnoses were first-listed. In 1985, the first-listed acute myocardial infarction estimate increased to 87 percent because of reordering. This change is discussed more fully in appendix I.

The diagnostic categories presented in this summary report were selected either because they appear as principal or first-listed diagnoses with great frequency or because the conditions are of special interest. Although many of these categories—such as malignant neoplasms, heart disease, psychoses, and fractures, all sites—are combinations of more detailed diagnoses, they are presented as single categories without showing the specific diagnostic inclusions.

It should be noted that even though the total number of discharges showed no significant decrease from 1983 to 1984, there was some indication that a downturn in the number was occurring. In 1985 the drop in the number of discharges became significant when compared with that in 1984. The most significant drop occurred in the first-listed diagnosis of cataract, where the number of discharges dropped from 481,000 in 1984 to 182,000 in 1985—a drop of 62.2 percent. Other significant drops in first-listed diagnosis were for disorders of menstruation and other abnormal vaginal bleeding, where the number of discharges dropped from 254,000 in 1984 to 193,000 in 1985—a drop of 24.0 percent; gastritis and duodenitis, where the number of discharges dropped from 266,000 in 1984 to 203,000 in 1985—a drop of 23.7 percent; essential hypertension, where

the number of discharges dropped from 266,000 in 1984 to 214,000 in 1985—a drop of 19.5 percent; diseases of the ear and mastoid process, where the number of discharges dropped from 321,000 in 1984 to 259,000 in 1985—a drop of 19.3 percent; and diabetes mellitus, where the number of discharges dropped from 593,000 in 1984 to 480,000 in 1985—a drop of 19.1 percent.

Although there have been no significant changes in the total number of procedures between 1984 and 1985, significant decreases and increases have occurred for specific procedures. The most significant drop for procedures occurred for insertion of prosthetic lens (pseudophakos), where the number of procedures dropped from 455,000 in 1984 to 180,000 in 1985—a drop of 60.4 percent—and extraction of lens, where the number of procedures dropped from 506,000 in 1984 to 211,000 in 1985—a drop of 58.3 percent. Other significant decreases in procedures were for diagnostic dilation and curettage of uterus, where the number of procedures dropped from 470,000 in 1984 to 349,000 in 1985—a drop of 25.7 percent—and operations on the cranial and peripheral nerves, where the number of procedures dropped from 200,000 in 1984 to 167,000 in 1985—a drop of 16.5 percent.

Compensating for the drop in some of the procedures was a significant increase in the number of miscellaneous and therapeutic procedures performed. The number of these procedures increased from 7.2 million in 1984 to 8.8 million in 1985—an increase of 23.1 percent. In this group diagnostic ultrasound, computerized axial tomography, and arteriography and angiocardiology using contrast material showed the greatest increase in the number of procedures performed. Diagnostic ultrasound increased from 836,000 in 1984 to 1,234,000 in 1985—an increase of 47.6 percent; computerized axial tomography increased from 1,091,000 in 1984 to 1,378,000 in 1985—an increase of 26.3 percent; and arteriography and angiocardiology using contrast material increased from 972,000 in 1984 to 1,117,000 in 1985—an increase of 14.9 percent.

There were influences related to hospital admission policies as well as hospital characteristics that could account for some of these changes, including the introduction of the prospective payment system, technological advances, and, possibly, the shifting of patients from an inpatient setting to an outpatient setting.

The number and rate of discharges, days of care, and average length of stay by selected first-listed diagnoses in 1985 are presented in table D. These categories accounted for 52 per-

Table D. Number and rate of patients and days of care for patients discharged from short-stay hospitals and average length of stay, by selected first-listed diagnostic categories: United States, 1985

[Discharges from non-Federal short-stay hospitals. Excludes newborn infants. Diagnostic groupings and code number inclusions are based on the International Classification of Diseases, 9th Revision, Clinical Modification]

Diagnostic category and ICD-9-CM code	Discharged patients		Days of care		Average length of stay
	Number in thousands	Rate per 1,000 population	Number in thousands	Rate per 1,000 population	Days
All conditions ¹	35,056	147.9	226,217	954.4	6.5
Females with deliveries V27	3,854	16.3	12,640	53.3	3.3
Normal deliveries ²	1,386	5.8	3,470	14.6	2.5
Complicated deliveries ²	2,468	10.4	9,170	38.7	3.7
Heart disease 391-392.0, 393-398, 402, 404, 410-416, 420-429	3,584	15.1	26,082	110.0	7.3
Acute myocardial infarction 410	755	3.2	7,152	30.2	9.5
Atherosclerotic heart disease 414.0	304	1.3	2,016	8.5	6.6
Other ischemic heart disease 411-413, 414.1-414.9	992	4.2	5,379	22.7	5.4
Cardiac dysrhythmias 427	511	2.2	3,148	13.3	6.2
Congestive heart failure 428.0	557	2.4	4,459	18.8	8.0
Malignant neoplasms 140-208, 230-234	1,911	8.1	17,001	71.7	8.9
Malignant neoplasms of trachea, bronchus, and lung 162, 197.0, 197.3	315	1.3	2,884	12.2	9.2
Malignant neoplasm of breast 174-175, 198.81	208	0.9	1,489	6.3	7.2
Fractures, all sites 800-829	1,129	4.8	9,864	41.6	8.7
Cerebrovascular disease 430-438	916	3.9	9,600	40.5	10.5
Pneumonia, all forms 480-486	854	3.6	6,788	28.6	7.9
Psychoses 290-299	701	3.0	10,435	44.0	14.9
Intervertebral disc disorders 722	508	2.1	3,693	15.6	7.3
Benign neoplasms and neoplasms of uncertain behavior and unspecified nature 210-229, 235-239	500	2.1	2,740	11.6	5.5
Diabetes mellitus 250	480	2.0	3,901	16.5	8.1
Cholelithiasis 574	474	2.0	3,558	15.0	7.5
Arthropathies and related disorders 710-719	465	2.0	3,584	15.1	7.7
Asthma 493	462	1.9	2,275	9.6	4.9
Noninfectious enteritis and colitis 555-556, 558	457	1.9	2,241	9.5	4.9
Diseases of the central nervous system 320-336, 340-349	425	1.8	4,092	17.3	9.6
Alcohol dependence syndrome 303	388	1.6	4,169	17.6	10.7
Inguinal hernia 550	384	1.6	1,231	5.2	3.2
All abortions, including ectopic and molar pregnancies 630-639	382	1.6	821	3.5	2.1
Calculus of kidney and ureter 592	325	1.4	1,217	5.1	3.7
Chronic disease of tonsils and adenoids 474	288	1.2	437	1.8	1.5

¹Includes data for diagnostic conditions not shown in table.
²See appendix II for definition.

cent of all patients discharged during 1985 and include the most frequent first-listed diagnoses for each sex, age, race, region, and bed-size group. The most common first-listed diagnosis for most of these groups, as well as for all patients, was females with deliveries. Excluding this category, the two most frequent first-listed diagnoses were heart disease and malignant neoplasms for all groups except patients under 45 years of age. Discussed below are the most common first-listed diagnoses for the categories not included above.

For patients under 15 years of age, the most frequent first-listed diagnoses were acute respiratory infections, except influenza; pneumonia, all forms; and chronic disease of tonsils and adenoids. Some other frequent diagnoses for these patients were asthma; noninfectious enteritis and colitis; fractures, all sites; and disease of the ear and mastoid process (table 9).

Excluding females with deliveries, the three most frequent first-listed diagnoses for patients 15-44 years of age were fractures, all sites; psychoses; and all abortions, including ectopic and molar pregnancies. The most common first-listed diagnoses for patients 45-64 years of age and 65 years of age and over were heart disease and malignant neoplasms.

For patients other than white, the most frequent first-listed diagnosis besides deliveries was heart disease. Other common diagnoses for this group included malignant neoplasms; fractures, all sites; pneumonia, all forms; psychoses; asthma; cerebrovascular disease; and abortions and ectopic and molar pregnancies.

For hospitals with 6-99 beds, the most common first-listed diagnosis was heart disease, followed by females with deliveries. Other frequent diagnoses in these hospitals were pneumonia, all forms; fractures, all sites; cerebrovascular disease; malignant neoplasms; and alcohol dependence syndrome.

The number and rate of patients discharged from short-stay hospitals and average length of stay, by ICD-9-CM diagnostic chapters and selected categories, are presented by age for 1985 in table 9. Although the estimated rates of discharge from short-stay hospitals generally increased as the age of the patients increased, especially for patients 15 years of age and over, some decreases were observed. For example, decreases in rates between the two oldest age groups (45-64 years and 65 years and over) occurred for the categories of alcohol dependence syndrome, calculus of kidney and ureter, interverte-

bral disc disorders, and sprains and strains of back (including neck). Moreover, the rates generally decreased with increasing age for the categories of chronic disease of tonsils and adenoids and disorders of menstruation and other abnormal bleeding.

The average length of stay increased with increasing age, especially for patients 15 years of age and over, for most chapters and categories of diagnoses. Overall it tended to be higher for fracture of neck of femur, mental disorders (especially psychoses), alcohol dependence syndrome, and cerebrovascular disease. Other average lengths of stay of over 10 days were for diseases of the central nervous system, disease of the skin and subcutaneous tissue, arthropathies and related disorders, and fractures, all sites, for patients 65 years and over.

Short average lengths of stay occurred for patients under 45 years with a first-listed diagnosis of chronic disease of tonsils and adenoids and for patients 15–44 years who were admitted for abortions, including ectopic and molar pregnancies, and sterilization.

Data on discharges, rates of discharges, and average lengths of stay for patients discharged from short-stay hospitals by sex and race are presented by diagnostic chapters and selected categories of first-listed diagnosis in table 10.

Rates of discharges per 10,000 population were similar for the two sexes for most of the diagnostic chapters and categories shown. However, males had significantly higher rates than females for the categories of malignant neoplasm of trachea, bronchus, and lung; alcohol dependence syndrome; acute myocardial infarction; other ischemic heart disease; inguinal hernia; calculus of kidney and ureter; intracranial injuries (excluding those with skull fracture); and lacerations and open wounds. For females, higher rates occurred for the categories of benign neoplasms and neoplasms of uncertain behavior and unspecified nature, diabetes mellitus, cataract, noninfectious enteritis and colitis, cholelithiasis, arthropathies and related disorders, and persons admitted for sterilization.

Seventy-five percent of all patients discharged were white, 15 percent were all other races (including black), and 10 percent did not state race in the medical record. However, the racial distribution of patients for some diagnostic categories was significantly different from that of all patients. For example, the percent was higher for white patients discharged with a first-listed diagnosis of atherosclerotic heart disease (86 percent). It was lower for white patients with a diagnosis of abortions and ectopic and molar pregnancies (60 percent) and anemias (62 percent). For all other races, it was higher for abortions and ectopic and molar pregnancies and anemias (29 percent each).

Information on patients discharged from short-stay hospitals by geographic region is shown in table 11. The number of discharges ranged from 12.3 million in the South Region to 6.5 million in the West Region. The Midwest Region had 9.1 million discharges, and the Northeast Region had 7.2 million discharges. The South Region had the largest number of discharges for most categories. One major exception to this was for mental disorders, where the number of discharges was 539,000 for the Midwest Region and only 447,000 for the South Region. In 1985 the number of discharges per 1,000 population was 138 in the West Region, 144 in the Northeast Region,

152 in the South Region, and 154 in the Midwest Region. Large variations in rates were noted for malignant neoplasms, alcohol dependence syndrome, heart disease, and females with deliveries.

Average length of stay ranged from 7.7 days in the Northeast Region to 5.4 days in the West Region. The Midwest Region had 6.8 days, and the South Region had 6.0 days. The average length of stay was longest in the Northeast Region for most categories. However, one notable exception was mental disorders where the average length of stay was 14.1 days in the Midwest Region.

During 1985, the number of patients discharged from short-stay hospitals and the average lengths of stay are shown by bed size of hospital and diagnostic category in tables 12 and 13, respectively. Females with deliveries, and heart disease ranked as the highest categories for first-listed diagnosis in hospitals of all sizes.

The proportions of some diagnostic conditions treated in hospitals varied according to the size of the hospital. Greater proportions of patients were treated in the smallest hospitals (6–99 beds) for mental disorders and diseases of the respiratory system (table E). On the other hand, greater proportions of discharges were from the largest hospitals (500 beds or more) for neoplasms; diseases of the nervous system and sense organs; complications of pregnancy, childbirth, and the puerperium; congenital anomalies; and supplemental classifications.

For the most part, the average length of stay for the diagnostic chapters and categories followed the same patterns as the overall average lengths of stay for each region and bed size of hospital. That is, short hospital stays were more common in the West Region; long stays occurred more frequently in the Northeast Region. Similarly, the average length of stay generally increased as the size of the hospital increased. An exception to this occurred for the diagnostic category alcohol dependence syndrome. For this diagnosis, the longest average lengths of stay were in hospitals with 100–199 beds (13.2 days).

All-listed diagnoses

An estimated 101 million diagnoses were recorded for the 35.1 million inpatients of non-Federal short-stay hospitals in 1985 (table 14) for an average of 2.9 diagnoses per discharged patient. The average number of diagnoses per discharge increased from years prior to 1979 because of changes that were made in the way data are tabulated. Starting in 1979, up to seven diagnoses per discharge now are coded and tabulated on the NHDS data file; prior to that time, up to five diagnoses were coded. In addition, the ICD–9–CM, which is the classification scheme used for coding medical data since 1979, has inherent in it a certain amount of “double coding”; the classification used prior to 1979 does not. For example, females with deliveries all receive one additional diagnostic code that indicates the outcome of their delivery (single liveborn; twins, both liveborn; and so forth); however, this was not the case prior to 1979.

The average number of diagnoses per discharge varied only slightly by sex and race of the patient and by region and bed size of the hospital. For each of these categories, the aver-

Table E. Percent distribution of patients discharged from short-stay hospitals by bed size of hospital, according to diagnostic class: United States, 1985

[Discharges from non-Federal short-stay hospitals. Excluding newborn infants. Diagnostic groupings and code number inclusions are based on the International Classification of Diseases, 9th Revision, Clinical Modification]

<i>Diagnostic class and ICD-9-CM code</i>	<i>All sizes</i>	<i>6-99 beds</i>	<i>100-199 beds</i>	<i>200-299 beds</i>	<i>300-499 beds</i>	<i>500 beds or more</i>
	Percent distribution					
All conditions	100.0	15.2	18.4	19.8	24.6	22.0
Infectious and parasitic diseases 001-139	100.0	14.6	21.7	21.0	21.1	21.6
Neoplasms 140-239	100.0	7.6	14.3	19.5	29.6	29.0
Endocrine, nutritional and metabolic diseases, and immunity disorders 240-279	100.0	17.7	18.3	18.7	24.9	20.4
Diseases of the blood and blood-forming organs 280-289	100.0	14.4	18.1	20.1	24.6	22.8
Mental disorders 290-319	100.0	20.2	17.3	16.7	25.5	20.3
Diseases of the nervous system and sense organs 320-389	100.0	11.7	17.8	19.1	24.1	27.3
Diseases of the circulatory system 390-459	100.0	14.9	16.4	22.0	25.1	21.6
Diseases of the respiratory system 460-519	100.0	20.3	21.7	21.3	20.7	16.0
Diseases of the digestive system 520-579	100.0	18.1	18.8	21.2	23.2	18.7
Diseases of the genitourinary system 580-629	100.0	15.5	21.2	19.1	24.1	20.2
Complications of pregnancy, childbirth, and the puerperium ¹ 630-676	100.0	12.6	17.8	16.2	25.6	27.8
Diseases of the skin and subcutaneous tissue 680-709	100.0	16.9	18.7	18.3	22.0	24.0
Diseases of the musculoskeletal system and connective tissue 710-739	100.0	13.9	20.0	20.4	23.6	22.0
Congenital anomalies 740-759	100.0	5.7	25.2	14.4	22.7	31.9
Certain conditions originating in the perinatal period 760-779	100.0	9.0	20.0	17.1	30.3	23.6
Symptoms, signs, and ill-defined conditions 780-799	100.0	13.1	19.2	22.5	23.9	21.4
Injury and poisoning 800-999	100.0	16.2	18.2	20.6	24.5	20.5
Supplementary classifications V01-V82	100.0	13.1	17.4	17.1	26.7	25.7

¹Females with deliveries are included under "supplementary classifications."

age was 2.8-3.0 diagnoses per patient. A larger variation occurred by age. The average number of diagnoses per discharge for the age groups under 15 years, 15-44 years, 45-64 years, and 65 years and over was 1.9, 2.3, 2.9, and 3.9, respectively.

Diseases of the circulatory system ranked first among the ICD-9-CM diagnostic chapters for all-listed diagnoses, with

19.8 million diagnoses. This was followed by diseases of the digestive system (8.2 million); supplementary classifications (8.0 million); diseases of the respiratory system (7.5 million); and diseases of the genitourinary system (7.4 million). These five ICD-9-CM chapters accounted for approximately one-half of the all-listed diagnoses in 1985.

Utilization by procedures

One or more procedures were performed for an estimated 20.7 million of the 35.1 million inpatients discharged from short-stay hospitals during 1985. A total of 36.8 million procedures, or an average of 1.8 per patient who underwent at least one procedure, were recorded in 1985 (table 15).^a

These figures are higher than those reported prior to 1979 because changes were made in the tabulation and coding of data for the NHDS that resulted in the reporting of a greater number of procedures. Beginning in 1979 more procedures, both in number per patient and in type of procedure, were

coded. Specifically, starting in 1979 up to four procedures, instead of only three, were coded for each discharge. Furthermore, only figures for "surgical" operations were published in the past. However, since 1979 the total number includes many additional nonsurgical procedures. (See appendix I under the section entitled "Medical coding and edit" and appendix II under the section entitled "Surgical and nonsurgical procedures" for more information on the differences between coding the ICDA and the ICD-9-CM.)

The number and percent of patients with surgical and nonsurgical procedures in 1985 and the number and percent of patients with at least one surgical procedure are shown in table F. About 59 percent of the patients discharged had some procedure, including diagnostic and nonsurgical procedures. Some

^aAs mentioned in the introduction, the use of commercial abstract service data for a sample of the discharges has resulted in increases in estimates of miscellaneous diagnostic and therapeutic procedures (see appendix I).

Table F. Number of patients discharged from short-stay hospitals with and without procedures and percent with procedures by age, sex, and race of patient and geographic region and bed size of hospital: United States, 1985

[Discharges from non-Federal short-stay hospitals. Excludes newborn infants]

Characteristic	All discharged patients	Patients without procedures	Patients with procedures			
			All patients	Patients with surgical procedures	All patients	Patients with surgical procedures
	Number in thousands		Percent			
All patients	35,056	14,406	20,651	16,097	58.9	45.9
Age						
Under 15 years	2,972	1,688	1,283	991	43.2	33.3
15-44 years	13,966	4,863	9,104	7,921	65.2	56.7
45-64 years	7,610	3,004	4,605	3,369	60.5	44.3
65 years and over	10,508	4,850	5,658	3,816	53.8	36.3
Sex						
Male	14,160	6,261	7,900	5,789	55.8	40.9
Female	20,896	8,145	12,751	10,308	61.0	49.3
Race						
White	26,379	10,727	15,651	12,121	59.3	45.9
All other	5,181	2,192	2,989	2,281	57.7	44.0
Not stated	3,497	1,487	2,010	1,695	57.5	48.5
Geographic region						
Northeast	7,168	2,748	4,420	3,248	61.7	45.3
Midwest	9,111	3,712	5,399	4,239	59.3	46.5
South	12,274	5,546	6,728	5,403	54.8	44.0
West	6,502	2,399	4,103	3,207	63.1	49.3
Bed size of hospital						
6-99 beds	5,331	3,231	2,100	1,732	39.4	32.5
100-199 beds	6,443	2,912	3,531	2,781	54.8	43.2
200-299 beds	6,953	2,605	4,348	3,171	62.5	45.6
300-499 beds	8,625	3,236	5,389	4,286	62.5	49.7
500 beds or more	7,703	2,422	5,281	4,126	68.6	53.6

variations in the proportions, however, occurred by age and sex of the patient, geographic region, and bed size of the hospital. Patients 15–44 years of age had the highest proportion of all the age groups with procedures (65 percent). Women had more procedures than men (61 percent compared with 56 percent), primarily because of those relating to childbirth. The proportion of patients with one or more procedures increased with the size of the hospital, from 39 percent in hospitals with 6–99 beds to about 69 percent in hospitals with 500 beds or more.

Approximately 52 percent of the patients with procedures had only one operation or nonsurgical procedure during their hospitalization (table G). About 27 percent of the patients had two procedures, about 12 percent had three, and about 9 percent had four or more. By age, patients under 15 years of age had the lowest proportion of multiple procedures (35 percent) and those 45–64 years and 65 years of age and over had the largest proportion (54 and 55 percent, respectively). About 42 percent of the patients discharged from the smallest hospitals had more than one procedure; about 52 percent of the patients discharged from hospitals of all other sizes had two or more procedures during their hospitalization.

Procedures are grouped in the detailed tables of this report

by the 16 major ICD–9–CM groups. Selected procedures within these groups are presented by specific categories within the detailed tables as well as in the text tables. Some of these categories—such as repair of inguinal hernia, prostatectomy, and hysterectomy—are presented as single categories although they may be divided into more precise subgroups.

Miscellaneous diagnostic and therapeutic procedures (8.8 million) ranked first among the surgical and nonsurgical procedures performed during 1985. Other leading ICD–9–CM groups were operations on the digestive system (5.7 million), obstetrical procedures (4.3 million), operations on the musculoskeletal system (3.5 million), and operations on the female genital organs (3.3 million). About two-thirds of the procedures performed in 1985 were included in these five major groups.

The number and rate of all-listed procedures in 1985 by selected ICD–9–CM categories are shown in table H. The categories presented in this table include procedures that were performed frequently during the year. Many of the procedures included in this table are diagnostic and nonsurgical procedures that were not published by the NHDS prior to 1979, such as endoscopy on the digestive system, computerized axial tomography (CAT scan), diagnostic ultrasound, and arteriography and angiocardiology using contrast material. Over

Table G. Percent distribution of patients discharged from short-stay hospitals by number of procedures, according to age, sex, and race of patient and geographic region and bed size of hospital: United States, 1985

[Discharges from non-Federal short-stay hospitals. Excludes newborn infants]

Characteristic	All discharged patients with procedures	Percent distribution			
		1 procedure	2 procedures	3 procedures	4 procedures or more
All patients	100.0	52.3	26.5	11.9	9.2
Age					
Under 15 years	100.0	65.0	23.8	6.5	4.7
15–44 years	100.0	58.1	25.7	10.2	6.1
45–64 years	100.0	45.9	27.9	14.6	11.6
65 years and over	100.0	45.5	27.5	13.7	13.3
Sex					
Male	100.0	49.2	26.7	13.1	11.0
Female	100.0	54.3	26.4	11.2	8.1
Race					
White	100.0	51.3	26.8	12.3	9.6
All other	100.0	55.1	25.3	10.9	8.7
Not stated	100.0	56.4	26.3	10.6	6.7
Geographic region					
Northeast	100.0	52.4	26.0	11.6	10.0
Midwest	100.0	49.3	26.7	13.2	10.8
South	100.0	53.9	26.9	11.4	7.8
West	100.0	53.7	26.3	11.4	8.7
Bed size of hospital					
6–99 beds	100.0	57.8	26.6	9.9	5.8
100–199 beds	100.0	56.4	25.4	10.8	7.4
200–299 beds	100.0	49.5	27.6	12.9	10.0
300–499 beds	100.0	51.9	26.1	12.1	9.9
500 beds or more	100.0	50.3	26.9	12.4	10.4

NOTE: A maximum of 4 procedures was coded for each patient discharged.

Table H. Number and rate of all-listed surgical and nonsurgical procedures for patients discharged from short-stay hospitals, by selected procedure categories: United States, 1985

[Discharges from non-Federal short-stay hospitals. Excludes newborn infants. Procedure groupings and code number inclusions are based on the International Classification of Diseases, 9th Revision, Clinical Modification]

Procedure category and ICD-9-CM code	Surgical procedures	
	Number in thousands	Rate per 100,000 population
All procedures	36,760	15,508.1
Surgical procedures ¹	24,799	10,462.1
Procedures to assist delivery	2,494	1,052.1
Biopsy ¹	1,438	606.5
Cesarean section	877	369.9
Hysterectomy	670	282.8
Excision or destruction of lesion or tissue of skin or subcutaneous tissue	593	250.2
Repair of current obstetric laceration	548	231.0
Operations on spinal cord and spinal canal structures except biopsies	530	223.6
Oophorectomy and salpingo-oophorectomy	525	221.3
Arthroplasty of joints	507	213.9
Open reduction of fracture	492	207.4
Cholecystectomy	475	200.3
Bilateral destruction or occlusion of fallopian tubes	466	196.8
Repair of inguinal hernia	416	175.4
Open heart	379	159.9
Prostatectomy	367	154.7
Diagnostic dilation and curettage of uterus	349	147.1
Operations on muscle, tendons, fascia, and bursa	340	143.4
Excision or destruction of intervertebral disc and spinal fusion	323	136.1
Tonsillectomy with or without adenoidectomy	317	133.9
Division of peritoneal adhesions	309	130.3
Nonsurgical procedures ¹	11,960	5045.8
Endoscopy of the digestive system	1,542	650.7
Computerized axial tomography (CAT scan)	1,378	581.2
Diagnostic ultrasound	1,234	520.5
Arteriography and angiocardiology using contrast material	1,117	471.3
Radioisotope scan	838	353.6
Endoscopy of the urinary system through natural orifice	683	288.0
Cardiac catheterization	681	287.1
Circulatory monitoring	635	267.9
Pyelogram	442	186.4
Contrast myelogram	436	184.0
Injection or infusion of cancer chemotherapeutic substance	359	151.3
Biliary tract X-ray	322	135.8
Electrographic monitoring	308	129.8

¹See appendix II for ICD-9-CM codes in this category.

one million of each of these procedures were performed during 1985.

Data for the more traditional leading surgical operations are also shown in table H. Some of the most frequently performed surgeries, of which 500,000 or more were performed in 1985, included cesarean section, hysterectomy, excision or destruction of lesion or tissue of skin or subcutaneous tissue, cardiac catheterization, and arthroplasty of joints.

The estimated 36.8 million procedures performed in 1985 are presented for the ICD-9-CM major groups and selected categories by age, sex, race, and region in tables 15, 17, 19, and 20, respectively. The corresponding rates by age, sex, and region are shown in tables 16, 18, and 21, respectively.

Of the 36.8 million procedures performed during 1985, 41 percent were performed on patients 15-44 years of age, and only 5 percent were performed on patients under 15 years of age. The most common procedure performed on patients under 15 years was tonsillectomy with or without adenoidectomy,

and for those 15-44 years of age it was episiotomy without forceps and vacuum extraction. The most common procedure for the age group 45-64 years was arteriography and angiocardiology using contrast material; and for those 65 years and over, the most common procedures were computerized axial tomography (CAT scan), diagnostic ultrasound, and arteriography and angiocardiology using contrast material.

The rate of procedures per 1,000 population increased with advancing age from a rate of 37 for patients under 15 years to 387 for patients 65 years of age and over (table J). Except for females 15-44 years of age, the rates for both sexes also increased as age increased. The rate for females 15-44 years of age was about the same as that for females 45-64 years of age because of the large number of females 15-44 years of age operated on for obstetrical and gynecological conditions.

Of the 36.8 million procedures performed during 1985, about 14.7 million were for males and 22.1 were for females.

Table J. Number and rate of all-listed procedures for patients discharged from short-stay hospitals, by sex and age of patient: United States, 1985

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

Age	Both sexes		
	Male	Female	
	Number of procedures in thousands		
All ages	36,760	14,694	22,066
Under 15 years	1,937	1,128	809
15-44 years	14,957	4,011	10,946
45-64 years	8,838	4,361	4,478
65 years and over	11,027	5,194	5,833
	Rate per 1,000 population		
All ages	155.1	128.2	180.2
Under 15 years	37.3	42.4	31.9
15-44 years	134.0	72.9	193.4
45-64 years	196.9	203.5	190.8
65 years and over	386.5	450.5	343.1

The corresponding rates per 1,000 population were 155 for both sexes, 128 for males, and 180 for females. Of the procedures shown in table 17, the most common for males were arteriography and angiocardiology using contrast material, CAT scans, endoscopies through natural orifice, and diagnostic ultrasound. For females, the most frequently performed procedures were episiotomy without forceps and vacuum extraction, cesarean section, and diagnostic ultrasound.

The distribution of procedures by race is shown in table 19. Seventy-seven percent of all procedures were performed on white patients, 14 percent were performed on all other races (including black), and 9 percent were performed on patients with no race stated. The percent of procedures for white patients was higher for open heart surgery; insertion of prosthetic lens

(pseudophakos); cardiac catheterization; and pacemaker insertion, replacement, removal, and repair. The percents were lower, however, for curettage of uterus to terminate pregnancy, circumcision, and bilateral destruction or occlusion of fallopian tubes. For all other patients, the percents were higher for curettage of uterus to terminate pregnancy, circumcision, and spinal tap; and they were lower for open heart surgery and insertion of prosthetic lens (pseudophakos).

The number of procedures for patients discharged from short-stay hospitals by procedure category and geographic region is presented in table 20, and the corresponding rates are shown in table 21. The rate of procedures per 1,000 population was 170 in the Midwest Region, 159 in the Northeast Region, 152 in the West Region, and 144 in the South Region. Rates were highest in all regions for miscellaneous diagnostic and therapeutic procedures and operations on the digestive system.

The number of procedures in short-stay hospitals during 1985 for each ICD-9-CM category by bed size of hospital where the procedure was performed is shown in table 22. Operations on the digestive system were observed to rank highest of all-listed procedures in hospitals with less than 100 beds. The most common procedures for hospitals with 500 beds or more were miscellaneous and therapeutic procedures and operations on the digestive system.

The percent distribution of the major groups of procedures by bed size of hospital are shown in table K. Hospitals with 300 beds or more treated an estimated 47 percent of the patients hospitalized during 1985, but they performed about 53 percent of the procedures. Procedures for which large percents were performed in hospitals with 300 beds or more were operations on the cardiovascular system (71 percent), operations on the hemic and lymphatic system (62 percent), operations on the nervous system (61 percent), and operations on the respiratory system (60 percent).

Table K. Percent distribution of all-listed procedures for patients discharged from short-stay hospitals by bed size of hospital, according to procedure category: United States, 1985

[Discharges from non-Federal short-stay hospitals. Excludes newborn infants. Diagnostic groupings and code number inclusions are based on the International Classification of Diseases, 9th Revision, Clinical Modification]

Procedure category and ICD-9-CM code	All sizes	Percent distribution				
		6-99 beds	100-199 beds	200-299 beds	300-499 beds	500 beds or more
All procedures	100.0	9.3	16.3	21.7	26.4	26.3
Operations on the nervous system 01-05	100.0	6.2	15.3	18.0	26.3	34.3
Operations on the endocrine system 06-07	100.0	7.5	12.5	20.7	26.0	33.3
Operations on the eye 08-16	100.0	10.3	17.6	16.2	26.2	29.7
Operations on the ear 18-20	100.0	4.6	22.7	22.6	24.0	26.1
Operations on the nose, mouth, and pharynx 21-29	100.0	12.1	21.1	20.9	23.9	22.0
Operations on the respiratory system 30-34	100.0	3.7	13.8	22.3	29.6	30.6
Operations on the cardiovascular system 35-39	100.0	1.8	7.5	20.2	31.8	38.7
Operations on the hemic and lymphatic system 40-41	100.0	5.9	13.3	19.1	26.8	35.0
Operations on the digestive system 42-54	100.0	11.9	17.1	23.1	24.7	23.1
Operations on the urinary system 55-59	100.0	8.6	17.6	21.8	29.5	22.6
Operations on the male genital organs 60-64	100.0	9.8	17.8	21.9	29.1	21.4
Operations on the female genital organs 65-71	100.0	12.8	22.2	17.4	24.1	23.4
Obstetrical procedures 72-75	100.0	12.1	16.1	17.4	28.3	26.1
Operations on the musculoskeletal system 76-84	100.0	13.1	18.4	20.5	25.3	22.7
Operations on the integumentary system 85-86	100.0	12.6	16.6	19.0	27.2	24.7
Miscellaneous diagnostic and therapeutic procedures 87-99	100.0	5.9	14.2	26.8	25.6	27.5

Deaths in short-stay hospitals

In 1985, 96.2 percent of patients, excluding newborn infants, who were discharged from short-stay hospitals were discharged alive, 2.7 percent were discharged dead, and for 1.1 percent a discharge status was not ascribed. Of the estimated 943,000 patients who died, 50.6 percent were male and 49.4 percent were female (table L). As expected, patients 65 years and over accounted for the majority of hospital deaths—71.0 percent. Patients under 65 years of age accounted for 29.0 percent of the deaths. The 943,000 who were discharged dead from these hospitals represented about 45 percent of all persons who died during 1985.⁵

The hospital fatality rate is the number of deaths divided by the number of total discharges multiplied by 100. This is a conservative rate because the formula assumes that all those patients whose discharge status was not stated were discharged alive. A fatality rate of 2.7 has been computed for patients in 1985. The rate for males was higher than that for females—3.4 for males compared with 2.2 for females.

The age group 65 years and over had a hospital fatality rate of 6.4 per 100 discharges; however, patients under 65 years of age had a fatality rate of 1.1.

The estimated number of hospital deaths and hospital fatality rates for patients under 65 years of age and for those 65 years and over are shown for selected conditions in table M. These data are not synonymous with data for underlying cause

of death as reported in *Vital Statistics of the United States*. Of the estimated 943,000 deaths in short-stay hospitals, 68 percent are accounted for by the diagnostic groupings shown in table M. Of these, heart disease and malignant neoplasms accounted for nearly one-half (436,000) of all deaths in short-stay hospitals.

For specific diagnoses, the highest fatality rates were for acute myocardial infarction, with a rate of 15.5 per 100 discharges; heart disease, with a rate of 15.0 per 100 discharges; and nephritis, nephrotic syndrome, and nephrosis, with a rate of 14.3 per 100 discharges.

The average length of stay for patients discharged from short-stay hospitals, by discharge status, age, and sex, is shown in table N. The average stay for all patients discharged was 6.5 days. Patients discharged alive had an average stay of 6.3 days, compared with an average stay of 11.6 days for patients who died in the hospital.

Patients under 65 years of age, discharged alive, stayed an average of 5.4 days; however, those who died had an average stay of 11.8 days. The hospital stay for patients 15–44 years of age who died was 2.2 times as long as for those who were discharged alive (10.4 and 4.8). The difference in length of stay was much smaller for patients 65 years and over—8.5 days for those discharged alive and 11.6 days for those who died.

Table L. Number of deaths and fatality rate of patients discharged from short-stay hospitals by sex and age: United States, 1985

[Deaths in non-Federal short-stay hospitals. Excludes newborn infants]

Age	Both sexes			Both sexes		
	Male	Female	Both sexes	Male	Female	
	Number in thousands			Rate per 100 discharges		
All ages	943	477	466	2.7	3.4	2.2
All ages excluding obstetric conditions	941	477	464	3.1	3.4	2.9
Under 65 years	274	158	116	1.1	1.6	0.8
Under 15 years	25	13	12	0.8	0.8	0.9
15–44 years	59	36	23	0.4	0.9	0.2
45–64 years	190	110	81	2.5	2.9	2.1
65 years and over	669	319	351	6.4	7.0	5.9

Table M. Number of deaths and fatality rate of patients discharged from short-stay hospitals by age and selected first-listed diagnosis: United States, 1985

[Deaths in non-Federal short-stay hospitals. Diagnostic groupings and code number inclusions are based on the International Classification of Diseases, 9th Revision, Clinical Modification]

<i>Diagnostic category and ICD-9-CM code</i>	<i>All ages</i>	<i>Under 65 years</i>	<i>65 years and over</i>	<i>All ages</i>	<i>Under 65 years</i>	<i>65 years and over</i>
	Number in thousands			Rate per 100 discharges		
All deaths	943	274	659	2.7	1.1	6.3
Malignant neoplasms	190	78	112	9.9	8.4	11.3
Malignant neoplasms of trachea, bronchus, and lung..... 140-208, 230-234	47	20	27	15.0	14.9	16.8
Heart disease	246	48	197	6.9	3.3	9.4
Acute myocardial infarction..... 391-392.0, 393-398, 402, 404, 410-416, 420-429	117	22	95	15.5	6.9	21.8
Chronic ischemic heart disease..... 411-414	19	*4	15	1.5	*0.7	2.2
Cardiac dysrhythmias..... 427	40	10	31	7.9	5.3	9.4
Congestive heart failure..... 428.0	45	*5	40	8.1	*4.5	9.0
Cerebrovascular disease..... 430-438	80	14	65	8.7	6.2	9.5
Pneumonia, all forms..... 480-486	65	10	55	7.6	2.2	13.8
Nephritis, nephrotic syndrome, and nephrosis..... 580-589	19	*	15	14.3	*	23.1
Injury and poisoning..... 800-999	43	20	23	1.3	0.8	2.9

Table N. Average length of stay of patients discharged from short-stay hospitals, by discharge status, age, and sex: United States, 1985

[Deaths in non-Federal short-stay hospitals. Excludes newborn infants]

<i>Age</i>	<i>Discharge status</i>					
	<i>Alive</i>			<i>Dead</i>		
	<i>Both sexes</i>	<i>Male</i>	<i>Female</i>	<i>Both sexes</i>	<i>Male</i>	<i>Female</i>
	Average length of stay in days					
All ages.....	6.3	6.7	6.0	11.6	11.2	12.1
All ages excluding obstetric conditions.....	6.8	6.7	6.9	11.6	11.2	12.1
Under 65 years.....	5.4	6.0	5.0	11.8	12.0	11.5
Under 15 years.....	4.5	4.4	4.6	10.0	10.8	9.2
15-44 years.....	4.8	6.0	4.3	10.4	10.7	9.9
45-64 years.....	6.9	6.7	7.0	12.5	12.6	12.3
65 years and over.....	8.5	8.3	8.7	11.6	10.7	12.3

Newborn infant discharges

The number, percent distribution, and average length of stay of newborn infants discharged from short-stay hospitals, by sex and geographic region, are shown in table O. Because these data are based on a sample, they may not agree with data on births published in *Vital Statistics of the United States*. The estimated 3.8 million newborn infants were equally divided between the sexes.

About 36 percent (1.4 million) of newborn discharges were from the South Region, and approximately 24 percent (0.9 million) were from the Midwest Region. The percents of discharges were approximately 23 percent (0.9 million) for the West Region and 18 percent (0.7 million) for the Northeast Region. The average length of stay was 4.3 days in the Northeast Region and 2.9 days in the West Region. The average length of stay was 4.2 days in the Midwest Region and 3.9 days in the South Region. About 65 percent of the 3.8 million newborn infants discharged from short-stay hospitals were "well" (table P). A well infant is defined as one who does not have an illness or risk-related diagnosis.

The estimated 1.3 million sick infants (35 percent of all newborn) had at least one diagnosis in addition to the newborn diagnosis. Some of these additional diagnoses are shown in table Q. About 0.6 million (26 percent) of the diagnoses were for jaundice. The next three leading diagnoses were respiratory conditions, prematurity, and congenital anomalies. These four diagnoses accounted for about 55 percent of all sick newborn diagnoses. Males accounted for 59 percent of the congenital conditions, 58 percent of the respiratory diagnoses, 55 percent of the jaundice, and 54 percent of the prematurity diagnoses.

Table O. Number, percent distribution, and average length of stay for newborn infants discharged from non-Federal short-stay hospitals, by sex and geographic region: United States, 1985

<i>Sex and region</i>	<i>Number of discharges</i>	<i>Percent distribution</i>	<i>Average length of stay in days</i>
All newborn infants. . .	3,794	100.0	3.8
Sex			
Male.	1,953	51.5	3.8
Female.	1,841	48.5	3.8
Region			
Northeast.	665	17.5	4.3
Midwest.	909	24.0	4.2
South.	1,364	35.9	3.9
West.	856	22.6	2.9

Of the 1.3 million sick newborn infants, there were 21 percent more boys than girls; the boys also had 24 percent more diagnoses than girls did.

Well newborn infants had an average hospital stay of 2.8 days, and there was no difference in the length of stay by sex (table P). This table further demonstrates that sick newborn infants stay twice as long as well infants (5.7 versus 2.8 days), and they account for 53 percent of the newborn patient days although they constitute only 35 percent of newborn infants.

Table P. Number and average length of stay of newborn infants discharged from non-Federal short-stay hospitals, by sex and health status: United States, 1985

<i>Health status</i>	<i>Both sexes</i>	<i>Male</i>	<i>Female</i>
Number in thousands			
All newborn infants	3,794	1,953	1,841
Well newborn infants.	2,475	1,230	1,245
Sick newborn infants	1,319	723	596
Average length of stay in days			
All newborn infants	3.8	3.8	3.8
Well newborn infants.	2.8	2.8	2.8
Sick newborn infants	5.7	5.6	5.9

Table Q. Number of all-listed diagnoses for sick newborn infants discharged from short-stay hospitals, by selected diagnostic categories and sex: United States, 1985

[All-listed diagnoses in non-Federal short-stay hospitals. Diagnostic groupings and code number inclusions are based on the International Classification of Diseases, 9th Revision, Clinical Modification]

<i>Diagnostic category and ICD-9-CM code</i>	<i>Both sexes</i>	<i>Male</i>	<i>Female</i>
Number in thousands			
Sick newborn infant diagnoses ¹	2,213	1,228	988
Congenital anomalies. 740-759	173	102	72
Disorders relating to short gestation and unspecified low birthweight (prematurity) 765	207	112	95
Respiratory distress syndrome and other respiratory conditions of fetus and newborn. 769-770	248	145	103
Hemolytic disease of fetus or newborn, due to isoimmunization and other perinatal jaundice 773-774	582	321	261

¹Includes data for diagnostic conditions not shown in table.

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TABLE 1. NUMBER, PERCENT DISTRIBUTION, AND RATE OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS AND OF DAYS OF CARE, AND AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY SEX AND AGE: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

SEX AND AGE	DISCHARGED PATIENTS			DAYS OF CARE			
	NUMBER IN THOUSANDS	PERCENT DISTRIBUTION	RATE PER 1,000 POPULATION	NUMBER IN THOUSANDS	PERCENT DISTRIBUTION	RATE PER 1,000 POPULATION	AVERAGE LENGTH OF STAY IN DAYS
BOTH SEXES							
ALL AGES.....	35,056	100.0	147.9	226,217	100.0	954.4	6.5
UNDER 15 YEARS.....	2,972	8.5	57.2	13,554	6.0	260.8	4.6
UNDER 1 YEAR.....	787	2.2	210.2	5,203	2.3	1,390.5	6.6
1 TO 4 YEARS.....	921	2.6	64.4	3,230	1.4	225.9	3.5
5-14 YEARS.....	1,264	3.6	37.3	5,121	2.3	150.9	4.1
15-44 YEARS.....	13,966	39.8	125.1	67,397	29.8	603.6	4.8
15-19 YEARS.....	1,708	4.9	92.9	7,339	3.2	399.1	4.3
20-24 YEARS.....	2,813	8.0	138.2	11,981	5.1	568.8	4.1
25-34 YEARS.....	5,821	16.6	140.6	27,480	12.1	663.7	4.7
35-44 YEARS.....	3,624	10.3	115.0	20,996	9.3	666.5	5.8
45-64 YEARS.....	7,610	21.7	169.5	53,541	23.7	1,192.8	7.0
45-54 YEARS.....	3,298	9.4	146.2	21,736	9.6	963.7	6.6
55-64 YEARS.....	4,312	12.3	193.1	31,805	14.1	1,424.1	7.4
65 YEARS AND OVER.....	10,508	30.0	368.3	91,726	40.5	3,215.1	8.7
65-74 YEARS.....	5,011	14.3	294.9	41,090	18.2	2,417.8	8.2
75-84 YEARS.....	3,969	11.3	449.8	36,024	15.9	4,082.5	9.1
85 YEARS AND OVER.....	1,528	4.4	563.6	14,612	6.5	5,389.8	9.6
UNDER 17 YEARS.....	3,499	10.0	58.9	16,183	7.2	272.4	4.6
17-69 YEARS.....	23,533	67.1	148.5	137,714	60.9	868.7	5.9
70 YEARS AND OVER.....	8,024	22.9	420.1	72,319	32.0	3,786.4	9.0
MALE							
ALL AGES.....	14,160	100.0	123.5	97,269	100.0	848.7	6.9
UNDER 15 YEARS.....	1,698	12.0	63.8	7,647	7.9	287.5	4.5
UNDER 1 YEAR.....	449	3.2	234.2	2,829	2.9	1,476.7	6.3
1 TO 4 YEARS.....	541	3.8	74.0	1,802	1.9	246.4	3.3
5-14 YEARS.....	708	5.0	40.8	3,015	3.1	173.6	4.3
15-44 YEARS.....	4,153	29.3	75.4	25,268	26.0	458.9	6.1
15-19 YEARS.....	530	3.7	57.0	2,932	3.0	315.3	5.5
20-24 YEARS.....	623	4.4	62.7	3,682	3.8	370.2	5.9
25-34 YEARS.....	1,522	10.8	74.5	9,560	9.8	467.7	6.3
35-44 YEARS.....	1,478	10.4	96.1	9,096	9.4	591.4	6.2
45-64 YEARS.....	3,776	26.7	176.2	26,135	26.9	1,219.9	6.9
45-54 YEARS.....	1,596	11.3	146.1	10,322	10.6	944.6	6.5
55-64 YEARS.....	2,179	15.4	207.6	15,814	16.3	1,506.4	7.3
65 YEARS AND OVER.....	4,533	32.0	393.2	38,219	39.3	3,315.0	8.4
65-74 YEARS.....	2,389	16.9	319.9	19,243	19.8	2,577.0	8.1
75-84 YEARS.....	1,657	11.7	503.8	14,514	14.9	4,414.2	8.8
85 YEARS AND OVER.....	488	3.4	631.0	4,462	4.6	5,772.5	9.1
UNDER 17 YEARS.....	1,904	13.4	62.6	8,869	9.1	291.6	4.7
17-69 YEARS.....	8,942	63.1	116.2	59,690	61.4	775.9	6.7
70 YEARS AND OVER.....	3,315	23.4	455.6	28,710	29.5	3,946.4	8.7
FEMALE							
ALL AGES.....	20,896	100.0	170.7	128,948	100.0	1,053.3	6.2
UNDER 15 YEARS.....	1,274	6.1	50.2	5,907	4.6	232.9	4.6
UNDER 1 YEAR.....	338	1.6	185.0	2,374	1.8	1,300.2	7.0
1 TO 4 YEARS.....	380	1.8	54.4	1,428	1.1	204.5	3.8
5-14 YEARS.....	556	2.7	33.6	2,106	1.6	127.2	3.8
15-44 YEARS.....	9,813	47.0	173.4	42,128	32.7	744.3	4.3
15-19 YEARS.....	1,178	5.6	129.5	4,407	3.4	484.7	3.7
20-24 YEARS.....	2,190	10.5	210.3	7,900	6.1	758.6	3.6
25-34 YEARS.....	4,299	20.6	205.0	17,920	13.9	854.6	4.2
35-44 YEARS.....	2,146	10.3	133.1	11,901	9.2	738.1	5.5
45-64 YEARS.....	3,834	18.3	163.4	27,405	21.3	1,168.1	7.1
45-54 YEARS.....	1,701	8.1	146.3	11,414	8.9	981.6	6.7
55-64 YEARS.....	2,132	10.2	180.2	15,991	12.4	1,351.3	7.5
65 YEARS AND OVER.....	5,975	28.6	351.4	53,507	41.5	3,147.1	9.0
65-74 YEARS.....	2,623	12.6	275.2	21,847	16.9	2,292.9	8.3
75-84 YEARS.....	2,312	11.1	417.7	21,510	16.7	3,885.5	9.3
85 YEARS AND OVER.....	1,040	5.0	536.8	10,150	7.9	5,237.2	9.8
UNDER 17 YEARS.....	1,595	7.6	55.0	7,314	5.7	252.2	4.6
17-69 YEARS.....	14,591	69.8	178.8	78,024	60.5	956.2	5.3
70 YEARS AND OVER.....	4,709	22.5	398.2	43,609	33.8	3,687.6	9.3

TABLE 2. NUMBER, PERCENT DISTRIBUTION, AND RATE OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS AND OF DAYS OF CARE, AND AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY SEX, RACE, AND AGE: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

SEX, RACE, AND AGE	DISCHARGED PATIENTS			DAYS OF CARE			
	NUMBER IN THOUSANDS	PERCENT DISTRIBUTION	RATE PER 1,000 POPULATION	NUMBER IN THOUSANDS	PERCENT DISTRIBUTION	RATE PER 1,000 POPULATION	AVERAGE LENGTH OF STAY IN DAYS
BOTH SEXES							
ALL RACES, ALL AGES.....	35,056	100.0	147.9	226,217	100.0	954.4	6.5
UNDER 15 YEARS.....	2,972	8.5	57.2	13,554	6.0	260.8	4.6
15-44 YEARS.....	13,966	39.8	125.1	67,397	29.8	603.6	4.8
45-64 YEARS.....	7,610	21.7	169.5	53,541	23.7	1,192.8	7.0
65 YEARS AND OVER.....	10,508	30.0	368.3	91,726	40.5	3,215.1	8.7
WHITE, ALL AGES.....	26,379	75.2	131.0	172,316	76.2	855.4	6.5
UNDER 15 YEARS.....	2,070	5.9	49.2	9,176	4.1	218.0	4.4
15-44 YEARS.....	9,693	27.7	102.8	46,762	20.7	496.0	4.8
45-64 YEARS.....	5,927	16.9	150.7	41,038	18.1	1,043.7	6.9
65 YEARS AND OVER.....	8,688	24.8	337.5	75,340	33.3	2,926.6	8.7
ALL OTHER, ALL AGES.....	5,181	14.8	145.5	34,564	15.3	970.9	6.7
UNDER 15 YEARS.....	606	1.7	61.3	3,109	1.4	314.8	5.1
15-44 YEARS.....	2,668	7.6	153.6	13,675	6.0	787.3	5.1
45-64 YEARS.....	985	2.8	177.0	8,181	3.6	1,469.0	8.3
65 YEARS AND OVER.....	922	2.6	330.7	9,599	4.2	3,444.2	10.4
RACE NOT STATED, ALL AGES.....	3,497	10.0	...	19,337	8.5	...	5.5
UNDER 15 YEARS.....	296	0.8	...	1,269	0.6	...	4.3
15-44 YEARS.....	1,605	4.6	...	6,959	3.1	...	4.3
45-64 YEARS.....	697	2.0	...	4,322	1.9	...	6.2
65 YEARS AND OVER.....	898	2.6	...	6,787	3.0	...	7.6
MALE							
ALL RACES, ALL AGES.....	14,160	100.0	123.5	97,269	100.0	848.7	6.9
UNDER 15 YEARS.....	1,698	12.0	63.8	7,647	7.9	287.5	4.5
15-44 YEARS.....	4,153	29.3	75.4	25,268	26.0	458.9	6.1
45-64 YEARS.....	3,776	26.7	176.2	26,135	26.9	1,219.9	6.9
65 YEARS AND OVER.....	4,533	32.0	393.2	38,219	39.3	3,315.0	8.4
WHITE, ALL AGES.....	10,839	76.5	110.8	73,900	76.0	755.7	6.8
UNDER 15 YEARS.....	1,183	8.4	54.8	5,127	5.3	237.4	4.3
15-44 YEARS.....	2,970	21.0	63.4	17,635	18.1	376.1	5.9
45-64 YEARS.....	2,943	20.8	155.6	19,863	20.4	1,050.4	6.8
65 YEARS AND OVER.....	3,742	26.4	360.2	31,274	32.2	3,010.0	8.4
ALL OTHER, ALL AGES.....	1,957	13.8	116.3	15,126	15.6	898.7	7.7
UNDER 15 YEARS.....	344	2.4	68.7	1,778	1.8	355.5	5.2
15-44 YEARS.....	724	5.1	88.6	5,040	5.2	616.6	7.0
45-64 YEARS.....	486	3.4	193.4	4,177	4.3	1,661.5	8.6
65 YEARS AND OVER.....	404	2.8	354.3	4,130	4.2	3,626.1	10.2
RACE NOT STATED, ALL AGES.....	1,364	9.6	...	8,243	8.5	...	6.0
UNDER 15 YEARS.....	171	1.2	...	741	0.8	...	4.3
15-44 YEARS.....	459	3.2	...	2,593	2.7	...	5.7
45-64 YEARS.....	347	2.5	...	2,095	2.2	...	6.0
65 YEARS AND OVER.....	387	2.7	...	2,815	2.9	...	7.3
FEMALE							
ALL RACES, ALL AGES.....	20,896	100.0	170.7	128,948	100.0	1,053.3	6.2
UNDER 15 YEARS.....	1,274	6.1	50.2	5,907	4.6	232.9	4.6
15-44 YEARS.....	9,813	47.0	173.4	42,128	32.7	744.3	4.3
45-64 YEARS.....	3,834	18.3	163.4	27,405	21.3	1,168.1	7.1
65 YEARS AND OVER.....	5,975	28.6	351.4	53,507	41.5	3,147.1	9.0
WHITE, ALL AGES.....	15,540	74.4	149.9	98,416	76.3	949.5	6.3
UNDER 15 YEARS.....	887	4.2	43.3	4,048	3.1	197.6	4.6
15-44 YEARS.....	6,723	32.2	141.8	29,127	22.6	614.5	4.3
45-64 YEARS.....	2,985	14.3	146.2	21,175	16.4	1,037.5	7.1
65 YEARS AND OVER.....	4,946	23.7	322.1	44,066	34.2	2,870.2	8.9
ALL OTHER, ALL AGES.....	3,223	15.4	171.7	19,438	15.1	1,035.5	6.0
UNDER 15 YEARS.....	262	1.3	53.8	1,331	1.0	273.1	5.1
15-44 YEARS.....	1,944	9.3	211.4	8,635	6.7	939.1	4.4
45-64 YEARS.....	499	2.4	163.5	4,004	3.1	1,311.0	8.0
65 YEARS AND OVER.....	518	2.5	314.2	5,469	4.2	3,316.5	10.6
RACE NOT STATED, ALL AGES.....	2,132	10.2	...	11,094	8.6	...	5.2
UNDER 15 YEARS.....	125	0.6	...	529	0.4	...	4.2
15-44 YEARS.....	1,147	5.5	...	4,366	3.4	...	3.8
45-64 YEARS.....	350	1.7	...	2,227	1.7	...	6.4
65 YEARS AND OVER.....	511	2.4	...	3,972	3.1	...	7.8

TABLE 3. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, DAYS OF CARE, AND AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY GEOGRAPHIC REGION, AGE, AND PRINCIPAL EXPECTED SOURCE OF PAYMENT: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

REGION AND AGE	ALL PRINCIPAL EXPECTED SOURCES OF PAYMENT	PRIVATE INSURANCE	MEDICARE	MEDICAID	WORKMEN'S COMPEN-SATION	OTHER GOVERNMENT PAYMENTS	SELF-PAY	OTHER PAYMENTS AND NO CHARGE
UNITED STATES								
NUMBER OF PATIENTS DISCHARGED IN THOUSANDS								
ALL AGES.....	35,056	15,726	11,341	3,344	756	790	2,346	752
UNDER 15 YEARS.....	2,972	1,727	35	712	-	113	316	70
15-44 YEARS.....	13,966	8,691	332	1,985	464	446	1,569	479
45-64 YEARS.....	7,610	5,064	1,014	551	197	196	402	186
65 YEARS AND OVER.....	10,508	244	9,961	96	96	36	59	17
NORTHEAST								
ALL AGES.....	7,168	3,174	2,508	784	106	87	395	115
UNDER 15 YEARS.....	529	311	7	160	-	7	30	14
15-44 YEARS.....	2,673	1,699	50	463	66	52	274	69
45-64 YEARS.....	1,614	1,109	199	141	35	24	76	29
65 YEARS AND OVER.....	2,353	55	2,252	20	25	*	14	*
MIDWEST								
ALL AGES.....	9,111	4,234	3,003	889	225	172	471	118
UNDER 15 YEARS.....	754	454	10	205	-	26	51	28
15-44 YEARS.....	3,538	2,311	110	524	97	96	316	84
45-64 YEARS.....	1,996	1,410	245	139	51	41	89	20
65 YEARS AND OVER.....	2,823	58	2,638	21	76	29	15	26
SOUTH								
ALL AGES.....	12,274	5,726	3,707	1,140	270	257	966	208
UNDER 15 YEARS.....	1,274	739	12	273	-	44	186	20
15-44 YEARS.....	5,006	3,168	109	658	197	135	607	132
45-64 YEARS.....	2,650	1,734	395	178	64	73	153	53
65 YEARS AND OVER.....	3,344	86	3,191	30	29	25	20	*
WEST								
ALL AGES.....	6,502	2,592	2,123	532	156	275	513	310
UNDER 15 YEARS.....	415	223	26	74	-	37	48	27
15-44 YEARS.....	2,749	1,513	63	340	104	163	372	195
45-64 YEARS.....	1,350	811	174	93	46	56	85	84
65 YEARS AND OVER.....	1,988	45	1,880	25	26	19	29	*
UNITED STATES								
NUMBER OF DAYS OF CARE IN THOUSANDS								
ALL AGES.....	226,217	83,031	98,563	18,992	4,600	4,765	12,101	4,164
UNDER 15 YEARS.....	13,554	7,184	272	3,499	-	645	1,665	290
15-44 YEARS.....	67,397	40,503	2,781	9,988	2,380	2,370	6,960	2,413
45-64 YEARS.....	53,541	33,431	8,564	4,560	1,259	1,433	2,972	1,321
65 YEARS AND OVER.....	91,726	1,913	86,946	945	960	317	505	140
NORTHEAST								
ALL AGES.....	55,513	18,410	27,578	5,070	630	563	2,583	678
UNDER 15 YEARS.....	2,391	1,349	263	719	-	22	169	68
15-44 YEARS.....	13,956	8,342	419	2,707	358	304	1,492	334
45-64 YEARS.....	13,240	8,174	2,222	1,425	235	179	759	246
65 YEARS AND OVER.....	25,925	545	24,875	218	237	*	162	*
MIDWEST								
ALL AGES.....	61,514	24,246	25,655	5,538	1,631	1,202	2,615	628
UNDER 15 YEARS.....	3,932	2,089	71	1,272	-	216	241	22
15-44 YEARS.....	18,987	12,014	1,010	2,820	500	628	1,617	397
45-64 YEARS.....	14,376	9,684	2,056	1,212	348	289	644	143
65 YEARS AND OVER.....	24,219	459	22,516	233	783	269	112	245
SOUTH								
ALL AGES.....	73,817	28,734	30,053	5,661	1,573	1,644	4,817	1,335
UNDER 15 YEARS.....	5,479	2,886	97	1,190	-	213	1,003	90
15-44 YEARS.....	23,212	14,185	855	2,956	1,072	757	2,542	844
45-64 YEARS.....	17,862	11,029	3,016	1,272	429	639	1,098	379
65 YEARS AND OVER.....	27,265	634	26,086	242	272	235	174	*
WEST								
ALL AGES.....	35,373	11,641	15,277	2,723	765	1,357	2,087	1,523
UNDER 15 YEARS.....	1,751	859	240	317	-	194	252	89
15-44 YEARS.....	11,242	5,963	497	1,504	449	682	1,308	838
45-64 YEARS.....	8,062	4,545	1,271	650	248	326	471	553
65 YEARS AND OVER.....	14,318	274	13,469	252	268	155	256	*

TABLE 3. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, DAYS OF CARE, AND AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY GEOGRAPHIC REGION, AGE, AND PRINCIPAL EXPECTED SOURCE OF PAYMENT: UNITED STATES, 1985—CON.

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

REGION AND AGE	ALL PRINCIPAL EXPECTED SOURCES OF PAYMENT	PRIVATE INSURANCE	MEDICARE	MEDICAID	WORKMEN'S COMPEN- SATION	OTHER GOVERNMENT PAYMENTS	SELF-PAY	OTHER PAYMENTS AND NO CHARGE
UNITED STATES		AVERAGE LENGTH OF STAY IN DAYS						
ALL AGES.....	6.5	5.3	8.7	5.7	6.1	6.0	5.2	5.5
UNDER 15 YEARS.....	4.6	4.2	7.8	4.9	-	5.7	5.3	4.2
15-44 YEARS.....	4.8	4.7	8.4	5.0	5.1	5.3	4.4	5.0
45-64 YEARS.....	7.0	6.6	8.4	8.3	6.4	7.3	7.4	7.1
65 YEARS AND OVER.....	8.7	7.9	8.7	9.8	10.0	8.8	8.6	8.1
NORTHEAST								
ALL AGES.....	7.7	5.8	11.0	6.5	6.0	6.5	6.5	5.9
UNDER 15 YEARS.....	4.5	4.3	*9.1	4.5	-	*3.3	5.6	4.9
15-44 YEARS.....	5.2	4.9	8.4	5.8	5.5	5.8	5.4	4.8
45-64 YEARS.....	8.2	7.4	11.1	10.1	6.7	7.3	10.0	8.4
65 YEARS AND OVER.....	11.0	9.9	11.0	11.1	*7.2	*	11.5	*
MIDWEST								
ALL AGES.....	6.8	5.7	8.5	6.2	7.3	7.0	5.5	5.3
UNDER 15 YEARS.....	5.2	4.6	7.2	6.2	-	8.4	4.7	*5.1
15-44 YEARS.....	5.4	5.2	9.2	5.4	5.1	6.6	5.1	4.7
45-64 YEARS.....	7.2	6.9	8.4	8.7	6.8	7.0	7.3	7.1
65 YEARS AND OVER.....	8.6	7.9	8.5	11.1	10.3	*7.4	7.3	*7.9
SOUTH								
ALL AGES.....	6.0	5.0	8.1	5.0	5.8	6.4	5.0	6.4
UNDER 15 YEARS.....	4.3	3.9	8.1	4.4	-	4.9	5.4	4.4
15-44 YEARS.....	4.6	4.5	7.8	4.5	5.4	5.6	4.2	6.4
45-64 YEARS.....	6.7	6.4	7.6	7.1	6.7	8.7	7.2	7.2
65 YEARS AND OVER.....	8.2	7.4	8.2	8.0	*8.4	*7.7	8.7	*
WEST								
ALL AGES.....	5.4	4.5	7.2	5.1	4.9	4.9	4.1	4.9
UNDER 15 YEARS.....	4.2	3.8	*6.5	4.3	-	5.2	5.3	3.3
15-44 YEARS.....	4.1	3.9	7.9	4.4	4.3	4.2	3.5	4.3
45-64 YEARS.....	6.0	5.6	7.3	7.0	5.4	5.8	5.6	6.6
65 YEARS AND OVER.....	7.2	6.1	7.2	10.0	*11.3	8.4	*5.9	*

TABLE 4. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, DAYS OF CARE, AND AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY AGE, GEOGRAPHIC REGION, BED SIZE OF HOSPITAL, AND SEX: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

AGE, REGION, AND BED SIZE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
ALL AGES									
	NUMBER OF PATIENTS DISCHARGED IN THOUSANDS			NUMBER OF DAYS OF CARE IN THOUSANDS			AVERAGE LENGTH OF STAY IN DAYS		
UNITED STATES, ALL SIZES.....	35,056	14,160	20,896	226,217	97,269	128,948	6.5	6.9	6.2
6-99 BEDS.....	5,331	2,118	3,213	27,838	11,441	16,397	5.2	5.4	5.1
100-199 BEDS.....	6,443	2,565	3,878	37,114	15,889	21,225	5.8	6.2	5.5
200-299 BEDS.....	6,953	2,905	4,048	45,309	19,695	25,614	6.5	6.8	6.3
300-499 BEDS.....	8,625	3,459	5,167	59,079	25,282	33,797	6.8	7.3	6.5
500 BEDS OR MORE.....	7,703	3,113	4,590	56,878	24,963	31,915	7.4	8.0	7.0
NORTHEAST, ALL SIZES.....	7,168	2,998	4,170	55,513	23,952	31,560	7.7	8.0	7.6
6-99 BEDS.....	793	376	417	5,722	2,825	2,897	7.2	7.5	6.9
100-199 BEDS.....	889	355	534	6,264	2,454	3,811	7.0	6.9	7.1
200-299 BEDS.....	1,433	631	801	11,677	5,072	6,605	8.2	8.0	8.2
300-499 BEDS.....	2,379	935	1,443	17,842	7,379	10,463	7.5	7.9	7.2
500 BEDS OR MORE.....	1,675	701	974	14,007	6,223	7,784	8.4	8.9	8.0
MIDWEST, ALL SIZES.....	9,111	3,734	5,378	61,514	27,002	34,512	6.8	7.2	6.4
6-99 BEDS.....	1,100	416	684	5,553	2,042	3,512	5.0	4.9	5.1
100-199 BEDS.....	941	384	556	5,941	2,766	3,176	6.3	7.2	5.7
200-299 BEDS.....	1,651	656	995	10,859	4,558	6,301	6.6	6.9	6.3
300-499 BEDS.....	2,647	1,140	1,506	18,190	8,325	9,865	6.9	7.3	6.5
500 BEDS OR MORE.....	2,773	1,138	1,635	20,970	9,312	11,659	7.6	8.2	7.1
SOUTH, ALL SIZES.....	12,274	4,850	7,425	73,817	30,995	42,823	6.0	6.4	5.8
6-99 BEDS.....	1,984	776	1,208	10,378	4,144	6,234	5.2	5.3	5.2
100-199 BEDS.....	3,632	1,382	2,250	19,248	7,891	11,357	5.3	5.7	5.0
200-299 BEDS.....	1,956	843	1,113	12,173	5,416	6,757	6.2	6.4	6.1
300-499 BEDS.....	1,999	780	1,219	13,722	5,642	8,080	6.9	7.2	6.6
500 BEDS OR MORE.....	2,703	1,069	1,635	18,296	7,901	10,395	6.8	7.4	6.4
WEST, ALL SIZES.....	6,502	2,579	3,923	35,373	15,320	20,053	5.4	5.9	5.1
6-99 BEDS.....	1,454	550	904	6,184	2,430	3,754	4.3	4.4	4.2
100-199 BEDS.....	982	444	537	5,660	2,778	2,882	5.8	6.3	5.4
200-299 BEDS.....	1,913	775	1,138	10,600	4,649	5,951	5.5	6.0	5.2
300-499 BEDS.....	1,602	603	998	9,324	3,935	5,389	5.8	6.5	5.4
500 BEDS OR MORE.....	552	206	346	3,604	1,527	2,077	6.5	7.4	6.0
UNDER 15 YEARS									
UNITED STATES, ALL SIZES.....	2,972	1,698	1,274	13,554	7,647	5,907	4.6	4.5	4.6
6-99 BEDS.....	396	230	166	1,310	732	578	3.3	3.2	3.5
100-199 BEDS.....	775	440	335	3,336	1,881	1,455	4.3	4.3	4.3
200-299 BEDS.....	519	294	225	2,204	1,300	904	4.2	4.4	4.0
300-499 BEDS.....	625	362	263	2,912	1,659	1,254	4.7	4.6	4.8
500 BEDS OR MORE.....	657	373	284	3,792	2,075	1,717	5.8	5.6	6.0
NORTHEAST, ALL SIZES.....	529	306	223	2,391	1,337	1,054	4.5	4.4	4.7
6-99 BEDS.....	44	25	19	178	93	85	4.0	3.7	4.5
100-199 BEDS.....	56	29	27	183	90	93	3.3	3.1	3.4
200-299 BEDS.....	83	44	38	300	179	121	3.6	4.0	3.1
300-499 BEDS.....	184	111	73	882	471	411	4.8	4.2	5.6
500 BEDS OR MORE.....	162	96	66	849	505	344	5.2	5.2	5.2
MIDWEST, ALL SIZES.....	754	428	326	3,932	2,312	1,620	5.2	5.4	5.0
6-99 BEDS.....	83	45	38	268	135	132	3.2	3.0	3.5
100-199 BEDS.....	86	46	40	464	243	220	5.4	5.3	5.6
200-299 BEDS.....	181	106	74	905	586	319	5.0	5.5	4.3
300-499 BEDS.....	189	110	79	869	541	328	4.6	4.9	4.2
500 BEDS OR MORE.....	215	121	95	1,427	806	620	6.6	6.7	6.6
SOUTH, ALL SIZES.....	1,274	731	544	5,479	3,061	2,418	4.3	4.2	4.4
6-99 BEDS.....	172	102	71	553	321	231	3.2	3.2	3.3
100-199 BEDS.....	580	334	246	2,506	1,446	1,060	4.3	4.3	4.3
200-299 BEDS.....	135	74	60	531	283	248	3.9	3.8	4.1
300-499 BEDS.....	146	85	61	651	368	283	4.5	4.3	4.7
500 BEDS OR MORE.....	241	135	106	1,238	643	595	5.1	4.8	5.6
WEST, ALL SIZES.....	415	233	182	1,751	937	815	4.2	4.0	4.5
6-99 BEDS.....	96	58	38	311	182	129	3.2	3.2	3.4
100-199 BEDS.....	54	31	22	182	101	81	3.4	3.2	3.6
200-299 BEDS.....	120	68	52	468	253	216	3.9	3.7	4.2
300-499 BEDS.....	106	55	51	510	279	231	4.8	5.0	4.6
500 BEDS OR MORE.....	39	21	18	279	121	157	7.1	5.8	8.6

TABLE 4. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, DAYS OF CARE, AND AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY AGE, GEOGRAPHIC REGION, BED SIZE OF HOSPITAL, AND SEX: UNITED STATES, 1985--CON.

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

AGE, REGION, AND BED SIZE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
15-44 YEARS									
	NUMBER OF PATIENTS DISCHARGED IN THOUSANDS			NUMBER OF DAYS OF CARE IN THOUSANDS			AVERAGE LENGTH OF STAY IN DAYS		
UNITED STATES, ALL SIZES.....	13,966	4,153	9,813	67,397	25,268	42,128	4.8	6.1	4.3
6-99 BEDS.....	2,088	661	1,427	8,801	3,394	5,407	4.2	5.1	3.8
100-199 BEDS.....	2,569	710	1,860	11,385	3,972	7,413	4.4	5.6	4.0
200-299 BEDS.....	2,584	817	1,767	11,858	4,536	7,322	4.6	5.6	4.1
300-499 BEDS.....	3,417	995	2,422	16,991	6,280	10,711	5.0	6.3	4.4
500 BEDS OR MORE.....	3,308	971	2,337	18,362	7,087	11,276	5.6	7.3	4.8
NORTHEAST, ALL SIZES.....	2,673	864	1,809	13,956	5,590	8,366	5.2	6.5	4.6
6-99 BEDS.....	330	158	172	2,029	1,158	871	6.2	7.3	5.1
100-199 BEDS.....	286	89	197	1,457	545	912	5.1	6.1	4.6
200-299 BEDS.....	465	164	301	2,260	895	1,366	4.9	5.5	4.5
300-499 BEDS.....	902	240	662	4,299	1,444	2,854	4.8	6.0	4.3
500 BEDS OR MORE.....	690	213	476	3,912	1,548	2,363	5.7	7.3	5.0
MIDWEST, ALL SIZES.....	3,538	1,083	2,455	18,987	7,464	11,523	5.4	6.9	4.7
6-99 BEDS.....	390	107	283	1,525	442	1,084	3.9	4.1	3.8
100-199 BEDS.....	374	115	259	2,183	1,023	1,161	5.8	8.9	4.5
200-299 BEDS.....	629	194	436	3,142	1,167	1,975	5.0	6.0	4.5
300-499 BEDS.....	1,013	336	676	5,499	2,231	3,269	5.4	6.6	4.8
500 BEDS OR MORE.....	1,131	331	801	6,637	2,602	4,035	5.9	7.9	5.0
SOUTH, ALL SIZES.....	5,006	1,417	3,589	23,212	7,983	15,228	4.6	5.6	4.2
6-99 BEDS.....	729	220	510	3,093	1,095	1,998	4.2	5.0	3.9
100-199 BEDS.....	1,562	386	1,176	6,187	1,755	4,432	4.0	4.5	3.8
200-299 BEDS.....	708	248	460	3,478	1,422	2,056	4.9	5.7	4.5
300-499 BEDS.....	796	218	577	4,099	1,400	2,699	5.2	6.4	4.7
500 BEDS OR MORE.....	1,211	344	867	6,355	2,312	4,043	5.2	6.7	4.7
WEST, ALL SIZES.....	2,749	789	1,960	11,242	4,231	7,010	4.1	5.4	3.6
6-99 BEDS.....	639	176	463	2,153	699	1,454	3.4	4.0	3.1
100-199 BEDS.....	347	119	228	1,558	650	908	4.5	5.5	4.0
200-299 BEDS.....	781	211	570	2,977	1,052	1,925	3.8	5.0	3.4
300-499 BEDS.....	706	201	506	3,095	1,205	1,890	4.4	6.0	3.7
500 BEDS OR MORE.....	277	83	194	1,459	625	834	5.3	7.6	4.3
45-64 YEARS									
UNITED STATES, ALL SIZES.....	7,610	3,776	3,834	53,541	26,135	27,405	7.0	6.9	7.1
6-99 BEDS.....	1,066	494	572	5,889	2,701	3,189	5.5	5.5	5.6
100-199 BEDS.....	1,281	613	667	8,086	3,889	4,197	6.3	6.3	6.3
200-299 BEDS.....	1,515	773	743	10,404	5,155	5,249	6.9	6.7	7.1
300-499 BEDS.....	1,940	977	962	14,411	7,163	7,248	7.4	7.3	7.5
500 BEDS OR MORE.....	1,808	919	890	14,750	7,227	7,523	8.2	7.9	8.5
NORTHEAST, ALL SIZES.....	1,614	831	782	13,240	6,668	6,572	8.2	8.0	8.4
6-99 BEDS.....	176	94	82	1,234	671	563	7.0	7.1	6.9
100-199 BEDS.....	182	87	95	1,355	594	761	7.4	6.8	8.0
200-299 BEDS.....	330	180	150	2,665	1,380	1,286	8.1	7.7	8.6
300-499 BEDS.....	535	272	263	4,395	2,233	2,162	8.2	8.2	8.2
500 BEDS OR MORE.....	391	199	192	3,591	1,790	1,801	9.2	9.0	9.4
MIDWEST, ALL SIZES.....	1,996	1,003	993	14,376	7,060	7,316	7.2	7.0	7.4
6-99 BEDS.....	216	92	124	1,108	455	653	5.1	4.9	5.3
100-199 BEDS.....	189	93	97	1,165	588	577	6.1	6.3	6.0
200-299 BEDS.....	322	151	171	2,248	979	1,269	7.0	6.5	7.4
300-499 BEDS.....	591	311	280	4,414	2,306	2,108	7.5	7.4	7.5
500 BEDS OR MORE.....	677	356	321	5,442	2,733	2,709	8.0	7.7	8.4
SOUTH, ALL SIZES.....	2,650	1,267	1,384	17,862	8,440	9,422	6.7	6.7	6.8
6-99 BEDS.....	386	171	216	2,229	997	1,232	5.8	5.8	5.7
100-199 BEDS.....	675	311	364	4,134	1,933	2,201	6.1	6.2	6.0
200-299 BEDS.....	481	244	237	3,047	1,527	1,520	6.3	6.3	6.4
300-499 BEDS.....	471	224	247	3,437	1,581	1,856	7.3	7.1	7.5
500 BEDS OR MORE.....	637	317	320	5,015	2,402	2,613	7.9	7.6	8.2
WEST, ALL SIZES.....	1,350	675	675	8,062	3,968	4,095	6.0	5.9	6.1
6-99 BEDS.....	288	137	151	1,318	578	741	4.6	4.2	4.9
100-199 BEDS.....	233	122	111	1,432	775	657	6.1	6.3	5.9
200-299 BEDS.....	382	198	184	2,444	1,269	1,175	6.4	6.4	6.4
300-499 BEDS.....	343	171	172	2,166	1,044	1,122	6.3	6.1	6.5
500 BEDS OR MORE.....	103	46	57	702	302	401	6.8	6.5	7.1

TABLE 4. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, DAYS OF CARE, AND AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY AGE, GEOGRAPHIC REGION, BED SIZE OF HOSPITAL, AND SEX: UNITED STATES, 1965--CON.

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

AGE, REGION, AND BED SIZE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
65 YEARS AND OVER	NUMBER OF PATIENTS DISCHARGED IN THOUSANDS			NUMBER OF DAYS OF CARE IN THOUSANDS			AVERAGE LENGTH OF STAY IN DAYS		
UNITED STATES, ALL SIZES.....	10,508	4,533	5,975	91,726	38,219	53,507	8.7	8.4	9.0
6-99 BEDS.....	1,781	734	1,048	11,838	4,614	7,223	6.6	6.3	6.9
100-199 BEDS.....	1,818	802	1,016	14,308	6,147	8,161	7.9	7.7	8.0
200-299 BEDS.....	2,335	1,022	1,313	20,844	8,704	12,140	8.9	8.5	9.2
300-499 BEDS.....	2,643	1,124	1,520	24,764	10,180	14,584	9.4	9.1	9.6
500 BEDS OR MORE.....	1,930	851	1,079	19,973	8,574	11,399	10.3	10.1	10.6
NORTHEAST, ALL SIZES.....	2,353	997	1,356	25,925	10,357	15,567	11.0	10.4	11.5
6-99 BEDS.....	244	99	144	2,281	902	1,378	9.4	9.1	9.5
100-199 BEDS.....	365	150	215	3,270	1,225	2,045	9.0	8.2	9.5
200-299 BEDS.....	554	243	311	6,452	2,618	3,833	11.6	10.8	12.3
300-499 BEDS.....	758	312	445	8,266	3,232	5,035	10.9	10.3	11.3
500 BEDS OR MORE.....	432	192	240	5,656	2,380	3,276	13.1	12.4	13.6
MIDWEST, ALL SIZES.....	2,823	1,219	1,604	24,219	10,166	14,052	8.6	8.3	8.8
6-99 BEDS.....	410	171	239	2,652	1,010	1,642	6.5	5.9	6.9
100-199 BEDS.....	292	130	161	2,129	912	1,217	7.3	7.0	7.5
200-299 BEDS.....	519	205	314	4,544	1,826	2,738	8.8	8.9	8.7
300-499 BEDS.....	854	383	471	7,408	3,248	4,160	8.7	8.5	8.8
500 BEDS OR MORE.....	749	330	419	7,465	3,170	4,295	10.0	9.6	10.3
SOUTH, ALL SIZES.....	3,344	1,436	1,908	27,265	11,511	15,754	8.2	8.0	8.3
6-99 BEDS.....	696	284	412	4,504	1,731	2,773	6.5	6.1	6.7
100-199 BEDS.....	814	350	464	6,421	2,758	3,663	7.9	7.9	7.9
200-299 BEDS.....	632	277	355	5,117	2,185	2,933	8.1	7.9	8.2
300-499 BEDS.....	586	252	334	5,536	2,293	3,243	9.4	9.1	9.7
500 BEDS OR MORE.....	615	273	342	5,687	2,545	3,143	9.2	9.3	9.2
WEST, ALL SIZES.....	1,988	882	1,106	14,318	6,184	8,133	7.2	7.0	7.4
6-99 BEDS.....	431	179	252	2,401	971	1,430	5.6	5.4	5.7
100-199 BEDS.....	348	172	175	2,488	1,252	1,236	7.2	7.3	7.1
200-299 BEDS.....	630	298	332	4,711	2,075	2,636	7.5	7.0	7.9
300-499 BEDS.....	446	176	270	3,554	1,407	2,146	8.0	8.0	8.0
500 BEDS OR MORE.....	134	57	77	1,164	479	685	8.7	8.5	8.9

TABLE 5. RATE OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS AND OF DAYS OF CARE, BY AGE, GEOGRAPHIC REGION, AND SEX: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

AGE AND REGION	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
RATE OF PATIENTS DISCHARGED PER 1,000 POPULATION						
ALL AGES						
UNITED STATES.....	147.9	123.5	170.7	954.4	848.7	1,053.3
NORTHEAST.....	144.1	126.3	160.3	1,115.8	1,008.9	1,213.4
MIDWEST.....	154.3	130.2	177.0	1,041.8	941.9	1,136.1
SOUTH.....	151.6	124.4	176.8	911.6	795.1	1,019.8
WEST.....	137.6	111.0	163.2	748.4	659.7	834.0
UNDER 15 YEARS						
UNITED STATES.....	57.2	63.8	50.2	260.8	287.5	232.9
NORTHEAST.....	53.8	60.8	46.5	243.5	265.9	219.9
MIDWEST.....	57.2	63.4	50.6	298.1	342.0	252.0
SOUTH.....	70.3	78.8	61.4	302.3	330.1	273.2
WEST.....	38.4	42.1	34.4	161.8	169.1	154.2
15-44 YEARS						
UNITED STATES.....	125.1	75.4	173.4	603.6	458.9	744.3
NORTHEAST.....	115.6	76.4	153.1	603.4	494.1	708.0
MIDWEST.....	128.6	79.3	177.2	690.1	546.5	831.8
SOUTH.....	131.7	76.2	185.0	610.7	429.2	784.7
WEST.....	119.5	68.7	170.2	488.6	368.4	608.5
45-64 YEARS						
UNITED STATES.....	169.5	176.2	163.4	1,192.8	1,219.9	1,168.1
NORTHEAST.....	157.8	172.1	145.0	1,295.0	1,380.5	1,218.5
MIDWEST.....	180.7	188.6	173.4	1,301.5	1,327.9	1,277.0
SOUTH.....	174.2	176.2	172.5	1,174.3	1,174.1	1,174.5
WEST.....	160.5	165.0	156.2	959.0	970.1	948.3
65 YEARS AND OVER						
UNITED STATES.....	368.3	393.2	351.4	3,215.1	3,315.0	3,147.1
NORTHEAST.....	357.9	388.0	338.6	3,944.1	4,031.7	3,887.0
MIDWEST.....	386.9	415.7	367.6	3,319.0	3,466.1	3,220.1
SOUTH.....	347.2	366.1	334.2	2,830.6	2,934.9	2,759.0
WEST.....	395.4	418.9	378.5	2,847.6	2,938.0	2,782.5

TABLE 6. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, DAYS OF CARE, AND AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY TYPE OF OWNERSHIP OF HOSPITAL AND AGE AND SEX OF PATIENT: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS. EXCLUDES NEWBORN INFANTS)

TYPE OF OWNERSHIP AND AGE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE	BOTH SEXES	MALE	FEMALE
NUMBER OF PATIENTS DISCHARGED IN THOUSANDS									
ALL TYPES									
ALL AGES.....	35,056	14,160	20,896	226,217	97,269	128,948	6.5	6.9	6.2
UNDER 15 YEARS.....	2,972	1,698	1,274	13,554	7,647	5,907	4.6	4.5	4.6
15-44 YEARS.....	13,966	4,153	9,813	67,397	25,268	42,128	4.8	6.1	4.3
45-64 YEARS.....	7,610	3,776	3,834	53,541	26,135	27,405	7.0	6.9	7.1
65 YEARS AND OVER.....	10,508	4,533	5,975	91,726	38,219	53,507	8.7	8.4	9.0
VOLUNTARY NONPROFIT									
ALL AGES.....	23,984	9,645	14,339	159,562	68,174	91,388	6.7	7.1	6.4
UNDER 15 YEARS.....	2,089	1,195	894	9,631	5,421	4,210	4.6	4.5	4.7
15-44 YEARS.....	9,208	2,615	6,594	44,217	15,856	28,360	4.8	6.1	4.3
45-64 YEARS.....	5,290	2,638	2,651	38,017	18,588	19,429	7.2	7.0	7.3
65 YEARS AND OVER.....	7,397	3,197	4,200	67,698	28,309	39,389	9.2	8.9	9.4
GOVERNMENT									
ALL AGES.....	7,776	3,153	4,623	45,923	19,980	25,943	5.9	6.3	5.6
UNDER 15 YEARS.....	717	409	308	3,247	1,861	1,386	4.5	4.5	4.5
15-44 YEARS.....	3,402	1,046	2,356	16,211	6,390	9,820	4.8	6.1	4.2
45-64 YEARS.....	1,558	778	780	10,575	5,147	5,428	6.8	6.6	7.0
65 YEARS AND OVER.....	2,099	920	1,179	15,890	6,582	9,308	7.6	7.2	7.9
PROPRIETARY									
ALL AGES.....	3,296	1,362	1,933	20,732	9,115	11,617	6.3	6.7	6.0
UNDER 15 YEARS.....	166	94	72	676	365	311	4.1	3.9	4.3
15-44 YEARS.....	1,356	493	864	6,969	3,022	3,947	5.1	6.1	4.6
45-64 YEARS.....	762	360	402	4,949	2,401	2,548	6.5	6.7	6.3
65 YEARS AND OVER.....	1,012	416	596	8,138	3,327	4,811	8.0	8.0	8.1

TABLE 7. NUMBER, PERCENT DISTRIBUTION, AND RATE OF WOMEN WITH DELIVERIES DISCHARGED FROM SHORT-STAY HOSPITALS AND OF DAYS OF CARE, AND AVERAGE LENGTH OF STAY, BY AGE, RACE, GEOGRAPHIC REGION, AND BED SIZE OF HOSPITAL: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS)

AGE, RACE, REGION, AND BED SIZE	DISCHARGED PATIENTS			DAYS OF CARE			
	NUMBER IN THOUSANDS	PERCENT DISTRIBUTION	RATE PER 1,000 POPULATION	NUMBER IN THOUSANDS	PERCENT DISTRIBUTION	RATE PER 1,000 POPULATION	AVERAGE LENGTH OF STAY IN DAYS
10-54 YEARS.....	3,854	100.0	50.3	12,640	100.0	165.1	3.3
AGE							
10-14 YEARS.....	11	0.3	1.3	36	0.3	4.3	3.4
15-44 YEARS.....	3,838	99.6	67.8	12,589	99.6	222.4	3.3
15-19 YEARS.....	470	12.2	51.7	1,384	10.9	152.2	2.9
20-24 YEARS.....	1,145	29.7	110.0	3,606	28.5	346.3	3.1
25-29 YEARS.....	1,260	32.7	116.5	4,172	33.0	385.5	3.3
30-34 YEARS.....	722	18.7	71.1	2,541	20.1	250.4	3.5
35-44 YEARS.....	241	6.3	15.0	886	7.0	55.0	3.7
45-54 YEARS.....	*5	*0.1	*0.4	*16	*0.1	*1.3	*3.0
10-17 YEARS.....	184	4.8	13.4	553	4.4	40.3	3.0
18-54 YEARS.....	3,670	95.2	58.4	12,087	95.6	192.4	3.3
RACE							
WHITE.....	2,584	67.1	40.3	8,473	67.0	132.2	3.3
ALL OTHER.....	744	19.3	59.7	2,540	20.1	203.8	3.4
RACE NOT STATED.....	526	13.7	...	1,627	12.9	...	3.1
REGION							
NORTHEAST.....	682	17.7	42.5	2,556	20.2	159.3	3.8
MIDWEST.....	942	24.4	50.1	3,343	26.4	177.7	3.5
SOUTH.....	1,351	35.0	51.2	4,417	34.9	167.4	3.3
WEST.....	880	22.8	57.4	2,324	18.4	151.6	2.6
BED SIZE							
6-99 BEDS.....	517	13.4	...	1,387	11.0	...	2.7
100-199 BEDS.....	672	17.4	...	2,101	16.6	...	3.1
200-299 BEDS.....	658	17.1	...	2,049	16.2	...	3.1
300-499 BEDS.....	1,036	26.9	...	3,528	27.9	...	3.4
500 BEDS OR MORE.....	972	25.2	...	3,575	28.3	...	3.7

TABLE 8. NUMBER OF WOMEN WITH DELIVERIES AND NUMBER OF DAYS OF CARE AND AVERAGE LENGTH OF STAY FOR WOMEN WITH DELIVERIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY GEOGRAPHIC REGION AND BED SIZE OF HOSPITAL: UNITED STATES, 1985

(DISCHARGES FROM NONFEDERAL HOSPITALS)

REGION	ALL SIZES	6-99 BEDS	100-199 BEDS	200-299 BEDS	300-499 BEDS	500 BEDS OR MORE
NUMBER OF PATIENTS DISCHARGED IN THOUSANDS						
UNITED STATES.....	3,854	517	672	658	1,036	972
NORTHEAST.....	682	52	71	96	287	176
MIDWEST.....	942	95	97	167	259	325
SOUTH.....	1,351	174	440	119	244	373
WEST.....	880	197	64	276	245	98
NUMBER OF DAYS OF CARE IN THOUSANDS						
UNITED STATES.....	12,640	1,387	2,101	2,049	3,528	3,575
NORTHEAST.....	2,556	165	236	352	1,115	688
MIDWEST.....	3,343	327	319	575	886	1,237
SOUTH.....	4,417	473	1,390	379	822	1,353
WEST.....	2,324	423	155	743	705	298
AVERAGE LENGTH OF STAY IN DAYS						
UNITED STATES.....	3.3	2.7	3.1	3.1	3.4	3.7
NORTHEAST.....	3.8	3.2	3.3	3.7	3.9	3.9
MIDWEST.....	3.5	3.4	3.3	3.4	3.4	3.8
SOUTH.....	3.3	2.7	3.2	3.2	3.4	3.6
WEST.....	2.6	2.1	2.4	2.7	2.9	3.1

TABLE 9. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, RATE OF DISCHARGES, AND AVERAGE LENGTH OF STAY, BY CATEGORY OF FIRST-LISTED DIAGNOSIS AND AGE: UNITED STATES, 1985

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

CATEGORY OF FIRST-LISTED DIAGNOSIS AND ICD-9-CM CODE	ALL AGES	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER	NUMBER OF PATIENTS DISCHARGED IN THOUSANDS				
01 ALL CONDITIONS.....	35,056	2,972	13,966	7,610	10,508					
02 INFECTIOUS AND PARASITIC DISEASES.....001-139	669	193	210	95	172					
03 NEOPLASMS.....140-239	2,411	69	454	794	1,094					
04 MALIGNANT NEOPLASMS.....140-208,230-234	1,911	43	229	648	991					
05 MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197,0,197,3	315	*	13	132	169					
06 MALIGNANT NEOPLASM OF BREAST.....174-175,198,81	208	*	35	91	81					
07 BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN BEHAVIOR AND UNSPECIFIED NATURE.....210-229,235-239	500	26	225	147	103					
08 ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	1,068	70	271	279	448					
09 DIABETES MELLITUS.....250	480	21	128	160	171					
10 DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	342	58	90	56	138					
11 ANEMIAS.....280-285	229	22	53	41	113					
12 MENTAL DISORDERS.....290-319	1,700	49	1,014	396	240					
13 PSYCHOSES.....290-299	701	*6	396	164	135					
14 NEUROTIC AND PERSONALITY DISORDERS.....300-301	195	*5	120	44	26					
15 ALCOHOL DEPENDENCE SYNDROME.....303	388	*	239	121	26					
16 DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	1,211	229	305	267	409					
17 DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	425	64	143	93	126					
18 CATARACT.....366	182	*	*6	38	138					
19 DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	259	118	55	47	39					
20 DISEASES OF THE CIRCULATORY SYSTEM.....390-459	5,470	35	481	1,728	3,224					
21 ESSENTIAL HYPERTENSION.....401	214	*	45	84	82					
22 HEART DISEASE.....391-392,0,393-398,402,404,410-416,420-429	3,584	20	250	1,204	2,111					
23 ACUTE MYOCARDIAL INFARCTION.....410	755	*	50	267	436					
24 ATHEROSCLEROTIC HEART DISEASE.....414,0	304	*	13	134	157					
25 OTHER ISCHEMIC HEART DISEASE.....411-413,414,1-414,9	992	*	67	423	501					
26 CONGESTIVE HEART FAILURE.....428,0	557	*	11	96	446					
27 CEREBROVASCULAR DISEASE.....430-438	916	*	34	192	686					
28 DISEASES OF THE RESPIRATORY SYSTEM.....460-519	3,238	848	656	612	1,121					
29 ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	464	229	78	59	98					
30 CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	288	186	98	*	-					
31 PNEUMONIA, ALL FORMS.....480-486	854	206	100	147	400					
32 ASTHMA.....493	462	144	124	97	97					
33 DISEASES OF THE DIGESTIVE SYSTEM.....520-579	3,873	346	1,222	1,038	1,267					
34 ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	292	*	73	86	131					
35 GASTRITIS AND DUODENITIS.....535	203	15	79	57	51					
36 APPENDICITIS.....540-543	250	65	148	23	14					
37 INGUINAL HERNIA.....550	384	47	100	118	120					
38 NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	457	133	165	66	94					
39 DIVERTICULA OF INTESTINE.....562	174	-	16	55	103					
40 CHOLELITHIASIS.....574	474	*	162	154	157					
41 DISEASES OF THE GENITOURINARY SYSTEM.....580-629	2,805	101	1,324	646	735					
42 CALCULUS OF KIDNEY AND URETER.....592	325	*	165	119	39					
43 HYPERPLASIA OF PROSTATE.....600	246	*	*	65	179					
44 DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	193	*	148	43	*					
45 COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	968	*5	961	*	...					
46 ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	382	*	378	*	...					
47 DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	542	58	203	134	147					
48 DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	2,170	70	860	699	542					
49 ARTHROPATHIES AND RELATED DISORDERS.....710-719	465	18	133	130	183					
50 INTERVERTEBRAL DISC DISORDERS.....722	508	*	265	191	51					
51 CONGENITAL ANOMALIES.....740-759	269	150	72	30	17					
52 CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	159	158	*	*	-					
53 SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	534	85	235	135	79					
54 INJURY AND POISONING.....800-999	3,303	398	1,510	603	793					
55 FRACTURES, ALL SITES.....800-829	1,129	132	398	181	419					
56 FRACTURE OF NECK OF FEMUR.....820	258	*	11	24	219					
57 SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	237	*	146	63	25					
58 INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	268	64	140	31	34					
59 LACERATIONS AND OPEN WOUNDS.....870-904	277	38	181	35	23					
60 SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	4,324	52	4,098	92	82					
61 PERSONS ADMITTED FOR STERILIZATION.....V25,2	82	*	81	*	-					
62 FEMALES WITH DELIVERIES.....V27	3,854	11	3,838	*5	...					

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

TABLE 9. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, RATE OF DISCHARGES, AND AVERAGE LENGTH OF STAY, BY CATEGORY OF FIRST-LISTED DIAGNOSIS AND AGE: UNITED STATES, 1985--CON.

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

ALL AGES	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER	ALL AGES	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER	
RATE OF PATIENTS DISCHARGED PER 10,000 POPULATION					AVERAGE LENGTH OF STAY IN DAYS					
1,478.9	571.9	1,250.8	1,695.2	3,683.2	6.5	4.6	4.8	7.0	8.7	01
28.2	37.2	18.8	21.1	60.2	7.0	4.1	5.4	8.6	11.2	02
101.7	13.3	40.6	177.0	383.3	8.2	4.2	5.9	8.2	9.4	03
80.6	8.4	20.5	144.3	347.3	8.9	5.0	6.9	8.7	9.7	04
13.3	*	1.2	29.4	59.4	9.2	*	7.9	9.1	9.3	05
8.8	*	3.1	20.2	28.3	7.2	*	5.2	6.5	8.8	06
21.1	5.0	20.1	32.7	36.1	5.5	3.0	4.9	5.9	6.8	07
45.1	13.4	24.3	62.3	156.9	7.3	5.1	5.9	7.2	8.6	08
20.2	4.1	11.5	35.5	59.9	8.1	5.3	5.9	8.2	10.1	09
14.4	11.1	8.1	12.6	48.3	6.0	3.9	5.4	6.4	7.1	10
9.6	4.3	4.7	9.0	39.5	6.4	5.0	6.1	6.3	6.9	11
71.7	9.4	90.8	88.3	84.3	12.3	20.3	11.8	11.8	13.8	12
29.6	*1.1	35.5	36.6	47.2	14.9	*26.3	14.1	15.6	16.0	13
8.2	*1.0	10.7	9.7	9.0	10.0	*20.5	9.7	8.7	11.0	14
16.4	*	21.4	26.9	9.3	10.7	*	11.0	9.8	12.3	15
51.1	44.1	27.3	59.5	143.5	5.4	3.6	5.5	5.7	6.3	16
17.9	12.2	12.8	20.6	44.1	9.6	7.0	7.9	9.6	12.9	17
7.7	*	*0.5	8.4	7.2	2.0	*	*2.5	2.2	1.9	18
10.9	22.7	4.9	10.6	13.8	2.8	2.2	2.7	3.3	4.3	19
230.8	6.8	43.1	385.1	1,130.2	7.9	7.1	5.9	7.2	8.6	20
9.0	*	4.1	18.7	28.8	4.9	*	4.0	4.8	5.6	21
151.2	3.8	22.4	268.2	739.8	7.3	7.9	5.6	6.6	7.9	22
31.8	*	4.5	59.5	152.7	9.5	*	7.1	9.5	9.7	23
12.8	*	1.2	29.9	54.9	6.6	*	4.8	5.3	7.9	24
41.8	*	6.0	94.3	175.6	5.4	*	4.2	4.8	6.1	25
23.5	*	1.0	21.4	156.3	8.0	*	6.6	7.3	8.2	26
38.6	*	3.0	42.9	240.3	10.5	*	9.3	11.1	10.4	27
136.6	163.1	58.8	136.4	393.1	6.0	3.2	4.1	7.2	8.7	28
19.6	44.0	7.0	13.2	34.5	4.5	3.2	4.0	5.3	7.1	29
12.1	35.7	8.8	*	-	1.5	1.6	1.4	*	-	30
36.0	39.7	9.0	32.8	140.3	7.9	4.3	6.6	8.5	9.9	31
19.5	27.8	11.1	21.5	34.1	4.9	3.5	6.1	6.1	6.7	32
163.4	66.5	109.4	231.3	444.1	6.2	3.4	4.8	6.4	8.1	33
12.3	*	6.6	19.1	45.9	7.1	*	5.1	6.8	8.6	34
8.6	2.8	7.1	12.8	18.0	4.8	2.9	4.2	4.9	6.0	35
10.5	12.5	13.3	5.1	4.8	5.0	4.3	4.3	7.6	11.7	36
16.2	9.0	9.0	26.2	42.1	3.2	1.8	2.6	3.1	4.4	37
19.3	25.6	14.7	14.7	32.8	4.9	3.0	4.7	5.8	7.4	38
7.3	-	1.4	12.3	36.2	8.0	-	6.8	7.8	8.2	39
20.0	*	14.5	34.3	55.0	7.5	*	6.1	7.0	9.5	40
118.3	19.4	118.6	143.9	257.6	5.2	3.6	4.2	5.1	7.2	41
13.7	*	14.8	26.4	13.7	3.7	*	3.1	3.9	6.2	42
10.4	*	*	14.4	62.8	6.4	*	*	5.7	6.7	43
8.1	*	13.2	9.5	*	3.7	*	3.7	3.8	*	44
40.8	*1.0	86.1	*	...	2.5	*2.1	2.5	*	...	45
16.1	*	33.8	*	...	2.1	*	2.2	*	...	46
22.8	11.1	18.2	29.9	51.5	7.9	4.0	6.6	7.8	11.4	47
91.6	13.4	77.0	155.8	189.9	6.7	5.4	5.4	6.7	9.1	48
19.6	3.5	11.9	29.0	64.2	7.7	6.1	4.1	7.8	10.5	49
21.4	*	23.7	42.6	18.0	7.3	*	6.8	7.4	9.3	50
11.4	28.8	6.4	6.7	6.1	5.6	5.6	4.1	7.8	8.0	51
6.7	30.4	*	*	-	13.0	12.9	*	*	-	52
22.5	16.3	21.1	30.2	27.5	3.8	3.3	3.3	4.1	5.3	53
139.4	76.5	135.2	134.4	277.8	6.6	3.9	5.4	6.7	10.3	54
47.6	25.3	35.6	40.3	146.8	8.7	5.0	6.8	7.4	12.4	55
10.9	*	1.0	5.4	76.9	14.7	*	12.7	12.7	15.0	56
10.0	*	13.1	14.0	8.8	6.0	*	5.7	6.3	7.6	57
11.3	12.2	12.5	6.8	12.1	5.6	2.6	5.7	6.8	9.5	58
11.7	7.3	16.2	7.9	8.1	4.3	3.6	4.2	4.3	6.1	59
182.4	10.0	367.0	20.4	28.8	3.3	4.7	3.2	3.9	5.7	60
3.5	*	7.2	*	-	1.6	*	1.6	*	-	61
162.6	2.0	343.8	*1.2	...	3.3	3.4	3.3	*3.0	...	62

TABLE 10. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, RATE OF DISCHARGES, AND AVERAGE LENGTH OF STAY, BY CATEGORY OF FIRST-LISTED DIAGNOSIS, SEX, AND RACE: UNITED STATES, 1985

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

CATEGORY OF FIRST-LISTED DIAGNOSIS AND ICD-9-CM CODE	SEX					
	BOTH SEXES			BOTH SEXES		
	MALE	FEMALE		MALE	FEMALE	
	NUMBER OF PATIENTS DISCHARGED IN THOUSANDS			RATE OF PATIENTS DISCHARGED PER 10,000 POPULATION		
01 ALL CONDITIONS.....	35,056	14,160	20,896	1,478.9	1,235.5	1,706.9
02 INFECTIOUS AND PARASITIC DISEASES.....001-139	669	308	361	28.2	26.9	29.5
03 NEOPLASMS.....140-239	2,411	1,008	1,403	101.7	87.9	114.6
04 MALIGNANT NEOPLASMS.....140-208,230-234	1,911	892	1,019	80.6	77.8	83.3
05 MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	315	206	110	13.3	17.9	8.9
06 MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	208	*	207	8.8	*	16.9
07 BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN BEHAVIOR AND UNSPECIFIED NATURE.....210-229,235-239	500	116	384	21.1	10.1	31.4
08 ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	1,068	409	659	45.1	35.7	53.8
09 DIABETES MELLITUS.....250	480	194	286	20.2	16.9	23.4
10 DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	342	149	193	14.4	13.0	15.8
11 ANEMIAS.....280-285	229	91	137	9.6	8.0	11.2
12 MENTAL DISORDERS.....290-319	1,700	918	782	71.7	80.1	63.9
13 PSYCHOSES.....290-299	701	325	376	29.6	28.4	30.7
14 NEUROTIC AND PERSONALITY DISORDERS.....300-301	195	68	126	8.2	6.0	10.3
15 ALCOHOL DEPENDENCE SYNDROME.....303	388	312	76	16.4	27.3	6.2
16 DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	1,211	537	674	51.1	46.8	55.1
17 DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	425	196	229	17.9	17.1	18.7
18 CATARACT.....366	182	67	114	7.7	5.9	9.4
19 DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	259	117	142	10.9	10.2	11.6
20 DISEASES OF THE CIRCULATORY SYSTEM.....390-459	5,470	2,783	2,686	230.8	242.8	219.4
21 ESSENTIAL HYPERTENSION.....401	214	89	124	9.0	7.8	10.2
22 HEART DISEASE.....391-392.0,393-398,402,404,410-416,420-429	3,584	1,910	1,674	151.2	166.7	136.7
23 ACUTE MYOCARDIAL INFARCTION.....410	755	466	289	31.8	40.6	23.6
24 ATHEROSCLEROTIC HEART DISEASE.....414.0	304	190	114	12.8	16.6	9.3
25 OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	992	549	443	41.8	47.9	36.2
26 CONGESTIVE HEART FAILURE.....428.0	557	247	310	23.5	21.5	25.4
27 CEREBROVASCULAR DISEASE.....430-438	916	416	500	38.6	36.3	40.8
28 DISEASES OF THE RESPIRATORY SYSTEM.....460-519	3,238	1,591	1,647	136.6	138.8	134.5
29 ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	464	236	229	19.6	20.6	18.7
30 CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	288	124	164	12.1	10.8	13.4
31 PNEUMONIA, ALL FORMS.....480-486	854	433	421	36.0	37.8	34.4
32 ASTHMA.....493	462	195	266	19.5	17.0	21.8
33 DISEASES OF THE DIGESTIVE SYSTEM.....520-579	3,873	1,839	2,034	163.4	160.4	166.2
34 ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	292	156	137	12.3	13.6	11.2
35 GASTRITIS AND DUODENITIS.....535	203	87	116	8.6	7.6	9.5
36 APPENDICITIS.....540-543	250	143	107	10.5	12.5	8.7
37 INGUINAL HERNIA.....550	384	343	42	16.2	29.9	3.4
38 NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	457	191	266	19.3	16.7	21.7
39 DIVERTICULA OF INTESTINE.....562	174	68	106	7.3	6.0	8.6
40 CHOLELITHIASIS.....574	474	140	333	20.0	12.2	27.2
41 DISEASES OF THE GENITOURINARY SYSTEM.....580-629	2,805	958	1,848	118.3	83.5	150.9
42 CALCULUS OF KIDNEY AND URETER.....592	325	215	110	13.7	18.7	9.0
43 HYPERPLASIA OF PROSTATE.....600	246	246	...	10.4	21.4	...
44 DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	193	...	193	8.1	...	15.8
45 COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	968	...	968	40.8	...	79.1
46 ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	382	...	382	16.1	...	31.2
47 DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	542	268	273	22.8	23.4	22.3
48 DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	2,170	939	1,231	91.6	82.0	100.6
49 ARTHROPATHIES AND RELATED DISORDERS.....710-719	465	188	276	19.6	16.4	22.6
50 INTERVERTEBRAL DISC DISORDERS.....722	508	281	227	21.4	24.5	18.6
51 CONGENITAL ANOMALIES.....740-759	269	156	113	11.4	13.6	9.2
52 CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	159	82	77	6.7	7.2	6.3
53 SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	534	260	275	22.5	22.6	22.4
54 INJURY AND POISONING.....800-999	3,303	1,800	1,503	139.4	157.0	122.8
55 FRACTURES, ALL SITES.....800-829	1,129	550	579	47.6	48.0	47.3
56 FRACTURE OF NECK OF FEMUR.....820	258	62	196	10.9	5.4	16.0
57 SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	237	117	120	10.0	10.2	9.8
58 INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	268	162	107	11.3	14.1	8.7
59 LACERATIONS AND OPEN WOUNDS.....870-904	277	203	74	11.7	17.7	6.1
60 SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	4,324	156	4,168	182.4	13.6	340.5
61 PERSONS ADMITTED FOR STERILIZATION.....V25.2	82	*	80	3.5	*	6.6
62 FEMALES WITH DELIVERIES.....V27	3,854	...	3,854	162.6	...	314.8

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

TABLE 10. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, RATE OF DISCHARGES, AND AVERAGE LENGTH OF STAY, BY CATEGORY OF FIRST-LISTED DIAGNOSIS, SEX, AND RACE: UNITED STATES, 1985--CON.

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

SEX--CON.			RACE												
BOTH SEXES	MALE	FEMALE	ALL RACES	WHITE	ALL OTHER	NOT STATED	ALL RACES	WHITE	ALL OTHER	NOT STATED	ALL RACES	WHITE	ALL OTHER	NOT STATED	
AVERAGE LENGTH OF STAY IN DAYS			NUMBER OF PATIENTS DISCHARGED IN THOUSANDS				RATE OF PATIENTS DISCHARGED PER 10,000 POPULATION				AVERAGE LENGTH OF STAY IN DAYS				
6.5	6.9	6.2	35,056	26,379	5,181	3,497	1,478.9	1,309.5	1,455.3	...	6.5	6.5	6.7	5.5	01
7.0	7.2	6.7	669	490	125	55	28.2	24.3	35.0	...	7.0	7.0	7.4	6.0	02
8.2	8.6	7.9	2,411	1,886	320	205	101.7	93.6	89.9	...	8.2	8.1	9.2	7.1	03
8.9	9.1	8.7	1,911	1,535	221	156	80.6	76.2	62.0	...	8.9	8.8	10.6	7.9	04
9.2	8.8	9.9	315	257	36	23	13.3	12.7	10.0	...	9.2	9.0	11.0	7.9	05
7.2	*	7.2	208	163	26	20	8.8	8.1	7.2	...	7.2	7.2	8.4	5.4	06
5.5	4.7	5.7	500	351	99	50	21.1	17.4	27.8	...	5.5	5.5	6.0	4.5	07
7.3	7.5	7.3	1,068	776	199	93	45.1	38.5	56.0	...	7.3	7.2	8.2	6.3	08
8.1	8.0	8.2	480	327	107	45	20.2	16.2	30.2	...	8.1	8.1	8.7	7.1	09
6.0	5.9	6.1	342	232	80	29	14.4	11.5	22.5	...	6.0	5.9	6.6	5.4	10
6.4	6.4	6.5	229	143	66	19	9.6	7.1	18.6	...	6.4	6.4	6.6	5.8	11
12.3	11.5	13.3	1,700	1,234	273	193	71.7	61.3	76.7	...	12.3	12.6	12.2	10.7	12
14.9	13.1	16.4	701	527	117	57	29.6	26.2	32.8	...	14.9	15.1	15.6	11.1	13
10.0	10.4	9.7	195	159	17	19	8.2	7.9	4.9	...	10.0	10.2	8.9	9.3	14
10.7	10.7	11.1	388	247	69	72	16.4	12.3	19.2	...	10.7	11.1	8.7	11.3	15
5.4	5.5	5.4	1,211	921	170	120	51.1	45.7	47.8	...	5.4	5.6	5.9	4.0	16
9.6	9.7	9.6	425	320	66	39	17.9	15.9	18.6	...	9.6	10.0	9.4	6.8	17
2.0	2.0	2.0	182	152	15	15	7.7	7.5	4.2	...	2.0	2.0	2.7	1.7	18
2.8	2.6	3.0	259	197	37	26	10.9	9.8	10.3	...	2.8	2.8	3.1	2.2	19
7.9	7.5	8.3	5,470	4,419	617	433	230.8	219.4	173.4	...	7.9	7.8	9.4	7.0	20
4.9	4.4	5.2	214	136	57	20	9.0	6.8	16.1	...	4.9	4.7	5.4	4.6	21
7.3	7.0	7.6	3,584	2,957	351	276	151.2	146.8	98.7	...	7.3	7.3	8.0	6.4	22
9.5	9.0	10.3	755	636	57	61	31.8	31.6	16.0	...	9.5	9.5	9.6	8.7	23
6.6	5.8	7.9	304	262	19	23	12.8	13.0	5.4	...	6.6	6.6	8.2	5.9	24
5.4	5.3	5.6	992	830	85	77	41.8	41.2	23.8	...	5.4	5.4	5.8	4.9	25
8.0	7.8	8.2	557	447	72	38	23.5	22.2	20.2	...	8.0	8.0	7.7	7.3	26
10.5	10.0	10.9	916	732	113	72	38.6	36.3	31.6	...	10.5	9.9	14.4	9.9	27
6.0	6.0	6.1	3,238	2,494	462	282	136.6	123.8	129.6	...	6.0	6.2	5.7	5.5	28
4.5	4.4	4.6	464	353	72	40	19.6	17.5	20.2	...	4.5	4.6	4.4	3.8	29
1.5	1.5	1.6	288	229	33	27	12.1	11.3	9.2	...	1.5	1.4	2.4	1.4	30
7.9	7.8	8.1	854	660	123	72	36.0	32.7	34.5	...	7.9	8.1	7.6	6.8	31
4.9	4.5	5.3	462	309	113	40	19.5	15.3	31.7	...	4.9	5.2	4.2	4.9	32
6.2	5.7	6.6	3,873	3,018	496	360	163.4	149.8	139.2	...	6.2	6.2	6.6	5.3	33
7.1	6.8	7.5	292	227	41	24	12.3	11.3	11.6	...	7.1	7.0	8.4	6.2	34
4.8	4.3	5.1	203	158	30	15	8.6	7.8	8.5	...	4.8	4.8	4.4	4.8	35
5.0	5.1	4.9	250	193	25	32	10.5	9.6	7.1	...	5.0	4.9	6.2	4.5	36
3.2	3.1	4.0	384	301	43	40	16.2	14.9	12.2	...	3.2	3.2	3.3	3.0	37
4.9	4.6	5.1	457	356	56	45	19.3	17.7	15.6	...	4.9	5.2	4.4	3.4	38
8.0	7.6	8.2	174	145	14	14	7.3	7.2	4.1	...	8.0	7.8	9.3	8.0	39
7.5	8.3	7.2	474	379	50	45	20.0	18.8	13.9	...	7.5	7.5	8.3	7.0	40
5.2	5.5	5.0	2,805	2,142	388	274	118.3	106.4	109.1	...	5.2	5.2	5.6	4.7	41
3.7	3.5	4.2	325	270	20	34	13.7	13.4	5.8	...	3.7	3.8	4.4	3.2	42
6.4	6.4	...	246	203	20	23	10.4	10.1	5.6	...	6.4	6.2	8.5	6.2	43
3.7	...	3.7	193	141	31	21	8.1	7.0	8.6	...	3.7	3.8	3.3	4.3	44
2.5	...	2.5	968	611	249	108	40.8	30.3	70.0	...	2.5	2.4	2.9	2.4	45
2.1	...	2.1	382	228	112	42	16.1	11.3	31.5	...	2.1	2.0	2.5	2.4	46
7.9	7.6	8.2	542	404	96	42	22.8	20.1	26.9	...	7.9	7.8	8.9	7.1	47
6.7	6.6	6.9	2,170	1,671	240	260	91.6	82.9	67.4	...	6.7	6.8	7.1	5.7	48
7.7	7.0	8.2	465	356	51	57	19.6	17.7	14.4	...	7.7	7.9	8.0	6.6	49
7.3	6.8	7.9	508	395	49	64	21.4	19.6	13.8	...	7.3	7.3	7.9	6.5	50
5.6	5.7	5.5	269	202	38	29	11.4	10.0	10.8	...	5.6	5.4	6.8	5.1	51
13.0	12.2	13.8	159	103	35	21	6.7	5.1	9.9	...	13.0	12.2	17.4	9.2	52
3.8	3.7	3.9	534	395	84	55	22.5	19.6	23.7	...	3.8	3.7	4.1	3.8	53
6.6	6.1	7.3	3,303	2,457	490	356	139.4	122.0	137.7	...	6.6	6.8	6.2	5.8	54
8.7	7.7	9.8	1,129	870	130	128	47.6	43.2	36.6	...	8.7	9.1	7.6	7.4	55
14.7	16.6	14.1	258	217	15	26	10.9	10.8	4.2	...	14.7	14.9	14.7	12.4	56
6.0	5.6	6.4	237	174	40	23	10.0	8.6	11.2	...	6.0	5.8	6.6	6.7	57
5.6	6.1	4.8	268	207	36	25	11.3	10.3	10.2	...	5.6	5.9	5.7	2.9	58
4.3	4.4	4.2	277	178	70	30	11.7	8.8	19.6	...	4.3	4.5	4.0	4.1	59
3.3	4.4	3.3	4,324	2,925	818	582	182.4	145.2	229.8	...	3.3	3.3	3.4	3.1	60
1.6	*	1.6	82	54	19	9	3.5	2.7	5.3	...	1.6	1.5	1.8	1.7	61
3.3	...	3.3	3,854	2,584	744	526	162.6	128.3	208.9	...	3.3	3.3	3.4	3.1	62

TABLE 11. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, RATE OF DISCHARGES, AND AVERAGE LENGTH OF STAY, BY CATEGORY OF FIRST-LISTED DIAGNOSIS AND GEOGRAPHIC REGION: UNITED STATES, 1985

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

CATEGORY OF FIRST-LISTED DIAGNOSIS AND ICD-9-CM CODE	UNITED STATES	NORTH-EAST	MIDWEST	SOUTH	WEST
01 ALL CONDITIONS.....	35,056	7,168	9,111	12,274	6,502
02 INFECTIOUS AND PARASITIC DISEASES.....001-139	669	129	165	265	111
03 NEOPLASMS.....140-239	2,411	519	660	759	474
04 MALIGNANT NEOPLASMS.....140-208,230-234	1,911	403	546	586	376
05 MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197,0,197,3	315	70	87	105	53
06 MALIGNANT NEOPLASM OF BREAST.....174-175,198,81	208	44	55	63	45
07 BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN BEHAVIOR AND UNSPECIFIED NATURE.....210-229,235-239	500	116	114	173	97
08 ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	1,068	224	279	377	188
09 DIABETES MELLITUS.....250	480	119	115	172	73
10 DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	342	66	86	126	64
11 ANEMIAS.....280-285	229	45	55	85	43
12 MENTAL DISORDERS.....290-319	1,700	463	539	447	251
13 PSYCHOSES.....290-299	701	195	200	176	130
14 NEUROTIC AND PERSONALITY DISORDERS.....300-301	195	30	63	74	27
15 ALCOHOL DEPENDENCE SYNDROME.....303	388	150	133	67	37
16 DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	1,211	278	358	367	208
17 DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	425	79	129	143	74
18 CATARACT.....366	182	65	56	30	30
19 DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	259	57	70	95	37
20 DISEASES OF THE CIRCULATORY SYSTEM.....390-459	5,470	1,205	1,434	1,853	978
21 ESSENTIAL HYPERTENSION.....401	214	35	56	92	31
22 HEART DISEASE.....391-392,0,393-398,402,404,410-416,420-429	3,584	816	931	1,217	620
23 ACUTE MYOCARDIAL INFARCTION.....410	755	168	186	267	134
24 ATHEROSCLEROTIC HEART DISEASE.....414,0	304	67	99	93	45
25 OTHER ISCHEMIC HEART DISEASE.....411-413,414,1-414,9	992	227	249	343	172
26 CONGESTIVE HEART FAILURE.....428,0	557	141	153	168	95
27 CEREBROVASCULAR DISEASE.....430-438	916	194	234	308	180
28 DISEASES OF THE RESPIRATORY SYSTEM.....460-519	3,238	631	839	1,234	533
29 ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	464	81	118	202	64
30 CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	288	55	80	113	40
31 PNEUMONIA, ALL FORMS.....480-486	854	153	229	332	141
32 ASTHMA.....493	462	105	113	166	77
33 DISEASES OF THE DIGESTIVE SYSTEM.....520-579	3,873	799	994	1,426	654
34 ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	292	56	74	111	52
35 GASTRITIS AND DUODENITIS.....535	203	36	51	93	23
36 APPENDICITIS.....540-543	250	48	62	86	53
37 INGUINAL HERNIA.....550	384	100	96	131	57
38 NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	457	87	123	182	65
39 DIVERTICULA OF INTESTINE.....562	174	41	43	65	25
40 CHOLELITHIASIS.....574	474	103	134	165	72
41 DISEASES OF THE GENITOURINARY SYSTEM.....580-629	2,805	534	684	1,107	481
42 CALCULUS OF KIDNEY AND URETER.....592	325	58	79	134	55
43 HYPERPLASIA OF PROSTATE.....600	246	56	67	76	46
44 DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	193	39	41	86	27
45 COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	968	220	239	335	173
46 ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	382	118	78	130	57
47 DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	542	128	130	196	88
48 DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	2,170	370	560	780	461
49 ARTHROPATHIES AND RELATED DISORDERS.....710-719	465	89	143	131	102
50 INTERVERTEBRAL DISC DISORDERS.....722	508	70	120	204	114
51 CONGENITAL ANOMALIES.....740-759	269	48	67	111	44
52 CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	159	20	33	70	36
53 SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	534	92	140	203	99
54 INJURY AND POISONING.....800-999	3,303	648	844	1,121	691
55 FRACTURES, ALL SITES.....800-829	1,129	230	285	360	254
56 FRACTURE OF NECK OF FEMUR.....820	258	61	69	74	54
57 SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	237	50	57	102	27
58 INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	268	57	83	83	44
59 LACERATIONS AND OPEN WOUNDS.....870-904	277	46	62	111	58
60 SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	4,324	794	1,062	1,499	969
61 PERSONS ADMITTED FOR STERILIZATION.....V25-2	82	22	14	37	10
62 FEMALES WITH DELIVERIES.....V27	3,854	682	942	1,351	880

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

TABLE 11. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, RATE OF DISCHARGES, AND AVERAGE LENGTH OF STAY, BY CATEGORY OF FIRST-LISTED DIAGNOSIS AND GEOGRAPHIC REGION: UNITED STATES, 1985--CON.

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

UNITED STATES	NORTH-EAST	MIDWEST	SOUTH	WEST	UNITED STATES	NORTH-EAST	MIDWEST	SOUTH	WEST	
RATE OF PATIENTS DISCHARGED PER 10,000 POPULATION					AVERAGE LENGTH OF STAY IN DAYS					
1,478.9	1,440.9	1,543.1	1,515.8	1,375.6	6.5	7.7	6.8	6.0	5.4	01
28.2	25.9	27.9	32.7	23.4	7.0	7.8	7.6	6.3	6.7	02
101.7	104.4	111.7	93.7	100.2	8.2	9.8	8.2	7.8	7.0	03
80.6	81.0	92.4	72.3	79.7	8.9	10.9	8.7	8.6	7.6	04
13.3	14.1	14.7	13.0	11.2	9.2	11.1	8.5	9.3	7.4	05
8.8	8.9	9.3	7.8	9.6	7.2	8.0	8.0	7.1	5.5	06
21.1	23.3	19.3	21.4	20.5	5.5	5.9	5.9	5.4	4.5	07
45.1	45.0	47.2	46.6	39.9	7.3	9.2	6.8	7.3	6.1	08
20.2	24.0	19.5	21.3	15.4	8.1	10.2	7.3	7.9	6.7	09
14.4	13.2	14.6	15.5	13.6	6.0	7.5	6.5	5.5	4.8	10
9.6	9.1	9.3	10.5	9.1	6.4	8.1	7.4	5.6	5.2	11
71.7	93.1	91.3	55.2	53.0	12.3	12.8	14.1	10.9	10.3	12
29.6	39.3	33.8	21.7	27.6	14.9	18.0	15.4	13.3	11.6	13
8.2	6.1	10.6	9.2	5.8	10.0	10.4	12.6	8.7	6.9	14
16.4	30.1	22.6	8.3	7.9	10.7	7.6	13.8	10.6	12.6	15
51.1	55.9	60.6	45.3	44.0	5.4	6.0	5.7	5.2	4.6	16
17.9	15.9	21.9	17.6	15.7	9.6	13.9	10.0	7.7	8.2	17
7.7	13.1	9.6	3.7	6.4	2.0	2.1	1.9	2.7	1.4	18
10.9	11.4	11.9	11.7	7.9	2.8	2.7	2.8	3.1	2.3	19
230.8	242.2	242.8	228.8	206.9	7.9	10.0	7.9	7.3	6.5	20
9.0	6.9	9.4	11.4	6.6	4.9	7.2	4.9	4.5	3.5	21
151.2	164.1	157.6	150.3	131.1	7.3	8.8	7.4	6.8	6.0	22
31.8	33.7	31.5	33.0	28.2	9.5	11.4	9.8	8.9	7.8	23
12.8	13.5	16.7	11.5	9.6	6.6	8.4	6.5	6.4	4.8	24
41.8	45.7	42.2	42.4	36.4	5.4	6.1	5.7	5.4	4.2	25
23.5	28.4	25.8	20.8	20.1	8.0	9.6	8.3	7.1	6.6	26
38.6	39.0	39.6	38.0	38.1	10.5	14.8	10.4	9.4	7.9	27
136.6	126.9	142.0	152.4	112.8	6.0	7.5	5.8	5.6	5.7	28
19.6	16.2	19.9	25.0	13.5	4.5	5.0	4.4	4.5	3.8	29
12.1	11.0	13.6	14.0	8.4	1.5	1.7	1.3	1.7	1.1	30
36.0	30.8	38.7	41.0	29.7	7.9	10.5	7.7	7.1	7.5	31
19.5	21.2	19.2	20.5	16.3	4.9	5.7	4.7	4.9	4.2	32
163.4	160.7	168.4	176.1	138.3	6.2	7.0	6.4	5.8	5.6	33
12.3	11.2	12.5	13.7	11.0	7.1	8.1	7.3	7.1	6.0	34
8.6	7.3	8.6	11.5	4.8	4.8	5.4	5.0	4.3	5.5	35
10.5	9.7	10.5	10.6	11.3	5.0	5.6	5.0	4.8	4.7	36
16.2	20.1	16.3	16.2	12.1	3.2	3.3	3.2	3.5	2.3	37
19.3	17.4	20.8	22.5	13.8	4.9	5.6	4.4	4.4	4.4	38
7.3	8.2	7.3	8.0	5.3	8.0	9.5	7.8	7.3	7.4	39
20.0	20.6	22.7	20.4	15.2	7.5	8.4	7.8	7.3	6.3	40
118.3	107.4	115.8	136.7	101.7	5.2	5.6	5.3	5.1	4.6	41
13.7	11.6	13.3	16.5	11.6	3.7	4.5	3.9	3.6	3.2	42
10.4	11.4	11.3	9.4	9.8	6.4	8.2	6.1	6.2	5.0	43
8.1	7.9	6.9	10.6	5.7	3.7	2.7	4.5	3.9	3.7	44
40.8	44.2	40.5	41.4	36.6	2.5	2.5	2.7	2.6	2.3	45
16.1	23.7	13.1	16.1	12.1	2.1	1.9	2.4	2.2	2.2	46
22.8	25.7	22.0	24.2	18.5	7.9	9.1	8.3	7.3	7.2	47
91.6	74.4	94.8	96.3	97.5	6.7	8.0	7.0	6.7	5.4	48
19.6	17.8	24.3	16.1	21.6	7.7	8.7	8.1	7.9	6.1	49
21.4	14.0	20.3	25.2	24.2	7.3	8.2	7.2	8.0	5.5	50
11.4	9.6	11.4	13.7	9.2	5.6	5.6	6.0	5.5	5.1	51
6.7	4.0	5.6	8.6	7.6	13.0	17.0	16.8	10.8	11.3	52
22.5	18.4	23.8	25.0	21.0	3.8	4.2	3.7	4.0	3.1	53
139.4	130.2	142.9	138.4	146.2	6.6	8.1	6.7	6.2	5.8	54
47.6	46.3	48.2	44.5	53.7	8.7	11.6	8.5	8.1	7.3	55
10.9	12.3	11.8	9.1	11.4	14.7	20.3	13.2	12.4	13.2	56
10.0	10.0	9.7	12.6	5.8	6.0	7.5	5.9	5.7	4.9	57
11.3	11.5	14.1	10.3	9.4	5.6	5.2	6.7	5.4	4.3	58
11.7	9.3	10.5	13.7	12.4	4.3	5.3	4.3	4.2	3.9	59
182.4	159.7	179.8	185.1	205.0	3.3	3.7	3.6	3.3	2.7	60
3.5	4.4	2.3	4.5	2.1	1.6	1.7	1.7	1.7	1.1	61
162.6	137.0	159.6	166.8	186.1	3.3	3.8	3.5	3.3	2.6	62

TABLE 12. NUMBER OF PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY CATEGORY OF FIRST-LISTED DIAGNOSIS AND BED SIZE OF HOSPITAL: UNITED STATES, 1985

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

CATEGORY OF FIRST-LISTED DIAGNOSIS AND ICD-9-CM CODE	NUMBER OF PATIENTS DISCHARGED IN THOUSANDS					
	ALL SIZES	6-99 BEDS	100-199 BEDS	200-299 BEDS	300-499 BEDS	500 BEDS OR MORE
ALL CONDITIONS.....	35,056	5,331	6,443	6,953	8,625	7,703
INFECTIOUS AND PARASITIC DISEASES.....001-139	669	98	145	141	141	144
NEOPLASMS.....140-239	2,411	183	345	471	715	698
MALIGNANT NEOPLASMS.....140-208,230-234	1,911	136	258	376	578	563
MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197,0,197.3	315	21	42	63	98	91
MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	208	16	29	41	65	57
BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN BEHAVIOR AND UNSPECIFIED NATURE.....210-229,235-239	500	47	87	94	136	135
ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	1,068	189	195	200	266	218
DIABETES MELLITUS.....250	480	80	85	81	130	104
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	342	49	62	69	84	78
ANEMIAS.....280-285	229	34	36	48	57	53
MENTAL DISORDERS.....290-319	1,700	343	294	284	434	345
PSYCHOSES.....290-299	701	104	111	112	200	174
NEUROTIC AND PERSONALITY DISORDERS.....300-301	195	39	40	30	46	40
ALCOHOL DEPENDENCE SYNDROME.....303	388	132	58	59	91	47
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	1,211	142	215	231	292	331
DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	425	54	71	88	94	117
CATARACT.....366	182	18	36	38	50	40
DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	259	35	61	48	61	54
DISEASES OF THE CIRCULATORY SYSTEM.....390-459	5,470	815	899	1,206	1,371	1,180
ESSENTIAL HYPERTENSION.....401	214	41	41	41	42	47
HEART DISEASE.....391-392,0,393-398,402,404,410-416,420-429	3,584	544	574	793	891	783
ACUTE MYOCARDIAL INFARCTION.....410	755	120	126	163	188	158
ATHEROSCLEROTIC HEART DISEASE.....414-0	304	25	27	66	78	108
OTHER ISCHEMIC HEART DISEASE.....411-413,414,1-414.9	992	148	162	213	257	212
CONGESTIVE HEART FAILURE.....428-0	557	114	104	131	121	88
CEREBROVASCULAR DISEASE.....430-438	916	146	156	210	226	177
DISEASES OF THE RESPIRATORY SYSTEM.....460-519	3,238	658	703	691	669	517
ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....464	464	101	118	106	82	57
CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	288	39	69	66	66	48
PNEUMONIA, ALL FORMS.....480-486	854	227	172	166	161	128
ASTHMA.....493	462	69	101	103	98	90
DISEASES OF THE DIGESTIVE SYSTEM.....520-579	3,873	700	730	821	897	724
ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	292	54	55	71	67	45
GASTRITIS AND DUODENITIS.....535	203	56	41	46	36	25
APPENDICITIS.....540-543	250	47	46	50	61	44
INGUINAL HERNIA.....550	384	59	76	79	97	74
NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	457	98	92	94	96	77
DIVERTICULA OF INTESTINE.....562	174	35	39	35	43	23
CHOLELITHIASIS.....574	474	88	87	103	109	86
DISEASES OF THE GENITOURINARY SYSTEM.....580-629	2,805	435	594	535	676	566
CALCULUS OF KIDNEY AND URETER.....592	325	51	66	67	83	58
HYPERPLASIA OF PROSTATE.....600	246	27	41	59	69	49
DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	193	31	50	34	42	35
COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	968	122	172	157	248	269
ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	382	38	65	67	94	118
DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	542	92	102	99	119	130
DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	2,170	303	435	443	512	478
ARTHROPATHIES AND RELATED DISORDERS.....710-719	465	48	78	98	127	114
INTERVERTEBRAL DISC DISORDERS.....722	508	67	100	112	119	110
CONGENITAL ANOMALIES.....740-759	269	15	68	39	61	86
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	159	14	32	27	48	37
SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	534	70	102	120	128	114
INJURY AND POISONING.....800-999	3,303	535	600	682	808	678
FRACTURES, ALL SITES.....800-829	1,129	162	200	242	297	228
FRACTURE OF NECK OF FEMUR.....820	258	36	48	59	66	49
SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	237	53	64	52	36	31
INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	268	53	45	49	73	49
LACERATIONS AND OPEN WOUNDS.....870-904	277	40	44	51	66	76
SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	4,324	569	751	739	1,157	1,109
PERSONS ADMITTED FOR STERILIZATION.....V25.2	82	22	26	*8	14	12
FEMALES WITH DELIVERIES.....V27	3,854	517	672	658	1,036	972

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

TABLE 13. AVERAGE LENGTH OF STAY FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY CATEGORY OF FIRST-LISTED DIAGNOSIS AND BED SIZE OF HOSPITAL: UNITED STATES, 1985

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

CATEGORY OF FIRST-LISTED DIAGNOSIS AND ICD-9-CM CODE	ALL SIZES	6-99 BEDS	100-199 BEDS	200-299 BEDS	300-499 BEDS	500 BEDS OR MORE	AVERAGE LENGTH OF STAY IN DAYS									
ALL CONDITIONS.....	6.5	5.2	5.8	6.5	6.8	7.4										
INFECTIOUS AND PARASITIC DISEASES.....001-139	7.0	5.2	5.7	7.3	7.0	9.2										
NEOPLASMS.....140-239	8.2	6.6	7.2	8.3	8.3	9.0										
MALIGNANT NEOPLASMS.....140-208,230-234	8.9	7.3	8.0	9.1	8.9	9.6										
MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	9.2	6.4	8.4	9.1	9.3	10.1										
MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	7.2	5.6	6.6	7.8	6.8	7.8										
BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN BEHAVIOR AND UNSPECIFIED NATURE.....210-229,235-239	5.5	4.5	4.8	4.9	5.5	6.6										
ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	7.3	5.5	6.8	7.5	7.7	9.0										
DIABETES MELLITUS.....250	8.1	5.7	7.7	8.4	8.3	9.9										
DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	6.0	4.4	4.7	6.2	6.6	7.2										
ANEMIAS.....280-285	6.4	4.7	5.2	7.0	7.1	7.2										
MENTAL DISORDERS.....290-319	12.3	9.9	12.9	11.0	12.8	14.7										
PSYCHOSES.....290-299	14.9	13.7	14.8	12.8	14.2	17.8										
NEUROTIC AND PERSONALITY DISORDERS.....300-301	10.0	8.6	10.5	7.5	10.4	12.1										
ALCOHOL DEPENDENCE SYNDROME.....303	10.7	8.0	13.2	12.6	12.1	10.4										
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	5.4	4.6	4.2	5.5	5.4	6.6										
DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	9.6	7.5	6.9	9.2	9.9	12.3										
CATARACT.....366	2.0	1.4	2.2	2.2	1.9	2.0										
DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	2.8	2.9	2.7	3.0	2.6	3.0										
DISEASES OF THE CIRCULATORY SYSTEM.....390-459	7.9	5.8	7.1	7.9	8.6	9.0										
ESSENTIAL HYPERTENSION.....401	4.9	4.0	4.6	4.8	5.4	5.7										
HEART DISEASE.....391-392.0,393-398,402,404,410-416,420-429	7.3	5.5	6.7	7.2	7.9	8.2										
ACUTE MYOCARDIAL INFARCTION.....410	9.5	7.1	8.7	10.1	9.9	10.7										
ATHEROSCLEROTIC HEART DISEASE.....414.0	6.6	5.7	6.7	6.5	7.0	6.6										
OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	5.4	3.8	4.8	5.1	6.1	6.5										
CONGESTIVE HEART FAILURE.....428.0	8.0	6.5	7.6	8.4	8.6	9.2										
CEREBROVASCULAR DISEASE.....430-438	10.5	7.1	8.6	10.8	11.7	13.1										
DISEASES OF THE RESPIRATORY SYSTEM.....460-519	6.0	5.3	5.3	6.3	6.6	7.0										
ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	4.5	4.2	4.2	4.7	4.4	4.9										
CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	1.5	1.3	1.5	1.3	1.8	1.5										
PNEUMONIA, ALL FORMS.....480-486	7.9	6.5	6.9	8.5	9.0	10.0										
ASTHMA.....493	4.9	4.6	4.7	5.4	4.7	5.1										
DISEASES OF THE DIGESTIVE SYSTEM.....520-579	6.2	5.1	5.6	6.4	6.5	7.2										
ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	7.1	6.0	6.8	7.3	7.9	7.5										
GASTRITIS AND DUODENITIS.....535	4.8	3.8	4.2	6.3	5.0	4.8										
APPENDICITIS.....540-543	5.0	4.6	4.8	5.1	5.2	5.3										
INGUINAL HERNIA.....550	3.2	3.6	3.2	3.1	3.2	3.1										
NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	4.9	3.9	4.3	5.1	5.2	6.3										
DIVERTICULA OF INTESTINE.....562	8.0	6.3	7.1	9.0	8.7	9.1										
CHOLELITHIASIS.....574	7.5	6.4	6.9	8.3	7.8	7.9										
DISEASES OF THE GENITOURINARY SYSTEM.....580-629	5.2	4.5	4.8	5.4	5.4	5.6										
CALCULUS OF KIDNEY AND URETER.....592	3.7	2.6	3.7	3.7	4.2	4.2										
HYPERPLASIA OF PROSTATE.....600	6.4	5.4	6.3	5.9	6.8	7.1										
DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	3.7	3.7	3.7	3.8	3.9	3.7										
COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	2.5	2.2	2.3	2.4	2.6	2.9										
ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	2.1	1.9	2.1	2.2	2.2	2.2										
DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	7.9	6.1	6.5	7.9	9.1	9.3										
DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	6.7	5.8	5.7	6.4	7.6	7.7										
ARTHROPATHIES AND RELATED DISORDERS.....710-719	7.7	6.9	7.3	7.1	8.3	8.2										
INTERVERTEBRAL DISC DISORDERS.....722	7.3	8.0	6.3	6.6	8.3	7.3										
CONGENITAL ANOMALIES.....740-759	5.6	4.4	5.2	5.5	4.7	6.8										
CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	13.0	2.9	12.9	13.3	13.1	16.5										
SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	3.8	2.7	4.0	4.3	3.7	3.8										
INJURY AND POISONING.....800-999	6.6	5.0	5.7	6.7	7.1	8.1										
FRACTURES, ALL SITES.....800-829	8.7	6.8	7.7	9.1	9.2	9.9										
FRACTURE OF NECK OF FEMUR.....820	14.7	12.0	14.1	15.4	14.6	16.3										
SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	6.0	6.2	5.6	6.0	6.4	6.1										
INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	5.6	3.1	3.4	4.7	5.9	10.8										
LACERATIONS AND OPEN WOUNDS.....870-904	4.3	2.8	3.2	4.4	5.2	4.9										
SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	3.3	2.7	3.1	3.2	3.4	3.7										
PERSONS ADMITTED FOR STERILIZATION.....V25-2	1.6	1.6	1.4	*1.4	1.9	1.9										
FEMALES WITH DELIVERIES.....V27	3.3	2.7	3.1	3.1	3.4	3.7										

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

TABLE 14. NUMBER OF ALL-LISTED DIAGNOSES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSTIC CATEGORY AND AGE, SEX, RACE, GEOGRAPHIC REGION, AND BED SIZE OF HOSPITAL: UNITED STATES, 1985

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

DIAGNOSTIC CATEGORY AND ICD-9-CM CODE	AGE				
	ALL DIAGNOSES	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER
	NUMBER OF ALL-LISTED DIAGNOSIS IN THOUSANDS				
01 ALL CONDITIONS.....	100,716	5,738	31,869	22,437	40,672
02 INFECTIOUS AND PARASITIC DISEASES.....001-139	2,205	352	634	385	834
03 NEOPLASMS.....140-239	4,768	92	781	1,546	2,349
04 MALIGNANT NEOPLASMS.....140-208,230-234	3,739	59	368	1,229	2,083
05 MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG.....162,197.0,197.3	524	*	22	209	290
06 MALIGNANT NEOPLASM OF BREAST.....174-175,198.81	279	*	39	116	123
07 BENIGN NEOPLASMS AND NEOPLASMS OF UNCERTAIN BEHAVIOR AND UNSPECIFIED NATURE.....210-229,235-239	1,029	32	413	317	266
08 ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES, AND IMMUNITY DISORDERS.....240-279	6,509	283	1,097	1,838	3,291
09 DIABETES MELLITUS.....250	2,757	26	394	897	1,440
10 DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS.....280-289	2,071	144	534	408	986
11 ANEMIAS.....280-285	1,609	79	411	306	813
12 MENTAL DISORDERS.....290-319	4,646	101	2,255	1,083	1,206
13 PSYCHOSES.....290-299	1,336	10	564	301	461
14 NEUROTIC AND PERSONALITY DISORDERS.....300-301	829	14	440	196	178
15 ALCOHOL DEPENDENCE SYNDROME.....303	849	*	458	297	91
16 DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS.....320-389	3,679	537	751	786	1,605
17 DISEASES OF THE CENTRAL NERVOUS SYSTEM.....320-336,340-349	1,572	114	347	319	792
18 CATARACT.....366	254	*	10	47	194
19 DISEASES OF THE EAR AND MASTOID PROCESS.....380-389	693	341	121	101	131
20 DISEASES OF THE CIRCULATORY SYSTEM.....390-459	19,773	116	1,275	5,348	13,034
21 ESSENTIAL HYPERTENSION.....401	2,704	10	265	928	1,501
22 HEART DISEASE.....391-392.0,393-398,402,404,410-416,420-429	12,411	70	611	3,304	8,425
23 ACUTE MYOCARDIAL INFARCTION.....410	871	*	56	296	517
24 ATHEROSCLEROTIC HEART DISEASE.....414.0	1,769	*5	41	432	1,292
25 OTHER ISCHEMIC HEART DISEASE.....411-413,414.1-414.9	3,132	*	147	1,140	1,841
26 CONGESTIVE HEART FAILURE.....428.0	1,635	11	32	280	1,311
27 CEREBROVASCULAR DISEASE.....430-438	1,972	11	59	385	1,516
28 DISEASES OF THE RESPIRATORY SYSTEM.....460-519	7,452	1,266	1,271	1,612	3,303
29 ACUTE RESPIRATORY INFECTIONS, EXCEPT INFLUENZA.....460-466	894	341	173	143	236
30 CHRONIC DISEASE OF TONSILS AND ADENOIDS.....474	373	249	117	*6	*
31 PNEUMONIA, ALL FORMS.....480-486	1,379	290	150	240	698
32 ASTHMA.....493	743	190	192	169	192
33 DISEASES OF THE DIGESTIVE SYSTEM.....520-579	8,224	489	2,157	2,206	3,372
34 ULCERS OF THE STOMACH AND SMALL INTESTINE.....531-534	556	*	118	167	266
35 GASTRITIS AND DUODENITIS.....535	586	25	181	164	217
36 APPENDICITIS.....540-543	291	70	173	30	19
37 INGUINAL HERNIA.....550	467	58	109	132	167
38 NONINFECTIOUS ENTERITIS AND COLITIS.....555-556,558	727	175	233	121	199
39 DIVERTICULA OF INTESTINE.....562	464	*	24	116	323
40 CHOLELITHIASIS.....574	749	*	207	219	322
41 DISEASES OF THE GENITOURINARY SYSTEM.....580-629	7,388	181	2,894	1,651	2,661
42 CALCULUS OF KIDNEY AND URETER.....592	413	*	191	146	73
43 HYPERPLASIA OF PROSTATE.....600	467	*	*	111	353
44 DISORDERS OF MENSTRUATION AND OTHER ABNORMAL VAGINAL BLEEDING.....626	340	*	265	72	*
45 COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM.....1/ 630-676	6,654	22	6,620	12	***
46 ABORTIONS AND ECTOPIC AND MOLAR PREGNANCIES.....630-639	419	*	414	*	***
47 DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE.....680-709	1,316	114	384	323	494
48 DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....710-739	5,089	104	1,431	1,477	2,076
49 ARTHROPATHIES AND RELATED DISORDERS.....710-719	1,671	32	258	402	979
50 INTERVERTEBRAL DISC DISORDERS.....722	644	*	310	242	92
51 CONGENITAL ANOMALIES.....740-759	679	296	190	103	91
52 CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD.....760-779	396	383	*	*9	*
53 SYMPTOMS, SIGNS, AND ILL-DEFINED CONDITIONS.....780-799	5,434	475	1,323	1,398	2,238
54 INJURY AND POISONING.....800-999	6,426	601	3,004	1,223	1,598
55 FRACTURES, ALL SITES.....800-829	1,686	161	662	284	579
56 FRACTURE OF NECK OF FEMUR.....820	286	*	14	27	241
57 SPRAINS AND STRAINS OF BACK (INCLUDING NECK).....846-847	408	*5	258	104	41
58 INTRACRANIAL INJURIES (EXCLUDING THOSE WITH SKULL FRACTURE).....850-854	354	71	187	45	51
59 LACERATIONS AND OPEN WOUNDS.....870-904	685	74	434	96	81
60 SUPPLEMENTARY CLASSIFICATIONS.....V01-V82	8,006	183	5,264	1,027	1,532
61 PERSONS ADMITTED FOR STERILIZATION.....V25.2	482	*	472	*8	*
62 FEMALES WITH DELIVERIES.....V27	3,854	11	3,838	*5	***

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

TABLE 14. NUMBER OF ALL-LISTED DIAGNOSES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSTIC CATEGORY AND AGE, SEX, RACE, GEOGRAPHIC REGION, AND BED SIZE OF HOSPITAL: UNITED STATES, 1985--CON.

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

SEX		RACE			REGION				BED SIZE					
MALE	FEMALE	WHITE	ALL OTHER	NOT STATED	NORTH-EAST	MIDWEST	SOUTH	WEST	6-99 BEDS	100-199 BEDS	200-299 BEDS	300-499 BEDS	500 BEDS OR MORE	
NUMBER OF ALL-LISTED DIAGNOSES IN THOUSANDS--CON.														
40,782	59,934	77,464	14,258	8,995	21,387	26,812	33,823	18,694	16,095	17,723	20,226	25,225	21,448	01
944	1,261	1,629	399	177	439	570	768	428	366	406	450	492	491	02
2,087	2,681	3,788	594	386	1,060	1,311	1,472	925	431	716	957	1,391	1,273	03
1,821	1,918	3,037	418	284	828	1,052	1,119	740	318	530	759	1,112	1,021	04
326	198	431	55	39	114	148	169	94	47	73	103	159	142	05
*	278	225	30	24	61	75	85	58	24	40	54	86	75	06
266	763	751	176	102	232	260	353	184	114	186	198	279	252	07
2,546	3,964	5,002	1,009	498	1,459	1,787	2,147	1,116	1,160	1,117	1,295	1,622	1,315	08
1,152	1,605	2,054	477	226	711	715	899	433	424	461	546	724	601	09
801	1,270	1,457	451	163	445	522	694	411	313	336	427	519	476	10
571	1,039	1,102	386	121	355	390	551	313	251	258	341	398	362	11
2,378	2,268	3,426	717	503	1,186	1,409	1,280	771	964	770	841	1,154	916	12
630	706	1,002	208	126	362	378	353	243	229	212	239	356	299	13
311	518	658	82	89	177	249	271	131	178	151	147	201	152	14
651	197	548	177	124	301	255	173	120	243	127	139	207	133	15
1,693	1,987	2,863	506	311	825	1,106	1,125	624	494	639	709	912	926	16
745	827	1,234	216	123	330	475	488	280	229	260	333	382	368	17
94	160	208	24	22	85	80	50	39	26	51	49	65	62	18
333	360	540	95	58	134	194	267	98	100	158	138	148	150	19
9,598	10,175	16,136	2,219	1,418	4,795	5,181	6,463	3,333	3,084	3,237	4,301	5,132	4,020	20
1,124	1,580	2,033	483	187	644	762	860	438	450	415	542	695	601	21
6,267	6,144	10,326	1,200	884	3,123	3,194	4,035	2,059	1,922	2,024	2,750	3,205	2,510	22
527	344	734	66	72	197	213	305	156	139	147	187	215	183	23
905	864	1,526	133	109	514	510	500	245	215	261	391	511	390	24
1,746	1,387	2,659	245	229	780	794	1,058	500	450	490	672	834	687	25
716	919	1,333	186	115	414	419	516	285	338	283	368	384	261	26
901	1,070	1,596	233	142	433	525	664	350	321	327	452	505	367	27
3,812	3,641	5,917	925	611	1,532	2,033	2,633	1,255	1,459	1,481	1,609	1,628	1,274	28
430	464	690	132	72	165	230	372	127	202	210	193	169	120	29
163	209	294	43	35	68	101	150	55	47	94	85	85	62	30
718	661	1,072	197	111	265	360	516	238	332	274	276	273	225	31
304	439	521	159	63	174	193	248	127	121	146	162	163	150	32
3,689	4,535	6,499	1,021	704	1,740	2,140	2,949	1,395	1,470	1,496	1,784	1,906	1,568	33
282	275	441	72	43	125	138	198	95	100	105	138	123	90	34
264	322	464	82	41	114	146	240	87	127	114	149	111	85	35
155	136	226	29	36	56	74	100	60	54	55	59	74	49	36
411	56	367	52	48	118	119	157	72	74	91	96	115	91	37
293	434	577	85	65	139	202	279	107	151	143	146	154	133	38
167	297	389	42	34	116	116	174	57	87	89	99	114	75	39
239	510	608	77	64	170	210	254	115	136	132	161	184	136	40
2,443	4,945	5,666	1,078	643	1,455	1,880	2,744	1,308	1,124	1,510	1,438	1,827	1,488	41
261	153	345	28	40	75	103	169	66	63	82	86	109	73	42
467	...	380	45	42	107	137	142	82	62	84	101	131	89	43
...	340	243	62	34	72	74	140	54	53	86	58	74	69	44
...	6,654	4,382	1,419	853	1,181	1,665	2,266	1,541	888	1,132	1,121	1,779	1,734	45
...	419	248	125	46	123	85	145	65	45	72	72	101	129	46
606	709	1,011	206	98	315	340	434	227	218	237	249	317	295	47
1,914	3,175	4,026	557	505	944	1,389	1,767	989	882	978	1,014	1,219	996	48
574	1,098	1,349	181	142	336	491	538	306	298	290	351	414	318	49
341	303	503	64	77	90	152	262	139	95	127	141	150	131	50
352	328	512	94	73	116	187	251	125	69	140	102	163	206	51
218	178	265	83	48	52	97	163	85	24	71	76	118	106	52
2,562	2,872	4,220	753	461	1,038	1,451	1,924	1,021	928	977	1,171	1,303	1,055	53
3,514	2,912	4,838	934	654	1,239	1,653	2,128	1,406	1,111	1,121	1,316	1,606	1,271	54
868	817	1,321	191	174	335	438	536	376	242	293	350	460	341	55
72	214	240	18	28	67	77	83	59	39	54	64	75	54	56
197	212	288	81	40	93	105	163	48	97	97	99	62	53	57
211	143	271	48	35	80	107	105	62	75	57	65	95	62	58
470	214	479	134	72	122	167	253	144	111	110	134	173	156	59
1,625	6,381	5,826	1,292	888	1,566	2,092	2,613	1,735	1,109	1,357	1,364	2,137	2,039	60
47	475	310	114	58	80	98	226	78	87	116	73	105	101	61
...	3,854	2,584	744	526	682	942	1,351	880	517	672	658	1,036	972	62

TABLE 15. NUMBER OF ALL-LISTED PROCEDURES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY AND AGE: UNITED STATES, 1985

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

PROCEDURE CATEGORY AND ICD-9-CM CODE	ALL AGES	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER
NUMBER OF ALL-LISTED PROCEDURES IN THOUSANDS					
ALL PROCEDURES.....	36,760	1,937	14,957	8,838	11,027
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	898	157	312	242	187
SPINAL TAP.....03.31	305	113	80	55	57
OPERATIONS ON THE CRANIAL AND PERIPHERAL NERVES.....04.0,04.2-04.9	167	*8	77	54	27
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	95	*	37	29	25
OPERATIONS ON THE EYE.....08-16	718	54	93	159	413
EXTRACTION OF LENS.....13.1-13.6	211	*	*8	42	157
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	180	*	*	37	139
OPERATIONS ON THE EAR.....18-20	256	129	70	40	18
MYRINGOTOMY.....20.0	104	89	*7	*6	*
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	1,173	306	567	188	111
RHINOPLASTY AND REPAIR OF NOSE.....21.8	193	*6	139	35	12
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	317	197	114	*6	*
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	981	52	168	331	429
BRONCHOSCOPY.....33.21-33.23	195	13	25	67	89
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	2,414	98	304	973	1,038
OPEN HEART SURGERY.....35.1-35.51,35.53-36.2,36.9,37.10-37.11,37.32-37.33,37.5	379	11	37	193	137
DIRECT HEART REVASCLARIZATION.....36.1	230	-	15	126	89
CARDIAC CATHETERIZATION.....37.21-37.23	681	24	79	350	227
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, AND REPAIR.....37.7-37.8	223	*	*8	47	167
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	397	21	96	113	167
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	5,740	236	1,870	1,555	2,079
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23,44.13	207	*7	47	62	91
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8,45.6-45.8	282	*	46	78	155
ENDOSCOPY OF LARGE INTESTINE (NATURAL ORIFICE).....45.24	506	*6	94	140	267
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	283	69	173	26	14
HEMORRHOIDECTOMY.....49.43-49.46	123	*	55	47	19
CHOLECYSTECTOMY.....51.2	475	*	167	157	150
REPAIR OF INGUINAL HERNIA.....53.0-53.1	416	53	106	125	131
OTHER HERNIA REPAIR.....53.2-53.9	186	10	45	69	62
LAPAROSCOPY.....54.21	212	*	197	10	*
DIVISION OF PERITONEAL ADHESIONS.....54.5	309	*	179	59	68
OPERATIONS ON THE URINARY SYSTEM.....55-59	1,729	71	387	451	818
ENDOSCOPES THROUGH NATURAL ORIFICE.....55.21-55.22,56.31,57.32,58.22	683	19	115	173	375
DILATION OF URETHRA.....58.6	119	*8	21	27	62
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	744	83	87	160	414
PROSTATECTOMY.....60.2-60.6	367	***	*	81	284
CIRCUMCISION.....64.0	52	31	*8	*6	*6
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	3,318	14	2,438	605	260
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	525	*	304	165	54
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	466	*	461	*6	-
HYSTERECTOMY.....68.3-68.7	670	*	421	190	60
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01,69.51	50	*	48	*	***
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	227	*	225	*	***
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	349	*	232	83	33
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	165	*	56	64	45
OBSTETRICAL PROCEDURES.....72-75	4,304	13	4,287	*	***
EPISIOTOMY WITH FORCEPS AND VACUUM EXTRACTION.....72.1,72.21,72.31,72.71	370	*	369	-	***
EPISIOTOMY WITHOUT FORCEPS AND VACUUM EXTRACTION.....73.6	1,451	*6	1,442	*	***
CESAREAN SECTION.....74.0-74.2,74.4,74.99	877	*	875	*	***
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	548	*	546	*	***
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	3,523	233	1,543	886	861
OPEN REDUCTION OF FRACTURE.....76.72,76.74,76.76-76.77,76.79,79.2-79.3,79.5-79.6	492	29	215	91	157
OTHER REDUCTION OF FRACTURE.....76.70,76.71,76.73,76.75,76.78,79.0-79.1,79.4	240	62	89	37	51
ARTHROSCOPY.....80.2	176	*7	112	42	15
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5,81.0	323	*5	183	108	27
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	97	*	60	26	10
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	160	*	66	32	58
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5,81.6	196	-	11	37	148
OPERATIONS ON MUSCLES, TENDONS, FASCIA, AND BURSA.....82-83.1,83.3-83.9	340	37	155	95	53
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	1,653	103	674	471	405
EXCISION OR DESTRUCTION OF BREAST TISSUE (PARTIAL MASTECTOMY).....85.20-85.23	92	*	33	35	23
MASTECTOMY.....85.4	116	*	17	50	48
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	8,819	364	2,024	2,630	3,801
COMPUTERIZED AXIAL TOMOGRAPHY (CAT SCAN).....87.03,87.41,87.71,88.01,88.38	1,378	68	311	349	650
CONTRAST MYELOGRAM.....87.21	436	*	225	156	52
PYELOGRAM.....87.73-87.75	442	*9	156	133	143
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	1,117	12	128	514	463
DIAGNOSTIC ULTRASOUND.....88.7	1,234	49	379	300	506
RADIOISOTOPE SCAN.....92.0-92.1	838	17	150	249	421

NOTE: SEE "MEDICAL CODING AND EDIT," APPENDIX I, FOR CODING MODIFICATIONS FOR THE NATIONAL HOSPITAL DISCHARGE SURVEY.

TABLE 16. RATE OF ALL-LISTED PROCEDURES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY AND AGE: UNITED STATES, 1985

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

PROCEDURE CATEGORY AND ICD-9-CM CODE	ALL AGES	UNDER 15 YEARS	15-44 YEARS	45-64 YEARS	65 YEARS AND OVER
RATE OF ALL-LISTED PROCEDURES PER 100,000 POPULATION					
ALL PROCEDURES.....	15,508.1	3,728.4	13,395.6	19,689.5	38,651.0
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	378.8	301.3	279.7	539.4	655.3
SPINAL TAP.....03.31	128.7	217.1	71.9	122.6	199.3
OPERATIONS ON THE CRANIAL AND PERIPHERAL NERVES.....04.0,04.2-04.9	70.3	*15.8	69.1	120.2	95.6
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	40.1	*	33.0	65.5	88.7
OPERATIONS ON THE EYE.....08-16	303.0	104.3	82.9	353.7	1,446.8
EXTRACTION OF LENS.....13.1-13.6	89.2	*	*7.1	93.4	551.2
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	76.0	*	*	82.2	488.3
OPERATIONS ON THE EAR.....18-20	108.1	247.4	62.9	88.6	62.0
MYRINGOTOMY.....20.0	43.8	171.5	*6.5	*12.5	*
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	494.9	589.4	508.2	418.6	390.6
RHINOPLASTY AND REPAIR OF NOSE.....21.8	81.2	*11.9	124.3	79.1	42.7
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	133.9	378.4	101.8	*13.3	*
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	413.7	100.5	150.9	737.3	1,503.4
BRONCHOSCOPY.....33.21-33.23	82.1	25.4	22.8	149.1	311.6
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	1,018.3	189.5	272.3	2,167.7	3,638.8
OPEN HEART SURGERY.....35.1-35.51,35.53-36.2,36.9,37.10-37.11,37.32-37.33,37.5	159.8	20.9	33.5	430.5	481.2
DIRECT HEART REVASCLARIZATION.....36.1	97.2	-	13.7	281.7	310.6
CARDIAC CATHETERIZATION.....37.21-37.23	287.1	46.0	71.2	779.3	797.1
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, AND REPAIR.....37.7-37.8	94.3	*	*7.4	104.7	587.0
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	167.5	40.9	85.8	251.7	584.8
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	2,421.7	453.7	1,675.2	3,463.7	7,288.0
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23,44.13	87.2	*12.8	42.2	137.8	319.4
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8,45.6-45.8	118.8	*	41.0	173.6	542.2
ENDOSCOPY OF LARGE INTESTINE (NATURAL ORIFICE).....45.24	213.4	*10.9	83.8	312.3	934.2
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	119.5	133.0	155.2	58.5	50.7
HEMORRHOIDECTOMY.....49.43-49.46	52.0	*	49.2	105.3	68.2
CHOLECYSTECTOMY.....51.2	200.3	*	149.4	349.1	526.4
REPAIR OF INGUINAL HERNIA.....53.0-53.1	175.4	102.1	95.2	279.3	458.9
OTHER HERNIA REPAIR.....53.2-53.9	78.6	18.8	40.7	154.1	217.2
LAPAROSCOPY.....54.21	89.3	*	176.5	22.3	*
DIVISION OF PERITONEAL ADHESIONS.....54.5	130.3	*	160.5	131.2	238.4
OPERATIONS ON THE URINARY SYSTEM.....55-59	729.2	137.3	346.9	1,005.5	2,868.8
ENDOSCOPES THROUGH NATURAL ORIFICE.....55.21-55.22,56.31,57.32,58.22	288.0	36.5	103.4	385.1	1,315.2
DILATION OF URETHRA.....58.6	50.3	*15.6	19.0	61.0	218.9
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	313.7	159.2	77.9	356.4	1,450.7
PROSTATECTOMY.....60.2-60.6	154.7	...	*	181.0	996.6
CIRCUMCISION.....64.0	21.9	59.1	*7.6	*14.4	*21.8
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	1,399.6	27.5	2,183.1	1,348.6	912.4
DOPHORECTOMY AND SALPINGO-DOPHORECTOMY.....65.3-65.6	221.3	*	272.7	367.0	189.5
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	196.8	*	412.6	*12.6	-
HYSTERECTOMY.....68.3-68.7	282.8	*	376.7	423.2	208.7
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01,69.51	20.9	*	43.0	*	...
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.62	95.6	*	201.6	*	...
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	147.1	*	207.5	184.7	114.8
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	69.4	*	50.3	141.8	156.0
OBSTETRICAL PROCEDURES.....72-75	1,815.6	24.4	3,839.0	*	...
EPISIOTOMY WITH FORCEPS AND VACUUM EXTRACTION.....72.1,72.21,72.31,72.71	155.9	*	330.7	-	...
EPISIOTOMY WITHOUT FORCEPS AND VACUUM EXTRACTION.....73.6	612.0	*12.2	1,291.9	*	...
CESAREAN SECTION.....74.0-74.2,74.4,74.99	369.9	*	783.4	*	...
REPAIR OF CURRENT OBSTETRICAL LACERATION.....75.5-75.6	231.0	*	488.9	*	...
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	1,486.2	448.0	1,381.7	1,974.7	3,017.4
OPEN REDUCTION OF FRACTURE.....76.72,76.74,76.76-76.77,76.79,79.2-79.3,79.5-79.6	207.4	56.4	192.2	202.8	549.1
OTHER REDUCTION OF FRACTURE.....76.70,76.71,76.73,76.75,76.78,79.0-79.1,79.4	101.2	119.9	79.7	83.1	179.6
ARTHROSCOPY.....80.2	74.5	*13.2	100.5	94.6	52.4
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5,81.0	136.1	*8.7	164.1	240.0	95.1
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	41.0	*	54.1	56.8	35.1
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	67.7	*	59.6	71.3	203.4
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5,81.6	82.8	-	10.2	81.7	519.3
OPERATIONS ON MUSCLES, TENDONS, FASCIA, AND BURSA.....82-83.1,83.3-83.9	143.4	71.8	138.4	212.4	184.9
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	697.2	198.3	603.2	1,050.1	1,418.2
EXCISION OR DESTRUCTION OF BREAST TISSUE (PARTIAL MASTECTOMY).....85.20-85.23	38.9	*	29.1	78.4	81.2
MASTECTOMY.....85.4	48.9	*	15.2	110.8	168.0
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	3,720.6	700.2	1,812.7	5,859.0	13,323.8
COMPUTERIZED AXIAL TOMOGRAPHY (CAT SCAN).....87.03,87.41,87.71,88.01,88.38	581.2	130.2	278.8	777.0	2,278.1
CONTRAST MYELOGRAM.....87.21	184.0	*	201.8	346.5	181.7
PYELOGRAM.....87.73-87.75	186.4	*18.0	139.8	297.1	501.7
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	471.3	23.0	114.9	1,144.1	1,623.7
DIAGNOSTIC ULTRASOUND.....88.7	520.5	93.7	339.3	668.1	1,775.0
RADIOISOTOPE SCAN.....92.0-92.1	353.6	33.3	134.3	555.7	1,477.0

NOTE: SEE "MEDICAL CODING AND EDIT," APPENDIX I, FOR CODING MODIFICATIONS FOR THE NATIONAL HOSPITAL DISCHARGE SURVEY.

TABLE 17. NUMBER OF ALL-LISTED PROCEDURES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY AND SEX: UNITED STATES, 1985

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

PROCEDURE CATEGORY AND ICD-9-CM CODE	BOTH SEXES	MALE	FEMALE
NUMBER OF ALL-LISTED PROCEDURES IN THOUSANDS			
ALL PROCEDURES.....	36,760	14,694	22,066
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	898	451	447
SPINAL TAP.....03.31	305	159	146
OPERATIONS ON THE CRANIAL AND PERIPHERAL NERVES.....04.0,04.2-04.9	167	77	89
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	95	24	71
OPERATIONS ON THE EYE.....08-16	718	309	409
EXTRACTION OF LENS.....13.1-13.6	211	79	132
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	180	67	113
OPERATIONS ON THE EAR.....18-20	256	130	126
MYRINGOTOMY.....20.0	104	60	44
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	1,173	589	584
RHINOPLASTY AND REPAIR OF NOSE.....21.8	193	99	94
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	317	135	183
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	981	582	398
BRONCHOSCOPY.....33.21-33.23	195	123	71
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	2,414	1,425	989
OPEN HEART SURGERY.....35.1-35.51,35.53-36.2,36.9,37.10-37.11,37.32-37.33,37.5	379	264	114
DIRECT HEART REVASCULARIZATION.....36.1	230	172	58
CARDIAC CATHETERIZATION.....37.21-37.23	681	439	241
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, AND REPAIR.....37.7-37.8	223	118	105
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	397	190	207
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	5,740	2,530	3,210
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23,44.13	207	100	106
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8,45.6-45.8	282	127	155
ENDOSCOPY OF LARGE INTESTINE (NATURAL ORIFICE).....45.24	506	223	283
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	283	150	133
HEMORRHOIDECTOMY.....49.43-49.46	123	67	56
CHOLECYSTECTOMY.....51.2	475	147	327
REPAIR OF INGUINAL HERNIA.....53.0-53.1	416	370	46
OTHER HERNIA REPAIR.....53.2-53.9	186	71	115
LAPAROSCOPY.....54.21	212	*	209
DIVISION OF PERITONEAL ADHESIONS.....54.5	309	44	265
OPERATIONS ON THE URINARY SYSTEM.....55-59	1,729	1,049	679
ENDOSCOPES THROUGH NATURAL ORIFICE.....55.21-55.22,56.31,57.32,58.22	683	487	195
DILATION OF URETHRA.....58.6	119	73	47
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	744	744	...
PROSTATECTOMY.....60.2-60.6	367	367	...
CIRCUMCISION.....64.0	52	52	...
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	3,318	...	3,318
DOPHORECTOMY AND SALPINGO-DOPHORECTOMY.....65.3-65.6	525	...	525
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	466	...	466
HYSTERECTOMY.....68.3-68.7	670	...	670
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01,69.51	50	...	50
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	227	...	227
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	349	...	349
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	165	...	165
OBSTETRICAL PROCEDURES.....72-75	4,304	...	4,304
EPISIOTOMY WITH FORCEPS AND VACUUM EXTRACTION.....72.1,72.21,72.31,72.71	370	...	370
EPISIOTOMY WITHOUT FORCEPS AND VACUUM EXTRACTION.....73.6	1,451	...	1,451
CESAREAN SECTION.....74.0-74.2,74.4,74.99	877	...	877
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	548	...	548
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	3,523	1,734	1,789
OPEN REDUCTION OF FRACTURE.....76.72,76.74,76.76-76.77,76.79,79.2-79.3,79.5-79.6	492	251	241
OTHER REDUCTION OF FRACTURE.....76.70,76.71,76.73,76.75,76.78,79.0-79.1,79.4	240	125	115
ARTHROSCOPY.....80.2	176	108	68
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5,81.0	323	191	132
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	97	66	31
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	160	86	75
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5,81.6	196	60	137
OPERATIONS ON MUSCLES, TENDONS, FASCIA, AND BURSA.....82-83.1,83.3-83.9	340	194	146
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	1,653	658	994
EXCISION OR DESTRUCTION OF BREAST TISSUE (PARTIAL MASTECTOMY).....85.20-85.23	92	*	89
MASTECTOMY.....85.4	116	*	114
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	8,819	4,279	4,540
COMPUTERIZED AXIAL TOMOGRAPHY (CAT SCAN).....87.03,87.41,87.71,88.01,88.38	1,378	671	707
CONTRAST MYELOGRAM.....87.21	436	244	192
PYELOGRAM.....87.73-87.75	442	242	200
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	1,117	693	425
DIAGNOSTIC ULTRASOUND.....88.7	1,234	478	756
RADIOISOTOPE SCAN.....92.0-92.1	838	375	463

NOTE: SEE "MEDICAL CODING AND EDIT," APPENDIX I, FOR CODING MODIFICATIONS FOR THE NATIONAL HOSPITAL DISCHARGE SURVEY.

TABLE 18. RATE OF ALL-LISTED PROCEDURES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY AND SEX: UNITED STATES, 1985

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

PROCEDURE CATEGORY AND ICD-9-CM CODE	BOTH SEXES	MALE	FEMALE
RATE OF ALL-LISTED PROCEDURES PER 100,000 POPULATION			
ALL PROCEDURES.....	15,508.1	12,820.1	18,024.7
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	378.8	393.5	365.0
SPINAL TAP.....03.31	128.7	138.5	119.5
OPERATIONS ON THE CRANIAL AND PERIPHERAL NERVES.....04.0,04.2-04.9	70.3	67.5	73.0
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	40.1	20.6	58.3
OPERATIONS ON THE EYE.....08-16	303.0	269.4	334.5
EXTRACTION OF LENS.....13.1-13.6	89.2	69.0	108.0
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	76.0	58.4	92.4
OPERATIONS ON THE EAR.....18-20	108.1	113.8	102.7
MYRINGOTOMY.....20.0	43.8	52.2	35.8
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	494.9	513.6	477.4
RHINOPLASTY AND REPAIR OF NOSE.....21.8	81.2	86.1	76.7
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	133.9	117.4	149.3
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	413.7	508.1	325.3
BRONCHOSCOPY.....33.21-33.23	82.1	107.5	58.3
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	1,018.3	1,243.4	807.6
OPEN HEART SURGERY.....35.1-35.51,35.53-36.2,36.9,37.10-37.11,37.32-37.33,37.5	159.8	230.7	93.4
DIRECT HEART REVASCULARIZATION.....36.1	97.2	150.5	47.3
CARDIAC CATHETERIZATION.....37.21-37.23	287.1	383.2	197.2
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, AND REPAIR.....37.7-37.8	94.3	103.0	86.1
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	167.5	165.5	169.3
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	2,421.7	2,207.2	2,622.5
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23,44.13	87.2	87.5	86.9
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8,45.6-45.8	118.8	110.6	126.4
ENDOSCOPY OF LARGE INTESTINE (NATURAL ORIFICE).....45.24	213.4	194.1	231.5
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	119.5	130.9	108.7
HEMORRHOIDECTOMY.....49.43-49.46	52.0	58.8	45.6
CHOLECYSTECTOMY.....51.2	200.3	128.6	267.4
REPAIR OF INGUINAL HERNIA.....53.0-53.1	175.4	322.5	37.6
OTHER HERNIA REPAIR.....53.2-53.9	78.6	62.0	94.2
LAPAROSCOPY.....54.21	89.3	*	171.1
DIVISION OF PERITONEAL ADHESIONS.....54.5	130.3	38.4	216.3
OPERATIONS ON THE URINARY SYSTEM.....55-59	729.2	915.4	554.9
ENDOSCOPES THROUGH NATURAL ORIFICE.....55.21-55.22,56.31,57.32,58.22	288.0	425.1	159.6
DILATION OF URETHRA.....58.6	50.3	63.3	38.0
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	313.7	648.8	...
PROSTATECTOMY.....60.2-60.6	154.7	320.0	...
CIRCUMCISION.....64.0	21.9	45.2	...
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	1,399.6	...	2,709.9
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	221.3	...	428.5
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	196.8	...	381.1
HYSTERECTOMY.....68.3-68.7	282.8	...	547.6
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01,69.51	20.9	...	40.5
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	95.6	...	185.1
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	147.1	...	284.8
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	69.4	...	134.4
OBSTETRICAL PROCEDURES.....72-75	1,815.6	...	3,515.5
EPISIOTOMY WITH FORCEPS AND VACUUM EXTRACTION.....72.1,72.21,72.31,72.71	155.7	...	301.9
EPISIOTOMY WITHOUT FORCEPS AND VACUUM EXTRACTION.....73.6	612.0	...	1,185.0
CESAREAN SECTION.....74.0-74.2,74.4,74.99	369.9	...	716.2
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	231.0	...	447.3
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	1,486.2	1,512.5	1,461.6
OPEN REDUCTION OF FRACTURE.....76.72,76.74,76.76-76.77,76.79,79.2-79.3,79.5-79.6	207.4	218.6	196.9
OTHER REDUCTION OF FRACTURE.....76.70,76.71,76.73,76.75,76.78,79.0-79.1,79.4	101.2	108.8	94.0
ARTHROSCOPY.....80.2	74.5	94.4	55.8
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5,81.0	136.1	166.5	107.7
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	41.0	57.6	25.5
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	67.7	74.9	61.0
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5,81.6	82.8	52.0	111.6
OPERATIONS ON MUSCLES, TENDONS, FASCIA, AND BURSA.....82-83.1,83.3-83.9	143.4	169.3	119.2
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	697.2	574.5	812.1
EXCISION OR DESTRUCTION OF BREAST TISSUE (PARTIAL MASTECTOMY).....85.20-85.23	38.9	*	72.6
MASTECTOMY.....85.4	48.9	*	93.4
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	3,720.6	3,733.7	3,708.3
COMPUTERIZED AXIAL TOMOGRAPHY (CAT SCAN).....87.03,87.41,87.71,88.01,88.38	581.2	585.3	577.4
CONTRAST MYELOGRAM.....87.21	184.0	212.6	157.2
PYELOGRAM.....87.73-87.75	186.4	211.5	163.0
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	471.3	604.2	346.8
DIAGNOSTIC ULTRASOUND.....88.7	520.5	416.8	617.6
RADIOISOTOPE SCAN.....92.0-92.1	353.6	326.8	378.6

NOTE: SEE "MEDICAL CODING AND EDIT," APPENDIX I, FOR CODING MODIFICATIONS FOR THE NATIONAL HOSPITAL DISCHARGE SURVEY.

TABLE 19. NUMBER OF ALL-LISTED PROCEDURES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY AND RACE: UNITED STATES, 1985

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

PROCEDURE CATEGORY AND ICD-9-CM CODE	ALL RACES	WHITE	ALL OTHER	NOT STATED
	NUMBER OF ALL-LISTED PROCEDURES IN THOUSANDS			
ALL PROCEDURES.....	36,760	28,213	5,180	3,367
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	898	666	147	84
SPINAL TAP.....03-31	305	200	82	23
OPERATIONS ON THE CRANIAL AND PERIPHERAL NERVES.....04.0,04.2-04.9	167	133	17	16
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	95	70	17	*8
OPERATIONS ON THE EYE.....08-16	718	567	71	80
EXTRACTION OF LENS.....13.1-13.6	211	177	17	18
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	180	153	12	16
OPERATIONS ON THE EAR.....18-20	256	195	35	27
MYRINGOTOMY.....20.0	104	83	13	*8
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	1,173	914	127	132
RHINOPLASTY AND REPAIR OF NOSE.....21.8	193	158	14	21
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	317	246	39	33
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	981	761	148	72
BRONCHOSCOPY.....33.21-33.23	195	152	28	15
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	2,414	1,983	272	159
OPEN HEART SURGERY.....35.1-35.51,35.53-36.2,36.9,37.10-37.11,37.32-37.33,37.5	379	336	20	23
DIRECT HEART REVASCULARIZATION.....36.1	230	206	11	14
CARDIAC CATHETERIZATION.....37.21-37.23	681	580	63	38
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, AND REPAIR.....37.7-37.8	223	190	17	16
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	397	312	59	26
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	5,740	4,499	737	505
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23,44.13	207	157	37	14
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8,45.6-45.8	282	225	29	28
ENDOSCOPY OF LARGE INTESTINE (NATURAL ORIFICE).....45.24	506	413	60	33
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	283	219	28	36
HEMORRHOIDECTOMY.....49.43-49.46	123	96	17	11
CHOLECYSTECTOMY.....51.2	475	381	51	43
REPAIR OF INGUINAL HERNIA.....53.0-53.1	416	325	45	45
OTHER HERNIA REPAIR.....53.2-53.9	186	147	21	19
LAPAROSCOPY.....54.21	212	144	40	27
DIVISION OF PERITONEAL ADHESIONS.....54.5	309	225	53	31
OPERATIONS ON THE URINARY SYSTEM.....55-59	1,729	1,397	194	137
ENDOSCOPES THROUGH NATURAL ORIFICE.....55.21-55.22,56.31,57.32,58.22	683	563	72	47
DILATION OF URETHRA.....58.6	119	96	16	*7
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	744	589	94	61
PROSTATECTOMY.....60.2-60.6	367	301	33	33
CIRCUMCISION.....64.0	52	30	17	*
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	3,318	2,345	608	364
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	525	396	72	57
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	466	298	112	57
HYSTERECTOMY.....68.3-68.7	670	501	94	75
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01,69.51	50	16	29	*
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	227	151	52	24
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	349	244	73	32
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	165	137	*9	19
OBSTETRICAL PROCEDURES.....72-75	4,304	2,961	754	589
EPISIOTOMY WITH FORCEPS AND VACUUM EXTRACTION.....72.1,72.21,72.31,72.71	370	272	47	51
EPISIOTOMY WITHOUT FORCEPS AND VACUUM EXTRACTION.....73.6	1,451	1,039	227	185
CESAREAN SECTION.....74.0-74.2,74.4,74.99	877	599	159	118
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	548	375	100	72
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	3,523	2,687	419	416
OPEN REDUCTION OF FRACTURE.....76.72,76.74,76.76-76.77,76.79,79.2-79.3,79.5-79.6	492	378	60	54
OTHER REDUCTION OF FRACTURE.....76.70,76.71,76.73,76.75,76.78,79.0-79.1,79.4	240	183	31	25
ARTHROSCOPY.....80.2	176	136	21	20
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5,81.0	323	262	24	37
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	97	76	11	10
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	160	115	19	27
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5,81.6	196	161	14	21
OPERATIONS ON MUSCLES, TENDONS, FASCIA, AND BURSA.....82-83.1,83.3-83.9	340	253	42	44
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	1,653	1,276	225	151
EXCISION OR DESTRUCTION OF BREAST TISSUE (PARTIAL MASTECTOMY).....85.20-85.23	92	70	12	*9
MASTECTOMY.....85.4	116	92	11	12
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	8,819	6,991	1,273	555
COMPUTERIZED AXIAL TOMOGRAPHY (CAT SCAN).....87.03,87.41,87.71,88.01,88.38	1,378	1,091	211	76
CONTRAST MYELOGRAM.....87.21	436	338	44	54
PYELOGRAM.....87.73-87.75	442	361	51	29
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	1,117	933	112	72
DIAGNOSTIC ULTRASOUND.....88.7	1,234	932	231	70
RADIOISOTOPE SCAN.....92.0-92.1	838	671	130	38

NOTE: SEE "MEDICAL CODING AND EDIT," APPENDIX I, FOR CODING MODIFICATIONS FOR THE NATIONAL HOSPITAL DISCHARGE SURVEY.

TABLE 20. NUMBER OF ALL-LISTED PROCEDURES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY AND GEOGRAPHIC REGION: UNITED STATES, 1985

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

PROCEDURE CATEGORY AND ICD-9-CM CODE	UNITED STATES	NORTH-EAST	MIDWEST	SOUTH	WEST	NUMBER OF ALL-LISTED PROCEDURES IN THOUSANDS				
						UNITED STATES	NORTH-EAST	MIDWEST	SOUTH	WEST
ALL PROCEDURES.....	36,760	7,920	10,013	11,644	7,182					
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	898	150	249	327	172					
SPINAL TAP.....03-31	305	62	84	113	46					
OPERATIONS ON THE CRANIAL AND PERIPHERAL NERVES.....04.0,04.2-04.9	167	32	33	64	38					
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	95	18	28	28	21					
OPERATIONS ON THE EYE.....08-16	718	199	251	141	127					
EXTRACTION OF LENS.....13.1-13.6	211	69	72	36	34					
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	180	63	56	30	31					
OPERATIONS ON THE EAR.....18-20	256	52	75	92	37					
MYRINGOTOMY.....20.0	104	26	24	43	10					
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	1,173	241	366	371	195					
RHINOPLASTY AND REPAIR OF NOSE.....21.8	193	35	72	53	32					
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	317	55	84	129	49					
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	981	229	261	308	183					
BRONCHOSCOPY.....33.21-33.23	195	49	53	62	31					
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	2,414	417	771	759	466					
OPEN HEART SURGERY.....35.1-35.51,35.53-36.2,36.9,37.10-37.11,37.32-37.33,37.5	379	54	136	124	65					
DIRECT HEART REVASCULARIZATION.....36.1	230	32	83	74	41					
CARDIAC CATHETERIZATION.....37.21-37.23	681	100	224	256	100					
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, AND REPAIR.....37.7-37.8	223	46	61	79	37					
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	397	99	121	118	60					
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	5,740	1,216	1,552	1,943	1,030					
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23,44.13	207	46	51	82	27					
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8,45.6-45.8	282	57	82	82	60					
ENDOSCOPY OF LARGE INTESTINE (NATURAL ORIFICE).....45.24	506	125	126	189	66					
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	283	52	72	96	63					
HEMORRHOIDECTOMY.....49.43-49.46	123	24	32	50	17					
CHOLECYSTECTOMY.....51.2	475	99	139	160	77					
REPAIR OF INGUINAL HERNIA.....53.0-53.1	416	107	105	141	62					
OTHER HERNIA REPAIR.....53.2-53.9	186	40	51	59	37					
LAPAROSCOPY.....54.21	212	39	61	69	43					
DIVISION OF PERITONEAL ADHESIONS.....54.5	309	53	85	112	60					
OPERATIONS ON THE URINARY SYSTEM.....55-59	1,729	388	485	588	267					
ENDOSCOPIES THROUGH NATURAL ORIFICE.....55.21-55.22,56.31,57.32,58.22	683	167	197	238	80					
DILATION OF URETHRA.....58.6	119	26	36	47	10					
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	744	174	208	238	124					
PROSTATECTOMY.....60.2-60.6	367	79	110	111	68					
CIRCUMCISION.....64.0	52	14	11	23	*					
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	3,318	673	741	1,287	617					
DOPHORECTOMY AND SALPINGO-DOPHORECTOMY.....65.3-65.6	525	76	125	208	116					
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	466	80	94	216	77					
HYSTERECTOMY.....68.3-68.7	670	92	158	273	147					
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01,69.51	50	29	*	11	96					
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	227	64	46	81	35					
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	349	115	70	126	38					
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	165	23	43	63	36					
OBSTETRICAL PROCEDURES.....72-75	4,304	742	1,175	1,393	993					
EPISIOTOMY WITH FORCEPS AND VACUUM EXTRACTION.....72.1,72.21,72.31,72.71	370	56	80	169	64					
EPISIOTOMY WITHOUT FORCEPS AND VACUUM EXTRACTION.....73.6	1,451	280	370	482	319					
CESAREAN SECTION.....74.0-74.2,74.4,74.99	877	155	207	317	197					
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	548	92	137	182	137					
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	3,523	636	913	1,121	853					
OPEN REDUCTION OF FRACTURE.....76.72,76.74,76.76-76.77,76.79,79.2-79.3,79.5-79.6	492	93	119	156	122					
OTHER REDUCTION OF FRACTURE.....76.70,76.71,76.73,76.75,76.78,79.0-79.1,79.4	240	48	59	81	52					
ARTHROSCOPY.....80.2	176	40	39	46	52					
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5,81.0	323	43	75	129	76					
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	97	21	21	27	27					
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	160	23	48	43	47					
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5,81.6	196	41	62	48	44					
OPERATIONS ON MUSCLES, TENDONS, FASCIA, AND BURSA.....82-83.1,83.3-83.9	340	65	91	112	72					
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	1,653	360	439	571	282					
EXCISION OR DESTRUCTION OF BREAST TISSUE (PARTIAL MASTECTOMY).....85.20-85.23	92	29	20	37	*7					
MASTECTOMY.....85.4	116	21	30	40	24					
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	8,819	2,327	2,379	2,359	1,755					
COMPUTERIZED AXIAL TOMOGRAPHY (CAT SCAN).....87.03,87.41,87.71,88.01,88.38	1,378	425	352	356	244					
CONTRAST MYELOGRAM.....87.21	436	65	92	168	110					
PYELOGRAM.....87.73-87.75	442	114	120	144	63					
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	1,117	196	377	340	205					
DIAGNOSTIC ULTRASOUND.....88.7	1,234	397	325	288	224					
RADIOISOTOPE SCAN.....92.0-92.1	838	280	208	196	154					

NOTE: SEE "MEDICAL CODING AND EDIT," APPENDIX I, FOR CODING MODIFICATIONS FOR THE NATIONAL HOSPITAL DISCHARGE SURVEY.

TABLE 21. RATE OF ALL-LISTED PROCEDURES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY AND GEOGRAPHIC REGION: UNITED STATES, 1985

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

PROCEDURE CATEGORY AND ICD-9-CM CODE	UNITED STATES	NORTH-EAST	MIDWEST	SOUTH	WEST
RATE OF ALL-LISTED PROCEDURES PER 100,000 POPULATION					
ALL PROCEDURES.....	15,508.1	15,919.1	16,959.4	14,380.1	15,195.1
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	378.8	301.0	421.4	403.7	364.9
SPINAL TAP.....03.31	128.7	125.5	141.9	139.7	96.4
OPERATIONS ON THE CRANIAL AND PERIPHERAL NERVES.....04.0,04.2-04.9	70.3	65.2	55.2	78.6	80.4
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	40.1	36.1	47.5	34.4	44.6
OPERATIONS ON THE EYE.....08-16	303.0	399.8	424.8	174.7	268.9
EXTRACTION OF LENS.....13.1-13.6	89.2	139.2	122.6	44.1	71.9
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	76.0	126.7	95.4	36.8	65.3
OPERATIONS ON THE EAR.....18-20	108.1	103.9	126.7	114.0	79.2
MYRINGOTOMY.....20.0	43.8	53.0	41.1	52.8	22.0
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	494.9	485.4	619.9	458.1	411.6
RHINOPLASTY AND REPAIR OF NOSE.....21.8	81.2	71.1	122.4	65.7	67.1
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	133.9	110.3	143.1	159.9	102.7
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	413.7	459.5	441.9	379.8	388.2
BRONCHOSCOPY.....33.21-33.23	82.1	98.1	89.1	76.7	65.4
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	1,018.3	839.2	1,306.0	937.5	985.8
OPEN HEART SURGERY.....35.1-35.51,35.53-36.2,36.9,37.10-37.11,37.32-37.33,37.5	159.8	107.8	230.9	152.5	138.2
DIRECT HEART REVASCULARIZATION.....36.1	97.2	64.0	141.2	91.9	86.2
CARDIAC CATHETERIZATION.....37.21-37.23	287.1	201.5	380.0	316.6	210.7
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, AND REPAIR.....37.7-37.8	94.3	92.5	104.1	97.1	78.9
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	167.5	198.2	204.1	145.5	127.0
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	2,421.7	2,444.2	2,628.9	2,398.9	2,178.1
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23,44.13	87.2	92.9	85.7	101.8	58.0
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8,45.6-45.8	118.0	115.0	139.6	101.1	127.1
ENDOSCOPY OF LARGE INTESTINE (NATURAL ORIFICE).....45.24	213.4	251.5	214.1	232.8	139.3
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	119.5	103.6	122.6	118.5	133.8
HEMORRHOIDECTOMY.....49.43-49.46	52.0	48.8	53.5	62.0	36.2
CHOLECYSTECTOMY.....51.2	200.3	199.9	234.8	197.2	163.0
REPAIR OF INGUINAL HERNIA.....53.0-53.1	175.4	214.4	178.2	174.7	132.0
OTHER HERNIA REPAIR.....53.2-53.9	78.6	79.5	86.3	73.1	77.6
LAPAROSCOPY.....54.21	89.3	79.0	103.1	84.6	90.9
DIVISION OF PERITONEAL ADHESIONS.....54.5	130.3	105.9	143.3	138.2	126.1
OPERATIONS ON THE URINARY SYSTEM.....55-59	729.2	780.3	821.8	726.5	564.5
ENDOSCOPIES THROUGH NATURAL ORIFICE.....55.21-55.22,56.31,57.32,58.22	288.0	336.3	333.0	294.1	210.3
DILATION OF URETHRA.....58.6	50.3	52.0	61.4	57.8	17.4
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	313.7	349.9	352.4	293.8	261.4
PROSTATECTOMY.....60.2-60.6	154.7	158.1	186.1	136.5	143.4
CIRCUMCISION.....64.0	21.9	27.8	18.6	28.9	*
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	1,399.6	1,351.8	1,255.2	1,589.9	1,304.4
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	221.3	152.7	211.9	256.7	244.6
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	196.8	161.0	158.7	266.1	163.3
HYSTERECTOMY.....68.3-68.7	282.8	184.6	268.0	337.7	310.5
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01,69.51	20.9	58.9	*	14.1	*13.2
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	95.6	129.4	78.2	99.8	74.5
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	147.1	231.2	118.2	156.0	79.4
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	69.4	47.2	72.6	77.2	75.4
OBSTETRICAL PROCEDURES.....72-75	1,815.6	1,491.3	1,990.7	1,720.5	2,101.3
EPISIOTOMY WITH FORCEPS AND VACUUM EXTRACTION.....72.1,72.21,72.31,72.71	155.9	112.3	136.2	208.6	136.1
EPISIOTOMY WITHOUT FORCEPS AND VACUUM EXTRACTION.....73.6	612.0	562.1	626.0	595.7	674.9
CESAREAN SECTION.....74.0-74.2,74.4,74.99	369.9	312.4	351.0	391.7	416.6
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	231.0	184.1	231.3	224.7	290.8
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	1,486.2	1,277.8	1,546.1	1,384.3	1,805.2
OPEN REDUCTION OF FRACTURE.....76.72,76.74,76.76-76.77,76.79,79.2-79.3,79.5-79.6	207.4	187.5	202.3	193.2	259.0
OTHER REDUCTION OF FRACTURE.....76.70,76.71,76.73,76.75,76.78,79.0-79.1,79.4	101.2	97.3	99.1	100.2	109.5
ARTHROSCOPY.....80.2	74.5	80.1	65.9	56.8	109.4
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5,81.0	136.1	86.0	126.3	159.0	161.8
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	41.0	42.6	36.0	34.0	57.8
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	67.7	46.3	80.6	53.2	98.9
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5,81.6	82.8	83.4	105.1	59.8	93.7
OPERATIONS ON MUSCLES, TENDONS, FASCIA, AND BURSA.....82-83.1,83.3-83.9	143.4	130.4	153.8	138.1	153.3
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	697.2	724.0	743.4	705.6	596.7
EXCISION OR DESTRUCTION OF BREAST TISSUE (PARTIAL MASTECTOMY).....85.20-85.23	38.9	57.6	33.0	45.2	*15.7
MASTECTOMY.....85.4	48.9	42.7	51.2	49.5	51.6
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	3,720.6	4,676.7	4,028.5	2,912.8	3,713.3
COMPUTERIZED AXIAL TOMOGRAPHY (CAT SCAN).....87.03,87.41,87.71,88.01,88.38	581.2	854.1	596.5	439.9	517.0
CONTRAST MYELOGRAM.....87.21	184.0	131.0	156.5	207.7	233.7
PYELOGRAM.....87.73-87.75	186.4	229.4	203.5	178.1	134.2
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	471.3	393.4	638.0	419.7	433.4
DIAGNOSTIC ULTRASOUND.....88.7	520.5	798.5	549.9	355.2	474.4
RADIOISOTOPE SCAN.....92.0-92.1	353.6	563.3	352.9	241.8	325.1

NOTE: SEE "MEDICAL CODING AND EDIT," APPENDIX I, FOR CODING MODIFICATIONS FOR THE NATIONAL HOSPITAL DISCHARGE SURVEY.

TABLE 22. NUMBER OF ALL-LISTED PROCEDURES FOR PATIENTS DISCHARGED FROM SHORT-STAY HOSPITALS, BY PROCEDURE CATEGORY AND BED SIZE OF HOSPITAL: UNITED STATES, 1985

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

PROCEDURE CATEGORY AND ICD-9-CM CODE	ALL SIZES	6-99 BEDS	100-199 BEDS	200-299 BEDS	300-499 BEDS	500 BEDS OR MORE	NUMBER OF ALL-LISTED PROCEDURES IN THOUSANDS					
							ALL SIZES	6-99 BEDS	100-199 BEDS	200-299 BEDS	300-499 BEDS	500 BEDS OR MORE
ALL PROCEDURES.....	36,760	3,437	5,976	7,977	9,710	9,661						
OPERATIONS ON THE NERVOUS SYSTEM.....01-05	898	56	137	162	236	308						
SPINAL TAP.....03.31	305	15	47	51	72	120						
OPERATIONS ON THE CRANIAL AND PERIPHERAL NERVES.....04.0,04.2-04.9	167	18	31	31	48	38						
OPERATIONS ON THE ENDOCRINE SYSTEM.....06-07	95	*7	12	20	25	32						
OPERATIONS ON THE EYE.....08-16	718	74	126	116	188	213						
EXTRACTION OF LENS.....13.1-13.6	211	18	50	41	55	48						
INSERTION OF PROSTHETIC LENS (PSEUDOPHAKOS).....13.7	180	17	38	37	48	40						
OPERATIONS ON THE EAR.....18-20	256	12	58	58	62	67						
MYRINGOTOMY.....20.0	104	*6	27	23	25	23						
OPERATIONS ON THE NOSE, MOUTH, AND PHARYNX.....21-29	1,173	142	247	245	281	258						
RHINOPLASTY AND REPAIR OF NOSE.....21.8	193	33	36	40	43	40						
TONSILLECTOMY WITH OR WITHOUT ADENOIDECTOMY.....28.2-28.3	317	40	81	73	71	53						
OPERATIONS ON THE RESPIRATORY SYSTEM.....30-34	981	37	135	219	290	300						
BRONCHOSCOPY.....33.21-33.23	195	*5	27	43	62	58						
OPERATIONS ON THE CARDIOVASCULAR SYSTEM.....35-39	2,414	44	180	487	768	934						
OPEN HEART SURGERY.....35.1-35.51,35.53-36.2,36.9,37.10-37.11,37.32-37.33,37.5	379	-	15	54	121	189						
DIRECT HEART REVASCULARIZATION.....36.1	230	-	*8	37	72	113						
CARDIAC CATHETERIZATION.....37.21-37.23	681	*	30	127	204	319						
PACEMAKER INSERTION, REPLACEMENT, REMOVAL, AND REPAIR.....37.7-37.8	223	13	22	60	72	57						
OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM.....40-41	397	23	53	76	106	139						
OPERATIONS ON THE DIGESTIVE SYSTEM.....42-54	5,740	684	983	1,327	1,419	1,327						
ESOPHAGOSCOPY AND GASTROSCOPY (NATURAL ORIFICE).....42.23,44.13	207	17	34	52	49	55						
PARTIAL GASTRECTOMY AND RESECTION OF INTESTINE.....43.5-43.8,45.6-45.8	282	35	43	66	73	65						
ENDOSCOPY OF LARGE INTESTINE (NATURAL ORIFICE).....45.24	506	48	81	133	121	121						
APPENDECTOMY, EXCLUDING INCIDENTAL.....47.0	283	53	52	57	72	48						
HEMORRHOIDECTOMY.....49.43-49.46	123	19	21	30	31	22						
CHOLECYSTECTOMY.....51.2	475	78	81	102	118	96						
REPAIR OF INGUINAL HERNIA.....53.0-53.1	416	63	82	86	102	82						
OTHER HERNIA REPAIR.....53.2-53.9	186	33	32	39	44	38						
LAPAROSCOPY.....54.21	212	30	51	39	40	52						
DIVISION OF PERITONEAL ADHESIONS.....54.5	309	33	68	57	79	72						
OPERATIONS ON THE URINARY SYSTEM.....55-59	1,729	149	304	377	509	390						
ENDOSCOPIES THROUGH NATURAL ORIFICE.....55.21-55.22,56.31,57.32,58.22	603	54	124	153	192	159						
DILATION OF URETHRA.....58.6	119	10	22	27	44	16						
OPERATIONS ON THE MALE GENITAL ORGANS.....60-64	744	73	132	163	216	159						
PROSTATECTOMY.....60.2-60.6	367	38	67	86	105	71						
CIRCUMCISION.....64.0	52	*7	12	*8	12	13						
OPERATIONS ON THE FEMALE GENITAL ORGANS.....65-71	3,318	426	737	578	798	778						
OOPHORECTOMY AND SALPINGO-OOPHORECTOMY.....65.3-65.6	525	64	125	95	128	113						
BILATERAL DESTRUCTION OR OCCLUSION OF FALLOPIAN TUBES.....66.2-66.3	466	86	110	70	100	101						
HYSTERECTOMY.....68.3-68.7	670	86	155	124	161	145						
CURETTAGE OF UTERUS TO TERMINATE PREGNANCY.....69.01,69.51	50	*	*	*5	*7	32						
DILATION AND CURETTAGE OF UTERUS AFTER DELIVERY OR ABORTION.....69.02	227	28	44	41	60	54						
DIAGNOSTIC DILATION AND CURETTAGE OF UTERUS.....69.09	349	41	90	59	81	77						
REPAIR OF CYSTOCELE AND RECTOCELE.....70.5	165	22	30	37	43	32						
OBSTETRICAL PROCEDURES.....72-75	4,304	520	695	747	1,217	1,125						
EPISIOTOMY WITH FORCEPS AND VACUUM EXTRACTION.....72.1,72.21,72.31,72.71	370	31	81	56	95	107						
EPISIOTOMY WITHOUT FORCEPS AND VACUUM EXTRACTION.....73.6	1,451	215	263	231	422	321						
CESAREAN SECTION.....74.0-74.2,74.4,74.99	877	94	155	149	248	232						
REPAIR OF CURRENT OBSTETRIC LACERATION.....75.5-75.6	548	78	84	92	149	145						
OPERATIONS ON THE MUSCULOSKELETAL SYSTEM.....76-84	3,523	460	648	723	892	801						
OPEN REDUCTION OF FRACTURE.....76.72,76.74,76.76-76.77,76.79,79.2-79.3,79.5-79.6	492	59	75	112	138	108						
OTHER REDUCTION OF FRACTURE.....76.70,76.71,76.73,76.75,76.78,79.0-79.1,79.4	240	35	45	47	63	50						
ARTHROSCOPY.....80.2	176	20	32	48	42	34						
EXCISION OR DESTRUCTION OF INTERVERTEBRAL DISC AND SPINAL FUSION.....80.5,81.0	323	31	51	65	72	103						
EXCISION OF SEMILUNAR CARTILAGE OF KNEE.....80.6	97	10	17	28	24	18						
ARTHROPLASTY AND REPLACEMENT OF KNEE.....81.41-81.47	160	16	32	36	45	32						
ARTHROPLASTY AND REPLACEMENT OF HIP.....81.5,81.6	196	16	31	48	54	48						
OPERATIONS ON MUSCLES, TENDONS, FASCIA, AND BURSA.....82-83.1,83.3-83.9	340	40	66	65	87	82						
OPERATIONS ON THE INTEGUMENTARY SYSTEM.....85-86	1,653	208	274	314	449	408						
EXCISION OR DESTRUCTION OF BREAST TISSUE (PARTIAL MASTECTOMY).....85.20-85.23	92	10	20	15	30	19						
MASTECTOMY.....85.4	116	11	19	25	34	26						
MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES.....87-99	8,815	522	1,255	2,365	2,255	2,422						
COMPUTERIZED AXIAL TOMOGRAPHY (CAT SCAN).....87.03,87.41,87.71,88.01,88.38	1,378	40	198	401	339	399						
CONTRAST MYELOGRAM.....87.21	436	36	74	109	94	123						
PYELOGRAM.....87.73-87.75	442	46	81	113	115	86						
ARTERIOGRAPHY AND ANGIOCARDIOGRAPHY USING CONTRAST MATERIAL.....88.4-88.5	1,117	10	80	243	367	417						
DIAGNOSTIC ULTRASOUND.....88.7	1,234	76	202	311	311	334						
RADIOISOTOPE SCAN.....92.0-92.1	838	42	136	215	217	228						

NOTE: SEE "MEDICAL CODING AND EDIT," APPENDIX I, FOR CODING MODIFICATIONS FOR THE NATIONAL HOSPITAL DISCHARGE SURVEY.

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Appendix I

Technical notes on methods

Statistical design of the National Hospital Discharge Survey

Scope of the survey

The National Hospital Discharge Survey (NHDS) consists of patients discharged from noninstitutional hospitals, exclusive of military and Veterans Administration hospitals, located in the 50 States and the District of Columbia. Only hospitals with six beds or more for patient use and those in which the average length of stay for all patients is less than 30 days are included in the survey. Discharges of all patients from Federal hospitals are excluded.

Sample size

The Master Facility Inventory of Hospitals (MFI) is the universe from which the NHDS sample is drawn. A detailed description of the development, contents, maintenance plans, and assessment of coverage was published in 1965.⁶

The original universe for the survey consisted of 6,965 short-stay hospitals contained in the 1963 MFI. This universe is updated periodically (table I). Data on the universe of short-stay non-Federal hospitals is now obtained from the American Hospital Association. The distribution of the current hospitals in the American Hospital Association universe⁷ and NHDS sample of in-scope hospitals for 1985 is given by bed size and geographic region in table II.

The sample for 1985 consisted of 558 hospitals. Of these, 82 refused to participate and 62 were out of scope either because the hospital had gone out of business or because it failed to meet the definition of a short-stay hospital. Thus, 414 hospitals participated in the survey during 1985 and provided approximately 194,800 abstracts of medical records.

Sample design

All hospitals with 1,000 beds or more in the universe of short-stay hospitals were selected with certainty in the sample. All hospitals with fewer than 1,000 were stratified, the primary strata being the 24 size-by-region classes shown in table II. Within each primary stratum, the allocation of the hospitals was made through a controlled selection technique so that hospitals in the sample would be distributed properly with regard to ownership and geographic division. Sample hospitals were drawn with probabilities ranging from certainty for the largest hospitals to 1 in 40 for the smallest hospitals.

NOTE: A list of references follows the text.

Table I. Number of hospitals in the National Hospital Discharge Survey (NHDS) universe and number of hospitals added to the NHDS sample by year of addition and year of Master Facility Inventory (MFI) used: United States, 1963–1983

MFI data year	NHDS universe and sample		
	Year added	Number added to universe	Number added to sample
1963	1965	6,965	315
1963	1969	- - -	150
1969	1972	442	32
1972	1975	223	14
1975	1977	273	24
1977	1979	114	9
1979	1981	63	6
1981	1983	50	3
1983	1985	45	5

The within-hospital sampling ratio for selecting sample discharges varied inversely with the probability of hospital selection. The smallest sampling fraction of discharged patients was taken in the largest hospitals, and the largest fraction was taken in the smallest hospitals. This sampling was done to compensate for hospitals that were selected with probabilities proportionate to their size class and to ensure that the overall probability of selecting a discharge would be approximately the same in each size class.

In nearly all hospitals, using the traditional manual system of sample selection and data abstraction, the daily listing sheet of discharges was the frame from which the subsamples of discharges were selected within the sample hospitals. The sample discharges were selected by a random technique, usually on the basis of the terminal digit(s) of the patient's medical record number that was assigned when the patient was admitted to the hospital. If the hospital's daily discharge listing did not show the medical record numbers, the sample was selected by starting with a randomly selected discharge and taking every k th discharge thereafter.

Data collection and processing

Data collection

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

Table II. Distribution of short-stay hospitals in the National Hospital Discharge Survey universe and survey sample by geographic region and bed size of hospital: United States, 1985

Bed size of hospital	All regions	North-east	Midwest	South	West
All sizes		Number of hospitals			
Universe	6,007	902	1,687	2,301	1,117
In-scope sample . . .	496	115	140	166	75
0-49 beds					
Universe	1,351	73	420	527	331
In-scope sample . . .	36	6	10	11	9
50-59 beds					
Universe	1,464	163	414	623	264
In-scope sample . . .	65	11	15	31	8
100-199 beds					
Universe	1,410	204	374	574	258
In-scope sample . . .	92	15	21	43	13
200-299 beds					
Universe	747	199	179	247	122
In-scope sample . . .	80	19	21	24	16
300-499 beds					
Universe	706	177	196	214	119
In-scope sample . . .	115	35	37	24	19
500-999 beds					
Universe	302	77	96	107	22
In-scope sample . . .	96	24	33	30	9
1,000 beds or more					
Universe	27	9	8	9	1
In-scope sample . . .	12	5	3	3	1

In the manual system, depending on the study procedure agreed on with the hospital administrator, the sample selection and the transcription of information from the hospital records to abstract forms were performed by either the hospital staff or by representatives of the National Center for Health Statistics (NCHS) or by both. In 1985, about 50 percent of the hospitals that participated in the manual NHDS system had the work performed by the medical records department of the hospital. In the remaining hospitals using this system, the work was performed by personnel of the U.S. Bureau of the Census acting for NCHS. The completed forms were forwarded to NCHS for coding, editing, and weighting procedures.

For hospitals using the automated system, tapes containing machine-readable medical record data were purchased from commercial abstracting services. Upon receipt of these tapes they were subject to NCHS sampling, editing, and weighting procedures. A detailed description of the automated process will be published.

The Medical Abstract Form (figure I) and the abstract service data tapes contain items relating to the personal characteristics of the patient, including birth date, sex, race, and marital status, but not name and address; administrative information, including admission and discharge dates, discharge status, and medical record number; and medical information, including diagnoses and surgical and nonsurgical operations or

procedures. Since 1977, patient zip code, expected source of payment, and dates of surgery have also been collected. (The medical record number and patient zip code are considered confidential information and are not available to the public.)

Medical coding and edit

The medical information recorded on the sample patient abstracts that was collected by the manual system was coded centrally by the NCHS staff. A maximum of seven diagnostic codes was assigned for each sample abstract; in addition, if the medical information included surgical or nonsurgical procedures, a maximum of four codes for these procedures was assigned. Following conversion of the data on the medical abstract to computer tape, a final medical edit was accomplished by computer inspection runs and a review of rejected abstracts. If the sex or age of the patient was incompatible with the recorded medical information, priority was given to the medical information in the editing decision.

NHDS medical coders code from abstracts of medical records in the order the diagnoses and procedures are entered. For most abstracts, this coding procedure is relatively free of problems. It was noted, however, that acute myocardial infarction frequently was not the lead entry in a group of circulatory diagnoses. For example, the patient's record may have arteriosclerosis listed first and arteriosclerotic heart disease listed second with acute myocardial infarction listed third. If the usual procedure were followed as it was until 1982, acute myocardial infarction would be coded in third place and retrievable only under the heading of all-listed diagnoses. A decision was made to reorder some acute myocardial infarction diagnoses. The new procedure, based on accepted medical coding practice, states that whenever an acute myocardial infarction is encountered with other circulatory diagnoses and is other than the first entry, it should be reordered to first position.

The system currently used for coding the diagnoses and procedures on the medical abstract forms and the data that appears on the commercial abstracting services data tape is the *International Classification of Diseases, 9th Revision, Clinical Modification*² (ICD-9-CM). Earlier data for 1970-78 were coded according to the *Eighth Revision International Classification of Diseases, Adapted for Use in the United States*³ (ICDA), with some modifications. These modifications, which were necessary because of incomplete or ill-defined terminology in the abstracts, are presented elsewhere.⁸ It has not been necessary, however, to modify the ICD-9-CM for use in the NHDS.

Both the ICDA and the ICD-9-CM are divided into two main sections: diseases and injuries, and surgical and nonsurgical procedures. However, many differences exist between the two classifications. These differences are discussed in a previous report.⁹

Some ICD-9-CM diagnostic codes cannot appear alone; they must appear with another diagnostic code. Specifically, the following codes cannot be first-listed: 320.7, 321.1-321.8, 323.0-323.4, 323.6-323.7, 330.2-330.3, 331.7, 334.4, 336.2-336.3, 337.1, 357.1-357.4, 358.1, 359.5-359.6,

NOTE: A list of references follows the text.

CONFIDENTIAL — All information which would permit identification of an individual or of an establishment will be held confidential, will be used only by persons engaged in and for the purposes of the survey, and will not be disclosed or released to other persons or used for any other purpose

FORM **HDS-1**
(10-25-83)

DEPARTMENT OF HEALTH AND HUMAN SERVICES
U.S. PUBLIC HEALTH SERVICE
NATIONAL CENTER FOR HEALTH STATISTICS

MEDICAL ABSTRACT — NATIONAL HOSPITAL DISCHARGE SURVEY

A. PATIENT IDENTIFICATION

1. Hospital number	<input type="text"/>	4. Date of admission ..	Month <input type="text"/>	Day <input type="text"/>	Year <input type="text"/>
2. HDS number	<input type="text"/>	5. Date of discharge ..	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Medical record number	<input type="text"/>	6. Residence ZIP code ..	<input type="text"/>	<input type="text"/>	<input type="text"/>

B. PATIENT CHARACTERISTICS

7. Date of birth	Month <input type="text"/>	Day <input type="text"/>	Year <input type="text"/>	8. Age (Complete only if date of birth not given)	Units <input type="text"/>	<input type="checkbox"/> Years	<input type="checkbox"/> Months	<input type="checkbox"/> Days
9. Sex (Mark (X) one)	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Not stated					
10. Race	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Not stated		
11. Ethnicity (Mark (X) one)	<input type="checkbox"/> Hispanic origin	<input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Not stated					
12. Marital status (Mark (X) one)	<input type="checkbox"/> Married	<input type="checkbox"/> Single	<input type="checkbox"/> Widowed	<input type="checkbox"/> Divorced	<input type="checkbox"/> Separated	<input type="checkbox"/> Not stated		

13. Expected source(s) of payment

	Principal (Mark one only)	Other additional sources (Mark accordingly)
Government sources	1. Workmen's Compensation	<input type="checkbox"/>
	2. Medicare	<input type="checkbox"/>
	3. Medicaid	<input type="checkbox"/>
	4. Title V	<input type="checkbox"/>
	5. Other government payments	<input type="checkbox"/>
Private sources	6. Blue Cross	<input type="checkbox"/>
	7. Other private or commercial insurance	<input type="checkbox"/>
Other sources	8. Self pay	<input type="checkbox"/>
	9. No charge	<input type="checkbox"/>
	10. Other (Specify)	<input type="checkbox"/>
<input type="checkbox"/> No source of payment indicated		

14. Status/Disposition of patient (Mark (X) appropriate box(es))

Status	Disposition
1 <input type="checkbox"/> Alive	a. <input type="checkbox"/> Routine discharge/ discharged home
	b. <input type="checkbox"/> Left against medical advice
	c. <input type="checkbox"/> Discharged, transferred to another short-term hospital
	d. <input type="checkbox"/> Discharged, transferred to long-term care institution
	e. <input type="checkbox"/> Disposition not stated
2 <input type="checkbox"/> Died	
3 <input type="checkbox"/> Status not stated	

C. FINAL DIAGNOSES

Principal: _____

Other/additional: _____

See reverse side

D. SURGICAL AND DIAGNOSTIC PROCEDURES

Principal: _____

Other/additional: _____

NONE See reverse side

Completed by _____ Date _____

Figure 1. Medical abstract for the National Hospital Discharge Survey

362.01–362.02, 362.71–362.72, 364.11, 365.41–365.44, 366.41–366.44, 370.44, 372.15, 372.31–372.33, 373.4–373.6, 374.51, 376.13–376.22, 380.13, 380.15, 382.02, 420.0, 421.1, 422.0, 424.91, 425.7–425.8, 443.81, 456.20–456.21, 484.1–484.8, 516.1, 517.1–517.8, 567.0, 573.1–573.2, 580.81, 581.81, 582.81, 583.81, 590.81, 595.4, 598.01, 601.4, 604.91, 608.81, 616.11, 616.51, 628.1, 711.10–711.89, 712.10–712.39, 713.0–713.8, 720.81, 727.01, 730.70–730.89, 731.1, 731.8, 737.40–737.43, 774.0, 774.31, 774.5. In addition, all discharges with the diagnostic codes 640.0–643.9 and 645.0–676.9 with a fifth digit of 1 or 2 or 650 (indicating delivery) must have a code V27.0–V27.9 as a first-listed diagnosis. Conversely, every discharge with a first-listed diagnosis of V27.0–V27.9 also must have one of these delivery codes.

Prior to 1979, data on radiotherapy and physical medicine and rehabilitation (ICDA codes R1–R4) and some obstetrical procedures were not collected by means of the NHDS. The obstetrical procedures not coded were artificial rupture of membranes; external, internal, and combined version; outlet and low forceps delivery with and without episiotomy; and episiotomy (ICDA codes 75.0–75.6 and 75.9). In addition, data for diagnostic endoscopy, radiography, and other non-surgical procedures (ICDA codes A4–A9 and R9), although coded, were not published. Starting with 1979 data, however, the procedures coding has followed the guidelines of the Uniform Hospital Discharge Data Set (UHDDS).^{10,11} The UHDDS is a minimum data set of items uniformly defined and abstracted from hospital medical records. These items were selected on the basis of their continuous usefulness to organizations and agencies requiring hospital information.

¹ According to the UHDDS guidelines, all procedures are allocated into one of four classes. Classes 1–3 consist of procedures that carry an operative or anesthetic risk or require highly trained personnel, special facilities, or special equipment. Class 4 procedures do not meet these criteria. See appendix II for the procedure codes included in these classes.

Until 1983, the only Class 4 procedures coded in the NHDS were circumcision (ICD–9–CM code 64.0), episiotomy (code 73.6), and removal of intrauterine contraceptive device (code 97.71). The coding of additional Class 4 procedures, listed in appendix II, that are used in the assignment of diagnosis-related groupings (DRG's), was begun in mid-1983. DRG's, developed at the Yale School of Organization and Management, are being used by the Health Care Financing Administration, some States, and some third-party payers to reimburse hospitals for inpatient care. A report has been published on the conversion of NHDS data to DRG's.¹²

Presentation of estimates

Grouping of diagnoses and procedures

In this report the diagnostic chapters, the broadest groupings of diseases and injuries shown, correspond to ICD–9–CM chapters 1–17 and the supplementary classification of factors

influencing health status and contact with health services. The diagnostic categories, the most detailed groupings of diseases and injuries shown, are subsets of the major groups or chapters. The titles and the ordering of the categories in the tabular list developed for the NHDS follow the format of the ICD–9–CM tabular list as closely as possible.

The procedure groupings used in this report are the groups numbered 1–16 in the ICD–9–CM section entitled "Procedure Classification." Specific categories of operations or procedures, the most detailed of these groupings shown, are subsets of the major groups and are based on the 4-digit codes provided by the ICD–9–CM.

In developing the tables of diagnoses and of procedures, an effort was made to maximize specificity of the conditions or procedures consistent with clarity of characterization, the frequency of their occurrence, and their interest.

Patient characteristics not stated

The age and sex of the patient were not stated on the hospital records (the face sheet of the patient's medical record) for about 0.5 percent of the discharges. Imputations of these missing items were made by assigning the patient an age or sex consistent with the age or sex of other patients with the same diagnostic code.

During 1985, 9.6 percent of the records had no race identified in the hospital records.

If the dates of admission or discharge were not given and could not be obtained from the monthly sample listing sheet transmitted by the sample hospital, a length of stay was imputed by assigning the patient a length of stay characteristic of the stays of other patients of the same age. During 1985, only 0.04 percent of the records were missing the date of admission or discharge.

Rounded numbers

Estimates of the numbers of inpatient discharges, days of care, discharges with procedures, all-listed diagnoses, and all-listed procedures have been rounded to the nearest thousand for tabular presentation. Therefore, detailed figures within the tables do not always add to totals. Rates and percents were calculated on the basis of unrounded figures and will not necessarily agree with computations made from the rounded data.

Population estimates

The population estimates used in computing rates are from published and unpublished estimates for the U.S. civilian population on July 1 of the data year provided by the U.S. Bureau of the Census. The estimates by age and sex and by geographic region are presented in table III and are consistent with the population estimates published in *Current Population Reports*, Series P–25.

Although the civilian noninstitutionalized population was used prior to 1981, it has been determined that the civilian population is more appropriate to use for the NHDS as persons in institutions usually are hospitalized in short-stay hospitals. This is true especially for elderly residents of nursing homes. A comparison of NHDS rates based on the civilian population with the civilian noninstitutionalized population is available in another publication.¹³

NOTE: A list of references follows the text.

Table III. Civilian population by selected characteristics: United States, July 1, 1985

[Population estimates consistent with Series P-25, *Current Population Reports*, U.S. Bureau of the Census]

Age, geographic region, and race	Both sexes		
	Male	Female	
Population in thousands			
All ages	237,036	114,614	122,422
Northeast	49,750	23,740	26,010
Midwest	59,044	28,667	30,377
South	80,976	38,984	41,991
West	47,267	23,223	24,044
White	201,435	97,784	103,652
All other	35,600	16,830	18,771
0-14 years	51,962	26,601	25,360
Under 1 year	3,742	1,916	1,826
1-4 years	14,295	7,314	6,980
5-14 years	33,925	17,370	16,553
Northeast	9,823	5,028	4,795
Midwest	13,190	6,760	6,430
South	18,125	9,272	8,852
West	10,823	5,540	5,283
White	42,087	21,599	20,488
All other	9,875	5,003	4,872
15-44 years	111,657	55,059	56,598
15-24 years	38,749	19,243	19,506
25-34 years	41,406	20,438	20,969
35-44 years	31,502	15,379	16,124
Northeast	23,129	11,314	11,816
Midwest	27,512	13,657	13,853
South	38,009	18,602	19,407
West	23,007	11,485	11,520
White	94,287	46,885	47,402
All other	17,370	8,174	9,195
45-64 years	44,888	21,425	23,462
45-54 years	22,555	10,927	11,628
55-64 years	22,333	10,498	11,834
Northeast	10,224	4,830	5,394
Midwest	11,046	5,317	5,729
South	15,211	7,188	8,022
West	8,407	4,090	4,318
White	39,318	18,910	20,409
All other	5,569	2,514	3,054
65 years and over	28,530	11,529	17,002
65-74 years	16,995	7,467	9,528
75-84 years	8,824	3,288	5,536
85 years and over	2,711	773	1,938
Northeast	6,573	2,569	4,005
Midwest	7,297	2,933	4,364
South	9,632	3,922	5,710
West	5,028	2,105	2,923
White	25,743	10,390	15,353
All other	2,787	1,139	1,649

Reliability of estimates

Estimation

Statistics produced by the NHDS are derived by a complex estimating procedure. The basic unit of estimation is the sample inpatient discharge abstract. The estimating procedure used to produce essentially unbiased national estimates in the

NHDS has three principal components: inflation by reciprocals of the probabilities of sample selection, adjustment for nonresponse, and ratio adjustment to fixed totals. These components of estimation are described in appendix I of two earlier publications.^{14,15}

Measurement errors

As in any survey, results are subject to nonsampling or measurement errors, which include errors because of hospital nonresponse, missing abstracts, information incompletely or inaccurately recorded on abstract forms, and processing errors. Some of these errors were discussed in an earlier section entitled "Patient characteristics not stated."

The Institute of Medicine (IOM) has conducted three studies on the reliability of hospital abstract data collection; the most recent study was on the NHDS. The IOM NHDS study was performed by using data coded according to the ICDA; however, some of the findings are relevant to the 1981 NHDS data even though these data were coded according to the ICD-9-CM. Of special interest to this report is the finding that, in a number of cases, the first-listed diagnosis in the NHDS was not the principal diagnosis as determined by IOM after a study of the entire medical record. For example, when diagnoses at the ICDA class level were examined, the principal diagnosis from IOM matched the first-listed diagnosis from the NHDS in approximately 86 percent of the cases. Detailed accounts of this and other IOM findings have been published.¹⁶⁻¹⁸

Sampling errors

The standard error is primarily a measure of the variability attributed to a value obtained from a sample as an estimate of a population value. In this report it also reflects part of the measurement error. The value that would have been obtained if a complete enumeration of the population had been made will be contained in an interval represented by the sample estimate plus or minus 1 standard error about 68 out of 100 times and plus or minus 2 standard errors about 95 out of 100 times.

The relative standard error is obtained by dividing the standard error by the estimate. The resulting value is multiplied by 100, which expresses the standard error as a percent of the estimate.

The standard error of one statistic generally is different from that of another, even when the two come from the same survey. To derive standard errors that would be applicable to a wide variety of statistics that could be prepared at a moderate cost, a number of approximations are required. As a result, the figures in this appendix provide general relative standard errors for a wide variety of estimates rather than the specific error for a particular statistic.

Approximate relative standard errors and standard errors have been prepared for measuring the variances applicable to (1) estimates of the discharges or first-listed diagnoses, and days of care for patient characteristics (for example, age, sex, and race) and hospital characteristics (for example, region, bed size, and ownership), and patient characteristics crosstabulated by hospital characteristics; and (2) estimates of all procedures

NOTE: A list of references follows the text.

performed by the specific procedure for the patient characteristics age, sex, and race and the hospital characteristics geographic region and bed size of hospital.

The relative standard errors applicable to patients discharged or first-listed diagnoses, all-listed diagnoses, days of care, and procedures are provided in figures II–IV. The curves for relative standard errors of the estimates in each figure relate to the variables by which estimates are presented in this report. In these figures, curves are shown for variables the relative standard errors of which are different from those in the curve for “All other variables,” which is relevant to most of the estimates. For example, one curve is applicable only to estimates of discharges from voluntary nonprofit hospitals, a second curve is concerned with discharges from hospitals by bed size, and a third curve pertains to estimates of days of care in proprietary hospitals.

The selection of the appropriate relative standard error curve is made as follows:

1. *Discharges for first-listed diagnoses and all-listed diagnoses for patient and hospital characteristics:* Relative standard errors of the estimated number of discharges and of all-listed diagnoses are obtained from the curves in figure II.
2. *Days of care for discharges or first-listed diagnoses for patient and hospital characteristics:* Relative standard errors of the estimated number of days of care are obtained from the curves in figure III.
3. *Procedures:* Relative standard errors for procedures are obtained from the curve in figure IV.

The presentation of estimates for the NHDS is based on the relative standard error of the estimate and the number of

sample records on which the estimate is based (referred to as the sample size). Estimates are not presented unless a reasonable assumption regarding the probability distribution of the sampling error is possible. The Central Limit Theorem is used to determine the distribution of the sampling errors. The Central Limit Theorem states that, given a sufficiently large sample size, the sample estimate is approximately normally distributed and approximates the population estimate.

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

1. If the sample size is less than 30, the value of the estimate is not reported. Only an asterisk (*) is shown in the tables.
2. If the sample size is 30–59, the value of the estimate is reported but should be used with caution. The estimate is preceded by an asterisk (*) in the tables.
3. If the sample size is 60 or more but the relative standard error is over 30 percent, the estimate is reported but should be used with caution. The estimate is preceded by an asterisk (*) in the tables.

Tests of significance

In this report, the determination of statistical inference is based on the *t*-test with a critical value of 1.96 (0.05 level of significance). Terms relating to differences, such as “higher” and “less,” indicate that the differences are statistically significant. Terms such as “similar” or “no difference” mean that no statistically significant difference exists between the estimates being compared. A lack of comment on the difference between any two estimates does not mean that the difference was tested and found to be not significant.

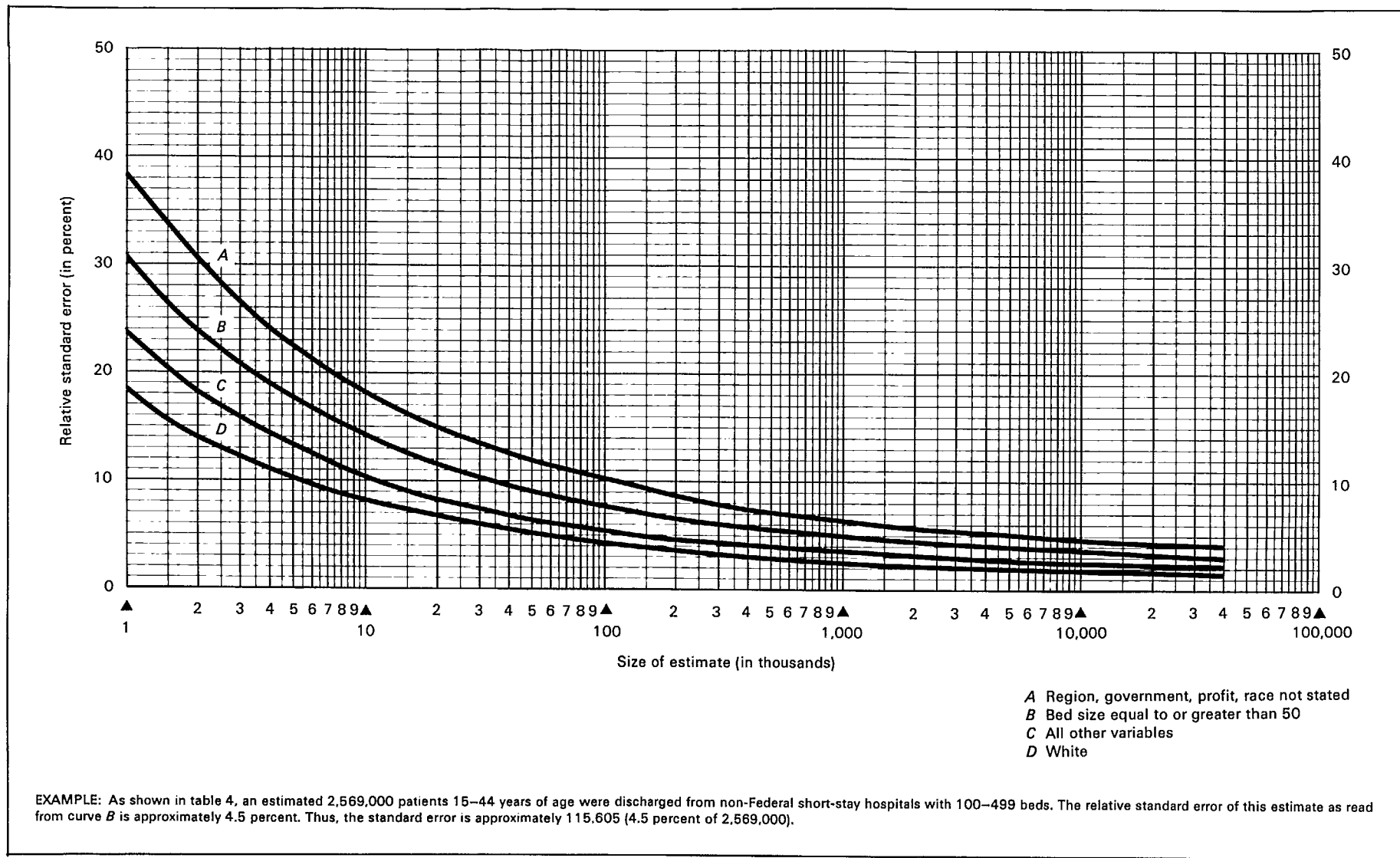


Figure II. Approximate relative standard errors of estimated numbers of patients discharged, or of first-listed diagnoses, and of all-listed diagnoses, by selected patient and hospital characteristics

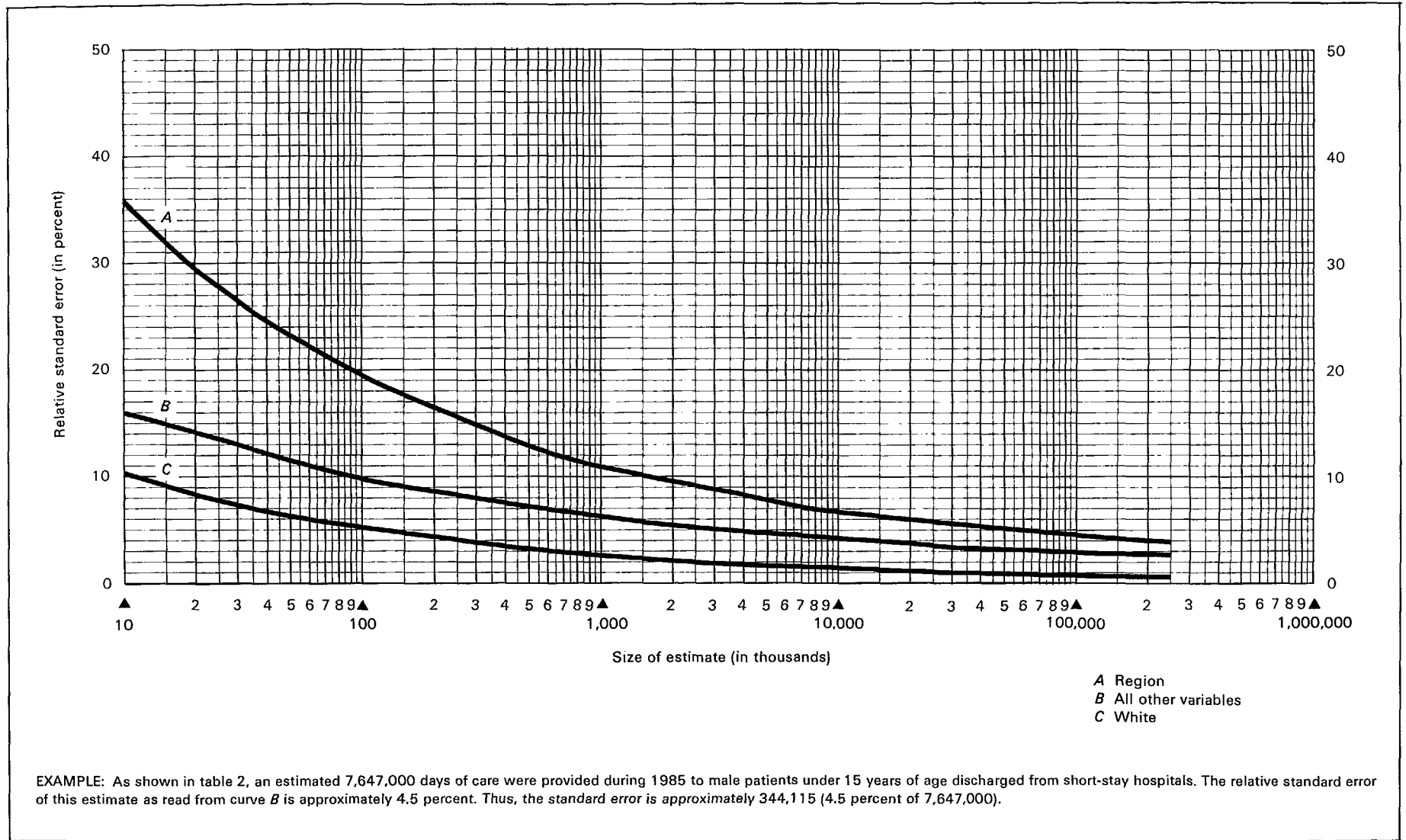
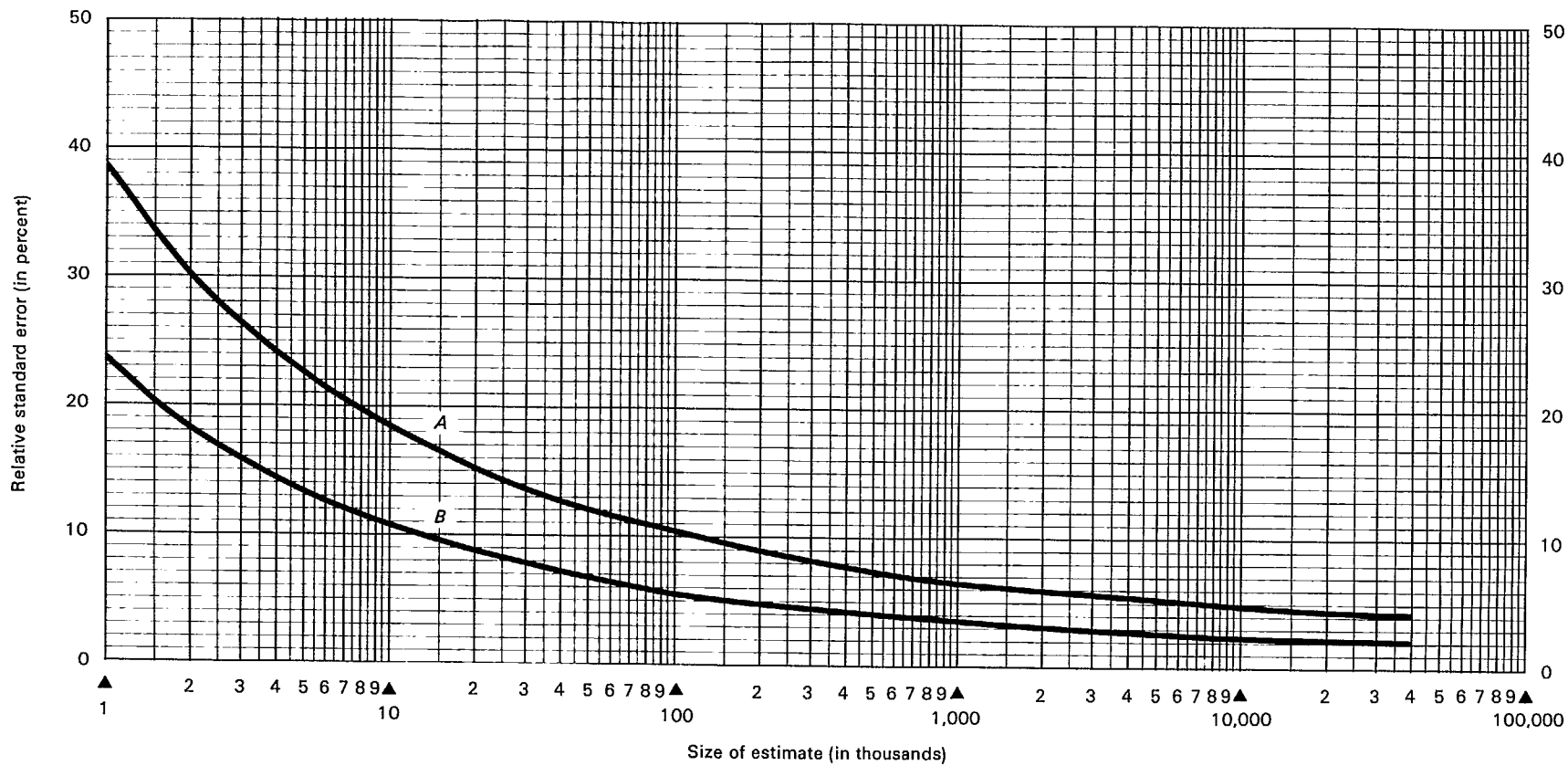


Figure III. Approximate relative standard errors of estimated numbers of days of care by selected patient and hospital characteristics



A Region
B All other variables

EXAMPLE: As shown in table 17 an estimated 379,000 open heart surgeries were performed during 1985 for all patients discharged from short-stay hospitals. The relative standard error of this estimate as read from curve B is approximately 4.4 percent. Thus, the standard error is approximately 16,676 (4.4 percent of 379,000).

Figure IV. Approximate relative standard errors of estimated numbers of procedures for patients discharged by selected patient and hospital characteristics

Appendix II

Definitions of terms

Hospitals and hospital characteristics

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

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

Type of ownership of hospital—The type is determined by the organization that controls and operates the hospital. Hospitals are grouped as follows:

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

Patient—A person who is formally admitted to the inpatient service of a short-stay hospital for observation, care, diagnosis, or treatment is considered a patient. In this report the number of patients refers to the number of discharges during the year, including any multiple discharges of the same individual from one short-stay hospital or more. Infants admitted on the day of birth, directly or by transfer from another medical facility, with or without mention of a disease, disorder, or immaturity, are included. All newborn infants, defined as those admitted by birth to the hospital, are excluded from the tables in this report except those in the newborn section of the report. The terms “patient” and “inpatient” are used synonymously.

Newborn infant—A newborn infant is defined as a patient admitted by birth to a hospital.

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

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

Days of care—The total number of patient days accumulated at time of discharge by patients discharged from short-stay hospitals during a year constitutes days of care. A

stay of less than 1 day (patient admission and discharge on the same day) is counted as 1 day in the summation of total days of care. For patients admitted and discharged on different days, the number of days of care is computed by counting all days from (and including) the date of admission to (but not including) the date of discharge.

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

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

Diagnoses

Discharge diagnoses—One or more diseases or injuries (or some factor that influences health status and contact with health services that is not itself a current illness or injury) listed by the attending physician on the medical record of patients. In the NHDS all discharge (or final) diagnoses listed on the face sheet (summary sheet) of the medical record for patients discharged from the inpatient service of short-stay hospitals are transcribed in the order listed. Each sample discharge is assigned a maximum of seven 5-digit codes according to ICD-9-CM. The number of principal or first-listed diagnoses is equivalent to the number of discharges.

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

First-listed diagnosis—The coded diagnosis identified as the principal diagnosis or listed first on the face sheet of the medical record is the first-listed diagnosis. The number of first-listed diagnoses is equivalent to the number of discharges.

All-listed diagnoses—All-listed diagnoses are an estimated number of discharge (or final) diagnoses, up to a maximum of seven, that are listed on the face sheet of the medical record for inpatients discharged from non-Federal short-stay hospitals during the year.

Obstetrical diagnosis—A diagnosis relating to conditions arising from or affecting the management of pregnancy, childbirth, and the puerperium (the period following childbirth). These are code numbers 640–676 of the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD-9-CM).²

Normal delivery—Delivery without abnormality or complication of pregnancy, childbirth, or the puerperium, and with spontaneous cephalic delivery (that is, presentation of the child headfirst and delivery of the child without external aid). No mention of fetal manipulation or instrumentation is made; ICD-9-CM code 650 is assigned.

Complicated delivery—All deliveries not considered normal, including deliveries of multiple gestation. ICD-9-CM code numbers 640-648 and 651-676 are assigned.

Surgical and nonsurgical procedures

Discharges with procedures—The estimated number of patients discharged from non-Federal short-stay hospitals during the year who underwent at least one procedure during their hospitalization are termed “discharges with procedures.”

Procedure—A procedure is one or more surgical or nonsurgical operations, diagnostic procedures, or special treatments assigned by the physician to the medical record of patients discharged from the inpatient service of short-stay hospitals. In the NHDS all terms listed on the face sheet of the medical record under captions such as “operation,” “operative procedures,” “operations and/or special treatments” are transcribed in the order listed. A maximum of four 4-digit codes is assigned per sample discharge according to ICD-9-CM and NHDS directives. (See “Medical coding and edit” in the “Data collection and processing” section of appendix I for further details.)

All-listed procedures—All coded procedures that are listed on the face sheet of the medical record exclusive of most Class 4 procedures.

UHDDS classes of procedures—Procedures are categorized into four classes according to UHDDS guidelines. Classes 1-3 consist of significant procedures—that is, procedures that carry an operative or anesthetic risk or require highly trained personnel, special facilities, or special equipment. Class 4 procedures do not meet these criteria.

UHDDS Class 1 procedures—All procedures not categorized as Class 2, 3, or 4 procedures.

UHDDS Class 2 procedures—The following ICD-9-CM procedure codes identify Class 2 procedures as categorized by the UHDDS:

03.31, 03.91-03.92, 04.80-04.89, 21.01, 24.7, 31.41-31.42, 34.91-34.92, 37.92-37.93, 42.22-42.23, 44.12-44.13, 45.12-45.13, 45.22-45.24, 48.22, 50.92, 54.91, 54.97-54.98, 57.31, 58.22, 59.95, 62.91, 66.8, 69.6-69.7, 69.93, 70.0, 73.01-73.1, 73.3, 73.51-73.59, 76.96, 81.91-81.92, 82.92-82.96, 83.94-83.98, 85.91-85.92, 86.01, 87.03-87.08, 87.13-87.15, 87.31-87.35, 87.38, 87.41-87.42, 87.51-87.52, 87.54-87.66, 87.71-87.73, 87.75, 87.77-87.78, 87.81-87.84, 87.91, 87.93-87.94, 88.01-88.03, 88.12-88.15, 88.38, 88.71-88.89, 89.14, 89.21-89.25, 89.32, 89.41-89.44, 89.54, 89.61-89.65, 89.8, 92.01-92.29, 93.45-93.54, 93.56-93.59, 93.92-93.93, 93.95, 93.97, 94.24, 94.26-94.27, 95.04, 95.12-95.13, 95.16-95.26, 96.01-96.08, 96.21-96.25, 96.31-96.33, 97.11-97.13, 98.02-98.04, 98.14-98.16, 98.19, 99.01, 99.60-99.69, 99.81.

UHDDS Class 3 procedures—The following ICD-9-CM procedure codes identify Class 3 procedures as categorized by the UHDDS:

29.11, 57.94-57.95, 60.19, 84.41-84.43, 84.45-84.47, 86.26, 93.98, 98.01, 98.05-98.13, 98.17, 98.18, 98.20-98.29, 99.25.

UHDDS Class 4 procedures—From 1979 through the middle of 1983 only three Class 4 procedures were coded for the NHDS: circumcision (ICD-9-CM code 64.0), episiotomy (code 73.6), and removal of intrauterine contraceptive device (code 97.71). The ICD-9-CM codes for the Class 4 procedures coded since the last half of 1983 are as follows:

01.18-01.19, 03.39, 04.19, 05.19, 06.19, 07.19, 08.91-08.93, 09.19, 09.41-09.49, 10.29, 11.29, 12.29, 14.19, 15.09, 16.29, 20.39, 28.19, 33.28-33.29, 34.28-34.29, 38.29, 40.19, 50.19, 51.19, 52.19, 54.29, 55.29, 56.39, 57.39, 59.29, 60.18, 62.19, 63.09, 64.0, 65.19, 66.19, 67.19, 68.19, 70.29, 71.19, 73.6, 76.19, 78.8, 81.98, 83.29, 97.71.

The following ICD-9-CM procedure codes identify Class 4 procedures not coded by the NHDS:

08.19, 16.21, 18.01, 18.11, 18.19, 21.21, 21.29, 22.19, 24.19, 25.09, 25.91, 26.19, 27.29, 27.91, 29.19, 31.48-31.49, 37.29, 41.38-41.39, 42.29, 44.19, 45.19, 45.28-45.29, 48.23, 48.29, 49.21, 49.29, 49.41, 58.29, 61.19, 64.19, 64.91, 64.94, 69.92, 70.21, 73.91-73.92, 75.35, 85.19, 86.19, 86.92, 87.09-87.12, 87.16-87.17, 87.22-87.29, 87.36-87.37, 87.39, 87.43-87.49, 87.69, 87.79, 87.85-87.89, 87.92, 87.95-87.99, 88.09, 88.16-88.31, 88.33, 88.35, 88.37, 88.39, 89.01-89.13, 89.15-89.16, 89.26-89.31, 89.33-89.39, 89.45-89.53, 89.55-89.59, 89.66, 89.7, 90.01-91.99, 93.01-93.25, 93.27-93.28, 93.31-93.39, 93.42-93.44, 93.61-93.91, 93.94, 93.96, 93.99-94.23, 94.25, 94.29-95.03, 95.05-95.11, 95.14-95.15, 95.31-95.49, 96.09-96.19, 96.26-96.28, 96.34-97.04, 97.14-97.69, 97.72-97.89, 99.02-99.24, 99.26-99.59, 99.71-99.79, 99.82-99.99.

Surgical operations—All procedures exclusive of those listed under “nonsurgical procedures” are listed as surgical operations.

Biopsy—Biopsy is excision of tissue for microscopic examination. The ICD-9-CM biopsy codes are as follows:

0.11-0.15, 03.32, 04.11-04.12, 05.11, 06.11-06.13, 07.11-07.17, 08.11, 09.11-09.12, 10.21, 11.22, 12.22, 15.01, 16.23, 18.12, 20.32, 21.22, 22.11, 24.11-24.12, 25.01, 25.02, 26.11, 27.21-27.24, 28.11, 29.12, 31.43-31.44, 33.24-33.27, 34.23-34.27, 37.24-37.25, 38.21, 40.11, 41.31-41.33, 42.24, 44.14-44.15, 45.14-45.15, 45.25-45.27, 48.24-48.26, 49.22-49.23, 50.11-50.12, 51.12-51.13, 52.11-52.12, 54.22-54.23, 55.23-55.24, 56.32-56.33, 57.33-57.34, 58.23-58.24, 59.21, 60.11-60.15, 61.11, 62.11-62.12, 63.01, 64.11, 65.11-65.12, 66.11, 67.11-67.12, 68.13-68.14, 70.23-70.24, 71.11, 76.11, 77.40-77.49, 80.30-80.39, 83.21, 85.11-85.12, 86.11.

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