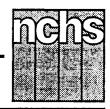
Advance Data



From Vital and Health Statistics of the CENTERS FOR DISEASE CONTROL AND PREVENTION/National Center for Health Statistics

1991 Summary: National Hospital Discharge Survey

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Introduction

During 1991, an estimated 31.1 million inpatients, excluding newborn infants, were discharged from short-stay non-Federal hospitals in the United States. These patients used 199.1 million days of inpatient hospital care. The discharge rate was 124.1 discharges per 1,000 civilian population and the average length of stay was 6.4 days.

These and other statistics presented in this report are based on data collected by means of the National Hospital Discharge Survey (NHDS), a continuous survey that has been conducted by the National Center for Health Statistics (NCHS) since 1965. In 1991, data were abstracted from the medical records of approximately 274,000 patients discharged from 484 short-stay non-Federal hospitals. Beginning in 1988, a new three-stage stratified

sample design was put in operation. A brief description of the new design, data collection procedures, and estimation process and definitions of terms used in this report can be found in the section entitled "Technical notes." A description of the development and design of the original NHDS, which was in operation from 1965 to 1987, has been published (1). Differences may exist between data for 1988–91 and earlier years because of the redesign of the survey.

Medical data for hospitalized patients are coded according to the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) (2). Up to seven diagnoses and four procedures are coded for each discharge. Although diagnoses included in the ICD-9-CM section entitled "Supplementary classification of external causes of injury and poisoning" (codes

E800–E999) are used in the NHDS, these diagnoses are excluded from this report. The conditions diagnosed and procedures performed are presented here by chapter of ICD–9–CM. Within these chapters, a few diagnoses and procedures or groups thereof also are shown. These specific categories were selected primarily because of their large estimates or because they are of special interest. More detailed analyses of NHDS data are published in Series 13 of the NCHS Vital and Health Statistics reports.

Starting in 1985, some hospitals participating in the NHDS have submitted machine-readable data tapes. In 1991, approximately 33 percent of the hospitals used this method to submit data. Analysis indicates that a greater number of nonsurgical procedures per patient are recorded from these hospitals

Acknowledgments

This report was prepared in the Division of Health Care Statistics. Jean Kozak of the Hospital Care Statistics Branch, provided technical assistance in developing the style and content of this report. George Wolfe of the Technical Services Branch, provided assistance in producing estimates of reliability. Dorothy Graham of the Technical Services Branch verified the estimates in the report and Charles Adams and Malcolm Graham of the Technical Services Branch provided advice on the computer programming aspects of the report. This report was edited by Klaudia Cox and typeset by Jacqueline M. Davis of the Publications Branch, Division of Data Services.





Table 1. Number of inpatients discharged from short-stay hospitals by selected characteristics: United States, 1991

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

Selected characteristic	Both sexes	Male	Female
	Number of	patients discharged in	thousands
Total	31,098	12,478	18,620
Age			
Under 15 years	2,498	1,435	1,064
15-44 years	11,620	3,248	8,372
45-64 years	6,173	3,088	3,085
65 years and over	10,806	4,708	6,098
Region			
Northeast	7,153	3,047	4,106
Midwest	7,315	2,995	4,321
South	11,290	4,418	6,871
West	5,340	2,018	3,322

Table 2. Rate of inpatients discharged from short-stay hospitals, by age, geographic region, and sex: United States, 1991

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

Age and region	Both sexes	Male	Female
	Rate of patie	ents discharged per 1,00	00 population
Total	124.1	102.7	144.3
Age			
Under 15 years	45.3	50.8	39.5
15–44 years	99.3	55.9	142.1
45–64 years	132.2	137.5	127.2
65 years and over	340.3	368.1	321.6
Region			
Northeast	140.6	124.7	155.3
Midwest	121.7	102.8	139.6
South	131.2	106.6	154.0
West	99.7	76.1	122.9

Table 3. Average length of stay for inpatients discharged from short-stay hospitals by selected characteristics: United States, 1991

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

Selected characteristic	Both sexes	Male	Female
	Ave	erage length of stay in o	lays
Total	6.4	7.0	6.0
Age			
Under 15 years	4.8	4.9	4.8
15-44 years	4.6	6.4	4.0
45–64 years	6.5	6.5	6.5
65 years and over	8.6	8.3	8.8
Region			
Northeast	7.3	7.6	7.1
Midwest	6.5	6.9	6.2
South	6.2	6.8	5.8
West	5.4	6.3	4.8

than from hospitals submitting data in the traditional manual mode (see "Technical notes"). A portion of the increases from 1984 to 1991 in the estimates for miscellaneous diagnostic and therapeutic procedures and, therefore, for total procedures may be due to this change in data collection methods.

In addition, the 1991 data were the first for which all ICD-9-CM procedure codes were used in the NHDS. In previous years, selected codes were excluded. These were primarily codes for certain miscellaneous diagnostic and therapeutic procedures.

Data highlights

Utilization by patient and hospital characteristics

The number, rate, and average length of stay of patients discharged from short-stay non-Federal hospitals are shown by age, geographic region, and sex in tables 1-3. The 31.1 million patients discharged from short-stay hospitals during 1991 comprised an estimated 12.5 million males and 18.6 million females. The rate per 1,000 population for females was 144, which was 41 percent higher than the rate of 103 for males. The number and rate of discharges are higher for females than for males largely because of women 15-44 years of age who are hospitalized for deliveries and pregnancy-related conditions.

The average length of stay was 7.0 days for males and 6.0 days for females during 1991. The average length of stay of the 4.0 million women who were hospitalized for deliveries was 2.8 days. The average length of stay was 4.8 days for patients under 15 years of age, 4.6 days for patients 15–44 years of age, 6.5 days for patients 45–64 years of age, and 8.6 days for patients 65 years of age and over.

The number of discharges from short-stay hospitals by geographic region during 1991 ranged from 11.3 million in the South to 5.3 million in the West. Regional differences in the number of discharges are accounted

for in part by variations in the population sizes. The rates per 1,000 population ranged from 141 in the Northeast Region to 100 in the West. Average lengths of stay by geographic region were 5.4 days in the West, 6.2 days in the South, 6.5 days in the Midwest, and 7.3 days in the Northeast.

Utilization by diagnosis

Diseases of the circulatory system ranked first in 1991 of the ICD-9-CM diagnostic chapters as a principal or first-listed diagnosis for patients discharged from non-Federal short-stay hospitals. These conditions accounted for an estimated 5.3 million discharges. Other leading ICD-9-CM diagnostic chapters were supplementary classifications (including females with deliveries) (4.4 million discharges), diseases of the digestive system (3.3 million discharges), and diseases of the respiratory system (3.1 million discharges). Approximately 52 percent of the patients discharged from non-Federal short-stay hospitals were included in these four ICD-9-CM diagnostic chapters.

The diagnostic categories presented in this report were selected either because they appear as principal or first-listed diagnoses with high frequency or because the conditions are of special interest. Many of these categories (such as malignant neoplasms, psychoses, and fractures) are groupings of more detailed diagnoses.

The number and rate of discharges and average length of stay for each ICD-9-CM diagnostic chapter and selected categories are shown by sex and age in tables 4-6. The most common diagnostic categories for all patients were deliveries and heart disease. Other leading diagnostic categories were malignant neoplasms, pneumonia, and fractures. Excluding deliveries, these last four diagnostic categories were the leading first-listed diagnoses for both males and females. Some of the more common diagnoses for patients

under 15 years of age were acute respiratory infections, pneumonia, and asthma. For patients 15–44 years of age, frequent diagnoses were deliveries, psychoses, and fractures. For patients 45–64 years of age and 65 years of age and over, heart disease and malignant neoplasms were major causes of hospitalization. The average length of stay for all patients ranged from 1.2 days for chronic disease of tonsils and adenoids to 14.6 days for malignant neoplasm of large intestine and rectum.

Utilization by procedure

One or more surgical or nonsurgical procedures were performed for an estimated 21.0 million of the 31.1 million inpatients discharged from short-stay hospitals during 1991. A total of 43.9 million procedures, or an average of 2.1 per patient who underwent at least one procedure, were recorded in 1991.

Procedures are grouped in the tables of this report by the ICD-9-CM procedure chapters. Selected procedures within these chapters also are presented by specific categories. Some of these categories (such as cesarean section and hysterectomy) are presented as single categories even though they are divided into more precise subgroups in ICD-9-CM.

More than three-fourths of all the surgical and nonsurgical procedures performed during 1991 are listed in just 5 of the 16 procedure chapters. These were miscellaneous diagnostic and therapeutic procedures (14.8 million), obstetrical procedures (6.9 million), operations on the digestive system (5.6 million), operations on the cardiovascular system (4.1 million), and operations on the musculoskeletal system (3.3 million).

The number and rate of all-listed procedures in 1991 for each ICD-9-CM procedure chapter and selected procedure categories are shown by sex and age in tables 7 and 8. Of the 43.9 million procedures performed during 1991, 17.3 million were for males and 26.7 million were

for females. The corresponding rates per 100,000 population were 17,529.3 for both sexes, 14,204.6 for males, and 20,661.0 for females. Frequent procedures for males were arteriography and angiocardiography, computerized axial tomography, and diagnostic ultrasound. Procedures commonly performed on females were episiotomy, fetal EKG and fetal monitoring, and diagnostic ultrasound.

The rate of procedures by age per 100,000 population ranged from 4,054.9 for patients under 15 years of age to 47,468.0 for patients 65 years of age and over. Commonly performed procedures for patients under 15 years of age were respiratory therapy, spinal tap, computerized axial tomography, and diagnostic ultrasound; for patients 15-44 years of age, episiotomy, fetal EKG and fetal monitoring, and cesarean section; for patients 45-64 years of age, arteriography and angiocardiography, cardiac catheterization, diagnostic ultrasound, and computerized axial tomography; for patients 65 years of age and over, arteriography and angiocardiography, computerized axial tomography, and diagnostic ultrasound.

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Table 4. Number of inpatients discharged from short-stay hospitals, by category of first-listed diagnosis, sex, and age: United States, 1991

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

	***	5	Sex		A,	де	
Category of first-listed diagnosis and ICD-9-CM Code	Total	Male	Female	Under 15 years	15–44 years	45–64 years	65 years and over
		N	umber of pati	ents discharg	ed in thouse	inds	
All conditions	31,098	12,478	18,620	2,498	11,620	6,173	10,806
Infectious and parasitic diseases	759 240	363 103	396 137	207 20	218 22	101 39	232 159
Neoplasms	2,001 1,594 168	860 781 86	1,141 812 82	52 40 *	363 172 *5	626 499 39	960 883 124
bronchus, and lung	236 158	147	89 156	*	10 25	101 59	125 73
behavior and unspecified nature	407	78	329	13	191	126	77
and immunity disorders	1,143 429 329	437 185 121	706 245 208	95 21 50	251 121 46	269 128 44	528 160 189
Diseases of the blood and blood-forming organs	348 1,657 902 228	167 840 416 172	181 817 486 56	59 61 24 *	110 1,009 488 152	58 328 189 60	121 260 201 16
Diseases of the nervous system and sense organs	755 331 144	352 160 72	404 171 72	147 52 71	195 117 26	153 64 22	261 98 26
Diseases of the circulatory system .390–459 Heart disease .391–392.0,393–398,402,404,410–416,420–429 Acute myocardial infarction .410 Coronary atherosclerosis .414.0 Other ischemic heart disease .411–413,414.1–414.9 Cardiac dysrhythmias .427 Congestive heart failure .428.0 Cerebrovascular disease .430–438	5,338 3,704 697 384 876 536 764 835	2,728 1,977 422 263 461 249 360 370	2,611 1,727 275 121 415 287 405 466	28 17 * - *5 *	396 232 45 22 48 41 19	1,509 1,095 228 172 313 129 126	3,405 2,361 424 190 514 361 615
Diseases of the respiratory system460–519 Acute respiratory Infections460–466 Chronic disease of tonsils and adenoids474 Pneumonia480–486 Asthma493	3,052 518 76 1,088 490	1,508 258 32 545 221	1,544 261 44 543 269	736 220 52 214 187	35 500 68 22 133	156 530 75 * 152	640 1,286 156 * 589
Diseases of the digestive system	3,256 237 232 135 351 552 2,071 241 229	1,455 125 129 120 142 159 781 160 229	1,801 112 103 14 209 393 1,291 81	244 * 55 22 91 * 72	128 950 43 138 26 108 195 847 117	85 851 69 26 41 62 187 457 457	90 1,211 124 12 46 90 168 695 40 180
Complications of pregnancy, childbirth, and the puerperium ¹	723 180		723 180	*	718 178	*	
Diseases of the skin and subcutaneous tissue	462 297	245 165	217 132	49 31	142 94	108 77	162 95
Diseases of the musculoskeletal system and connective tissue	1,600 526 391	738 228 225	862 298 166	50 14 *	548 125 209	450 125 132	553 261 51
Congenital anomalies	192	101	91	125	37	21	10
Certain conditions originating in the perinatal period	147	79	68	146	*	_	*
Symptoms, signs, and ill-defined conditions	386	202	184	63	146	115	62
Injury and poisoning	2,768 1,034 300	1,437 481 80	1,331 553 219	286 104 *	1,102 320 10	492 158 27	888 452 259
skull fracture)	180 193	106 137	74 56	30 25	96 128	20 24	34 16
Supplementary classifications	4,438 3,973	188	4,250 3,973	76 14	4,089 3,956	105	169

¹First-listed diagnosis for females with deliveries is coded V27, shown under "supplementary classifications."

Table 5. Rate of inpatients discharged from short-stay hospitals, by category of first-listed diagnosis, sex, and age: United States, 1991

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

		s	ex		<i>F</i>	\ge	
Category of first-listed diagnosis and ICD-9-CM Code	Total	Male	Female	Under 15 years	15–44 years	45–64 years	65 years and over
		Rate o	f inpatients o	lischarged pe	r 10,000 po	opulation	
All conditions	1,241.1	1,026.7	1,443.1	453.2	993.4	1,321.6	3,403.1
Infectious and parasitic diseases	30.3 9.6	29.8 8.5	30.7 10.6	37.5 3.7	18.7 1.9	21.7 8.3	73.2 50.2
Neoplasms	79.9 63.6	70.7 64.3	88.4 63.0	9.5 7.2	31.0 14.7	133.9 106.9	302.3 278.1
and rectum	6.7	7.0	6.4	*	*0.4	8.3	39.0
bronchus, and lung	9.4 6.3	12.1	6.9 12.1	*	0.8 2.2	21.6 12.5	39.3 23.1
behavior and unspecified nature	16.2	6.4	25.5	2.3	16.3	27.0	24.3
and immunity disorders	45.6 17.1 13.1	35.9 15.2 10.0	54.7 19.0 16.1	17.2 3.7 9.1	21.5 10.4 3.9	57.6 27.4 9.4	166.4 50.3 59.6
Diseases of the blood and blood-forming organs	13.9	13.7	14.1	10.7	9.4	12.4	38.2
Mental disorders290-319Psychoses290-299Alcohol dependence syndrome.303	66.1 36.0 9.1	69.1 34.2 14.2	63.4 37.7 4.3	11.0 4.3 *	86.2 41.7 13.0	70.3 40.5 12.9	81.9 63.3 5.0
Diseases of the nervous system and sense organs	30.1 13.2 5.8	28.9 13.1 6.0	31.3 13.3 5.6	26.6 9.5 12.8	16.6 10.0 2.2	32.8 13.7 4.7	82.2 30.8 8.2
Diseases of the circulatory system .390–459 Heart disease .391–392.0,393–398,402,404,410–416,420–429 Acute myocardial infarction .410 Coronary atherosclerosis .414.0 Other ischemic heart disease .411–413,414.1–414.9 Cardiac dysrhythmias .427	213.1 147.8 27.8 15.3 35.0 21.4	224.4 162.6 34.7 21.7 37.9 20.5	202.3 133.9 21.3 9.3 32.1 22.3	5.1 3.0 * - * *1.0	33.9 19.8 3.8 1.9 4.1 3.5	323.1 234.3 48.8 36.8 67.0 27.5	1,072.4 743.5 133.5 60.0 161.7 113.8
Congestive heart failure	30.5 33.3	29.6 30.4	31.4 36.1	*	1.6 3.0	27.0 33.5	193.6 201.5
Diseases of the respiratory system .460–519 Acute respiratory infections .460–466 Chronic disease of tonsils and adenoids .474 Pneumonia .480–486 Asthma .493	121.8 20.7 3.0 43.4 19.6	124.1 21.2 2.6 44.8 18.2	119.7 20.2 3.4 42.1 20.9	133.6 39.8 9.5 38.9 33.9	42.7 5.8 1.9 11.4 10.9	113.4 16.0 * 32.5 18.2	405.2 49.2 * 185.5 28.5
Diseases of the digestive system .520–579 Ulcers of the stomach and small intestine .531–534 Appendicitis .540–543 Ingulnal hernla .550 Noninfectious enteritis and colitis .555–558 Cholelithiasis .574	129.9 9.5 9.2 5.4 14.0 22.0	119.7 10.3 10.6 9.9 11.7 13.1	139.6 8.7 8.0 1.1 16.2 30.4	44.3 * 10.1 4.0 16.5	81.2 3.6 11.8 2.2 9.2 16.7	182.1 14.8 5.6 8.8 13.4 39.9	381.5 39.1 3.8 14.5 28.4 53.0
Diseases of the genitourinary system	82.7 9.6 9.2	64.2 13.2 18.9	100.0 6.3	13.0 * -	72.4 10.0 *	97.9 18.0 10.4	218.9 12.6 56.7
Complications of pregnancy, childbirth, and the puerperium ¹	28.8 7.2	• • •	56.0 13.9	*	61.4 15.3	*	
Diseases of the skin and subcutaneous tissue	18.4 11.9	20.1 13.6	16.8 10.2	8.9 5.6	12.1 8.0	23.2 16.5	51.1 30.0
Diseases of the musculoskeletal system and connective tissue	63.9 21.0 15.6	60.7 18.7	66.8 23.1	9.0 2.6	46.8 10.7	96.3 26.7	174.1 82.3
Congenital anomalies	7.7	18.5 8.3	12.9 7.1	22.6	17.8 3.1	28.3 4.4	15.9 3.2
Certain conditions originating in the perinatal period	5.9	6.5		26.4	*	-74-7	*
Symptoms, signs, and ill-defined conditions	5.9 15.4	6.5 16.6	5.3 14.3	26.4 11.3	12.5	24.6	19.7
njury and polsoning	110.5 41.3 12.0	118.2 39.6 6.6	103.2 42.9 17.0	51.9 18.9 *	94.2 27.4 0.9	105.4 33.8 5.8	279.5 142.4 81.4
skull fracture)	7.2 7.7	8.7 11.3	5.7 4.4	5.5 4.5	8.2 11.0	4.3 5.2	10.8 5.0
Supplementary classifications	177.1 158.6	15.5	329.4 307.9	13.8 2.5	349.5 338.2	22.4	53.2

¹First-listed diagnosis for females with deliveries is coded V27, shown under "supplementary classifications."

Table 6. Average length of stay for inpatients discharged from short-stay hospitals, by category of first-listed diagnosis, sex, and age: United States, 1991

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

			Sex		Age				
Category of first-listed diagnosis and ICD-9-CM Code	Total	Male	Female	Under 15 years	15–44 years	45–64 years	65 years and over		
			Avera	ge length of st	ay in days				
All conditions	6.4	7.0	6.0	4.8	4.6	6.5	8.6		
Infectious and parasitic diseases	8.5 11.6	8.9 11.7	8.1 11.5	3.8 6.1	8.6 11.1	11.3 11.7	11.3 12.3		
Neoplasms	8.2 9.2	9.2 9.7	7.5 8.7	6.3 7.0	5.5 7.4	7.5 8.2	9.8 10.1		
and rectum	14.6	16.7	12.4	*	*8.1	10.7	16.1		
bronchus, and lung	8.6 4.4	8.5 *	8.7 4.4	*	5.9 3.8	7.8 4.6	9.5 4.5		
behavior and unspecified nature	4.5	4.6	4.4	4.1	3.8	4.4	6.1		
Endocrine, nutritional and metabolic diseases, and immunity disorders	7.1 7.1 7.5	7.1 6.8 8.5	7.1 7.3 6.9	4.3 4.8 2.9	4.6 4.7 4.0	6.9 7.5 6.8	8.9 8.9 9.8		
Diseases of the blood and blood-forming organs	6.2	6.1	6.3	4.3	5.6	6.6	7.5		
Mental disorders. .290–319 Psychoses. .290–299 Alcohol dependence syndrome. .303	11.4 13.5 9.5	11.0 13.0 9.1	11.9 13.8 10.6	15.9 17.3 *	11.0 13.1 9.9	10.8 13.3 8.3	12.8 14.1 9.5		
Diseases of the nervous system and sense organs	5.7 8.8 2.8	5.8 8.7 2.7	5.6 9.0 3.0	4.3 6.7 2.6	4.8 5.6 3.2	5.5 9.1 2.5	7.2 13.7 3.3		
Diseases of the circulatory system	7.3 6.8 8.1 7.1 5.0 5.3 7.9 9.3	7.0 6.7 7.5 7.4 5.0 5.0 7.5 9.1	7.6 7.0 9.1 6.5 5.1 5.5 8.4 9.6	10.1 13.4 * - * *4.0 *	5.6 5.5 5.9 5.4 3.9 3.6 7.4 9.4	6.4 6.3 7.2 8.0 4.3 4.8 7.6 7.9	7.9 7.2 8.8 6.5 5.6 7.9 9.7		
Diseases of the respiratory system .460–519 Acute respiratory infections .460–466 Chronic disease of tonsils and adenoids .474 Pneumonia .480–486 Asthma .493	6.8 4.8 1.2 8.2 4.5	6.4 4.1 1.3 7.9 4.1	7.1 5.4 1.1 8.5 4.9	3.5 3.1 1.2 4.1 3.0	5.0 4.2 1.2 6.5 4.5	7.0 5.5 * 7.9 5.2	9.2 7.0 * 10.2 7.2		
Diseases of the digestive system	5.9 6.9 4.2 2.4 5.6 5.0	5.9 6.6 4.2 2.4 5.8 5.3	5.9 7.3 4.3 2.5 5.4 4.8	3.7 * 3.9 1.5 3.3	4.8 4.6 3.7 1.5 5.1 4.6	5.5 5.6 5.7 1.8 6.5 4.0	7.6 8.5 8.6 3.8 7.7 6.4		
Diseases of the genitourinary system	4.8 2.7 5.3	5.3 2.5 5.3	4.5 3.2	4.0	3.7 2.4 *	4.7 2.8 7.3	6.5 3.6 4.8		
Complications of pregnancy, childbirth, and the puerperium ¹	2.9 2.4	•••	2.9 2.4	*	2.9 2.4	*			
Diseases of the skin and subcutaneous tissue	8.4 7.1	8.0 7.0	8.9 7.3	3.8 3.7	7.3 6.0	7.8 7.2	11.2 9.3		
Diseases of the musculoskeletal system and connective tissue	6.4 7.4 5.0	5.7 6.6 4.5	7.0 8.0 5.6	5.4 5.3 *	4.7 4.1 4.5	5.5 6.7 4.7	8.9 9.4 7.5		
Congenital anomalies	6.2	6.2	6.2	6.8	4.5	5.9	5.5		
Certain conditions originating in the perinatal period	10.7	11.3	10.1	10.7	*	_	*		
Symptoms, signs, and ill-defined conditions	3.0	3.0	3.0	2.5	2.6	2.7	5.2		
Injury and poisoning	6.9 8.4 12.3	6.3 7.3 10.9	7.6 9.4 12.8	4.5 5.4 *	5.5 6.1 7.4	6.5 7.2 10.4	9.6 11.3 12.8		
Intracranial injuries (excluding those with skull fracture)	5.8 4.9	6.2 3.7	5.2 7.8	2.5 3.4	5.9 5.2	8.0 4.3	7.1 5.2		
Supplementary classifications	3.3 2.8	7.5	3.1 2.8	4.7 2.4	2.8 2.8	5.8 *	12.1		

¹First-listed diagnosis for females with deliveries is coded V27, shown under "supplementary classifications."

Table 7. Number of all-listed procedures for inpatients discharged from short-stay hospitals, by procedure category, sex, and age: United States, 1991

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

		s	ex		A	ge		
Procedure category and ICD-9-CM Code	Total	Male	Female	Under 15 years	15–44 years	45–64 years	65 years and over	
		Number of all-listed procedures in thousands						
All procedures	43,922	17,264	26,658	2,235	17,090	9,524	15,073	
Operations on the nervous system	970 380	500 208	470 172	236 183	328	196	210	
Spinal tap .03.31 Operations on the endocrine system .06-07	103	28	75	100 *	94 41	46 33	57 25	
Operations on the eye	399	189	210	25	65	85	224	
Operations on the ear	129	75	54	66	36	15	13	
Operations on the nose, mouth, and pharynx	541 86	288 40	254 46	118 54	237 28	96 *	90	
Operations on the respiratory system	956 309	561 186	396 123	60 18	173 45	290 95	433 152	
Operations on the cardiovascular system	4,123 331	2,383 223	1,740 107	148	477 24	1,476 163	2,022 143	
Coronary artery bypass graft ¹	407 1,000	296 603	111 397	* 19	23 89	178 447	206 446	
of pacemaker leads or device	300 168	145 92	155 76	*	9 14	44 57	244 93	
Hemodialysis	261	129	132	*	61	79	118	
Operations on the hemic and lymphatic system	392	212	180	20	77	110	185	
Operations on the digestive system	5,559	2,319	3,241	221	1,571	1,400	2,367	
without biopsy	804	391	413	11	145	202	446	
without biopsy	574 220	234 94	340 125	*	90 23	127 57	353 139	
Appendectomy, excluding incidental	255	135	120	57	156	29	14	
Cholecystectomy	571 172 339	166 155 60	404 17 279	25 *5	194 31 167	189 51 75	185 65 92	
Operations on the urinary system	1,558 458	884 333	674 125	47 9	376 64	386 103	750 281	
Operations on the male genital organs	584 363	584 363	• • •	46	40 *	116 68	382 295	
Operations on the female genital organs	2,308 458	•••	2,308 458	*8 *	1,624 248	445 150	231 59	
Falloplan tubes	401 546	• • •	401 546	*	400 322	* 161	63	
Dilation and curettage of uterus	196	• • •	196	*	159	22	14	
Obstetrical procedures	139 6,867		139 6,867	24	40 6,839	48 *	50	
Episiotomy with or without forceps .	•			*8	·	*		
or vacuum extraction	1,684 775 933	• • • •	1,684 775 933	"O * *	1,675 771 931	*	•••	
Fetal EKG (scalp) and fetal monitoring, not otherwise specified	1,327 795		1,327 795	*	1,321 792	*		
Operations on the musculoskeletal system	3,323	1,710	1,614	208	1,323	798	994	
Partial excision of bone	216 418	119 193	97 225	10 27	96 145	67 76	43 170	
Excision or destruction of intervertebral disc	306 117	181 50	125 67	*	162 *8	102 31	42 78	
Total knee replacement	160	60	100		*	36	121	
Operations on the integumentary system	1,324 118 326 99	552 * 181 60	773 117 145 39	75 * 19 9	488 17 107 40	330 42 62 22	431 58 138 27	
Miscellaneous diagnostic and therapeutic procedures	14,785 1,531 245	6,981 731 133	7,804 801 112	929 77 *	3,397 370 93	3,743 345 61	6,715 739 86	
Arteriography and angiocardiography using contrast material	1,718	989	729	22	182	723	791	
Diagnostic ultrasound	1,592 703 539 1,214	652 339 228 596	940 364 311 618	74 29 16 196	424 118 105 193	354 167 148 236	739 390 270 588	

¹The number of discharged patients with a coronary artery bypass graft was 265,000.

Table 8. Rate of all-listed procedures for inpatients discharged from short-stay hospitals, by procedure category, sex, and age: United States, 1991

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

		<i>s</i>	ex	Age			
Procedure category and ICD-9-CM Code	Total	Male	Female	Under 15 years	15–44 years	45–64 years	65 years and over
		Ra	ate of all-liste	d procedure	s in thousan	ds	
All procedures	17,529.3	14,204.6	20,661.0	4,054.9	14,610.5	20,389.8	47,468.0
Operations on the nervous system. .01–05 Spinal tap. .03.31	387.3 151.6	411.5	364.5	428.9	280.6	419.7	660.4
Operations on the endocrine system	41.0	171.1 22.9	133.2 58.1	332.2	80.6 35.3	97.5 71.7	178.8 77.2
Operations on the eye	159.2	155.7	162.4	44.5	55.8	182.8	704.3
Operations on the ear18–20	51.6	61.7	42.0	119.3	30.6	31.7	40.3
Operations on the nose, mouth, and pharynx	216.1 34.1	236.7 32.5	196.7 35.7	214.4 98.2	202.6 23.8	205.4	284.2
Operations on the respiratory system	381.6 123.4	461.2 153.4	306.6 95.2	109.7 32.2	147.5 38.4	620.5 202.3	1,364.8 479.0
Operations on the cardiovascular system	1,645.5 131.9 162.6 399.1	1,960.3 183.5 243.5 496.0	1,348.9 83.3 86.4 307.9	269.0 * 33.7	407.5 20.8 19.4 75.9	3,161.0 350.0 381.3 956.3	6,366.7 449.1 650.2 1,404.8
of pacemaker leads or device	119.6 67.2 104.0	119.3 75.7 106.0	119.9 59.1 102.2	* *	7.8 11.9 52.5	94.3 121.7 168.1	769.9 293.5 372.6
Operations on the hemic and lymphatic system	156.3	174.3	139.4	35.5	66.2	234.5	583.3
Operations on the digestive system	2,218.8	1,908.0	2,511.6	401.3	1,342.6	2,997.9	7,455.8
without biopsy	320.9 229.0	321.9 192.6	320.0 263.4	20.1	123.9 77.3	431.9	1,405.6
Partial excision of large intestine	87.7 101.8 227.8 68.8	77.7 111.4 136.9 127.4	97.1 92.7 313.4 13.6	102.5 * 45.8	19.6 133.4 165.8 26.8	272.1 121.6 61.8 405.0 109.0	1,111.1 436.3 42.6 581.9 204.1
Lysis of peritoneal adhesions	135.4 621.8 182.6	49.4 727.4 273.9	216.5 522.3 96.7	*9.3 85.0 17.2	142.8 321.2	161.3 825.3	289.5 2,361.6
Operations on the male genital organs	233.2 145.1	480.8 299.1		84.3	54.7 33.9 *	221.1 248.5 145.6	884.7 1,203.3 930.0
Operations on the female genital organs	921.3 182.7	•••	1,789.0 354.8	*14.9	1,388.0 211.8	953.3 321.7	728.4 184.2
fallopian tubes .66.2–66.3 Hysterectomy .68.3–68.7 Dilation and curettage of uterus .69.0 Repair of cystocele and rectocele .70.5	160.1 218.0 78.0 55.3	•••	310.9 423.4 151.6	* - *	341.7 275.6 136.0	* 344.7 46.1	198.2 43.9
Obstetrical procedures	2,740.4		107.4 5,321.8	43.4	34.0 5,846.4	103.6 *	158.5
or vacuum extraction	672.2 309.2 372.5	•••	1,305.3 600.4 723.4	*14.0 * *	1,431.9 659.5 795.9	* *	
not otherwise specified	529.4 317.3	•••	1,028.1 616.1	*	1,129.6 677.3	*	• • • •
Operations on the musculoskeletal system	1,326.3 86.2 166.7 122.2 46.6 64.0	1,406.7 97.6 158.4 149.3 41.1 49.4	1,250.6 75.5 174.6 96.6 51.8 77.8	376.9 17.9 48.4 *	1,131.2 82.3 124.2 138.1 *7.2	1,708.4 142.8 162.3 218.3 65.5 77.6	3,131.8 136.0 535.6 131.4 244.5 382.3
Operations on the integumentary system .85–86 Mastectomy .85.4 Debridement of wound, infection, or burn .86.22,86.28 Skin graft .86.6–86.7	528.5 47.2 130.0 39.5	453.8 * 149.0 49.0	598.8 90.9 112.1 30.6	135.9 * 35.2 17.2	417.3 14.8 91.1 34.5	706.7 90.3 133.0 48.2	1,357.2 184.0 433.6 84.0
Miscellaneous diagnostic and therapeutic procedures	5,900.5 611.1 97.8	5,743.6 601.1 109.3	6,048.2 620.5 86.9	1,685.4 139.7 *	2,903.8 316.3 79.9	8,013.9 738.4 129.9	21,148.8 2,328.5 272.0
contrast material .88.4–88.5 Diagnostic ultrasound .88.7 Circulatory monitoring .89.6 Radioisotope scan .92.0–92.1 Respiratory therapy .93.9	685.8 635.2 280.5 215.0 484.5	813.8 536.2 278.9 187.5 490.1	565.3 728.5 282.0 241.0 479.1	40.3 133.3 52.0 28.5 356.1	155.5 362.7 100.9 89.7 165.2	1,548.0 758.9 356.6 316.3 505.2	2,492.2 2,328.6 1,226.9 851.8 1,853.0

¹The rate per 1,000,000 population of discharged patients with a coronary bypass graft was 105.8.

Technical notes Survey methodology

Source of data

The National Hospital Discharge Survey covers discharges from noninstitutional hospitals, exclusive of Federal, military, and Veterans Administration hospitals, located in the 50 States and the District of Columbia. Only short-stay hospitals (hospitals with an average length of stay for all patients of less than 30 days) or those whose specialty is general (medical or surgical) or children's general are included in the survey. These hospitals must also have six beds or more staffed for patient use.

From 1988 through 1990, the NHDS sampling frame consisted of hospitals that were listed in the April 1987 SMG Hospital Market Tape (3), met the above criteria, and began accepting patients by August 1987. In 1991 the sampling frame was updated to include hospitals from the 1991 SMG Hospital Database Tape (4). For 1991, the sample consisted of 528 hospitals. Of the 528 hospitals, 7 were found to be out of scope (ineligible) because they went out of business or otherwise failed to meet the criteria for the NHDS universe. Of the 521 in-scope (eligible) hospitals, 484 responded to the survey.

Sample design and data collection

The NCHS has conducted the NHDS continuously since 1965. The original sample was selected in 1964 from a frame of short-stay hospitals listed in the National Master Facility Inventory. That sample was updated periodically with samples of hospitals that opened later. Sample hospitals were selected with probabilities ranging from certainty for the largest hospitals to 1 in 40 for the smallest hospitals. Within each sample hospital, a systematic random sample of discharges was selected. A report on the design and development of the original NHDS was published (1).

Beginning in 1988, the NHDS sample includes with certainty all

hospitals with 1,000 beds or more or 40,000 discharges or more annually. The remaining sample of hospitals is based on a stratified three-stage design. The first stage consists of a selection of 112 primary sampling units (PSU's) that comprise a probability subsample of PSU's to be used in the 1985-94 National Health Interview Survey. The second stage consists of a selection of noncertainty hospitals from the sample PSU's. At the third stage, a sample of discharges was selected by a systematic random sampling technique.

Two data collection procedures were used for the survey. The first was a manual system of sample selection and data abstraction. The second was an automated method, used for approximately 33 percent of the respondent hospitals in 1991, that involved the purchase of data tapes from abstracting service organizations, state data systems, or hospitals.

In the manual system, the sample selection and the transcription of information from the hospital records to abstract forms were performed at the hospitals. The completed forms, along with sample selection control sheets, were forwarded to NCHS for coding, editing, and weighting. Of the hospitals using the manual system in 1991, about two-thirds had the work performed by their own medical records staff. In the remaining hospitals using the manual system, personnel of the U.S. Bureau of the Census did the work on behalf of NCHS.

For the automated system, NCHS purchased tapes containing machine-readable medical record data that were systematically sampled by NCHS.

The medical abstract form and the automated 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 confidential information and are not available to the public.)

Presentation of estimates

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) are used to identify estimates with relatively low reliability.

Because of the complex sample design of the NHDS, estimates of less than 5,000 are not presented; only an asterisk (*) appears in the tables. These estimates generally have a relative standard error of more than 30 percent or are based on a sample of less than 30 cases. Estimates of 5,000 to 9,000 are preceded by an asterisk (*) to indicate that they should not be assumed to be reliable. These estimates are generally based on less than 60 cases.

Sampling errors and rounding of numbers

The standard error is primarily a measure of sampling variability that occurs by chance because only a sample rather than the entire universe is surveyed. The relative standard error of the estimate is obtained by dividing the standard error by the estimate itself and is expressed as a percent of the estimate. The resulting value is multiplied by 100, so the relative standard error is expressed as a percent of the estimate.

Estimates of sampling variability were calculated with SESUDAAN software, which computes standard errors by using a first-order Taylor approximation of the deviation of estimates from their expected values. A description of the software and the approach it uses has been published (5).

The constants for relative standard error curves for the National

Hospital Discharge Survey are presented in table I. The constants for 1990 are shown because 1991 constants were not available at the time of publication and little difference is expected in the constants for the 2 years. The relative standard error [RSE(X)] of an estimate X may be estimated from the formula:

$$RSE(X) = 100 \left(\sqrt{a + b/X} \right)$$

where X, a, and b are as defined in table I.

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

Tests of significance

In this report, statistical inference is based on the two-sided test with a critical value of 1.96 (0.05 level of significance). Terms such as "higher" and "less" indicate that 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 not to be significant.

Terms relating to hospitalization

Hospitals — All hospitals with an average length of stay for all patients of less than 30 days or hospitals whose specialty is general (medical or surgical) or children's general are eligible for inclusion in the National Hospital Discharge Survey, except Federal hospitals, hospital units of institutions, and hospitals with less than six beds staffed for patients' use.

Patient—A person who is formally admitted to the inpatient service of a short-stay hospital for observation, care, diagnosis, or treatment. The terms "patient" and "inpatient" are used synonymously.

Newborn infant — A patient admitted by birth to a hospital.

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

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

Days of care—The number of patient days accumulated at time of discharge by a patient. A stay of less than 1 day (patient admission and discharge on the same day) is

Table I. Estimated parameters for relative standard error equations for National Hospital Discharge Survey statistics, by sex, age, and geographic region: United States, 1990

		Number of discharges or first-listed diagnoses Number of procedures		procedures
Characteristic	а	b	а	b
Total	0.00213	228.834 0.00547	0.00547	92.597
Sex				
Male	0.00152	313.079	0.00410	89.724
Female	0.00125	311.632	0.00337	83.021
Age				
Under 15 years	0.01597	47.116	0.03171	44.124
15-44 years	0.00142	299.762	0.00302	139.070
45–64 years	0.00157	234.543	0.00491	68.024
65 years and over	0.00161	263.223	0.00436	47.886
Region				
Northeast	0.00274	56.268	0.00588	108.765
Midwest	0.00487	183.531	0.00886	107.681
South	0.00375	343.892	0.00781	50.919
West	0.00564	318.914	0.01235	144.582

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.

Average length of stay—The number of days of care accumulated by patients discharged during the year divided by the number of these patients.

Terms relating to diagnoses

Diagnosis—A disease or injury (or factor that influences health status and contact with health services that is not itself a current illness or injury) on the medical record of a patient.

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

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

Terms relating to procedures

Procedure — A surgical or nonsurgical operation, diagnostic procedure, or special treatment reported on the medical record of a patient. Beginning with the 1991 data, all ICD-9-CM procedure codes are used in the NHDS. Previously selected codes, primarily codes for miscellaneous diagnostic and therapeutic procedures, were not used.

All-listed procedures – The number of procedures on the face sheet of the medical record. In the NHDS a maximum of four procedures are coded.

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

Demographic terms

Population-The U.S. resident population excluding members of the Armed Forces.

Age - Patient's age at birthday prior to admission to the hospital.

Geographic region - Hospitals are classified by location in one of the four geographic regions of the United States that correspond to those used by the U.S. Bureau of the Census.

Region

States included

Northeast... Maine, New

Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, and Pennsylvania

Midwest Michigan, Ohio, Illinois, Indiana, Wisconsin, Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, and Kansas

South Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida, Kentucky, Tennessee, Alabama, Mississippi, Arkansas, Louisiana, Oklahoma, and Texas

West Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada, Washington, Oregon, California, Hawaii, and Alaska

Symbols

- Data not available
- . . . Category not applicable
- Quantity zero
- 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 (see Technical notes)
- Figure suppressed to comply with confidentiality requirements

Suggested citation

Graves EJ. 1991 Summary: National Hospital Discharge Survey. Advance data from vital and health statistics; no 227. Hyattsville, Maryland: National Center for Health Statistics. 1993.

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DHHS Publication No. (PHS) 93-1250

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