

National Hospital Ambulatory Medical Care Survey: 2018 Emergency Department Summary Tables

The Ambulatory and Hospital Care Statistics Branch of the National Center for Health Statistics (NCHS) is pleased to release the most current nationally representative data on ambulatory care visits to hospital emergency departments (EDs) in the United States. Estimates are presented on selected hospital, patient, and visit characteristics using data collected in the 2018 National Hospital Ambulatory Medical Care Survey (NHAMCS). NHAMCS is an annual, nationally representative sample survey of visits to hospitals.

The sampling frame for the 2018 NHAMCS was constructed from IQVIA's Healthcare Organization Services (HCOS) database. NHAMCS uses a multistage probability design with samples of primary sampling units (PSUs), hospitals within PSUs, and patient visits within emergency service areas (ESAs) of each selected hospital. A total of 490 hospitals were selected for the 2018 NHAMCS, of which 378 were in scope and had eligible EDs. Of these, 323 responded, yielding an unweighted ED response rate of 85.5%. A total of 416 ESAs were identified from the EDs. Of these, 279 responded fully or adequately by providing forms for at least one-half of their expected visits, based on the total number of visits during the reporting period. In all, 20,291 Patient Record forms (PRFs) were submitted electronically. The resulting unweighted ESA sample response rate was 67.1%, and the overall unweighted two-stage sampling response rate was 57.3% (60.2% weighted).

The U.S. Census Bureau was the data collection agent for the 2018 NHAMCS. NHAMCS data were collected electronically using a computerized instrument developed by the Census Bureau. Census field representatives completed a PRF for a sample of about 100 ED visits during a randomly assigned 4-week reporting period. The content of the PRF may be viewed at: https://www.cdc.gov/nchs/ahcd/ahcd_survey_instruments.htm#nhamcs.

Data processing and medical coding were performed by RTI International, Research Triangle Park, North Carolina. As part of the quality assurance procedure, a 13% quality control sample of ED survey records was independently keyed and coded. Coding error rates ranged from 0.1% to 0.9% for the ED sample. For further details, see the 2018 NHAMCS public-use data file documentation at: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

Web table estimates are based on sample data weighted to produce annual national estimates and include standard errors. The sample weight computed for each sample visit takes into account all stages of survey design. The survey data are inflated or weighted to produce unbiased national annual estimates. The visit weight includes three basic components: inflation by reciprocals of selection probabilities, adjustment for nonresponse, and population ratio adjustments. Estimates of the sampling variability were calculated using the Taylor series method in SUDAAN, which accounts for the complex sample design of NHAMCS. Detailed information on the design, conduct, and estimation procedures of 2018 NHAMCS are discussed in the public-use data file documentation.

As in any survey, results are subject to sampling and nonsampling errors. Nonsampling errors include reporting and processing errors as well as biases due to nonresponse and incomplete response. In 2018, race data were missing for 20.7% (unweighted) of ED records, and ethnicity data were missing for 20.5% (unweighted) of ED records. NCHS uses model-based single imputation for NHAMCS race and ethnicity data. The race imputation, based on research by an internal work group, is restricted to three categories (white, black, and other) because of quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the public-use data file documentation.

NHAMCS ED diagnosis data are coded according to the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM). Five tables (Tables 11, 12, 16, 17, and 26) that present estimates of primary diagnoses, injury diagnoses, and primary hospital discharge diagnoses use ICD–10–CM codes and differ from pre-2016 Web tables presenting diagnosis estimates using the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM) coding system. Because differences between the ICD–9–CM and ICD–10–CM coding systems are substantial, caution is advised when comparing diagnosis estimates.

Proportion estimates are not presented or are flagged based on the procedure specified in “National Center for Health Statistics Data Presentation Standards for Proportions,” available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf. For all estimates other than estimates of proportions, the following approach is used: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk (*) appears. Visit estimates based on 30 or more cases include an asterisk if the relative standard error of the estimate exceeds 30%.

Suggested citation: Cairns C, Kang K, Santo L. National Hospital Ambulatory Medical Care Survey: 2018 emergency department summary tables. Available from: https://www.cdc.gov/nchs/data/nhamcs/web_tables/2018_ed_web_tables-508.pdf.

Table 1. Emergency department visits, by selected hospital characteristics: United States, 2018

Characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons ¹ (standard error)
All visits	129,974 (7,280)	100.0 ...	40.4 (2.3)
Ownership			
Voluntary	82,619 (6,612)	63.6 (4.2)	25.6 (2.1)
Government	28,623 (4,953)	22.0 (3.5)	8.9 (1.5)
Proprietary	18,732 (4,510)	14.4 (3.3)	5.8 (1.4)
Metropolitan status ²⁻⁴			
MSA	112,754 (7,517)	86.8 (2.1)	40.2 (2.7)
Non-MSA	17,220 (2,607)	13.3 (2.1)	41.3 (6.3)
Geographic region ⁴			
Northeast	20,890 (2,052)	16.1 (1.6)	37.7 (3.7)
Midwest	26,891 (3,272)	20.7 (2.3)	39.9 (4.9)
South	54,568 (5,295)	42.0 (2.9)	44.5 (4.3)
West	27,626 (3,181)	21.3 (2.2)	35.9 (4.1)
Teaching hospital			
Yes	25,999 (3,456)	20.0 (2.8)	8.1 (1.1)
No or blank ⁵	103,975 (7,722)	80.0 (2.8)	32.3 (2.4)
Trauma center			
Yes	50,146 (5,574)	38.6 (4.1)	15.6 (1.7)
No or blank	79,828 (7,404)	61.4 (4.1)	24.8 (2.3)
Season ⁶			
Winter	30,119 (4,307)	23.2 (3.3)	9.4 (1.3)
Spring	35,705 (5,111)	27.5 (3.7)	11.1 (1.6)
Summer	32,480 (5,444)	25.0 (3.9)	10.1 (1.7)
Fall	31,670 (4,973)	24.4 (3.4)	9.8 (1.5)

... Category not applicable.

¹Visit rates for region are based on the July 1, 2018, set of estimates of the U.S. civilian noninstitutional population as developed by the U.S. Census Bureau, Population Division.

²MSA is metropolitan statistical area.

³Population estimates by MSA are based on estimates of the U.S. civilian noninstitutionalized population as of July 1, 2018, from the 2018 National Health Interview Survey, compiled according to the February 2013 Office of Management and Budget definitions of core-based statistical areas. More information about MSA definitions is available from: <https://www.census.gov/programs-surveys/metro-micro.html>.

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

⁵Teaching status was unknown for 4.4% (weighted) of visits.

⁶Winter is December 22 to March 19, spring is March 20 to June 20, summer is June 21 to September 22, and fall is September 23 to December 21.

NOTE: Numbers may not add to totals due to rounding.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 2. Emergency department visits, by patient age, sex, and residence: United States, 2018

Patient characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons ¹ (standard error)
All visits	129,974 (7,280)	100.0 ...	40.4 (2.3)
Age group (years) ¹			
Under 15	25,571 (3,185)	19.7 (2.0)	42.0 (5.2)
Under 1	3,879 (557)	3.0 (0.4)	100.8 (14.5)
1–4	9,319 (1,249)	7.2 (0.8)	58.4 (7.8)
5–14	12,372 (1,530)	9.5 (1.0)	30.1 (3.7)
15–24	16,353 (1,017)	12.6 (0.5)	38.9 (2.4)
25–44	34,454 (2,153)	26.5 (0.8)	40.5 (2.5)
45–64	30,399 (1,743)	23.4 (0.8)	36.6 (2.1)
65 and over	23,197 (1,586)	17.9 (0.8)	45.4 (3.1)
65–74	10,709 (757)	8.2 (0.4)	35.4 (2.5)
75 and over	12,488 (929)	9.6 (0.5)	59.8 (4.5)
Sex and age group (years)			
Female	72,352 (4,324)	55.7 (0.6)	44.0 (2.6)
Under 15	12,319 (1,531)	9.5 (1.0)	41.4 (5.1)
15–24	10,180 (707)	7.8 (0.3)	48.8 (3.4)
25–44	20,345 (1,391)	15.7 (0.6)	47.4 (3.2)
45–64	16,203 (1,015)	12.5 (0.5)	37.8 (2.4)
65–74	5,779 (483)	4.5 (0.3)	35.8 (3.0)
75 and over	7,526 (596)	5.8 (0.3)	62.2 (4.9)
Male	57,622 (3,137)	44.3 (0.6)	36.6 (2.0)
Under 15	13,252 (1,708)	10.2 (1.1)	42.6 (5.5)
15–24	6,174 (402)	4.8 (0.3)	29.2 (1.9)
25–44	14,109 (874)	10.9 (0.4)	33.6 (2.1)
45–64	14,196 (815)	10.9 (0.4)	35.2 (2.0)
65–74	4,930 (354)	3.8 (0.2)	34.9 (2.5)
75 and over	4,962 (409)	3.8 (0.3)	56.5 (4.7)
Residence			
Private ¹	122,787 (7,177)	94.5 (0.7)	38.1 (2.2)
Nursing home ²	1,747 (194)	1.3 (0.1)	127.2 (14.1)
Homeless ³	1,164 (142)	0.9 (0.1)	210.5 (25.7)
Other	1,271 (162)	1.0 (0.1)	0.4 (0.1)
Unknown or blank	3,005 (819)	2.3 (0.6)	0.9 (0.3)
Urban–rural classification ⁴			
Large central metro	38,726 (4,341)	31.2 (3.1)	... ..
Large fringe metro	20,968 (3,034)	16.9 (2.3)	... ..
Medium metro	28,807 (4,702)	23.2 (3.8)	... ..
Small metro	*13,572 (4,890)	* ...	... ..
Micropolitan	11,609 (2,651)	9.3 (2.0)	... ..
Noncore (nonmetro)	10,606 (1,147)	8.5 (1.1)	... ..

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Visit rates for age group, sex, and private residence are based on the July 1, 2018, set of estimates of the U.S. civilian noninstitutional population developed by the U.S. Census Bureau, Population Division.²Visit rates for nursing home residents are based on the 2018 population denominators from the Centers for Medicare & Medicaid Services, 2018 Minimum Data Set Frequency Reports, available from: <https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/Minimum-Data-Set-3-0-Public-Reports/Minimum-Data-Set-3-0-Frequency-Report.html>.³Visit rates for the homeless are based on the January 2018 estimate of people who were without a home on a given night, as reported in *The 2018 Annual Homeless Assessment Report (AHAR) to Congress*, available from: <https://www.hudexchange.info/resource/5783/2018-ahar-part-1-pit-estimates-of-homelessness-in-the-us/>.⁴For each record, county of residence was determined using patient zip code and then matched to the National Center for Health Statistics Urban–Rural Classification Scheme for Counties, available from: https://www.cdc.gov/nchs/data_access/urban_rural.htm.

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown.

Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 3. Emergency department visits, by patient race, age, and ethnicity: United States, 2018

Patient characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons ¹ (standard error)
All visits	129,974 (7,280)	100.0 ...	40.4 (2.3)
Race ² and age group (years)			
White	88,707 (5,229)	68.3 (1.8)	36.0 (2.1)
Under 15	16,450 (1,995)	12.7 (1.3)	37.6 (4.6)
15–24	10,755 (747)	8.3 (0.4)	34.9 (2.4)
25–44	22,714 (1,486)	17.5 (0.8)	35.9 (2.4)
45–64	20,826 (1,341)	16.0 (0.7)	31.6 (2.0)
65–74	7,857 (634)	6.1 (0.4)	31.2 (2.5)
75 and over	10,106 (818)	7.8 (0.5)	56.7 (4.6)
Black or African American	35,639 (3,241)	27.4 (1.8)	83.9 (7.6)
Under 15	7,629 (1,265)	5.9 (0.9)	83.0 (13.8)
15–24	4,853 (418)	3.7 (0.2)	77.7 (6.7)
25–44	10,361 (1,058)	8.0 (0.6)	87.1 (8.9)
45–64	8,449 (820)	6.5 (0.5)	81.8 (7.9)
65–74	2,410 (306)	1.9 (0.2)	79.6 (10.1)
75 and over	1,937 (268)	1.5 (0.2)	109.0 (15.1)
Other ³	5,628 (709)	4.3 (0.5)	17.1 (2.2)
Ethnicity ²			
Hispanic or Latino	21,414 (2,157)	16.5 (1.4)	36.2 (3.6)
Not Hispanic or Latino	108,560 (6,363)	83.5 (1.4)	41.3 (2.4)
White	69,006 (4,410)	53.1 (2.0)	35.4 (2.3)
Black or African American	34,464 (3,153)	26.5 (1.7)	87.0 (8.0)
Other ³	5,090 (641)	3.9 (0.5)	17.8 (2.2)

... Category not applicable.

¹Visit rates are based on the July 1, 2018, set of estimates of the U.S. civilian noninstitutionalized population as developed by the U.S. Census Bureau, Population Division.

²The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2018, race data were missing for 19.3% (weighted) of visits, and ethnicity data were missing for 20.5% (weighted) of visits. Starting with 2009 data, the National Center for Health Statistics has adopted model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is detailed in the 2018 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

³Includes the categories of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

NOTE: Numbers may not add to totals due to rounding.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 4. Wait time at emergency department visits: United States, 2018

Visit characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	129,974 (7,280)	100.0 ...
Time spent waiting to see a physician, APRN, or PA ¹		
Less than 15 minutes	56,588 (4,950)	43.5 (2.4)
15–59 minutes	39,759 (3,159)	30.6 (1.5)
1 hour, but less than 2 hours	12,180 (1,217)	9.4 (0.8)
2 hours, but less than 3 hours	3,841 (489)	3.0 (0.3)
3 hours, but less than 4 hours	1,609 (230)	1.2 (0.2)
4 hours, but less than 6 hours	872 (156)	0.7 (0.1)
6 hours or more	682 (139)	0.5 (0.1)
Not applicable	3,397 (447)	2.6 (0.3)
Blank	11,047 (1,797)	8.5 (1.6)
Time spent in emergency department		
Less than 1 hour	12,103 (1,046)	9.3 (0.5)
1 hour, but less than 2 hours	27,688 (1,967)	21.3 (0.8)
2 hours, but less than 4 hours	45,238 (3,035)	34.8 (0.8)
4 hours, but less than 6 hours	20,604 (1,545)	15.9 (0.6)
6 hours, but less than 10 hours	10,896 (839)	8.4 (0.5)
10 hours, but less than 14 hours	2,369 (228)	1.8 (0.2)
14 hours, but less than 24 hours	2,174 (218)	1.7 (0.2)
24 hours or more	1,717 (288)	1.3 (0.2)
Blank	7,184 (961)	5.5 (0.8)
Patient arrived in emergency department after business hours ²		
Yes	74,549 (4,435)	57.4 (0.6)
No	53,202 (3,126)	40.9 (0.6)
Blank	2,223 (617)	1.7 (0.5)

... Category not applicable.

¹APRN is advanced practice registered nurse. PA is physician assistant. The median wait time to see a physician, APRN, or PA was 15.0 minutes; the mean wait time to see a physician, APRN, or PA was 35.7 minutes.

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

NOTE: Numbers may not add to totals due to rounding.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 5. Mode of arrival at emergency department, by patient age: United States, 2018

Age group (years)	Number of visits in thousands	Patient's mode of arrival			
		Total ¹	Ambulance	Other	Unknown or blank
		Percent distribution (standard error)			
All visits	129,974	100.0	16.0 (0.8)	79.7 (1.3)	4.3 (1.1)
Under 15	25,571	100.0	5.8 (1.6)	89.0 (2.6)	* ...
Under 1	3,879	100.0	6.6 (1.8)	85.9 (4.1)	* ...
1-4	9,319	100.0	4.6 (1.1)	91.5 (2.0)	* ...
5-14	12,372	100.0	* ...	88.1 (3.0)	* ...
15-24	16,353	100.0	12.3 (1.3)	82.5 (1.8)	5.2 (1.3)
25-44	34,454	100.0	12.4 (0.7)	83.3 (1.5)	* ...
45-64	30,399	100.0	17.7 (1.0)	78.7 (1.4)	* ...
65 and over	23,197	100.0	33.4 (1.6)	63.3 (1.7)	3.3 (0.9)
65-74	10,709	100.0	26.7 (1.8)	69.8 (2.0)	3.5 (1.1)
75 and over	12,488	100.0	39.1 (2.0)	57.8 (2.0)	3.2 (0.8)

* Estimate does not meet NCHS standards of reliability.

... Category not applicable.

¹Ambulance was the mode of arrival for 20,851,000 visits; other was the mode of arrival for 103,575,000 visits.

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 6. Expected source of payment at emergency department visits: United States, 2018

Payment source	Number of visits ¹ (standard error) in thousands	Percent of visits (standard error)
All visits	129,974 (7,280)	... ..
Private insurance	40,003 (2,546)	30.8 (1.4)
Medicaid or CHIP ² or other state-based program	48,309 (4,297)	37.2 (2.1)
Medicare	25,055 (1,728)	19.3 (1.0)
Medicare and Medicaid ³	5,290 (546)	4.1 (0.3)
No insurance ⁴	11,012 (1,242)	8.5 (0.8)
Self-pay	10,580 (1,224)	8.1 (0.8)
No charge or charity	*624 (219)	0.5 (0.2)
Worker's compensation	887 (106)	0.7 (0.1)
Other	4,406 (518)	3.4 (0.4)
Unknown or blank	16,922 (3,332)	13.0 (2.5)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Total exceeds "All visits" and percentage exceeds 100% because more than one source of payment may be reported per visit.

²Children's Health Insurance Program.

³Visits are also included in the "Medicaid or CHIP or other state-based program" and "Medicare" categories.

⁴Defined as having only self-pay, no charge, or charity as payment sources.

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 7. Triage status of emergency department visits, by selected patient and visit characteristics: United States, 2018

Patient and visit characteristics	Number of visits		Level 1 (immediate)	Level 2 (emergent)	Level 3 (urgent)	Level 4 (semiurgent)	Level 5 (nonurgent)	No triage ¹	Unknown or blank
	in thousands	Total							
Percent distribution (standard error)									
All visits	129,974	100.0	1.0 (0.2)	10.9 (0.9)	34.5 (2.0)	21.9 (1.5)	3.1 (0.5)	6.0 (1.7)	22.7 (2.8)
Age group (years)									
Under 15	25,571	100.0	0.5 (0.2)	8.2 (1.7)	24.2 (1.6)	39.4 (2.7)	6.8 (1.6)	* ...	18.2 (2.6)
Under 1	3,879	100.0	1.1 (0.6)	7.1 (1.5)	29.1 (2.9)	33.2 (3.2)	5.1 (1.3)	3.3 (1.6)	21.0 (3.4)
1–4	9,319	100.0	* ...	7.3 (1.8)	22.6 (2.0)	42.3 (3.3)	* ...	2.3 (1.0)	17.8 (3.2)
5–14	12,372	100.0	0.6 (0.3)	9.3 (2.0)	23.9 (1.9)	39.1 (2.9)	6.7 (1.4)	* ...	17.6 (2.3)
15–24	16,353	100.0	0.6 (0.2)	8.2 (0.9)	36.6 (2.5)	23.9 (1.9)	2.3 (0.4)	6.4 (1.7)	22.0 (2.8)
25–44	34,454	100.0	* ...	9.3 (1.0)	35.1 (2.4)	20.6 (1.6)	2.6 (0.5)	7.1 (2.0)	24.3 (3.1)
45–64	30,399	100.0	* ...	12.6 (1.3)	37.0 (2.4)	16.6 (1.4)	1.8 (2.0)	6.1 (1.8)	24.8 (3.4)
65 and over	23,197	100.0	1.3 (0.3)	16.1 (1.5)	40.2 (2.9)	10.1 (1.1)	2.0 (0.7)	* ...	22.9 (3.3)
65–74	10,709	100.0	1.3 (0.4)	15.5 (1.7)	39.9 (3.1)	12.4 (1.4)	2.2 (0.6)	* ...	22.3 (3.4)
75 and over	12,488	100.0	1.3 (0.4)	16.7 (1.8)	40.4 (3.2)	8.2 (1.1)	1.8 (0.9)	* ...	23.4 (3.4)
Sex									
Female	72,352	100.0	0.8 (0.2)	9.6 (0.9)	36.5 (2.2)	21.5 (1.6)	2.6 (0.6)	6.2 (1.8)	22.8 (2.8)
Male	57,622	100.0	1.2 (0.3)	12.5 (1.1)	31.9 (1.8)	22.4 (1.5)	3.6 (0.6)	5.8 (1.6)	22.6 (2.8)
Race ²									
White	88,707	100.0	0.8 (0.2)	11.1 (1.0)	35.2 (2.0)	21.3 (1.4)	2.7 (0.5)	5.8 (1.6)	23.2 (2.9)
Black or African American	35,639	100.0	1.4 (0.5)	10.2 (1.1)	32.3 (2.9)	23.3 (2.6)	3.8 (1.0)	* ...	22.4 (3.7)
Other ³	5,628	100.0	0.8 (0.3)	13.6 (2.2)	36.7 (3.0)	23.0 (2.6)	4.5 (0.9)	* ...	17.0 (3.4)
Ethnicity and race ²									
Hispanic or Latino	21,414	100.0	0.6 (0.3)	8.8 (1.3)	31.6 (2.5)	28.1 (2.6)	4.4 (1.0)	* ...	19.7 (3.6)
Not Hispanic or Latino	108,560	100.0	1.0 (0.3)	11.4 (1.0)	35.1 (2.2)	20.7 (1.6)	2.8 (0.5)	5.8 (1.7)	23.3 (2.9)
White	69,006	100.0	0.8 (0.2)	11.7 (1.1)	36.4 (2.2)	19.3 (1.4)	2.2 (0.4)	5.4 (1.5)	24.1 (3.2)
Black or African American	34,464	100.0	(0.5)	10.2 (1.1)	32.2 (2.9)	23.2 (2.6)	3.7 (1.0)	* ...	22.4 (3.8)
Other ³	5,090	100.0	0.9 (0.3)	14.4 (2.2)	36.2 (3.1)	22.5 (2.4)	4.8 (1.0)	* ...	17.1 (3.7)

See footnotes at end of table.

Table 7. Triage status of emergency department visits, by selected patient and visit characteristics: United States, 2018—Con.

Patient and visit characteristics	Number of visits		Level 1 (immediate)	Level 2 (emergent)	Level 3 (urgent)	Level 4 (semiurgent)	Level 5 (nonurgent)	No triage ¹	Unknown or blank
	in thousands	Total							
Expected source of payment ⁴	Percent distribution (standard error)								
Private insurance	40,003	100.0	1.0 (0.3)	12.1 (1.3)	39.1 (2.4)	18.7 (1.4)	2.1 (0.4)	* ...	21.2 (3.5)
Medicaid or CHIP ⁵ or other state-based program	48,309	100.0	0.8 (0.3)	10.0 (1.2)	31.7 (1.9)	26.5 (2.3)	3.9 (0.8)	4.4 (1.3)	22.7 (3.0)
Medicare	25,055	100.0	1.2 (0.2)	15.9 (1.6)	39.7 (2.9)	11.2 (1.1)	1.6 (0.5)	* ...	23.7 (3.4)
Medicare and Medicaid ⁶	5,290	100.0	1.3 (0.5)	15.3 (2.2)	37.9 (4.1)	13.2 (2.0)	1.7 (0.7)	* ...	24.1 (3.9)
No insurance ⁷	11,012	100.0	1.5 (0.7)	7.6 (1.0)	34.4 (3.8)	24.6 (2.6)	1.6 (0.4)	* ...	21.8 (4.7)
Worker's compensation	887	100.0	1.9 (1.3)	9.4 (3.1)	23.7 (4.5)	28.0 (4.4)	3.3 (1.7)	7.0 (2.8)	26.8 (5.8)
Other	4,406	100.0	1.2 (0.5)	13.0 (2.1)	41.5 (3.4)	23.8 (2.5)	2.7 (0.7)	* ...	14.3 (3.6)
Unknown or blank	16,922	100.0	0.8 (0.2)	10.2 (2.7)	30.0 (4.7)	20.7 (2.8)	* ...	* ...	24.9 (7.5)

* Estimate does not meet NCHS standards of reliability.

... Category not applicable.

¹A visit in which the emergency service area (ESA) coded nursing triage as zero (admitted to hospital or treated immediately) or visit occurred in an ESA that does not conduct triage.

²The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics has adopted model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white or black. The imputation technique is detailed in the 2018 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf. For 2018, race data were missing for 19.3% (weighted) of visits, and ethnicity data were missing for 20.5% (weighted) of visits.

³Includes the categories of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

⁴Total exceeds "All visits" because more than one source of payment may be reported per visit.

⁵Children's Health Insurance Program.

⁶Visits are also included in both the "Medicaid or CHIP or other state-based program" and "Medicare" categories.

⁷Defined as having only self-pay, no charge, or charity as payment sources.

NOTES: The 2018 Patient Record form (PRF) requested responses using a 1–5 scale. PRF responses were evaluated with reference to responses on the Ambulatory Unit Record, completed during induction, to the question, "How many levels are in this emergency service area's (ESA) triage system?" ESAs using 3- or 4-level triage systems had their responses rescaled to fit the 5-level system, such that for 3-level ESAs, responses of 1, 2, and 3 were recoded to 2, 3, and 4. For ESAs using a 4-level system, responses were recoded from 1–4 to 2–5. The rescaling method was determined in consultation with subject-matter experts and based on record analysis. Rescaling was required for about 0.3% of records, or 0.3% of records with nonmissing data. Triage level was imputed in years before 2012. Starting in 2012, triage level is not imputed. Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 8. Initial blood pressure measurements recorded at emergency department visits for adults, by selected patient characteristics: United States, 2018

Patient characteristic	Number of visits in thousands	Total	Initial blood pressure ¹			
			Not high (SBP less than 120 mmHg and DBP less than 80 mmHg)	Prehypertension (SBP 120–139 mmHg or DBP 80–89 mmHg)	Stage 1 hypertension (SBP 140–159 mmHg or DBP 90–99 mmHg)	Stage 2 hypertension (SBP greater than or equal to 160 mmHg or DBP greater than 100 mmHg)
Percent distribution (standard error)						
All visits ²	95,703	100.0	18.2 (0.5)	33.8 (0.6)	27.3 (0.6)	20.7 (0.6)
Age group (years)						
18–24	12,022	100.0	28.1 (1.4)	46.2 (1.6)	19.7 (1.2)	6.1 (0.7)
25–44	32,677	100.0	20.0 (0.9)	39.2 (0.9)	26.7 (0.9)	14.1 (0.7)
45–64	28,958	100.0	14.8 (0.7)	29.9 (1.0)	30.1 (0.8)	25.2 (0.8)
65–74	10,217	100.0	15.1 (1.1)	24.1 (1.5)	30.5 (1.8)	30.3 (1.7)
75 and over	11,828	100.0	14.3 (1.3)	23.9 (1.3)	27.1 (1.6)	34.7 (1.7)
Sex						
Female	55,004	100.0	21.1 (0.8)	33.8 (0.8)	24.8 (0.7)	20.3 (0.8)
Male	40,699	100.0	14.3 (0.6)	33.7 (0.9)	30.6 (0.9)	21.4 (0.7)
Race ³						
White	66,423	100.0	17.9 (0.6)	33.6 (0.7)	28.2 (0.7)	20.3 (0.7)
Black or African American	25,641	100.0	17.9 (1.0)	34.8 (1.2)	25.2 (0.8)	22.1 (1.1)
Other ⁴	3,638	100.0	26.6 (2.5)	29.2 (2.3)	24.5 (2.0)	19.7 (2.5)
Ethnicity and race ³						
Hispanic or Latino	12,840	100.0	20.4 (1.6)	37.1 (1.3)	25.2 (1.4)	17.3 (1.0)
Not Hispanic or Latino	82,862	100.0	17.9 (0.6)	33.2 (0.7)	27.6 (0.6)	21.3 (0.7)
White	54,487	100.0	17.4 (0.7)	32.9 (0.7)	28.9 (0.7)	20.9 (0.8)
Black or African American	25,013	100.0	17.8 (1.0)	34.7 (1.2)	25.2 (0.8)	22.3 (1.2)
Other ⁴	3,362	100.0	27.0 (2.6)	28.5 (2.4)	24.8 (2.0)	19.7 (2.5)

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

²Visits by adults (aged 18 and over). Visits where blood pressure was taken represent 95.1% (standard error = 0.9) of all emergency department visits made by adults.

³The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2018, race data were missing for 18.8% (weighted) of adult visits, and ethnicity data were missing for 20.2% (weighted) of adult visits. Beginning with 2009, the National Center for Health Statistics has adopted model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white or black. The imputation technique is detailed in the 2018 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

⁴Includes the categories of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

NOTE: Numbers may not add to totals due to rounding.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 9. Initial temperature, pulse oximetry, and visit history at emergency department visits: United States, 2018

Visit characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	129,974 (7,280)	100.0 ...
Temperature		
Febrile: Higher than 38.0°C or higher than 100.4°F	4,900 (513)	3.8 (0.3)
Normal: 35.1°C–38.0°C or 95.1°F–100.4°F	116,076 (6,924)	89.3 (0.9)
Hypothermic: 35.0°C and below or 95.0°F and below	* ...	0.1 (0.0)
Blank	8,805 (1,112)	6.8 (0.9)
Pulse oximetry ¹		
95%–100%	110,422 (6,697)	85.0 (1.3)
Less than 95%	9,365 (948)	7.2 (0.6)
Blank	10,187 (1,480)	7.8 (1.1)
Episode of care		
Initial visit	110,315 (6,570)	84.9 (1.5)
Follow-up visit	8,308 (747)	6.4 (0.4)
Unknown or blank	11,351 (2,052)	8.7 (1.5)
Patient seen in this emergency department within the last 72 hours		
Yes	5,079 (507)	3.9 (0.4)
No	113,459 (7,127)	87.3 (1.9)
Unknown or blank	11,436 (2,424)	8.8 (1.9)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

0.0 Quantity more than zero but less than 0.05.

¹Normal oxygen saturation is 95% or more.

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 10. Ten principal reasons for emergency department visits, by patient age and sex: United States, 2018

Principal reason for visit and RVC code ¹		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits . . . . .	...	129,974 (7,280)	100.0 ...
Stomach and abdominal pain, cramps and spasms	S545	11,085 (700)	8.5 (0.3)
Chest pain and related symptoms	S050	7,092 (542)	5.5 (0.3)
Fever	S010	5,837 (660)	4.5 (0.4)
Cough	S440	4,955 (632)	3.8 (0.4)
Shortness of breath	S415	3,873 (397)	3.0 (0.2)
Headache, pain in head	S210	3,471 (278)	2.7 (0.1)
Pain, specified site not referable to a specific body system	S055	3,091 (281)	2.4 (0.2)
Back symptoms	S905	3,038 (262)	2.3 (0.2)
Leg symptoms	S920	2,517 (226)	1.9 (0.1)
Vomiting	S530	2,372 (262)	1.8 (0.2)
All other reasons ² . . . . .	...	82,642 (4,598)	63.6 (0.6)
All visits under age 15 years . . . . .	...	25,571 (3,185)	100.0 ...
Female . . . . .	...	12,319 (1,531)	48.2 (1.2)
Fever	S010	2,117 (373)	8.3 (0.8)
Cough	S440	1,080 (218)	4.2 (0.5)
Stomach and abdominal pain, cramps and spasms	S545	756 (124)	3.0 (0.3)
Skin rash	S860	518 (140)	2.0 (0.5)
Vomiting	S530	517 (107)	2.0 (0.4)
Injury, other and unspecified of head, neck, and face	J505	376 (79)	1.5 (0.3)
Earache, or ear infection	S355	358 (62)	1.4 (0.3)
Symptoms referable to throat	S455	251 (50)	1.0 (0.2)
Diarrhea	S595	* ...	0.8 (0.2)
Laceration or cut of facial area	J210	* ...	0.8 (0.2)
All other reasons ² . . . . .	...	5,944 (741)	23.2 (1.3)
Male . . . . .	...	13,252 (1,708)	51.8 (1.2)
Fever	S010	2,167 (297)	8.5 (0.6)
Cough	S440	1,126 (223)	4.4 (0.6)
Injury, other and unspecified of head, neck, and face	J505	579 (134)	2.3 (0.4)
Stomach and abdominal pain, cramps and spasms	S545	573 (104)	2.2 (0.3)
Vomiting	S530	548 (119)	2.1 (0.3)
Skin rash	S860	532 (106)	2.1 (0.3)
Earache, or ear infection	S355	404 (77)	1.6 (0.2)
Labored or difficult breathing (dyspnea)	S420	* ...	* ...
Nasal congestion	S400	* ...	* ...
Headache, pain in head	S210	233 (51)	0.9 (0.2)
All other reasons ² . . . . .	...	6,543 (812)	25.6 (1.2)
All visits, ages 15–64 . . . . .	...	81,206 (4,587)	100.0 ...
Female . . . . .	...	46,728 (2,868)	57.5 (0.7)
Stomach and abdominal pain, cramps and spasms	S545	5,502 (405)	6.8 (0.3)
Chest pain and related symptoms (not referable to body systems)	S050	2,722 (267)	3.4 (0.3)
Headache, pain in head	S210	1,753 (171)	2.2 (0.1)
Back symptoms	S905	1,431 (134)	1.8 (0.1)
Problems of pregnancy	S790	1,295 (142)	1.6 (0.2)
Pain, site not referable to a specific body system	S055	1,289 (152)	1.6 (0.2)
Cough	S440	1,263 (191)	1.6 (0.2)
Shortness of breath	S415	1,230 (139)	1.5 (0.2)
Symptoms referable to throat	S455	1,054 (109)	1.3 (0.1)
Leg symptoms	S920	933 (109)	1.1 (0.1)
All other reasons ² . . . . .	...	28,256 (1,829)	34.8 (0.7)

See footnotes at end of table.

Table 10. Ten principal reasons for emergency department visits, by patient age and sex: United States, 2018—Con.

Principal reason for visit and RVC code ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits, ages 15–64—Con.		
Male.	34,479 (1,845)	42.5 (0.7)
Stomach and abdominal pain, cramps and spasms.	S545 2,731 (224)	3.4 (0.2)
Chest pain and related symptoms	S050 2,489 (259)	3.1 (0.3)
Pain, specified site not referable to a specific body system	S055 1,179 (156)	1.5 (0.2)
Shortness of breath	S415 939 (117)	1.2 (0.1)
Back symptoms	S905 920 (117)	1.1 (0.1)
Cough.	S440 809 (104)	1.0 (0.1)
Headache, pain in head	S210 783 (100)	1.0 (0.1)
Other symptoms or problems relating to psychological and mental disorders	S165 741 (115)	0.9 (0.1)
Leg symptoms	S920 670 (111)	0.8 (0.1)
Foot and toe symptoms	S935 624 (104)	0.8 (0.1)
All other reasons ²	22,593 (1,197)	27.8 (0.7)
All visits, ages 65 and over	23,197 (1,586)	100.0 ...
Female.	13,305 (1,016)	57.4 (1.3)
Stomach and abdominal pain, cramps and spasms.	S545 861 (95)	3.7 (0.4)
Shortness of breath	S415 825 (131)	3.6 (0.4)
Chest pain and related symptoms (not referable to body systems).	S050 819 (106)	3.5 (0.4)
Back symptoms	S905 428 (109)	1.8 (0.4)
General weakness	S020 410 (71)	1.8 (0.3)
Other symptoms or problems relating to psychological and mental disorders	S165 406 (67)	1.8 (0.3)
Leg symptoms	S920 398 (67)	1.7 (0.3)
Vertigo–dizziness	S225 386 (79)	1.7 (0.3)
Headache, pain in head	S210 382 (70)	1.6 (0.3)
Cough.	S440 381 (69)	1.6 (0.3)
All other reasons ²	8,009 (646)	34.5 (1.2)
Male.	9,892 (681)	42.6 (1.3)
Chest pain and related symptoms (not referable to body systems).	S050 786 (93)	3.4 (0.4)
Stomach and abdominal pain, cramps and spasms.	S545 663 (93)	2.9 (0.3)
Shortness of breath	S415 642 (98)	2.8 (0.4)
General weakness	S020 438 (81)	1.9 (0.3)
Accident, not otherwise specified	J810 303 (74)	1.3 (0.3)
Cough.	S440 296 (65)	1.3 (0.3)
Pain, site not referable to a specific body system	S055 254 (64)	1.1 (0.3)
Leg symptoms	S920 232 (51)	1.0 (0.2)
Vertigo–dizziness	S225 220 (54)	0.9 (0.2)
Other symptoms or problems relating to psychological and mental disorders	S165 * ...	0.9 (0.2)
All other reasons ²	5,860 431	25.3 (1.1)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Reason for visit classification (RVC) is based on the patient's own words and coded according to: Schneider D, Appleton L, McLemore T. A reason for visit classification for ambulatory care. National Center for Health Statistics. Vital Health Stat 2(78) 1979. See the 2018 National Hospital Ambulatory Medical Care Survey public-use documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

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

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 11. Primary diagnosis at emergency department visits, by major disease category: United States, 2018

Major disease category and ICD-10-CM code range ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits . . . . .	... 129,974 (7,280)	100.0 ...
Certain infectious and parasitic diseases	A00-B99 3,439 (330)	2.7 (0.2)
Neoplasms.	C00-D49 380 (74)	0.3 (0.1)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50-D89 890 (123)	0.7 (0.1)
Endocrine, nutritional, and metabolic diseases	E00-E89 2,062 (182)	1.6 (0.1)
Mental, behavioral and neurodevelopmental disorders.	F01-F99 4,933 (371)	3.8 (0.3)
Diseases of the nervous system	G00-G99 2,444 (215)	1.9 (0.1)
Diseases of the eye and adnexa	H00-H59 1,366 (156)	1.1 (0.1)
Diseases of the ear and mastoid process	H60-H95 2,305 (204)	1.8 (0.1)
Diseases of the circulatory system	I00-I99 4,511 (342)	3.5 (0.2)
Diseases of the respiratory system	J00-J99 13,829 (1,164)	10.6 (0.6)
Diseases of the digestive system	K00-K95 7,877 (516)	6.1 (0.2)
Diseases of the skin and subcutaneous tissue	L00-L99 4,430 (361)	3.4 (0.2)
Diseases of the musculoskeletal system and connective tissue	M00-M99 9,870 (708)	7.6 (0.3)
Diseases of the genitourinary system	N00-N99 6,834 (475)	5.3 (0.2)
Pregnancy, childbirth and the puerperium	O00-O9A 2,303 (197)	1.8 (0.1)
Symptoms, signs, and abnormal clinical and laboratory findings, not elsewhere classified.	R00-R99 32,860 (1,922)	25.3 (0.6)
Injury, poisoning and certain other consequences of external causes	S00-T88 23,362 (1,542)	18.0 (0.5)
Injuries to the head	S00-S09 5,252 (428)	22.5 (1.1)
Injuries to the neck	S10-S19 1,009 (129)	4.3 (0.5)
Injuries to the thorax	S20-S29 904 (110)	3.9 (0.4)
Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	S30-S39 1,035 (123)	4.4 (0.5)
Injuries to the shoulder and upper arm	S40-S49 1,587 (143)	6.8 (0.6)
Injuries to the elbow and forearm	S50-S59 1,122 (131)	4.8 (0.4)
Injuries to the wrist, hand and fingers	S60-S69 3,032 (259)	13.0 (0.7)
Injuries to the hip and thigh	S70-S79 800 (113)	3.4 (0.4)
Injuries to the knee and lower leg	S80-S89 1,862 (185)	8.0 (0.5)
Injuries to the ankle and foot	S90-S99 2,079 (193)	8.9 (0.5)
Injuries involving multiple body regions or unspecified body region	T07,T14 1,100 (132)	4.7 (0.5)
Effects of foreign body entering through natural orifice	T15-T19 371 (73)	1.6 (0.3)
Burns and corrosions.	T20-T32 416 (81)	1.8 (0.3)
Frostbite.	T33-T34 * ...	0.0 (0.0)
Poisoning by, adverse effect of and underdosing of drugs, medicaments and biological substances	T36-T50 861 (126)	3.7 (0.4)
Toxic effects of substances chiefly nonmedicinal as to source	T51-T65 211 (49)	0.9 (0.2)
Other and unspecified effects of external causes	T66-T78 1,057 (135)	4.5 (0.5)
Certain early complications of trauma	T79 * ...	0.1 (0.0)
Complications of surgical and medical care	T80-T88 644 (95)	2.8 (0.4)
All other diagnoses ² . . . . .	... 5,372 (437)	4.1 (0.3)
Unknown or blank . . . . .	... 910 (186)	0.7 (0.1)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

0.0 Quantity more than zero but less than 0.05.

¹Based on *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD-10-CM). Certain codes have been combined in this table to better describe utilization of ambulatory care services. Web tables presenting diagnosis estimates before 2016 used the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD-9-CM) coding system. Due to substantial differences between ICD-9-CM and ICD-10-CM, caution is advised when comparing diagnosis estimates in this table with those from before 2016.

²Includes certain conditions originating in the perinatal period (P00-P96), congenital malformations, deformations and chromosomal abnormalities (Q00-Q99), external causes of morbidity (V00-Y99), and factors influencing health status and contact with health services (Z00-Z99).

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown.

Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2018

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	129,959 (7,277)	100.0 ...
Certain infectious and parasitic diseases		
Septicemia (sepsis)	549 (111)	0.4 (0.1)
Human immunodeficiency virus syndrome (HIV, HIV+, HIV positive)	* ...	* ...
Viral warts, not sexually transmitted	* ...	* ...
Sexually transmitted infections excluding viral hepatitis and HIV	* ...	*
Unspecified viral infection	1,206 (165)	0.9 (0.1)
Dermatophytosis	* ...	* ...
Candidiasis	* ...	* ...
Other systemic infectious and parasitic diseases	1,170 (142)	0.9 (0.1)
Neoplasms ²		
[Diagnosis groups not shown due to low sample sizes]	... ...	... ...
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism		
Anemias	710 (108)	0.6 (0.1)
Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	* ...	* ...
Endocrine, nutritional and metabolic diseases		
Acquired hypothyroidism	* ...	* ...
Disorders of thyroid gland, excluding acquired hypothyroidism	* ...	* ...
Type 1 diabetes mellitus	147 (41)	0.1 (0.0)
Type 2 diabetes mellitus or unspecified	493 (73)	0.4 (0.1)
Other disorders of endocrine glands	* ...	* ...
Obesity	* ...	* ...
Hyperlipidemias	* ...	* ...
Volume depletion	524 (79)	0.4 (0.1)
Other nutritional deficiencies and metabolic disorders	650 (90)	0.5 (0.1)
Mental, behavioral and neurodevelopmental disorders		
Dementia, excluding Alzheimer's disease	* ...	* ...
Alcohol-related disorders, excluding alcohol-related dementia and chronic alcoholic liver disease	1,021 (128)	0.8 (0.1)
Opioid-related disorders	137 (36)	0.1 (0.0)
Cocaine-related disorders	* ...	* ...
Nicotine dependence	* ...	* ...
Other drug-related disorders excluding other drug-related dementia	391 (71)	0.3 (0.1)
Schizophrenia	215 (48)	0.2 (0.0)
Non-mood psychoses, excluding schizophrenia	329 (73)	0.3 (0.0)
Bipolar disorders, excluding those with depression	215 (56)	0.2 (0.0)
Bipolar disorders, with depression	* ...	* ...
Depressive disorders, excluding bipolar depression and adjustment reaction with depressed mood	733 (102)	0.6 (0.1)
Dysthymic disorder	* ...	* ...
Acute reaction to stress and adjustment reaction, excluding those with depressed mood	218 (56)	0.2 (0.0)
Acute reaction to stress and adjustment reaction with depressed mood	* ...	* ...
Eating disorders	* ...	* ...
Impulse disorders	* ...	* ...

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2018—Con.

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
Mental, behavioral and neurodevelopmental disorders—Con.		
Other mood disorders, nonpsychotic mental disorders, behavioral syndromes, and disorders of adult personality and behavior	1,154 (132)	0.9 (0.1)
Attention-deficit/hyperactivity disorders	* ...	* ...
Oppositional defiant disorder	* ...	* ...
Conduct disorders, excluding oppositional defiant disorder	* ...	* ...
Autism spectrum disorder	* ...	* ...
Other mental disorders	107 (27)	0.1 (0.0)
Diseases of the nervous system		
Alzheimer's disease	* ...	* ...
Migraine	739 (110)	0.6 (0.1)
Transient cerebral ischemic attacks and related syndromes	* ...	* ...
Sleep disorders, excluding sleep apnea (adult, pediatric, obstructive) and non-organic sleep disorders	* ...	* ...
Carpal tunnel syndrome	* ...	* ...
Other disorders of the nervous system	1,047 (127)	0.8 (0.1)
Diseases of the eye and adnexa		
Inflammation and disorders of eyelid	* ...	* ...
Conjunctivitis	502 (74)	0.4 (0.1)
Glaucoma	* ...	* ...
Other disorders of the eye and adnexa	671 (101)	0.5 (0.1)
Diseases of the ear and mastoid process		
Disorders of external ear	349 (61)	0.3 (0.1)
Otitis media and eustachian tube disorders	1,363 (155)	1.0 (0.1)
Other disorders of the ear and mastoid process	592 (97)	0.5 (0.1)
Diseases of the circulatory system		
Heart valve disorders	* ...	* ...
Essential hypertension	1,113 (128)	0.9 (0.1)
Hypertensive heart disease with heart failure	* ...	* ...
Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease or unspecified chronic kidney disease	* ...	* ...
Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end-stage renal disease	* ...	* ...
Hypertensive heart and chronic kidney disease without heart failure with stage 1 through stage 4 chronic kidney disease or unspecified chronic kidney disease	* ...	* ...
Secondary hypertension	* ...	* ...
Hypertensive crisis	* ...	* ...
Angina pectoris not stated as with chronic ischemic heart disease	* ...	* ...
Acute myocardial infarction	269 (70)	0.2 (0.1)
Other acute and subacute ischemic heart disease	* ...	* ...
Coronary atherosclerosis and other chronic ischemic heart disease (with angina pectoris)	* ...	* ...
Pulmonary heart disease and diseases of pulmonary circulation	* ...	* ...
Conduction disorders	* ...	* ...
Cardiac dysrhythmias, excluding ventricular fibrillation	669 (118)	0.5 (0.1)
Cardiac arrest and ventricular fibrillation	* ...	* ...
Heart failure, non-hypertensive	538 (74)	0.4 (0.1)
Pericarditis, endocarditis, myocarditis and cardiomyopathy	* ...	* ...
Other and ill-defined heart disease	* ...	* ...
Cerebrovascular disease	432 (72)	0.3 (0.1)

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2018—Con.

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
Diseases of the circulatory system—Con.		
Diseases of the arteries, arterioles and capillaries	* ...	* ...
Varicose veins of lower extremity	* ...	* ...
Other disorder of circulatory system	578 (90)	0.4 (0.1)
Diseases of the respiratory system		
Streptococcal pharyngitis and tonsillitis	513 (80)	0.4 (0.1)
Acute sinusitis	330 (69)	0.3 (0.1)
Acute pharyngitis, except streptococcal pharyngitis	1,151 (130)	0.9 (0.1)
Acute tonsillitis, except streptococcal tonsillitis	* ...	* ...
Influenza	1,625 (296)	1.3 (0.2)
Pneumonia	1,485 (137)	1.1 (0.1)
Acute bronchitis and bronchiolitis	1,377 (198)	1.1 (0.1)
Other acute respiratory infections	2,784 (361)	2.1 (0.2)
Allergic rhinitis	* ...	* ...
Chronic sinusitis	234 (54)	0.2 (0.0)
Chronic and unspecified bronchitis	571 (90)	0.4 (0.1)
Bronchiectasis, emphysema and other chronic obstructive pulmonary disease, including chronic obstructive asthma	873 (112)	0.7 (0.1)
Asthma, excluding chronic obstructive asthma	1,629 (183)	1.3 (0.1)
Respiratory failure	169 (47)	0.1 (0.0)
Croup	295 (68)	0.2 (0.0)
Other diseases of the respiratory system	490 (84)	0.4 (0.0)
Diseases of the digestive system		
Diseases of the teeth and supporting structures, excluding dentofacial anomalies and disorders of the jaw	1,581 (166)	1.2 (0.1)
Esophagitis without gastroesophageal reflux disease	* ...	* ...
Gastroesophageal reflux disease (with esophagitis)	242 (44)	0.2 (0.0)
Other diseases of the esophagus	* ...	* ...
Ulcers of stomach and small intestine	* ...	* ...
Gastritis and duodenitis	440 (86)	0.3 (0.1)
Appendicitis	231 (61)	0.2 (0.1)
Diaphragmatic hernia	* ...	* ...
Hernias of abdominal cavity, except diaphragmatic hernia	215 (47)	0.2 (0.0)
Crohn's disease and ulcerative colitis	* ...	* ...
Other and unspecified noninfectious enteritis and colitis	940 (124)	0.7 (0.1)
Intestinal obstructions	318 (57)	0.2 (0.0)
Diverticula of intestine	325 (63)	0.3 (0.1)
Constipation	919 (139)	0.7 (0.1)
Anal and rectal diseases	296 (53)	0.2 (0.1)
Hemorrhoids and perianal venous thrombosis	* ...	* ...
Alcoholic liver disease	* ...	* ...
Other diseases of the liver	* ...	* ...
Disorders of gallbladder and biliary tract	445 (76)	0.3 (0.1)
Diseases of the pancreas	312 (54)	0.2 (0.0)
Unspecified gastrointestinal bleeding	436 (68)	0.3 (0.1)
Other diseases of the digestive system	368 (72)	0.3 (0.1)
Diseases of the skin and subcutaneous tissue		
Cellulitis	1,447 (151)	1.1 (0.1)
Cutaneous abscess	941 (107)	0.7 (0.1)
Other local infections of the skin and subcutaneous tissue	465 (80)	0.4 (0.1)
Contact dermatitis and other eczema	217 (47)	0.2 (0.0)
Psoriasis and other similar disorders	* ...	* ...
Urticaria	346 (62)	0.3 (0.1)
Other inflammatory conditions of skin and subcutaneous tissue	469 (84)	0.4 (0.1)
Actinic keratosis and other sun exposure-related disorders	* ...	* ...
Acne	* ...	* ...

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2018—Con.

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
Diseases of the skin and subcutaneous tissue—Con.		
Sebaceous cyst	* ...	* ...
Corns, callosities and other hypertrophic and atrophic skin condition	* ...	* ...
Pressure ulcers	* ...	* ...
Other disorders of the skin and subcutaneous tissue	343 (68)	0.3 (0.1)
Diseases of the musculoskeletal system and connective tissue		
Rheumatoid arthritis	* ...	* ...
Infectious and inflammatory arthropathies, excluding rheumatoid and juvenile arthritis	281 (55)	0.2 (0.0)
Osteoarthritis	* ...	* ...
Acquired deformities of fingers and toes	* ...	* ...
Internal derangement of knee	* ...	* ...
Other joint disorders	2,498 (224)	1.9 (0.1)
Spinal stenosis	* ...	* ...
Spondylopathies, excluding spinal stenosis	* ...	* ...
Intervertebral disc disorders	* ...	* ...
Low back pain, unspecified	1,164 (138)	0.9 (0.1)
Other conditions of the spine and back, excluding low back pain	2,497 (244)	1.9 (0.1)
Synovitis and tenosynovitis	* ...	* ...
Soft tissue disorders related to use, overuse and pressure	259 (47)	0.2 (0.0)
Ganglion and cyst of synovium, tendon and bursa	* ...	* ...
Myalgia and myositis, unspecified	216 (50)	0.2 (0.0)
Disorders of bone and cartilage, excluding osteoporosis	224 (61)	0.2 (0.0)
Generalized pain and acute and chronic pain syndromes	468 (63)	0.4 (0.0)
Other diseases of the musculoskeletal system and connective tissue	2,182 (219)	1.7 (0.1)
Diseases of the genitourinary system		
Nephritis, nephrotic syndrome, and nephrosis	* ...	* ...
Infections of kidney	489 (77)	0.4 (0.1)
Acute kidney failure	394 (87)	0.3 (0.1)
Chronic kidney disease, excluding end-stage renal disease	* ...	* ...
End-stage renal disease	* ...	* ...
Unspecified kidney failure, including uremia, not otherwise specified	* ...	* ...
Calculus of kidney and ureter	877 (94)	0.7 (0.1)
Cystitis	578 (108)	0.4 (0.1)
Urinary tract infection, site not specified	1,877 (182)	1.4 (0.1)
Other diseases of the urinary system	428 (69)	0.3 (0.1)
Benign prostatic hyperplasia	* ...	* ...
Disorders of prepuce	* ...	* ...
Other disorders of male genital organs	355 (64)	0.3 (0.1)
Unspecified lump or mass in breast	* ...	* ...
Disorders of the breast, excluding unspecified lump or mass	* ...	* ...
Inflammatory disease of female pelvic organs	427 (85)	0.3 (0.1)
Endometriosis	* ...	* ...
Other noninflammatory disorders of female genital organs	335 (60)	0.3 (0.1)
Disorders of menstruation and abnormal bleeding	524 (88)	0.4 (0.1)
Menopausal and postmenopausal disorders	* ...	* ...
Other disorders of female genital tract	* ...	* ...
Complications of pregnancy, childbirth and the puerperium		
Non-uterine pregnancy	* ...	* ...
Missed abortion	* ...	* ...
Supervision of high-risk pregnancy	* ...	* ...

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2018—Con.

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
Complications of pregnancy, childbirth and the puerperium—Con.		
Pre-existing diabetes mellitus, types 1 and 2, complicating pregnancy	* ...	* ...
Early or threatened labor	* ...	* ...
Other complications of pregnancy	1,990 (185)	1.5 (0.1)
Other complications of pregnancy, childbirth and the puerperium	* ...	* ...
Certain other conditions originating in the perinatal period	* ...	* ...
Congenital anomalies		
Congenital anomalies	* ...	* ...
Symptoms, signs, and ill-defined conditions		
Abnormal heart beat and heart sounds	770 (113)	0.6 (0.1)
Epistaxis	358 (63)	0.3 (0.1)
Cough, unspecified	1,223 (164)	0.9 (0.1)
Dyspnea and respiratory abnormalities	1,358 (147)	1.0 (0.1)
Chest pain	5,535 (445)	4.3 (0.2)
Abdominal pain	6,081 (418)	4.7 (0.2)
Unspecified jaundice, edema and other non-specific skin symptoms	1,442 (139)	1.1 (0.1)
Hematuria	182 (42)	0.1 (0.0)
Symptoms involving the urinary system, excluding hematuria and urinary incontinence	716 (89)	0.6 (0.1)
Vertigo and lightheadedness	1,019 (136)	0.8 (0.1)
Fever of other and unknown origin	1,929 (260)	1.5 (0.1)
Headache	1,873 (182)	1.4 (0.1)
Malaise and fatigue	729 (103)	0.6 (0.1)
Syncope and collapse	1,145 (111)	0.9 (0.1)
Convulsions and seizures, not elsewhere classified	696 (105)	0.5 (0.1)
Unspecified nausea, vomiting, diarrhea	3,026 (270)	2.3 (0.2)
Other symptoms, signs, abnormal findings and ill-defined conditions	4,645 (387)	3.6 (0.2)
Injury and poisoning		
Injury of eye and orbit	269 (59)	0.2 (0.0)
Head injury, not otherwise specified	1,323 (181)	1.0 (0.1)
Contusions (bruise, hematoma)	2,131 (225)	1.6 (0.1)
Contusions (bruise, hematoma) of face and head	583 (96)	0.4 (0.1)
Superficial injuries, excluding contusions (abrasion, blister, external constriction, splinter, superficial bite)	853 (105)	0.6 (0.1)
Open wound of head	1,689 (164)	1.3 (0.1)
Open wound of wrist, hand and fingers	1,178 (138)	1.0 (0.1)
Open wound of hip and lower limb	570 (85)	0.4 (0.1)
Open wound, excluding head, hand, fingers, lower limb and internal organs	358 (55)	0.3 (0.1)
Traumatic fracture of shoulder and upper arm (clavicle, scapula, humerus)	585 (85)	0.5 (0.1)
Traumatic fracture of forearm (radius and ulna)	543 (86)	0.4 (0.1)
Traumatic fracture of wrist, hand and fingers (carpal, metacarpals, phalanges)	488 (84)	0.4 (0.1)
Traumatic fracture of hip (head and neck of femur)	173 (54)	0.1 (0.0)
Traumatic fracture of ankle (medial malleolus, lateral malleolus, bimalleolar, trimalleolar)	145 (58)	0.1 (0.0)
Traumatic fracture of leg, foot and toes, excluding hip and ankle (femur, patella, tibia, fibula, tarsals, metatarsals, phalanges)	850 (108)	0.7 (0.1)
Other traumatic fractures (skull, facial bones, vertebrae, ribs, sternum, pelvis)	696 (88)	0.5 (0.1)
Tear of medial meniscus, current injury	* ...	* ...

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2018—Con.

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
Injury and poisoning—Con.		
Dislocations, excluding tear of medial meniscus	393 (68)	0.3 (0.1)
Sprains and strains of neck	909 (128)	0.7 (0.1)
Sprains and strains of back	760 (101)	0.6 (0.1)
Sprains and strains of wrist and hand	513 (92)	0.4 (0.1)
Sprains and strains of knee	249 (59)	0.2 (0.0)
Strains and sprains of ankle	964 (143)	0.7 (0.1)
Sprain and strains, excluding neck, back, wrist, hand, knee, ankle	730 (77)	0.6 (0.1)
Concussion	302 (52)	0.2 (0.0)
Intracranial injury, excluding concussion	226 (67)	0.2 (0.1)
Internal injury of chest, abdomen and pelvis	* ...	* ...
Other injuries, excluding burns and poisonings	2,625 (232)	2.0 (0.1)
Burns and corruptions, external and internal, excluding sunburn	416 (81)	0.3 (0.1)
Poisoning (overdose or wrong substance given or taken in error) due to drugs and biological substances, accidental (unintentional)	444 (88)	0.3 (0.1)
Poisoning (overdose or wrong substance given or taken in error) due to drugs and biological substances, intentional self-harm	219 (57)	0.2 (0.0)
Poisoning (overdose or wrong substance given or taken in error) due to drugs and biological substances, undetermined intent	* ...	* ...
Adverse effects (of correct substance properly administered) of drugs and biological substances	186 (56)	0.1 (0.0)
Toxic effects of substances chiefly non-medical, accidental (unintentional)	192 (47)	0.1 (0.0)
Toxic effects of substances chiefly non-medical, intentional self-harm	* ...	* ...
Toxic effects of substances chiefly non-medical, undetermined	* ...	* ...
Other and unspecified effects of external causes	1,071 (135)	0.8 (0.1)
Complications of surgical and medical care	980 (127)	0.8 (0.1)
External-cause codes		
Accidental (unintentional) injury due to slipping, tripping, stumbling or fall	* ...	* ...
Supplementary classifications		
Encounter for general adult medical examinations, including routine gynecological examination	252 (61)	0.2 (0.1)
Encounter for routine child examination, excluding newborns	* ...	* ...
Encounter and observation for suspected conditions ruled out	490 (101)	0.4 (0.1)
Encounter for specific procedures and aftercare and follow- up examination after completed treatment, excluding for injuries	742 (95)	0.6 (0.1)
Potential health hazards related to communicable diseases	* ...	* ...
Encounter for contraceptive management	* ...	* ...
Other encounter related to pregnancy, excluding incidental pregnancy	* ...	* ...
Potential health hazards related to personal and family history, excluding personal history of pulmonary embolism and personal history of cerebral infarction or transient ischemic attack without residual deficits	* ...	* ...

See footnotes at end of table.

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2018—Con.

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
Supplementary classifications—Con.		
Other factors influencing health status and contact with health services	1,071 (120)	0.8 (0.1)
Uncodable entries ³	1,859 (242)	1.4 (0.2)
Unknown or blank	910 (186)	0.7 (0.1)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

0.0 Quantity more than zero but less than 0.05.

¹Based on *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD-10-CM). Codes have been combined in this table according to the NCHS Diagnosis Master Category List (DMCL). For a list of ICD-10-CM codes corresponding to a specific diagnosis group, refer to the DMCL document, available from: https://www.cdc.gov/nchs/data/ahcd/Reclass_ICD_10_CM_tables.pdf. Web tables presenting diagnosis estimates before 2016 used the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD-9-CM) coding system. Due to substantial differences between ICD-9-CM and ICD-10-CM, caution is advised when comparing diagnosis estimates in this table with those from before 2016.

²Diagnosis groups for this chapter are not shown due to low sample sizes.

³Includes illegible diagnosis, left before being seen, walked out, eloped, left against medical advice, and entries of "none," "no diagnosis," "no disease," and "healthy" as the only entry in the diagnosis item.

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 13. Presence of chronic conditions at emergency department visits: United States, 2018

Chronic condition ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	129,974 (7,280)	100.0 ...
Alcohol misuse, abuse, or dependence	4,209 (357)	3.2 (0.3)
Alzheimer's disease or dementia	1,788 (214)	1.4 (0.1)
Asthma	13,335 (932)	10.3 (0.4)
Cancer	4,884 (433)	3.8 (0.3)
Cerebrovascular disease or history of stroke or transient ischemic attack	4,856 (431)	3.7 (0.3)
Chronic kidney disease	4,494 (481)	3.5 (0.3)
Chronic obstructive pulmonary disease	8,107 (650)	6.2 (0.4)
Congestive heart failure	5,129 (412)	4.0 (0.3)
Coronary artery disease, ischemic heart disease or history of myocardial infarction	9,355 (710)	7.2 (0.4)
Depression	14,516 (1,114)	11.2 (0.6)
Diabetes mellitus—Type 1	1,027 (180)	0.8 (0.1)
Diabetes mellitus—Type 2	7,953 (783)	6.1 (0.5)
Diabetes mellitus—Type unspecified	7,611 (764)	5.9 (0.5)
End-stage renal disease	1,326 (143)	1.0 (0.1)
History of pulmonary embolism, deep vein thrombosis, or venous thromboembolism	2,089 (232)	1.6 (0.2)
HIV (human immunodeficiency virus) or AIDS (acquired immune deficiency syndrome)	687 (117)	0.5 (0.1)
Hyperlipidemia	13,138 (1,120)	10.1 (0.7)
Hypertension	35,220 (2,341)	27.1 (1.0)
Obesity	7,351 (841)	5.7 (0.5)
Obstructive sleep apnea	3,320 (303)	2.6 (0.2)
Osteoporosis	1,316 (152)	1.0 (0.1)
Substance abuse or dependence	8,016 (1,302)	6.2 (0.9)
None of the above	61,117 (4,152)	47.0 (1.4)
Blank	*1,990 (713)	* ...

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Presence of chronic conditions is based on the checklist of chronic conditions and reported diagnoses.

NOTES: Numbers may not add to totals due to rounding. Total exceeds "All visits" and percentage exceeds 100% because more than one chronic condition may be reported per visit. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 14. Injury visits to emergency departments, by selected patient and hospital characteristics: United States, 2018

Patient and hospital characteristics	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons ¹ (standard error)
All injury visits ²	35,014 (2,047)	100.0 ...	10.9 (0.7)
Age group (years)			
Under 15	7,528 (866)	21.5 (2.0)	12.4 (1.4)
Under 1	511 (95)	1.5 (0.3)	13.3 (2.5)
1–4	2,620 (381)	7.5 (1.0)	16.4 (2.4)
5–14	4,397 (491)	12.6 (1.1)	10.7 (1.2)
15–24	4,740 (397)	13.5 (0.9)	11.3 (0.9)
25–44	9,452 (696)	27.0 (1.1)	11.1 (0.8)
45–64	7,714 (511)	22.0 (0.8)	9.3 (0.6)
65 and over	5,579 (498)	15.9 (1.1)	10.9 (1.0)
65–74	2,570 (273)	7.3 (0.6)	8.5 (0.9)
75 and over	3,009 (277)	8.6 (0.7)	14.4 (1.3)
Sex and age group (years)			
Female	17,689 (1,126)	50.5 (1.1)	10.7 (0.7)
Under 15	3,364 (388)	9.6 (0.9)	11.3 (1.3)
15–24	2,371 (249)	6.8 (0.6)	11.4 (1.2)
25–44	4,682 (389)	13.4 (0.7)	10.9 (0.9)
45–64	3,951 (301)	11.3 (0.6)	9.2 (0.7)
65–74	1,469 (197)	4.2 (0.5)	9.1 (1.2)
75 and over	1,853 (195)	5.3 (0.5)	15.3 (1.6)
Male	17,325 (1,056)	49.5 (1.1)	11.0 (0.7)
Under 15	4,165 (515)	11.9 (1.2)	13.4 (1.7)
15–24	2,369 (208)	6.8 (0.5)	11.2 (1.0)
25–44	4,770 (382)	13.6 (0.8)	11.3 (0.9)
45–64	3,763 (288)	10.8 (0.6)	9.3 (0.7)
65–74	1,102 (127)	3.2 (0.3)	7.8 (0.9)
75 and over	1,156 (136)	3.3 (0.3)	13.2 (1.6)
Ownership			
Voluntary	22,260 (1,841)	63.6 (4.3)	6.9 (0.6)
Proprietary	7,715 (1,408)	22.0 (3.7)	2.4 (0.4)
Government	5,038 (1,269)	14.4 (3.4)	1.6 (0.4)
Geographic region			
Northeast	5,802 (747)	16.6 (2.1)	10.5 (1.4)
Midwest	7,146 (881)	20.4 (2.3)	10.6 (1.3)
South	14,086 (1,354)	40.2 (3.0)	11.5 (1.1)
West	7,979 (1,013)	22.8 (2.6)	10.4 (1.3)
Metropolitan status ³			
Metropolitan statistical area	30,289 (2,107)	86.5 (2.2)	10.8 (0.8)
Nonmetropolitan statistical area	4,725 (751)	13.5 (2.2)	11.3 (1.8)

... Category not applicable.

¹Visit rates for age group, sex, and region are based on the July 1, 2018, set of estimates of the U.S. civilian noninstitutionalized population developed by the U.S. Census Bureau, Population Division.

²The definition of injury changed in 2016 due to the switch from the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM) coding system for diagnosis data to the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM) coding system. Before 2016, injury visits were based on ICD–9–CM. In 2018, injury visits are based on ICD–10–CM and information indicating that the visit is related to an injury, trauma, overdose, or poisoning according to the Patient Record form (PRF) item, "Is this visit related to an injury/trauma, overdose/poisoning, or adverse effect of medical/surgical treatment?" and further consideration of values for visits with no concrete evidence of injury. "All injury visits" includes any-listed reason for visit and diagnosis codes related to injury and poisoning. Injury visits do not include adverse effects and complication codes. Using this definition, injury visits represent 26.9% of all emergency department visits. For more details, see the 2018 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

³Population estimates by metropolitan statistical area (MSA) status are based on data from the 2018 National Health Interview Survey, compiled according to the Office of Management and Budget's definition of core-based statistical areas as of February 2013. For more details about MSA definitions, see <https://www.census.gov/programs-surveys/metro-micro.html>.

NOTE: Numbers may not add to totals due to rounding.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 15. Injury visits to emergency departments, by race, age, and ethnicity: United States, 2018

Patient characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons ¹ (standard error)
All injury visits ²	35,014 (2,047)	100.0 ...	10.9 (0.7)
Race ³ and age group (years)			
White	24,869 (1,564)	71.0 (1.7)	10.1 (0.6)
Under 15	5,279 (650)	15.1 (1.5)	12.1 (1.5)
15–24	3,144 (301)	9.0 (0.8)	10.2 (1.0)
25–44	6,296 (477)	18.0 (1.0)	10.0 (0.8)
45–64	5,546 (393)	15.8 (0.7)	8.4 (0.6)
65–74	1,928 (223)	5.5 (0.5)	7.6 (0.9)
75 and over	2,676 (266)	7.6 (0.7)	15.0 (1.5)
Black or African American	8,570 (795)	24.5 (1.7)	20.2 (1.9)
Under 15	1,829 (321)	5.2 (0.9)	19.9 (3.5)
15–24	1,341 (144)	3.8 (0.4)	21.5 (2.3)
25–44	2,734 (343)	7.8 (0.8)	23.0 (2.9)
45–64	1,886 (224)	5.4 (0.6)	18.3 (2.2)
65–74	509 (88)	1.5 (0.2)	16.8 (2.9)
75 and over	272 (59)	0.8 (0.2)	15.3 (3.3)
Other ⁴	1,574 (221)	4.5 (0.6)	4.8 (0.7)
Ethnicity ³			
Hispanic	5,296 (588)	15.1 (1.4)	8.9 (1.0)
Not Hispanic	29,718 (1,765)	84.9 (1.4)	11.3 (0.7)
White	19,928 (1,291)	56.9 (1.9)	10.2 (0.7)
Black or African American	8,327 (770)	23.8 (1.6)	21.0 (1.9)
Other ⁴	1,462 (214)	4.2 (0.6)	5.1 (0.7)

... Category not applicable.

¹Visit rates are based on the July 1, 2018, estimates of the U.S. civilian noninstitutional population developed by the U.S. Census Bureau, Population Division.

²The definition of injury changed in 2016 due to the switch from the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD–9–CM) coding system for diagnosis data to the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM) coding system. Before 2016, injury visits were based on ICD–9–CM. In 2018, injury visits are based on ICD–10–CM and information indicating that the visit is related to an injury, trauma, overdose, or poisoning according to the Patient Record form (PRF) item, "Is this visit related to an injury/trauma, overdose/poisoning, or adverse effect of medical/surgical treatment?" and further consideration of values for visits with no concrete evidence of injury. "All injury visits" includes any-listed reason for visit and diagnosis codes related to injury and poisoning. Injury visits do not include adverse effects and complication codes. Using this definition, injury visits represent 26.9% of all emergency department visits. For more details, see the 2018 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

³The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2018, race data were missing for 19.4% of injury visits, and ethnicity data were missing for 22.4% of injury visits. The National Center for Health Statistics uses model-based single imputation for NHAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white or black. The imputation technique is detailed in the 2018 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

⁴Includes the categories of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 16. Emergency department visits related to injury, poisoning, and adverse effect, by intent: United States, 2018

Intent ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
All injury visits related to injury, poisoning, and adverse effect ²	37,913 (2,220)	100.0 ...
Unintentional	24,482 (1,605)	64.6 (1.4)
Self-harm	312 (73)	0.8 (0.2)
Assault	1,167 (119)	3.1 (0.3)
Legal intervention or war	* ...	* ...
Undetermined or other ³	726 (121)	1.9 (0.3)
Blank cause	11,159 (773)	29.4 (1.4)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Based on the proposed *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD-10-CM) External Cause of Injury Matrix. For more information, see the report available from: https://www.cdc.gov/injury/wisqars/pdf/ICD-10-CM_External_Cause_Injury_Codes-a.pdf.

²The definition of visits related to injury, poisoning, and adverse effects changed in 2016 due to the switch from the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD-9-CM) coding system for diagnosis data to the ICD-10-CM coding system. Before 2016, injury visits were based on ICD-9-CM. Starting in 2016, injury visits are based on ICD-10-CM and information indicating that the visit is related to an injury, trauma, overdose, poisoning, or adverse effect of medical or surgical treatment according to the Patient Record form (PRF) item, "Is this visit related to an injury/trauma, overdose/poisoning, or adverse effect of medical/surgical treatment?" and further consideration of values for visits with no concrete evidence of injury. Using this definition, injury visits accounted for 29.2% (standard error = 0.5) of all emergency department visits in 2018.

³Other includes certain diagnosis codes for injury visits not captured using the ICD-10-CM external-cause matrix. Common diagnoses in this group include medical and surgical complications, activity of person seeking health care (such as a heart attack while shoveling snow, which resulted from, or was contributed to, by the activity), and place of occurrence of external cause. For more details, see the 2018 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 17. Emergency department visits related to injury, poisoning, and adverse effect, by mechanism: United States, 2018

Intent ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
All injury visits related to injury, poisoning, and adverse effect ²	37,913 (2,220)	100.0 ...
Cut or pierce	1,602 (163)	4.2 (0.4)
Drowning or submersion	* ...	0.0 (0.0)
Fall	9,941 (723)	26.2 (0.9)
Fire or burn	418 (80)	1.1 (0.2)
Fire or flame	* ...	0.1 (0.1)
Hot object or substance	384 (78)	1.0 (0.2)
Firearm	* ...	0.3 (0.1)
Machinery	* ...	0.3 (0.1)
All transportation	4,602 (347)	12.1 (0.6)
Motor vehicle—traffic	3,398 (270)	9.0 (0.5)
Motor vehicle—nontraffic	164 (42)	0.4 (0.1)
Pedal cyclist, other	199 (43)	0.5 (0.1)
Pedestrian, other	* ...	0.2 (0.1)
Other land transport	752 (127)	2.0 (0.3)
Other transport	* ...	0.0 (0.0)
Natural or environmental ³	1,096 (140)	2.9 (0.3)
Overexertion	1,719 (169)	4.5 (0.3)
Struck by or against	3,833 (276)	10.1 (0.5)
Other specified ⁴	734 (104)	1.9 (0.3)
Unspecified or other ⁵	2,473 (251)	6.5 (0.5)
Blank cause	11,159 (773)	29.4 (1.4)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

0.0 Quantity more than zero but less than 0.05.

¹Based on the proposed *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD-10-CM) External Cause of Injury Matrix. For more information, see the report available from: https://www.cdc.gov/injury/wisqars/pdf/ICD-10-CM_External_Cause_Injury_Codes-a.pdf.

²The definition of visits related to injury, poisoning, and adverse effects changed in 2016 due to the switch from the *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD-9-CM) coding system for diagnosis data to the ICD-10-CM coding system. Before 2016, injury visits were based on ICD-9-CM. Starting in 2016, injury visits are based on ICD-10-CM and information indicating that the visit is related to an injury, trauma, overdose, poisoning, or adverse effect of medical or surgical treatment according to the Patient Record Form (PRF) item, "Is this visit related to an injury/trauma, overdose/poisoning, or adverse effect of medical/surgical treatment?" and further consideration of values for visits with no concrete evidence of injury. Using this definition, injury visits accounted for 29.2% (standard error = 0.5) of all emergency department visits in 2018.

³Includes bites and stings (venomous and nonvenomous), natural or environmental, and other.

⁴Includes child or adult abuse, foreign body, classifiable, and not elsewhere classifiable.

⁵Other includes certain diagnosis codes for injury visits not captured using the ICD-10-CM external-cause matrix. Common diagnoses in this group include medical and surgical complications, activity of person seeking health care (such as a heart attack while shoveling snow, which resulted from, or was contributed to, by the activity), and place of occurrence of external cause. For more details, see the 2018 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NHAMCS/doc-ed18-508.pdf.

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 18. Selected diagnostic and screening services ordered or provided at emergency department visits: United States, 2018

Diagnostic and screening services ordered or provided	Number of visits ¹ (standard error) in thousands	Percent distribution (standard error)
All visits	12,9974 (7,280)	... ..
One or more diagnostic or screening service listed	97,496 (5,746)	75.0 (1.2)
None	30,217 (2,198)	23.2 (1.0)
Blank	2,261 (656)	1.7 (0.5)
Blood tests		
Complete blood count	53,819 (3,530)	41.4 (1.5)
Creatinine or renal function panel	5,010 (1,093)	3.9 (0.9)
Glucose, serum	7,664 (782)	5.9 (0.6)
Electrolytes	1,519 (355)	1.2 (0.3)
Prothrombin time (PT/PTT/INR) ²	13,636 (1,457)	10.5 (0.9)
Liver enzymes or hepatic function panel	4,789 (664)	3.7 (0.5)
Cardiac enzymes	6,637 (903)	5.1 (0.7)
Comprehensive metabolic panel	39,549 (3,098)	30.4 (1.7)
Blood culture	6,429 (654)	4.9 (0.4)
Brain natriuretic peptide	4,862 (551)	3.7 (0.4)
D-dimer	3,358 (409)	2.6 (0.3)
Arterial blood gases	2,595 (357)	2.0 (0.3)
Blood alcohol concentration	3,292 (429)	2.5 (0.3)
Basic metabolic panel	14,738 (1,563)	11.3 (1.1)
Lactate	4,896 (571)	3.8 (0.4)
Other blood test	35,066 (2,894)	27 (1.4)
Any blood test listed	62,007 (3,762)	47.7 (1.4)
Imaging		
X-ray	46,642 (3,062)	35.9 (0.9)
Computed tomography (CT) scan	25,437 (1,715)	19.6 (0.8)
Abdomen or pelvis	10,656 (767)	8.2 (0.4)
Chest	3,694 (350)	2.8 (0.2)
Head	10,695 (791)	8.2 (0.4)
Other	4,507 (442)	3.5 (0.3)
Intravenous (IV) contrast with CT	7,917 (714)	6.1 (0.4)
Ultrasound	7,119 (607)	5.5 (0.4)
Magnetic resonance imaging (MRI) scan	1,322 (211)	1.0 (0.2)
IV contrast with MRI	*221 (70)	0.2 (0.1)
Other Imaging	1,887 (435)	1.5 (0.3)
Any imaging	66,209 (4,126)	50.9 (1.1)
Examinations and tests		
Cardiac monitor	10,157 (1,172)	7.8 (0.8)
Urinalysis or urine dipstick	34,041 (2,307)	26.2 (1.1)
Electrocardiogram	28,809 (2,010)	22.2 (1.0)
Urine culture	14,457 (1,426)	11.1 (0.9)
Pregnancy or HCG test ³	12,373 (1,026)	9.5 (0.5)
Toxicology screen	6,898 (684)	5.3 (0.4)
Influenza test	7,348 (1,030)	5.7 (0.7)
Throat culture	1,883 (272)	1.4 (0.2)
Wound culture	703 (103)	0.5 (0.1)
Other culture	1,919 (244)	1.5 (0.2)
HIV test ⁴	1,019 (179)	0.8 (0.1)
Other test or service	20,318 (2,388)	15.6 (1.6)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Total exceeds "All visits" and percentage exceeds 100% because more than one service may be reported per visit.²PT is prothrombin time, PTT is partial thromboplastin time, and INR is international normalized ratio.³HCG is human chorionic gonadotropin.⁴HIV is human immunodeficiency virus.

NOTES: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 19. Selected procedures at emergency department visits: United States, 2018

Procedure performed	Number of visits ¹ (standard error) in thousands	Percent (standard error)
All visits	129,974 (7,280)	... ..
One or more procedures listed	57,884 (4,050)	44.5 (1.7)
Intravenous fluids	34,918 (2,581)	26.9 (1.3)
Cast, splint, wrap	5,730 (453)	4.4 (0.2)
Suturing or staples	2,866 (236)	2.2 (0.2)
Incision and drainage	1,394 (188)	1.1 (0.1)
Nebulizer therapy	4,925 (516)	3.8 (0.3)
Bladder catheter	1,476 (162)	1.1 (0.1)
Pelvic examination	1,183 (155)	0.9 (0.1)
Central line	*598 (190)	0.5 (0.1)
Cardiopulmonary resuscitation (CPR)	* ...	0.1 (0.0)
Endotracheal intubation	413 (89)	0.3 (0.1)
Skin adhesives	1,192 (161)	0.9 (0.1)
BiPAP or CPAP ²	677 (193)	0.5 (0.1)
Lumbar puncture	255 (56)	0.2 (0.0)
Other ³	15,857 (2,692)	12.2 (1.9)
None ⁴	68,101 (4,484)	52.4 (1.8)
Blank ⁵	3,990 (801)	3.1 (0.6)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

0.0 Quantity more than zero but less than 0.05.

¹Total exceeds "All visits" and percentage exceeds 100% because more than one procedure may be reported per visit.

²BiPAP is variable or bilevel positive airway pressure, and CPAP is continuous positive airway pressure.

³Includes all other procedures not listed above.

⁴The "None" checkbox was marked on the Patient Record form (PRF).

⁵No checkboxes were marked on PRF.

NOTES: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 20. Medication therapy and number of medications mentioned at emergency department visits: United States, 2018

Medication therapy ¹	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	129,974 (7,280)	100.0 ...
Visits with mention of medication ²	103,352 (6,282)	79.5 (0.9)
Visits without mention of medication	26,622 (1,548)	20.5 (0.9)
Number of medications provided or prescribed ³		
0 medication	26,622 (1,548)	20.5 (0.9)
1 medication	28,012 (1,798)	21.6 (0.6)
2 medications	24,110 (1,384)	18.5 (0.5)
3 medications	17,802 (1,195)	13.7 (0.4)
4 medications	12,229 (1,017)	9.4 (0.4)
5 medications	7,384 (624)	5.7 (0.3)
6 medications	4,688 (409)	3.6 (0.2)
7 medications	2,696 (274)	2.1 (0.2)
8 medications	1,764 (193)	1.4 (0.1)
9 medications	1,000 (158)	0.8 (0.1)
10 medications	881 (155)	0.7 (0.1)
11 medications	544 (137)	0.4 (0.1)
12 medications	474 (93)	0.4 (0.1)
13 medications or more	1,769 (415)	1.4 (0.3)

... Category not applicable.

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

²Visits at which one or more drugs were given in the emergency department (ED) or prescribed at discharge (up to 30 per visit); also defined as drug visit.

³A total of 329,059,000 drug mentions occurred at ED visits in 2018. The average drug mention rate was 2.5 drug mentions per ED visit. For visits with at least one drug mention, the average drug visit rate was 3.2 drugs per visit.

NOTE: Numbers may not add to totals due to rounding.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 21. Twenty most frequently mentioned drugs at emergency department visits, by therapeutic drug category: United States, 2018

Drug category ¹	Number of occurrences (standard error) in thousands	Percent of drug mention ² (standard error)
Analgesics ³	87,804 (5,943)	26.1 (0.7)
Minerals and electrolytes	35,801 (2,999)	10.7 (0.4)
Antiemetic/antivertigo agents	33,079 (2,448)	9.9 (0.3)
Miscellaneous respiratory agents	27,988 (2,494)	8.3 (0.4)
Anxiolytics, sedatives, and hypnotics	13,855 (1,087)	4.1 (0.2)
Bronchodilators	13,171 (1,063)	3.9 (0.2)
Adrenal cortical steroids	11,528 (1,044)	3.4 (0.2)
Cephalosporins	10,294 (793)	3.1 (0.2)
Antihistamines	9,856 (934)	2.9 (0.2)
Anticonvulsants	9,474 (963)	2.8 (0.2)
Penicillins	7,464 (597)	2.2 (0.1)
Dermatological agents	7,325 (755)	2.2 (0.2)
Antiarrhythmic agents	6,760 (594)	2.0 (0.1)
Local injectable anesthetics	6,509 (559)	1.9 (0.1)
Muscle relaxants	6,485 (648)	1.9 (0.1)
Radiocontrast agents	6,279 (636)	1.9 (0.1)
Antiplatelet agents	5,938 (665)	1.8 (0.1)
Antiparkinson agents	5,340 (530)	1.6 (0.1)
Laxatives	5,192 (602)	1.6 (0.1)
Proton pump inhibitors	3,928 (436)	1.2 (0.1)

¹Based on Cerner Multum second-level therapeutic drug category (available from: <https://www.cerner.com/solutions/drug-database>).

²Based on an estimated 368,454,000 drug mentions at emergency department (ED) visits in 2018. Drug mentions are medications given in EDs or prescribed at discharge.

³Includes narcotics (8.7%), nonsteroidal anti-inflammatory drugs (10.4%), and other analgesics (including salicylates, analgesic combinations, antimigraine agents, Cox-2 inhibitors, and miscellaneous analgesics) (7.0%).

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 22. Twenty most frequently mentioned drugs at emergency department visits: United States, 2018

Drug name ¹	Number of drug mentions (standard error) in thousands	Percent distribution (standard error)	Percent of drug mention (standard error)					Unknown ²	Therapeutic drug category ³
			Total	Given in emergency department	Prescribed at discharge	Both given in emergency department and prescribed at discharge			
All drug mentions	335,962 (23,910)	100.0 (0.0)	100.0	58.6 (1.9)	29.8 (2.5)	11.0 (1.2)	0.6 (0.3)	...	
Sodium chloride	27,938 (2,487)	8.3 (0.4)	100.0	99.4 (0.1)	0.3 (0.1)	0.2 (0.1)	0.1 (0.1)	Minerals and electrolytes, miscellaneous respiratory agents	
Ibuprofen	18,630 (1,495)	5.5 (0.4)	100.0	31.6 (2.3)	44.7 (2.7)	23.3 (1.9)	0.4 (0.2)	Analgesics	
Ondansetron	18,424 (1,345)	5.5 (0.2)	100.0	66.1 (1.7)	13.5 (1.1)	20.1 (1.4)	0.3 (0.2)	Antiemetic or antivertigo agents	
Acetaminophen	17,810 (1,430)	5.3 (0.3)	100.0	56.2 (3.7)	29.9 (3.2)	13.4 (1.4)	0.5 (0.2)	Analgesics	
Ketorolac	11,317 (985)	3.4 (0.2)	100.0	92.0 (1.6)	4.4 (0.9)	* ...	* ...	Analgesics	
Acetaminophen-hydrocodone	7,424 (711)	2.2 (0.1)	100.0	38.5 (2.8)	44.6 (2.8)	16.4 (1.9)	* ...	Analgesics	
Albuterol	6,993 (595)	2.1 (0.1)	100.0	36.9 (2.6)	42.8 (3.8)	19.5 (2.4)	0.8 (0.5)	Bronchodilators	
Morphine	6,936 (689)	2.1 (0.1)	100.0	97.6 (0.6)	1.7 (0.5)	*0.7 (0.3)	0.0 (0.0)	Analgesics	
Lidocaine	5,145 (502)	1.5 (0.1)	100.0	88.1 (1.9)	6.3 (1.5)	5.2 (1.1)	* ...	Antiarrhythmic agents, local injectable anesthetics	
Aspirin	5,127 (561)	1.5 (0.1)	100.0	72.4 (5.8)	* ...	8.7 (2.0)	0.9 (0.5)	Analgesics, antiplatelet agents	
Diphenhydramine	4,998 (522)	1.5 (0.1)	100.0	19.7 (2.3)	51.7 (2.8)	27.7 (2.6)	1.0 (0.5)	Antiemetic or antivertigo agents, antihistamines, antiparkinson agents, anxiolytics, sedatives, and hypnotics	
Prednisone	5,057 (420)	1.5 (0.1)	100.0	68.6 (3.5)	20.2 (3.7)	11.0 (1.3)	* ...	Adrenal cortical steroids	
Ceftriaxone	4,511 (404)	1.3 (0.1)	100.0	97.0 (0.7)	1.2 (0.5)	* ...	* ...	Cephalosporins	
Cephalexin	3,964 (382)	1.2 (0.1)	100.0	13.1 (1.9)	67.0 (2.6)	19.6 (2.4)	* ...	Cephalosporins	
Methylprednisolone	3,697 (386)	1.1 (0.1)	100.0	70.2 (2.1)	25.8 (2.2)	3.3 (0.9)	* ...	Adrenal cortical steroids	
Azithromycin	3,568 (318)	1.1 (0.1)	100.0	83.3 (2.0)	8.5 (1.6)	7.9 (1.6)	0.3 (0.2)	Macrolide derivatives	
Lorazepam	3,571 (319)	1.1 (0.1)	100.0	40.5 (2.7)	44.6 (3.5)	14.8 (2.2)	* ...	Anticonvulsants, antiemetic or antivertigo agents, anxiolytics, sedatives, and hypnotics	
Cyclobenzaprine	3,493 (341)	1.0 (0.1)	100.0	19.3 (2.4)	59.8 (4.0)	20.1 (3.8)	* ...	Muscle relaxants	
Albuterol-ipratropium	3,429 (377)	1.0 (0.1)	100.0	89.9 (2.8)	2.7 (0.9)	7.3 (2.1)	* ...	Bronchodilators	
Amoxicillin	3,334 (378)	1.0 (0.1)	100.0	9.0 (2.1)	66.5 (3.8)	24.3 (3.1)	* ...	Penicillins	
All other	170,598 (13,835)	50.8 (1.2)	100.0	52.6 (2.7)	36.4 (3.7)	10.0 (1.7)	0.9 (0.4)	...	

0.0 Quantity more than zero but less than 0.05.

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Based on Cerner Multum terminology, the drug name reflects the active ingredients of a drug mention.²Includes drugs given or prescribed that did not have either the "given in emergency department" or "prescribed at discharge" checkboxes marked.³Based on Cerner Multum second-level therapeutic drug category (available from: <https://www.cerner.com/solutions/drug-database>).NOTES: Estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 23. Providers seen at emergency department visits: United States, 2018

Type of provider	Number of visits ¹ (standard error) in thousands	Percent distribution (standard error)
All visits	129,974 (7,280)	... ..
Any physician	110,264 (5,817)	84.8 (1.5)
Emergency department attending physician	107,868 (5,761)	83.0 (1.6)
Emergency department resident or intern	14,534 (1,802)	11.2 (1.4)
Consulting physician	15,019 (1,450)	11.6 (0.9)
Registered nurse or licensed practical nurse	117,567 (7,185)	90.5 (1.6)
Any physician seen	100,155 (5,831)	77.1 (1.8)
Physician not seen	17,412 (2,327)	13.4 (1.4)
Nurse practitioner	13,825 (1,816)	10.6 (1.2)
Any physician seen	7,047 (1,032)	5.4 (0.8)
Physician not seen	6,778 (1,217)	5.2 (0.8)
Physician assistant	21,442 (2,347)	16.5 (1.3)
Any physician seen	11,818 (1,481)	9.1 (1.0)
Physician not seen	9,624 (1,563)	7.4 (1.0)
Emergency medical technician	7,481 (986)	5.8 (0.7)
Mental health provider	2,696 (335)	2.1 (0.2)
Other	42,209 (4,975)	32.5 (3.0)
Blank	*622 (301)	0.5 (0.2)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Total exceeds "All visits" and percentage exceeds 100% because more than one provider may be reported per visit.

NOTES: Estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%.

Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 24. Disposition of emergency department visits: United States, 2018

Disposition	Number of visits ¹ (standard error) in thousands	Percent distribution (standard error)
All visits	129,974 (7,280)	... ..
Admitted, transferred, or died		
Admit to this hospital	16,152 (1,577)	12.4 (1.0)
Critical care unit	2,342 (391)	1.8 (0.3)
Stepdown or telemetry unit	*557 (265)	0.4 (0.2)
Operation room	1,165 (275)	0.9 (0.2)
Mental health or detoxification unit	532 (109)	0.4 (0.1)
Cardiac catheterization lab	214 (46)	0.2 (0.0)
Other bed or unit	9,395 (1,091)	7.2 (0.7)
Unknown or blank	1,948 (381)	1.5 (0.3)
Admit to observation unit	2,784 (383)	2.1 (0.3)
Then hospitalized	872 (160)	0.7 (0.1)
Then discharged	1,913 (279)	1.5 (0.2)
Return or transfer to nursing home	514 (90)	0.4 (0.1)
Transfer to psychiatric hospital	1,095 (147)	0.8 (0.1)
Transfer to other hospital	2,006 (218)	1.5 (0.2)
Dead in emergency department ²	* ...	0.1 (0.0)
Outpatient follow-up		
Return or refer to physician or clinic for follow-up	87,727 (5,777)	67.5 (1.8)
No follow-up planned	12,679 (1,694)	9.8 (1.2)
Left prior to completing visit		
Left without being seen	1,553 (234)	1.2 (0.2)
Left before treatment complete	1,116 (166)	0.9 (0.1)
Left against medical advice	972 (144)	0.8 (0.1)
Other	3,232 (806)	2.5 (0.6)
Blank	1,025 (274)	0.8 (0.2)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

0.0 Quantity more than zero but less than 0.05.

¹Total exceeds "All visits" and percentage of visits exceeds 100% because more than one disposition may be reported per visit.

²Includes "Dead on arrival."

NOTES: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 25. Emergency department visits resulting in hospital admission, by selected patient and visit characteristics: United States, 2018

Patient and visit characteristics	Number of visits (standard error) in thousands	Percent distribution (standard error)	Mean length of stay ¹ (standard error) in days	Admissions as percent of visits (standard error)
All admissions	16,152 (1,577)	100.0 ...	5.8 (0.2)	12.4 (1.0)
Age group (years)				
Under 15	*1634 (695)	* ...	5.5 (0.5)	6.4 (2.6)
15–24	911 (194)	5.6 (1.0)	5.1 (0.5)	5.6 (1.1)
25–44	2,468 (287)	15.3 (1.4)	4.6 (0.4)	7.2 (0.7)
45–64	4,698 (459)	29.1 (1.9)	6.3 (0.4)	15.5 (1.1)
65–74	2,519 (278)	15.6 (1.2)	6.6 (0.6)	23.5 (2.0)
75 and over	3,922 (420)	24.3 (1.7)	5.5 (0.2)	31.4 (2.0)
Residence				
Private	14,580 (1,470)	90.3 (1.1)	5.6 (0.2)	11.9 (1.0)
Nursing home	803 (113)	5.0 (0.7)	7.1 (1.0)	45.9 (4.5)
Homeless	168 (44)	1.0 (0.3)	5.9 (0.9)	14.4 (3.3)
Other	308 (71)	1.9 (0.4)	7.5 (1.0)	24.3 (4.1)
Unknown or blank	*294 (96)	1.8 (0.6)	5.0 (0.6)	9.8 (3.2)
Expected sources of payment ²				
Private insurance	5,256 (530)	32.5 (2.3)	5.2 (0.2)	13.1 (1.1)
Medicare	6,138 (626)	38.0 (3.3)	5.8 (0.3)	24.5 (1.5)
Medicaid or CHIP ³ or other state-based program	4,942 (695)	30.6 (3.0)	6.5 (0.4)	10.2 (1.4)
No insurance ⁴	669 (128)	4.1 (0.8)	4.9 (0.8)	6.1 (1.0)
Mode of arrival				
Ambulance	6,292 (755)	39.0 (2.0)	6.8 (0.4)	30.2 (2.3)
Other	9,861 (940)	61.0 (2.0)	5.1 (0.2)	9.9 (0.8)
Triage category				
Immediate or emergent ⁵	4,823 (794)	29.9 (2.7)	6.5 (0.4)	31.3 (3.6)
Other	11,329 (952)	70.1 (2.7)	5.4 (0.3)	9.9 (0.8)
Patient seen in this emergency department during the last 72 hours				
Yes	622 (96)	3.8 (0.6)	5.2 (0.8)	12.2 (1.5)
No, unknown, or blank	15,531 (1,541)	96.2 (0.6)	5.8 (0.2)	12.4 (1.0)
Length of stay				
1–2 days	2,574 (300)	15.9 (1.1)	... ..	... ..
3–4 days	5,301 (681)	32.8 (1.7)	... ..	... ..
5–6 days	2,563 (281)	15.9 (0.9)	... ..	... ..
7–8 days	1,295 (160)	8.0 (0.7)	... ..	... ..
9–10 days	538 (97)	3.3 (0.5)	... ..	... ..
More than 10 days	1,414 (174)	8.8 (0.9)	... ..	... ..
Unknown or blank	2,467 (327)	15.3 (1.7)	... ..	... ..

See footnotes at end of table.

Table 25. Emergency department visits resulting in hospital admission, by selected patient and visit characteristics: United States, 2018—Con.

Patient and visit characteristics	Number of visits (standard error) in thousands	Percent distribution (standard error)	Mean length of stay ¹ (standard error) in days	Admissions as percent of visits (standard error)
Hospital discharge status				
Alive	15,130 (1,549)	93.7 (1.5)	5.6 (0.2)	... ..
Home or residence	12,071 (1,273)	79.8 (1.5)	5.1 (0.2)	... ..
Return or transfer to nursing home	1,262 (197)	8.3 (1.0)	7.9 (1.0)	... ..
Transfer to another facility	924 (153)	6.1 (0.8)	7.7 (0.7)	... ..
Other	252 (56)	1.7 (0.3)	5.7 (0.8)	... ..
Unknown or blank	622 (118)	4.1 (0.7)	8.1 (1.8)	... ..
Died	320 (67)	2.0 (0.4)	12.4 (2.5)	... ..
Unknown or blank	*702 (230)	* ...	6.1 (1.1)	... ..

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Denominator for length of stay for 13,685,000 visits where this variable was known. Length of stay was unknown for 15.3% (weighted) of visits resulting in admission.

²Total exceeds "All admissions" and percentage exceeds 100% because more than one source of payment may be reported per visit. Workers' compensation, other, and unknown sources of payment (not shown) account for 14.0 percent (weighted) of expected sources of payment.

³Children's Health Insurance Program.

⁴Defined as having only self-pay, no charge, or charity as payment sources. Individual self-pay and no charge or charity categories are not mutually exclusive.

⁵Defined as needing to be seen within 1–14 minutes.

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown.

Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 26. Principal hospital discharge diagnoses for patients admitted through the emergency department, by major disease category: United States, 2018

Major disease category and ICD-10-CM code range ¹		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits . . . . .	...	16,152 (1,577)	100.0 ...
Certain infectious and parasitic diseases	A00–B99	523 (80)	3.2 (0.5)
Neoplasms	C00–D49	162 (36)	1.0 (0.2)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50–D89	307 (69)	1.9 (0.4)
Endocrine, nutritional, and metabolic diseases	E00–E89	580 (85)	3.6 (0.5)
Mental, behavioral and neurodevelopmental disorders	F01–F99	659 (130)	4.1 (0.6)
Diseases of the nervous system and sense organs ²	G00–G99, H00–H95	530 (118)	3.3 (0.5)
Diseases of the circulatory system	I00–I99	2,094 (230)	13.0 (1.0)
Diseases of the respiratory system	J00–J99	1,868 (287)	11.6 (1.0)
Diseases of the digestive system	K00–K95	1,662 (177)	10.3 (0.8)
Diseases of the skin and subcutaneous tissue	L00–L99	426 (79)	2.6 (0.4)
Diseases of the musculoskeletal system and connective tissue	M00–M99	311 (62)	1.9 (0.3)
Diseases of the genitourinary system	N00–N99	1,092 (175)	6.8 (0.8)
Pregnancy, childbirth and the puerperium	O00–O9A	*141 (52)	0.9 (0.3)
Symptoms, signs, and abnormal clinical and laboratory findings, not elsewhere classified	R00–R99	2,616 (305)	16.2 (1.2)
Injury, poisoning and certain other consequences of external causes	S00–T88	1,323 (246)	8.2 (1.1)
All other diagnoses ³ . . . . .	...	873 (229)	5.4 (1.3)
Unknown or blank . . . . .	...	984 (230)	6.1 (1.5)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Based on *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD-10-CM). Certain codes have been combined in this table to better describe utilization of ambulatory care services.

²Sense organs include eye, adnexa, ear, and mastoid process.

³Includes certain conditions originating in the perinatal period (P00–P96), congenital malformations, deformations and chromosomal abnormalities (Q00–Q99), external causes of morbidity (V00–Y99), and factors influencing health status and contact with health services (Z00–Z99).

NOTES: Numbers may not add to totals due to rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf), in which case only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.

Table 27. Hospital and emergency department characteristics, by emergency department visit volume: United States, 2018

Hospital and emergency department characteristics	Emergency department annual visit volume			
	Total ¹	Fewer than 20,000	20,000 to 50,000	50,000 or more
	Percent distribution (standard error)			
All emergency departments	100.0 ...	100.0 ...	100.0 ...	100.0 ...
Hospital characteristic				
Has bed coordinator:				
Yes	51.3 (6.2)	* ...	61.3 (7.9)	83.9 (5.1)
No	42.6 (6.3)	69.4 (9.2)	30.2 (7.5)	* ...
Unknown or blank	* ...	* ...	*8.5 (3.4)	* ...
How often hospital bed census data are available:				
Instantaneously	80.5 (4.6)	78.2 (7.7)	76.0 (7.1)	91.1 (3.2)
Every 4 hours	* ...	* ...	* ...	* ...
Every 8 hours	* ...	* ...	* ...	* ...
Every 12 hours	* ...	* ...	* ...	* ...
Every 24 hours	* ...	* ...	* ...	* ...
Unknown or blank	* ...	* ...	* ...	* ...
Has hospitalists on staff:				
Yes	78.5 (4.6)	58.8 (8.5)	89.3 (4.0)	97.1 (1.6)
No	19.9 (4.5)	37.9 (8.5)	* ...	* ...
Unknown or blank	* ...	* ...	* ...	* ...
Has emergency medicine residency program				
Yes	19.0 (2.7)	* ...	23.1 (5.9)	42.2 (6.5)
No	76.5 (3.6)	96.5 (1.9)	66.2 (7.2)	56.4 (6.6)
Unknown or blank	* ...	* ...	* ...	* ...
Emergency department (ED) characteristic				
ED submits claims electronically:				
Yes	85.0 (4.6)	80.7 (6.7)	85.5 (5.7)	91.7 (4.1)
No	* ...	* ...	* ...	* ...
Unknown or blank, or refused to answer	* ...	* ...	* ...	* ...
ED uses electronic medical records or health records:				
Yes, all electronic	88.4 (2.6)	87.1 (5.2)	88.8 (3.9)	90.1 (3.5)
Yes, part paper and part electronic	8.2 (2.2)	* ...	* ...	* ...
No	* ...	* ...	* ...	* ...
Unknown or blank, or refused to answer	* ...	* ...	* ...	* ...
ED has physically separate observation or clinical decision unit:				
Yes	38.5 (4.9)	31.1 (8.5)	44.7 (8.0)	42.3 (6.7)
No	58.1 (5.2)	64.4 (8.7)	51.5 (8.3)	56.5 (6.8)
Unknown	* ...	* ...	* ...	* ...
Admitted patients were ever boarded 2 hours or more in ED or observation while waiting for inpatient bed:				
Yes	63.0 (4.2)	41.1 (7.5)	71.6 (6.4)	89.0 (4.6)
No	29.5 (4.3)	48.9 (8.3)	21.2 (5.6)	* ...
Unknown or blank	* ...	* ...	* ...	* ...
ED went on ambulance diversion in 2018				
Yes	37.1 (4.0)	22.0 (4.7)	38.5 (7.9)	61.5 (6.5)
No	51.0 (4.5)	66.1 (6.6)	48.1 (8.6)	28.7 (6.1)
Unknown or blank	11.9 (2.9)	* ...	* ...	* ...
Ambulance diversion actively managed on regional level compared with each hospital adopting diversion if and when it chooses ² :				
Yes	54.3 (6.2)	* ...	52.3 (12.1)	70.8 (8.0)
No	37.1 (7.0)	55.3 (16.5)	* ...	25.5 (7.6)
Unknown or blank	* ...	* ...	* ...	* ...

See footnotes at end of table.

Table 27. Hospital and emergency department characteristics, by emergency department visit volume: United States, 2018—Con.

Hospital and emergency department characteristics	Emergency department annual visit volume			
	Total ¹	Fewer than 20,000	20,000 to 50,000	50,000 or more
	Percent distribution (standard error)			
Hospital continues to admit elective or scheduled surgery cases when ED is on ambulance diversion ² :				
Yes	77.6 (6.8)	* ...	87.1 (7.7)	82.4 (6.2)
No	* ...	* ...	* ...	* ...
Unknown or blank	* ...	* ...	* ...	* ...
ED increased the number of standard treatment spaces in last 2 years:				
Yes	17.0 (3.4)	* ...	21.9 (5.7)	29.9 (6.0)
No	77.7 (3.7)	89.8 (5.3)	71.5 (6.3)	65.6 (6.3)
Unknown or blank	* ...	* ...	* ...	* ...
ED physical space was expanded in last 2 years:				
Yes	14.3 (3.0)	* ...	* ...	31.5 (6.7)
No	82.2 (3.2)	95.8 (2.6)	77.7 (6.7)	65.3 (6.8)
Unknown or blank	* ...	* ...	* ...	* ...
ED plans to expand physical space in next 2 years ³ :				
Yes	10.1 (1.9)	* ...	12.5 (3.3)	21.2 (5.4)
No	77.0 (3.3)	83.0 (5.8)	75.4 (5.0)	68.9 (6.1)
Unknown or blank	12.9 (3.0)	* ...	* ...	* ...
Services ED uses:				
Bedside registration	91.2 (2.6)	85.5 (6.2)	95.5 (2.5)	94.9 (3.2)
Kiosk self check-in	9.2 (2.5)	* ...	* ...	* ...
Computer-assisted triage	55.0 (5.2)	42.1 (10.8)	64.2 (7.2)	64.2 (5.7)
Immediate bedding	76.0 (3.8)	79.8 (7.1)	74.7 (6.1)	71.3 (5.8)
Advanced triage (triage-based care) protocols	68.6 (4.9)	63.0 (8.2)	65.4 (7.8)	83.3 (5.0)
Physician or practitioner at triage	43.3 (5.4)	36.0 (9.9)	40.7 (6.9)	60.2 (7.0)
Separate fast-track unit for nonurgent care	44.0 (5.3)	* ...	53.6 (8.7)	78.6 (5.7)
Separate operating room dedicated to ED patients	* ...	* ...	* ...	* ...
Electronic dashboard ⁴	85.3 (2.9)	77.9 (5.9)	85.9 (6.4)	97.4 (1.3)
Radio frequency identification tracking ⁵	25.2 (4.1)	* ...	35.8 (7.7)	19.1 (4.8)
Wireless devices by providers	63.7 (4.8)	49.7 (8.0)	67.8 (6.8)	82.2 (5.6)
Zone nursing ⁶	56.4 (4.2)	40.4 (6.2)	64.6 (7.8)	72.3 (6.5)
Pool nurses ⁷	60.4 (5.4)	64.8 (9.2)	58.2 (7.9)	56.0 (6.5)

... Category not applicable.

* Estimate does not meet NCHS standards of reliability.

¹Number of hospitals for all emergency departments (EDs) ($N = 226$); Fewer than 20,000 ($N = 48$); 20,000–49,999 ($N = 77$); and 50,000 or more ($N = 101$).

²Denominator is number of EDs on ambulance diversion or for which ambulance diversion status is unknown.

³Denominator is number of EDs that did not expand their physical space, including unknown or blank responses, in the last 2 years.

⁴Displays updated patient information and integrates multiple data sources.

⁵Shows the exact location of patients, caregivers, and equipment.

⁶Refers to all of a nurse's patients being located in one area.

⁷Those who can be pulled into the ED on demand to respond to surges.

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SOURCE: National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2018.