National Ambulatory Medical Care Survey: 2018 National Summary Tables

The Ambulatory and Hospital Care Statistics Branch at the National Center for Health Statistics (NCHS) is pleased to release the most current nationally representative data on ambulatory care visits to physician offices in the United States. Statistics are presented on physician practices as well as patient and visit characteristics using data collected in the 2018 National Ambulatory Medical Care Survey (NAMCS). NAMCS is an annual nationally representative sample survey of visits to nonfederal office-based patient care physicians, excluding anesthesiologists, radiologists, and pathologists.

The 2018 NAMCS sampling design used a stratified two-stage sample, with physicians selected in the first stage and visits in the second stage. A stratified sample list of physicians was selected from the master files maintained by the American Medical Association and American Osteopathic Association. The sampling strata were defined by census region (Northeast, Midwest, South, and West) and 15 broad physician specialty groups (general and family practice, osteopathy, internal medicine, pediatrics, obstetrics and gynecology, general surgery, orthopedic surgery, cardiovascular diseases, dermatology, urology, psychiatry, neurology, ophthalmology, otolaryngology, and a residual category for all other specialties). Although an additional sample was also selected of physicians and nonphysician practitioners from community health centers, these estimates are not included in the summary tables and will be presented in a separate report.

The 2018 NAMCS sample included 2,999 physicians. A total of 1,352 physicians did not meet all of the criteria and were ruled out of scope (ineligible) for the study. Of the 1,647 in-scope (eligible) physicians, 496 completed patient record forms (PRFs) in the study. PRFs were not completed by 176 physicians because they saw no patients during their sample week due to vacation, illness, or other reasons for temporarily not being in practice. Of the 496 physicians who completed PRFs, 434 participated fully or adequately (i.e., at least one-half of the expected PRFs were submitted, based on the total number of visits during the reporting week), and 62 participated minimally (i.e., fewer than one-half of the expected number of PRFs were submitted. The weighted participation rate—the percentage of in-scope physicians for whom at least one PRF was completed—was 44.0%. The weighted response rate—the percentage of in-scope physicians for whom at least one-half of their expected number of PRFs was completed—was 40.5%.

The U.S. Census Bureau was the data collection agent for the 2018 NAMCS. NAMCS was collected electronically using a computerized instrument developed by NCHS. Within physician practices, data were abstracted from medical records for an average of 30 sampled visits during a randomly assigned 1-week reporting period.

Data processing and medical coding were performed by RTI International, Research Triangle Park, North Carolina. As part of the quality assurance procedure, an 11.4% quality control sample of records was independently recoded and compared. Coding error rates for the 11.4% sample ranged between 1.1% and 3.3%. For further details, see the 2018 NAMCS Public Use Data File Documentation, available from: ftp://ftp. cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2018-508.pdf.

Web table estimates consist of visits to physicians at office-based practices. Visit estimates are based on sample data weighted to produce annual national estimates and include standard errors. Because of the complex multistage design of NAMCS, a sample weight is computed for each sample visit that takes all stages of design into account. The survey data are inflated or weighted to produce national annual estimates. The visit weight includes four basic components: inflation by reciprocals of selection probabilities, adjustment for nonresponse, population ratio adjustments, and weight smoothing. Estimates of the sampling variability were calculated using Taylor approximations in SUDAAN, which take into account the complex sample design of NAMCS. In 2018, the method used to weight NAMCS data changed. For the first time, the 2018 NAMCS weights were adjusted using Multipurpose Iterative Proportional Fitting (IPF). This is a calibration technique that simultaneously implements (1) calibration in multiple specified domains; (2) nonresponse adjustment; and (3) weight trimming, as part of a unified iteration cycle. Users should take caution when interpreting differences between the 2016 and 2018 estimates, as the method used to weight NAMCS data changed with 2018 data. A report describing the new weighting methodology and comparing 2016 and 2018 estimates based on the same weighting methodology is planned. Detailed information on the design, conduct, and estimation procedures of 2018 NAMCS are discussed in the 2018 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 28.6% (unweighted) of records, and ethnicity data were missing for 27.8% (unweighted) of records. NCHS uses model-based single imputation for NAMCS race and ethnicity data. Race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2018 Public Use Data File Documentation. NAMCS diagnosis data are coded according to the *International Classification of Diseases, 10th Revision, Clinical Modification* (ICD–10–CM). Three tables presenting estimates of primary diagnoses and injury diagnoses (Tables 13, 14, and 15) use ICD–10–CM codes. In 2015 and all previous years, the web tables presented diagnosis estimates using the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) coding system. Because the ICD–9–CM and ICD–10–CM coding systems differ substantially, users should take caution when comparing diagnosis estimates for 2018 with those for previous years.

Proportion estimates are not presented or are flagged based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions." For all estimates other than estimates of proportions, the following approach is used: Visit estimates are not presented and are replaced by an asterisk (*) if they are based on fewer than 30 cases in the sample data. Visit estimates based on 30 or more cases include an asterisk if the relative standard error of the estimate exceeds 30%.

Suggested citation: Santo L, Okeyode T. National Ambulatory Medical Care Survey: 2018 National Summary Tables. Available from: https://www.cdc.gov/nchs/data/ahcd/namcs_summary/2018-namcs-web-tables-508.pdf.

Table 1. Physician office visits, by selected physician characteristics: United States, 2018

Physician characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)	Number of visits per 100 persons per year ^{1–3} (standard error of rate)
All visits	860,386 (37,935)	100.0	267.1 (11.8)
Professional identity			
Doctor of medicine	803,404 (37,174)	93.4 (0.9)	249.4 (11.5)
Doctor of osteopathy	56,982 (7,561)	6.6 (0.9)	17.7 (2.3)
Specialty type ⁴			
Primary care	440,155 (31,474)	51.2 (2.3)	136.6 (9.8)
Medical specialty	216,262 (19,037)	25.1 (2.2)	67.1 (5.9)
Surgical specialty	203,969 (21,600)	23.7 (2.3)	63.3 (6.7)
Metropolitan status			
MSA ⁵	764,804 (37,461)	88.9 (2.4)	272.7 (13.4)
Non-MSA	95,582 (21,946)	11.1 (2.4)	229.4 (52.7)

... Category not applicable.

¹Visit rates are based on the July 1, 2018, set of estimates of the civilian noninstitutional population of the United States as developed by the U.S. Census Bureau, Population Division. ²Population estimates by metropolitan statistical area definitions status are based on estimates of the U.S. civilian noninstitutional population as of July 1, 2018, from the 2018 National Health Interview Survey, National Center for Health Statistics, compiled according to November 2009 Office of Management and Budget definitions of core-based statistical areas. See

https://www.census.gov/programs-surveys/metro-micro.html for more about metropolitan statistical definitions.

³For metropolitan statistical area, population denominators are different for each category and thus do not add to total population rate. For other variables, the denominator is the total population. ⁴Specialty type is defined in the 2018 National Ambulatory Medical Care Survey Public Use Data File Documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/ Dataset_Documentation/NAMCS/doc2018-508.pdf.

⁵MSA is metropolitan statistical area.

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

Table 2. Office visits, by selected physician practice characteristics: United States, 2018

	Number of visits (standard error)	Percent distribution
Physician practice characteristics	in thousands	(standard error of percent)
All visits	860,386 (37,935)	100.0
Employment status		
Full-owner	321,164 (33,769)	37.3 (3.4)
Part-owner	269,282 (36,452)	31.3 (3.7)
Employee	234,875 (23,444)	27.3 (2.9)
Contractor	*30,660 (9,884)	3.6 (1.2)
Blank ¹	*4,405 (2,837)	0.5 (0.3)
Ownership		
Physician or group	665,985 (42,876)	77.4 (2.7)
Other health care corporation	65,229 (17,008)	7.6 (2.0)
Other hospital Medical or academic health center	53,914 (13,701)	6.3 (1.6)
HMO ²	*12,348 (5,957) *3,774 (1,760)	1.4 (0.7) 0.4 (0.2)
Other ³	*11,768 (5,487)	1.4 (0.6)
Blank ¹	*47,368 (14,989)	*
Practice size		
Solo	270,089 (32,765)	31.4 (3.4)
2	88,158 (16,796)	10.2 (2.0)
3–5	257,828 (34,176)	30.0 (3.6)
6–10	169,740 (26,127)	19.7 (3.0)
11 or more	74,570 (14,510)	8.7 (1.7)
Blank ¹		
Type of practice		
Single-specialty group	379,907 (34,497)	44.2 (3.7)
Multispecialty group	210,389 (29,302)	24.5 (3.2)
Solo Blank ¹	270,089 (32,765)	31.4 (3.4)
Office type		
Private practice	781,598 (39,506)	90.8 (2.5)
Freestanding clinic or urgicenter Other ⁴	*57,085 (21,659)	*
	21,703 (6,275)	2.5 (0.7)
Electronic medical records		
Yes—all electronic	658,940 (37,670)	76.6 (3.2)
Yes—part paper and part electronic No	69,174 (17,351) 127,506 (25,404)	8.0 (2.0)
NO Blank ¹	127,506 (25,494) *4,766 (3,111)	14.8 (2.8) 0.6 (0.4)
	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.0 (0.7)
Practice submits claims electronically	740 077 (00 000)	97.0 (0.0)
Yes No	748,277 (38,293) 105,324 (25,660)	87.0 (2.9) 12.2 (2.9)
Blank ¹	*6,785 (3,330)	0.8 (0.4)
	0,700 (0,000)	

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Blank may include missing, unknown, or "refused to answer the question" data.

²Health maintenance organization.

³Includes owners such as local government (state, county, or city) and charitable organizations.

⁴Includes the following office types: HMO, nonfederal government clinic, mental health center, family planning clinic, and faculty practice plan.

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

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Table 3. Office visits, by patient age and sex: United States, 2018

Patient age and sex	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)	Number of visits per 100 persons per year ¹ (standard error of rate)
All visits	860,386 (37,935)	100.0	267.1 (11.8)
Age (years)			
Under 15	109,930 (14,314)	12.8 (1.6)	180.7 (23.5)
Under 1	22,912 (3,327)	2.7 (0.4)	595.7 (86.5)
1–4	33,926 (5,312)	3.9 (0.6)	212.6 (33.3)
5–14	53,091 (7,202)	6.2 (0.8)	129.4 (17.5)
15–24	58,754 (4,957)	6.8 (0.5)	139.9 (11.8)
25–44	158,770 (12,842)	18.5 (1.3)	186.9 (15.1)
45–64	251,488 (14,876)	29.2 (1.0)	302.5 (17.9)
65 and over	281,444 (18,327)	32.7 (1.6)	550.2 (35.8)
65–74	147,017 (9,550)	17.1 (0.8)	485.7 (31.6)
75 and over	134,427 (10,813)	15.6 (1.0)	643.8 (51.8)
Sex and age (years)			
Female	507,122 (25,524)	58.9 (1.3)	308.1 (15.5)
Under 15	49,295 (6,039)	5.7 (0.7)	165.6 (20.3)
15–24	39,456 (4,144)	4.6 (0.5)	189.3 (19.9)
25–44	113,251 (12,163)	13.2 (1.3)	263.9 (28.3)
45–64	148,354 (10,491)	17.2 (0.9)	346.5 (24.5)
65–74	82,120 (5,788)	9.5 (0.6)	508.9 (35.9)
75 and over	74,647 (5,896)	8.7 (0.6)	617.0 (48.7)
Male	353,263 (18,796)	41.1 (1.3)	224.3 (11.9)
Under 15	60,635 (9,048)	7.0 (1.0)	195.1 (29.1)
15–24	19,299 (2,383)	2.2 (0.3)	91.2 (11.3)
25–44	45,519 (4,073)	5.3 (0.5)	108.2 (9.7)
45–64	103,134 (7,595)	12.0 (0.7)	255.8 (18.8)
65–74	64,897 (5,124)	7.5 (0.5)	459.2 (36.3)
75 and over	59,780 (6,381)	6.9 (0.7)	680.6 (72.6)

... Category not applicable.

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

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

Table 4. Office visits, by patient race and age, and ethnicity: United States, 2018

Physician characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)	Number of visits per 100 persons per year ¹ (standard error of rate)
All visits	860,386 (37,935)	100.0	267.1 (11.8)
Race and age (years) ²			
White	722,966 (32,177)	84.0 (1.6)	293.1 (13.0)
Under 15	90,015 (11,473)	10.5 (1.3)	205.5 (26.2)
15–24	49,021 (4,304)	5.7 (0.5)	159.0 (14.0)
25–44	125,284 (9,094)	14.6 (0.9)	198.3 (14.4)
45–64	212,679 (12,942)	24.7 (1.0)	323.2 (19.7)
65–74	127,009 (8,592)	14.8 (0.8)	503.8 (34.1)
75 and over	118,959 (9,730)	13.8 (1.0)́	667.1 (54.6)
Black or African American	72,623 (7,358)	8.4 (0.8)	171.0 (17.3)
Under 15	10,689 (2,739)	1.2 (0.3)	116.3 (29.8)
15–24	5,736 (1,540)	0.7 (0.2)	91.8 (24.6)
25–44	18,248 (4,727)	2.1 (0.5)	153.5 (39.8)
45–64	20,773 (2,493)	2.4 (0.3)	201.2 (24.1)
65–74	10,688 (1,402)	1.2 (0.2)	353.1 (46.3)
75 and over	6,488 (1,498)	0.8 (0.2)	365.2 (84.3)
Other ³	64,796 (14,145)	7.5 (1.5)	196.5 (42.9)
Race, ethnicity, and age (years) ²			
Hispanic or Latino	127,972 (13,164)	14.9 (1.5)	216.1 (22.2)
Under 15	25,487 (5,779)	3.0 (0.7)	162.3 (36.8)
15–24	13,189 (2,226)	1.5 (0.3)	136.8 (23.1)
25–44	29,648 (4,272)	3.4 (0.5)	167.7 (24.2)
45–64	33,184 (4,728)	3.9 (0.5)	280.5 (40.0)
65–74	12,098 (2,326)	1.4 (0.3)	453.3 (87.1)
75 and over	14,366 (2,804)	1.7 (0.3)	846.5 (165.2)
Not Hispanic or Latino	732,414 (34,116)	85.1 (4.0)	278.6 (13.0)
White	605,153 (28,799)	70.3 (3.3)	310.9 (14.8)
Under 15	66,447 (9,231)	7.7 (1.1)	218.9 (30.4)
15–24	36,852 (3,477)	4.3 (0.4)	164.4 (15.5)
25–44	98,007 (8,168)	11.4 (0.9)	205.7 (17.1)
45–64	182,531 (11,439)	21.2 (1.3)	330.7 (20.7)
65–74	115,566 (8,021)	13.4 (0.9)	507.1 (35.2)
75 and over	105,748 (8,504)	12.3 (1.0)	650.0 (52.3)
Black or African American	65,397 (6,849)	7.6 (0.8)	165.1 (17.3)
Under 15	9,368 (2,378)	1.1 (0.3)	112.3 (28.5)
15–24	5,058 (1,455)	0.6 (0.2)	87.7 (25.2)
25–44	16,485 (4,350)	1.9 (0.5)	149.5 (39.4)
45-64	18,978 (2,448)	2.2 (0.3)	193.1 (24.9)
65–74	10,136 (1,355)	1.2 (0.2)	347.2 (46.4)
75 and over	5,373 (1,170)	0.6 (0.1)	313.5 (68.3)
Other ³	61,864 (14,139)	7.2 (1.6)	216.1 (49.4)

... Category not applicable.

¹Visit rates are based on the July 1, 2018, set of estimates of the civilian noninstitutional population of the United States 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 not of Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for National Ambulatory Medical Care Survey (NAMCS) 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 NAMCS Public Use Data File Documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/ doc2018-508.pdf. For 2018, race data were missing for 32.0% of visits, and ethnicity data were missing for 31.0% of visits.

³Other race includes visits by Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native persons, and persons with more than one race.

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

Table 5. Expected sources of payment at office visits: United States, 2018

Expected source of payment	Number of visits (standard error) in thousands ¹	Percent of visits (standard error of percent)
All visits	860,386 (37,935)	
Private insurance	490,463 (28,882)	57.0 (2.3)
Medicare	238,047 (17,104)	27.7 (1.6)
Medicaid or CHIP ²	110,571 (12,768)	12.9 (1.4)
Medicare and Medicaid ³	12,196 (2,343)	1.4 (0.3)
No insurance ⁴	*54,373 (18,069)	*
Self-pay	*50,644 (18,038)	*
No charge or charity	*4,088 (1,570)	0.5 (0.2)
Workers' compensation	4,948 (1,338)	0.6 (0.2)
Other	19,029 (3,067)	2.2 (0.4)
Unknown or blank	53,241 (12,535)	6.2 (1.5)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

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

²CHIP is Children's Health Insurance Program.

³Visits in this category are also included in both the Medicare and Medicaid or CHIP or other state-based program categories. ⁴Defined as having only self-pay, no charge, or charity as payment sources. The individual self-pay and no charge or charity

categories are not mutually exclusive.

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

Table 6. Primary care provider and referral status of office visits, by prior-visit status: United States, 2018

Prior-visit status, primary care provider, and referral status	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)
All visits	860,386 (37,935)	100.0
Visit to PCP ¹ Visit to non-PCP ^{1,2} Referred for this visit Not referred for this visit Unknown if referred ³	342,003 (33,206) 490,185 (25,726) 159,062 (14,430) 263,841 (24,934) 67,282 (11,769)	39.7 (2.8) 57.0 (2.7) 18.5 (1.8) 30.7 (2.7) 7.8 (1.4)
Unknown if PCP ¹ visit ^{2,3} Established patient	28,198 (7,624)	3.3 (0.9)
All visits Visit to PCP ¹ Visit to non-PCP ^{1.2} Referred for this visit Not referred for this visit Unknown if referred ³ Unknown if PCP ¹ visit ^{2.3}	727,942 (36,411) 325,250 (32,738) 379,515 (21,813) 89,874 (10,839) 239,949 (21,932) 49,691 (9,787) 23,177 (6,904)	84.6 (1.1) 44.7 (3.0) 52.1 (2.9) 12.3 (1.5) 33.0 (2.9) 6.8 (1.3) 3.2 (1.0)
New patient		(),
All visits	132,444 (9,262)	15.4 (1.1)
Visit to PCP ¹ Visit to non-PCP ^{1,2} Referred for this visit Not referred for this visit Unknown if referred ³ Unknown if PCP ¹ visit ^{2,3}	16,753 (2,975) 110,670 (8,445) 69,188 (7,279) 23,891 (5,510) 17,591 (3,445) 5,021 (1,324)	12.6 (2.1) 83.6 (2.2) 52.2 (4.1) 18.0 (3.8) 13.3 (2.6) 3.8 (1.0)

.. Category not applicable.

¹PCP is patient's primary care provider as indicated by a positive response to the question, "Are you the patient's primary care

physician/provider?" ²Referral status was only asked for visits to non-PCPs and visits with unknown PCP status. Among these visits, referral information was unknown for 16.1% of visits.

³Unknown category includes blanks.

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

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Table 7. Primary care provider and referral status, according to physician specialty: United States, 2018

		Visit to non-PCP ^{1,2}				
Physician specialty Total	Visit to PCP ¹	Referred by other physician	Not referred by other physician	Unknown if referred ³	Unknown if PCP ¹ visit ^{2,3}	
	_	Percent distribution (standard error of percent)				
All visits	100.0	39.7 (2.8)	18.5 (1.8)	30.7 (2.7)	7.8 (1.4)	3.3 (0.9)
Primary care specialty	100.0	75.8 (3.4)	*	12.0 (2.5)	2.9 (0.8)	*
Medical specialty	100.0	1.6 (0.5)	33.5 (4.4)	49.6 (5.6)	14.6 (4.4)	0.6 (0.2)
Surgical specialty	100.0	2.4 (1.0)	31.6 (4.1)	50.8 (5.7)	11.4 (2.7)	* ´

... Category not applicable. * Estimate does not meet National Center for Health Statistics standards of reliability.

1PCP is patient's primary care provider as indicated by a positive response to the question, "Are you the patient's primary care physician/provider?"

²Referral status was asked only for visits to non-PCPs and visits with unknown PCP status. Among these visits, referral information was unknown for 16.1% of visits.

³Unknown category includes blanks.

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

Table 8. Continuity-of-care office visit characteristics, by specialty type: United States, 2018

		Specialty type ¹				Specialty type ¹		
Continuity-of-care visit All characteristic specialties		Primary care	Surgical specialties	Medical specialties	All specialties	Primary care	Surgical specialties	Medical specialties
		Number of visits (stand	ard error) in thousands		Percer	nt distribution (sta	andard error of p	ercent)
All visits	860,386 (37,935)	440,155 (31,474)	203,969 (21,600)	216,262 (19,037)	100.0	100.0	100.0	100.0
Prior-visit status and number of visits in last 12 months								
Established patient ²	727,942 (36,411)	402,639 (31,883)	152,695 (16,855)	172,608 (15,143)	84.6 (1.1)	91.5 (1.4)	74.9 (1.6)	79.8 (2.2)
None	47,536 (4,423)	24,206 (3,615)	11,238 (1,517)	12,092 (2,106)	5.5 (0.5)	5.5 (0.8)	5.5 (0.6)	5.6 (0.9)
1–2 visits	266,838 (15,305)	130,670 (11,729)	63,691 (7,242)	72,477 (8,577)	31.0 (1.2)	29.7 (2.0)	31.2 (1.5)	33.5 (2.4)
3–5 visits	230,232 (17,027)	137,122 (15,878)	46,000 (5,753)	47,110 (4,708)	26.8 (1.2)	31.2 (2.0)	22.6 (1.3)	21.8 (1.2)
6 or more visits	183,335 (14,177)	110,640 (11,879)	31,766 (6,016)	40,929 (6,212)	21.3 (1.3)	25.1 (1.9)	15.6 (2.2)	18.9 (2.6)
New patient	132,444 (9,262)	37,516 (5,497)	51,274 (6,081)	43,654 (6,665)	15.4 (1.1)	8.5 (1.4)	25.1 (1.6)	20.2 (2.2)

... Category not applicable.

¹Specialty types are defined in the 2018 Public Use File Documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2018-508.pdf.

²Number of previous visits by established patients to responding physician in the last 12 months.

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

Table 9. Twenty leading principal reasons for office visits, by patient's sex: United States, 2018

Principal reason for visit and RVC code ¹		Number of visits ¹ (standard error) in thousands	Total	Female ²	Male ³
		_	Percent	distribution (standard error of	percent)
All visits		860,386 (37,935)	100.0	100.0	100.0
Progress visit, not otherwise specified	T800	151,669 (17,500)	17.6 (1.8)	16.4 (2.0)	19.4 (1.9)
General medical examination	X100	54,456 (6,397)	6.3 (0.7)	6.1 (0.7)	6.7 (1.0)
Postoperative visit	T205	*26,785 (8,501)	3.1 (1.0)	*	2.3 (0.5)
For other and unspecified test results	R700	*19,637 (7,633)	2.3 (0.9)	2.2 (0.9)	2.4 (0.8)
Prenatal examination, routine	X205	19,380 (4,727)	2.3 (0.5)	3.8 (0.9)	
Knee symptoms	S925	18,666 (4,308)	2.2 (0.5)	2.4 (0.5)	1.8 (0.6)
Cough	S440	18,469 (3,324)	2.1 (0.4)	1.9 (0.4)	2.6 (0.5)
Nedication, other and unspecified kinds	T115	16,824 (4,249)	2.0 (0.5)	1.8 (0.4)	2.2 (0.7)
lypertension	D510	16,466 (3,686)	1.9 (0.4)	1.8 (0.5)	2.1 (0.6)
Counseling, not otherwise specified	T605	15,448 (2,652)	1.8 (0.3)	1.9 (0.4)	1.7 (0.4)
Gynecological examination	X225	11,494 (2,894)	1.3 (0.3)	2.3 (0.6)	
Symptoms referable to throat	S455	11,066 (2,781)	1.3 (0.3)	1.3 (0.4)	1.2 (0.4)
Preoperative visit for specified and unspecified types of surgery	T200	*10,836 (3,664)	1.3 (0.4)	1.5 (0.6)	0.9 (0.2)
Disturbances of sleep	S135	*10,672 (8,226)	1.2 (0.9)	1.0 (0.7)	*
Nell-baby examination	X105	10,530 (2,121)	1.2 (0.2)	0.7 (0.2)	2.0 (0.5)
Anxiety and nervousness	S100	10,154 (1,696)	1.2 (0.2)	1.2 (0.2)	1.2 (0.2)
Diabetes mellitus	D205	9,866 (2,296)	1.1 (0.3)	1.0 (0.2)	1.4 (0.4)
Stomach and abdominal pain, cramps and spasms	S545	9,460 (2,292)	1.1 (0.3)	1.3 (0.3)	0.8 (0.2)
Diagnosed complications of pregnency and puerperium	D735	9,391 (2,162)	1.1 (0.3)	1.9 (0.4)	* `
/ision dysfunctions	S305	8,634 (1,481)	1.0 (0.2)	0.9 (0.2)	1.2 (0.3)
All other reasons	1865	400,481 (18,521)	46.5 (1.8)	45.0 (2.0)	48.7 (2.0)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Based on Reason for Visit Classification for Ambulatory Care (RVC), defined in the 2018 Public Use File Documentation available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2018-508.pdf. ²Based on 507,122,000 visits made by females.

³Based on 353,263,000 visits made by males.

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

Table 10. Provider-assessed major reason for office visit, by selected patient and visit characteristics: United States, 2018

Patient and visit characteristic	Number of visits (standard error) in thousands	Total percent	New problem	Chronic problem, routine	Chronic problem, flare-up	Pre-surgery	Post-surgery	Preventive care ¹	Unknown or blank
					Percent distrib	oution (standard e	error of percent)		
All visits	860,386 (37,935)	100.0	26.4 (1.6)	33.4 (2.1)	6.5 (0.7)	2.3 (0.6)	6.2 (1.1)	22.8 (1.8)	2.4 (0.6)
Age (years)									
Under 15	109,930 (14,314)	100.0	45.5 (4.5)	7.4 (1.3)	*	0.3 (0.1)	0.7 (0.2)	39.6 (3.7)	*
Under 1	22,912 (3,327)	100.0	34.0 (3.4)	*	*	*	0.6 (0.3)	56.7 (4.6)	*
1–4	33,926 (5,312)	100.0	52.2 (5.0)	*	*	*	0.8 (0.3)	34.9 (4.1)	*
5–14	53,091 (7,202)	100.0	46.3 (6.0)	11.3 (2.3)	*	*	0.6 (0.2)	35.2 (4.9)	*
15–24	58,754 (4,957)	100.0	31.7 (3.3)	18.1 (2.8)	7.5 (2.1)	*	4.6 (1.3)	32.8 (4.3)	2.2 (0.9)
25–44	158,770 (12,842)	100.0	24.7 (2.3)	24.1 (2.9)	6.8 (1.1)	*	*	30.8 (3.5)	1.8 (0.5)
45–64	251,488 (14,876)	100.0	24.2 (2.0)	39.8 (2.7)	7.0 (0.9)	2.4 (0.6)	7.8 (1.3)	16.2 (2.1)	2.6 (0.9)
65 and over	281,444 (18,327)	100.0	20.7 (1.7)	46.3 (2.9)	6.7 (0.9)	2.5 (0.5)	5.6 (0.8)	15.7 (2.8)	2.5 (0.7)
65–74	147,017 (9,550)	100.0	20.0 (1.7)	43.5 (3.0)	6.3 (0.9)	3.2 (0.8)	6.0 (0.9)	18.2 (2.9)	2.7 (0.9)
75 and over	134,427 (10,813)	100.0	21.4 (2.4)	49.3 (3.5)	7.0 (1.2)	1.8 (0.5)	5.2 (1.1)	13.0 (3.1)	2.2 (0.8)
Sex									
Female	507,122 (25,524)	100.0	26.3 (1.7)	30.1 (2.2)	6.4 (0.8)	2.6 (0.9)	6.8 (1.7)	25.1 (2.0)	2.6 (0.7)
Male	353,263 (18,796)	100.0	26.4 (1.9)	38.1 (2.5)	6.6 (0.8)	2.0 (0.4)	5.3 (0.6)	19.5 (2.4)	2.1 (0.5)
Race ²									
White	722,966 (32,177)	100.0	27.3 (1.6)	34.2 (2.1)	6.3 (0.6)	2.2 (0.5)	6.3 (1.1)	21.3 (1.7)	2.4 (0.6)
Black or African American	72,623 (7,358)	100.0	18.4 (2.2)	32.8 (4.1)	8.2 (1.4)	*	8.1 (2.2)	25.6 (4.0)	1.9 (0.8)
Other ³	64,796 (14,145)	100.0	24.8 (3.4)	24.9 (3.0)	*	1.1 (0.6)	2.6 (1.1)	36.7 (5.6)	*
Ethnicity ²									
Hispanic or Latino	127,972 (13,164)	100.0	33.1 (4.0)	22.8 (2.8)	4.8 (0.9)	1.3 (0.4)	6.4 (1.6)	29.5 (4.1)	2.0 (0.8)
, Not Hispanic or Latino	732,414 (34,116)	100.0	25.2 (1.4)	35.3 (2.2)	6.8 (0.7)	2.5 (0.7)	6.1 (1.1)	21.7 (1.7)	2.5 (0.6)
White	605,153 (28,799)	100.0	26.2 (1.5)	36.4 (2.3)	6.6 (0.7)	2.3 (0.5)	6.3 (1.0)	19.8 (1.6)	2.4 (0.7)
Black or African American	65,397 (6,849)	100.0	17.8 (2.1)	33.8 (4.3)	7.9 (1.5)	*	7.8 (2.0)	25.0 (4.3)	2.1 (0.9)
Other ³	61,864 (14,139)	100.0	23.4 (3.1)	25.5 (3.1)	*	1.1 (0.6)	* ´	37.0 (5.8)	*
Expected source(s) of payment ⁴									
Private insurance	490,463 (28,882)	100.0	28.6 (1.9)	31.0 (2.1)	6.9 (0.8)	1.5 (0.2)	4.8 (0.6)	25.4 (2.2)	1.8 (0.6)
Medicare	238,047 (17,104)	100.0	20.5 (1.8)	47.7 (3.2)	7.1 (1.0)	2.2 (0.5)	5.5 (0.9)	14.7 (2.8)	2.4 (0.7)
Medicare and Medicaid ⁵	12,196 (2,343)	100.0	*	*	16.4 (4.7)	*	*	*	*
Medicaid or CHIP ⁶	110,571 (12,768)	100.0	28.8 (3.8)	25.2 (3.3)	6.8 (1.2)	1.5 (0.5)	4.4 (0.9)	30.8 (4.4)	2.4 (1.1)
No insurance ⁷	*54,373 (18,069)	100.0	14.3 (2.1)	*	*	*	*	*	1.8 (1.0)
Other ⁸	50,834 (7,522)	100.0	24.4 (4.6)	46.8 (5.9)	4.1 (1.0)	1.2 (0.6)	7.2 (1.7)	14.2 (2.9)	*

Table 10. Provider-assessed major reason for office visit, by selected patient and visit characteristics: United States, 2018-Con.

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Includes routine prenatal, well-baby, screening, insurance, or general examinations (see the question, Major reason for visit, on the Patient Record Sample Card availabe from: https://www.cdc.gov/nchs/data/ahcd/2018_NAMCS_Patient_Record_Sample_Card.pdf). ²The race groups white, black or African American, and other include persons of Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of modelbased single imputation for National Ambulatory Medicare Care Survey 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 National Ambulatory Medical Care Survey Public Use Data File Documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_ Documentation/NAMCS/doc2018-508.pdf. For 2018, race data were missing for 32.0% of visits, and ethnicity data were missing for 31.0% of visits.

³Other race includes visits by Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native persons, and persons with more than one race.

⁴Combined total of individual sources exceeds "all visits," and percent of visits exceeds 100%, because more than one source of payment may be reported per visit.

⁵The visits in this category are also included in both the Medicaid or CHIP or other state-based program and Medicare categories.

⁶CHIP is Children's Health Insurance Program.

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

⁸Includes workers' compensation, unknown or blank, and sources not classified elsewhere.

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

Table 11. Preventive care visits made to primary care specialists, by selected patient and visit characteristics: United States, 2018

Patient and visit characteristics	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)	Number of visits per 100 persons per year ¹ (standard error of rate)	Percent of preventive care visits made to primary care specialists ² (standard error of percent)
All preventive care visits ³	196,548 (19,015)	100.0	61.0 (5.9)	86.0 (2.3)
Age (years)				
Under 15	43,535 (7,421)	22.1 (3.6)	71.6 (12.2)	97.5 (0.8)
Under 1	12,989 (2,209)	6.6 (1.1)	337.7 (57.4)	100.0 (0.0)
1–4	11,845 (2,354)	6.0 (1.1)	74.2 (14.8)	**98.7 (1.0)
5–14	18,701 (4,080)	9.5 (2.0)	45.6 (9.9)	**95.1 (1.7)
15–24	19,258 (3,405)	9.8 (1.7)	45.9 (8.1)	**81.8 (6.0)
25–44	48,846 (6,655)	24.9 (2.9)	57.5 (7.8)	**90.8 (4.1)
45–64	40,627 (6,283)	20.7 (2.2)	48.9 (7.6)	78.7 (4.3)
65 and over	44,282 (9,389)	22.5 (3.5)	86.6 (18.4)	77.9 (5.5)
65–74	26,805 (5,170)	13.6 (2.0)	88.6 (17.1)	80.1 (4.8)
75 and over	17,477 (4,682)	8.9 (1.9)	83.7 (22.4)	*
Sex and age (years)				
Female	127,517 (11,588)	64.9 (2.9)	77.5 (7.0)	87.3 (2.6)
Under 15	18,510 (2,920)	9.4 (1.5)	62.2 (9.8)	97.5 (0.9)
15–24	15,314 (3,168)	7.8 (1.6)	73.5 (15.2)	**89.2 (4.9)
25–44	43,316 (6,357)	22.0 (2.9)	100.9 (14.8)	**92.7 (4.4)
45–64	23,196 (3,348)	11.8 (1.6)	54.2 (7.8)	78.8 (4.3)
65–74	17,108 (3,373)	8.7 (1.4)	106.0 (20.9)	79.6 (5.3)
75 and over	10,073 (2,668)	5.1 (1.1)	83.3 (22.1)	*
Male	69,031 (10,159)	35.1 (2.9)	43.8 (6.4)	83.5 (3.4)
Under 15	25,025 (5,314)	12.7 (2.6)	80.5 (17.1)	97.6 (1.0)
15–24	*3,944 (1,190)	2.0 (0.6)	18.6 (5.6)	*
25–44	5,530 (1,377)	2.8 (0.6)	13.2 (3.3)	*
45–64	17,432 (4,391)	8.9 (1.7)	43.2 (10.9)	**78.5 (7.0)
65–74	9,696 (2,564)	4.9 (1.1)	68.6 (18.1)	**80.9 (6.1)
75 and over	7,404 (2,143)	3.8 (0.9)	84.3 (24.4)	*
Race ⁴				
White	154,210 (14,639)	78.5 (3.5)	62.5 (5.9)	84.1 (2.6)
Black or African American	18,558 (3,596)	9.4 (1.8)	43.7 (8.5)	**89.6 (3.3)
Other ⁵	*23,780 (8,263)	12.1 (3.6)	72.1 (25.1)	**95.1 (2.1)
Ethnicity ⁴				
Hispanic or Latino	37,738 (7,298)	19.2 (3.0)	63.7 (12.3)	**94.2 (2.2)
Not Hispanic or Latino	158,811 (15,670)	80.8 (3.0)	60.4 (6.0)	84.0 (2.5)
White	119,534 (10,969)	60.8 (3.6)	61.4 (5.6)	81.2 (2.9)
Black or African American	16,379 (3,521)	8.3 (1.8)	41.4 (8.9)	**89.8 (3.3)
Other ⁵	*22,898 (8,255)	*	*	**94.9 (2.2)
Expected source(s) of payment ⁶				
Private insurance	124,645 (13,680)	63.4 (3.4)	62.5 (6.9)	86.0 (2.6)
Medicare	34,905 (7,797)	17.8 (3.0)	62.8 (14.0)	76.4 (6.1)
Medicaid or CHIP ⁷	34,076 (7,211)	17.3 (3.4)	61.3 (13.0)	**93.7 (2.4)
Medicare and Medicaid	*	0.9 (0.5)	*	*
No insurance ⁸	7,121 (1,964)	3.6 (1.0)	23.8 (6.6)	*
Other ⁹	7,217 (1,505)	3.7 (0.7)	*	*

Table 11. Preventive care visits made to primary care specialists, by selected patient and visit characteristics: United States, 2018—Con.

... Category not applicable.

** Estimate meets National Center for Health Statistics standards of reliability, but its complement does not.

¹Visit rates for age, sex, and race and ethnicity are based on the July 1, 2018, set of estimates of the civilian noninstitutional population of the United States as developed by the U.S. Census Bureau, Population Division. Visit rates for expected source(s) of payment are based on 2018 National Health Interview Survey (NHIS) estimates of health insurance.

²Primary care specialty is defined in the 2018 Public Use Data File Documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2018-508.pdf. ³Preventive care includes routine prenatal, well-baby, screening, insurance, and general examinations (see the question, Major reason for this visit, on the Patient Record Sample card, available from: https://www.cdc.gov/nchs/data/ahcd/2018_NAMCS_Patient_Record_Sample_Card.pdf.

⁴The race groups white, black or African American, and other include persons of Hispanic and not of Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for National Ambulatory Medical Care Survey (NAMCS) 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 NAMCS Public Use Data File Documentation, available from: ftp://ttp.cdc.gov/publ/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/ doc2018-508.pdf. For 2018, race data were missing for 37.8% of preventive care visits, and ethnicity data were missing for 35.5% of preventive care visits.

⁵Includes visits by Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native persons, and persons with more than one race. ⁶Combined total of individual sources exceeds all visits, and percent of visits exceeds 100%, because more than one source of payment may be reported per visit.

⁷CHIP is Children's Health Insurance Program.

⁸Defined as having only self-pay, no charge, or charity as payment sources. The visit rate was calculated using uninsured as the denominator from 2018 estimates of health insurance coverage from NHIS.

⁹Other includes workers' compensation, unknown or blank, and sources not classified elsewhere.

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

^{*} Estimate does not meet National Center for Health Statistics standards of reliability.

Table 12. Preventive care visits made to primary care specialists, by metropolitan statistical area: United States, 2018

Geographic area	Number of visits (standard error) in thousands	Number of visits per 100 persons per year ¹ (standard error of rate)	Percent of preventive care visits made to primary care specialists ² (standard error of percent)
All preventive care visits ³	196,548 (19,015)	61.0 (5.9)	100.0
Metropolitan status			
MSA ⁴	186,929 (18,996)	66.7 (6.8)	**95.1 (1.5)
Non-MSA	9,619 (2,870)	23.1 (6.9)	*

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

** Estimate meets National Center for Health Statistics standards of reliability, but its complement does not.

¹Visit rates are based on the July 1, 2018, set of estimates of the civilian noninstitutionalized population of the United States as developed by the U.S. Census Bureau, Population Division. ²Primary care specialty is defined in the 2018 Public Use File Documentation, available from:

³Preventive care includes routine prenatal, well-baby, screening, insurance, and general examinations (see the question, Major reason for this visit, on the Patient Record Sample Card, available from https://www.cdc.gov/nchs/data/ahcd/2018_NAMCS_Patient_Record_Sample_Card.pdf).

⁴MSA is metropolitan statistical area.

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

ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2018-508.pdf.

Table 13. Primary diagnosis at office visits, classified 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 of percent)
All visits		860,386 (37,935)	100.0
Certain infectious and parasitic diseases	A00–B99	7,196 (1,154)	0.8 (0.1)
Neoplasms.	C00–D49	26,308 (5,612)	3.1 (0.7)
Diseases of the blood and blood-forming organs and			
certain disorders involving the immune mechanism	D50–D89	*	0.5 (0.2)
Endocrine, nutritional, and metabolic disease	E00–E89	52,388 (7,387)	6.1 (0.7)
Mental, behavioral and neurodevelopmental disorders	F01–F99	55,727 (6,384)	6.5 (0.7)
Diseases of the nervous system	G00–G99	*23,835 (7,343)	2.8 (0.8)
Diseases of the eye and adnexa	H00–H59	50,639 (4,584)	5.9 (0.5)
Diseases of the ear and mastoid process	H60–H95	16,354 (2,232)	1.9 (0.3)
Diseases of the circulatory system	100–199	69,679 (7,018)	8.1 (0.7)
Diseases of the respiratory system	J00–J99	58,906 (8,663)	6.8 (0.9)
Diseases of the digestive system	K00–K95	37,234 (7,630)	4.3 (0.9)
Diseases of the skin and subcutanaous tissue	L00–L99	43,058 (4,411)	5.0 (0.5)
Diseases of the musculoskeletal and connective tissue	M00–M99	72,405 (12,492)	8.4 (1.4)
Diseases of the genitourinary system	N00–N99	38,855 (5,404)	4.5 (0.6)
Pregnancy, childbirth and the puerperium	000–09A	13,591 (2,597)	1.6 (0.3)
Symptoms, signs, and abnormal clinical and laboratory			
findings not elsewhere classified	R00–R99	75,593 (7,032)	8.8 (0.7)
Injury, poisoning and certain other consequences of			
external causes	S00–T88	23,585 (3,369)	2.7 (0.4)
All other diagnoses ²		184,700 (16,638)	21.5 (1.6)
Blank		*5,946 (2,783)	0.7 (0.3)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Based on International Classification of Diseases, 10th Revision, Clinical Modification (ICD–10–CM). Certain codes are combined to better describe utilization of ambulatory care services. ²Includes certain conditions originating in 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).

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

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distributior (standard error of percent)
Il visits		
	860,386 (37,935)	100.0
Certain infectious and parasitic diseases		
epticemia (sepsis)	*	*
uman immunodeficiency virus syndrome (HIV) (HIV+) (HIV positive)	*	*
iral warts, not sexually transmitted	*	0.1 (0.0)
cute and Chronic Viral Hepatitis B	*	*
cute and Chronic Viral Hepatitis C	*	0.1 (0.1)
TIs excluding Viral Hepatitis and HIV	*	0.1 (0.0)
nspecified viral infection	*	0.1 (0.0)
ermatophytosis	*	*
andidiasis	*	0.1 (0.0)
ther systemic infectious and parasitic diseases	2,834 (667)	0.3 (0.1)
Neoplasms		
alignant neoplasm of large intestine and rectum	*	0.1 (0.1)
lalignant neoplasm of other digestive organs	*	*
lalignant neoplasm of trachea, bronchus and lung	*	*
lalignant melanoma	*	0.0 (0.0)
ther malignant neoplasm of skin	3,293 (803)	0.4 (0.1)
lalignant neoplasm of breast	*	0.2 (0.1)
lalignant neoplasm of female genital organs	*	0.2 (0.1)
lalignant neoplasm of prostate	1,144 (341)	0.1 (0.0)
lalignant neoplasm of bladder	*	0.0 (0.0)
lalignant neoplasm of lymphoid, hematopoietic and related tissue	*	0.1 (0.1)
ther malignant neoplasms, not listed above	*5,721 (3,371)	0.7 (0.4)
arcinoma in situ, all sites	*	0.0 (0.0)
ther benign neoplasm of digestive system	*	*
ipoma	*	0.0 (0.0)
enign neoplasm of skin	*2,941 (914)	0.3 (0.1)
enign neoplasm of breast	*	0.0 (0.0)
enign neoplasm of uterus	*	0.0 (0.0)
Other benign neoplasm, not listed above	1,624 (476)	0.2 (0.1)
eoplasms of uncertain behavior or unspecified nature	3,282 (700)	0.4 (0.1)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism		
nemias	*	0.3 (0.1)
Other diseases of the blood and blood-forming organs and		0.0 (0.1)
certain disorders involving the immune mechanism	*	0.2 (0.1)
U		0.2 (0.1)
Endocrine, nutritional and metabolic diseases		
cquired hypothyroidism	*	0.5 (0.2)
isorders of thyroid gland, excluding acquired hypothyroidism	*	0.1 (0.1)
ype 1 Diabetes Mellitus	*	0.1 (0.0)
ype 2 Diabetes Mellitus or unspecified	26,953 (3,877)	3.1 (0.4)
Other types of diabetes mellitus	*	*
Other disorders of endocrine glands	*	0.2 (0.1)
Overweight, excluding obesity	*	*
besity	*	0.4 (0.1)
lyperlipidemias	10,049 (2,381)	1.2 (0.3)
ther nutritional deficiences and metabolic disorders	*4,372 (1,840)	0.5 (0.2)
Mental disorder		
ementia, excluding Alzheimer	*	0.0 (0.0)
lcohol-related disorders, excluding alcohol-related dementia and		× /
chronic alcoholic liver disease	*	0.1 (0.0)
pioid related disorders	*5,704 (2,379)	0.7 (0.3)
icotine dependence	*	*
ther drug related disorders excluding other drug related dementia	*	*
chizophrenia	*	0.1 (0.0)
	+	
lon-mood psychoses, excluding schizophrenia	°	0.1 (0.0)

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distributior (standard error of percent)
	in tiousanus	
Mental disorder—Con.		
ipolar disorders, with depression	*	0.1 (0.0)
epressive disorders, excluding bipolar depression and		
adjustment reaction with depressed mood	13,133 (2,380)	1.5 (0.3)
ysthymic disorder	*	*
cute reaction to stress and adjustment reaction, excluding those		
with depressed mood	*	0.3 (0.1)
cute reaction to stress and adjustment reaction with depressed mood	*	0.0 (0.0)
npulse disorders	*	*
ther mood disorders, nonpsychotic mental disorders,		
behavioral syndromes, and disorders of adult personality and behavior	15,072 (2,555)	1.8 (0.3)
ttention-deficit hyperactivity disorders	8,684 (2,008)	1.0 (0.2)
ppositional defiant disorder utism spectrum disorder	* *	* 0.2 (0.1)
annabis related disorders	*	*
ther mental disorders	*	0.2 (0.1)
		0.2 (0.1)
Diseases of the nervous system		
Izheimer disease	*	0.1 (0.0)
ther degenerative diseases of the nervous system,		
excluding Alzheimer disease	*	0.0 (0.0)
ligraine	2,003 (547)	0.2 (0.1)
ransient cerebral ischemic attacks and related syndromes leep disorders, excluding sleep apnea (adult, pediatric, obstructive)	· · · ·	*
and non-organic sleep disorders	*	0.1 (0.1)
bstructive sleep apnea (adult, pediatric), and sleep apnea,		0.1 (0.1)
not otherwise specified	*8,218 (6,585)	1.0 (0.8)
arpal tunnel syndrome	*	0.1 (0.0)
Seneralized pain and acute and chronic pain syndromes	5,873 (1,573)	0.7 (0.2)
ther disorders of the nervous system	6,846 (1,278)	0.8 (0.2)
Discours of the over and advance		()
Diseases of the eye and adnexa		
iflammation and disorders of eyelid	3,576 (808)	0.4 (0.1)
onjunctivitis	3,233 (913) 10 524 (1 872)	0.4 (0.1)
ataracts, excluding diabetic cataracts etinal detachment and other retinal disorders, diabetic retinopathy	10,534 (1,873) *11,181 (3,485)	1.2 (0.2) 1.3 (0.4)
Saucoma	8,172 (1,523)	0.9 (0.2)
isorders of refraction and accommodation	*2,145 (724)	0.2 (0.1)
ther disorders of the eye and adnexa	11,556 (1,523)	1.3 (0.2)
-	11,000 (1,020)	1.0 (0.2)
Diseases of the ear and the mastoid process		
Disorders of external ear	3,645 (649)	0.4 (0.1)
titis media and eustachian tube disorders	8,566 (1,834)	1.0 (0.2)
ther disorders of the ear and mastoid process	4,131 (731)	0.5 (0.1)
Diseases of the circulatory system		
leart valve disorders	*	0.2 (0.0)
ssential hypertension	33,610 (4,265)	3.9 (0.4)
lypertensive heart disease with heart failure	*	*
lypertensive heart disease without heart failure	*	0.1 (0.1)
ypertensive chronic kidney disease with stage 1 through stage 4	*	0.4 (0.2)
ypertensive chronic kidney disease with stage 5 chronic kidney disease	*	*
ypertensive heart and chronic kidney disease with heart failure	*	*
econdary hypertension	*	*
ngina pectoris not stated as with chronic ischemic heart disease	*	0.1 (0.0)
cute myocardial infarction (AMI)	* 7 010 (1 522)	0.1 (0.1)
oronary atherosclerosis and other chronic ischemic heart disease	7,910 (1,523)	0.9 (0.2)
ulmonary heart disease and diseases of pulmonary circulation onduction disorders	* *	0.1 (0.1) 0.0 (0.0)
	 5,991 (1,106)	0.0 (0.0) 0.7 (0.1)
ardiac dysrhythmias excluding ventricular tibrillation		071011
Cardiac dysrhythmias, excluding ventricular fibrillation Cardiac arrest and ventricular fibrillation	*	*

Drimony disgnostic group1	Number of visits (standard error) in thousands	Percent distributior (standard error of percent)
Primary diagnosis group ¹		
Diseases of the circulatory system—Con.		
Pericarditis, endocarditis, myocarditis and cardiomyopathy	*	0.2 (0.1)
Other and ill-defined heart disease	*	*
Cerebrovascular disease	*	0.2 (0.1)
Diseases of the arteries, arterioles and capillaries	3,308 (938)	0.4 (0.1)
Varicose veins of lower extremity	*	*
Other disorder of circulatory system	*	0.2 (0.1)
Diseases of the respiratory system		
Streptococcal pharyngitis and tonsillitis	*	0.2 (0.1)
Acute sinusitis	4,547 (1,238)	0.5 (0.1)
Acute pharyngitis, except streptococcal pharyngitis	8,331 (2,448)	1.0 (0.3)
Acute tonsillitis, except streprococcal tonsillitis	*	0.2 (0.1)
nfluenza	*	0.1 (0.0)
Pneumonia due to infectious organism	*	0.1 (0.1)
Acute bronchitis and bronchiolitis	*	0.3 (0.1)
Other acute respiratory infections	12,974 (3,454)	1.5 (0.4)
Allergic rhinitis	*6,984 (4,559)	0.8 (0.5)
Chronic sinusitis	*2,709 (956)	0.3 (0.1)
Deviated nasal septum	2,709 (950) *	0.3 (0.1)
•		()
Chronic diseases of tonsils and adenoids	564 (136)	0.1 (0.0)
Chronic and unspecified bronchitis	*	0.3 (0.1)
Bronchiectasis, emphysema and other chronic obstructive pulmonary	*	0.4 (0.1)
Asthma, excluding chronic obstuctive asthma	5,792 (1,490)	0.7 (0.2)
Respiratory failure	*	*
Croup	*	*
Other diseases of the respiratory system	2,076 (612)	0.2 (0.1)
Diseases of the digestive system		
Gastroesophageal reflux disease (with esophagitis)	*7,511 (2,408)	0.9 (0.3)
Dther diseases of the esophagus	*	*
Jicers of stomach and small intestine	*	*
Gastritis and duodentitis	*	*
Appendicitis	*	0.0 (0.0)
Diaphragmatic hernia	*	0.1 (0.1)
Hernias of abdominal cavity, except diaphragmatic hernia	3,495 (719)	0.4 (0.1)
Crohn's disease and ulcerative colitis	*	. ,
	*	0.1 (0.1)
Other and unspecified noninfectious enteritis and colitis	*	0.3 (0.1)
ntestinal obstructions	*	
Diverticula of intestine	*	0.2 (0.1)
rritable bowel syndrome	· · · ·	0.3 (0.2)
Constipation	*	0.2 (0.1)
Anal and rectal diseases	*	0.3 (0.2)
lemorrhoids and perianal venous thrombosis	*	0.2 (0.1)
Alcoholic liver disease	*	*
Other diseases of the liver	*	0.1 (0.1)
Disorders of gallbladder and biliary tract	*	0.2 (0.1)
Diseases of the pancreas	*	*
Jnspecified gastrointestinal bleeding	*	0.0 (0.0)
Other diseases of the digestive system	4,819 (1,310)	0.6 (0.1)
Diseases of the skin and subcutaneous tissue		
Cellulitis	*	0.2 (0.1)
Cutaneous abscess	*	0.0 (0.0)
Other local infections of the skin and subcutaneous tissue	*	0.3 (0.1)
Contact dermatitis and other eczema	*	0.3 (0.1)
Psoriasis and other similar disorders	*2,705 (950)	0.3 (0.1)
Irticaria	2,705 (950)	
		*
Other inflammatory conditions of skin and subcutaneous tissue	6,199 (950)	0.7 (0.1)
Actinic keratosis and other sun exposure related disorders	4,686 (1,046)	0.5 (0.1)
Acne	4,575 (909)	0.5 (0.1)
Sebaceous cyst	*	0.1 (0.0)
Seborrheic keratosis	2,208 (488)	0.3 (0.1)

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)
		,,
Diseases of the skin and subcutaneous tissue—Con.		
orns, callosities and other hypertrophic and atrophic skin condition	1,453 (371)	0.2 (0.0)
ressure ulcers	*	*
ther disorders of the skin and subcutaneous tissue	11,775 (3,456)	1.4 (0.4)
Diseases of the musculoskeletal system and connective tissue		
heumatoid arthritis	*	0.7 (0.4)
fectious and inflammatory arthropathies, excluding		
heumatoid and juvenile arthritis	*	0.2 (0.1)
steoarthritis	16,713 (3,887) *	1.9 (0.4) *
cquired deformities of fingers and toes ternal derangement of knee	* *	0.1 (0.1)
ther joint disorders	10,999 (2,094)	1.3 (0.2)
pinal stenosis	*	0.1 (0.0)
pondylopathies, excluding spinal stenosis	*	0.2 (0.1)
	*0 700 /4 007)	
tervertebral disc disorders ow back pain, unspecified	*2,768 (1,087) 4,599 (1,275)	0.3 (0.1) 0.5 (0.1)
ther conditions of the spine and back, excluding low back pain	*9,388 (2,844)	1.1 (0.3)
ynovitis and tenosynovitis	9,500 (2,044 <i>)</i> *	0.1 (0.1)
oft tissue disorders related to use, overuse and pressure	4,555 (1,144)	0.5 (0.1)
anglion and cyst of synovium, tendon and bursa	*	*
yalgia and myositis, unspecified	*	0.1 (0.0)
steoporosis	*	0.1 (0.1)
sorders of bone and cartilage, excluding osteoporosis	*	0.1 (0.0)
ther diseases of the musculoskeletal system and connective tissue	*7,155 (2,466)	0.8 (0.3)
Diseases of the genitourinary system		
fections of kidney	*	*
cute kidney failure	*	*
hronic kidney disease, excluding end stage renal disease (ESRD)	*	0.7 (0.3)
nd stage renal disease (ESRD)	*	*
alculus of kidney and ureter	*1,664 (548)	0.2 (0.1)
ystitis	*	0.2 (0.1)
rethral stricture	*	*
rinary tract infection, site not specified	*3,577 (1,099)	0.4 (0.1)
tress and other specified urinary incontinence, excluding functional ther diseases of the urinary system	*2,056 (680)	0.1 (0.0) 0.2 (0.1)
enign prostatic hyperplasia (BPH)	1,931 (528)	0.2 (0.1)
isorders of prepuce	*	*
ther disorders of male genital organs	1,889 (536)	0.2 (0.1)
nspecified lump or mass in breast	*	*
isorders of the breast, excluding unspecified lump or mass	*5,861 (3,176)	0.7 (0.4)
flammatory disease of female pelvic organs	*	0.2 (0.1)
ndometriosis	*	*
enital prolapse (female) ysplasia of cervix (uteri)	*	0.1 (0.0) 0.0 (0.0)
ther noninflammatory disorders of female genital organs	* *	0.0 (0.0)
isorders of menstruation and abnormal bleeding	*	0.2 (0.1)
enopausal and postmenopausal disorders	2,957 (809)	0.3 (0.1)
ther disorders of female genital tract	*	0.1 (0.1)
Complications of programs, childbirth, and the puerperium		
Complications of pregnancy, childbirth, and the puerperium	*	*
issed abortion	* 7 629 (1 906)	* 0.9 (0.2)
ncounter for supervision of high-risk pregnancy ncounter for full-term uncomplicated delivery	7,629 (1,906)	0.9 (0.2) 0.1 (0.1)
e-existing diabetes mellitus, type 2, complicating pregnancy	*	0.1 (0.1) *
acounter for supervision of normal pregnancy	19,861 (4,687)	2.3 (0.5)
ther encounter related to pregnancy, excluding incidental pregnancy	*	0.2 (0.1)
ostpartum care and examination	*	0.4 (0.1)
ther complications of pregnancy	4,297 (1,104)	0.5 (0.1)
omplications of childbirth (includes labor and delivery)	*	*
omplications of the puerperium	*	*

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distributior (standard error of percent)
		· · · · · ·
Certain conditions originating in the perinatal period		
Certain other conditions originating in the perinatal period	*	0.1 (0.1)
Congenital anomalies		
Congenital anomolies	*2,109 (706)	0.2 (0.1)
Symptoms, signs, and ill-defined conditions		
Abnormal heart beat and heart sounds	*	0.3 (0.1)
Epistaxis Cough, unspecified	4,802 (1,106)	0.0 (0.0) 0.6 (0.1)
Dyspnea and respiratory abnormalities	4,002 (1,100)	0.3 (0.1)
Chest pain	2,612 (692)	0.3 (0.1)
Abdominal pain	10,045 (2,652)	1.2 (0.3)
Fecal incontinence	*	*
Inspecified jaundice, edema and other non-specific skin symptoms	5,409 (1,027)	0.6 (0.1)
lematuria	*1,118 (405)	0.1 (0.0)
Jrinary incontinence, unspecified and functional	*	0.0 (0.0)
Symptoms involving the genitourinary system, excluding hematuria	3,579 (851)	0.4 (0.1)
/ertigo and lightheadedness	*2,290 (742)	0.3 (0.1)
Fever of other and unknown origin	*	0.4 (0.1)
Headache	*	0.2 (0.1)
Aalaise and fatigue	*	0.2 (0.1)
Syncope and collapse	*	0.1 (0.1)
Convulsions and seizures, not elsewhere classified	*	0.1 (0.1)
Jnspecified nausea, vomiting, diarrhea	*	0.3 (0.2)
Other symptoms, signs, abnormal findings and ill-defined conditions	26,086 (3,364)	3.0 (0.3)
Injury and poisoning		
njury of eye and orbit	*	0.1 (0.0)
Contusions (bruise, hematoma), excluding face and head	*	0.1 (0.1)
Superficial injuries, excluding contusions (abrasion, blister, external		
constriction, splinter, superficial bite)	*	0.1 (0.0)
Dpen wound of head	*	*
Dpen wound of wrist, hand and fingers	*	*
Dpen wound of hip and lower limb	*	0.1 (0.1)
Dpen wound, excluding head, hand, fingers, lower limb and interna	*	*
Fraumatic fracture of shoulder and upper arm (clavicle, scapula, humerus)	*	0.1 (0.1)
Fraumatic fracture of forearm (radius and ulna)	*	0.0 (0.0)
Fraumatic fracture of wrist, hand and fingers (carpal, metacarpals,		
phalanges)	*	0.1 (0.1)
Fraumatic fracture of hip (head and neck of femur)	*	*
Fraumatic fracture of ankle (medial malleolus, lateral malleolus, bimalleolar, trimalleolar)	*	0.1 (0.1)
Traumatic fracture of leg, foot and toes, excluding hip and ankle (femur, patella, tibia,	*	
fibula, tarsals, metatarsals, phalanges)	^ ···	0.1 (0.1)
Other traumatic fractures (skull, facial bones, vertebrae, ribs,	*	0.0.(0.0)
sternum, pelvis) Foor of modial maniacula, current injuny		0.0 (0.0)
lear of medial meniscus, current injury Dislocations, excluding tear of medial meniscus	*	0.1 (0.0) 0.3 (0.1)
Sprains and strains of neck	*	0.0 (0.0)
Sprains and strains of back	*	0.1 (0.1)
Sprains and strains of knee	*	0.1 (0.1)
Strains and sprains of ankle	*	0.2 (0.1)
Sprain and strains, excluding neck, back, wrist, hand, knee, ankle	*	0.1 (0.1)
Concussion	*	0.0 (0.0)
ntracranial injury, excluding concussion	*	*
Other injuries, excluding burns and poisonings	4,317 (962)	0.5 (0.1)
Burns and corrosions, external and internal, excluding sunburn	*	0.0 (0.0)
Poisoning (overdose or wrong substance given or taken in error) due to		
drugs and biological substances, accidental (unintentional)	*	*
Adverse effects (of correct substance properly administered) of drugs and biological		
substances	*	*
Other and unspecified effects of external causes	*	0.1 (0.0)
Complications of surgical and medical care	*	0.2 (0.1)

Primary diagnosis group ¹	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)
Supplemental classifications		
Encounter for general adult medical examinations, including routine		
gynecological examination	43,228 (5,491)	5.0 (0.6)
Encounter for routine newborn health examination	*	0.1 (0.1)
Encounter for routine child examination, excluding newborns	36,093 (6,696)	4.2 (0.8)
Encounter and observation for suspected conditions ruled out	*	0.1 (0.1)
Encounter for specific procedures and aftercare and follow up examination after		0.1 (0.1)
completed treatment, excluding for injuries	*26,152 (8,725)	3.0 (1.0)
Potential health hazards related to communicable diseases	*	0.0 (0.0)
Encounter for contraceptive management	3,562 (736)	0.4 (0.1)
Fertility and genetic counseling and screening and other procreative management	*	*
Personal history of pulmonary embolism and other venous thrombosis and embolism	*	*
Personal history of cerebral infarction or transient ischemic attack		
(TIA) without residual deficits	*	0.0 (0.0)
Potential health hazards related to personal and family history, excluding personal history		0.0 (0.0)
of pulmonary embolism and personal history of cerebral infarction or transient ischemic		
attack (TIA) without residual deficits	4,616 (871)	0.5 (0.1)
Body mass index (BMI) 30 or greater, adult	*	*
Encounter for screening colonoscopy	*	0.2 (0.1)
Encounter for screening mammogram	*	*
Other factors influencing health status and contact with health services	31,966 (4,244)	3.7 (0.4)
Non-uterine pregnancy	*	*
Contusions (bruise, hematoma) of face and head	*	0.0 (0.0)
Head injury, not otherwise specified	*	*
Jncodable entries ²	*6,353 (2,143)	0.7 (0.2)
Unknown or blank	*5,946 (2,783)	0.7 (0.2)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics (NCHS) standards of reliability .

0.0 Quantity more than zero but less than 0.05.

¹Based on the International Classification of Diseases, 10th Revision, Clinical Modification (ICD–10–CM). Codes have been combined according to 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. There are substantial differences between ICD–9–CM and ICD–10–CM, so users should take caution when comparing diagnosis estimates in this table with those from pre-2016. ²Common examples include illegible diagnosis and entry of "none," "no diagnosis," "no disease," or "healthy" as the only entry in the diagnosis item.

NOTES: Numbers may not add to totals because of 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.

Table 15. Injury visits to office-based physicians, by selected patient and visit characteristics: United States, 2018

Patient characteristics	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)	Number of visits per 100 persons per year ¹ (standard error of rate)
All injury visits ²	49,070 (4,775)	100.0	15.2 (1.5)
Age group (years)			
Under 15	5,739 (1,058)	11.7 (2.2)	9.4 (1.7)
Under 1	*	1.1 (0.6)	14.6 (7.7)
1–4	*	2.4 (1.0)	7.4 (3.1)
5–14	4,000 (968)	8.2 (2.0)	9.7 (2.4)
15–24	4,438 (935)	9.0 (1.6)	10.6 (2.2)
25–44	8,237 (1,505)	16.8 (2.6)	9.7 (1.8)
45–64	15,789 (2,162)	32.2 (2.9)	19.0 (2.6)
65 and over	14,868 (2,288)	30.3 (3.3)	29.1 (4.5)
65–74	7,270 (1,551)	14.8 (2.6)	24.0 (5.1)
75 and over	7,598 (1,466)	15.5 (2.6)	36.4 (7.0)
Sex and age group (years)			
Female	26,378 (3,147)	53.8 (4.0)	16.0 (1.9)
Under 15	*	6.4 (1.7)	10.6 (2.7)
15–24	*	5.9 (1.4)	13.8 (3.8)
25–44	3,389 (818)	6.9 (1.5)	7.9 (1.9)
45–64	7,611 (1,372)	15.5 (2.2)	17.8 (3.2)
65–74	4,712 (1,094)	9.6 (2.0)	29.2 (6.8)
75 and over	4,654 (1,005)	9.5 (2.0)	38.5 (8.3)
Male	22,692 (3,016)	46.2 (4.0)	14.4 (1.9)
Under 15	*	5.3 (1.6)	8.4 (2.5)
15–24	1,567 (456)	3.2 (0.9)	7.4 (2.2)
25–44	4,847 (1,249)	9.9 (2.4)	11.5 (3.0)
45–64	8,178 (1,548)	16.7 (2.7)	20.3 (3.8)
65–74	*	*	18.1 (6.8)
75 and over	*	*	33.5 (12.2)
Race ³			
White	42,998 (4,328)	87.6 (2.4)	17.4 (1.8)
Black or African American	3,171 (836)	6.5 (1.6)	7.5 (2.0)
Other ⁴	*	*	8.8 (3.1)
Ethnicity ³			
Hispanic or Latino	6,753 (1,298)	13.8 (2.4)	11.4 (2.2)
Not Hispanic or Latino	42,317 (4,395)	86.2 (2.4)	16.1 (1.7)
White	37,004 (4,106)	75.4 (3.3)	19.0 (2.1)
Black or African American	2,703 (783)	5.5 (1.6)	6.8 (2.0)
Other ⁴	*	*	9.1 (3.4)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Visit rates for age, sex, race, and ethnicity are based on the July 1, 2018, set of estimates of the civilian noninstitutional population of the United States as developed by the U.S. Census Bureau, Population Division.

²The National Ambulatory Medical Care Survey (NAMCS) definition of injury visits, as shown in this table, changed in 2016 and includes only any listed reason for visit and diagnosis codes that are related to injury, poisoning, or adverse effects. Reason for visit was coded using 'A Reason for Visit Classification for Ambulatory Care," diagnosis was coded using the International Classification of Diseases, 10th Revision, Clinical Modification (ICD–10–CM). Using this definition, injury visits accounted for 5.7% (SE = 0.5) of all office visits in 2018. For more information on why this definition, changed, see the 2018 NAMCS Public Use Data File Documentation, available from: ftp://ttp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2018-508.pdf. ³The race groups white, black or African American, and other include persons of Hispanic and not of Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for NAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2018 NAMCS Public Use Data File Documentation, available from: ftp://ttp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2018-508.pdf. For 2018, race data were missing for 33.8% of injury visits, and ethnicity data were missing for 31.4% of injury visits.

⁴Other race includes visits by Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native persons, and persons with more than one race.

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

Intent ¹	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)
All visits for injury, poisoning, and adverse effect ²	57,547 (5,221)	100.0
Unintentional Assault Undetermined or other ³ Legal intervention or war Blank cause	24,753 (3,207) * * * 31,404 (3,385)	43.0 (3.7) * 1.5 (0.7) * 54.6 (3.6)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics 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, "Proposed Framework for Presenting Injury Data Using ICD-10-CM External Cause of Injury Codes," 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 because of the switch from the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) coding system, used to code diagnosis data prior to 2016, to the ICD-10-CM coding system for 2016 and later years. In prior years, injury visits included any listed reason for visit and diagnosis codes related to injury and poisoning based on the ICD-9-CM. In 2018, injury visits include any listed reason for visit and diagnosis codes related to injury, poisoning, and adverse effects based on the ICD-10-CM, as well as information indicating that the visit is related to an injury or trauma, overdose or poisoning, or adverse effect of medical or surgical treatment based on the patient record form 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 7.2% (SE = 0.7) of all office visits in 2018. Certain diagnosis codes for injury visits were not captured using the ICD-10-CM External Cause matrix (1.4% of visits in 2018). Common diagnoses in this group include activity of person seeking health care and place of occurrence of external cause. For more details, see the 2018 NAMCS Public Use Data File Documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2018-508.pdf. ³Combines self-harm, assault, legal intervention or war, undetermined, and other causes because estimates for those causes of injury did not meet National Center for Health Statistics standards of reliability.

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

Table 17. Presence of selected chronic conditions at office visits, by patient age and sex: United States, 2018

			Age group (years)			S	ex
Chronic condition ¹	Total	Under 45	45–64	65–74	75 and over	Female	Male
			Percent dist	ribution (standard erro	or of percent)		
All visits	100.0	100.0	100.0	100.0	100.0	100.0	100.0
None	36.4 (2.1)	64.8 (2.7)	25.0 (1.9)	17.4 (2.0)	9.4 (1.3)	38.3 (2.4)	33.8 (2.3)
One or more chronic conditions	60.6 (2.1)	31.8 (2.3)	72.7 (2.0)	78.9 (2.5)	87.9 (1.5)	58.6 (2.4)	63.3 (2.3)
One	21.8 (0.9)	20.1 (1.6)	26.1 (1.4)	20.1 (1.6)	19.9 (1.4)	21.6 (1.0)	22.1 (1.2)
Two	16.1 (0.8)	8.6 (1.1)	20.9 (1.2)	21.7 (1.7)	19.0 (1.5)	16.6 (1.1)	15.2 (0.9)
Three or more	22.7 (1.6)	3.0 (0.6)	25.7 (2.2)	37.1 (2.8)	49.0 (2.5)	20.4 (1.7)	26.0 (2.0)
Blank	3.0 (1.0)	* ′	2.2 (0.8)	* ´	2.7 (0.9)	3.1 (1.0)	2.9 (1.0)
Diabetes mellitus (DM)	13.9 (0.9)	2.6 (0.4)	16.8 (1.4)	23.1 (1.9)	25.7 (1.9)	12.1 (0.9)	16.4 (1.4)
Diabetes mellitus (DM), Type 1	0.6 (0.1)	0.5 (0.2)	0.6 (0.3)	1.2 (0.5)	0.3 (0.1)	0.6 (0.2)	0.7 (0.2)
Diabetes mellitus (DM), Type 2	9.5 (0.8)	1.1 (0.3)	11.9 (1.4)	16.5 (1.7)	17.7 (1.8)	8.2 (0.8)	11.3 (1.2)
Diabetes mellitus (DM), Type unspecified	3.8 (0.5)	1.0 (0.2)	4.3 (0.7)	5.4 (0.9)	7.7 (1.3)	3.3 (0.5)	4.4 (0.7)
Hypertension	30.5 (1.5)	5.7 (0.8)	36.3 (2.0)	48.5 (2.5)	60.7 (2.2)	28.3 (1.5)	33.7 (1.9)
Hyperlipidemia	19.4 (1.6)	2.4 (0.4)	24.2 (2.4)	34.1 (2.6)	35.7 (2.7)	17.1 (1.5)	22.7 (2.1)
Arthritis	11.4 (1.3)	2.4 (0.9)	13.5 (1.7)	17.5 (1.9)	22.5 (2.9)	12.7 (1.8)	9.6 (1.0)
Depression	10.6 (0.9)	9.0 (1.1)	14.5 (1.5)	8.9 (1.2)	9.0 (1.5)	12.1 (1.1)	8.5 (0.9)
Desity	8.5 (0.8)	5.5 (0.8)	13.6 (1.5)	8.6 (1.3)	6.1 (1.0)	8.3 (0.9)	8.7 (1.0)
Cancer	7.0 (0.8)	1.9 (0.7)	7.9 (1.5)	10.4 (1.4)	13.8 (1.3)	6.9 (0.8)	7.0 (1.0)
Coronary artery disease (CAD), ischemic	7.0 (0.0)	1.5 (0.7)	7.5 (1.5)	10.4 (1.4)	10.0 (1.0)	0.0 (0.0)	7.0 (1.0)
heart disease (IHD), or history of myocardial							
infarction	60(07)		E 2 (0 0)	100 (1 E)	10.0 (0.0)	4 5 (0 7)	10.2 (1.0)
Asthma	6.9 (0.7)	0.6 (0.2)	5.3 (0.9)	12.2 (1.5)	19.2 (2.2)	4.5 (0.7)	10.2 (1.0)
	5.9 (0.6)	5.0 (0.7)	6.7 (0.9)	7.3 (1.4)	4.8 (0.8)	7.0 (0.8)	4.2 (0.6)
Obstructive sleep apnea (OSA)	4.5 (1.2)	1.5 (0.5)	6.7 (2.0)	* ´	5.7 (1.6)	3.5 (1.1)	6.0 (1.6)
Chronic kidney disease (CKD)	4.1 (0.8)	0.3 (0.2)	2.7 (0.8)	5.9 (1.3)	14.4 (3.0)	3.5 (0.7)	5.0 (1.2)
Chronic obstructive pulmonary disease							
(COPD)	4.1 (0.5)	0.7 (0.3)	3.9 (0.6)	8.2 (1.2)	8.4 (1.2)	3.7 (0.5)	4.7 (0.7)
Substance abuse or dependence	2.5 (0.5)	2.8 (0.8)	3.8 (0.9)	1.2 (0.4)	0.9 (0.4)	2.0 (0.4)	3.3 (0.8)
Attention deficit disorder (ADD) and attention							
deficit hyperactivity disorder (ADHD)	2.4 (0.3)	4.9 (0.7)	1.5 (0.5)	*	*	1.7 (0.3)	3.3 (0.5)
Dsteoporosis	2.4 (0.5)	*	1.7 (0.5)	4.1 (0.8)	7.7 (1.9)	3.3 (0.7)	1.2 (0.3)
Congestive heart failure (CHF)	2.3 (0.5)	0.4 (0.2)	2.2 (0.8)	2.3 (0.6)	7.0 (1.2)	1.8 (0.4)	3.0 (0.7)
Cerebrovascular disease	2.1 (0.3)	0.3 (0.1)	1.5 (0.4)	3.5 (0.8)	5.8 (1.1)	1.6 (0.3)	2.7 (0.5)
Alcohol misuse, abuse, or dependence	1.2 (0.2)	0.6 (0.2)	1.7 (0.4)	1.5 (0.5)	1.4 (0.6)	0.9 (0.3)	1.6 (0.3)
listory of pulmonary embolism (PE) or deep							
vein thrombosis (DVT)	1.0 (0.2)	0.2 (0.1)	1.1 (0.3)	1.8 (0.6)	1.5 (0.7)	0.9 (0.2)	1.1 (0.3)
Nzheimer disease and dementia	0.7 (0.1)	*	0.4 (0.2)	1.0 (0.4)	2.7 (0.7)	0.9 (0.2)	0.4 (0.2)
utism spectrum disorder	0.6 (0.2)	1.2 (0.4)	0.2 (0.1)	*	*	0.3 (0.2)	1.0 (0.3)
lepatitis C	0.4 (0.1)	*	0.8 (0.3)	0.8 (0.4)	*	0.4 (0.1)	0.5 (0.2)
End-stage renal disease (ESRD)	0.3 (0.1)	*	0.3 (0.2)	0.4 (0.2)	0.7 (0.3)	0.3 (0.1)	0.4 (0.2)
Hepatitis B	0.3 (0.1)	*	0.9 (0.4)	0.8 (0.4)	*	0.3 (0.1)	0.4 (0.2)
HIV infection and AIDS	0.2 (0.1)	0.1 (0.0)	0.2 (0.1)	*	*	0.1 (0.0)	0.3 (0.1)

Table 17. Presence of selected chronic conditions at office visits, by patient age and sex: United States, 2018—Con.

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

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

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

Table 18. Presence of selected chronic conditions at office visits, by geographic area: United States, 2018

	Metropolitan status			
Chronic condition	MSA ¹	Non-MSA ¹		
	Percent of visits (stan	dard error of percent)		
All visits	88.9 (2.4)	11.1 (2.4)		
Hypertension	28.5 (1.6)	47.0 (4.6)		
Hyperlipidemia	18.0 (1.7)	30.8 (4.0)		
Arthritis	11.5 (1.5)	10.8 (2.4)		
Diabetes ²	13.3 (1.0)	18.7 (2.9)		
Depression	9.6 (0.8)	18.9 (3.7)		
Obesity	7.8 (0.7)	14.0 (3.4)		
Asthma	5.8 (0.6)	6.8 (1.7)		
Cancer	6.8 (0.9)	7.9 (1.4)		
COPD ³	3.6 (0.5)	8.3 (2.0)		
Osteoporosis	2.4 (0.5)	2.2 (0.9)		

¹MSA is metropolitan statistical area.

²Includes both Type 1 diabetes mellitus (insulin dependent or IDDM) and Type II diabetes mellitus (non-insulin dependent or NIDDM), and diabetes with type unspecified. Excludes diabetes insipidus and gestational diabetes.

³Chronic obstructive pulmonary disease.

NOTES: Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses. Combined total visits by patients with chronic conditions and percentage of visits exceeds 100% because more than one chronic condition may be reported per visit. Numbers may not add to totals because more than one chronic condition may be reported per visit.

Table 19. Selected services ordered or provided at office visits, by patient sex: United States, 2018

Services	Number of visits ¹ (standard error) in thousands	Both sexes	Female ²	Male ³
			ribution (standard error	
Il visits	- 860,386 (37,935)	100.0	100.0	100.0
One or more services ordered or provided ⁴	830,498 (37,624)	96.5 (1.1)	96.0 (1.6)	97.2 (0.7)
lone	*29,888 (9,649)	3.5 (1.1)	4.0 (1.6)	2.8 (0.7)
Examinations and screenings	*7 540 (2 925)	00(05)	1 2 (0 7)	*
omestic violence screening ectal	*7,510 (3,825) *14,453 (7,451)	0.9 (0.5) 1.7 (0.9)	1.3 (0.7) 2.0 (1.2)	1.2 (0.4)
Icohol misuse screening (includes AUDIT, MAST,	14,400 (7,401)	1.7 (0.0)	2.0 (1.2)	1.2 (0.4)
CAGE, T-ACE)	*12,868 (4,016)	1.5 (0.5)	1.7 (0.6)	1.2 (0.4)
ubstance abuse screening (includes NIDA/NIMASSIST,				
CAGE/AID, DAST-10)	*10,218 (3,439)	1.2 (0.4)	1.3 (0.5)	1.1 (0.3)
kin 	149,211 (20,363)	17.3 (2.3)	17.6 (2.5)	17.0 (2.3)
etinal	118,932 (14,152)	13.8 (1.6)	13.1 (1.7)	14.9 (1.9)
	92,283 (17,515)	10.7 (2.0)	11.0 (2.3)	10.3 (1.9)
epression screening	37,218 (7,907)	4.3 (0.9)	4.4 (1.1)	4.2 (1.0)
elvic roact	34,723 (5,256) 25 555 (5 603)	4.0 (0.6)	6.8 (1.0)	*
reast oot	25,555 (5,603) 23,816 (5,470)	3.0 (0.6)	4.8 (1.0)	0.3 (0.2)
Vital signs	23,816 (5,470)	2.8 (0.6)	2.7 (0.7)	2.9 (0.7)
/eight	664,714 (37,400)	77.3 (1.9)	76.9 (2.3)	77.8 (1.9)
eight	604,852 (35,577)	70.3 (2.2)	70.4 (2.6)	70.1 (2.2)
lood pressure	565,018 (33,217)	65.7 (2.4)	66.0 (2.9)	65.2 (2.5)
emperature	301,191 (27,666)	35.0 (2.8)	33.0 (2.8)	37.9 (3.1)
•		0010 (210)	0010 (210)	
Laboratory tests				
ver enzymes or hepatic function panel	*7,301 (3,062)	0.8 (0.4)	0.7 (0.2)	1.1 (0.5)
IV test ⁵	*4,156 (1,340)	0.5 (0.2)	0.6 (0.2)	0.3 (0.1)
reatinine or renal function panel	*13,831 (5,679)	1.6 (0.7)	1.3 (0.5)	2.0 (1.1)
omplete blood count (CBC)	78,120 (9,555)	9.1 (1.0)	8.7 (1.0)	9.7 (1.3)
omprehensive metabolic panel	70,892 (9,742)	8.2 (1.1)	7.8 (1.2)	8.9 (1.1)
rinalysis (UA)	65,432 (8,208)	7.6 (0.9)	8.8 (1.2)	5.9 (1.0)
ipids or cholesterol	55,147 (7,417)	6.4 (0.8)	5.2 (0.7)	8.1 (1.1)
SH or thyroid panel Iycohemoglobin (HgbA1C)	36,758 (5,606) 30,555 (4,908)	4.3 (0.6) 3.6 (0.5)	4.3 (0.7) 3.1 (0.6)	4.2 (0.8) 4.3 (0.7)
asic metabolic panel	22,638 (4,533)	2.6 (0.5)	2.3 (0.5)	3.1 (0.7)
ap test	14,331 (2,332)	1.7 (0.3)	2.8 (0.3)	3.1 (0. <i>1</i>) *
apid strep test	11,981 (3,164)	1.4 (0.4)	1.3 (0.4)	1.5 (0.5)
llucose	10,950 (2,622)	1.3 (0.3)	1.6 (0.4)	0.8 (0.3)
itamin D test	10,267 (2,488)	1.2 (0.3)	1.1 (0.3)	1.3 (0.4)
epatitis testing	*9,117 (2,749)	1.1 (0.3)	1.3 (0.5)	0.6 (0.3)
rostate specific antigen (PSA)	8,425 (1,311)	1.0 (0.2)	*	2.4 (0.4)
regnancy or HCG test	5,039 (1,209)	0.6 (0.1)	1.0 (0.2)	*
hlamydia test	5,019 (1,254)	0.6 (0.1)	0.8 (0.2)	0.3 (0.2)
PV DNA test ⁶	4,962 (1,384)	0.6 (0.2)	1.0 (0.3)	*
onorrhea test	3,518 (816)	0.4 (0.1)	0.6 (0.1)	0.2 (0.1)
ulture:				. ,
Throat	*4,496 (1,564)	0.5 (0.2)	0.5 (0.2)	0.6 (0.3)
Blood	*4,031 (1,533)	0.5 (0.2)	0.4 (0.3)	0.5 (0.2)
Urine	10,575 (2,130)	1.2 (0.2)	1.4 (0.3)	1.0 (0.3)
Other	7,304 (1,622)	0.8 (0.2)	1.1 (0.3)	0.5 (0.2)
Procedures				
etal monitoring	*5,546 (3,400)	0.6 (0.4)	1.1 (0.7)	*
ectromyogram (EMG)	*2,692 (923)	0.3 (0.1)	0.4 (0.1)	0.2 (0.1)
pnometry	*2,160 (1,014)	0.3 (0.1)	0.3 (0.1)	0.2 (0.2)
udiometry	*10,704 (3,601)	1.2 (0.4)	0.9 (0.2)	1.7 (0.9)
lectroencephalogram (EEG)	*1,118 (395)	0.1 (0.0)	0.1 (0.0)	0.2 (0.1)
igmoidoscopy	*	* ′	*	*

Table 19. Selected services ordered or provided at office visits, by patient sex: United States, 2018-Con.

Services	Number of visits ¹ (standard error) in thousands	Both sexes	Female ²	Male ³	
Procedures—Con.		Percent distribution (standard error of percent)			
pirometry	*	0.6 (0.2)	0.7 (0.3)	0.5 (0.2)	
uberculosis skin testing or PPD	*	0.1 (0.0)	0.1 (0.0)	0.1 (0.1)	
pper gastrointestinal endoscopy or EGD	*	0.4 (0.2)	0.4 (0.2)	0.4 (0.3)	
ectrocardiogram (EKG or ECG)	26,999 (4,306)	3.1 (0.5)	3.1 (0.6)	3.2 (0.5)	
olonoscopy	13,920 (3,974)	1.6 (0.4)	1.6 (0.4)	1.7 (0.7)	
ryosurgery (cryotherapy)	11,377 (1,889)	1.3 (0.2)	1.0 (0.2)	1.8 (0.3)	
opsy	8,055 (1,091)	0.9 (0.1)	1.0 (0.2)	0.9 (0.2)	
kcision of tissue	5,720 (797)	0.7 (0.1)	0.5 (0.1)	1.0 (0.2)	
ardiac stress test	4,025 (890)	0.5 (0.1)́	0.4 (0.1)	0.6 (0.2)	
Imaging					
ther imaging	*3,304 (1,134)	0.4 (0.1)	0.2 (0.1)	0.6 (0.3)	
ny imaging	108,009 (7,966)	12.6 (0.9)	13.7 (1.1)	10.8 (1.1)	
ray	38,489 (4,204)	4.5 (0.5)	4.5 (0.6)	4.5 (0.6)	
trasound, excluding echocardiogram	29,987 (3,965)	3.5 (0.5)	4.4 (0.6)	2.1 (0.4)	
ammography	13,485 (2,904)	1.6 (0.3)	2.6 (0.6)	*	
agnetic resonance imaging (MRI)	13,116 (2,232)	1.5 (0.3)	1.3 (0.3)	1.9 (0.4)	
omputed tomography (CT) scan	10,296 (1,600)	1.2 (0.2)	0.9 (0.2)	1.7 (0.4)	
chocardiogram	9,959 (2,106)	1.2 (0.2)	1.0 (0.3)	1.4 (0.3)	
one mineral density	3,374 (939)	0.4 (0.1)	0.5 (0.1)	0.3 (0.2)	
Treatment	*0 704 (0 400)	4.4.(0.4)	10(04)		
urable medical equipment	*9,781 (3,133)	1.1 (0.4)	1.0 (0.4)	1.3 (0.4)	
ome health care	*5,649 (3,295) *	0.7 (0.4)	0.6 (0.4)	0.7 (0.4) *	
omplementary and alternative medicine (CAM)	*	0.1 (0.1) *		*	
adiation therapy ccupation therapy	*	0.1 (0.0)	* 0.1 (0.1)	0.1 (0.1)	
ther mental health counseling	16,361 (3,830)	1.9 (0.4)	1.8 (0.4)	2.1 (0.6)	
/ound care	15,251 (3,314)	1.8 (0.4)	1.8 (0.5)	1.8 (0.4)	
hysical therapy	14,704 (2,651)	1.7 (0.3)	1.5 (0.3)	2.0 (0.4)	
sychotherapy	14,153 (2,808)	1.6 (0.3)	1.4 (0.3)	2.0 (0.6)	
ast, splint, or wrap	5,513 (1,425)	0.6 (0.2)	0.6 (0.2)	0.7 (0.3)	
Health education and counseling					
ubstance abuse counseling	*9,183 (2,795)	1.1 (0.3)	0.9 (0.3)	1.4 (0.5)	
Icohol abuse counseling	*4,508 (1,556)	0.5 (0.2)	0.4 (0.2)	0.6 (0.2)	
sthma	*	0.2 (0.1)	0.2 (0.1)	0.1 (0.1)	
sthma action plan given to patient	*	0.1 (0.0)	0.1 (0.1)	*	
TD prevention	*	0.3 (0.1)	0.4 (0.2)	0.2 (0.2)	
enetic counseling	*	0.1 (0.1)	0.2 (0.1)	*	
iet or nutrition	98,503 (12,326)	11.4 (1.4)	10.9 (1.4)	12.2 (1.6)	
xercise	65,504 (9,437)	7.6 (1.1)	7.5 (1.2)	7.8 (1.2)	
bacco use or exposure	27,874 (5,487)	3.2 (0.6)	3.1 (0.7)	3.4 (0.7)	
rowth or development	22,782 (6,291)	2.6 (0.7)	2.0 (0.5)	3.6 (1.1)	
eight reduction	22,601 (5,587)	2.6 (0.7)	2.3 (0.5)	3.0 (0.9)	
jury prevention	*21,141 (6,352)	2.5 (0.7)	1.8 (0.5)	3.5 (1.2)	
iabetes education	12,212 (2,778)	1.4 (0.3)	1.1 (0.4)	1.9 (0.4)	
tress management	9,410 (2,285)	1.1 (0.3)	1.3 (0.3)	0.8 (0.3)	
amily planning or contraception	7,840 (1,548)	0.9 (0.2)	1.4 (0.3)	0.2 (0.1)	

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Combined total of all listed services exceeds "all visits," and percent of visits exceeds 100%, because more than one service may be reported per visit.

²Based on 507,122,000 visits made by females.

³Based on 353,263,000 visits made by males.

⁴Includes up to nine write-in procedures from the Services item on the patient record form. Procedures are coded to the International Classification of Diseases, 10th Revision, Procedure Coding System (ICD–10–PCS). Records with write-in procedures that overlap checkboxes are edited to ensure that the checkbox is marked; in this way, the checkbox always provides a summary estimate but should not be added to the corresponding ICD–10–PCS procedure to avoid double counting. Procedures that could not be included in one of the checkboxes are included in the estimated total number of visits with services but are not shown separately.

⁵HIV is human immunodeficiency virus.

⁶HPV is human papilloma virus; DNA is deoxyribonucleic acid.

^{0.0} Quantity more than zero but less than 0.05.

Table 20. Initial blood pressure measurements recorded at offic	e visits to primary care providers for adults	aged 18 and over, by selected	patient characteristics: United States, 2018

			Initial blo	od pressure ¹		
Patient characteristic	Number of visits in thousands	Total	Not high	Mildly high	Moderately high	Severely high
	Percent distribution (standard error of percent)					
All visits ²	307,141	100.0	30.1 (2.0)	49.3 (1.9)	17.7 (1.4)	2.9 (0.5)
Age group (years)						
18–24	18,671	100.0	52.6 (6.0)	45.3 (5.9)	*	*
25-44	79,052	100.0	45.6 (3.8)	44.7 (3.4)	8.4 (1.5)	*
15-64	107,377	100.0	24.5 (3.2)	50.2 (2.7)	21.5 (2.4)	*
65–74	51,543	100.0	19.1 (2.3)	56.1 (3.0)	21.6 (3.1)	*
′5 and over	50,498	100.0	20.5 (3.1)	49.3 (3.5)	26.3 (2.6)	*
Sex						
emale	200,982	100.0	36.7 (2.3)	46.9 (1.9)	14.9 (1.4)	*
Male	106,159	100.0	17.5 (2.6)	53.9 (3.6)	23.0 (2.5)	*
Race ³						
Vhite	252,955	100.0	28.9 (2.0)	50.2 (2.0)	17.9 (1.4)	*
Black or African American	23,381	100.0	23.8 (5.1)	51.0 (5.3)	19.4 (5.1)	*
Dther ⁴	*30,805	100.0	44.5 (4.9)	40.3 (3.5)	15.3 (2.9)	*
Ethnicity ³						
Hispanic or Latino	53,758	100.0	39.6 (3.3)	45.2 (3.1)	12.8 (2.2)	*
lot Hispanic or Latino	253,383	100.0	28.1 (2.1)	50.2 (2.1)	18.8 (1.5)	*
White	203,447	100.0	26.1 (2.0)	51.5 (2.2)	19.2 (1.5)	*
Black or African American	20,164	100.0	22.9 (5.7)	53.0 (5.5)	19.4 (4.9)	*
Other ⁴	*29,772	100.0	45.3 (5.3)	39.2 (3.8)	15.6 (2.9)	*

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Blood pressure (BP) levels were categorized using the following hierarchical definitions: Severely high BP is defined as 160 mm Hg systolic or above, or 100 mmHg diastolic or above. Moderately high BP is defined as 140–159 mm Hg systolic or 90–99 mm Hg diastolic. Mildly high BP is defined as 120–139 mm Hg systolic or 80–89 mm Hg diastolic. Not high BP is defined as any BP less than 120 mm Hg systolic and less than 80 mm Hg diastolic. High BP classification was based on the "Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure (JNC–7)." Mildly high BP corresponds to the (JNC–7) prehypertensive range. Moderately high BP corresponds to the (JNC–7) stage 1 hypertensive range. Severely high BP corresponds to the JNC–7 stage 2 hypertensive range.

²Visits where blood pressure was taken represent 92.7% (SE = 2.1) of all office visits made to primary care specialists by adults (aged 18 and over).

³The race groups white, black or African American, and other include persons of Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of modelbased single imputation for National Ambulatory Medical Care Survey (NAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2018 NAMCS Public Use Data File Documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/ doc2018-508.pdf. For 2018, race data were missing for 29.1% of adult visits made to primary care specialists.

⁴Other race includes visits by Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native persons, and persons with more than one race.

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

Table 21. Medication therapy and number of medications mentioned at office visits, by patient sex: United States, 2018

Medication therapy ¹	Number of visits (standard error) in thousands	Both sexes	Female ²	Male ³		
		Percent distribution (standard error of percent)				
All visits	- 860,386 (37,935)	100.0	100.0	100.0		
Visits with mention of medication ⁴ Visits without mention of medication Blank	590,855 (31,028) 255,550 (21,719) *13,981 (6,945)	68.7 (2.2) 29.7 (2.1) 1.6 (0.8)	67.2 (2.8) 31.1 (2.7) 1.7 (0.9)	70.8 (2.1) 27.7 (2.1) 1.6 (0.7)		
Number of medications provided or prescribed						
All visits	860,386 (37,935)	100.0	100.0	100.0		
)	255,550 (21,719)	29.7 (2.1)	31.1 (2.7)	27.7 (2.1)		
	165,098 (10,015)	19.2 (1.0)	17.5 (1.3)	21.6 (1.3)		
	93,467 (6,287)	10.9 (0.7)	10.9 (0.8)	10.9 (0.9)		
	73,472 (6,814)	8.5 (0.7)	8.8 (0.8)	8.2 (0.9)		
	51,735 (5,293)	6.0 (0.6)	5.7 (0.7)	6.4 (0.7)		
	42,012 (4,232)	4.9 (0.5)	5.0 (0.6)	4.7 (0.5)		
	29,239 (4,030)	3.4 (0.4)	3.7 (0.5)	3.0 (0.4)		
	24,602 (3,383)	2.9 (0.4)	2.9 (0.5)	2.8 (0.4)		
	24,991 (3,052)	2.9 (0.3)	3.3 (0.5)	2.4 (0.3)		
	18,503 (2,745)	2.2 (0.3)	2.0 (0.4)	2.4 (0.4)		
0	10,493 (1,647)	1.2 (0.2)	1.2 (0.2)	1.3 (0.3)		
1	8,695 (1,533)	1.0 (0.2)	0.9 (0.2)	1.2 (0.3)		
2	10,173 (1,795)	1.2 (0.2)	1.0 (0.2)	1.4 (0.3)		
3	7,970 (1,639)	0.9 (0.2)	0.7 (0.2)	1.2 (0.3)		
4	7,388 (1,792)	0.9 (0.2)	0.9 (0.2)	0.8 (0.3)		
5 or more	23,018 (4,208)	2.7 (0.5)	2.7 (0.6)	2.7 (0.5)		
Blank	*13,981 (6,945)	1.6 (0.8)	1.7 (0.9)	1.6 (0.7)		

... Category not applicable.

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

²Based on 507,122,000 visits made by females.

³Based on 353,263,000 visits made by males.

⁴A drug mention is documentation in a patient's record of a drug provided, prescribed, or continued at a visit (up to 30 per visit); also defined as drug visits.

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

^{*} Estimate does not meet National Center for Health Statistics standards of reliability.

Table 22. Office drug visits and drug mentions, by physician characteristics: United States, 2018

	Drug	Drug visits ¹		Drug mentions ²		Drug mention rates ⁴ (standard error of rate)	
Physician characteristic	Number of visitsPercent distribution(standard error)(standard error ofin thousandspercent)		Number of visitsPercent distribution(standard error)(standard error ofin thousandspercent)		Percent of office visits with drug mentions ³ (standard error of percent)		
All physicians	590,855 (31,028)	100.0	2,676,847 (217,196)	100.0	68.7 (2.2)	311.1 (19.7)	
Physician specialty							
Primary care	319,057 (26,459)	54.0 (2.6)	1,371,089 (175,749)	51.2 (4.0)	72.5 (2.8)	311.5 (29.7)	
Medical specialty	113,219 (12,013)	19.2 (2.0)	563,484 (86,986)	21.1 (3.2)	55.5 (5.3)	276.3 (32.0)	
Surgical speciaty	158,578 (15,876)	26.8 (2.5)	742,274 (111,903)	27.7 (3.8)	73.3 (3.0)	343.2 (39.8)	
Professional degree							
Doctor of medicine	547,724 (30,066)	92.7 (1.3)	2,497,170 (212,935)	93.3 (1.6)	68.2 (2.3)	310.8 (20.8)	
Doctor of osteopathy	43,131 (7,665)	7.3 (1.3)	179,678 (42,813)	6.7 (1.6)	75.7 (5.1)	315.3 (49.6)	

... Category not applicable.

¹Visits at which one or more drugs were provided or prescribed.

²A drug mention is documentation in a patient's record of a drug provided, prescribed, or continued at a visit (up to 30 per visit); also defined as drug visits.

³Percentage of visits that included one or more drugs provided or prescribed (number of drug visits divided by total number of office visits multiplied by 100).

⁴Average number of drugs that were provided or prescribed per 100 visits (total number of drug mentions divided by total number of visits multiplied by 100).

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

Table 23. Twenty most frequently mentioned drugs, by therapeutic drug category at office visits: United States, 2018

Therapeutic drug category ¹	Number of occurrences (standard error) in thousands	Percent of drug mentions ² (standard error of percent)
Analgesics ³	285,097 (23,953)	10.7 (0.4)
Antihyperlipidemic agents	137,462 (16,590)	5.1 (0.3)
Antidepressants	126,167 (13,687)	4.7 (0.3)
Antidiabetic agents	113,738 (13,573)	4.2 (0.4)
Vitamins	113,157 (15,418)	4.2 (0.4)
Antiplatelet agents	99,057 (12,848)	3.7 (0.3)
Anxiolytics, sedatives, and hypnotics	96,965 (10,102)	3.6 (0.3)
Dermatological agents	93,742 (10,164)	3.5 (0.3)
Bronchodilators	89,713 (10,858)	3.4 (0.2)
Beta-adrenergic blocking agents	87,771 (9,867)	3.3 (0.2)
Anticonvulsants	84,174 (7,808)	3.1 (0.2)
Proton pump inhibitors	71,833 (8,650)	2.7 (0.2)
Immunostimulants	67,608 (12,380)	2.5 (0.5)
Ophthalmic preparations	65,862 (7,579)	2.5 (0.3)
Vitamin and mineral combinations	63,534 (8,356)	2.4 (0.2)
Calcium channel blocking agents	63,315 (8,860)	2.4 (0.2)
Diuretics	61,681 (9,031)	2.3 (0.2)
Minerals and electrolytes	53,880 (7,984)	2.0 (0.2)
Angiotensin converting enzyme (ACE) inhibitors	52,959 (5,983)	2.0 (0.2)
Antihistamines	50,777 (5,935)	1.9 (0.1)

¹Based on Multum Lexicon second-level therapeutic drug category, available from: https://www.cerner.com/solutions/

drug-database.

²Based on an estimated 2,676,847,000 drug mentions.

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

Drug name ¹	Number of mentions (standard error) in thousands	Percent distribution (standard error of percent)	Total	New	Continued	Unknown ²	Therapeutic drug category ³
	Percent of mention (standard error of percent)						
			-			· /	
All drug mentions	2,676,847 (217,196)	100.0	100.0	20.1 (2.0)	78.3 (2.2)	1.6 (0.6)	
Aspirin	77,946 (9,143)	2.9 (0.2)	100.0	2.5 (0.7)	95.0 (1.5)	*	Analgesics, Antiplatelet agents
Atorvastatin	56,561 (7,056)	2.1 (0.2)	100.0	*	94.1 (1.7)	1.4 (0.8)	Antihyperlipidemic agents
Albuterol	53,540 (6,003)	2.0 (0.1)	100.0	14.3 (3.2)	84.9 (3.2)	0.8 (0.8)	Bronchodilators
Metoprolol	46,059 (6,400)	1.7 (0.1)	100.0	2.6 (1.1)	**96.2 (1.7)	1.2 (0.9)	Beta-adrenergic blocking agents
Levothyroxine	45,596 (5,250)	1.7 (0.1)	100.0	7.4 (2.2)	90.9 (2.6)	* ′	Thyroid drugs
Amlodipine	44,484 (6,488)	1.7 (0.2)	100.0	5.9 (1.5)	91.9 (1.8)	*	Calcium channel blocking agents
_isinopril				. ,			Angiotensin converting enzyme
	41,934 (4,567)	1.6 (0.1)	100.0	*	89.4 (3.0)	*	inhibitors
Cholecalciferol	38,350 (9,706)	1.4 (0.3)	100.0	*	**90.1 (4.5)	*	Vitamins
Multivitamin	38,072 (5,173)	1.4 (0.2)	100.0	*	94.1 (1.8)	0.8 (0.4)	Vitamin and mineral combinations
Metformin	37,683 (4,833)	1.4 (0.1)	100.0	*	**91.6 (2.6)	*	Antidiabetic agents
Omeprazole	32,860 (4,318)	1.2 (0.1)	100.0	*	**95.6 (1.4)	0.5 (0.3)	Proton pump inhibitors
Losartan	31,460 (4,124)	1.2 (0.1)	100.0	10.6 (3.0)	87.8 (3.1)	1.6 (1.0)	Angiotensin II inhibitors
buprofen	30,385 (3,991)	1.1 (0.1)	100.0	37.4 (5.9)	61.5 (5.9)	*	Analgesics
Gabapentin	28,686 (3,682)	1.1 (0.1)	100.0	9.4 (2.4)	88.0 (2.9)	*	Anticonvulsants
Simvastatin	26,197 (4,232)	1.0 (0.1)	100.0	*	**95.7 (1.8)	*	Antihyperlipidemic agents
Acetaminophen	25,891 (3,851)	1.0 (0.1)	100.0	*	*	*	Analgesics
Furosemide	24,531 (4,770)	0.9 (0.1)	100.0	*	**90.5 (3.5)	*	Diuretics
Alprazolam							Anxiolytics, sedatives, and
	23,052 (4,266)	0.9 (0.1)	100.0	*	81.1 (5.6)	*	hypnotics
Pantoprazole	21,298 (3,697)	0.8 (0.1)	100.0	*	**91 (3.6)	*	Proton pump inhibitors
Fluticasone nasal	20,511 (3,417)	0.8 (0.1)	100.0	25.9 (5.3)	73.4 (5.2)	0.8 (0.5)	Nasal preparations
Other	1,931,752 (148,141)	72.2 (0.9)	100.0	24.2 (2.4)	74.2 (2.5)	1.6 (0.6)	Other

Table 24. Twenty most frequently mentioned drug names at office visits, by new or continued status: United States, 2018

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

** Estimate meets National Center for Health Statistics standards of reliability, but its complement does not.

¹Based on Multum Lexicon terminology, drug name reflects the active ingredient(s) of a drug provided, prescribed, or continued.

²Includes drugs provided or prescribed that did not have either the new drug or continued drug checkboxes marked.

³Based on Multum Lexicon second-level therapeutic drug category, available from: https://www.cerner.com/solutions/drug-database.

Table 25. Providers seen at office visits: United States, 2018

Type of Provider	Number of visits ¹ (standard error) in thousands	Percent of visits (standard error of percent)
All visits	860,386 (37,935)	
Physician	848,086 (37,972)	98.6 (0.4)
Other provider	252,607 (31,123)	29.4 (3.3)
RN ² or LPN ³	134,275 (24,290)	15.6 (2.7)
Physician assistant	*30,162 (12,321)	*
Nurse practitioner or midwife	*11,255 (4,027)	1.3 (0.5)
Mental health provider	*10,444 (3,315)	1.2 (0.4)
Blank	*	0.0 (0.0)

. Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability. ¹Combined total of individual providers exceeds "all visits," and "percent of visits" exceeds 100%, because more than one provider may be reported per visit. The sample of visits was drawn from all scheduled visits to a sampled physician during the 1-week reporting period. However, at 1% of these visits, the physician was not seen; instead, the patient saw another provider.

²Registered nurse.

³Licensed practical nurse.

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

Table 26. Disposition of office visits: United States, 2018

Disposition	Number of visits ¹ (standard error) in thousands	Percent of visits (standard error of percent)
All visits	860,386 (37,935)	
Return to referring physician	22,972 (5,010)	2.7 (0.6)
Refer to other physician	59,790 (7,267)	6.9 (0.9)
Return in less than 1 week	21,161 (3,130)	2.5 (0.4)
Return in 1 week to less than 2 months	247,848 (15,679)	28.8 (1.5)
Return in 2 months or greater	267,792 (22,369)	31.1 (2.0)
Return at unspecified time	49,238 (7,241)	5.7 (0.8)
Return as needed (p.r.n.)	203,159 (18,024)	23.6 (1.8)
Refer to emergency room or Admit to hospital	*2,725 (870)	0.3 (0.1)
Other disposition	41,760 (5,825)	4.9 (0.7)
Blank	*23,214 (7,678)	2.7 (0.9)

... Category not applicable. * Estimate does not meet National Center for Health Statistics standards of reliability. ¹Combined total of individual dispositions exceeds "all visits," and "percent of visits" exceeds 100% because more than one disposition may be reported per visit.

Table 27. Time spent with physician: United States, 2018

Time spent with physician	Number of visits (standard error) in thousands	Percent distribution (standard error of percent)
All visits	860,386	100.0
Visits at which no physician was seen	12,299 (3,040)	1.4 (0.4)
Visits at which a physician was seen	848,086 (37,972)	98.6 (0.4)
Total ¹	848,086	100.0
1–5 minutes	8,113 (1,486)	1.0 (0.2)
6–10 minutes	69,802 (8,577)	8.2 (1.0)
11–15 minutes	262,381 (23,799)	30.9 (2.3)
16–30 minutes	391,754 (25,351)	46.2 (2.1)
31–60 minutes	103,868 (8,497)	12.2 (1.0)
61 minutes and over	12,168 (2,341)	1.4 (0.3)

... Category not applicable. ¹Time spent with physician was reported only for visits where a physician was seen. Time spent with physician was missing for

32.0% of visits where a physician was seen. Estimates presented include imputed values for missing data.

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

Table 28. Mean time spent with physician, by physician characteristics: United States, 2018

Physician characteristics	Mean time in minutes spent with physician (standard error of mean) ¹	25th percentile	Median	75th percentile
All visits	22.9 (0.4)	14.4	19.3	29.1
Physician specialty				
Primary care	20.9 (0.4)	14.4	19.0	25.7
Medical specialty	22.8 (1.0)	14.3	19.1	29.1
Surgical specialty	27.1 (0.9)	14.8	20.7	30.0
Professional degree				
Doctor of medicine	23.0 (0.4)	14.4	19.4	29.2
Doctor of osteopathy	20.8 (0.9)	14.3	15.2	24.4

¹Includes only visits where a physician was seen. Time spent with physician was missing for 32.0% of visits where physician was seen. Estimates presented include imputed values for missing data.

Table 29. Physician characteristics, by response status: United States, 2018

Physician characteristic ¹	Number of sampled in-scope physicians ²	Total in-scope sample percent distribution ³ (weighted)	Responding physician percent distribution ⁴ (weighted)	Nonresponding physician percent distribution ⁵ (weighted)	Physician response rate ⁶ (weighted percent)	Participants ⁷	Particpation rate ⁸ (weighted percent)
All office-based physicians	1,647	100.0	100.0	100.0	40.5	672	44.0
Age (years)							
Under 50	628	39.4	37.6	40.5	38.7	231	42.0
50 and over	1,019	60.6	62.4	59.5	41.6	441	45.3
Sex							
Male	1,176	66.2	68.8	64.5	42	489	45.2
Female	471	33.8	31.2	35.5	37.4	183	41.8
Metropolitan status							
MSA ⁹	1,547	93.3	90.3	95.3	39.2	622	43.0
Non-MSA	100	6.7	9.7	4.7	58.3	50	58.6
Type of doctor							
Doctor of medicine	1,516	94.1	94.5	93.8	40.6	623	44.2
Doctor of osteopathy	131	5.9	5.5	6.2	37.8	49	41.1
Physician specialty ¹⁰							
Primary care	441	44.2	44.4	44.1	40.6	191	44.6
Surgical	660	21.3	23.3	19.9	44.4	262	47.4
Medical	546	34.5	32.3	36.0	37.9	219	41.2
Practice type							
Solo	354	18.3	20.0	17.1	44.4	152	49.7
Two physicians	73	4.4	4.6	4.2	42.8	37	49.2
Group or HMO ¹¹	871	53.7	49.9	56.3	37.6	343	40.6
Medical school or government	36	2.7	2.9	2.5	44.4	16	44.4
Other	106	6.7	7.6	6.1	45.8	48	47.3
Unclassified	207	14.3	15.0	13.8	42.5	76	46.3
Annual visit volume							
0–25 percentile	416	28.2	47.8	14.9	68.6	262	72.6
26–50 percentile	408	23.2	18.4	26.4	32.1	125	35.4
51–75 percentile	413	31.7	17.3	41.5	22	109	23.1
76–100 Percentile	410	17.0	16.6	17.2	39.7	176	47.4

¹Information on characteristics is drawn from a combination of sources: the master files of the American Medical Association and the American Osteopathic Association, and the National Ambulatory Medical Care Survey (NAMCS) physician induction form.

²In-scope physicians are those who verified that they were nonfederal and involved in direct patient care in an office-based practice, excluding the specialties of radiology, pathology, and anesthesiology.

³Total in-scope sample physicians are those who were selected from (a) the masterfiles of the American Medical Association, and (b) the American Osteopathic Association. In-scope determination was also used for inclusion in NAMCS.

⁴Responding physicians are those who were in-scope and participated fully in completion of patient record forms (PRFs) or were unavailable to complete PRFs.

⁵Nonresponding physicians are those who were in-scope and participated minimally or refused to participate in NAMCS.

⁶Values represent a response rate among physicians selected from the core office-based sample. Numerator is the number of in-scope physicians from the physician sample who participated fully in NAMCS or who did not see any patients during their sampled reporting week. Denominator is all in-scope physicians selected from the physician sample.

⁷Physicians for whom at least one PRF was completed (full and minimal responders) and including physicians who saw no patients during their sample week.

⁸Number of participants divided by the number of in-scope physicians.

9MSA is metropolitan statistical area.

¹⁰Physician specialty type defined in the 2018 NAMCS Public Use Data File Documentation, available from: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/ doc2018-508.pdf.

¹¹HMO is health maintenance organization.