Persons with disabilities experiencing problems accessing PDF file should contact <u>nchsed@cdc.gov</u>, or call 301-458-4688

HEALTH STATISTICS

FROM THE U. S. NATIONAL HEALTH SURVEY

preliminary report on volume of PHYSICIAN VISITS United States July-September 1957

Statistics on physician visits and interval since last physician visit based on data collected by household interviews during July, August, and September-1957

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE Marion B. Folsom, Secretary

> Public Health Service Leroy E. Burney, Surgeon General

Division of Public Health Methods G. St. J. Perrott, Chief

Washington, D. C.

February 1958

U. S. NATIONAL HEALTH SURVEY

Forrest E. Linder, Ph. D., Director Theodore D. Woolsey, Assistant Director Alice M. Waterhouse, M. D., Medical Advisor Walt R. Simmons, Statistical Advisor O. K. Sagen, Ph. D., Chief, Special Studies Philip S. Lawrence, Sc. D., Chief, Household Survey Analysis

The U. S. National Health Survey is a continuing program under which the Public Health Service makes studies to determine the extent of illness and disability in the population of the United States and to gather related information. It is authorized by Public Law 652, 84th Congress.

CO-OPERATION OF THE BUREAU OF THE CENSUS

Under the legislation establishing the National Health Survey, the Public Health Service is authorized to use, insofar as possible, the services or facilities of other Federal, State, or private agencies. For the national household survey the Bureau of the Census designed and selected the sample, conducted the household interviews, and processed the data in accordance with specifications established by the Public Health Service.

34140

CONTENTS

	Page
Summary	1
Source of Data	1
Frequency of Visits	2
Distribution of Physician Visits by Place of Visit	4
Distribution of Physician Visits by Type of Service	4
Time Interval Since Last Physician Visit	5
Detailed Tables	7
Appendix I Background of This Report Data for Present Report	21 21 21 21 21 22
Appendix Il Medical Care Terms Location of Residence Terms	24 24 25

.

•

-

EXPLANATION OF SYMBOLS

Data not available (three dashes)	
Category not applicable (three dots)	•••
Quantity is zero (1 dash)	-
Magnitude greater than zero but is less than one-half of the unit used	0 or 0.0

VOLUME OF PHYSICIAN VISITS

SUMMARY

Data on physician visits from the U.S. National Health Survey household interviews during the months of July, August, and September 1957 disclosed that during this quarter residents of the United States visited physicians at a rate equivalent to slightly under five visits a year. Most of the visits took place at physicians' offices. In less than 10 percent of all visits the physician went to the patients' homes.

Persons living on farms in rural areas used physician services at a rate of 3.6 visits per person per year during the quarter as compared with 4.5 for the rural nonfarm population and 5.1 for the urban population.

About two-thirds of all physician visits involved diagnosis and treatment services and only one-third involved preventive care or other services.

A comparison of physician visits for the rural farm, rural nonfarm, and urban populations, according to the type of medical service given, indicated a marked similarity. In all three residence groups visits for diagnosis and treatment represented the largest share. Visits for this type of service accounted for about three of every five consultations in rural nonfarm areas, and a somewhat higher proportion among the urban and rural farm populations. Visits for general checkups were somewhat less frequent for the rural farm population than for either of the other two areas of residence.

Eighteen percent of all people in the United States had consulted a physician within the last month. This information on interval since last physician visit represents the situation for the quarter centered in August 1957, a time of year when the receipt of medical services may be near the seasonal low. However, utilization of physician services during this quarter may be higher than usual since other evidence suggests that cases of respiratory diseases in the third quarter of 1957 were at above-average levels.

SOURCE OF DATA

The data presented in this report are derived from household interviews obtained in a continuous probability sample of the civilian noninstitutional population of the United States during the period from July 1 through September 29, 1957. Interviews were conducted in approximately 9,000 households comprising 28,500 persons.

A description of the statistical design of the household survey and general qualifications regarding data presented in this report are given in Appendix I. Special attention is called to information contained in the section entitled Reliability of Estimates of Appendix I. The data in all of the cells in the tables that follow are subject to errors of sampling, i. e., errors resulting from the use of a sample of households instead of a complete census of all households in the country. For most of the cells these errors do not affect greatly the reliability of the estimates. In some cells, however, where an estimated number or the numerator or denominator of a rate or percentage is small, the error due to sampling may be high. Such estimates of numbers, rates, or percentages must be interpreted with caution.

Explanations and definitions of special terms and concepts used in this report are presented in Appendix II. Most of the terms have specialized technical meanings for the purposes of this survey, and familiarity with these definitions is necessary for the interpretation of the findings presented.

The statistical tables in this report present data on the estimated number of physician visits during July, August, and September 1957, and the distribution of these visits by sex and age of patient, by urban-rural residence, by place of visit,

I

This report was prepared by Robert R. Fuchsberg, of the U. S. National Health Survey staff.

and by type of service given. Data are also given to show the population of the United States according to the time interval since a physician was last consulted. Estimated population tables for the United States by sex, age, and urban-rural residence are included; but, as pointed out in Appendix I, these are not official estimates and are presented in this report only for use in rate computation.

The data relating to medical care are based on information collected in response to the questions in the section of the interview questionnaire shown below.

As with certain other items on the questionnaire, the time period referred to in Question 18 ("last week or the week before") was selected as a comparatively short interval designed to minimize errors due to respondent memory loss or distortion. Since the interviewing was carried on continuously throughout the July-September quarter, each two-week period may be considered a sample of the 13-week quarter. Hence, the first step in estimating the number of physician visits during the quarter was to multiply the frequencies in the two-week period by 6½. The estimates of the number of persons who last saw a doctor within a month, a year, five years, et cetera, refer to the civilian noninstitutional population of the country on August 1, 1957. For further information about the manner of making these estimates see Appendix I.

	MEDICAL CARE							
18.	(a) LAST WEEX OR THE WEEX BEFORE did anyone in the family - you, your, etc talk to a doctor or go to a doctor's office or clinic? Anyone else? If "Yes" (b) How many times during the past 2 weeks?	☐ Yes ☐ No (skip to q.20) No. of times						
	 (c) Where did you talk to the doctor? (d) How many times at (home, office, clinic, etc.)? (Record total number of times for each type of place) 	Place Times At home						
19.	What did you have dome? If more than one visit or telephone call: What did you have done on the { first second } visit (or telephone call)? etc.	(1) (2) (3) Diag. or treatment Pre/post matal care Gen'l check-up Immun./Vacc. Eye exam. (glasses) Other (Specify)						
20.	If "No" to q. 18a, ask: How long has it been since you last talked to a doctor?	Mos. orYrs.						

FREQUENCY OF VISITS

Estimates of the total volume and average number of physician visits by age, sex, and urbanrural residence are given in text table A and detailed tables 1-7. Certain salient points in these data may be noted. However, in considering the figures special note should be taken of the definition of a physician visit as used in this report since the substantial volume of visits to hospital inpatients is not included.

Approximately 199 million physician visits were made in the United States in the three-month period from July 1 through September 29, 1957. Ordinarily, seasonal factors during this period of the year tend to reduce the number of physician visits; but, as noted earlier, the year 1957 may have been exceptional because of the influenza epidemic which undoubtedly had an appreciable effect on the last weeks of this quarter.

The total of 199 million visits in the quarter is equivalent to an annual rate* of 4.8 visits per person per year. A significantly larger average rate of physician visits was made by females (5.5) than was made by males (3.9).

For males and females the annual rates of physician visits for the July-September quarter are shown by age in table A below and illustrated in figure 1. In all except the two youngest age groups females visited physicians more frequently than males. In the two groups comprising persons less than 15 years of age, boys appear to have con-

^{*}The rate for the quarter was approximately 1.2 visits per person, but for convenience in comparison all such rates have been expressed on an annual basis.

sulted physicians more often than girls, although the differences in the annual rates for the quarter are not large. In the 15-24 age group, however, females averaged 6.3 visits per year as compared

Table A. Average number of physician visits per person per year by sex and age: United States, July-September 1957

	Sex				
Age	Both sexes	Male	Female		
All ages	4.8	3.9	5,5		
Under 5 5-14 15-24 25-44 45-64 65+	4.8 3.4 5.0 4.9 4.8 6.8	5.0 3.6 3.4 3.5 3.8 5.8	4.6 3.2 6.3 6.2 5.8 7.6		

with 3.4 for males. In each succeeding age-sex group there was a substantially larger average number of visits for females. Obviously, maternity care may partly explain the higher rates for females in the 15-44 age groups, but may not be associated with the large rate difference between the sexes in the 45-64 age group. The highest rate of physician visits by any age-sex group was for women 65+ who averaged 7.6 visits a year.

It is interesting to note that the greatest change in average rate for males occurred from the 45-64 to the 65+ age groups, increasing from 3.8 to 5.8. For females, the greatest change occurred between the 5-14 and 15-24 groups, where the rate approximately doubled from 3.2 to 6.3.

Estimates of volume of physician visits, averages per year, and percentage figures for various categories by urban-rural residence are given in tables 3, 4, 6, and 7. The average number of physician visits made by persons in rural areas was significantly lower than that for persons in urban areas. Persons living on farms averaged 3.6 visits per year; those living in rural nonfarm areas, 4.5; and persons residing in urban areas, 5.1 visits. These differences are shown in figure 2.

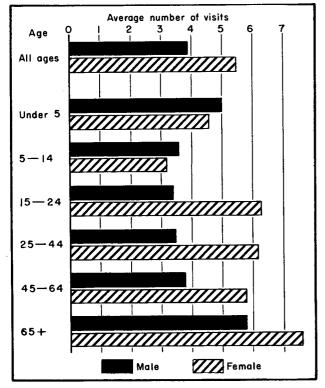


Figure 1. Average number of physician visits per person per year by sex and age.

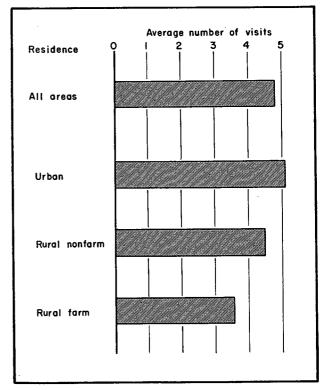


Figure 2. Average number of physician visits per person per year by residence.

DISTRIBUTION OF PHYSICIAN VISITS BY PLACE OF VISIT

Detailed data on the distribution of physician visits by place of visit are given in tables 1-7 and text table B. As may be seen in table B, the majority of all physician visits in the July-September quarter were office visits—the average number of office visits per person per year being 3.3 out of the total of 4.8 physician visits per person per year. Office visits accounted for two-thirds of all visits with only eight percent of the visits being made by physicians to patients at home (table 2).

Table B. Average number of physician visits per person per year by sex and place of visit: United States, July-September 1957

		Sex	
Place of visit	Both sexes	Male	Female
Total visits-	4.8	3.9	5.5
Office Home Hospital clinic Other	3.3 0.4 0.6 0.5	2.7 0.3 0.6 0.4	3.8 0.5 0.6 0.6

Data on physician visits by place of visit according to age are given in tables 1, 2, 5, and 7. It may be noted that the lowest percentages of office visits were for under 5 and 65+ age groups, although the differences between these and other age groups are not striking. An exception is the 25-44 age group for which 75 percent of all visits were office calls as compared with 61 percent for the under 5 age group and 64 percent for the 65+ group. The youngest and the oldest groups also differed in the proportion of visits to hospital clinics and "other" places. For the small children this proportion was quite high, while for the aged it was low. Since telephone calls for the purpose of medical consultation are included in the "other" classification, it is not surprising that 16 percent of all visits for children under 5 years of age was reported in this category.

The 65+ age group had the greatest proportion of home visits, 21 percent of all physician visits for this age group taking place in the home. For the adult age groups of 15-24 and 25-44, this proportion was only 4 percent.

The data for the July-September quarter provide an opportunity for comparison of physician visits by place of visit for persons living in urban and rural areas (tables 3, 4, 6, and 7). These data indicate that home visits were somewhat more frequent among urban residents than among rural nonfarm ones, and that the average number of home visits among rural nonfarm residents was slightly higher than among rural farm. Likewise, the proportion of office visits was highest for farm residents and lowest for urban (table 4). A slightly higher proportion of visits falling in the "other" category was observed in urban areas, probably because of greater use of telephone consultation in cities.

DISTRIBUTION OF PHYSICIAN VISITS BY TYPE OF SERVICE

The physician visits reported from July-September 1957 are classified into broad groups by the type of medical service performed. These data are given in tables 8-14 and text table C. In one visit a person may receive medical services that fall into different type-of-service categories, e. g., treatment and immunization. For this reason tables showing the number or percentage of visits involving various types of medical service add to more than the total number of visits.

- Table C. Average number of physician visits per person per year by sex and type of service: United States, July-September 1957
- [Sum of visits by type of service may be greater than the total visits, since one visit may involve more than one type of service]

		Sex	
Type of service	Both sexes	Male	Female
Total visits-	4.8	3.9	5,5
Diagnosis and treatment Prenatal and	3,3	2.8	3.7
postnatal care General checkup Immunization All other	0.2 0.5 0.4 0.5	0.4 0.3 0.4	0.4 0.6 0.4 0.5

More than two-thirds of all visits involved diagnosis or treatment or both. General checkup, the next largest category, was a type of service

given in about 10 percent of the total number of physician visits. The relative proportion of visits involving the different type-of-service categories are illustrated in figure 3. The same predominance may be noted for each age group-the bulk of all physician visits involved services included in the broad group "diagnosis and treatment," Physician visits involving the preventive care types of service represented a higher proportion of all visits in the younger age groups. For example, approximately one out of the 4.8 visits per person per year rendered to the under 5 age group involved immunization. The immunization category was also significant in the 5-14 age group for which 13 percent of all physician visits involved this type of service.

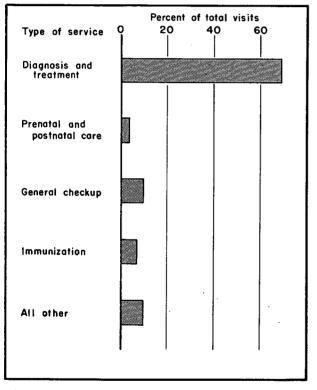


Figure 3. Percent distribution of physician visits by type of service.

The distribution of visits by type of service for urban, rural nonfarm, and rural farm residents in the July-September quarter give some indication of a higher proportion of visits involving the preventive care types of service for urban and rural nonfarm residents as compared with rural farm residents. There appears to have been a slightly smaller proportion of visits for prenatal

456311 O - 58 - Z

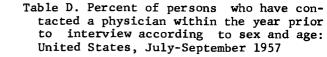
and postnatal care, general checkups, and immunizations among the rural farm residents when compared with the residents of areas in or close to cities. However, the data for this one quarter are not conclusive on this point and seasonal factors may be important.

TIME INTERVAL SINCE LAST PHYSICIAN VISIT

Information on the distribution of the United States population according to the time interval since the last physician visit is given by sex, age, and urban-rural residence in tables 15-19. Considering August 1957 as the population reference time for the first quarter of data collected by the household interview survey, it may be said that, as of that date, approximately three out of every five persons in the civilian noninstitutional population of the United States had consulted a physician within the preceding year. In other words, three out of five persons had consulted a physician at least once during this 1-year period. About one out of every five had consulted a physician at least once in the preceding month. Only nine percent of the population had not visited a physician during the preceding five years. Thus, it is estimated that more than 90 percent of the 167 million people covered by the Survey had at least one physician visit in the last five years.

Statistics on the time interval since the last physician visit according to age are given in tables 15, 17, and 19. Figure 4 shows for various age groups cumulative percentage of persons for 1month, 1-year, and 5-year-time intervals. With the exception of children under 5, the time elapsed since the last physician visit did not vary widely among the age groups. Although children under 5 appear to have had more recent contact with a physician, the fact that 95 percent were reported to have had medical advice within 5 years is not of great significance. Attendance of a physician at, or shortly after, birth in all except a small fraction of cases implies that most children under 5 had some medical attendance within 5 years.

The percent of the population by age and sex which had seen a physician within the preceding year is shown in table D. In every age group at least three out of every five persons had visited a physician in the preceding year. The proportion was highest, 79 percent, in the under 5 age group. For both sexes combined, 63 percent of the population had consulted a physician within the past year, but from table D it may be seen that 59 percent of all males and 67 percent of all females had at least one contact with a physician during the year. This difference in percentage between the sexes begins to appear in the 15-19 age group and is consistent for all subsequent age groups.



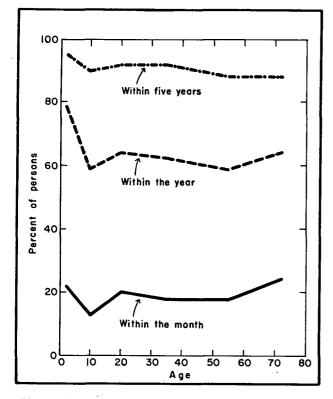


Figure 4. Interval since last physician visit. Percent of persons whose most recent physician visit was within the month, within the year, or within the five years prior to interview by age.

		Sex	
Age	Both sexes	Male	Female
All ages	63	. 59	67
Under 5 5-9 10-14 15-19 20-24 25-29 30-34 35-44 45-54 55-64 65 1	79 64 54 60 67 62 60 59 59 64	81 65 53 54 61 58 55 54 54 53 58	77 62 55 66 76 75 67 66 63 64 69

Tables 16, 18, and 19 give data according to urban and rural areas of residence. Sixty-four percent of the persons in the urban and rural nonfarm group and 58 percent in the rural farm group reported having consulted a physician within the past year. Similarly, the proportion of rural farm residents who had seen a physician within the last month or last five years was consistently lower than either the urban or the rural nonfarm group. This tendency toward less recent physician visits among the rural farm population exists for both males and females.

DETAILED TABLES

Page		
8	Average number of physician visits per person per year by place of visit and age: United States, July-September 1957	Table 1.
8	Percent distribution of physician visits by place of visit according to age: United States, July-September 1957	2.
8	Average number of physician visits per person per year by place of visit and residence: United States, July-September 1957	3.
9	Percent distribution of physician visits by place of visit according to residence: United States, July-September 1957	4.
9	Number of physician visits by place of visit, sex, and age: United States, July- September 1957	5.
10	Number of physician visits by place of visit, sex, and residence: United States, July-September 1957	6.
11	Number of physician visits by place of visit, residence, and age: United States, July-September 1957	7.
12	Average number of physician visits per person per year by type of service and age: United States, July-September 1957	8.
12	Percent distribution of physician visits by type of service according to age: United States, July-September 1957	9.
12	Average number of physician visits per person per year by type of service and residence: United States, July-September 1957	10.
13	Percent of physician visits by type of service according to residence: United States, July-September 1957	11.
13	Number of physician visits by type of service, sex, and age: United States, July- September 1957	12.
14	Number of physician visits by type of service, sex, and residence: United States, July-September 1957	13.
15	Number of physician visits by type of service, residence, and age: United States, July-September 1957	14.
16	Cumulative percent distribution of the population by time interval since last physician visit according to age: United States, August 1957	15.
16	Cumulative percent distribution of the population by time interval since last physician visit according to sex and residence: United States, August 1957	16.
17	Number of persons by time interval since last physician visit, sex, and age: United States, August 1957	17.
18	Number of persons by time interval since last physician visit, sex, and residence: United States, August 1957	18.
19	Number of persons by time interval since last physician visit, residence, and age: United States, August 1957	19.
2 0	Population used in obtaining the rates shown in this publication by residence, sex, and age: United States, August 1957	20.

Table 1. Average number of physician visits per person per year by place of visit and age: United States, July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the clvilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 4. Definitions of terms are given in Appandix II.]

	Place of visit				
Age	Total	Office	Home	Hospital clinic	Other ¹
All ages	4.8	3.3	0.4	0.6	0.5
Under 5 5-14 15-24 25-44 45-64 65+	4.8 3.4 5.0 4.9 4.8 6.8	2.9 2.4 3.3 3.7 3.2 4.4	0.3 0.2 0.2 0.5 1.4	0.7 0.4 1.0 0.5 0.6 0.5	0.8 0.4 0.5 0.6 0.5 0.5

¹Including telephone contacts.

Table 2. Percent distribution of physician visits by place of visit according to age: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information,on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

	Place of visit				
Age	Total	Office	Home	Hospital clinic	Other ¹
All ages	100	68	8	13	11
Under 5 5-14 15-24	100 100 100	61 69 67	7 6 4	15 13 19	16 12 10
25-44 45-64 65+	100 100 100	75 67 64	4 10 21	10 13	11 10

¹Including telephone contacts.

Table 3. Average number of physician visits per person per year by place of visit and residence: United States, July-September 1957

[Data are based on household interviews during duly-September 1957 and are preliminary. Data refer to tha clvilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 1.]

		Р	lace of visi	t				
Residence	Total	Office	Home	Hospital clinic	Other ¹			
All areas	4.8	3.3	0.4	0.6	0.5			
Urban areas Rural nonfarm Rural farm	5.1 4.5 3.6	3.4 3.1 2.7	0.5 0.3 0.2	0.6 0.6 0.5	0.6 0.4 0.3			

¹Including telephone contacts.

Table 4. Percent distribution of physician visits by place of visit according to residence: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

		Р	lace of visi	t	
Residence	Total	Office	Home	Hospital clinic	Other ¹
All areas	100	68	8	13	11
Urban areas Rural nonfarm Rural farm	100 100 100	67 70 74	9 7 4	12 14 13	12 9 9

¹Including telephone contacts.

Table 5. Number of physician visits by place of visit, sex, and age: United States, July-September 1957

EData are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

		P	lace of visi	t.	
Sex and age	Total	Office	Home	Hospital clinic	Other ¹
	N	umber of phy	sician visit	s in million	5
Both sexes	· · · · · · · · · · · · · · · · · · ·	· · · · ·	1	1	
All ages	198.9	136.2	15.8	25.0	21.9
Under 5	23.0	14.1	1.6	3.5	3.7
5-14	28.1	19.4	1.6	3.7	3.4
15-24	25.6	17.2	1.0	5.0	2.5
25-44	56.4	42.0	2.3	5.6	6.4
45-64	41.4	27.7	4.2	5.4	4.1
65+	24.4	15.7	5.1	1.8	1.8
Male					
All ages	80.2	54.6	5.2	11.3	9.1
Under 5	12.2	7.3	0.9	1.7	2.2
5-14	15.1	9.7	1.0	2.5	2.0
15-24	8.0	4.9	0.2	2.2	0.7
25-44	19.4	13.9	0.5	2.5	2.5
45-64	15.9	11.8	1.4	1.8	1.0
65+	9.6	. 7.0	1.1	0.7	0.7
Female					
All ages	118.6	81.6	10.7	13.6	12.8
Under 5	10.8	6.8	0.7	1.8	1.4
5-14	12.9	9.8	0.5	1.2	1.4
15-24	17.6	12.3	0.8	2.8	1.7
25-44	37.0	28.1	1.8	3.1	3.9
45-64	25.5	16.0	2.8	3.7	3.1
65+	14.8	8.6	4.0	1.1	1.1

¹Including telephone contacts.

Table 6. Number of physician visits by place of visit, sex, and residence: United States, July-September 1957

[Data are based on household interviews during duly-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

	Place of visit						
Sex and residence	Total	Office	Home	Hospital clinic	Other ¹		
· ·	N	Number of physician visits in mill					
Both sexes							
All areas	198.9	136.2	15.8	25.0	21.9		
Urban	129.3	86.6	11.5	15.6	15.6		
Rural nonfarm	50.9	35,8	3.5	6.9	4.7		
Rural farm	18.7	13.8	0.8	2.4	1.6		
Male							
All areas	80.2	54.6	5.2	11.3	9.1		
Urban	50.8	33.4	3.7	7.4	6.3		
Rural nonfarm	21.3	15.1	1.0	2.9	2.3		
Rural farm	8,1	6.0	0.4	1.1	0.5		
Female							
All areas	118.6	81.6	10.7	13.6	12.8		
Urban	78.5	53.2	7.8	8.2	9.3		
Rural nonfarm	29.6	20.7	2.5	4.0	2.4		
Rural farm	10.6	7.8	0.4	1.3	1.1		

¹Including telephone contacts.

Table 7. Number of physician visits by place of visit, residence, and age: United States, July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

	Place of visit						
Residence and age	Total	Office	Home	Hospital clinic	Other ¹		
	·	Number o	f visits in	millions			
<u>All areas</u>				[]			
All ages	198.9	136.2	15.8	25.0	21.9		
Under 5	23.0	14.1	1.6	3.5	3.7		
5-14	28.1	19.4	1.6	3.7	3.4		
15-24	25.6	17.2	1.0	5.0	2.5		
25-44	56.4	42.0	2.3	5.6	6.4		
45-64	41.4	27.7	4.2	5.4	4.1		
65+	24.4	15.7	5.1	1.8	1.8		
Urban							
All ages	129.3	86.6	11.5	15.6	15.6		
Under 5	14.0	8.4	1.3	1.6	2.7		
5-14	16.6	11.3	0.9	1.9	2.5		
15-24	17.1	11.1	0.7	3.5	1.7		
25-44	37.8	27.8	1.4	3.7	4.8		
45-64	28.1	18.0	3.2	4.1	3.0		
65+	15.8	10.0	4.0	0.9	0.9		
Rural nonfarm	1						
All ages	50.9	35.8	3.5	6.9	4.7		
Under 5	7.5	4.7	0.3	1.6	0.8		
5-14	8.6	6.0	0.5	1.4	0.6		
15-24	5.9	4.2	0.3	0.9	0.5		
25-44	14.7	10.9	0.7	1.6	1.5		
45-64	9.0	6.6	0.8	0.9	0.7		
65+	5.2	3.3	0.8	0.5	0.6		
Rural farm							
All ages	18.7	13.8	0.8	2.4	1.6		
Under 5	1.6	1.0		0.3	0.2		
5-14	2.9	2.1	0.2	0.3	0.3		
15-24	2.7	1.9	-	0.5	0.2		
25-44	3.9	3.4	0.1	0.3	0.0		
45-64	4.3	3.1	0.2	0.5	0.5		
65+	3.4	2.3	0.3	0.4	0.3		

¹Including telephone contacts.

ίĽ.

.

Table 8. Average number of physician visits per person per year by type of service and age: United States, July-September 1957

[Data are based on household interviews during duly-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, genaral qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

		Type of service							
Age	Total visits*	Diagnosis and treatment	Frenatal and postnatal care	General checkup	Immuni- zation	All other			
· · · · · · · · · · · · · · · · · · ·									
A11 ages	4.8	3.3	0.2	0.5	0.4	0.5			
Under 5	4.8	3.0		0.6	0.9	0.3			
5-14	3.4	2.1	0.0	0.4	0.5	0.5			
15-24	5.0	2.9	0.8	0.6	0.3	0.4			
25-44	4.9	3.3	0.4	0.4	0.3	0.6			
45-64	4.8	3.9	0.0	0.5	0.1	0.5			
65+	6.8	5.3		0.7	0.1	0.7			

*Sum of visits by type of service may be greater than the total visits, since one visit may involve more than one type of service.

,

Table 9. Percent distribution of physician visits by type of service according to age: United States, July-September 1957

EData are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the astimates are given in Appendix 4. Definitions of terms are given in Appendix 11.]

		Type of service					
Age	Total visits*	Diagnosis and treatment	Prenatal and postnatal care	General checkup	Immuni- zation	All other	
All ages	100	69	4	10	7	10	
Under 5 5-14 15-24 25-44 45-64 65+	100 100 100 100 100 100	62 61 59 67 80 78	 0 16 8 0 	13 11 12 8 10 11	20 13 7 6 2 1	6 15 7 11 10 11	

*Sum of percentages by type of service may be greater than 100 percent, since one visit may involve more than one type of service.

Table 10. Average number of physician visits per person per year by type of service and residence: United States, July-September 1957

[Date are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

		Type of service					
Residence	Total visits*	Diagnosis and treatment	Prenatal and postnatal care	General checkup	Immuni- zation	A11 other	
All areas	4.8	3.3	0.2	0.5	0.4	0.5	
Urban Rural nonfarm Rural farm	5.1 4.5 3.6	3.6 2.8 2.6	0.2 0.2 0.1	0.5 0.5 0.3	0.4 0.4 0.2	0.5 0.5 0.4	

^{*}Sum of visits by type of service may be greater than the total visits, since one visit may involve more than one type of service.

Table 11. Percent of physician visits by type of service according to residence: United States, July-September 1957

. . .

[Data are based on household interviews during July-September 1957 and are preliminary. Oata refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, genaral qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

		Type of service						
Residence	Total visits*	Diagnosis and treatment	Prenatal and postnatal care	General checkup	Immuni- zation	All other		
All areas	100	69	4	10	7	10		
Urban Rural nonfarm Rural farm	100 100 100	70 64 73	5 5 2	10 11 9	- 7 9 5	9 12 11		

^{*}Sum of percentages by type of service may be greater than 100 percent, since one visit may involve more than one type of service.

Table 12. Number of physician visits by type of service, sex, and age: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental Junited States. Obtailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

	Ту	pe of servi	ce			
Sex and age	Total visits*	Diagnosis and treatment	Prenatal and postnatal care	General checkup	Immuni- zation	All other
		Num	ber of visi	ts in milli	ons	
Both sexes					· .	
A11 ages	198.9	136.3	8.8	20.5	14.6	20.3
Under 5	23.0	14.2		3.0	4.5	1.4
5-14	28.1 25.6	17.1	4.2	3.2	3.8	4.1
25-44	25.0 56.4	15.1	4.2	3.0 4.6	1.7 3.5	1.8 6.4
45-64	41.4	33.0	4.0	4.0	0.9	4.0
65+	.24.4	19.1		2.6	0.2	2.6
M-1-					•••	
Male						
All ages	80.2	56.8	<u> </u>	8.2	7.0	8.6
Under 5	12.2	7.1		1.7	2.4	1.0
5-14	15.1	8.5		1.8	2.1	2.8
15-24	8.0	5.5		1.1	0.6	0.9
25-44	19.4	15.2		0.9	1.6	1.7
45-64	15.9	13.0	•••	1.6	0.2	1.2
65+	9.6	7.5	•••	1.2	-	0.9
<u>Female</u>						
All ages	118.6	79.5	8.8	12.3	7.7	11.8
Under 5 5-14	10.8	7.1	•••	1.3 1.4	2.1	0.4
15-24	17.6	9.6	4.2	2.0	1.1	0.8
25-44	37.0	22.5	4.6	3.6	1.9	4.7
45-64	25.5	20.0		2,5	0.7	2.9
65+	14.8	11.6		1.4	0.2	1.7

^{*}Sum of visits by type of service may be greater than the total visits, since one visit may involve more than one type of service.

Table 13. Number of physician visits by type of service, sex, and residence: United States, July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and informatlon on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

	Type of service					
Sex and residence	Total visits*	Diagnosis and treatment	Prenatal and postnatal care	General checkup	Immuni- zation	A11 oth er
		Num	ber of visi	ts in milli	ons	
Both sexes						
All areas	198.9	136.3	8.8	20.5	14.6	20.3
Urban Rural nonfarm Rural farm	129.3 50.9 18.7	90.3 32.4 13.6	6.0 2.4 0.5	13.3 5.6 1.7	9.0 4.7 0.9	12.1 6.1 2.1
Male						
All areas	80.2	56.8		8.2	7.0	8.6
Urban Rural nonfarm Rural farm	50.8 21.3 8.1	36.9 13.8 6.1	•••	5.1 2.5 0.7	4.2 2.4 0.4	4.9 2.6 1.0
Female						
All areas	118.6	79.5	8.8	12.3	7.7	11.8
Urban Rural nonfarm Rural farm	78.5 29.6 10.6	53.4 18.6 7.5	6.0 2.4 0.5	8.1 3.1 1.0	4.9 2.3 0.5	7.1 3.5 1.1

*Sum of visits by type of service may be greater than the total visits, since one visit may involve more than one type of service.

Table 14. Number of physician visits by type of service, residence, and age: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civillan noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

			Ту	pe of servi		
Residence and age	Total visits•	Diagnosis and treatment	Prenatal and postnatal care	General checkup	Immuni- zation	All other
		Num	ber of visi	ts in milli	ons	
<u>All areas</u>		1	1			
All ages	198.9	136.3	8.8	20.5	14.6	20.3
Under 5	23.0	14.2		3.0	4.5	1.4
5-14	28.1	17.1		3.2	3.8	4.1
15-24	25.6	15.1	4.2	3.0	1.7	1.8
25-44	56.4	37.7	4.6	4.6	3.5	6.4
45-64	41.4	33.0	····	4.1	0.9	4.0
65+	24.4	19.1		2.6	0.2	2.6
Urban						
All ages	129.3	90.3	6.0	13.3	9.0	12.1
Under 5	1/ 0	0.0			0.1	
	14.0	8.9	•••	2.0	2.1	1.0
5-14	16.6	10.1		2.2	2.1	2.3
25-44	17.1	9.2	2.9	2.3	1.5	1.3
25-44 45-64	37.8	26.8	3.1	2.4	2.5	3.3
43-64 65 +	28.1 15.8	22.8		2.9 1.5	0.7	2.3 1.9
Rural nonfarm						
All ages	50.9	32.4	2.4	5.6	4.7	6.1
Under 5	7.5	4.1		1.0	2.1	0.3
5-14	8.6	5.0		0.9	1.5	1.2
15-24	5.9	3.7	1,1	0.7	0.1	0.3
25-44	14.7	8.4	1.3	1.6	0.7	2.7
45-64	9.0	7.2		0.7	0.2	0.9
65+	5.2	4.1	•••	0.6	. –	0.6
<u>Rural farm</u>			1			
All ages	18.7	13.6	0.5	1.7	0.9	2.1
Under 5	1.6	1.2	•••	_	0.3	0.1
5-14	2.9	2.0		0.1	0.2	0.6
15-24	2.7	2.2	0.2	0.1	0.1	0.1
25-44	3.9	2.5	0.2	0.6	0.2	0.4
45-64	4.3	3.1		0.4	0.0	0.8
65+	3.4	2.6		0.5	0.2	0.1
			1			

*Sum of visits by type of service may be greater than the total visits, since one visit may involve more than one type of service.

Table 15. Cumulative percent distribution of the population by time interval since last physician visit according to age: United States, August 1957

[Data are based on household interviews during july-September 1957 and are preliminary. Data refer to the clvillan noninstitutional population of continental United States. Detailed figures may not add to totais due to rounding. The survay design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.

	Time interval since last physician visit						
Age	Less than	Less than	Less than				
	1 month	l year	5 years*				
All ages	18	63	91				
Under 5	22	79	95				
5-14	13	59	90				
15-24	20	64	92				
25-44	18	62	92				
45-64	18	59	88				
65+-	24	64	88				

^{*}The difference between this cumulative percent and 100 percent comprise people who had never seen a physician or had not seen one in the preceding 5 years.

NOTE: Only those with known intervals are included.

Table 16. Cumulative percent distribution of the population by time interval since last physician visit according to sex and residence: United States, August 1957

[Data are based on household interviews during july-September 1957 and ara preliminary. Data refer to the civillan noninstitutional population of continental United States. Detailed figures may not add to totais due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.

	Time interval	since last ph	ysician visit
Sex and residence	Less than 1 month	Less than 1 year	Less than 5 years*
Both sexes			
All areas	18	63	91
Urban Rural nonfarm Rural farm	19 17 14	64 64 58	91 92 88
Male		•	
All areas	15	59	89
Urban Rural nonfarm Rural farm	16 15 12	60 61 52	90 90 86
Female			
All areas	21	67	93
Urban Rural nonfarm Rural farm	22 20 17	68 67 63	92 94 90

*The difference between this cumulative percent and 100 percent comprise people who had never seen a physician or had not seen one in the preceding 5 years.

Table 17. Number of persons by time interval since last physician visit, sex, and age: United States, August 1957

.

[Data are based on household Interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United Stetes. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II-]

	Interval since last physician visit									
Sex and age	Total persons	Less than l month	1-5 months	6-11 months	1 year	2 years	3 or 4 years	5 or more years	Never seen	Unknown
	Number of persons in millions									
Both_sexes	[I	1	-	1	ı 1			Ľ
All ages	167.1	30.0	49.2	24.9	22.8	13.2	9.5	11.2	3.8	2.7
Under 5	19.2	4.1	7.9	3.0	2.1	0.7	0.3	•••	.0.9	0.1
5-9	18.0	2.5	5.7	3.2	3.0	1.3	0.9	0.5	0.8	0.1
10-14	15.0	1.9	3.8	2.2	2.5	1.4	1.0	0.9	0.9	0.3
15-19	11.2	1.8	3.0	1.7	1.8	0.8	0.5	0.7	0.5	0.2
20-24	9.5	2.3	2.9	1.3	1.3	0.6	0.5	0.4	0.0	0.2
25-29	10.9	2.2	3.0	2.0	1.4	1.0	0.6	0.5	0.1	0.2
30-34	11.9	2.0	3.4	1.9	1.7	1.2	0.7	0.8	0.0	0.2
35-44	22.8	3.9	6.2	3.4	3.3	2.0	1.5	2.0	0.1	0.4
45-54	19.5	3.3	5.0	2.8	2.6	1.7	1.4	2.0	0.1	0.4
55-64	14.8	2.7	4.1	1.8	1.8	1.3	1.0	1.7	0.1	0.2
65+	14.4	3.4	4.1	1.6	1.3	1.1	1.0	1.5	0.1	0.2
Male										
All ages	81.2	12.2	22.6	12.3	11.6	7.1	5.0	6.7	2.0	1.7
Under 5	9.8	2.1	4.2	1.5	1.0	0.3	0.1		0.4	0.1
5-9	9.2	1.4	3.0	1.6	1.5	0.6	0.4	0.2	0.4	0.1
10-14	7.6	1.1	1.7	1.2	1.3	0.8	0.5	0.5	0.4	0.1
15-19	5.4	0.8	1.3	0.8	1.0	0.4	0.3	0.4	0.3	0.1
20-24	4.2	0.6	1.2	0.6	0.6	0.3	0.3	0.3	0.0	0.1
25-29	5.2	0.7	1.3	1.0	0.7	0.6	0.4	0.3	0.0	0.2
30-34	5.7	0.6	1.4	1.1	0.9	0.7	0.4	0.5	0.0	0.1
35-44	11.0	1.3	2.8	1.6	1.7	1.0	0.7	1.3	0.1	0.3
45-54	9.5	1.2	2.4	1.4	1.3	0.9	0.8	1.1	0.1	0.2
55-64	7.1	1.1	1.7	0.9	0.9	0.7	0.5	1.0	0.1	0.2
65+	6.6	1.4	1.7	0.7	0.6	0.6	0.5	0.9	0.0	0.1
Female				1	1					
All ages	85.9	17.8	26.5	12.6	11.1	6.1	4.5	4.5	1.8	0.9
Under 5	9.4	2.0	3.7	1.5	1.0	0.4	0.2		0.5	0.1
5-9	8.8	1.1	2.8	1.5	1.5	0.7	0.5	0.3	0.4	0.0
10-14	7.3	0.8	2.1	1.0	1.2	0.6	0.5	0.4	0.5	0.1
15-19	5.8	1.0	1.8	0.9	0.9	0.3	0.2	0.3	0.2	0.1
20-24	5.3	1.6	1.6	0.7	0.7	0.2	0.2	0.1	0.0	0.1
25-29	5.7	1.5	1.8	1.0	0.6	0.4	0.2	0.1	0.0	0.0
30-34	6.2	1.3	2.0	0.9	0.9	0.5	0.3	0.3	0.0	0.0
35-44	11.8	2.6	3.4	1.8	1.5	1.0	0.7	0.7	0.0	0.1
45-54	10.0.	2.1	2.7	1.5	1.3	0.7	0.7	0.9	0.0	0.1
55-64	7.6	1.6	2.3	0.9	0.9	0.6	0.5	0.7	0.0	0.1
65+	7.8	2.0	2.4	0.9	0.7	0.5	0.5	0.7	0.0	0.1
				l	L	1	I	1	L	L

Table 18. Number of persons by time interval since last physician visit, sex, and residence: United States, August 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

	Interval since last physician visit									
Sex and residence	Total persons	Less than 1 month	1-5 months	6-11 months	l year	2 years	3 or 4 years	5 or more years	Never seen	Unknown
<u></u>	Number of persons in millions									
Both sexes										
All areas	167.1	-30.0	49.2	24.9	22.8	13.2	9.5	11.2	3.8	2.7
Urban Rural nonfarm Rural farm	100.8 45.5 20.8	19.2 7.8 3.0	29.6 13.9 5.6	14.9 6.8 3.2	13.4 6.4 3.0	7.6 3.8 1.8	5.6 2.5 1.4	6.9 2.6 1.6	2.0 0.9 0.9	1.6 0.8 0.3
<u>Male</u> All areas	81.2	12.2	22.6	12.3	11.6	7.1	5.0	6.7	2.0	1.7
Urban Rural nonfarm Rural farm	47.7 22.6 10.9	7.5 3.4 1.3	13.3 6.6 2.7	7.3 3.4 1.6	6.7 3.3 1.6	4.0 2.0 1.0	2.9 1.2 0.8	3.9 1.8 1.0	1.0 0.5 0.5	1.0 0.5 0.2
<u>Female</u> All areas	85.9	17.8	26.5	12.6	11.1	6.1	4.5	4.5	1.8	0.9
Urban Rural nonfarm Rural farm	53.1 22.8 9.9	11.7 4.4 1.6	16.3 7.3 3.0	7.6 3.4 1.6	6.7 3.1 1.4	3.6 1.8 0.7	2.7 1.3 0.6	3.1 0.9 0.6	0.9 0.5 0.4	0.6 0.3 0.1

Table 19. Number of persons by time interval since last physician visit, residence, and age: United States, August 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data rafer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

	Interval since last physician visit									
Residence and age	Total persons	Less than 1 month	1-5 months	6-11 months	l year	2 years	3 or 4 years	5 or more years	Never seen	Unknown
	Number of persons in millions									
<u>All areas</u>					l .					1
All ages	167.1	30.0	49.2	24.9	22.8	13.2	9.5	11.2	3.8	2.7
Under 5	19.2	4.1	7.9	3.0	2.1	0.7	0.3		0.9	0.1
5-9	18.0	2.5	5.7	3.2	3.0	1.3	0.9	0.5	0.8	0.1
10-14	15.0	1.9	3.8	2.2	2.5	1.4	1.0	0.9	0.9	0.3
15-19	11.2	1.8	3.0	1.7	1.8	0.8	0.5	0.7	0.5	0.2
20-24	9.5	2.3	2.9	1.3	1.3	0.6	0.5	0.4	0.0	0.2
25-29	10.9	2.2	3.0	2.0	1.4	1.0	0.6	0.5	0.1	0.2
30-34	11.9	2.0	3.4	1.9	1.7	1.2	0.7	0.8	0.0	0.2
35-44	22.8	3.9	6.2	3.4	3.3	2.0	1.5	2.0	0.1	0.4
45-54	19.5	3.3	5,0	2.8	2.6	1.7	1.4	2.0	0.1	0.4
55-64	14.8	2.7	4.1	1.8	1.8	1.3	1.0	1.7	0.1	0.2
65+	14.4	3.4	4.1	1.6	1.3	1.1	1.0	1.5	0.1	0.2
Urban										
All ages	100.8	19.2	29.6	14.9	13.4	7.6	5.6	6.9	2.0	1.6
Under 5	10.5	2.5	4.3	1.6	1.1	0.3	0.1		0.5	0.1
5-9	10.0	1.5	3.2	1.8	1.6	0.7	0.4	0.3	0.4	0.1
10-14	8.3	1.2	2.4	1.2	1.4	0.6	0.5	0.5	0.4	0.2
15-19	6.6	1.2	1.9	1.0	1,1	0.5	0.3	0.3	0.2	0.1
20-24	6.0	1.5	1.8	0.9	0.8	0.3	0.3	0.2	0.0	0.1
25-29	6.5	1.5	1.7	1.1	0.8	0.5	0.4	0.2	0.0	0.1
30-34	6.8	1.3	1.9	1.1	0.9	0.7	0.4	0.4	0.0	0.1
35-44	14.1	2.5	3.7	2.0	1.9	1.3	0.9	1.3	0.1	0.3
45-54	12.9	2.2	3.3	2.0	1.7	1.1	0.9	1.3	0.1	0.2
55-64	9.9	1.7	2.7	1.2	1.1	1.0	0.6	1.3	0.1	0.2
65+	9.1	2.1	2.5	0.9	0.9	0.7	0.7	1.0	0.1	0.1
<u>Rural</u>										
All ages	66.3	10.8	19.5	10.0	9.4	5.6	3.9	4.2	1.8	1.1
Under 5	8.7	1.6	3.6	1.4	1.0	0.4	0.2		0.4	0.0
5-9	8.0	1.0	2.5	1.3	1.4	0.6	0.5	0.3	0.4	0.0
10-14	6.6	0.7	1.5	1.0	1.1	0.8	0.5	0,5	0.4	0.1
15-19	4.6	0.7	1.1	0.7	0.7	0.3	0.2	0.4	0.2	0.1
20-24	3.5	0.7	1.0	0.5	0.5	0.3	0.2	0.2	0.0	0.1
25-29	4.4	0.7	1.3	0.8	0.5	0.5	0.3	0.2	0.0	0.1
30-34	5.1	0.7	1.5	0.8	0.8	0.6	0.3	0.4	0.0	0.1
35-44	8.7	1.4	2.4	1.3	1.3	0.7	0.5	0.7	0.1	0.1
45-54	6.6	1.1	1.7	0.8	0.9	0.6	0.6	0.7	0.1	0.2
55-64	4.9	1.0	1.4	0.6	0.7	0.3	0.4	0.4	0.0	0.1
65+	5.3	1.2	1.6	0.7	0.4	0.4	0.3	0,5	0.0	0.1
·										

ł.

Table 20. Population used in obtaining the rates shown in this publication by residence, sex, and age: United States, August 1957

EData are based on household interviews during July-September 1957 and are preliminary. Data refer to the civillan noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of tha estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

2 1		Residence					
Sex and age	All areas	Urban	Rural nonfarm	Rural farm			
	Population in millions						
Both sexes							
A11 ages	167.1	100.8	45.4	20.8			
-							
Under 5	19.2	10.5	6.5	2.2			
10-14	18.0	10.0	5.6	2.4			
	15.0	8.3	4.4	2.3			
15-19	11.2	6.6	2.8	1.8			
20-24	9.5	6.0	2.3	1.1			
25-29	10.9	6.5	3.5	0.9			
30-34	11.9	6.8	4.0	1,1			
35-44	22.8	14.1	5.9	2.8			
45-54	19.5	12.9	4.2	2.4			
55-64	14.8	9.9	2.9	1.9			
65+	14.4	9.1	3.3	2.0			
Male							
All ages	81.2	47.7	22.6	10.9			
Under 5	9.8	5.2	3.6	- 1.0			
5-9	9.2	4.9	3.0	1.3			
10-14	7.6	4.2	2.2	1.2			
15-19	5.4	3.1	1.3	1.0			
20-24	4.2	2.7	0.9	0.6			
25-29	5.2	3.0	1.7	0.5			
30-34	5.7	3.3	1.8	0.6			
35-44	11.0	6.5	3.1	1.3			
45-54	9.5	6.2	2.1	1.2			
55-64	7.1	4.7	1.4	1.1			
65+	6.6	4.0	1.6				
Ferrela							
Female							
All ages	85.9	53.1	22.8	9.9			
Under 5	9.4	5.3	3.0	1.2			
5-9	8.8	5.1	2.6	1.1			
10-14	7.3	4.2	2.1	1.0			
15-19	5.8	3.5	1.5	0.8			
20-24	5.3	3.3	1.4	0.6			
25-29	5.7	3.5	1.8	0.4			
30-34	6.2	3.5	2.2	0.5			
35-44	11.8	7.6	2.8	1.4			
45-54	10.0	6.7	2.0	1.2			
55-64	7.6	5.2	1.6	0.9			
65+	7.8	5.1	1.8	0.9			
D)T							

NOTE: The detailed data appearing in this table were derived from the sample of the National Health Survey, and are intended for computation of rates in connection with health data given in this report. They may differ from official estimates of the Bureau of the Census. For estimates of urban and rural population by age and sex for more general use, see Bureau of the Census reports on the civilian population of the United States by type of residence, in <u>Current Population Reports</u>: Series P-20. ł

TECHNICAL NOTES ON METHODS

Background of This Report

This Preliminary Report on Volume of Physician Visits is one of a series of statistical reports which cover separate health-related topics prepared by the U. S. National Health Survey. The report is based on information collected in the nationwide continuing sample household interview survey which is a main aspect of the program.

The household interview survey uses a questionnaire which, in addition to personal and demographic characteristics, solicits information on chronic and acute conditions, accidents, medical care, dental care, and hospitalization. As interview data relating to each of these various broad subject areas are tabulated and analyzed, separate reports are to be issued covering one or more specific topics. In the interest of prompt publication, some of these reports are provisional or abbreviated. However, the continuous character of the household survey permits the collection of data for different periods of the year and the gradual accumulation of data sufficient to permit progressively more detailed classification and tabulation. For this reason preliminary reports may be superseded when a larger accumulation of data and a need for more detailed information indicate amplification. For example, the present report, based as it is on data from a single calendar quarter, does not permit the detail-in terms of tabulations involving demographic, social, economic, or health variables-which could be extracted from data accumulated for a number of quarters.

Data for Present Report

The present report is based on the consolidated sample for 13 weeks of interviewing ending September 29, 1957. In accordance with the explanation of the following section, the data yielded are treated in analysis as incidence and prevalence figures for the third calendar quarter of the year.

The population covered by the sample for the household interview survey is the civilian population of the continental United States living at the time of interview. Although the sample collection covers persons living as inmates of resident-type institutions, data for these persons are not included in the figures given in these reports pending special study of the applicability of the interview-type questionnaire to these persons. The sample does not include members of the Armed Forces, United States nationals living in foreign countries, and crews of vessels. It should also be noted that the data presented do not comprise a complete inventory of medical conditions existing or services received for any specified calendar period since no adjustment has been made for persons dying during the period covered by the report.

Statistical Design of the

Household Interview Survey

<u>General plan</u>.—The sampling plan of the survey follows a multistage probability design which permits a continuous sampling of the civilian population of the United States. The first stage of this design consists of an area sample of 372 from among approximately 1,900 geographically defined Primary Sampling Units (PSU's) into which the continental United States has been divided. A PSU is a county, a group of contiguous counties, or a Standard Metropolitan Area.

With no loss in general understanding, the remaining stages can be telescoped and treated in this discussion as an ultimate stage. Within PSU's then, ultimate stage units called segments are defined, also geographically, in such a manner that each segment contains an expected six households in the sample. Each week a random sample of about 120 segments is drawn. In the approximately 700 households in those segments persons are interviewed concerning illnesses, injuries, chronic conditions, disability, and other factors related to health.

The household members interviewed each week are an independent representative sample of the population so that samples for successive weeks can be combined into larger samples for, say, a calendar quarter, or a year. Thus the design permits both continuous measurement of characteristics of high incidence or prevalence in the population, and through the larger consolidated samples more detailed analysis of less common characteristics and smaller categories. The continuous collection has administrative and operational advantages, as well as technical assets, since it permits field work to be handled with an experienced, stable staff.

Sample size and geographic detail.—The national sample plan over a 12-month period includes approximately 115,000 persons from 36,000 households in 6,000 segments, with representation from every State. The overall sample was designed in such a fashion that from the annual sample tabulations can be provided for various geographic sections of the United States and for urban and rural sectors of the Nation.

<u>Collection of data</u>.—The field operations for the household survey are performed by the Bureau of the Census under general specifications established by the Public Health Service. In accordance with these specifications the Bureau of the Census designs and selects the sample, conducts the field interviewing acting as collecting agent for the Public Health Service, and edits and codes the questionnaires. Tabulations and most of the editing are handled on the Bureau of the Census electronic computers. Final tables and published reports are planned and prepared by the Public Health Service. Estimating methods.—Each statistic produced by the Survey—for example, the number of persons with one or more bed days of disability in a specified period—is the result of two stages of ratio estimation. In the first of these, the ratio factor is 1950 decennial population count to estimated population for 1950 for the U. S. National Health Survey first-stage sample of PSU's. These factors are applied for 132 color-residence classes.

Later, ratios of sample-produced estimates of the population to official Bureau of the Census figures for current population in 76 age-sex-color classes are computed, and serve as second-stage factors for ratio estimating.

The effect of the ratio estimating process is to make the sample more closely representative of the population by age, sex, color, and residence, thus reducing sampling variance.

As noted, each week's sample represents the population living during that week and characterisitics of that population. Consolidation of samples over a time period, say a calendar quarter, produces estimates of average characteristics of the United States population for that calendar quarter.

For prevalence statistics, such as number of persons with impairments, or number of persons classified by interval since last medical visit, figures presented for a designated calendar quarter are averages of estimates for all weeks of interviewing in that quarter.

For other types of statistics-namely those measuring the number of occurrences during a specified time period-such as number of visits to a doctor, a dentist, or incidence of new illnesses, a similar computational procedure is used, but the statistics have a different interpretation. For many of these items, the questionnaire asks for the respondent's experience over the two calendar weeks prior to week of interview. In such instances, unless a contrary indication is given in the text, the estimate of quarterly total for the statistic is simply 6½ times the average two-week estimate produced by the 13 successive samples taken during the quarter. Thus the experience of persons interviewed during the quarter-experience which actually occurred for each person in a two-calendar week interval prior to week of interview-usually is treated in analysis as though it measured the total of such experience occurring in the quarter. For most statistics, such interpretation leads to no significant bias.

In many instances, rates for a quarter are converted to an annual basis, in accordance with usual convention, in order to facilitate comparison of rates for time periods of different lengths. It must be remembered that any attempt to interpret such a converted figure as a true annual rate is subject to potential seasonal bias.

General Qualifications

Nonresponse.—Data were adjusted for nonresponse by a procedure which imputed to persons in a household not interviewed the characteristics of interviewed persons in the same segment. The total noninterview rate was 7 percent; 1 percent was refusal, and the remainder was accounted for by all other reasons, such as failure to find any household respondent after repeated trials. The interview process.—The statistics presented in this report are based on the replies secured in interview of persons in households. Each person 18 years and over, available at the time of interview, was interviewed individually. Proxy respondents within the household were employed for children and for adults not available at the time of the interview provided the respondent was related to the person about whom information was being obtained.

ø

There are limitations to the accuracy of diagnostic and other information collected in household interviews. For diagnostic information the household repondent, can, at best, pass on to the interviewer only the information the physician has given to the family. For conditions not medically attended, diagnostic information is often no more than a description of symptoms. However, other types of facts, such as those concerning the circumstances and consequences of illness or injury and the resulting action taken or sought by the individual, can be obtained more accurately from household members than from any other source since only the persons concerned are in a position to report all of this type of information.

<u>Rounding of numbers</u>.—Counts in the basic tabulations are made to the nearest whole person or illness, although they are not accurate to that detail. Published aggregates are rounded to a level which seems both to be utilitarian in analysis and meaningful from the sampling point of view. Rates and totals are calculated from worksheet numbers before rounding, and therefore may not always appear to be exactly consistent with published rounded components.

Population figures.—Some of the published tables include population figures for specified categories. These figures are based on the sample of households in the U.S. National Health Survey, and are given solely for the purpose of providing denominators for rate computation, and are more appropriate for use with the accompanying measures of health characteristics than any other data that may be available. In some instances they will permit users to recombine published data into classes more suitable to their specific needs. The population figures are not official estimates, in some cases being themselves subject to considerable variability, and as such should be used only for computation of rates in connection with data given in this report. For fuller details on population estimates see Bureau of the Census reports in the P-20 Series.

<u>Reliability of estimates.</u>—Since the estimates are based on a sample, they will differ somewhat from the figures that would have been obtained if a complete census had been taken using the same schedules, instructions, and interviewing personnel and procedures. As in any survey, the results are also subject to measurement error.

The standard error is primarily a measure of sampling variability, that is, the variations that might occur by chance because only a sample of the population is surveyed. As calculated for this report, the standard error also reflects part of the variation which arises in the measurement process. It does not include estimates of any biases which might lie in the data. The chances are about 68 out of 100 that an estimate from the sample would differ from a complete census by less than the standard error. The chances are about 95 out of 100 that the difference would be less than twice the standard error and about 99 out of 100 that it would be less than 2½ times as large. The illustration below is presented to give standard errors of some of the more important characteristics and an interpretation of the standard errors.

The reliability of an estimated rate or percentage, computed by using sample data for both numerator and denominator, depends upon both the size of the rate and the size of the total upon which the rate is based. Estimated rates are relatively more reliable than the corresponding absolute estimates of the numerator of the rate, particularly if the rate is high.

As more data become available, it will be possible to give general guides and rules of thumb which will permit determination of approximate sampling reliability of figures in these reports. <u>Illustration</u>.—An estimated 198,854,000 physician visits were made during the quarter, July through September 1957. The chances are about 68 out of 100 that the difference between the estimate and the figure which would have been obtained from a complete census is less than 4,374,000, the standard error of the estimate. An estimated 136,265,000 physician visits involving diagnosis and treatment were made during the quarter. The chances are about 68 out of 100 that the difference between the estimate and the figure which would have been obtained from a complete census is less than 3,543,000, the standard error of the estimate.

APPENDIX I

DEFINITIONS OF CERTAIN TERMS USED IN THIS REPORT

The following are definitions of certain terms used in this report which have a specialized meaning in the U. S. National Health Survey.

Medical Care Terms

<u>Physician visit</u>.—A physician visit is defined as consultation with a doctor, in person or by telephone, for examination, diagnosis, treatment, or advice. The visit is considered to be a physician visit if the service is provided directly by the doctor or by a nurse or other person acting under a doctor's supervision. For the purpose of this definition "doctor" is considered to mean a doctor of medicine or an osteopath.

Physician visits exclude doctor consultations while a person was a patient in a hospital for overnight or longer.

Physician visits for services provided on a mass basis are not included in the tabulations. A service received on a mass basis is defined as any service involving only a single test (e. g., test for diabetes) or a single procedure (e. g., smallpox vaccination) when this single service was administered identically to all persons who were at the place for this purpose. Hence, persons passing through a tuberculosis chest X-ray trailer, by this definition, are not included as physician visits. However, a special chest X-ray given in a doctor's office or an outpatient clinic is considered to be a physician visit.

One physician visit can involve only one person. If a doctor is called to the house to see more than one person, the call is considered to be a separate physician visit for each person about whom the doctor was consulted.

A physician visit is associated statistically with the person about whom the advice was sought, even if that person did not actually see or consult the doctor. For example, if a mother consults a doctor about one of her children, the physician visit is ascribed to the child.

<u>Place of visit</u>.—The place of visit is a classification of the types of places at which a physician visit took place. (See definition of "Physician visit.") The definitions of the various categories are as follows:

- 1. <u>Home</u> is defined as any place in which the person was staying at the time of the doctor's visit. It may be his own home, the home of a friend, a hotel, or any other place the person may be staying (except as overnight patient in a hospital).
- Doctor's office is defined as the office of a doctor in private practice only. This may be an office in the doctor's home, an individual office in an office building or a suite of offices occupied by several doctors. For purposes of this survey, doctors connected with prepayment group practice plans are considered to be in private practice.

- 3. <u>Hospital clinic</u> is defined as an outpatient clinic in any hospital.
- 4. Other refers to advice or treatment received from a doctor or under a doctor's general supervision at a place of business (e. g., factory, store, office building), at a school, at an insurance office, at a health department clinic, or any other place at which a physician consultation might take place. It also includes telephone contacts, that is, advice given in a telephone call directly by the doctor or transmitted through the nurse.

Type of medical service.—A medical service is a service received when a doctor is consulted. For each doctor visit reported, information is sought concerning what was done at that visit. The response is classified in one or more of a number of categories of types of medical service. A single physician visit (see definition of "Physician visit") may result in the recording of more than one type of medical service (though a particular type is not recorded more than once for any one doctor visit). Tables showing physician visits classified by type of medical service therefore add to more than the total number of visits. The definitions of the types of medical service are as follows:

- 1. Diagnosis and treatment include (a) examinations and tests in order to diagnose an illness regardless of whether the examinations and tests resulted in a diagnosis, and (b) treatment or advice given by the doctor or under the doctor's supervision. The category includes diagnosis alone, treatmentalone, and both combined. X-rays either for diagnostic purposes or for treatment are included in this class.
- 2. <u>Prenatal and postnatal</u> care include consultations concerning the care of the mother during pregnancy and in the postpartum period. It excludes consultations for illnesses not related to pregnancy or delivery.
- 3. General checkup includes checkups for general purposes and also those for specific purpose, such as employment or insurance. If a diagnosis or diagnoses are made in the course of a general checkup, the physician visit is classified to "Diagnosis and treatment" as well as to "General checkup." If the consultation is for checking up on a specific condition, as, for example, when a person goes at regular intervals for a check on a tuberculosis or heart condition, this is classified as "Diagnosis and treatment" and not as "General checkup."
- 4. <u>Immunization</u> includes this preventive service when provided by a doctor or under a doctor's supervision. A physician service which is for the sole purpose of receiving immunization against a particular disease given at the same time and place that many other persons are receiving the identical immunization is excluded

because of the rule for exclusion of such services in the definition of a physician visit.

5. Other includes eye refractions and specific preventive-care services (such as vitamin injections) not embraced by the above type-ofservice categories. Also included are all visits where an unknown type of service was reported.

Interval since last physician visit.—The interval since the last physician visit is the length of time prior to the week of interview since a doctor was last consulted in person or by telephone for treatment or advice of any type whatsoever. (See definition of "Physician visit.")

The interval is recorded to the nearest month for periods of a month or more but less than a year, and to the nearest year for periods of a year or more.

Estimates of numbers of persons by interval since the last doctor visit based on the interviewing done in any calendar quarter are adjusted to independent national estimates of the population as of the first day of the second month in the calendar quarter. Consequently, the estimates of numbers of persons relate to the characteristics of the population as of that date.

Location of Residence Terms

<u>Urban and rural residence</u>.—The definition of urban and rural areas used in the U. S. National Health Survey is the same as that used in the 1950 Census. According to this definition, the urban population comprises all persons living in (a) places of 2,500 inhabitants or more incorporated as cities, boroughs, and villages; (b) incorporated towns of 2,500 inhabitants or more except in New England, New York, and Wisconsin, where "Towns" are simply minor civil divisions of counties; (c) the densely settled urban fringe, including both incorporated and unincorporated areas, around cities of 50,000 or more; and (d) unincorporated places of 2,500 inhabitants or more outside any urban fringe. The remaining population is classified as rural.

Farm and nonfarm residence.—The rural population may be subdivided into the rural-farm population, which comprises all rural residents living on farms, and the rural-nonfarm population which comprises the remaining rural population.

In deciding whether the members of a household reside on a farm or ranch the statement of the household respondent that the house is on a farm or ranch is accepted with the following exception. A house occupied by persons who pay cash for house and yard only is not counted as a farm or ranch even if the surrounding area is farm land. This special case does not cover: (1) the living quarters of a tenant farmer who rents farm land as well as house and yard; (2) the quarters of a hired hand who receives living quarters on a farm as part of his compensation; or (3) separate living quarters inside a structure which is classified as on a farm. In all these cases the living quarters are counted as on a farm.