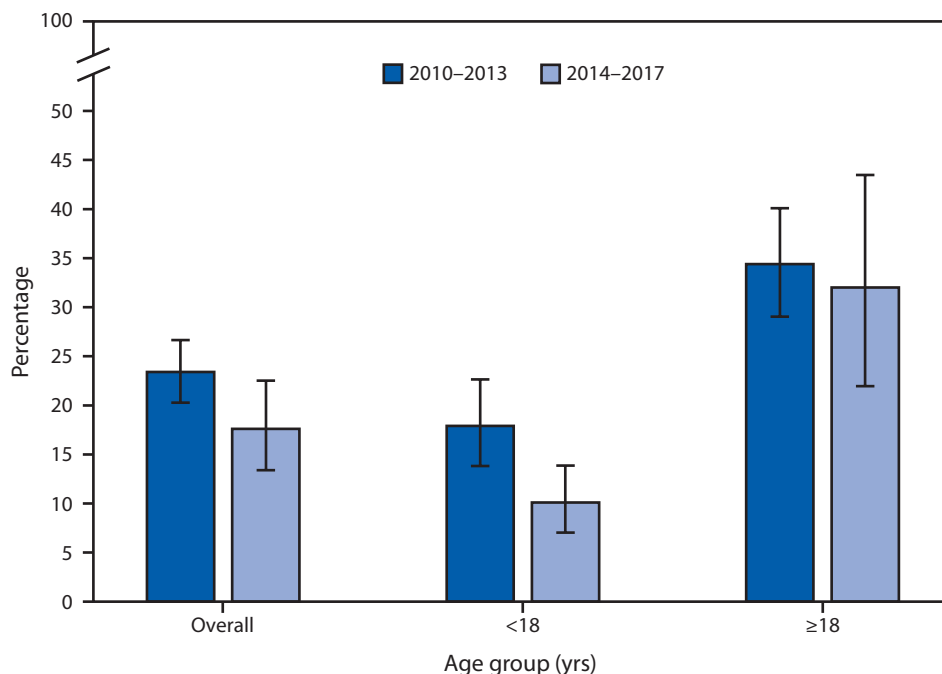


QuickStats

FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

Percentage* of Emergency Department Visits for Acute Viral Upper Respiratory Tract Infection† at Which an Antimicrobial Was Given or Prescribed,§ by Age — United States, 2010–2017¶



* With 95% confidence intervals indicated with error bars.

† Acute viral upper respiratory tract infection defined as a visit with only one listed diagnosis including the following codes, that are generally viral in etiology, from the *International Classification of Diseases, Ninth Revision* (ICD-9-CM), used during 2010–2015 or *International Classification of Diseases, Tenth Revision, Clinical Modification* (ICD-10-CM), used during 2016–2017: ICD-9-CM 460, ICD-10-CM J00, ICD-9-CM 464.xx, ICD-10-CM J04 and J05, ICD-9-CM 465.xx, ICD-10 CM J06, or ICD-9-CM 786.2, ICD-10 CM R05.

§ Antimicrobial medications included drugs categorized as anti-infectives, derived from Level 1 therapeutic categories from Multum Lexicon Plus.

¶ Based on a sample of visits to emergency departments in noninstitutional general and short-stay hospitals, exclusive of federal, military, and Veterans Administration hospitals, located in the 50 states and the District of Columbia.

From 2010–2013 to 2014–2017, the percentage of emergency department (ED) visits for acute viral upper respiratory tract infection that had an antimicrobial given or prescribed, hereafter referred to as ED visits, decreased from 23.4% to 17.6%. A decline was also seen for ED visits by children, decreasing from 17.9% to 10.1%, but a decline was not seen for ED visits by adults. In both periods, the percentage of ED visits by adults was higher than the percentage of ED visits by children.

Source: National Center for Health Statistics. National Hospital Ambulatory Medical Care Survey, 2010–2017. ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Datasets/NHAMCS.

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