In 2010, there were an estimated 132 million visits to nonfederally employed, office-based pediatricians in the United States. Half of these visits were made by children under the age of 5.

The visit rate was not different for males and females.

Expected source(s) of payment included:
<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private insurance</td>
<td>53%</td>
</tr>
<tr>
<td>Medicaid/CHIP</td>
<td>37%</td>
</tr>
</tbody>
</table>

The major reason for visit was:
- New problem — 45%
- Preventative care — 41%
- Chronic problem, routine — 9%
- Chronic problem, flare-up — 4%

The top 4 reasons for visiting the pediatrician given by patients/patient spokespersons were:
- General medical exam
- Well baby exam
- Cough
- Fever

The top 5 diagnoses were:
- Routine infant or child health check
- Otitis media and eustachian tube disorders
- Acute upper respiratory infections, excluding pharyngitis
- Acute pharyngitis
- Asthma

Medications or immunizations were provided or prescribed at 71 percent of pediatric visits. The top 5 generic substances utilized were:
- Influenza virus vaccine, inactivated
- Amoxicillin
- Albuterol
- Hepatitis A vaccine
- Acetaminophen

For more information, contact the Ambulatory and Hospital Care Statistics Branch at 301-458-4600 or visit our Web site at <www.cdc.gov/namcs>.
THE IMPORTANCE OF NAMCS DATA

NAMCS data are widely used in research studies appearing in nationally recognized medical journals, including *JAMA*, *Archives of Pediatric and Adolescent Medicine* (renamed *JAMA Pediatrics*), and the *Journal of Family Practice*. Here are a few recent publications using NAMCS data:


A complete list of publications using NAMCS data, which includes articles and reports, can be found at our Web site: http://www.cdc.gov/nchs/ahcd/ahcd_products.htm

NAMCS(FS)-12 (2-13)