

# National Ambulatory Medical Care Survey

## ABOUT NAMCS

The National Ambulatory Medical Care Survey (NAMCS) produces statistics that are representative of people in the United States who visit office-based physicians. The survey provides information on office visits by physician practice characteristics, patient characteristics, and visit characteristics.

## CARDIOVASCULAR DISEASE

In 2015–2016, there were an estimated **35 million visits per year** to nonfederally employed, office-based providers specializing in cardiovascular disease in the United States.

## CONTACT US

Ambulatory and Hospital  
Care Statistics Branch:  
**301–458–4600**  
[https://www.cdc.gov/nchs/ahcd/namcs\\_participant.htm](https://www.cdc.gov/nchs/ahcd/namcs_participant.htm)  
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### MAJOR REASON FOR VISIT

CHRONIC PROBLEM, ROUTINE	56.0%
NEW PROBLEM <sup>1</sup>	16.6%
PREVENTIVE CARE	7.3%
PRESURGERY	2.8%
POSTSURGERY	2.5%

<sup>1</sup>Onset less than 3 months.

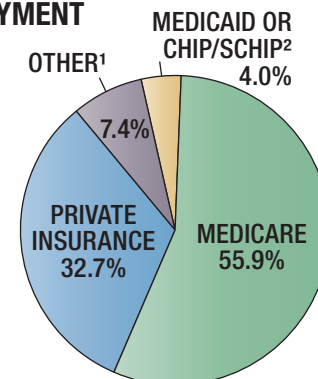
### PATIENTS' TOP 4 PRINCIPAL REASONS FOR VISIT

- PROGRESS VISIT
- HYPERTENSION
- ISCHEMIC HEART DISEASE
- CHEST PAIN AND RELATED SYMPTOMS

### TOP 4 SERVICES, ORDERED OR PROVIDED

- ELECTROCARDIOGRAM (EKG/ECG)
- DIET/NUTRITION COUNSELING
- ECHOCARDIOGRAM
- LIPID PROFILE

### PRIMARY EXPECTED SOURCE OF PAYMENT



<sup>1</sup>Includes workers' compensation, self-pay, no charge or charity, other sources of payment, unknown, and blank data.

<sup>2</sup>CHIP is Children's Health Insurance Program; SCHIP is State CHIP.

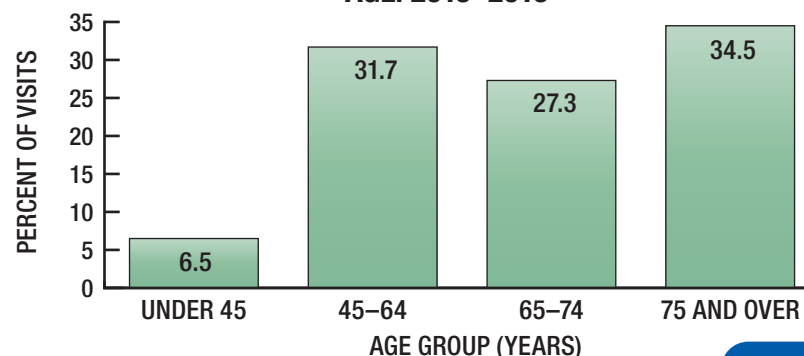
### MEDICATIONS WERE PRESCRIBED OR CONTINUED AT **81%** OF OFFICE VISITS.

#### TOP 5 ACTIVE INGREDIENTS



- ASPIRIN
- METOPROLOL
- ATORVASTATIN
- FUROSEMIDE
- CLOPIDOGREL

### PERCENT DISTRIBUTION OF CARDIOLOGY OFFICE VISITS, BY PATIENT'S AGE: 2015–2016



NATIONAL CENTER FOR HEALTH STATISTICS

Cardiovascular Disease Fact Sheet *from the*

# National Ambulatory Medical Care Survey

**NAMCS data are widely used in research studies appearing in nationally recognized medical journals. Here are a few recent publications using NAMCS data:**

Dudley N, Ritchie CS, Stijacic-Cenzer I, Lee SJ. **Palliative care needs in oncology, cardiology, and neurology clinic patients in the USA.** J Gen Intern Med [Epub ahead of print]. 2019.

Adesanoye DT, Willey CJ. **Does cardiovascular comorbidity influence the prescribing of bronchodilators in chronic obstructive pulmonary disease?** Ann Pharmacother 51(10):855–61. 2017.

Dean CA, Arnold LD, Hauptman PJ, Wang J, Elder K. **Patient, physician, and practice characteristics associated with cardiovascular disease preventive care for women.** J Womens Health (Larchmt) 26(5):491–9. 2017.

Ladapo JA, Chokshi DA. **Changes in cardiovascular care provision after the Affordable Care Act.** Am J Manag Care 23(11):e366–73. 2017.

Ladapo JA, Richards AK, DeWitt CM, Harawa NT, Shoptaw S, Cunningham WE, Mafi JN. **Disparities in the quality of cardiovascular care between HIV-infected versus HIV-uninfected adults in the United States: A cross-sectional study.** J Am Heart Assoc 6(11). 2017.

Reddy SM, Ramachandran A, Cabral H, Kazis L. **Provision of family planning to women with cardiovascular risk factors.** J Am Board Fam Med 28(1):105–14. 2015.

Fontil V, Pletcher MJ, Khanna R, Guzman D, Victor R, Bibbins-Domingo K. **Physician underutilization of effective medications for resistant hypertension at office visits in the United States: NAMCS 2006–2010.** J Gen Intern Med 29(3):468–76. 2014.

Ladapo JA, Blecker S, Douglas PS. **Physician decision making and trends in the use of cardiac stress testing in the United States: An analysis of repeated cross-sectional data.** Ann Intern Med 161(7):482–90. 2014.



**A complete list of publications using NAMCS data, which includes articles and reports, can be found at: [https://www.cdc.gov/nchs/ahcd/ahcd\\_products.htm](https://www.cdc.gov/nchs/ahcd/ahcd_products.htm).**