

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.

NEUROLOGY

In 2015–2016, there were an estimated **15 million visits per year** to nonfederally employed, office-based neurologists in the United States.

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CDCNCHS



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MAJOR REASON FOR VISIT

CHRONIC PROBLEM, ROUTINE	55.6%
NEW PROBLEM ¹	20.2%

¹Onset less than 3 months.

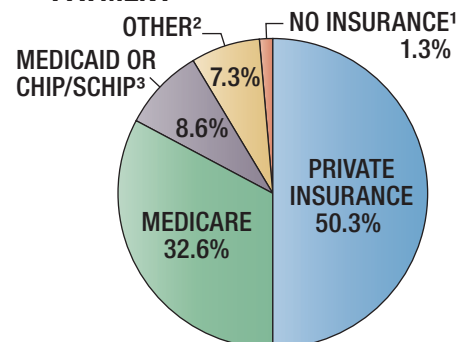
PATIENTS' TOP 5 PRINCIPAL REASONS FOR VISIT

- PROGRESS VISIT
- HEADACHE
- CONVULSIONS
- MIGRAINE HEADACHE
- ABNORMAL INVOLUNTARY MOVEMENTS

TOP 2 SERVICES, ORDERED OR PROVIDED

- NEUROLOGIC EXAMINATION
- MRI

PRIMARY EXPECTED SOURCE OF PAYMENT



¹Having only self-pay, no charge, or charity as source of payment.

²Includes workers' compensation, other sources of payment, unknown, and blank data.

³CHIP is Children's Health Insurance Program; SCHIP is State CHIP.

NOTE: Percentages may not add to 100 due to rounding.

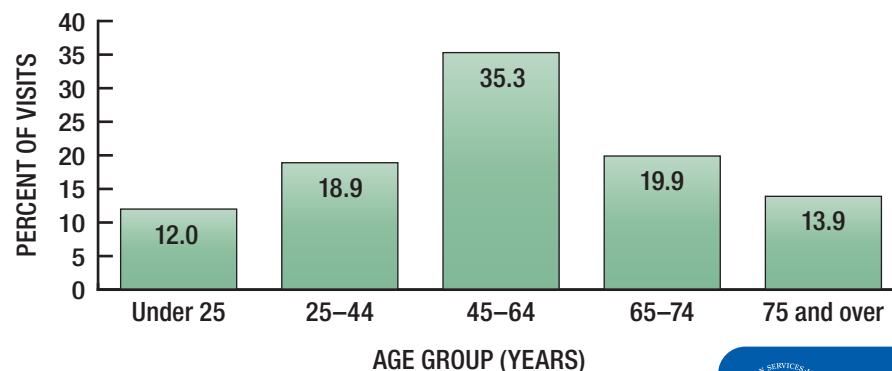
MEDICATIONS WERE PRESCRIBED OR CONTINUED AT 76.5% OF OFFICE VISITS.

TOP 5 ACTIVE INGREDIENTS



- GABAPENTIN
- ASPIRIN
- TOPIRAMATE
- LEVOTHYROXINE
- AMITRIPTYLINE

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



NATIONAL CENTER FOR HEALTH STATISTICS

Neurology 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.

Bhattacharjee S, Vadieli N, Goldstone L, Alrabiah Z, Sherman SJ. **Patterns and predictors of depression treatment among older adults with Parkinson's disease and depression in ambulatory care settings in the United States.** Parkinson's disease 2018:3402983. 2018.

Burch R, Rizzoli P, Loder E. **The prevalence and impact of migraine and severe headache in the United States: Figures and trends from government health studies.** Headache 58(4):496–505. 2018

Lai LL, Alvarez G, Koh L, Ting A, Nakagawa N. **The effect of gender disparity on migraine pharmacotherapy: A propensity score-matched cohort study.** J Pharm Health Serv Res 9(3):191–7. 2018.

Charleston IV L, Burke JF. **Do racial/ethnic disparities exist in recommended migraine treatments in US ambulatory care?** Cephalalgia 38(5):876–82. 2018.

Egila H, Rahim B, Suri M, Qureshi A. **Cerebrovascular risk factors and depression: Report from National Ambulatory Medical Care Survey 2002–2009 (P6.193).** Neurology 86(16 Suppl) P6.193. 2016.

Mafi JN, Edwards ST, Pedersen NP, Davis RB, McCarthy EP, Landon BE. **Trends in the ambulatory management of headache: Analysis of NAMCS and NHAMCS data 1999–2010.** J Gen Intern Med 30(5):548–55. 2015.

Mannix R, O'Brien MJ, Meehan WP 3rd. **The epidemiology of outpatient visits for minor head injury: 2005 to 2009.** Neurosurgery 73(1):129–34. 2013.

Burke JF, Skolarus LE, Callaghan BC, Kerber KA. **Choosing wisely: Highest-cost tests in outpatient neurology.** Ann Neurol 73(5):679–83. 2013.

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.

