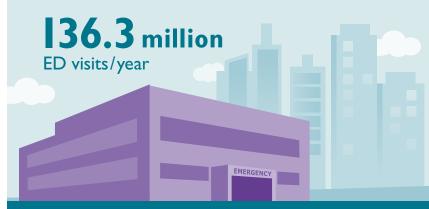


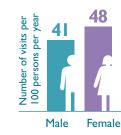
Emergency Departments



The National Hospital Care Survey (NHCS) combines three longstanding valuable data collection efforts: the National Hospital Discharge Survey (NHDS), the National Hospital Ambulatory Medical Care Survey (NHAMCS), and the Drug Abuse Warning Network (DAWN). The NHCS will gather critical data on health care utilization across inpatient, emergency, and other outpatient department settings.

Patient Demographics



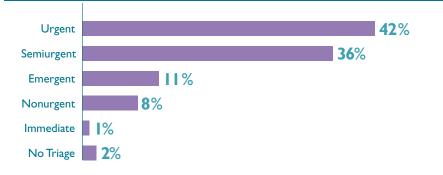




Reasons for Visit

Abdominal pain	11.1	Back symptoms	3.9
Chest pain	7. I	Shortness of breath	3.7
Fever	5. I	Pain	3.0
Headache	4.3	Throat symptoms	2.6
Cough	4. I	Vomiting	2.5

Patient Triage



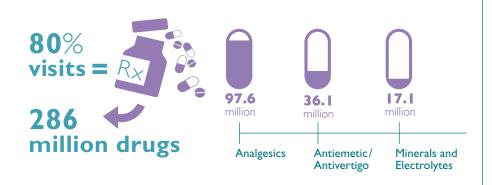
Diagnoses

Top 10 Diagnoses (in millions)	
Abdominal pain	6.9
Chest pain	5.5
Contusions with intact skin	4.6
Acute upper respiratory infection, excluding pharyngitis	4.6
Spinal disorders	4.3
Open wound, excluding head	4. I
Cellulitis and abscess	3.3
Sprains and strains, excluding ankle and back	2.8
Fractures, excluding lower limb	2.7
Rheumatism, excluding back	2.5



Emergency Departments

Medications

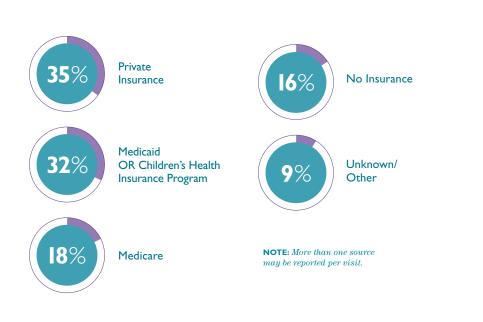


Hospital Discharge Diagnoses

Top 5 Hospital Discharge Diagnoses

Nonischemic heart disease	969,000
Chest pain	937,000
Pneumonia	701,000
Psychoses, excluding major depressive disorder	459,000
Cerebrovascular disease	452,000

Expected Payment Sources



Data Impact

NHAMCS data are widely used in research studies published in nationally recognized health and medical journals, including *JAMA*, *Academic Emergency Medicine*, and *Pain Medicine*.

Here are a few examples of recent publications:

Blecker S, Ladapo JA, Doran KM et al. Emergency department visits for heart failure and subsequent hospitalization or observation unit admission. *Am Heart J* 2014;168(6): 901–908.

Hasegawa K, Espinola JA, Brown DF et al. Trends in U.S. emergency department visits for opioid overdoses, 1993–2010. *Pain Med* 2014 Oct 15 [Epub ahead of print].

Makam AN. Nguyen OK. Use of cardiac biomarker testing in the emergency department. JAMA Intern Med 2015; 175(1): 67–75.

Pitts SR, Morgan SR, Schrager JD et al. Emergency department resource use by supervised residents vs attending physicians alone. JAMA 2014; 312 (22): 2394–400.

Purkurdpol P,Wiler JL, Hsia RY et al. Association of Medicare and Medicaid insurance with increasing primary care-treatable emergency department visits in the United States. *Acad Emerg Med* 2014; 21(10):1135–42.

Source: CDC/NCHS, NHAMCS, 2011

