## National Hospital Ambulatory Medical Care Survey: 2017 Emergency Department Summary Tables

The Ambulatory and Hospital Care Statistics Branch is pleased to release the most current nationally representative data on ambulatory care visits to hospital emergency departments (EDs) in the United States. Estimates are presented on selected hospital, patient, and visit characteristics using data collected in the 2017 National Hospital Ambulatory Medical Care Survey (NHAMCS). NHAMCS is an annual nationally representative sample survey of visits to hospitals.

The sampling frame for the 2017 NHAMCS was constructed from IMS Health's Healthcare Organization Services database, also known as HCOS. NHAMCS uses a multistage probability design with samples of primary sampling units (PSUs), hospitals within PSUs, and patient visits within emergency service areas (ESAs) of each selected hospital. A total of 479 hospitals were selected for the 2017 NHAMCS, of which 374 were in scope and had eligible EDs. Of these, 234 responded, yielding an unweighted ED response rate of 62.6%. A total of 331 ESAs were identified from the EDs. Of these, 240 responded fully or adequately by providing forms for at least one-half of their expected visits based on the total number of visits during the reporting period. In all, 16,709 Patient Record forms (PRFs) were submitted electronically. The resulting unweighted ESA sample response rate was 72.5%, and the overall unweighted two-stage sampling response rate was 45.4% (48.4% weighted).

The 2017 NHAMCS was conducted from December 26, 2016, through December 24, 2017. The U.S. Census Bureau was the data collection agent. NHAMCS data were collected electronically using a computerized instrument developed by the Census Bureau. Census field representatives completed PRFs for a sample of about 100 ED visits during a randomly assigned 4-week reporting period. The PRF content is available from: https://www.cdc.gov/nchs/ahcd/ahcd\_survey\_instruments.htm#nhamcs.

Data processing and medical coding were performed by RTI International, Research Triangle Park, North Carolina. As part of the quality assurance procedure, a 13% quality control sample of ED survey records was independently keyed and coded. Coding error rates ranged from 0.1% to 0.9% for the ED sample. For further details, see the 2017 NHAMCS public-use data file documentation available from: https://ftp.cdc.gov/pub/Health Statistics/NCHS/Dataset Documentation/NHAMCS/doc17 ed-508.pdf.

Web table estimates are based on sample data weighted to produce annual national estimates and include standard errors. The sample weight that is computed for each sample visit takes all stages of survey design into account. The survey data are inflated or weighted to produce unbiased national annual estimates. The visit weight includes three basic components: inflation by reciprocals of selection probabilities, adjustment for nonresponse, and population ratio adjustments. Estimates of the sampling variability were calculated using the Taylor series method in SUDAAN, which takes into account the complex sample design of NHAMCS. Detailed information on the design, conduct, and estimation procedures of 2017 NHAMCS are discussed in the public-use data file documentation.

As in any survey, results are subject to sampling and nonsampling errors. Nonsampling errors include reporting and processing errors as well as biases due to nonresponse and incomplete response. In 2017, race data were missing for 18.5% (unweighted) of ED records, and ethnicity data were missing for 20.9% (unweighted) of ED records. The National Center for Health Statistics uses model-based single imputation for NHAMCS race and ethnicity data. The race imputation, based on research by an internal work group, is restricted to three categories (white, black, and other) because of quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the public-use data file documentation.

NHAMCS-ED diagnosis data are coded according to the *International Classification of Diseases*, *10th Revision*, *Clinical Modification* (ICD-10-CM). Five tables (Tables 1 1, 12, 16, 17, and 26) presenting estimates of primary diagnoses, injury diagnoses, and primary hospital discharge diagnoses utilize ICD-10-CM codes and differ from pre-2016 Web tables presenting diagnosis estimates using the *International Classification of Diseases*, *Ninth Revision*, *Clinical Modification* (ICD-9-CM) coding system. Due to substantial differences between the ICD-9-CM and ICD-10-CM coding systems, users should take caution when comparing diagnosis estimates.

Proportion estimates are not presented or are flagged based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions," available from: <a href="https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf">https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf</a>. For all estimates other than estimates of proportions in the tables: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk (\*) appears. Visit estimates based on 30 or more cases include an asterisk if the relative standard error of the estimate exceeds 30%.

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Table 1. Emergency department visits, by selected characteristics: United States, 2017

Characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons <sup>1</sup> (standard error)	
All visits	138,977 (10,277)	100.0	43.3 (3.2)	
Ownership				
Voluntary	101,989 (9,663)	73.4 (4.1)	31.8 (3.0)	
Government	23,084 (5,320)	16.6 (3.7)	7.2 (1.7)	
Proprietary	13,904 (3,480)	10.0 (2.4)	4.3 (1.1)	
Metropolitan status <sup>2–4</sup>				
MSA	120,450 (10,174)	86.7 (2.2)	43.1 (3.6)	
Non-MSA	18,527 (3,067)	13.3 (2.2)	45.3 (7.5)	
Geographic region <sup>4</sup>				
Northeast	18,450 (3,495)	13.3 (2.4)	33.1 (6.3)	
Midwest	36,860 (5,146)	26.5 (3.2)	54.9 (7.7)	
South	59,389 (7,000)	42.7 (3.7)	48.9 (5.8)	
Vest	24,277 (4,135)	17.5 (2.7)	31.8 (5.4)	
Teaching hospital				
Yes	28,188 (5,259)	20.3 (3.6)	8.8 (1.6)	
No <sup>5</sup>	110,789 (9,961)	79.7 (3.6)	34.6 (3.1)	
Trauma center				
Yes	57,843 (6,770)	41.6 (4.4)	18.0 (2.1)	
No or blank	81,135 (9,407)	58.4 (4.4)	25.3 (2.9)	
Season <sup>6</sup>				
Winter	43,450 (7,315)	31.3 (4.7)	13.6 (2.3)	
Spring	25,548 (4,995)	18.4 (3.5)	8.0 (1.6)	
Summer	42,219 (7,452)	30.4 (4.3)	13.2 (2.3)	
Fall	27,760 (4,457)	20.0 (3.3)	8.7 (1.4)	

NOTE: Numbers may not add to totals because of rounding.

<sup>...</sup> Category not applicable.

1 Visit rates for region are based on the July 1, 2017, set of estimates of the U.S. civilian noninstitutional population as developed by the U.S. Census Bureau, Population Division. <sup>2</sup>MSA is metropolitan statistical area.

Population estimates by MSA are based on estimates of the U.S. civilian noninstitutionalized population as of July 1, 2017, from the 2017 National Health Interview Survey, compiled according to the 2013 Office of Management and Budget definitions of core-based statistical areas. More information about MSA definitions is available from: https://www.census.gov/

programs-surveys/metro-micro.html.

4For geographic region and MSA, population denominators differ for each category and do not add to the total population rate. For other variables, the denominator is the total population.

5Teaching status was unknown for 3.8% (weighted) of visits.

<sup>&</sup>lt;sup>6</sup>Winter is December 22 to March 19, spring is March 20 to June 20, summer is June 21 to September 22, and fall is September 23 to December 21.

Table 2. Emergency department visits, by patient age, sex, and residence: United States, 2017

Patient characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons per year <sup>1</sup> (standard error)
Fatient Characteristic	III tilousarius	(Standard error)	(Standard error)
Age group (years)			
All visits	138,977 (10,277)	100.0	43.3 (3.2)
Under 15	28,369 (3,315)	20.4 (1.8)	46.5 (5.4)
Under 1	3,772 (487)	2.7 (0.3)	95.8 (12.4)
1–4	10,042 (1,078)	7.2 (0.6)	62.8 (6.7)
5–14	14,555 (2,016)	10.5 (1.2)	35.5 (4.9)
15–24	20,194 (1,838)	14.5 (0.6)	47.8 (4.3)
25–44	38,207 (3,034)	27.5 (1.0)	45.4 (3.6)
45–64	29,828 (2,462)	21.5 (0.8)	35.7 (2.9)
65 and over	22,379 (2,068)	16.1 (0.9)	45.2 (4.2)
65–74	10,316 (951)	7.4 (0.5)	35.0 (3.2)
75 and over	12,063 (1,199)	8.7 (0.6)	60.0 (6.0)
Female	77,215 (5,846)	55.6 (0.6)	47.1 (3.6)
Under 15	13,172 (1,535)	9.5 (0.8)	44.1 (5.1)
15–24	12,356 (1,169)	8.9 (0.4)	59.0 (5.6)
25–44	22,495 (1,835)	16.2 (0.6)	52.8 (4.3)
45–64	15,995 (1,391)	11.5 (0.5)	37.1 (3.2)
65–74	5,767 (522)	4.1 (0.3)	36.7 (3.3)
75 and over	7,431 (780)	5.3 (0.4)	63.5 (6.7)
Male	61,762 (4,589)	44.4 (0.6)	39.4 (2.9)
Under 15	15,197 (1,841)	10.9 (1.0)	48.8 (5.9)
15–24	7,839 (788)	5.6 (0.4)	36.8 (3.7)
25–44	15,712 (1,318)	11.3 (0.6)	37.8 (3.2)
45–64	13,833 (1,153)	10.0 (0.4)	34.1 (2.8)
65–74	4,549 (531)	3.3 (0.3)	33.1 (3.9)
75 and over	4,632 (515)	3.3 (0.3)	55.1 (6.1)
	4,002 (010)	0.0 (0.0)	33.1 (0.1)
Residence			
Private residence <sup>1</sup>	131,552 (9,828)	94.7 (0.5)	41.0 (3.1)
Nursing home <sup>2</sup>	2,159 (319)	1.6 (0.2)	155.5 (23.0)
Homeless <sup>3</sup>	990 (176)	0.7 (0.1)	178.8 (31.8)
Other	1,787 (323)	1.3 (0.2)	0.6 (0.1)
Unknown or blank	2,490 (406)	1.8 (0.3)	0.8 (0.1)
Urban-rural classification <sup>4</sup>			
Large central metro	35,593 (6,481)	25.6 (3.8)	
Large fringe metro	21,585 (3,500)	15.5 (2.4)	
Medium metro	34,797 (6,676)	25.0 (4.6)	
Small metro	*14,763 (4,697)	*	
Nonmetropolitan:	• •		
Micropolitan	*12,732 (3,821)	9.2 (2.6)	
Noncore (nonmetro)	11,836 (3,076)	8.5 (2.3)	
Unknown or blank	*7,672 (2,489)	*	

<sup>...</sup> Category not applicable.

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability.

<sup>&</sup>lt;sup>1</sup>Visit rates for age, sex, and private residence are based on the July 1, 2017, set of estimates of the U.S. civilian noninstitutional population as developed by the U.S. Census Bureau, Population Division.

<sup>&</sup>lt;sup>2</sup>Visit rates for nursing home residents are based on the 2017 population denominators from the Centers for Medicare & Medicaid Services, 2017 Minimum Data Set frequency reports, available from: https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/Minimum-Data-Set-3-0-Public-Reports/Minimum-Data-Set-3-0-Frequency-Report.html.

<sup>3</sup>Visit rates for homeless people are based on the January 2017 estimate of people who were homeless on a given night, as reported in "The 2017 Annual Homeless Assessment Report (AHAR)

<sup>4</sup>For each record, county of residence was determined using patient zip code and then matched to the National Center for Health Statistics Urban–Rural Classification Scheme for Counties, available from: https://www.cdc.gov/nchs/data\_access/urban\_rural.htm.

Table 3. Emergency department visits, by patient race, age, and ethnicity: United States, 2017

Patient characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons per yea (standard error) <sup>1</sup>
All visits	138,977 (10,277)	100.0	43.3 (3.2)
Race <sup>2</sup> and age group (years)			
White	97,488 (7,583)	70.1 (1.7)	39.6 (3.1)
Under 15	18,614 (2,431)	13.4 (1.4)	42.3 (5.5)
15–24	13,604 (1,370)	9.8 (0.5)	43.8 (4.4)
25–44	25,731 (2,181)	18.5 (0.9)	40.9 (3.5)
45–64	21,023 (1,725)	15.1 (0.7)	31.7 (2.6)
65–74	8,070 (820)	5.8 (0.4)	32.8 (3.3)
75 and over	10,445 (1,084)	7.5 (0.5)	60.7 (6.3)
Black or African American	36,276 (3,575)	26.1 (1.6)	86.1 (8.5)
Under 15	8,178 (1,117)	5.9 (0.7)	89.0 (12.2)
15–24	6,057 (748)	4.4 (0.4)	95.1 (11.7)
25–44	11,031 (1,123)	7.9 (0.5)	94.5 (9.6)
45–64	8,030 (1,000)	5.8 (0.5)	77.9 (9.7)
65–74	1,867 (265)	1.3 (0.2)	64.3 (9.1)
75 and over	1,113 (161)	0.8 (0.1)	65.2 (9.4)
Other <sup>3</sup>	5,214 (860)	3.8 (0.6)	16.1 (2.7)
Ethnicity <sup>2</sup>			
Hispanic or Latino	22,077 (3,241)	15.9 (1.9)	37.9 (5.6)
Not Hispanic or Latino	116,900 (8,797)	84.1 (1.9)	44.6 (3.4)
White	77,187 (6,145)	55.5 (2.1)	39.6 (3.2)
Black or African American	34,846 (3,486)	25.1 (1.6)	88.6 (8.9)
Other <sup>3</sup>	4,866 (889)	3.5 (0.6)	17.3 (3.2)

Category not applicable

NOTE: Numbers may not add to totals because of rounding.

<sup>&</sup>quot;Visit rates are based on the July 1, 2017, set of estimates of the U.S. civilian noninstitutionalized population as developed by the U.S. Census Bureau, Population Division.

The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2017, race data were missing for 15.0% (weighted) of visits, and ethnicity data were missing for 17.9% (weighted) of visits. Starting with 2009 data, the National Center for Health Statistics has adopted model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is detailed in the 2009 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc09.pdf.

3Includes Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

Table 4. Wait time at emergency department visits: United States, 2017

Visit characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	138,977 (10,277)	100.0
Time spent waiting to see a physician, APRN, or PA <sup>1</sup>		
Fewer than 15 minutes	56,081 (5,879)	40.4 (2.9)
15–59 minutes	45,673 (4,331)	32.9 (1.8)
1 hour, but less than 2 hours	12,485 (1,520)	9.0 (0.8)
2 hours, but less than 3 hours	3,845 (492)	2.8 (0.3)
3 hours, but less than 4 hours	1,319 (192)	0.9 (0.1)
4 hours, but less than 6 hours	1,222 (220)	0.9 (0.2)
6 hours or more	731 (190)	0.5 (0.1)
Not applicable	3,592 (508)	2.6 (0.3)
Blank	14,029 (2,532)	10.1 (1.8)
Patient arrived in emergency department after business hours <sup>2</sup>		
Yes	79,548 (5,956)	57.2 (0.6)
No	57,507 (4,302)	41.4 (0.6)
Blank	*1,923 (661)	1.4 (0.5)

NOTES: Numbers may not add to totals because of rounding. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2017.

<sup>...</sup> Category not applicable.

\* Estimate does not meet NCHS standards of reliability.

<sup>1</sup>APRN is advanced practice registered nurse. PA is physician assistant. The median wait time to see a physician, APRN, or PA was 16 minutes; the mean wait time to see a physician, APRN, or PA was 37.5 minutes.

Business hours are defined as Monday through Friday, 8 a.m. to 5 p.m.

Table 5. Mode of arrival at emergency department, by patient age: United States, 2017

	Number of visits	Patient's mode of arrival						
Age group (years)	in thousands	Total <sup>1</sup>	Ambulance	Other	Unknown or blank			
			Percent distribution (standard error)					
All visits	138,977	100.0	14.5 (0.8)	82.7 (1.2)	2.8 (0.7)			
Jnder 15	28,369	100.0	4.4 (0.6)	**90.7 (2.9)	*			
Under 1	3,772	100.0	3.6 (0.9)	**88.0 (5.3)	*			
1–4	10,042	100.0	4.1 (0.8)	**92.0 (2.4)	*			
5–14	14,555	100.0	4.9 (1.0)	90.5 (2.7)	*			
15–24	20,194	100.0	8.9 (0.9)	88.8 (1.0)	2.3 (0.7)			
25–44	38,207	100.0	11.3 (1.1)	86.4 (1.4)	2.3 (0.5)			
15–64	29,828	100.0	18.4 (1.3)	79.9 (1.4)	1.8 (0.3)			
35 and over	22,379	100.0	32.6 (1.7)	64.6 (1.7)	2.8 (0.6)			
65–74	10,316	100.0	24.4 (2.0)	72.4 (2.2)	3.2 (0.8)			
75 and over	12,063	100.0	39.6 (2.2)	58.0 (2.3)	2.4 (0.9)			

<sup>\*\*</sup> Estimate meets NCHS standards of reliability, but its complement does not.

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which

<sup>\*</sup> Estimate does not meet NCHS standards of reliability. ... Category not applicable.

<sup>&</sup>lt;sup>1</sup>Ambulance was the mode of arrival for 20,123,000 visits; other was the mode of arrival for 115,967,000 visits.

Table 6. Expected source of payment at emergency department visits: United States, 2017

Payment source	Number of visits <sup>1</sup> (standard error) in thousands	Percent of visits (standard error)
All visits	138,977 (10,277)	
Private insurance	43,352 (3,660)	31.2 (1.5)
Medicaid or CHIP <sup>2</sup> or other state-based program	55,957 (5,693)	40.3 (2.4)
Medicare	25,663 (2,361)	18.5 (1.1)
Medicare and Medicaid <sup>3</sup>	5,040 (737)	3.6 (0.5)
No insurance <sup>4</sup>	11,119 (1,632)	8.0 (1.0)
Self-pay	10,782 (1,611)	7.8 (1.0)
No change or charity	*671 (245)	0.5 (0.2)
Worker's compensation	1,208 (190)	0.9 (0.1)
Other	6,081 (1,261)	4.4 (0.9)
Unknown or blank	13,655 (3,210)	9.8 (2.3)

<sup>..</sup> Category not applicable.

<sup>\*\*</sup>Estimate does not meet NCHS standards of reliability.

¹Total exceeds "All visits" and percentage exceeds 100% because more than one source of payment may be reported per visit.

²Children's Health Insurance Program.

<sup>&</sup>lt;sup>3</sup>Visits are also included in the "Medicaid or CHIP or other state-based program" and "Medicare" categories. <sup>4</sup>Defined as having only self-pay, no charge, or charity as payment sources.

NOTE: Numbers may not add to totals because of rounding.

Table 7. Triage status of emergency department visits, by selected patient characteristics: United States, 2017

Patient and visit characteristic	Number of visits in thousands	Total	Level 1 (immediate)	Level 2 (emergent)	Level 3 (urgent)	Level 4 (semiurgent)	Level 5 (nonurgent)	No triage¹	Unknown or blank
		-			Percent	distribution (standa	ard error)		
All visits	138,977	100.0	0.9 (0.3)	9.9 (1.1)	33.9 (2.4)	24.0 (2.2)	3.9 (0.7)	*	22.3 (3.9)
Age group (years)									
Under 15	28,369	100.0	0.7 (0.6)	6.2 (1.4)	26.1 (2.5)	34.9 (3.0)	7.8 (2.0)	*	19.1 (3.8)
Under 1	3,772	100.0	*	10.2 (2.6)	21.5 (2.4)	36.8 (3.6)	8.8 (1.6)	*	17.1 (3.3)
1–4	10,042	100.0	0.8 (0.6)	4.6 (0.9)	22.1 (2.5)	34.0 (3.0)	9.7 (2.7)	*	23.3 (4.5)
5–14	14,555	100.0	0.7 (0.6)	6.3 (1.8)	30.0 (3.3)	35.1 (3.4)	*	*	16.8 (3.7)
15–24	20,194	100.0	1.2 (0.5)	9.0 (1.7)	32.4 (2.5)	24.9 (2.9)	4.1 (0.7)	*	23.7 (4.4)
25–44	38,207	100.0	0.7 (0.3)	7.0 (0.9)	34.1 (2.8)	25.3 (2.4)	3.1 (0.6)	*	24.2 (4.5)
45–64	29,828	100.0	0.9 (0.3)	12.1 (1.5)	37.2 (3.0)	18.4 (1.8)	2.7 (0.6)	*	23.5 (4.7)
35 and over	22,379	100.0	1.0 (0.2)	17.4 (2.3)	40.4 (3.4)	14.6 (2.4)	1.6 (0.4)	*	20.0 (3.7)
65–74	10,316	100.0	1.1 (0.3)	17.1 (2.8)	38.2 (3.3)	15.8 (2.2)	2.0 (0.6)	*	22.0 (4.0)
75 and over	12,063	100.0	0.8 (0.3)	17.6 (2.3)	42.3 (3.9)	13.5 (3.0)	1.3 (0.4)	*	18.3 (3.7)
Sex									
Female	77,215	100.0	0.7 (0.3)	9.4 (1.1)	36.3 (2.7)	22.5 (2.1)	3.6 (0.7)	*	22.4 (4.1)
Male	61,762	100.0	1.1 (0.4)	10.6 (1.2)	30.9 (2.0)	25.8 (2.4)	4.3 (0.7)	*	22.1 (3.7)
Race <sup>2</sup>									
White	97,488	100.0	0.6 (0.1)	10.2 (1.0)	35.1 (2.4)	23.9 (2.3)	4.1 (0.9)	*	20.3 (3.5)
Black or African American	36,276	100.0	*	9.1 (2.0)	31.8 (3.2)	23.7 (2.8)	3.5 (0.5)	*	27.3 (6.4)
Other <sup>3</sup>	5,214	100.0	*	9.2 (2.4)	26.8 (4.9)	*	2.0 (1.0)	*	24.5 (7.0)
Ethnicity and race <sup>2</sup>									
Hispanic or Latino	22,077	100.0	0.9 (0.4)	8.8 (1.4)	32.0 (3.6)	26.3 (3.0)	*	*	16.2 (3.7)
Not Hispanic or Latino	116,900	100.0	0.9 (0.4)	10.1 (1.2)	34.3 (2.5)	23.6 (2.4)	3.5 (0.5)	4.3 (1.3)	23.4 (4.3)
White	77,187	100.0	0.6 (0.1)	10.7 (1.1)	36.0 (2.6)	23.3 (2.6)	3.6 (0.7)	*	21.3 (4.0)
Black or African American	34,846	100.0	*	9.0 (1.9)	31.4 (3.2)	23.6 (2.9)	3.4 (0.5)	*	27.9 (6.5)
Other <sup>3</sup>	4,866	100.0	*	9.1 (2.6)	27.0 (5.4)	* ′	*	*	* ′

Table 7. Triage status of emergency department visits, by selected patient characteristics: United States, 2017—Con.

Patient and visit characteristic	Number of visits in thousands	Total	Level 1 (immediate)	Level 2 (emergent)	Level 3 (urgent)	Level 4 (semiurgent)	Level 5 (nonurgent)	No triage¹	Unknown or blank
Expected source of payment <sup>4</sup>		_			Percent	distribution (standa	rd error)		
Private insurance Medicaid or CHIP <sup>5</sup> or other	43,352	100.0	1.2 (0.7)	12.1 (1.6)	37.7 (2.9)	23.0 (3.0)	3.6 (0.8)	*	16.4 (2.9)
state-based program	55,957	100.0	0.6 (0.2)	7.6 (1.0)	32.4 (2.8)	27.8 (2.9)	5.5 (1.2)	*	21.3 (5.4)
Medicare	25,663	100.0	0.8 (0.2)	16.4 (2.0)	40.8 (3.4)	16.3 (2.6)	2.0 (0.4)	*	18.9 (3.9)
Medicare and Medicaid <sup>6</sup>	5,040	100.0	1.1 (0.4)	12.2 (2.3)	39.1 (5.2)	19.9 (3.7)	2.5 (0.7)	*	*
No insurance <sup>7</sup>	11,119	100.0	*	7.2 (1.3)	34.3 (3.8)	27.3 (2.5)	2.8 (0.7)	1.9 (0.7)	25.2 (5.9)
Vorker's compensation	1,208	100.0	*	* ′	21.2 (6.2)	*	*	*	27.1 (6.5)
) Other	6,081	100.0	*	9.9 (1.9)	39.0 (4.8)	31.7 (4.7)	2.1 (0.9)	*	* ′
Jnknown or blank	13,655	100.0	0.9 (0.4)	8.9 (2.4)	23.6 (5.1)	15.8 (4.0)	2.0 (0.6)	*	*

<sup>...</sup> Category not applicable.

NOTES: The 2017 Patient Record Form (PRF) requested responses using a 1-5 scale. PRF responses were evaluated with reference to responses on the Ambulatory Unit Record (completed during induction) to the question, "How many levels are in this emergency service area's (ESA) triage system?" ESAs using 3- or 4-level triage systems had their responses rescaled to fit the 5-level system, such that for 3-level ESAs, responses of 1, 2, and 3 were recoded to 2, 3, and 4. For ESAs using a 4-level system, responses were recoded from 1-4 to 2-5. The rescaling method was determined in consultation with subject-matter experts and based on record analysis. Rescaling was required for about 1.8% of records, or 2.3% of records with nonmissing data. Triage level was imputed in years prior to 2012; starting in 2012, triage level has not been imputed. Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/ sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability.

<sup>&</sup>lt;sup>1</sup>A visit in which the emergency service area (ESA) coded the nursing triage as zero (admitted to hospital or treated immediately), or the visit occurred in an ESA that does not conduct triage.

<sup>&</sup>lt;sup>2</sup>The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2017, race data were missing for 15.0% (weighted) of visits, and ethnicity data were missing for 17.9% (weighted) of visits. Starting with 2009 data, the National Center for Health Statistics has adopted model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is detailed in the 2009 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc09.pdf.

<sup>&</sup>lt;sup>3</sup>Includes Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

<sup>&</sup>lt;sup>4</sup>Total exceeds "All visits" and percentage exceeds 100% because more than one source of payment may be reported per visit.

<sup>&</sup>lt;sup>5</sup>Children's Health Insurance Program.

<sup>&</sup>lt;sup>6</sup>Visits are also included in both the "Medicaid or CHIP or other state-based program" and "Medicare" categories.

<sup>&</sup>lt;sup>7</sup>Defined as having only self-pay, no charge, or charity as payment sources.

Table 8. Initial blood pressure measurements recorded at emergency department visits for adults, by selected patient characteristics: United States, 2017

				Initial blood press	ure <sup>1</sup>		
Patient characteristic	Number of visits in thousands	Total	Not high (SBP less than 120 mm Hg and DBP less than 80 mm Hg)	Prehypertension (SBP 120–139 mm Hg or DBP 80–89 mm Hg)	Stage 1 hypertension (SBP 140–159 mm Hg or DBP 90–99 mm Hg)	Stage 2 hypertension (SBP greater than or equal to 160 mm Hg or DBP greater than 100 mm Hg)	
		Percent distribution (standard error)					
All visits <sup>2</sup>	102,034	100.0	18.3 (0.6)	34.4 (0.6)	27.1 (0.6)	20.1 (0.8)	
Age (years)							
18–24	14,366	100.0	26.6 (1.7)	45.9 (1.9)	22.8 (1.4)	4.7 (0.7)	
25–44	37,111	100.0	20.9 (0.9)	40.1 (1.1)	25.6 (1.0)	13.4 (0.8)	
45–64	28,848	100.0	13.3 (0.8)	30.1 (0.9)	30.7 (1.0)	25.9 (1.2)	
65–74	10,012	100.0	17.0 (1.8)	23.4 (1.4)	29.3 (1.6)	30.4 (1.5)	
75 and over	11,697	100.0	13.7 (1.3)	22.4 (1.4)	26.7 (1.9)	37.2 (2.2)	
Sex							
Female	59,386	100.0	21.4 (0.8)	35.1 (0.8)	24.6 (0.7)	18.9 (0.8)	
Male	42,648	100.0	14.1 (0.7)	33.5 (0.9)	30.6 (0.9)	21.8 (1.0)	
Race <sup>3</sup>							
White	72,563	100.0	18.1 (0.7)	33.9 (0.5)	28.0 (0.7)	19.9 (0.9)	
Black or African American	26,028	100.0	18.9 (0.9)	35.5 (1.6)	25.2 (1.4)	20.4 (1.3)	
Other <sup>4</sup>	3,443	100.0	19.1 (2.6)	36.7 (4.1)	23.2 (3.4)	20.9 (3.3)	
Ethnicity and race <sup>3</sup>							
Hispanic or Latino	12,340	100.0	20.0 (1.6)	38.9 (1.9)	28.0 (1.5)	13.1 (1.0)	
Not Hispanic or Latino	89,694	100.0	18.1 (0.7)	33.8 (0.6)	27.0 (0.7)	21.0 (0.8)	
White	61,081	100.0	17.7 (0.8)	33.3 (0.5)	27.8 (0.8)	21.2 (1.0)	
Black or African American	25,274	100.0	19.1 (0.9)	34.8 (1.7)	25.5 (1.5)	20.6 (1.4)	
Other <sup>4</sup>	3,339	100.0	19.4 (2.6)	36.6 (4.2)	22.9 (3.4)	21.1 (3.2)	

<sup>1</sup>SBP is systolic blood pressure; DBP is diastolic blood pressure. Three high blood pressure categories (with SBP more than 120 mm Hg or DBP more than 80 mm Hg) are based on "The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure" and correspond to prehypertensive, stage 1 hypertensive, and stage 2 hypertensive ranges. If SBP and DBP fall into two categories, the visit is included in the higher blood pressure category. 2By adults (aged 18 and over). Visits where blood pressure was taken represent 96.9% (standard error = 0.5) of all emergency department visits made by adults.

<sup>&</sup>lt;sup>3</sup>The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2017, race data were missing for 14.3% (weighted) of adult visits, and ethnicity data were missing for 19.3% (weighted) of adult visits. Starting with 2009 data, the National Center for Health Statistics has adopted model-based single imputation for National Hospital Ambulatory Medical Care Survey (NHAMCS) race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is detailed in the 2009 NHAMCS public-use data file documentation, available from: https://ftp.cdc.dc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc09.pdf.

Includes Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

NOTE: Numbers may not add to totals because of rounding.

Table 9. Initial temperature, pulse oximetry, and visit history at emergency department visits: United States, 2017

Visit characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	138,977 (10,277)	100.0
Temperature		
Febrile: higher than 38.0°C or higher than 100.4°F Normal: 35.1°C–38.0°C or 95.1°F–100.4°F Hypothermic: 35.0°C and below or 95.0°F and below Blank	5,159 (549) 126,418 (9,632) * 7,302 (855)	3.7 (0.3) 91.0 (0.7) 0.1 (0.0) 5.3 (0.6)
Pulse oximetry <sup>1</sup>		
95%-100% Less than 95% Blank	119,505 (8,908) 9,798 (1,053) 9,674 (1,969)	86.0 (1.4) 7.1 (0.6) 7.0 (1.2)
Episode of care		
Initial visit Follow-up visit Unknown or blank	125,242 (9,679) 7,336 (900) 6,400 (1,468)	90.1 (1.1) 5.3 (0.5) 4.6 (1.1)
Patient seen in this emergency department within the last 72 hours		
Yes No Unknown or blank	4,339 (841) 125,496 (10,487) 9,142 (2,222)	3.1 (0.6) 90.3 (1.7) 6.6 (1.7)

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>...</sup> Category not applicable.
\* Estimate does not meet NCHS standards of reliability.

<sup>O.O Quantity more than zero but less than 0.05.

Normal oxygen saturation as measured by pulse oximetry is 95% or more.</sup> 

Table 10. Ten principal reasons for emergency department visits, by patient age and sex: United States, 2017

Principal reason for visit and RVC code <sup>1</sup>		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits		138,977 (10,277)	100.0
Stomach and abdominal pain, cramps and spasms	S545	12,248 (1,132)	8.8 (0.4)
Chest pain and related symptoms	S050	6,523 (540)	4.7 (0.2)
Fever	S010	5,491 (631)	4.0 (0.4)
Cough	S440	5,033 (524)	3.6 (0.3)
Shortness of breath	S415	3,988 (457)	2.9 (0.2)
Pain, specified site not referable to a specific body system	S055	3,642 (402)	2.6 (0.2)
Headache, pain in head	S210	3,508 (302)	2.5 (0.1)
Back symptoms	S905	3,290 (376)	2.4 (0.2)
Vomiting	S530	2,964 (357)	2.1 (0.2)
Symptoms referable to throat	S455	2,787 (305)	2.0 (0.2)
All other reasons <sup>2</sup>		89,504 (6,626)	64.4 (0.6)
All visits under age 15 years		28,369 (3,315)	100.0
Female		13,172 (1,535)	46.4 (1.1)
Fever	S010	2,031 (276)	7.2 (0.6)
Cough	S440	987 (174)	3.5 (0.6)
Skin rash	S860	602 (114)	2.1 (0.4)
Stomach and abdominal pain, cramps and spasms	S545	593 (153)	2.1 (0.4)
Vomiting	S530	566 (121)	2.0 (0.3)
Symptoms referable to throat	S455	404 (92)	1.4 (0.3)
Headache, pain in head	S210	374 (109)	1.3 (0.3)
Earache or ear infection	S355	357 (71) <sup>′</sup>	1.3 (0.3)
Injury, other and unspecified of head, neck, and face	J505	293 (85)	1.0 (0.3)
Diarrhea	S595	*	0.9 (0.2)
All other reasons <sup>2</sup>		6,704 (852)	23.6 (0.8)
Male		15,197 (1,841)	53.6 (1.1)
Fever	S010	2,198 (322)	7.7 (0.9)
Cough	S440	1,219 (165)	4.3 (0.4)
Stomach and abdominal pain, cramps and spasms	S545	752 (191)	2.7 (0.5)
Vomiting	S530	721 (119)	2.5 (0.3)
Injury, other and unspecified of head, neck, and face	J505	688 (184)	2.4 (0.6)
Skin rash	S860	663 (141)	2.3 (0.4)
Earache or ear infection	S355	477 (106)	1.7 (0.3)
Symptoms referable to throat	S455	398 (103)	1.4 (0.4)
Nasal congestion	S400	283 (54)	1.0 (0.2)
Laceration or cut of facial area	J210	*	0.9 (0.2)
All other reasons <sup>2</sup>		7,538 (1,025)	26.6 (1.3)

Table 10. Ten principal reasons for emergency department visits, by patient age and sex: United States, 2017—Con.

		Number of visits		
		(standard error)	Percent distribution	
Principal reason for visit and RVC code <sup>1</sup>		in thousands	(standard error)	
All visits, ages 15–64		88,229 (6,797)	100.0	
Female		50,846 (4,025)	57.6 (0.7)	
Stomach and abdominal pain, cramps and spasms	S545	6,548 (593)	7.4 (0.4)	
Chest pain and related symptoms	S050	2,990 (343)	3.4 (0.3)	
Headache, pain in head	S210	1,988 (205)	2.3 (0.2)	
Pain, specified site not referable to a specific body system	S055	1,493 (214)	1.7 (0.2)	
Cough	S440	1,461 (278)	1.7 (0.2)	
Back symptoms	S905	` ,	1.6 (0.2)	
		1,400 (184)	` ,	
Shortness of breath	S415	1,314 (179)	1.5 (0.2)	
Symptoms referable to throat	S455	1,216 (159)	1.4 (0.1)	
Nausea	S525	1,131 (257)	1.3 (0.2)	
Problems of pregnancy	S790	1,111 (205)	1.3 (0.2)	
All other reasons <sup>2</sup>		30,194 (2,323)	34.2 (0.5)	
Male		37,384 (2,890)	42.4 (0.7)	
Stomach and abdominal pain, cramps and spasms	S545	2,933 (354)	3.3 (0.3)	
Chest pain and related symptoms	S050	1,957 (214)	2.2 (0.2)	
Pain, specified site not referable to a specific body system	S055	1,399 (188)	1.6 (0.2)	
Back symptoms	S905	1,359 (203)	1.5 (0.2)	
Shortness of breath	S415	1,062 (204)	1.2 (0.2)	
Leg symptoms	S920	1,028 (184)	1.2 (0.2)	
Cough	S440	861 (136)	1.0 (0.2)	
Symptoms of teeth and gums	S500	732 (146)	0.8 (0.1)	
Laceration or cut of upper extremity	J225	728 (108)	0.8 (0.1)	
Injury, other and unspecified of head, neck, and face	J505		` ,	
All other reasons <sup>2</sup>		692 (143) 24,633 (1,873)	0.8 (0.1) 27.9 (0.7)	
	•••			
ll visits, ages 65 and over	•••	22,379 (2,068)	100.0	
Female		13,198 (1,225)	59.0 (1.6)	
Stomach and abdominal pain, cramps, and spasms	S545	913 (166)	4.1 (0.6)	
Accident, not otherwise specified	S050	756 (115)	3.4 (0.5)	
Chest pain and related symptoms (not referable to body systems)	S415	751 (118)	3.4 (0.4)	
Shortness of breath	J810	503 (126)	2.2 (0.5)	
Vertigo-dizziness	S020	428 (115)	1.9 (0.5)	
General weakness	S920	367 (82)	1.6 (0.3)	
Leg symptoms	S225	352 (76)	1.6 (0.3)	
Cough	S595	*	1.5 (0.6)	
Nausea	S095	340 (77)	1.5 (0.3)	
Other symptoms or problems relating to psychological and		,	- ( )	
mental disorders	S165	330 (83)	1.5 (0.3)	
All other reasons <sup>2</sup>		8,115 (790)	36.3 (1.2)	
Male	•••	9,181 (962)	41.0 (1.6)	
Shortness of breath	S415	. ,	` '	
Chest pain and related symptoms		661 (115)	3.0 (0.4)	
, , ,	S050	540 (82)	2.4 (0.3)	
Stomach and abdominal pain, cramps and spasms	S545	510 (100)	2.3 (0.4)	
General weakness	S020	*492 (161)	2.2 (0.6)	
Leg symptoms	S920	*313 (94)	1.4 (0.4)	
Disorders of motor functions	S095	*	1.2 (0.3)	
Pain, specified site not referable to a specific body system	S055	*	1.2 (0.4)	
Vertigo-dizziness	S225	*	0.9 (0.2)	
"Other symptoms or problems relating to psychological and			·	
mental disorders, not elsewhere classified"	S165	*	0.9 (0.2)	
Cough	S440	*	0.9 (0.2)	
All other reasons <sup>2</sup>	-	5,522 (564)	24.7 (1.1)	

Category not applicable

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

Estimate does not meet NCHS standards of reliability.

Reason for visit is based on the patient's own words and coded according to "A Reason for Visit Classification for Ambulatory Care" (RVC). National Center for Health Statistics. Vital Health

Additional Control of the Con Stat 2(78). 1979. See also the 2017 National Hospital Ambulatory Medical Care Survey public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc17\_ed-508.pdf.

<sup>&</sup>lt;sup>2</sup>Includes all other reasons not listed above, as well as unknown and blanks.

Table 11. Primary diagnosis at emergency department visits, by major disease category: United States, 2017

Major disease category and ICD–10–CM code range <sup>1</sup>		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits		138,977 (10,277)	100.0
Certain infectious and parasitic diseases	A00-B99	4,114 (520)	3.0 (0.3)
Neoplasms	C00-D49	329 (77)	0.2 (0.1)
Diseases of the blood and blood-forming organs and			
certain disorders involving the immune mechanism	D50-D89	920 (184)	0.7 (0.1)
Endocrine, nutritional, and metabolic diseases	E00-E89	2,513 (318)	1.8 (0.2)
Mental, behavioral and neurodevelopmental disorders	F01-F99	4,842 (447)	3.5 (0.2)
Diseases of the nervous system	G00-G99	3,083 (301)	2.2 (0.2)
Diseases of the eye and adnexa	H00-H59	1,067 (118)	0.8 (0.1)
Diseases of the ear and mastoid process	H60-H95	2,504 (307)	1.8 (0.2)
Diseases of the circulatory system	100-199	4,739 (525)	3.4 (0.3)
Diseases of the respiratory system	J00-J99	14,675 (1,322)	10.6 (0.6)
Diseases of the digestive system	K00-K95	8,254 (780)	5.9 (0.3)
Diseases of the skin and subcutaneous tissue	L00-L99	5,214 (527)	3.8 (0.2)
Diseases of the musculoskeletal system and connective tissue	M00-M99	11,219 (996)	8.1 (0.4)
Diseases of the genitourinary system	N00-N99	6,883 (684)	5.0 (0.3)
Pregnancy, childbirth and the puerperium	O00-O9A	2,193 (336)	1.6 (0.2)
Symptoms, signs, and abnormal clinical and laboratory findings,		_, (,	()
not elsewhere classified	R00-R99	32,600 (2,593)	23.5 (0.7)
Injury, poisoning and certain other consequences of external causes	S00-T88	26,241 (2,011)	18.9 (0.6)
Injuries to the head	S00-S09	6,437 (702)	24.5 (1.4)
Injuries to the neck	S10-S19	881 (153)	3.4 (0.5)
Injuries to the thorax	S20-S29	954 (125)	3.6 (0.4)
Injuries to the abdomen, lower back, lumbar spine, pelvis and	020 020	33 : (:23)	0.0 (0.1)
external genitals	S30-S39	1,164 (155)	4.4 (0.5)
Injuries to the shoulder and upper arm	S40-S49	1,390 (201)	5.3 (0.7)
Injuries to the elbow and forearm	S50-S59	1,301 (141)	5.0 (0.5)
Injuries to the wrist, hand and fingers	S60-S69	3,867 (373)	14.7 (0.9)
Injuries to the hip and thigh	S70-S79	767 (124)	2.9 (0.4)
Injuries to the knee and lower leg	S80-S89	2,053 (221)	7.8 (0.7)
Injuries to the ankle and foot	S90-S99	2,326 (261)	8.9 (0.7)
Injuries to the drints and lost Injuries involving multiple body regions or unspecified body region	T07, T14	1,095 (140)	4.2 (0.5)
Effects of foreign body entering through natural orifice	T15–T19	817 (187)	3.1 (0.6)
Burns and corrosions	T20-T32	489 (88)	1.9 (0.3)
Frostbite	T33-T34	*	*
Poisoning by, adverse effect of and underdosing of drugs,	100-10-	•••	
medicaments and biological substances	T36-T50	787 (111)	3.0 (0.4)
Toxic effects of substances chiefly nonmedicinal as to source	T51–T65	306 (70)	1.2 (0.3)
Other and unspecified effects of external causes	T66–T78	962 (158)	3.7 (0.5)
Certain early complications of trauma	T79	` '	` '
Complications of trauma Complications of surgical and medical care	T80–T88		 2.4 (0.4)
All other diagnoses <sup>2</sup>		639 (90) 7,172 (776)	2.4 (0.4)
Unknown or blank	•••	, , ,	5.2 (0.4)
UTIKITOWIT OF DIATIK	•••	416 (92)	0.3 (0.1)

<sup>.</sup> Category not applicable.

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

Estimate does not meet NCHS standards of reliability.

<sup>-</sup> Quantity zero.

Based on the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM). However, certain codes have been combined in this table to better describe the utilization of ambulatory care services. Web tables presenting diagnosis estimates before 2016 used the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) coding system. Due to substantial differences between ICD-9-CM and ICD-10-CM, caution is advised when comparing diagnosis estimates in this table with those from before 2016.

<sup>2</sup>Includes certain conditions originating in the perinatal period (P00–P96), congenital malformations, deformations and chromosomal abnormalities (Q00–Q99), external causes of morbidity (V00-Y99), and factors influencing health status and contact with health services (Z00-Z99).

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2017

Primary diagnosis group <sup>1</sup>	Number of visits (standard error) in thousands	Percent distribution (standard error)
, , , ,		
All visits	138,977 (10,277)	100.0
Certain infectious and parasitic diseases		
Septicemia (sepsis)	405 (102)	0.3 (0.1)
Human immunodeficiency virus syndrome (HIV, HIV+, HIV positive)	*	*
Viral warts, not sexually transmitted	*	0.0 (0.0)
Acute and chronic viral hepatitis C	*	*
Sexually transmitted infections (STIs) excluding viral hepatitis and HIV	*	0.1 (0.0)
Jnspecified viral infection	1,309 (225)	0.9 (0.1)
Dermatophytosis	*	0.1 (0.0)
Candidiasis	*	0.1 (0.0)
Other systemic infectious and parasitic diseases	1,860 (258)	1.3 (0.1)
Neoplasms <sup>2</sup>		
Diagnosis groups not shown due to low sample sizes]		
	····	
Diseases of the blood and blood-forming organs and		
certain disorders involving the immune mechanism		
Anemias	778 (151)	0.6 (0.1)
Other diseases of the blood and blood-forming organs and		
certain disorders involving the immune mechanism	*	0.1 (0.0)
Endocrine, nutritional and metabolic diseases		
Acquired hypothyroidism	*	*
Disorders of thyroid gland, excluding acquired hypothyroidism	*	" *
Type 1 diabetes mellitus	*	* 0.1 (0.0)
Type 1 diabetes mellitus or unspecified	653 (99)	0.7 (0.0)
Other types of diabetes mellitus	<b>,</b> ` ′	0.1 (0.0)
Other disorders of endocrine glands	*	0.2 (0.0)
Obesity	*	0.1 (0.1)
Hyperlipidemias	*	0.1 (0.1)
√olume depletion	449 (84)	0.3 (0.1)
Other nutritional deficiencies and metabolic disorders	606 (112)	0.4 (0.1)
	,	,
Mental, behavioral and neurodevelopmental disorders		
Dementia, excluding Alzheimer's disease	*	0.1 (0.0)
Alcohol-related disorders, excluding alcohol-related dementia and		
chronic alcoholic liver disease	1,126 (136)	0.8 (0.1)
Opioid-related disorders	*	0.1 (0.0)
Cocaine-related disorders	*	0.0 (0.0)
Nicotine dependence	" 440 (00)	0.0 (0.0)
Other drug-related disorders excluding other drug-related dementia	418 (89)	0.3 (0.1)
Schizophrenia	109 (29)	0.1 (0.0)
Non-mood psychoses, excluding schizophrenia	278 (61)	0.2 (0.0)
Bipolar disorders, excluding those with depression Bipolar disorders, with depression	236 (59) *	0.2 (0.0) 0.0 (0.0)
Sipolar disorders, with depression Depressive disorders, excluding bipolar depression and	•••	0.0 (0.0)
adjustment reaction with depressed mood	632 (108)	0.5 (0.1)
adjustment reaction with depressed mood Dysthymic disorder	*	0.5 (0.1) *
Acute reaction to stress and adjustment reaction, excluding	•••	•••
those with depressed mood	*	0.1 (0.0)
Acute reaction to stress and adjustment reaction with depressed mood	*	0.0 (0.0)
Eating disorders	*	*
mpulse disorders	*	*
Other mood disorders, nonpsychotic mental disorders, behavioral	•••	•••
syndromes, and disorders of adult personality and behavior	1,098 (149)	0.8 (0.1)
	*	0.0 (0.1)
Attention-deficit/nyperactivity disorders	•••	
· · · · · · · · · · · · · · · · · · ·	*	*
Attention-deficit/hyperactivity disorders Oppositional defiant disorder Conduct disorders, excluding oppositional defiant disorder	* *	* 0.1 (0.0)
**	* * *	* 0.1 (0.0) *

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2017—Con.

Driver of the same	Number of visits (standard error)	Percent distribution
Primary diagnosis group <sup>1</sup>	in thousands	(standard error)
Diseases of the nervous system		
Alzheimer's disease	*	0.0 (0.0)
Migraine	928 (149)	0.7 (0.1)
Transient cerebral ischemic attacks and related syndromes	*	0.1 (0.0)
Sleep disorders, excluding sleep apnea (adult, pediatric, obstructive) and		
non-organic sleep disorders	*	*
Obstructive sleep apnea (adult, pediatric) and sleep apnea, not		
otherwise specified	*	*
Carpal tunnel syndrome	*	0.0 (0.0)
Other disorders of the nervous system	1,888 (221)	1.4 (0.1)
Diseases of the eye and adnexa		
·	*	0.1 (0.0)
nflammation and disorders of eyelid Conjunctivitis	529 (84)	0.1 (0.0) 0.4 (0.1)
Saucoma	*	0.4 (0.1) *
Disorders of refraction and accommodation	*	*
Other disorders of the eye and adnexa	441 (91)	0.3 (0.1)
·	771 (01)	0.0 (0.1)
Diseases of the ear and mastoid process		
Disorders of external ear	447 (104)	0.3 (0.1)
Otitis media and eustachian tube disorders	1,460 (208)	1.1 (0.1)
Other disorders of the ear and mastoid process	597 (104)	0.4 (0.1)
Diseases of the circulatory system		
leart valve disorders	*	*
Essential hypertension	1,272 (226)	0.9 (0.1)
Hypertensive heart disease with heart failure	*	0.0 (0.0)
Hypertensive chronic kidney disease with stage 1 through stage 4		
chronic kidney disease or unspecified chronic kidney disease	*	*
lypertensive chronic kidney disease with stage 5 chronic kidney disease		
or end-stage renal disease (ESRD)	*	*
lypertensive heart and chronic kidney disease without heart failure		
with stage 1 through 4 chronic kidney disease or unspecified chronic		
kidney disease	*	*
lypertensive heart and chronic kidney disease with heart failure with		
stage 5 chronic kidney disease or end stage renal disease	*	*
econdary hypertension	*	*
lypertensive crisis	*	0.1 (0.1)
ngina pectoris not stated as with chronic ischemic heart disease	*	0.1 (0.1)
cute myocardial infarction (AMI)	260 (59)	0.2 (0.0)
Other acute and subacute ischemic heart disease	*	0.1 (0.0)
Coronary atherosclerosis and other chronic ischemic heart disease	*	0.0 (0.0)
(with angina pectoris)	*	0.0 (0.0)
rulmonary heart disease and diseases of pulmonary circulation	*	0.1 (0.0)
onduction disorders	•••	0.0 (0.0)
Cardiac dysrhythmias, excluding ventricular fibrillation	622 (104)	0.4 (0.1)
ardiac arrest and ventricular fibrillation	* 524 (124)	0.1 (0.0)
leart failure, non-hypertensive	524 (124)	0.4 (0.1)
ericarditis, endocarditis, myocarditis and cardiomyopathy  ther and ill-defined heart disease	* *	0.0 (0.0) *
uner and III-defined neart disease Berebrovascular disease	•••	
	492 (108)	0.4 (0.1)
iseases of the arteries, arterioles and capillaries	* *	0.1 (0.0)
aricose veins of lower extremity Other disorder of circulatory system	•••	0.0 (0.0)
Affici disorder of diffulatory system	547 (103)	0.4 (0.1)

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2017—Con.

	Number of visits (standard error)	Percent distribution
Other disorder of circulatory system	in thousands	(standard error)
Diseases of the respiratory system		
Streptococcal phayrngitis and tonsillitis	1,048 (162)	0.8 (0.1)
Acute sinusitis	415 (96)	0.3 (0.1)
Acute pharyngitis, except streptococcal pharyngitis	1,186 (165)	0.9 (0.1)
cute tonsillitis, except streptococcal tonsillitis	*	0.2 (0.1)
nfluenza		` '
	1,283 (317)	0.9 (0.2)
neumonia	1,286 (145)	0.9 (0.1)
cute bronchitis and bronchiolitis	1,377 (210)	1.0 (0.1)
Other acute respiratory infections	3,415 (386)	2.5 (0.2)
Allergic rhinitis	*	0.1 (0.0)
Chronic sinusitis	*242 (77)	0.2 (0.1)
Chronic and unspecified bronchitis	697 (108)	0.5 (0.1)
Bronchiectasis, emphysema and other chronic obstructive pulmonary		
disease, including chronic obstructive asthma	923 (122)	0.7 (0.1)
Asthma, excluding chronic obstructive asthma	1,564 (203)	1.1 (0.1)
Respiratory failure	*	0.2 (0.1)
Other diseases of the respiratory system	597 (94)	0.4 (0.1)
Diseases of the digestive system		
Diseases of the teeth and supporting structures, excluding dentofacial		
anomalies and disorders of the jaw	1,737 (266)	1.2 (0.2)
Esophagitis without gastroesophageal reflux disease	*	0.0 (0.0)
Gastroesophageal reflux disease (with esophagitis)	258 (69)	0.2 (0.0)
Other diseases of the esophagus	*	*
licers of stomach and small intestine	*	0.0 (0.0)
Gastritis and duodentitis	437 (97)	0.3 (0.1)
Appendicitis	*	0.3 (0.1)
••	*	0.2 (0.1) *
Diaphragmatic hernia		
Hernias of abdominal cavity, except diaphragmatic hernia	290 (69)	0.2 (0.1)
Crohn's disease and ulcerative colitis	*	0.1 (0.0)
Other and unspecified noninfectious enteritis and colitis	1,000 (152)	0.7 (0.1)
ntestinal obstructions	*	0.1 (0.0)
Diverticula of intestine	270 (63)	0.2 (0.0)
Constipation	934 (136)	0.7 (0.1)
Anal and rectal diseases	418 (95)	0.3 (0.1)
Hemorrhoids and perianal venous thrombosis	*	0.1 (0.0)
Alcoholic liver disease	*	0.1 (0.0)
Other diseases of the liver	*	0.1 (0.0)
Disorders of gallbladder and biliary tract	528 (119)	0.4 (0.1)
Diseases of the pancreas	326 (75)	0.2 (0.1)
Inspecified gastrointestinal bleeding	483 (118)	0.3 (0.1)
Other diseases of the digestive system	*	0.3 (0.1)
Diseases of the skin and subcutaneous tissue		
Cellulitis	1,606 (202)	1.2 (0.1)
Cutaneous abscess	1,228 (190)	0.9 (0.1)
Other local infections of the skin and subcutaneous tissue	557 (103)	0.4 (0.1)
Contact dermatitis and other eczema	*277 (92)	0.2 (0.1)
Psoriasis and other similar disorders	*	0.1 (0.0)
Irticaria	349 (94)	0.3 (0.1)
Other inflammatory conditions of skin and subcutaneous tissue	533 (95)	0.4 (0.1)
•	, ` '	, ` '
Actinic keratosis and other sun exposure-related disorders	* *	
Acne	····	•••
Sebaceous cyst	*	0.0 (0.0)
Corns, callosities and other hypertrophic and atrophic skin condition	*	*
Pressure ulcers	*	*
Other disorders of the skin and subcutaneous tissue	414 (73)	0.3 (0.0)

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2017—Con.

	Number of visits (standard error)	Percent distribution
Primary diagnosis group <sup>1</sup>	in thousands	(standard error)
Diseases of the musculoskeletal system and connective tissue		
heumatoid arthritis	*	*
fectious and inflammatory arthropathies, excluding		
heumatoid and juvenile arthritis	*	0.1 (0.0)
steoarthritis	282 (66)	0.2 (0.0)
equired deformities of fingers and toes	*	*
ternal derangement of knee	*	*
her joint disorders	2,734 (322)	2.0 (0.2)
inal stenosis	*	0.0 (0.0)
ondylopathies, excluding spinal stenosis	*	*
ervertebral disc disorders	*	0.1 (0.0)
w back pain, unspecified	1,493 (205)	1.1 (0.1)
her conditions of the spine and back, excluding low back pain	2,952 (321)	2.1 (0.2)
novitis and tenosynovitis	*	0.1 (0.0)
oft tissue disorders related to use, overuse and pressure	367 (96)	0.3 (0.1)
anglion and cyst of synovium, tendon and bursa	*	*
/algia and myositis, unspecified	*	0.1 (0.0)
sorders of bone and cartilage, excluding osteoporosis	*	0.1 (0.0)
her diseases of the musculoskeletal system and connective tissue	2,419 (253)	1.7 (0.1)
Diseases of the genitourinary system	, ,	,
ephritis, nephrotic syndrome, and nephrosis	*	*
fections of kidney	388 (98)	0.3 (0.1)
cute kidney failure	*	0.2 (0.0)
nronic kidney disease, excluding end stage renal disease (ESRD)	*	0.0 (0.0)
nd stage renal disease (ESRD)	*	0.0 (0.0)
specified kidney failure, including uremia, not otherwise specified	*	*
alculus of kidney and ureter	764 (120)	0.6 (0.1)
estitis	646 (146)	0.5 (0.1)
inary tract infection, site not specified	2,070 (239)	1.5 (0.1)
her diseases of the urinary system	511 (99)	0.4 (0.1)
enign prostatic hyperplasia (BPH)	*	0.0 (0.0)
sorders of prepuce	*	0.1 (0.0)
her disorders of male genital organs	357 (66)	0.3 (0.0)
specified lump or mass in breast	*	*
sorders of the breast, excluding unspecified lump or mass	*	0.1 (0.0)
lammatory disease of female pelvic organs	335 (62)	0.2 (0.0)
dometriosis	*	*
enital prolapse (female)	*	*
her noninflammatory disorders of female genital organs	452 (93)	0.3 (0.1)
sorders of menstruation and abnormal bleeding	506 (70)	0.4 (0.1)
enopausal and postmenopausal disorders	*	*
her disorders of female genital tract	*	0.1 (0.0)
Complications of pregnancy, childbirth, and the puerperium		
on-uterine pregnancy	*	0.0 (0.0)
ssed abortion	*	*
pervision of high-risk pregnancy	*	0.0 (0.0)
e-existing diabetes mellitus, types 1 and 2, complicating pregnancy	*	*
rly or threatened labor	*70 (27)	0.1 (0.0)
her complications of pregnancy	*	0.1 (0.0)
her complications of pregnancy, childbirth and the puerperium	1,917 (320)	1.4 (0.2)
eep apnea of newborn	*	*
ertain other conditions originating in the perinatal period	*	0.1 (0.0)
		()
Congenital anomalies		
ngenital anomalies	*	0.1 (0.0)

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2017—Con.

	Number of visits (standard error)	Percent distribution
Primary diagnosis group <sup>1</sup>	in thousands	(standard error)
Symptoms, signs, and ill-defined conditions		
	641 (106)	0.5 (0.1)
Abnormal heart beat and heart sounds Epistaxis	641 (106)	0.5 (0.1)
•	345 (78)	0.2 (0.1) 0.7 (0.1)
Cough, unspecified Dyspnea and respiratory abnormalities	951 (149) 1,246 (153)	0.7 (0.1)
Chest pain	, ,	
Abdominal pain	5,159 (548)	3.7 (0.3)
Unspecified jaundice, edema and other non-specific skin symptoms	6,954 (656) 1,290 (167)	5.0 (0.3) 0.9 (0.1)
Hematuria	400 (90)	0.3 (0.1)
Symptoms involving the urinary system, excluding hematuria and	400 (90)	0.5 (0.1)
	606 (100)	0.5 (0.1)
urinary incontinence	696 (109)	0.5 (0.1)
/ertigo and lightheadedness	932 (127)	0.7 (0.1)
ever of other and unknown origin	1,720 (301)	1.2 (0.2)
Headache	1,918 (227)	1.4 (0.1)
Malaise and fatigue	716 (132)	0.5 (0.1)
Syncope and collapse	1,066 (149)	0.8 (0.1)
Convulsions and seizures, not elsewhere classified	632 (100)	0.5 (0.1)
Other symptoms, signs, abnormal findings and ill-defined conditions	7,932 (755)	5.7 (0.2)
Injury and poisoning		
njury of eye and orbit	413 (93)	0.3 (0.1)
Contusions (bruise, hematoma)	3,150 (329)	2.3 (0.2)
Superficial injuries, excluding contusions (abrasion, blister, external	0,100 (020)	2.0 (0.2)
constriction, splinter, superficial bite)	1,209 (220)	0.9 (0.1)
Open wound of head	1,752 (248)	1.3 (0.2)
Open wound of wrist, hand and fingers	1,610 (217)	1.2 (0.1)
Open wound of hip and lower limb	824 (135)	0.6 (0.1)
Open wound, excluding head, hand, fingers, lower limb and	021 (100)	0.0 (0.1)
internal organs	385 (85)	0.3 (0.1)
Fraumatic fracture of shoulder and upper arm (clavicle, scapula,	303 (03)	0.0 (0.1)
humerus)	464 (86)	0.3 (0.1)
Fraumatic fracture of forearm (radius and ulna)	578 (86)	0.4 (0.1)
Fraumatic fracture of forearm (radius and unita) Fraumatic fracture of wrist, hand and fingers (carpal, metacarpals,	378 (80)	0.4 (0.1)
	750 (122)	0.5 (0.1)
phalanges) Fraumatic fracture of him (head and neck of famus)	750 (132) *	` ,
Fraumatic fracture of hip (head and neck of femur) Fraumatic fracture of ankle (medial malleolus, lateral malleolus,	^ ···	0.2 (0.1)
· ·	*	0.1 (0.0)
bimalleolar, trimalleolar)	•••	0.1 (0.0)
Fraumatic fracture of leg, foot and toes, excluding hip and ankle (femur,	074 (407)	0.5 (0.4)
patella, tibia, fibula, tarsals, metatarsals, phalanges)	674 (107)	0.5 (0.1)
Other traumatic fractures (skull, facial bones, vertebrae, ribs,	000 (470)	0.7 (0.4)
sternum, pelvis)	998 (173)	0.7 (0.1)
Tear of medial meniscus, current injury	*	*
Dislocations, excluding tear of medial meniscus	391 (93)	0.3 (0.1)
Sprains and strains of neck	720 (133)	0.5 (0.1)
Sprains and strains of back	768 (139)	0.6 (0.1)
Sprains and strains of wrist and hand	551 (103)	0.4 (0.1)
Sprains and strains of knee	333 (72)	0.2 (0.1)
Strains and sprains of ankle	872 (138)	0.6 (0.1)
Sprain and strains, excluding neck, back, wrist, hand, knee, ankle	691 (101)	0.5 (0.1)
Concussion	689 (170)	0.5 (0.1)
ntracranial injury, excluding concussion	*	0.1 (0.0)
nternal injury of chest, abdomen and pelvis	*	0.1 (0.0)
Other injuries, excluding burns and poisonings	4,635 (530)	3.3 (0.3)
Burns and corrosions, external and internal, excluding sunburn	489 (88)	0.4 (0.1)
Poisoning (overdose or wrong substance given or taken in error) due to		
drugs and biological substances, accidental (unintentional)	323 (61)	0.2 (0.0)
arage area present eaperarrees, accreaming (armiterial)		
Poisoning (overdose or wrong substance given or taken in error) due to	,	

Table 12. Annual number and percent distribution of emergency department visits, by diagnosis group: United States, 2017—Con.

Drimony diagnosis suscent	Number of visits (standard error)	Percent distribution
Primary diagnosis group <sup>1</sup>	in thousands	(standard error)
Injury and poisoning—Con.		
oisoning (overdose or wrong substance given or taken in error) due to		
drugs and biological substances, undetermined intent	*	0.0 (0.0)
Adverse effects (of correct substance properly administered) of drugs		
and biological substances	*	0.1 (0.0)
oxic effects of substances chiefly non-medical, accidental (unintentional)	292 (69)	0.2 (0.0)
oxic effects of substances chiefly non-medical, intentional self-harm	*	* ···
oxic effects of substances chiefly non-medical, undetermined	*	*
ther and unspecified effects of external causes	962 (158)	0.7 (0.1)
omplications of surgical and medical care	937 (116)	0.7 (0.1)
External-cause codes		
and transport accidents	*	*
ccidental (unintentional) injury due to slipping, tripping, stumbling or fall	*	*
ccidental (unintentional) injury due to contact with glass or other sharp		
cutting or piercing instrument or object, excluding tools or machinery	*	*
ccidental (unintentional) injury due to foreign body or object entering		
hrough skin	*	*
ccidental (unintentional) injury due to exposure to radiation	*	*
ccidental (unintentional) injury due to smoke, fire or flames, heat and		
not substances	*	*
ccidental (unintentional) injury due to other and unspecified means	*	*
tentional self harm by cutting with sharp or piercing instrument	*	*
ssault by bodily force	*	*
ssault by unspecified means	*	*
ctivity	*	*
Supplementary classifications		
ncounter for general adult medical examminations, including routine		
gynecological examination	*311 (116)	0.2 (0.1)
ncounter for routine newborn health examination	*	*
ncounter for routine child examination, exluding newborns	*	0.1 (0.1)
ncounter and observation for suspected conditions ruled out	590 (101)	0.4 (0.1)
ncounter for specific procedures and aftercare and follow-up		
examination after completed treatment, excluding for injuries	852 (112)	0.6 (0.1)
otential health hazards related to communicable diseases	*	0.1 (0.1)
ncounter for contraceptive management	*	*
ncounter for supervision of normal pregnancy	*	0.1 (0.1)
ther encounter related to pregnancy, excluding incidental pregnancy	*	0.1 (0.0)
otential health hazards related to personal and family history, excluding		
personal history of pulmonary embolism and personal history of		
erebral infarction or transient ischemic attack (TIA) without residual		0.4.(0.0)
deficits	*	0.1 (0.0)
ther factors influencing health status and contact with health services	1,434 (188)	1.0 (0.1)
ncodable entries <sup>3</sup>	2,764 (535)	2.0 (0.4)
Inknown or blank	416 (92)	0.3 (0.1)

Category not applicable.

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability.

<sup>0.0</sup> Quantity more than zero but less than 0.05.

Based on the International Classification of Diseases, 10th Revision, Clinical Modification (ICD–10–CM). Codes have been combined according to the NCHS Diagnosis Master Category List (DMCL). For a list of ICD-10-CM codes corresponding to a specific diagnosis group, refer to the DMCL document, available from: https://www.cdc.gov/nchs/data/ahcd/Reclass\_ICD\_10\_CM\_tables.pdf. Web tables presenting diagnosis estimates before 2016 used the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD-9-CM) coding system. Due to substantial differences between ICD-9-CM and ICD-10-CM, caution is advised when comparing diagnosis estimates in this table with those from before 2016. <sup>2</sup>Diagnosis groups for this chapter are not shown due to low sample sizes.

<sup>3</sup>Includes illegible diagnosis, left before being seen, walked out, eloped, left against medical advice, and entries of "none," "no diagnosis," "no disease," and "healthy" as the only entry in the diagnosis item.

Table 13. Presence of chronic conditions at emergency department visits: United States, 2017

Chronic condition <sup>1</sup>	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	138,977 (10,277)	100.0
Alcohol misuse, abuse, or dependence	4,289 (498)	3.1 (0.3)
Alzheimer's disease or dementia	1,833 (231)	1.3 (0.1)
Asthma	13,403 (1,150)	9.6 (0.5)
Cancer	4,612 (500)	3.3 (0.3)
Cerebrovascular disease or history of stroke or transient ischemic attack	4,384 (483)	3.2 (0.3)
Chronic kidney disease	3,982 (428)	2.9 (0.2)
Chronic obstructive pulmonary disease	7,863 (646)	5.7 (0.4)
Congestive heart failure	5249 (577)	3.8 (0.3)
Coronary artery disease, ischemic heart disease or history of myocardial		
infarction (MI)	8,491 (779)	6.1 (0.4)
Depression	13,043 (1,285)	9.4 (0.6)
Diabetes mellitus-Type 1	962 (150)	0.7 (0.1)
Diabetes mellitus-Type 2	7,437 (739)	5.4 (0.4)
Diabetes mellitus–Type unspecified	8,330 (1,016)	6.0 (0.5)
End-stage renal disease	985 (162)	0.7 (0.1)
History of pulmonary embolism, deep vein thrombosis, or venous		
thromboembolism	1,779 (225)	1.3 (0.1)
HIV (human immunodeficiency virus) or AIDS (acquired immune		
deficiency syndrome)	*880 (354)	0.6 (0.2)
-lyperlipidemia	13,598 (1,349)	9.8 (0.7)
Hypertension	34,985 (3,001)	25.2 (1.0)
Dbesity	6,608 (839)	4.8 (0.5)
Obstructive sleep apnea	3,473 (482)	2.5 (0.3)
Osteoporosis	1,263 (224)	0.9 (0.1)
Substance abuse or dependence	8,050 (1,093)	5.8 (0.7)
None of the above	69,826 (5,587)	50.2 (1.3)
Blank	1,980 (408)	1.4 (0.3)

NOTES: Numbers may not add to totals because of rounding. Total exceeds "All visits" and percentage exceeds 100% because more than one chronic condition may be reported per visit. SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2017.

<sup>...</sup> Category not applicable. 

1Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses.

Table 14. Injury visits to emergency departments, by selected patient and hospital characteristics: United States, 2017

Patient and hospital characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons per year <sup>1</sup> (standard error)
All injury visits <sup>2</sup>	39,972 (3,052)	100.0	12.5 (1.0)
Age group (years)			
Under 15	8,694 (1,001)	21.7 (1.9)	14.3 (1.6)
Under 1	424 (87)	1.1 (0.2)	10.8 (2.2)
1–4	2,847 (372)	7.1 (0.7)	17.8 (2.3)
5–14	5,423 (659)	13.6 (1.4)	13.2 (1.6)
15–24	6,388 (586)	16.0 (0.8)	15.1 (1.4)
25–44	10,946 (1,024)	27.4 (1.4)	13.0 (1.2)
45–64	7,823 (638)	19.6 (0.8)	9.4 (0.8)
35 and over	6,121 (710)	15.3 (1.2)	12.3 (1.4)
65–74	2,672 (349)	6.7 (0.7)	9.1 (1.2)
75 and over	3,449 (406)	8.6 (0.7)	17.2 (2.0)
Female	19,086 (1,501)	47.7 (1.0)	11.6 (0.9)
Under 15	3,644 (448)	9.1 (0.9)	12.2 (1.5)
15–24	2,798 (286)	7.0 (0.5)	13.4 (1.4)
25–44	5,219 (525)	13.1 (0.9)	12.2 (1.2)
45–64	3,874 (369)	9.7 (0.6)	9.0 (0.9)
65–74	1,456 (220)	3.6 (0.5)	9.3 (1.4)
75 and over	2,095 (282)	5.2 (0.6)	17.9 (2.4)
Male	20,886 (1,661)	52.3 (1.0)	13.3 (1.1)
Under 15	5,050 (605)	12.6 (1.2)	16.2 (1.9)
15–24	3,590 (413)	9.0 (0.8)	16.8 (1.9)
25–44	5,727 (578)	14.3 (0.8)	13.8 (1.4)
45–64	3,949 (354)	9.9 (0.6)	9.7 (0.9)
65–74	1,217 (191)	3.0 (0.4)	8.8 (1.4)
75 and over	1,353 (201)	3.4 (0.4)	16.1 (2.4)
Ownership			
Voluntary	28,413 (2,694)	71.1 (4.4)	8.9 (0.8)
Proprietary	7,474 (1,708)	18.7 (4.0)	2.3 (0.5)
Government	4,085 (1,067)	10.2 (2.5)	1.3 (0.3)
Geographic region			
Northeast	5,163 (991)	12.9 (2.4)	9.3 (1.8)
Midwest	10,296 (1,511)	25.8 (3.3)	15.3 (2.2)
South	17,169 (2,068)	43.0 (3.8)	14.1 (1.7)
West	7,343 (1,288)	18.4 (2.9)	9.6 (1.7)
Metropolitan status <sup>3</sup>			
MSA	34,530 (3,064)	86.4 (2.4)	12.3 (1.1)
Non-MSA	5,442 (914)	13.6 (2.4)	13.3 (2.2)

<sup>...</sup> Category not applicable.

NOTE: Numbers may not add to totals because of rounding.

Visit rates for age, sex, and region are based on the July 1, 2017, set of estimates of the U.S. civilian noninstitutionalized population as developed by the U.S. Census Bureau, Population Division.

<sup>&</sup>lt;sup>2</sup>The definition of injury changed in 2016 due to the switch from the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD–9–CM) coding system for diagnosis data to the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD–10–CM) coding system. In 2017, injury visits included those with a reason for visit code related to injury and poisoning based on NCHS' Reason for Visit Classification or a diagnosis code related to injury and poisoning based on ICD–10–CM. "All injury visits" includes any listed reason for visit and diagnosis codes related to injury and poisoning. Injury visits do not include adverse effects and complication codes. Using this definition, injury visits represent 28.8% of all emergency department visits. For more details, see the 2017 National Hospital Ambulatory Medical Care Survey public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc17\_ed-508.pdf.

<sup>&</sup>lt;sup>3</sup>Population estimates by metropolitan statistical area (MSA) status are based on data from the 2017 National Health Interview Survey, compiled according to the Office of Management and Budget definitions of core-based statistical areas as of February 2013. More information about MSA definitions is available from: https://www.census.gov/programs-surveys/metro-micro.html.

Table 15. Injury visits to emergency departments, by race, age, and ethnicity: United States, 2017

Patient characteristic	Number of visits (standard error) in thousands	Percent distribution (standard error)	Number of visits per 100 persons per year (standard error)
All injury visits <sup>2</sup>	39,972 (3,052)	100.0	12.5 (1.0)
Race <sup>3</sup> and age group (years)			
Vhite	28,938 (2,419)	72.4 (1.9)	11.8 (1.0)
Under 15	5,974 (780)	14.9 (1.5)	13.6 (1.8)
15–24	4,291 (434)	10.7 (0.6)	13.8 (1.4)
25–44	7,669 (814)	19.2 (1.2)	12.2 (1.3)
45–64	5,739 (477)	14.4 (0.8)	8.6 (0.7)
65–74	2,165 (285)	5.4 (0.6)	8.8 (1.2)
75 and over	3,099 (375)	7.8 (0.7)	18.0 (2.2)
Black or African American	9,508 (993)	23.8 (1.8)	22.6 (2.4)
Under 15	2,273 (340)	5.7 (0.8)	24.7 (3.7)
15–24	1,899 (284)	4.8 (0.6)	29.8 (4.5)
25–44	2,863 (318)	7.2 (0.6)	24.5 (2.7)
45–64	1,846 (263)	4.6 (0.5)	17.9 (2.5)
65–74	*403 (137)	1.0 (0.3)	13.9 (4.7)
75 and over	*	0.6 (0.2)	13.1 (4.5)
Other⁴	1,527 (282)	3.8 (0.7)	4.7 (0.9)
Ethnicity <sup>3</sup>			
Hispanic	5,645 (861)	14.1 (1.8)	9.7 (1.5)
lot Hispanic	34,327 (2,661)	85.9 (1.8)	13.1 (1.0)
White	23,813 (2,043)	59.6 (2.1)	12.2 (1.0)
Black or African American	9,085 (951)	22.7 (1.7)	23.1 (2.4)
Other <sup>4</sup>	1,429 (278)	3.6 (0.7)	5.1 (1.0)

<sup>..</sup> Category not applicable

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability.

<sup>1</sup> Visit rates are based on the July 1, 2017, estimates of the U.S. civilian noninstitutional population as developed by the U.S. Census Bureau, Population Division.

<sup>&</sup>lt;sup>2</sup>The definition of injury changed in 2016 due to the switch from the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) coding system for diagnosis data to the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM) coding system. In 2017, injury visits included those with a reason-for-visit code related to injury and poisoning based on ICD-10-CM. All injury visits" includes any listed reason for visit and diagnosis codes related to injury and poisoning. Injury visits do not include adverse effects and complication codes. Using this definition, injury visits represent 28.8% of all emergency department visits. For more details, see the 2017 National Hospital Ambulatory Medical Care Survey (NHAMCS) public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc17\_ed-508.pdf.

The race groups white, black or African American, and other include persons of Hispanic origin. Persons of Hispanic origin may be of any race. For 2017, race data

<sup>&</sup>lt;sup>3</sup>The race groups white, black or African American, and other include persons of Hispanic and non-Hispanic origin. Persons of Hispanic origin may be of any race. For 2017, race data were missing for 15.0% of injury visits, and ethnicity data were missing for 19.2% of injury visits. NCHS uses model-based single imputation for NHAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is detailed in the 2009 NHAMCS public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc09.pdf.

<sup>&</sup>lt;sup>4</sup>Includes Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

Table 16. Emergency department visits related to injury, poisoning, and adverse effect, by intent: United States, 2017

Intent <sup>1</sup>	Number of visits (standard error) in thousands	Percent distribution (standard error)
All injury visits related to injury, poisoning,		
and adverse effect <sup>2</sup>	43,193 (3,238)	100.0
Unintentional	29,442 (2,244)	68.2 (1.2)
Self-harm	479 (118)	1.1 (0.2)
Assault	1,684 (212)	3.9 (0.4)
Legal intervention/war	*	*
Undetermined or other <sup>3</sup>	1,261 (199)	2.9 (0.4)
Blank cause	10,279 (917)	23.8 (1.1)

<sup>.</sup> Category not applicable

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability.

Based on the proposed International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM) external cause-of-injury matrix, available from: https://www.cdc.gov/

injury/wisqars/pdf/ICD-10-CM\_External\_Cause\_Injury\_Codes-a.pdf.

The definition of injury changed in 2016 due to the switch from the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) coding system for diagnosis data to the ICD-10-CM coding system. In 2017, injury visits included those with a reason-for-visit code related to injury and poisoning based on the National Center for Health Statistics' Reason for Visit Classification or a diagnosis code related to injury and poisoning based on ICD-10-CM. Using this definition, injury visits accounted for 31.1% (standard

error = 0.8) of all emergency department visits in 2017.

3 Other includes certain diagnosis codes for injury visits not captured using the ICD-10-CM external-cause matrix. Common diagnoses in this group include medical and surgical complications, activity of person seeking health care (such as a heart attack while shoveling snow, which resulted from, or was contributed to, by the activity), and place of occurrence of external cause. For more details, see the 2017 National Hospital Ambulatory Medical Care Survey public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc17\_ed-508.pdf.

Table 17. Emergency department visits related to injury, poisoning, and adverse effect, by mechanism: United States, 2017

Mechanism <sup>1</sup>	Number of visits (standard error) in thousands	Percent distribution (standard error)
All injury visits related to injury, poisoning,		
and adverse effect <sup>2</sup>	43,193 (3,238)	100.0
	, ,	F 2 (0 F)
Cut or pierce	2,263 (269)	5.2 (0.5)
Drowning or submersion		•••
Fall	10,511 (919)	24.3 (1.0)
Fire or burn	460 (91)	1.1 (0.2)
Fire or flame	•••	0.4 (0.2)
Hot object or substance	266 (62)	0.6 (0.1)
Firearm	*	0.3 (0.1)
Machinery	260 (60)	0.6 (0.1)
All transportation	5,176 (513)	12.0 (0.7)
Motor vehicle—traffic	3,448 (356)	8.0 (0.5)
Motor vehicle—nontraffic	312 (61)	0.7 (0.1)
Pedal cyclist, other	*	0.5 (0.1)
Pedestrian, other	*	0.1 (0.1)
Other land transport	1,117 (222)	2.6 (0.5)
Other transport	*	0.1 (0.0)
Natural or environmental <sup>3</sup>	1,590 (217)	3.7 (0.4)
Overexertion	1,635 (182)	3.8 (0.3)
Struck by or against	5,317 (473)	12.3 (0.5)
Other specified <sup>4</sup>	952 (129)	2.2 (0.3)
Unspecified or other <sup>5</sup>	4,632 (422)	10.7 (0.7)
Blank cause	10,279 (917)	23.8 (1.1)

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions' (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability

Based on the proposed International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM) external cause-of-injury matrix, available from: https://www.cdc.gov/injury/

wisqars/pdf/ICD-10-CM\_External\_Cause\_Injury\_Codes-a.pdf.

The definition of injury changed in 2016 due to the switch from the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) coding system for diagnosis data to the ICD-10-CM coding system. In 2017, injury visits included those with a reason-for-visit code related to injury and poisoning based on the National Center for Health Statistics' Reason for Visit Classification or a diagnosis code related to injury and poisoning based on ICD-10-CM. Using this definition, injury visits accounted for 31.1% (standard error = 0.8) of all emergency department visits in 2017

<sup>&</sup>lt;sup>3</sup>Includes bites and stings (venomous and nonvenomous), natural or environmental, and other.

<sup>&</sup>lt;sup>4</sup>Includes child or adult abuse, foreign body, classifiable and not elsewhere classifiable.

<sup>\*\*</sup>Total transport to adult abuse, toreign body, classifiable and not elsewhere classifiable.

\*\*Softher includes certain diagnoses codes for injury visits not captured using the ICD\_10\_CM external-cause matrix. Common diagnoses in this group include medical and surgical complications, activity of person seeking health care (such as a heart attack while shoveling snow, which resulted from, or was contributed to, by the activity), and place of occurrence of external cause. For more details, see the 2017 National Hospital Ambulatory Medical Care Survey public-use data file documentation, available from: https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NHAMCS/doc17\_ed-508.pdf.

Table 18. Selected diagnostic and screening services ordered or provided at emergency department visits: United States, 2017

Diagnostic and screening services ordered or provided	Number of visits <sup>1</sup> (standard error) in thousands	Percent distribution (standard error)
		(Startdard Stron)
All visits	138,977 (10,277)	
One or more diagnostic or screening service listed	102,231 (7,941)	73.6 (1.1)
None	35,159 (2,876)	25.3 (1.2)
Blank	1,587 (368)	1.1 (0.3)
Blood tests		
Complete blood count	53,751 (4,572)	38.7 (1.7)
Creatinine or renal function panel	5,292 (1,529)	3.8 (1.1)
Glucose, serum	8,494 (1,770)	6.1 (1.2)
Electrolytes	2,598 (743)	1.9 (0.5)
Prothrombin time (PT/PTT/INR) <sup>2</sup>	10,971 (1,337)	7.9 (0.8)
Liver enzymes or hepatic function panel	4,841 (792)	3.5 (0.5)
Cardiac enzymes	6,790 (1,151)	4.9 (0.8)
Comprehensive metabolic panel	40,122 (3,746)	28.9 (1.6)
Blood culture	6,523 (811)	4.7 (0.5)
Brain natriuretic peptide	4,102 (716)	3.0 (0.4)
D-dimer	2,851 (394)	2.1 (0.2)
Arterial blood gases	*2,883 (960)	2.1 (0.7)
Blood alcohol concentration	2,783 (454)	2.0 (0.3)
Basic metabolic panel	12,366 (1,751)	8.9 (1.0)
Lactate	3,087 (428)	2.2 (0.3)
Other blood test	31,196 (3,117)	22.4 (1.4)
Any blood test listed	61,934 (4,887)	44.6 (1.3)
Imaging		
X-ray	48,909 (3,750)	35.2 (1.0)
Computed tomography (CT) scan	24,687 (2,268)	17.8 (0.9)
Abdomen or pelvis	10,436 (1,072)	7.5 (0.5)
Chest	3,324 (454)	2.4 (0.3)
Head	10,738 (1,073)	7.7 (0.5)
Other	4,310 (477)	3.1 (0.3)
Intravenous (IV) contrast with CT	7,240 (832)	5.2 (0.4)
Ultrasound	7,773 (1,001)	5.6 (0.5)
Magnetic resonance imaging (MRI) scan	1,442 (233)	1.0 (0.1)
IV contrast with MRI	*	0.1 (0.0)
Other imaging	1,372 (238)	1.0 (0.2)
Any imaging	69,036 (5,435)	49.7 (1.2)
Examinations and tests	· · · ,	,
Cardiac monitor	11,884 (1,344)	8.6 (0.8)
Urinalysis or urine dipstick	36,289 (3,259)	26.1 (1.1)
Electrocardiogram	27,928 (2,476)	20.1 (1.1)
Urine culture	14,311 (1,402)	10.3 (0.7)
Pregnancy/HCG test <sup>3</sup>	13,071 (1,371)	9.4 (0.6)
Toxicology screen	6,781 (889)	4.9 (0.5)
Influenza test	5,722 (1,103)	4.9 (0.3)
Throat culture	3,040 (725)	2.2 (0.5)
Wound culture	821 (184)	0.6 (0.1)
Other culture	1,897 (417)	1.4 (0.3)
Other culture HIV test	692 (129)	0.5 (0.1)
Other test or service	, ,	, ,
OTHEL TEST OF SELVICE	22,175 (3,141)	16.0 (1.8)

<sup>.</sup> Category not applicable.

<sup>3</sup>HCG is human chorionic gonadotropin.

NOTES: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>Total exceeds "All visits" and percentage exceeds 100% because more than one service may be reported per visit.</sup> 

<sup>&</sup>lt;sup>2</sup>PT is prothrombin time, PTT is partial thromboplastin time, and INR is international normalized ratio.

Table 19. Selected procedures at emergency department visits: United States, 2017

Procedure performed	Number of visits <sup>1</sup> (standard error) in thousands	Percent distribution (standard error)
All visits	138,977 (10,277)	
One or more procedure listed	60,102 (5,090)	43.2 (1.6)
None <sup>1</sup>	75,227 (6,082)	54.1 (1.8)
Blank <sup>2</sup>	3,648 (1,043)	2.6 (0.7)
Intravenous fluids	35,929 (3,498)	25.9 (1.4)
Cast, splint, wrap	6,832 (563)	4.9 (0.3)
Suturing or staples	3,267 (373)	2.4 (0.2)
ncision and drainage	1,369 (169)	1.0 (0.1)
Nebulizer therapy	4,125 (565)	3.0 (0.4)
Bladder catheter	2,415 (474)	1.7 (0.3)
Pelvic examination	1,876 (346)	1.3 (0.2)
Central line	*1,356 (762)	1.0 (0.5)
Cardiopulmonary resuscitation (CPR)	*	0.1 (0.0)
Endotracheal intubation	229 (64)	0.2 (0.0)
Skin adhesives	1,398 (240)	1.0 (0.2)
BiPAP or CPAP <sup>3</sup>	*758 (327)	0.5 (0.2)
Lumbar puncture	*422 (127)	0.3 (0.1)
Other <sup>4</sup>	11,854 (1,550)	8.5 (1.0)

<sup>.</sup> Category not applicable.

NOTES: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability.

<sup>0.0</sup> Quantity more than zero but less than 0.05.

The "None" checkbox was marked on the Patient Record Form (PRF).

<sup>&</sup>lt;sup>2</sup>No checkboxes were marked on PRF.

<sup>3</sup>BiPAP is variable or bi-level positive airway pressure, and CPAP is continuous positive airway pressure.

<sup>4</sup>Includes all other procedures not listed above.

Table 20. Medication therapy and number of medications mentioned at emergency department visits: United States, 2017

Medication therapy <sup>1</sup>	Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits	138,977 (10,277)	100.0
Visits with mention of medication <sup>2</sup>	112,767 (8,723)	81.1 (1.3)
visits without mention of medication	26,210 (2,530)	18.9 (1.3)
Number of medications provided or prescribed <sup>3</sup>		
0 medications	26,210 (2,530)	18.9 (1.3)
1 medication	29,535 (2,550)	21.3 (0.7)
2 medications	26,681 (2,109)	19.2 (0.7)
3 medications	19,296 (1,561)	13.9 (0.4)
4 medications	13,068 (1,242)	9.4 (0.5)
5 medications	8,682 (866)	6.2 (0.3)
6 medications	5,671 (622)	4.1 (0.3)
7 medications	3,121 (378)	2.2 (0.2)
8 medications	1,959 (234)	1.4 (0.1)
9 medications	1,155 (200)	0.8 (0.1)
10 medications	815 (150)	0.6 (0.1)
11 medications	457 (91)	0.3 (0.1)
12 medications	622 (117)	0.4 (0.1)
13 medications or more	1,706 (355)	1.2 (0.3)

<sup>.</sup> Category not applicable.

NOTE: Numbers may not add to totals because of rounding.

<sup>...</sup> Category not applicable.

Thocludes prescription drugs, over-the-counter preparations, immunizations, and desensitizing agents.

Visits at which one or more drugs were given in the emergency department (ED) or prescribed at discharge (up to 30 per visit); also defined as drug visit.

Drug mentions totaled 368,454,000 at ED visits in 2017. The average drug mention rate was 2.7 drug mentions per ED visit. For visits with at least one drug mention, the average drug visit rate was 3.3 drugs per visit.

Table 21. Twenty most frequently mentioned drugs at emergency department visits, by therapeutic drug category: United States, 2017

Dww esteron 1	Number of occurrences (standard error) in thousands	Percent of drug mentions <sup>2</sup>
Drug category <sup>1</sup>	in thousands	(standard error)
Analgesics <sup>3</sup>	98,405 (8,190)	26.7 (0.6)
Antiemetic or antivertigo agents	39,690 (3,386)	10.8 (0.3)
Minerals and electrolytes	36,666 (4,121)	10.0 (0.7)
Miscellaneous respiratory agents	29,290 (3,304)	7.9 (0.6)
Anxiolytics, sedatives, and hypnotics	15,391 (1,311)	4.2 (0.2)
Bronchodilators	14,341 (1,183)	3.9 (0.2)
Adrenal cortical steroids	12,716 (1,322)	3.5 (0.2)
Antihistamines	11,565 (1,056)	3.1 (0.1)
Anticonvulsants	10,530 (1,040)	2.9 (0.2)
Cephalosporins	10,329 (938)	2.8 (0.2)
Penicillins	9,150 (989)	2.5 (0.2)
Dermatological agents	8,400 (832)	2.3 (0.1)
Muscle relaxants	6,683 (819)	1.8 (0.2)
Local injectable anesthetics	6,672 (661)	1.8 (0.1)
Antiarrhythmic agents	6,627 (629)	1.8 (0.1)
Antiparkinson agents	6,129 (566)	1.7 (0.1)
Laxatives	5,363 (821)	1.5 (0.2)
Antiplatelet agents	5,122 (574)	1.4 (0.1)
Radiocontrast agents	5,057 (676)	1.4 (0.1)
Macrolide derivatives	4,921 (511)	1.3 (0.1)

<sup>&</sup>lt;sup>1</sup>Based on Cerner Multum second-level therapeutic drug category, available from: https://www.cerner.com/solutions/drug-database.

<sup>2</sup>Based on an estimated 368,454,000 drug mentions at emergency department (ED) visits in 2017. Drug mentions are medications given in EDs or prescribed at discharge.

<sup>3</sup>Includes narcotics (10.6%), nonsteroidal anti-inflammatory drugs (10.1%), and other analgesics, including salicylates, analgesic combinations, antimigraine agents, Cox-2 inhibitors, and miscellaneous analgesics (6.0%).

Table 22. Twenty most frequently mentioned drugs at emergency department visits: United States, 2017

				Perce	nt of drug mentions	s (standard error)		
,	Percent distribution (standard error)	Total	Given in emergency department	Prescribed at discharge	Both given in emergency department and prescribed at discharge	Unknown <sup>2</sup>	Therapeutic drug category <sup>3</sup>	
					Percent of mention	on (standard error)		
All drug mentions	368,454 (30,024)	100.0 (0.0)	100.0	58.1 (2.0)	32.3 (2.1)	8.9 (0.9)	0.7 (0.3)	<del></del>
Sodium chloride	29,262 (3,306)	7.9 (0.6)	100.0	98.2 (0.4)	1.2 (0.3)	0.4 (0.2)	0.2 (0.1)	Minerals and electrolytes, miscellaneous respiratory agents
Ondansetron Ibuprofen Acetaminophen	22,445 (2,035) 19,637 (1,698) 16,519 (1,485)	6.1 (0.2) 5.3 (0.3) 4.5 (0.3)	100.0 100.0 100.0	69.5 (2.0) 34.3 (2.7) 53.5 (3.6)	12.4 (1.1) 49.4 (2.8) 33.5 (3.6)	17.6 (1.9) 16.2 (1.8) 12.4 (1.9)	0.5 (0.3) 0.2 (0.1) 0.7 (0.3)	Antiemetic or antivertigo agents Analgesics Analgesics
Ketorolac Acetaminophen-hydrocodone	11,863 (1,370) 9,748 (1,159)	3.2 (0.2) 2.6 (0.2)	100.0 100.0	**89.2 (3.3) 35.9 (3.3)	4.6 (1.3) 48.8 (2.8)	* ` 15.0 (1.8)	* *	Analgesics Analgesics
Morphine Albuterol	8,143 (924) 7,867 (699)	2.2 (0.1) 2.1 (0.1)	100.0 100.0	97.8 (0.8) 37.4 (2.9)	1.0 (0.3) 47.5 (3.6)	0.8 (0.5) 14.5 (2.3)	* 0.6 (0.4)	Analgesics Bronchodilators
Diphenhydramine	5,851 (533)	1.6 (0.1)	100.0	67.8 (3.6)	20.0 (2.8)	12.0 (2.0)	*	Antiemetic or antivertigo agents, antihistamines, antiparkinson agents, anxiolytics, sedatives, hypnotics
Prednisone	5,120 (621)	1.4 (0.1)	100.0	17.9 (2.6)	66.3 (4.0)	15.5 (2.8)	*	Adrenal cortical steroids
Hydromorphone	4,926 (618)	1.3 (0.1)	100.0	97.3 (0.8)	1.9 (0.7)	*	*	Analgesics Antiarrhythmic agents, local
Lidocaine	4,844 (466)	1.3 (0.1)	100.0	90.1 (1.9)	7.8 (1.7)	2.0 (0.6)	*	injectable anesthetics
Aspirin	4,541 (480)	1.2 (0.1)	100.0	74.2 (4.8)	21.9 (4.6)	3.0 (0.8)	1.0 (0.8)	Analgesics, antiplatelet agents
Azithromycin	4,527 (473)	1.2 (0.1)	100.0	34.2 (2.9)	54.0 (3.8)	11.3 (2.5)	*	Macrolide derivatives
Certriaxone	4,446 (450)	1.2 (0.1)	100.0	97.7 (0.6)	1.2 (0.5)	1.0 (0.4)	*	Cephalosporins
Cephalexin Amoxicillin	4,211 (456) 4,193 (493)	1.1 (0.1) 1.1 (0.1)	100.0 100.0	12.1 (2.3)	76.2 (3.4) 67.8 (4.3)	11.7 (2.0) 20.7 (3.8)	* *	Cephalosporins Penicillins
Lorazepam	4,045 (422)	1.1 (0.1)	100.0	79.4 (2.9)	14.2 (3.2)	5.9 (1.6)	*	Anticonvulsants, antiemetic or antivertigo agents, anxiolytics, sedatives, hypnotics
Acetaminophen-oxycodone	4,002 (659)	1.1 (0.2)	100.0	41.0 (4.8)	38.7 (5.5)	20.0 (3.1)	*	Analgesics
Tramadol	3,908 (604)	1.1 (0.1)	100.0	19.6 (3.5)	68.3 (3.6)	11.8 (2.5)	*	Analgesics
All other	188,358 (16,365)	51.1 (1.1)	100.0	52.6 (2.6)	38.3 (2.9)	7.9 (1.1)	1.1 (0.5)	

<sup>0.0</sup> Quantity more than zero but less than 0.05.

NOTES: Estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>...</sup> Category not applicable.

<sup>\*\*</sup> Estimate meets NCHS standards of reliability, but its complement does not.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability.

<sup>&</sup>lt;sup>1</sup>Based on Cerner Multum terminology, the drug name reflects the active ingredients of a drug mention.

<sup>&</sup>lt;sup>2</sup>Includes drugs given or prescribed that did not have either the "given in emergency department" or "prescribed at discharge" checkboxes marked.

<sup>&</sup>lt;sup>3</sup>Based on Cerner Multum second-level therapeutic drug category, available from: https://www.cerner.com/solutions/drug-database.

Table 23. Providers seen at emergency department visits: United States, 2017

Type of provider	Number of visits <sup>1</sup> (standard error) in thousands	Percent distribution (standard error)
All visits	138,977 (10,277)	
Any physician	119,581 (8,754)	86.0 (1.7)
Emergency department attending physician	116,305 (8,603)	83.7 (2.0)
Emergency department resident or intern	15,679 (2,603)	11.3 (1.7)
Consulting physician	13,007 (1,693)	9.4 (1.1)
Registered nurse or licensed practical nurse	128,277 (9,994)	92.3 (1.6)
Any physician seen	110,457 (8,512)	79.5 (2.0)
Physician not seen	17,820 (2,862)	12.8 (1.7)
Nurse practitioner	16,235 (2,637)	11.7 (1.6)
Any physician seen	7,301 (1,601)	5.3 (1.1)
Physician not seen	8,934 (1,901)	6.4 (1.2)
Physician assistant	17,775 (2,582)	12.8 (1.6)
Any physician seen	10,680 (1,865)	7.7 (1.3)
Physician not seen	7,095 (1,462)	5.1 (0.9)
Emergency medical technician	7,207 (1,091)	5.2 (0.7)
Mental health provider	2,324 (335)	1.7 (0.2)
Other	42,913 (5,215)	30.9 (2.9)
Blank	211 (55)	0.2 (0.0)

<sup>...</sup> Category not applicable.

¹Total exceeds "All visits" and percentage exceeds 100% because more than one provider may be reported per visit.

Table 24. Disposition of emergency department visits: United States, 2017

Disposition	Number of visits <sup>1</sup> (standard error) in thousands	Percent of visits (standard error)
All visits	138,977 (10,277)	
Admitted, transferred, or died		
Admit to this hospital	14,503 (1,905)	10.4 (1.0)
Critical care unit	1,995 (441)	1.4 (0.3)
Stepdown or telemetry unit	650 (185)	0.5 (0.1)
Operation room	1,307 (379)	0.9 (0.2)
Mental health or detoxification unit	594 (129)	0.4 (0.1)
Cardiac catheterization laboratory	249 (66)	0.2 (0.0)
Other bed or unit	6,966 (907)	5.0 (0.5)
Unknown or blank	2,742 (656)	2.0 (0.4)
Admit to observation unit	3,929 (931)	2.8 (0.6)
Then hospitalized	1,318 (375)	0.9 (0.3)
Then discharged	2,611 (611)	1.9 (0.4)
Return or transfer to nursing home	396 (82)	0.3 (0.1)
Transfer to psychiatric hospital	1,135 (174)	0.8 (0.1)
Transfer to other hospital	1,883 (253)	1.4 (0.2)
Died in emergency department <sup>2</sup>	*	0.2 (0.0)
Outpatient follow-up		
Return or refer to physician or clinic for follow-up	95,775 (7,336)	68.9 (1.9)
No follow-up planned	13,000 (1,870)	9.4 (1.2)
Left prior to completing visit		
Left without being seen	1,578 (245)	1.1 (0.2)
_eft before treatment complete	968 (221)	0.7 (0.1)
₋eft against medical advice	1,034 (174)	0.7 (0.1)
Other	4,753 (1,413)	3.4 (1.0)
Blank	885 (219)	0.6 (0.2)

NOTES: Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>...</sup> Category not applicable.
0.0 Quantity more than zero, but less than 0.05.

<sup>\*\*</sup>Estimate does not meet NCHS standards of reliability.

\*\*Total exceeds "All visits" and percentage of visits exceeds 100% because more than one disposition may be reported per visit.

<sup>&</sup>lt;sup>2</sup>Includes "Dead on arrival."

Table 25. Emergency department visits resulting in hospital admission, by selected patient and visit characteristics: United States, 2017

	Number of visits	Demonstrate Co. C.	Admissions as
Selected characteristic	(standard error) in thousands	Percent distribution (standard error)	percent of visits (standard error)
Selected Characteristic		(Standard error)	(Standard error)
All admissions	14,503 (1,905)	100.0	10.4 (1.0)
Age (years)			
Under 15	*1,283 (532)	*	*
15–24	1,126 (252)	7.8 (1.5)	5.6 (1.0)
25–44	2,154 (356)	14.9 (1.7)	5.6 (0.8)
45–64	3,941 (539)	27.2 (1.9)	13.2 (1.5)
65–74	2,382 (371)	16.4 (1.6)	23.1 (2.2)
75 and over	3,617 (580)	24.9 (2.2)	30.0 (2.9)
Residence			
Private	12,800 (1,704)	88.3 (1.4)	9.7 (0.9)
Nursing home	815 (178)	5.6 (0.9)	37.8 (4.6)
Homeless	184 (51)	1.3 (0.4)	18.6 (4.0)
Other	316 (76)	2.2 (0.5)	17.7 (3.9)
Unknown or blank	387 (106)	2.7 (0.7)	15.5 (3.2)
Expected source of payment <sup>1</sup>			
Private insurance	5,359 (815)	36.9 (2.6)	12.4 (1.4)
Medicare	6,304 (958)	43.5 (3.5)	24.6 (2.2)
Medicaid or CHIP <sup>2</sup> , or other state-based	, ,	, ,	, ,
program	4,101 (630)	28.3 (3.0)	7.3 (0.8)
No insurance <sup>3</sup>	476 (99)	3.3 (0.6)	4.3 (0.7)
Mode of arrival			
Ambulance	5,659 (777)	39.0 (2.2)	28.1 (2.3)
Other	8,844 (1,240)	61.0 (2.2)	7.4 (0.8)
Triage category			
Immediate or emergent <sup>4</sup>	4,464 (944)	30.8 (3.6)	29.8 (4.0)
Other	10,039 (1,172)	69.2 (3.6)	8.1 (0.7)
Patient seen in this emergency department during the last 72 hours			
Yes	544 (117)	3.8 (0.7)	12.5 (2.7)
No, unknown, or blank	13,959 (1,847)	96.2 (0.7)	10.4 (1.0)
Hospital discharge status			
Alive	13,502 (1,827)	93.1 (1.8)	
Home or residence	10,912 (1,501)	80.8 (1.4)	
Return or transfer to nursing home	1,089 (214)	8.1 (1.1)	
Transfer to another facility	1,112 (200)	8.2 (1.0)	
Other	*	1.0 (0.2)	
Unknown or blank	257 (70)	1.9 (0.5)	
Died	267 (79)	1.8 (0.5)	
Unknown or blank	*734 (253)	*	

<sup>.</sup> Category not applicable.

Estimate does not meet NCHS standards of reliability.

Total exceeds "All visits" and percentage exceeds 100% because more than one source of payment may be reported per visit. Workers' compensation, other, and unknown sources of payment are not included in this table but account for 8.3% (weighted) of expected sources of payment.

2Children's Health Insurance Program.

<sup>&</sup>lt;sup>3</sup>Defined as having only self-pay, no charge, or charity as payment sources. The individual self-pay and no charge or charity categories are not mutually exclusive. 
<sup>4</sup>Defined as needing to be seen within 1–14 minutes.

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

Table 26. Principal hospital discharge diagnoses for patients admitted through the emergency department, by major disease category: United States, 2017

Major disease category and ICD-10-CM code range <sup>1</sup>		Number of visits (standard error) in thousands	Percent distribution (standard error)
All visits		14,503 (1,905)	100.0
Certain infectious and parasitic diseases	A00-B99	448 (98)	3.1 (0.5)
Neoplasms	C00-D49	178 (38)	1.2 (0.3)
Diseases of the blood and blood-forming organs and certain			
disorders involving the immune mechanism	D50-D89	*	1.7 (0.3)
Endocrine, nutritional, and metabolic diseases	E00-E89	575 (100)	4.0 (0.7)
Mental, behavioral and neurodevelopmental disorders	F01–F99	527 (108)	3.6 (0.7)
Diseases of the nervous system and sense organs <sup>2</sup>	G00-G99, H00-H95	440 (97)	3.0 (0.5)
Diseases of the circulatory system	100–199	1,937 (353)	13.4 (1.5)
Diseases of the respiratory system	J00-J99	1,561 (284)	10.8 (1.2)
Diseases of the digestive system	K00-K95	1,694 (340)	11.7 (1.5)
Diseases of the skin and subcutaneous tissue	L00-L99	314 (60)	2.2 (0.4)
Diseases of the musculoskeletal system and			
connective tissue	M00-M99	*	1.4 (0.4)
Diseases of the genitourinary system	N00-N99	1,004 (194)	6.9 (0.9)
Pregnancy, childbirth and the puerperium	O00-O9A	*145 (48)	1.0 (0.4)
Symptoms, signs, and abnormal clinical and			
laboratory findings, not elsewhere classified	R00-R99	2,174 (449)	15.0 (1.9)
njury, poisoning and certain other consequences of		, ,	, ,
external causes	S00-T88	1,383 (206)	9.5 (0.8)
All other diagnoses <sup>3</sup>		576 (116)	4.0 (0.8)
Unknown or blank		1,103 (292)	7.6 (2.0)

Category not applicable.

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr\_02/sr02\_175.pdf), in which case only an asterisk is shown.

<sup>\*</sup> Estimate does not meet NCHS standards of reliability.

\*Based on International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM). However, certain codes have been combined in this table to better describe the utilization

of ambulatory care services.

Sense organs include eye, adnexa, ear, and mastoid process.

Includes certain conditions originating in the perinatal period (P00–P96); congenital malformations, deformations and chromosomal abnormalities (Q00–Q99); external causes of morbidity (V00–Y99), and factors influencing health status and contact with health services (Z00–Z99).

Table 27. Hospital and emergency department characteristics, by emergency department visit volume: United States, 2017

Hospital and emergency department characteristic  All emergency departments	Total	Fewer than 20,000		
All emergency departments		r ewer than 20,000	20,000 to 50,000	50,000 or more
All emergency departments		Percent distributio	n (standard error)	
32 4000	100.0	100.0	100.0	100.0
Hospital characteristic				
Number of days per week that elective surgeries				
are scheduled:				
0–4	13.5 (3.6)	24.7 (7.0)	*	*
5	72.6 (4.0)	70.2 (7.0)	**83.1 (5.4)	64.2 (6.9)
6–7	11.1 (2.1)	* ··· *	* *	32.8 (6.8)
Unknown or blank	*	*	*	*
Has bed coordinator:				
Yes	57.3 (5.0)	*	68.0 (6.9)	**89.9 (3.2)
No	35.8 (5.1)	*	23.0 (6.1)	*
Unknown or black	*	*	*	*
How often hospital bed census data are available:				
Instantaneously	76.8 (4.6)	*	**84.3 (5.4)	**94.1 (2.3)
Every 4 hours	*	*	*	* ′
Every 8 hours	*	*	*	*
Every 12 hours	*	*	*	*
Every 24 hours	10.2 (2.8)	18.5 (5.6)	*	*
Unknown or blank	*	*	*	*
Has hospitalists on staff:				
Yes	**84.8 (5.0)	*	**91.0 (4.5)	**QQ () (1 2)
	04.0 (3.0) *	*		**98.0 (1.2)
No	* *		* ··· *	*
Unknown or blank	*	*	*	*
Has emergency medicine residency program:				
Yes	19.9 (3.1)	*	*	41.0 (7.1)
No	73.1 (3.6)	**92.0 (3.6)	*	*
Unknown or blank	*	*	*	*
Emergency department (ED) characteristic				
ED submits claims electronically:				
Yes	**94.2 (2.0)	**94.1 (3.3)	**92.2 (3.6)	**97.2 (1.9)
No	*	*	*	*
Unknown or blank, or refused to answer	*	*	*	*
ED uses electronic medical records or				
health records:	00 1 (2 9)	**04.4.(2.6)	**0F 0 (G 1)	**06 6 (4 2)
Yes, all electronic Yes, part paper and part electronic	90.1 (2.8)	**94.4 (3.6) *	**85.0 (6.1) *	**86.6 (4.2)
No	8.0 (2.4) *	*		*
Unknown or blank, or refused to answer	*	*	* *	*
	•••	•••	•••	•••
ED has physically separate observation or				
clinical decision unit:				
Yes	39.0 (4.1)	29.8 (6.6)	*	46.8 (6.9)
No	51.7 (4.7)	*	37.1 (6.4)	*
Unknown	9.4 (2.8)	*	*	*
Admitted patients were ever boarded 2 hours or more in				
ED or observation unit while waiting for inpatient bed:				
Yes	56.9 (4.4)	*	64.3 (7.0)	82.9 (5.1)
No	36.5 (4.8)	*	26.2 (6.9)	*
Unknown or blank	6.6 (1.9)	*	*	*

Table 27. Hospital and emergency department characteristics, by emergency department visit volume: United States, 2017—Con.

	Emergency department annual visit volume <sup>1</sup>				
Hospital and emergency department characteristic	Total	Fewer than 20,000	20,000 to 50,000	50,000 or more	
Emergency department (ED) characteristic—Con.		Percent distribution	n (standard error)		
ED went on ambulance diversion in 2016:					
Yes	31.1 (5.2)	*	*	44.3 (7.1)	
No	57.2 (5.4)	*	37.7 (6.9)	*	
Unknown or blank	11.7 (3.2)	*	*	*	
Ambulance diversion actively managed on regional level compared with each hospital adopting diversion if and when it chooses <sup>2</sup> :					
Yes	*	*	*	*	
No	*	*	*	*	
Unknown or blank	*	*	*	*	
Hospital continues to admit elective or scheduled surgery cases when ED is on ambulance diversion <sup>2</sup> :					
Yes	**81.1 (6.2)	*	*	*	
No	*	*	*	*	
Unknown or blank	*	*	*	*	
ED increased number of standard treatment spaces in last 2 years:					
Yes	18.2 (3.4)	*	*	32.2 (6.9)	
No	71.7 (4.1)	**82.1 (5.6)	*	*	
Unknown or blank	10.1 (2.7)	*	*	*	
ED physical space was expandedin last 2 years:					
Yes	12.0 (2.7)	*	*	22.5 (5.6)	
No	81.5 (3.1)	**93.2 (2.8)	*	70.0 (6.5)	
Unknown or blank	*	*	*	* ′	
ED plans to expand physical space in next 2 years <sup>3</sup> :					
Yes	16.9 (3.2)	*	21.4 (6.1)	*	
No	67.5 (4.8)	**81.4 (6.7)	*	*	
Unknown or blank	15.6 (3.5)	*	*	*	
Services ED uses:					
Bedside registration Kiosk self check-in	79.4 (3.9) *	73.1 (6.4) *	79.9 (7.1) *	**94.1 (3.1) *	
Computer-assisted triage	47.6 (6.0)	*	*	66.2 (6.4)	
Immediate bedding	71.7 (4.5)	73.5 (6.5)	*	71.5 (5.7)	
Advanced triage (triage-based care) protocols	70.7 (5.0)	*	74.3 (6.9)	81.1 (5.2)	
Physician or practitioner at triage	38.6 (4.4)	27.5 (5.9)	*	*	
Separate fast-track unit for nonurgent care	47.7 (5.9)	*	*	78.5 (5.9)	
Separate operating room dedicated to ED patients	9.0 (2.5)	*	*	*	
Electronic dashboard <sup>4</sup>	77.7 (4.8)	*	**86.7 (5.0)	**85.5 (5.0)	
Radio frequency identification tracking <sup>5</sup>	21.0 (5.3)	*	*	15.0 (4.4)	
Wireless devices by providers	57.0 (4.8)	*	*	76.8 (4.6)	
Zone nursing <sup>6</sup>	57.5 (4.7)	39.7 (6.5)	76.2 (6.1)	74.8 (6.3)	
Pool nurses <sup>7</sup>	, ,	, ,	` '		
FUUI HUISES	56.1 (4.7)	51.6 (6.8)	*	*	

Category not applicable.

NOTES: Estimates are not presented if they are based on fewer than 30 cases in the sample data, in which case only an asterisk is shown. Estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (https://www.cdc.gov/nchs/data/series/sr 02/sr02 175.pdf), in which case only an asterisk is shown.

<sup>\*\*</sup> Estimate does not meet NCHS standards of reliability.

\*\* Estimate meets NCHS standards of reliability, but its complement does not.

1 Number of hospitals for all emergency departments (EDs) (N = 199); Fewer than 20,000 (N = 62); 20,000–49,999 (N = 59); and 50,000 or more (N = 78).

<sup>&</sup>lt;sup>3</sup>Denominator is number of EDs on ambulance diversion or for which ambulance diversion status is unknown.

<sup>&</sup>lt;sup>4</sup>Displays updated patient information and integrates multiple data sources.

<sup>&</sup>lt;sup>5</sup>Shows exact location of patients, caregivers, and equipment. <sup>6</sup>Refers to all of a nurse's patients being located in one area.

<sup>&</sup>lt;sup>7</sup>Nurses who can be pulled into the ED on demand to respond to surges.