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Ambulatory Surgery in the United States, 2006

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Abstract

Objectives—This report presents national estimates of surgical and nonsurgical procedures performed on an ambulatory basis in hospitals and freestanding ambulatory surgery centers in the United States during 2006. Data are presented by types of facilities, age and sex of the patients, and geographic regions. Major categories of procedures and diagnoses are shown by age and sex. Selected estimates are compared between 1996 and 2006.

Methods—The estimates are based on data collected through the 2006 National Survey of Ambulatory Surgery by the Centers for Disease Control and Prevention's National Center for Health Statistics (NCHS). The survey was conducted from 1994–1996 and again in 2006. Diagnoses and procedures presented are coded using the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM).

Results—In 2006, an estimated 57.1 million surgical and nonsurgical procedures were performed during 34.7 million ambulatory surgery visits. Of the 34.7 million visits, 19.9 million occurred in hospitals and 14.9 million occurred in freestanding ambulatory surgery centers. The rate of visits to freestanding ambulatory surgery centers increased about 300 percent from 1996 to 2006, whereas the rate of visits to hospital-based surgery centers remained largely unchanged during that time period. Females had significantly more ambulatory surgery visits (20.0 million) than males (14.7 million), and a significantly higher rate of visits (132.0 per 1,000 population) compared with males (100.4 per 1,000 population).

Average times for surgical visits were higher for ambulatory surgery visits to hospital-based ambulatory surgery centers than for visits to freestanding ambulatory surgery centers for the amount of time spent in the operating room (61.7 minutes compared with 43.2 minutes), the amount of time spent in surgery (34.2 minutes compared with 25.1 minutes), the amount of time spent in the postoperative recovery room (79.0 minutes compared with 53.1 minutes), and overall time (146.6 minutes compared with 97.7 minutes).

Although the majority of visits had only one or two procedures performed (56.3 percent and 28.5 percent, respectively), 2.6 percent had five or more procedures performed. Frequently performed procedures on ambulatory surgery patients included endoscopy of large intestine (5.8 million), endoscopy of small intestine (3.5 million), extraction of lens (3.1 million), injection of agent into spinal canal (2.7 million), and insertion of prosthetic lens (2.6 million). The leading diagnoses at ambulatory surgery visits included cataract (3.0 million); benign neoplasms (2.0 million), malignant neoplasms (1.2 million), diseases of the esophagus (1.1 million), and diverticula of the intestine (1.1 million).

Keywords: Outpatients • Diagnoses • Procedures • ICD–9–CM • National Survey of Ambulatory Surgery

Introduction

This report presents data from the 2006 National Survey of Ambulatory Surgery (NSAS). The survey, previously conducted annually from 1994 through 1996, was conducted by NCHS to gather and disseminate data about ambulatory surgery in the United States. For NSAS, ambulatory surgery refers to surgical and nonsurgical procedures performed on an ambulatory (outpatient) basis in a hospital or freestanding center's general operating rooms, dedicated ambulatory surgery rooms, and other specialized rooms, such as endoscopy units and cardiac catheterization laboratories. NSAS is the principal source for national data on the characteristics of visits to hospital-based and freestanding ambulatory surgery centers.

Ambulatory surgery has been increasing in the United States since the early 1980s. Two major reasons for the increase are advances in medical technology and changes in payment arrangements. The medical advances include improvements in anesthesia, which enable patients to regain consciousness more quickly with fewer after effects and better analgesics for relief of pain. In addition, minimally invasive and noninvasive procedures have been developed and are being used with increasing frequency. Examples include laser surgery, laparoscopy, and endoscopy. These medical advances have made surgery less complex and risky (1) and have allowed many





procedures to move from inpatient to ambulatory settings (2–6).

At the same time, concern about rising health care costs led to changes in the Medicare program that encouraged the development of ambulatory surgery. In the early 1980s, the Medicare program was expanded to cover care in ambulatory surgery centers, and a prospective payment system based on diagnosis-related groups was adopted for hospital inpatient care that created strong financial incentives for hospitals to shift less complex surgery to outpatient settings. Many state Medicaid plans and private insurers followed the lead of the Medicare program and adopted similar policies (7).

Additional changes in the health care system, such as the growth of managed care along with consolidation of hospitals, have furthered the growth of ambulatory surgery (3,8). As these changes occurred, many types of surgeries done in hospitals were increasingly performed during ambulatory visits. Both in conjunction with and as a result of these changes, the number of freestanding ambulatory surgery centers (ASCs) grew from 239 in 1983 (9) to over 3,300 nearly two decades later (3,10). The number of procedures being performed in ASCs also increased dramatically-from 380,000 procedures in 1983 to 31.5 million in 1996 (5).

The National Hospital Discharge Survey (NHDS), which has been conducted by NCHS every year since 1965, includes information on surgical and nonsurgical procedures performed in inpatient settings (11-13). Although NHDS remains a good source of data for procedures that can be done only on an inpatient basis, such as open-heart surgery or cesarean delivery, NHDS estimates have become incomplete for procedures that can be performed on an ambulatory basis. NSAS was undertaken to obtain information about ambulatory procedures. For many types of procedures, data from both NHDS and NSAS are now required to obtain national estimates. Reports that present both ambulatory and inpatient procedure data for 1994, 1995, and 1996 have been published (14-16).

NSAS and NHDS are two of the NCHS provider-based surveys that constitute the National Health Care Surveys (NHCS). The NHCS were designed to provide nationally representative data on the use of health care resources of major sectors of the health care delivery system. Information on ambulatory procedures is also collected in two other NHCS surveys. The National Ambulatory Medical Care Survey obtains information on procedures ordered or performed during visits to physicians' offices (17), and the National Hospital Ambulatory Medical Care Survey (NHAMCS) collects data on procedures ordered or performed during visits to hospital outpatient and emergency departments (18).

Methods

Data source

NSAS covers procedures performed in ambulatory surgery centers, both hospital-based and freestanding. The hospital universe includes noninstitutional hospitals exclusive of federal, military, and Department of Veterans Affairs hospitals located in the 50 states and the District of Columbia. Only short-stay hospitals (hospitals with an average length of stay for all patients of fewer than 30 days), or those whose specialty was general (medical or surgical), or children's general were included in the survey. These hospitals must also have had six beds or more staffed for patient use. This universe definition is the same as that used for the NHDS and the NHAMCS. For the 2006 NSAS, the hospital sample frame was constructed from the products of Verispan, L.L.C., specifically its "Healthcare Market Index, Updated June 15, 2005" and its "Hospital Market Profiling Solution, Second Quarter, 2005" (19). These products were formerly known as the SMG Hospital Market Database. In 2006, the sample consisted of 224 hospitals. Of the 224 hospitals, 35 were found to be out-of-scope (ineligible) because they went out of business or otherwise failed to meet the criteria for the NSAS universe. Of the 189 in-scope (eligible)

hospitals, 142 hospitals responded to the survey for a response rate of 75.1%.

The universe of freestanding facilities included ones that were regulated by the states or certified by the Centers for Medicare & Medicaid Services (CMS) for Medicare participation. The sampling frame consisted of facilities listed in the 2005 Verispan Freestanding Outpatient Surgery Center Database (20) and Medicare-certified facilities included in the CMS Provider-of-Services (POS) file (21). Facilities specializing in dentistry, podiatry, abortion, family planning, or birthing were excluded. However, procedures commonly found in these settings were not excluded from in-scope locations. In 1994-1996, pain block locations were also excluded; however, they were included in the 2006 NSAS. In 2006, the sample consisted of 472 freestanding ASCs. Of the 472 freestanding ambulatory surgery centers, 74 were found to be out-of-scope (ineligible) because they failed to meet the criteria for the NSAS universe. Of the 398 in-scope (eligible) freestanding ambulatory surgery centers, 295 responded to the survey for a response rate of 74.1%. The overall response rate was 74.4%.

Sample design

The NSAS sampled facilities were selected using a multistage probability design with facilities having varying selection probabilities. Independent samples of hospitals and freestanding ambulatory surgery centers were drawn. Unlike the 1994-1996 NSAS, which used a three-stage stratified cluster design, with the first stage consisting of geographic primary sampling units or PSUs, the 2006 NSAS used a two-stage list-based sample design. Facilities were stratified by facility type (hospital compared with freestanding), ambulatory surgery status of hospitals (i.e., whether or not the hospital performed such surgery), facility specialty, and geographic region.

The first stage of the design consisted of selection of facilities using systematic random sampling with probabilities proportional to the annual number of ambulatory surgeries performed. For the stratum of hospitals which, according to the sampling frame data, did not have ambulatory surgery, a national sample of 25 hospitals was selected to permit estimates of surgery in hospitals that either added ambulatory surgery since the frame was selected or differed from the frame.

At the second stage, within sampled facilities, a sample of ambulatory surgery visits was selected using a systematic random sampling procedure. Selection of visits within each facility was performed separately for each location where ambulatory surgery was performed. These locations included main operating rooms; dedicated ambulatory surgery units; cardiac catheterization laboratories; and rooms for laser procedures, endoscopy, and laparoscopy. Locations within hospitals dedicated exclusively to abortion, dentistry, podiatry, or small procedures were not included. The exclusion of these specialty locations, as well as the exclusion of facilities dedicated exclusively to those specialties, was recommended based on the feasibility study for the NSAS that was conducted in 1989-1991. Based on the recommendation of outside experts who were consulted prior to the design of the 2006 NSAS, the 2006 NSAS includes pain block facilities, whereas the 1994-1996 NSAS did not (22). Because NSAS data are collected from a sample of visits, persons with multiple visits during the year may be sampled more than once. NSAS estimates are of the number of visits to or procedures performed in ambulatory surgery facilities, not the number of persons served by these facilities.

Data collection

Sample selection and abstraction of information from medical records were performed at the facilities. Facility staff did the sampling in about 40 percent of facilities that participated in the 2006 survey, and facility staff abstracted the data in about 30 percent of the participating facilities. In the remaining facilities, the work was performed by personnel of the U.S. Census Bureau

acting on behalf of NCHS. Data processing and medical coding were performed by the Constella Group Inc., Durham, North Carolina. Editing and estimation were completed at NCHS.

The abstract form (Technical Notes) contains items relating to the personal characteristics of the patients such as age, sex, race, and ethnicity; and administrative items such as date of procedure, disposition, and expected sources of payment. The medical information includes up to seven diagnoses and six procedures, which were coded according to the *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) (23).

A quality control program was conducted on the coding and entering of data from abstracts to electronic form. Approximately 10 percent of the abstractions were independently recoded by an NSAS coder at the Constella Group, Inc., with discrepancies resolved by a chief coder. The overall error rate for the 2006 NSAS was 0.3 percent for diagnosis coding and keying, 0.2 percent for procedure coding and keying, and 0.3 percent for demographic coding and keying.

Estimation

Because of the complex multistage design of the NSAS, the survey data must be inflated or weighted in order to produce national estimates. The estimation procedure produces essentially unbiased national estimates, and has three basic components: inflation by reciprocals of the probabilities of sample selection, adjustment for nonresponse, and population weighting ratio adjustments. These three components of the final weight are described in more detail in another report (22).

Standard errors

The standard error (SE) is primarily a measure of sampling variability that occurs by chance because only a sample, rather than the entire universe, is surveyed. Estimates of the sampling variability for this report were calculated using Taylor approximations in SUDAAN, which takes into account the complex sample design of the NSAS. A description of the software and the approach it uses has been published (24). The SEs of statistics presented in this report are included in each of the tables.

Testing of significance and rounding

In this report, statistical inference is based on the two-sided *t*-test with a critical value of 2.58 (0.01 level of significance). Terms such as "higher" and "less" indicate that differences are statistically significant. Terms such as "similar" or "no difference" mean that no statistically significant difference exists between the estimates being compared. A lack of comment on the difference between any two estimates does not mean that the difference was tested and found not to be significant.

The feasibility of using one weight to calculate estimates and variances was assessed to determine whether the SEs produced from the single-weight variable were for the most part greater than the SEs produced by the variance weights for the same estimates. For certain estimates, the single weights produced variances that underestimated the true variances. This underestimation can lead to Type I errors in which the null hypothesis is incorrectly rejected when using the commonly used significance level of alpha=0.05. As a result, the decision was made that an alpha of 0.01 should be used to reduce the likelihood of committing a Type I

Estimates of counts in the tables have been rounded to the nearest thousand. Therefore, figures within tables do not always add to the totals. Rates and percentages were calculated from unrounded figures and may not precisely agree with rates or percentages calculated from rounded data.

Nonsampling error

As in any survey, results are subject to both sampling and nonsampling errors. Nonsampling errors include

reporting and processing errors as well as biases due to nonresponse and incomplete response. The magnitude of the nonsampling errors cannot be computed. However, these errors were kept to a minimum by procedures built into the operation of the survey. To eliminate ambiguities and to encourage uniform reporting, attention was given to the phrasing of items, terms, and definitions. Quality control procedures and consistency and edit checks reduced errors in data coding and processing. The unweighted response rate for the 2006 NSAS was 74.4%. Table 1 presents weighted characteristics of NSAS respondents and nonrespondents, along with weighted response rates. Responding compared with nonresponding distributions were similar, with the exception of higher cooperation among facilities in a nonmetropolitan statistical area. The effect of this differential response is minimized in the visit estimates in most cases, as NSAS uses a nonresponse adjustment factor that takes annual visit volume, specialty, facility type, and geographic region into account. Item nonresponse rates in NSAS are generally low (5% or fewer). However, levels of nonresponse may vary considerably in the survey.

NSAS does not completely measure ambulatory procedures that are performed in locations such as physicians' offices, for example, injections of therapeutic substances, skin biopsies, and certain plastic surgery procedures. The National Ambulatory Medical Care Survey has data about procedures in physicians' offices (17) and the National Hospital Ambulatory Medical Care Survey provides information about procedures in other hospital outpatient and emergency departments (18). As medical technology continues to advance and changes in payment policy promote it, increasing numbers and types of procedures may move from NSAS facilities to elsewhere.

Because certain freestanding facilities and certain specialized locations within hospitals and freestanding facilities are excluded from the NSAS design, ambulatory procedures performed in some specialties are not completely measured by the survey. Excluded specialties include dentistry, podiatry, abortion, family planning, and birthing; and locations that perform small procedures, such as removal of skin lesions, were also excluded. However, procedures in these specialties performed in general operating rooms or other in-scope locations are included in the survey.

The determination of whether an ambulatory surgery facility is a hospital or a freestanding center is based on the universe from which the facility was selected. In most cases, it was apparent whether a facility was a hospital or a freestanding ambulatory surgery center, but some facilities were not easily classified. For example, a "freestanding" facility may be owned by a hospital but located some distance away. If such a facility is separately listed in the 2005 Verispan Freestanding Outpatient Surgery Center Database or in the CMS POS file and is selected into the NSAS sample from this universe, it is considered a freestanding facility. Additional definitions of terms used in the NSAS have been published (22).

Use of tables

The statistics presented in this report are based on a sample, and therefore may differ from the figures that would be obtained if a complete census had been taken. Visits are reported by first-listed diagnosis, which is the one specified as the principal diagnosis on the face sheet or discharge summary of the medical record, or if a principal diagnosis was not specified, the first one listed on the face sheet or discharge summary of the medical record. It was usually the main cause of the visit. The number of first-listed diagnoses is the same as the number of visits.

The estimates shown in this report include surgical procedures, such as tonsillectomy; diagnostic procedures, such as ultrasound; and other therapeutic procedures, such as injection or infusion of cancer chemotherapeutic substance. Up to six procedures are coded for each visit. All-listed procedures include all

occurrences of the procedure coded regardless of the order on the medical record.

The diagnoses and procedures appear in separate tables of this report, presented by chapter of the ICD-9-CM. Within these chapters, subcategories of diagnoses or procedures are shown. These specific categories were selected primarily because of their large numbers or because they are of special interest.

According to the 2006 NSAS, an estimated 287,000 ambulatory surgery visits with procedures were admitted to the hospital as inpatients. Of these, 269,000 (93.8 percent) were visits to hospitals and 18,000 (6.2 percent) were visits to freestanding centers. In most instances, the ambulatory procedures for these patients become part of their inpatient records. People admitted as inpatients were included in this report, and procedures for these patients were included in the summaries of outpatient procedures, as described in the first version of this report for 1994 (5). These patients were excluded in the 1995 and 1996 Advance Data Reports (4,5) and will be excluded to avoid double counting from the Series 13 report in which data from the 2006 NHDS and 2006 NSAS will be presented together, following the same process as reports published using the 1994-1996 data (14-16).

The chances are about 40 in 100 that an estimate from the sample would differ from a complete census by more than the SE. The chances are 9 in 100 that the difference would be more than twice the SE, and about 4 in 100 that the difference would be more than 2.5 times as large as the SE.

The relative standard error (RSE) of an estimate is obtained by dividing the SE by the estimate itself. The RSE is expressed as a percentage of an estimate and can be multiplied by the estimate to obtain the SE. Because of low reliability, estimates with a RSE of more than 30 percent or those based on a sample of fewer than 30 records are replaced by asterisks (*). The estimates that are based on 30 to 59 patient records are preceded by an asterisk (*) to indicate that they also have low reliability.

The population estimates used in computing rates are for the U.S. civilian population, including institutionalized persons, as of July 1, 2006. Rates are computed using adjustments made after the 2000 census (postcensal estimates) of the civilian population of the United States. The data are from unpublished tabulations provided by the U.S. Census Bureau. Facilities are classified by location into one of the four geographic regions of the United States that correspond to those used by the U.S. Census Bureau.

Results

Patient and facility characteristics

- In 2006, an estimated 57.1 million surgical and nonsurgical procedures were performed during 34.7 million ambulatory surgery visits (Table 2).
- The 34.7 million ambulatory surgery visits accounted for about 61.6 percent of the combined total of ambulatory surgery visits and inpatient discharges with surgical and nonsurgical procedures (56.4 million) (Figure 1).
- An estimated 19.9 million (57.2 percent) of the ambulatory surgery visits occurred in hospitals and 14.9 million (42.8 percent) occurred in freestanding centers (Table 2, Figure 2).
- From 1996 to 2006, the change in the rate of visits to freestanding centers was larger than that for visits to hospital-based ambulatory surgery centers. The rate of visits to freestanding ambulatory surgery centers increased about 300 percent from 1996 to 2006, while the rate in hospital-based centers was flat (Figure 3).
- Females had significantly more ambulatory surgery visits (20.0 million) than males (14.7 million), and a significantly higher rate of visits (132.0 per 1,000 population) compared with males (100.4 per 1,000 population) (Table 2).
- Although the vast majority of ambulatory surgery visits had routine

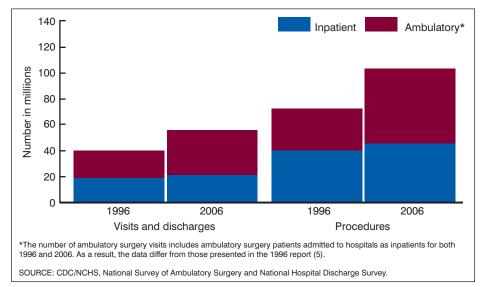


Figure 1. Ambulatory surgery visits and discharges of hospital inpatients with procedures: United States, 1996 and 2006

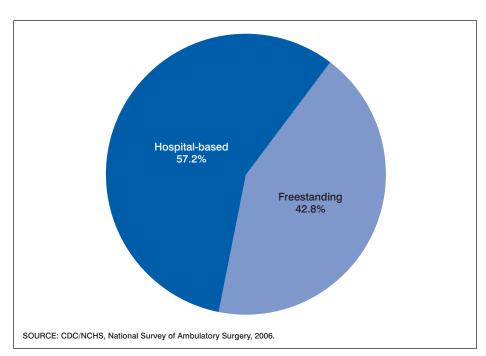


Figure 2. Percent distribution of ambulatory surgery visits by type of facility: United States, 2006

- discharges (93.1 percent), 0.8 percent were admitted as inpatients (Table 3).
- Although general anesthesia alone was provided in 30.7 percent of ambulatory surgery visits,
 20.8 percent received anesthesia only intravenously, and 20.8 percent received multiple types of anesthesia (data not shown).

Surgical times for ambulatory surgery visits

• Total time is defined as the length of time from when the patient enters the operating room to the time he or she leaves postoperative care. Operating room time is the length of time the patient is in the operating room. The surgical time is the portion of the

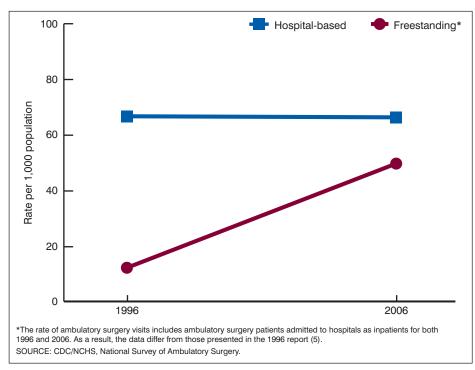


Figure 3. Rates of ambulatory surgery visits by facility type: United States, 1996 and 2006

time spent in the operating room during which the surgical procedure occurs. Typically, the surgical time is the time from when the incision is made until the wound is closed. After the surgical procedure, the patient recovers in the postoperative room before he or she is discharged; the time spent here is considered the post operative room time. Average times for surgical visits were higher for ambulatory surgery visits to hospitalbased ambulatory surgery centers than for visits to freestanding ambulatory surgery centers for the amount of time spent in the operating room (61.7 minutes compared with 43.2 minutes), the amount of time spent in surgery (34.2 minutes compared with 25.1 minutes), the amount of time spent in the postoperative recovery room (79.0 minutes compared with 53.1 minutes), and overall time (146.6 minutes compared with 97.7 minutes) (Table 4).

 The average time spent in surgery also varied with the diagnosis. The average surgical time for inguinal hernia diagnoses was more than twice that for diagnoses of benign neoplasm of the colon (49.4 minutes compared with 21.8 minutes) (Table 5).

Ambulatory procedures

- Females had significantly more ambulatory surgery procedures (32.7 million) than males (24.3 million) and a significantly higher rate of procedures (2,157.7 per 10,000 population) than males (1,660.5 per 10,000 population) (Tables 6,7). This was driven by differences for females between 15 and 64 years of age (Figure 4).
- Although the majority of visits had only one or two procedures performed (56.3 percent and 28.5 percent, respectively),
 2.6 percent had five or more procedures performed (Figure 5).
- Frequently performed procedures on ambulatory patients included endoscopy of large intestine (5.8 million), endoscopy of the small intestine (3.5 million), extraction of lens (3.1 million), injection of agent into spinal canal (2.7 million), and insertion of prosthetic lens (2.6 million) (Table 6).

- Females had higher rates per 10,000 population than males for certain ambulatory procedures, such as extraction (126.1 compared with 79.0) and insertion (105.2 compared with 67.4) of lens and endoscopy of the small (135.3 compared with 97.3) and large (219.2 compared with 169.4) intestine (Table 7).
- Ambulatory procedures often performed on children under 15 years included myringotomy with insertion of tube (1.2 million), tonsillectomy with or without adenoidectomy (530,000), and adenoidectomy without tonsillectomy (132,000) (Table 6).
- Common ambulatory procedures for persons 15–44 years of age were endoscopy of large intestine (779,000); endoscopy of small intestine (770,000); injection of agent into spinal canal (745,000); injection or infusion of therapeutic or prophylactic substance (482,000); and operations on muscle, tendon, facia, and bursa (425,000) (Table 6).
- Ambulatory surgery procedures commonly performed on persons 45–64 years of age were endoscopy of large intestine (2.9 million), endoscopy of small intestine (1.4 million), injection of agent into spinal canal (1.1 million), endoscopic polypectomy of the large intestine (781,000), and extraction of lens (611,000) (Table 6).
- For persons 65–74 years of age, endoscopy of large intestine (1.2 million), extraction of lens (1.1 million), insertion of lens (923,000), endoscopy of small intestine (655,000), and endoscopic polypectomy of the large intestine (461,000) were the most frequent ambulatory procedures (Table 6).
- Common ambulatory procedures for those 75 years of age or over were extraction of lens (1.3 million), insertion of lens (1.1 million), endoscopy of large intestine (825,000), endoscopy of small intestine (551,000), and injection of agent into spinal canal (450,000) (Table 6).

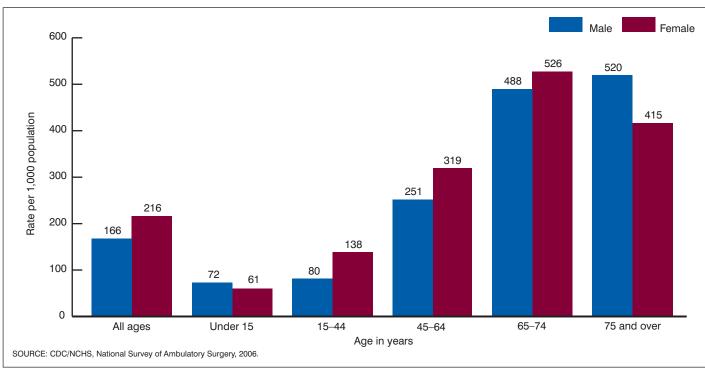


Figure 4. Rate of ambulatory surgery procedures by age and sex: United States, 2006

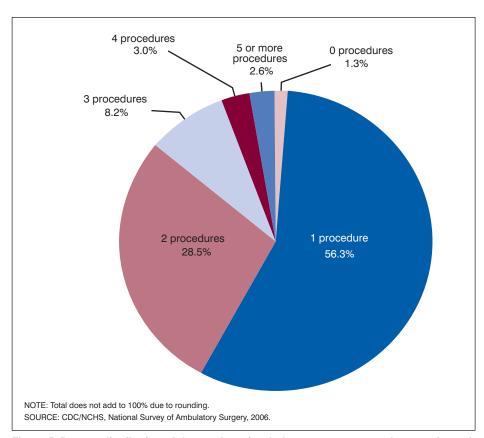


Figure 5. Percent distribution of the number of ambulatory surgery procedures performed per visit: United States, 2006

Diagnoses for ambulatory surgery visits

- The leading diagnoses at ambulatory surgery visits included cataract (3.0 million); benign neoplasms (2.0 million), malignant neoplasms (1.2 million), diseases of the esophagus (1.1 million), and diverticula of the intestine (1.1 million) (Table 8).
- Rates of ambulatory surgery visits per 10,000 population varied by gender. For example, the rate of ambulatory surgery visits was higher for females than for males for first-listed diagnoses of cataract (123.5 compared with 77.5) (Table 9).

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Table 1. Characteristics of the 2006 National Survey of Ambulatory Surgery facility respondents and nonrespondents: United States

| Facility characteristic | Number of sampled in-scope facilities | Total percent distribution (weighted) | Responding facility percent distribution (weighted) | Nonresponding facility percent distribution (weighted) | Weighted response rate | Standard error |
|---|--|--|---|--|------------------------------|--------------------------|
| All facilities | 587 | 100.0 | 100.0 | 100.0 | 83.7 | 2.6 |
| Facility type | | | | | | |
| Hospital-based | 189 398 | 49.9 50.1 | 51.2 48.8 | 43.1 56.9 | 85.9 81.5 | 3.8 3.3 |
| Geographic region | | | | | | |
| Northeast Midwest South West | 90 126 222 149 | 11.7 24.1 40.4 23.7 | 12.5 23.7 41.8 22.0 | 8.2 25.9 33.2 32.8 | 88.7 82.5 86.6 77.5 | 4.5 6.8 3.6 5.2 |
| Metropolitan status ¹ | | | | | | |
| Metropolitan statistical area | 521 66 | 73.1 26.9 | 70.1 29.9 | 88.6 11.4 | 80.3 93.1 | 2.9 3.7 |
| Growth area ² | | | | | | |
| Below 7.8% growth | 209 378 | 43.3 56.7 | 46.1 53.9 | 29.3 70.7 | 89.0 80.0 | 3.5 3.4 |
| Poverty status of area ² | | | | | | |
| Below 13.1% in poverty | 337 250 | 51.9 48.1 | 52.1 47.9 | 51.3 48.7 | 83.9 83.5 | 3.1 4.2 |
| Primary care shortage area ² | | | | | | |
| Nonshortage area | 99 488 | 22.5 77.5 | 24.3 75.7 | 13.7 86.3 | 90.1 81.8 | 5.0 3.1 |

Distribution between respondents and nonrespondents is significantly different (*p* < 0.05).

Based on the Area Resource File value for the county in which the facility is located. Growth is based on the population difference between 2006 and 1996. Poverty is based on the percentage of population below the poverty level. Shortage area includes full or partial shortage area for primary care physicians. SOURCE: CDC/NCHS, National Survey of Ambulatory Surgery.

Table 2. Number, percent distribution, and rate of ambulatory surgery visits and all-listed procedures, by facility characteristics and sex: United States, 2006

| | Both | sexes | М | ale | Fer | nale |
|----------------------------------|----------|-------------------|---------------|----------------------------|----------|-------------------|
| Characteristic | Estimate | Standard error | Estimate | Standard error | Estimate | Standard error |
| | | | Number in | thousands | | |
| Total visits | 34,738 | 1,829 | 14,707 | 781 | 20,032 | 1,072 |
| Facility type | | | | | | |
| Hospital-based | 19,869 | 880 | 8,491 | 395 | 11,379 | 518 |
| Freestanding | 14,869 | 1,603 | 6,216 | 674 | 8,653 | 939 |
| Region | | | | | | |
| Northeast | 5,298 | 645 | 2,248 | 273 | 3,051 | 385 |
| Midwest | 8,047 | 610 | 3,378 | 272 | 4,669 | 355 |
| South | 15,931 | 1,540 | 6,749 | 656 | 9,182 | 897 |
| Vest | 5,462 | 427 | 2,331 | 179 | 3,130 | 266 |
| Metropolitan status | | | | | | |
| Metropolitan statistical area | 29,715 | 1,943 | 12,566 | 825 | 17,149 | 1,138 |
| Nonmetropolitan statistical area | 5,024 | 937 | 2,140 | 407 | 2,883 | 537 |
| | | | Percent of | listribution | | |
| Total visits | 100.0 | | 100.0 | | 100.0 | |
| Facility type | | | | | | |
| Hospital-based | 57.2 | 2.9 | 57.7 | 2.9 | 56.8 | 2.9 |
| Freestanding | 42.8 | 2.9 | 42.3 | 2.9 | 43.2 | 2.9 |
| Region | | | | | | |
| Northeast | 15.3 | 1.7 | 15.3 | 1.7 | 15.2 | 1.8 |
| Midwest | 23.2 | 1.8 | 23.0 | 1.8 | 23.3 | 1.8 |
| South | 45.9 | 2.7 | 45.9 | 2.8 | 45.8 | 2.8 |
| West | 15.7 | 1.3 | 15.9 | 1.3 | 15.6 | 1.4 |
| Metropolitan status | | | | | | |
| Metropolitan statistical area | 85.5 | 2.7 | 85.4 | 2.8 | 85.6 | 2.7 |
| Nonmetropolitan statistical area | 14.5 | 2.7 | 14.6 | 2.8 | 14.4 | 2.7 |
| | | | Rate per 1,00 | 00 population ¹ | | |
| Total visits | 116.5 | 6.1 | 100.4 | 5.3 | 132.0 | 7.1 |
| Facility type | | | | | | |
| Hospital-based | 66.6 | 3.0 | 58.0 | 2.7 | 75.0 | 3.4 |
| Freestanding | 49.9 | 5.4 | 42.4 | 4.6 | 57.0 | 6.2 |
| Region | | | | | | |
| Northeast | 96.9 | 11.8 | 84.6 | 10.3 | 108.5 | 13.7 |
| Midwest | 121.7 | 9.2 | 103.8 | 8.3 | 139.0 | 10.6 |
| South | 147.0 | 14.2 | 127.3 | 12.4 | 165.7 | 16.2 |
| West | 79.2 | 6.2 | 67.8 | 5.2 | 90.5 | 7.7 |
| Metropolitan status | | | | | | |
| Metropolitan statistical area | 119.3 | 7.8 | 102.7 | 6.7 | 135.5 | 9.0 |
| Nonmetropolitan statistical area | 99.6 | 18.6 | 85.3 | 16.2 | 113.8 | 21.2 |

See footnotes at end of table.

Table 2. Number, percent distribution, and rate of ambulatory surgery visits and all-listed procedures, by facility characteristics and sex: United States, 2006—Con.

| | Both | sexes | M | ale | Female | | |
|----------------------------------|----------|-------------------|---------------|----------------------------|----------|----------|--|
| Characteristic | Estimate | Standard error | Estimate | Standard error | Estimate | Standard | |
| | | | Number in | thousands | | | |
| Total procedures | 57,062 | 2,865 | 24,328 | 1,225 | 32,734 | 1,703 | |
| Facility type | | | | | | | |
| Hospital-based | 32,320 | 1,344 | 14,051 | 618 | 18,270 | 795 | |
| Freestanding | 24,742 | 2,530 | 10,277 | 1,057 | 14,465 | 1,507 | |
| Region | | | | | | | |
| Northeast | 8,551 | 1,001 | 3,710 | 430 | 4,841 | 597 | |
| Midwest | 13,583 | 1,008 | 5,803 | 452 | 7,780 | 593 | |
| South | 25,509 | 2,371 | 10,755 | 997 | 14,754 | 1,409 | |
| West | 9,420 | 754 | 4,060 | 342 | 5,359 | 456 | |
| Metropolitan status | | | | | | | |
| Metropolitan statistical area | 48,874 | 3,055 | 20,821 | 1,301 | 28,053 | 1,807 | |
| Nonmetropolitan statistical area | 8,189 | 1,497 | 3,507 | 654 | 4,682 | 858 | |
| | | | Percent of | distribution | | | |
| Total procedures | 100.0 | | 100.0 | | 100.0 | | |
| Facility type | | | | | | | |
| Hospital-based | 57.1 | 2.9 | 57.6 | 2.9 | 56.7 | 2.9 | |
| Freestanding | 42.9 | 2.9 | 42.4 | 2.9 | 43.3 | 2.9 | |
| Region | | | | | | | |
| Northeast | 15.2 | 1.8 | 15.3 | 1.8 | 15.2 | 1.8 | |
| Midwest | 23.2 | 1.8 | 22.9 | 1.8 | 23.3 | 1.8 | |
| South | 45.9 | 2.7 | 45.9 | 2.8 | 45.9 | 2.8 | |
| West | 15.7 | 1.3 | 15.8 | 1.3 | 15.7 | 1.4 | |
| Metropolitan status | | | | | | | |
| Metropolitan statistical area | 85.6 | 2.7 | 85.4 | 2.8 | 85.7 | 2.7 | |
| Nonmetropolitan statistical area | 14.4 | 2.7 | 14.6 | 2.8 | 14.3 | 2.7 | |
| | | | Rate per 1,00 | 00 population ¹ | | | |
| Total procedures | 191.3 | 9.6 | 166.0 | 8.4 | 215.8 | 11.2 | |
| Facility type | | | | | | | |
| Hospital-based | 108.4 | 4.5 | 95.9 | 4.2 | 120.4 | 5.2 | |
| Freestanding | 83.0 | 8.5 | 70.1 | 7.2 | 95.3 | 9.9 | |
| Region | | | | | | | |
| Northeast | 156.4 | 18.3 | 139.7 | 16.2 | 172.1 | 21.2 | |
| Midwest | 205.4 | 15.2 | 178.3 | 13.9 | 231.6 | 17.6 | |
| South | 235.3 | 21.9 | 202.9 | 18.8 | 266.3 | 25.4 | |
| West | 136.5 | 10.9 | 118.0 | 9.9 | 154.9 | 13.2 | |
| Metropolitan status | | | | | | | |
| Metropolitan statistical area | 196.3 | 12.3 | 170.1 | 10.6 | 221.7 | 14.3 | |
| Nonmetropolitan statistical area | 162.4 | 29.7 | 139.7 | 26.0 | 184.9 | 33.9 | |

^{...} Category not applicable.

¹Rates were calculated using U.S. Census Bureau 2000-based postcensal estimates of the civilian population as of July 1, 2006. SOURCE: CDC/NCHS, National Survey of Ambulatory Surgery.

Table 3. Number of ambulatory surgery visits by disposition and principal expected source of payment: United States, 2006

| Characteristic | Estimate | Standard error | Percent distribution | Standard error |
|--------------------------------------|----------|-------------------|----------------------|----------------|
| | | Number in | n thousands | |
| All visits | 34,738 | 1,829 | 100 | |
| Disposition of patient | | | | |
| Routine ¹ | 32,356 | 1,792 | 93.1 | 0.9 |
| Observation status | 401 | 66 | 1.2 | 0.2 |
| Inpatient admission | 287 | 43 | 0.8 | 0.1 |
| Surgery cancelled | 79 | 19 | 0.2 | 0.1 |
| Not stated | 944 | 174 | 2.7 | 0.5 |
| Other | * | * | * | * |
| Principal expected source of payment | | | | |
| Private insurance | 18,070 | 1,045 | 53.0 | 1.2 |
| Medicare | 10,996 | 660 | 32.2 | 0.9 |
| Medicaid | 2,204 | 189 | 6.5 | 0.5 |
| Norkers compensation | 627 | 101 | 1.8 | 0.3 |
| Other government insurance | 309 | 63 | 0.9 | 0.2 |
| Self pay | 1,131 | 185 | 3.3 | 0.5 |
| Other | 783 | 170 | 2.3 | 0.5 |

SOURCE: CDC/NCHS, National Survey of Ambulatory Surgery.

Table 4. Distribution of times for surgical visits by ambulatory surgery facility type: United States, 2006

| Calculated time in minutes | Mean | Standard error | 25th percentile | Median | 75th percentile |
|---------------------------------|-------|-------------------|--------------------|--------|--------------------|
| | | | Total | | |
| Total ¹ | 124.5 | 3.6 | 65 | 100 | 153 |
| Operating room ² | 53.7 | 1.4 | 25 | 40 | 65 |
| Surgical ³ | 30.3 | 0.8 | 11 | 20 | 36 |
| Postoperative room ⁴ | 66.9 | 2.0 | 32 | 51 | 81 |
| | | | Hospital-based | | |
| Total ¹ | 146.6 | 5.3 | 84 | 120 | 177 |
| Operating room ² | 61.7 | 1.6 | 33 | 50 | 75 |
| Surgical ³ | 34.2 | 0.9 | 13 | 24 | 43 |
| Postoperative room ⁴ | 79.0 | 3.2 | 25 | 39 | 60 |
| | | | Freestanding | | |
| Total ¹ | 97.7 | 3.8 | 53 | 76 | 120 |
| Operating room ² | 43.2 | 2.0 | 20 | 30 | 50 |
| Surgical ³ | 25.1 | 1.4 | 9 | 15 | 27 |
| Postoperative room ⁴ | 53.1 | 2.3 | 29 | 43 | 66 |

¹Total time was calculated by subtracting the time when the patient entered the operating room from the time the patient left postoperative care.

^{...} Category not applicable.

* Figure does not meet standards of reliability or precision.

¹Patients with routine disposition were those who were discharged to their normal place of residence, i.e., home, nursing home, or prison.

²Operating room time was calculated by subtracting the time when the patient entered the operating room from the time the patient left the operating room.

³Surgical time was calculated by subtracting the time the surgery began from the time the surgery ended. Surgical time typically extends from when the first incision is made until the wound is

⁴Postoperative room time was calculated by subtracting the time when the patient entered postoperative care from the time the patient left postoperative care.

Table 5. Average surgical duration by selected diagnoses and ambulatory surgery facility type: United States, 2006

| Selected diagnoses and ICD-9-CM codes | Average total time (in minutes) ¹ | Standard error | Average surgical time (in minutes) ² | Standard error |
|---|--|-------------------|--|-------------------|
| | | Tota | al | |
| Cataract | 70.2 | 2.7 | 18.1 | 0.7 |
| Benign neoplasm of the colon | 90.3 | 4.1 | 21.8 | 0.7 |
| Diverticula of the intestine | 79.5 | 4.2 | 16.9 | 0.7 |
| ntervertebral disc disorders | 82.9 | 7.2 | 21.1 | 3.0 |
| Hemorrhoids | 86.7 | 4.0 | 18.2 | 0.9 |
| Gastritis and duodenitis | 91.0 | 6.5 | 14.2 | 1.3 |
| Chronic diseases of tonsils and adenoids | 155.2 | 7.9 | 22.5 | 1.0 |
| Otitis media and Eustachian tube disorders | 65.7 | 5.1 | 12.3 | 1.0 |
| Carpal tunnel syndrome | 96.0 | 3.6 | 18.2 | 0.9 |
| nguinal hernia | 169.0 | 6.4 | 49.4 | 1.6 |
| | | Hospital- | based | |
| Cataract | 88.4 | 3.7 | 22.7 | 1.5 |
| Benign neoplasm of the colon | 111.5 | 7.5 | 24.6 | 1.4 |
| Diverticula of the intestine | 102.7 | 5.0 | 19.0 | 1.7 |
| ntervertebral disc disorders | 107.4 | 14.8 | 29.9 | 5.4 |
| Hemorrhoids | 112.0 | 6.6 | 20.7 | 1.3 |
| Sastritis and duodenitis | 111.4 | 7.8 | 17.9 | 1.7 |
| Chronic diseases of tonsils and adenoids | 161.6 | 11.0 | 23.4 | 1.5 |
| Otitis media and Eustachian tube disorders | 75.0 | 4.9 | 13.5 | 1.4 |
| Carpal tunnel syndrome | 111.2 | 5.6 | 19.1 | 1.1 |
| nguinal hernia | 177.2 | 7.2 | 52.0 | 1.8 |
| | | Freesta | nding | |
| Cataract | 57.3 | 2.4 | 14.9 | 0.5 |
| Benign neoplasm of the colon | 77.9 | 3.0 | 20.0 | 0.7 |
| Diverticula of the intestine | 68.3 | 4.0 | 15.9 | 0.7 |
| ntervertebral disc disorders | 61.4 | 5.3 | 12.8 | 2.2 |
| lemorrhoids | 75.1 | 4.0 | 16.9 | 1.3 |
| astritis and duodenitis | 68.9 | 6.6 | 10.0 | 1.0 |
| Chronic diseases of tonsils and adenoids | 148.9 | 10.2 | 20.6 | 0.9 |
| Otitis media and Eustachian tube disorders381–382 | 56.8 | 5.8 | 10.2 | 0.6 |
| Carpal tunnel syndrome | 83.8 | 3.2 | 17.1 | 1.3 |
| nguinal hernia | 145.8 | 7.7 | 40.1 | 2.3 |

NOTE: Procedure categories and code numbers are based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM). SOURCE: CDC/NCHS, National Survey of Ambulatory Surgery.

¹Total time was calculated by subtracting the time when the patient entered the operating room from the time the patient left postoperative care.

²Surgical time was calculated by subtracting the time the surgery began from the time the surgery ended. Surgical time typically extends from when the first incision is made until the wound is closed.

Table 6. Number of ambulatory surgery procedures, by procedure category, sex, and age: United States, 2006

| | | S | Sex | | | Age | | |
|--|--------|--------|--------|-------------------|----------------|----------------|----------------|-------------------|
| Procedure category and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45–64 years | 65–74 years | 75 years and over |
| | | | | Number in | thousands | | | |
| All procedures | 57,062 | 24,328 | 32,734 | 4,034 | 13,691 | 21,369 | 9,622 | 8,345 |
| Operations on the nervous system | 4.106 | 1,670 | 2,436 | *22 | 1,143 | 1,735 | 581 | 625 |
| Injection of agent into spinal canal | 2,703 | 1,159 | 1,544 | * | 745 | 1,093 | 415 | 450 |
| Release of carpal tunnel | 582 | 181 | 401 | * | 146 | 281 | 74 | 81 |
| Operations on the eye | 7.296 | 2.858 | 4,438 | 114 | 307 | 1,741 | 2,329 | 2.805 |
| Operations on eyelids | 537 | 174 | 363 | *32 | 52 | 235 | 106 | 111 |
| Extraction of lens | 3,070 | 1,158 | 1,913 | * | 38 | 611 | 1,078 | 1,339 |
| Insertion of prosthetic lens (pseudophakos) | 2,582 | 987 | 1,595 | * | 33 | 524 | 923 | 1,098 |
| Operations on the ear | 1,723 | 897 | 826 | 1,433 | 138 | 65 | *40 | 46 |
| Myringotomy with insertion of tube | 1,259 | 680 | 579 | 1,185 | * | * | * | * |
| Operations on the nose, mouth, and pharynx | 3,179 | 1,574 | 1,604 | 1,123 | 1,061 | 708 | 178 | 108 |
| Incision, excision, and destruction of nose | 332 | 165 | 167 | * | 163 | 88 | *38 | *21 |
| Turbinectomy | 233 | 121 | 112 | * | 128 | 64 | * | * |
| Repair and plastic operations on the nose | 309 | 161 | 148 | * | 154 | 101 | *27 | * |
| Operations on nasal sinuses | 743 | 378 | 366 | * | 274 | 342 | * | * |
| Tonsillectomy with or without adenoidectomy | 737 | 314 | 423 | 530 | 186 | * | * | _ |
| Adenoidectomy without tonsillectomy | 140 | 83 | 57 | 132 | * | * | _ | _ |
| Operations on the respiratory system | 448 | 227 | 221 | *35 | 70 | 178 | 88 | *78 |
| Bronchoscopy with or without biopsy | 174 | 72 | 102 | * | * | *67 | *43 | * |
| Operations on the cardiovascular system35–39,00.50–00.51,00.53–00.55,00.61–00.66 | 1,395 | 722 | 673 | * | 167 | 613 | 285 | 320 |
| Cardiac catheterization | 492 | 280 | 212 | * | *41 | 238 | 123 | 88 |
| Operations on the digestive system | 14,677 | 6,669 | 8,008 | * | 2.830 | 6,575 | 2,985 | 2,025 |
| Dilation of esophagus | 341 | 140 | 201 | * | *37 | 152 | 83 | 66 |
| Endoscopy of small intestine with or without biopsy | 3,478 | 1,426 | 2,052 | * | 770 | 1,394 | 655 | 551 |
| Endoscopy of large intestine with or without biopsy | 5,806 | 2,481 | 3,325 | * | 779 | 2,933 | 1,239 | 825 |
| Endoscopic polypectomy of large intestine | 1,541 | 882 | 659 | * | 71 | 781 | 461 | 227 |
| Laparoscopic cholecystectomy | 503 | 87 | 416 | * | 229 | 193 | * | * |
| Hernia repair | 925 | 728 | 197 | 73 | 299 | 334 | 136 | 84 |
| Repair of inquinal hernia | 528 | 483 | *45 | 39 | 139 | 188 | 88 | 74 |
| Operations on the urinary system | 1,799 | 946 | 854 | * | 384 | 626 | 371 | 368 |
| Cystoscopy with or without biopsy | 760 | 413 | 347 | * | 150 | 271 | 157 | 174 |
| Operations on the male genital organs | 655 | 655 | | 169 | 153 | 149 | 117 | 67 |
| Operations on the female genital organs | 2,503 | | 2,503 | * | 1,639 | 690 | 109 | *60 |
| Hysteroscopy | 314 | | 314 | _ | 159 | 121 | * | * |
| Dilation and currettage of uterus | 611 | | 611 | _ | 334 | 227 | *29 | * |
| Operations on the musculoskeletal system | 8,439 | 4,082 | 4,357 | 325 | 2,730 | 3,916 | 948 | 519 |
| Partial excision of bone | 466 | 238 | 229 | * | 124 | 238 | 58 | *33 |
| Reduction of fracture | 498 | 311 | 187 | 102 | 216 | 115 | *35 | *29 |
| Injection of therapeutic substance into joint or ligament | 288 | 117 | 171 | * | 68 | 148 | 39 | *28 |
| Removal of implanted devices from bone | 221 | 113 | 108 | 29 | 86 | 61 | * | * |
| Excision and repair of bunion and other toe deformities | 540 | 80 | 460 | * | 132 | 260 | 99 | *43 |
| Arthroscopy of knee | 985 | 516 | 469 | * | 371 | 456 | 109 | *34 |
| Excision of semilunar cartilage of knee | 754 | 422 | 332 | * | 218 | 383 | 106 | *46 |
| Replacement or other repair of knee | 471 | 264 | 207 | * | 217 | 194 | *37 | * |
| Operations on muscle, tendon, fascia, and bursa | 1,570 | 694 | 876 | 67 | 425 | 789 | 190 | 99 |
| | | | | | | | | |

See footnotes at end of table.

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Table 6. Number of ambulatory surgery procedures, by procedure category, sex, and age: United States, 2006—Con.

| | | 5 | Sex | | | Age | | |
|--|-------|-------|--------|-------------------|----------------|----------------|----------------|----------------------|
| Procedure category and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45–64 years | 65–74 years | 75 years and over |
| | | | | Number in | n thousands | | | |
| Operations on the integumentary system | 4,108 | 1,173 | 2,935 | 189 | 1,450 | 1,622 | 463 | 385 |
| Biopsy of breast | 276 | * | 265 | * | 81 | 135 | *29 | * |
| Local excision of lesion of breast (lumpectomy) | 346 | * | 332 | * | 117 | 139 | *54 | * |
| Excision or destruction of lesion or tissue of skin and subcutaneous tissue 86.2–86.4 | 1,291 | 639 | 651 | 118 | 372 | 489 | 156 | 155 |
| Miscellaneous diagnostic and therapeutic procedures and new technologies ¹ 87–99,00 | 6,387 | 2,774 | 3,613 | 287 | 1,542 | 2,609 | 1,051 | 898 |
| Arteriography and angiocardiography using contrast material | 1,095 | 579 | 516 | - | *74 | 479 | 322 | 221 |
| Diagnostic ultrasound | 324 | 160 | 163 | * | 53 | 148 | 71 | 50 |
| Injection or infusion of therapeutic or prophylactic substance | 1,649 | 618 | 1,031 | 69 | 482 | 651 | 221 | 227 |
| Operations on the endocrine system, operations on the hemic and lymphatic system, and obstetrical procedures | 346 | 79 | 267 | * | 77 | 143 | *78 | *41 |

^{*} Figure does not meet standards of reliability or precision.

NOTES: Procedure categories and code numbers are based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM). The standard error (SE) of an estimate can be obtained by multiplying the estimate by the corresponding relative standard error (RSE). The RSE can be obtained by dividing the SE of the rate by the rate in Table 7.

^{...} Category not applicable.

⁻ Quantity zero.

¹ Chapter 00 codes included in this category: 00.01-00.03, 00.09, 00.10-00.18, 00.21-00.25, 00.28-00.29, 00.31-00.35, 00.39, 00.40-00.43, 00.45-00.48, 00.52, 00.74-00.76, and 00.91-00.93.

Table 7. Rate and standard error for the rate of ambulatory surgery procedures, by procedure category, sex, and age: United States, 2006

| | | | Sex | | Age | | | | | |
|---|---------------|--------------|---------|-------------------|----------------------------|----------------|----------------|-------------------|--|--|
| Procedure category and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45-64 years | 65–74 years | 75 years and over | | |
| | | | | Rate per 10,0 | 00 population ¹ | | | | | |
| All procedures | 1,913.4 | 1,660.5 | 2,157.7 | 664.0 | 1,091.8 | 2,856.7 | 5,086.6 | 4,549.4 | | |
| Operations on the nervous system | 137.7 | 114.0 | 160.6 | *3.7 | 91.2 | 232.0 | 307.3 | 340.5 | | |
| Injection of agent into spinal canal | | 79.1 | 101.7 | * | 59.4 | 146.1 | 219.5 | 245.2 | | |
| Release of carpal tunnel | 19.5 | 12.4 | 26.4 | * | 11.6 | 37.5 | 39.0 | 44.2 | | |
| Operations on the eye | 244.7 | 195.1 | 292.5 | 18.8 | 24.4 | 232.7 | 1,231.4 | 1,529.2 | | |
| Operations on eyelids | 18.0 | 11.9 | 23.9 | *5.3 | 4.2 | 31.4 | 56.2 | 60.6 | | |
| Extraction of lens | 103.0 | 79.0 | 126.1 | * | 3.0 | 81.7 | 569.7 | 730.1 | | |
| Insertion of prosthetic lens (pseudophakos) | 86.6 | 67.4 | 105.2 | * | 2.6 | 70.1 | 488.2 | 598.7 | | |
| Operations on the ear | 57.8 | 61.2 | 54.4 | 235.9 | 11.0 | 8.7 | *21.2 | 25.0 | | |
| Myringotomy with insertion of tube | 42.2 | 46.4 | 38.2 | 195.1 | * | * | * | * | | |
| Operations on the nose, mouth, and pharynx | 106.6 | 107.5 | 105.7 | 184.8 | 84.6 | 94.7 | 94.3 | 58.7 | | |
| Incision, excision, and destruction of nose | 11.1 | 11.2 | 11.0 | * | 13.0 | 11.7 | *20.2 | *11.5 | | |
| Turbinectomy | 7.8 | 8.3 | 7.4 | * | 10.2 | 8.6 | * | * | | |
| Repair and plastic operations on the nose | 10.4 | 11.0 | 9.8 | * | 12.3 | 13.5 | *14.4 | * | | |
| Operations on nasal sinuses | 24.9 | 25.8 | 24.1 | * | 21.8 | 45.7 | * | * | | |
| Tonsillectomy with or without adenoidectomy | 24.7 | 21.4 | 27.9 | 87.2 | 14.9 | * | * | _ | | |
| Adenoidectomy without tonsillectomy | 4.7 | 5.6 | 3.8 | 21.8 | * | * | _ | _ | | |
| Operations on the respiratory system | 15.0 | 15.5 | 14.5 | *5.7 | 5.6 | 23.8 | 46.3 | *42.6 | | |
| Bronchoscopy with or without biopsy | 5.8 | 4.9 | 6.8 | * | 3.0 | *9.0 | *22.7 | 42.0 | | |
| Operations on the cardiovascular system | 46.8 | 49.3 | 44.4 | * | 13.3 | 9.0 82.0 | 150.6 | 174.2 | | |
| Cardiac catheterization | 16.5 | 49.3 19.1 | 14.0 | * | *3.2 | 31.9 | 65.0 | 48.0 | | |
| | 492.2 | 455.2 | 527.9 | * | 225.7 | 879.0 | 1,577.8 | 1.104.1 | | |
| Operations on the digestive system | | 9.6 | 13.2 | * | *3.0 | 20.4 | 43.7 | 35.8 | | |
| Dilation of esophagus | 11.4 116.6 | 9.6 97.3 | 135.3 | * | 61.4 | 186.3 | 346.4 | 300.2 | | |
| Endoscopy of small intestine with or without biopsy | 194.7 | 169.4 | 219.2 | * | 62.1 | 392.0 | 655.2 | 449.5 | | |
| Endoscopy of large intestine with or without biopsy | | | | * | | | | | | |
| Endoscopic polypectomy of large intestine | 51.7 | 60.2 | 43.5 | * | 5.7 | 104.4 | 243.8 | 123.8 | | |
| Laparoscopic cholecystectomy | 16.9 | 5.9 | 27.4 | 42.0 | 18.2 | 25.9 | 74.7 | 46.0 | | |
| Hernia repair | 31.0 | 49.7 | 13.0 | 12.0 | 23.8 | 44.6 | 71.7 | 46.0 | | |
| Repair of inguinal hernia | 17.7 | 33.0 | *2.9 | 6.5 | 11.1 | 25.1 | 46.6 | 40.2 | | |
| Operations on the urinary system | 60.3 | 64.5 | 56.3 | * | 30.6 | 83.7 | 195.9 | 200.4 | | |
| Cystoscopy with or without biopsy | 25.5 | 28.2 | 22.9 | | 11.9 | 36.2 | 83.2 | 95.1 | | |
| Operations on the male genital organs | 22.0 | 44.7 | 405.0 | 27.8 | 12.2 | 20.0 | 61.8 | 36.7 | | |
| Operations on the female genital organs | 83.9 | | 165.0 | | 130.7 | 92.2 | 57.4 | *32.7 | | |
| Hysteroscopy | 10.5 | | 20.7 | _ | 12.7 | 16.2 | *45.4 | | | |
| Dilation and currettage of uterus | 20.5 | | 40.2 | - | 26.7 | 30.3 | *15.4 | 000.0 | | |
| Operations on the musculoskeletal system | 283.0 | 278.6 | 287.2 | 53.5 | 217.7 | 523.5 | 501.2 | 283.0 | | |
| Partial excision of bone | 15.6 | 16.2 | 15.1 | | 9.9 | 31.9 | 30.8 | *18.0 | | |
| Reduction of fracture | 16.7 | 21.2 | 12.3 | 16.8 | 17.2 | 15.4 | *18.5 | *16.1 | | |
| Injection of therapeutic substance into joint or ligament | 9.7 | 8.0 | 11.3 | | 5.4 | 19.8 | 20.8 | *15.4 | | |
| Removal of implanted devices from bone | 7.4 | 7.7 | 7.1 | 4.7 | 6.9 | 8.2 | | | | |
| Excision and repair of bunion and other toe deformities | 18.1 | 5.5 | 30.3 | * | 10.5 | 34.7 | 52.3 | *23.3 | | |
| Arthroscopy of knee | 33.0 | 35.2 | 30.9 | * | 29.6 | 61.0 | 57.5 | *18.3 | | |
| Excision of semilunar cartilage of knee | 25.3 | 28.8 | 21.9 | * | 17.4 | 51.2 | 55.8 | *25.3 | | |
| Replacement or other repair of knee | 15.8 | 18.0 | 13.6 | * | 17.3 | 26.0 | *19.3 | * | | |
| Operations on muscle, tendon, fascia, and bursa | 52.7 | 47.4 | 57.7 | 11.1 | 33.9 | 105.5 | 100.4 | 53.9 | | |

See footnotes at end of table.

Table 7. Rate and standard error for the rate of ambulatory surgery procedures, by procedure category, sex, and age: United States, 2006—Con.

| | | S | Sex | | | Age | | |
|--|-------|-------|--------|-------------------|----------------|----------------|----------------|-------------------|
| Procedure category and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45–64 years | 65–74 years | 75 years and over |
| | | | | | 000 population | | | |
| | 407.0 | | | | | | | 0.4.0.0 |
| Operations on the integumentary system | 137.8 | 80.1 | 193.5 | 31.0 | 115.6 | 216.8 | 244.7 | 210.0 |
| Biopsy of breast | 9.3 | | 17.4 | * | 6.5 | 18.1 | *15.5 | * |
| Local excision of lesion of breast (lumpectomy) | 11.6 | | 21.9 | * | 9.3 | 18.6 | *28.5 | * |
| Excision or destruction of lesion or tissue of skin and subcutaneous tissue 86.2–86.4 | 43.3 | 43.6 | 42.9 | 19.5 | 29.7 | 65.4 | 82.4 | 84.7 |
| Miscellaneous diagnostic and therapeutic procedures and new technologies ² 87–99,00 | 214.2 | 189.3 | 238.1 | 47.3 | 122.9 | 348.7 | 555.4 | 489.8 |
| Arteriography and angiocardiography using contrast material | 36.7 | 39.5 | 34.0 | _ | *5.9 | 64.1 | 170.0 | 120.3 |
| Diagnostic ultrasound | 10.9 | 10.9 | 10.8 | * | 4.2 | 19.8 | 37.3 | 27.5 |
| Injection or infusion of therapeutic or prophylactic substance | 55.3 | 42.2 | 68.0 | 11.3 | 38.4 | 87.0 | 116.9 | 123.8 |
| obstetrical procedures | 11.6 | 5.4 | 17.6 | * | 6.1 | 19.1 | *41.2 | *22.5 |
| | | | | Standa | rd error | | | |
| All procedures | 96.08 | 83.60 | 12.28 | 97.08 | 63.03 | 57.53 | 94.68 | 44.44 |
| Operations on the nervous system | 17.34 | 16.01 | 19.84 | *1.08 | 14.22 | 29.91 | 48.07 | 50.84 |
| Injection of agent into spinal canal | 13.95 | 13.27 | 15.79 | * | 11.48 | 23.30 | 42.87 | 41.75 |
| Release of carpal tunnel | 2.08 | 1.55 | 3.01 | * | 1.97 | 5.06 | 6.51 | 9.35 |
| Operations on the eye | 21.89 | 16.48 | 28.18 | 3.38 | 4.11 | 21.73 | 43.04 | 36.08 |
| Operations on eyelids | 1.94 | 1.56 | 3.06 | *1.40 | 0.80 | 5.13 | 8.09 | 9.60 |
| Extraction of lens | 10.08 | 7.10 | 13.39 | * | 0.54 | 9.42 | 68.25 | 67.57 |
| Insertion of prosthetic lens (pseudophakos) | 9.02 | 6.28 | 12.08 | * | 0.49 | 8.58 | 63.85 | 57.88 |
| Operations on the ear | 12.03 | 11.02 | 13.58 | 55.58 | 2.18 | 1.59 | *5.29 | 7.18 |
| Myringotomy with insertion of tube | 9.85 | 10.02 | 10.18 | 48.13 | * | * | * | * |
| Operations on the nose, mouth, and pharynx | 11.65 | 11.20 | 14.28 | 27.05 | 9.52 | 14.98 | 19.57 | 11.69 |
| Incision, excision, and destruction of nose | 1.41 | 1.56 | 1.98 | * | 2.27 | 2.14 | *5.65 | *3.12 |
| Turbinectomy | 1.11 | 1.37 | 1.45 | * | 1.62 | 1.93 | * | * |
| Repair and plastic operations on the nose | 1.17 | 1.58 | 1.24 | * | 1.66 | 2.13 | *3.82 | * |
| Operations on nasal sinuses | 4.05 | 4.07 | 5.49 | * | 4.07 | 11.07 | * | * |
| Tonsillectomy with or without adenoidectomy | 4.15 | 3.52 | 5.17 | 16.93 | 2.15 | * | * | _ |
| Adenoidectomy without tonsillectomy | 0.99 | 1.41 | 0.86 | 4.79 | * | * | _ | _ |
| Operations on the respiratory system | 1.98 | 2.18 | 2.48 | *1.46 | 1.31 | 4.51 | 9.96 | *8.18 |
| Bronchoscopy with or without biopsy | 0.97 | 0.79 | 1.63 | * | * | *2.32 | *6.07 | * |
| Operations on the cardiovascular system35–39,00.50–00.51,00.53–00.55,00.61–00.66 | 5.70 | 6.54 | 5.45 | * | 2.06 | 11.91 | 23.20 | 25.15 |
| Cardiac catheterization | 2.51 | 3.07 | 2.24 | * | *0.84 | 5.78 | 12.17 | 11.18 |
| Operations on the digestive system | 41.96 | 40.08 | 44.77 | * | 20.70 | 78.80 | 60.58 | 0.67 |
| Dilation of esophagus | 1.63 | 1.55 | 2.14 | * | *0.80 | 3.45 | 9.02 | 7.33 |
| Endoscopy of small intestine with or without biopsy | 10.51 | 9.46 | 12.15 | * | 7.33 | 18.78 | 33.36 | 29.48 |
| Endoscopy of large intestine with or without biopsy | 22.20 | 19.94 | 24.76 | * | 10.15 | 43.78 | 88.17 | 56.91 |
| Endoscopic polypectomy of large intestine | 6.35 | 7.51 | 5.76 | * | 1.28 | 12.74 | 38.13 | 15.81 |
| Laparoscopic cholecystectomy | 1.51 | 0.84 | 2.79 | * | 2.25 | 2.98 | * | * |
| Hernia repair | 2.43 | 4.24 | 1.29 | 2.58 | 2.20 | 5.02 | 10.68 | 7.07 |
| Repair of inguinal hernia | 1.48 | 2.87 | *0.56 | 1.17 | 1.39 | 2.94 | 8.53 | 6.97 |
| Operations on the urinary system | 4.93 | 5.64 | 5.43 | * | 4.06 | 9.10 | 24.41 | 23.25 |
| Cystoscopy with or without biopsy | 3.07 | 3.65 | 3.06 | * | 2.33 | 4.82 | 12.46 | 14.65 |
| Operations on the male genital organs | 2.00 | 4.07 | 3.00 | 5.19 | 1.42 | 3.28 | 10.69 | 6.77 |
| Operations on the female genital organs | 7.20 | 4.07 | 14.16 | 3.19 | 11.69 | 9.85 | 11.27 | *8.52 |
| Hysteroscopy | 1.60 | | 3.14 | _ | 2.37 | 2.54 | * | * |
| Dilation and currettage of uterus | 2.17 | | 4.27 | _ | 3.07 | 4.00 | *3.48 | * |
| | | | | | 0.01 | | 5.10 | |

Table 7. Rate and standard error for the rate of ambulatory surgery procedures, by procedure category, sex, and age: United States, 2006—Con.

| | | Sex | | | | Age | | |
|--|-------|-------|--------|-------------------|----------------|----------------|----------------|-------------------|
| Procedure category and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45–64 years | 65–74 years | 75 years and over |
| | | | | Standa | rd error | | | |
| Operations on the musculoskeletal system | 20.48 | 22.08 | 21.76 | 6.97 | 19.73 | 40.98 | 50.78 | 26.47 |
| Partial excision of bone | 1.49 | 1.93 | 1.67 | * | 1.37 | 4.11 | 5.74 | *3.87 |
| Reduction of fracture | 1.68 | 2.44 | 1.39 | 2.21 | 2.31 | 2.67 | *4.88 | *3.33 |
| Injection of therapeutic substance into joint or ligament | 1.18 | 1.33 | 1.61 | * | 1.11 | 3.13 | 3.73 | *3.40 |
| Removal of implanted devices from bone | 0.96 | 1.31 | 1.03 | 1.27 | 1.27 | 1.29 | * | * |
| Excision and repair of bunion and other toe deformities | 2.15 | 1.03 | 3.99 | * | 2.00 | 5.28 | 10.63 | *6.37 |
| Arthroscopy of knee | 3.76 | 4.47 | 3.75 | * | 4.06 | 7.21 | 9.81 | *4.73 |
| Excision of semilunar cartilage of knee | 2.20 | 3.23 | 1.92 | * | 1.98 | 5.07 | 8.15 | *5.24 |
| Replacement or other repair of knee | 1.98 | 2.82 | 1.66 | * | 2.86 | 3.31 | *4.08 | * |
| Operations on muscle, tendon, fascia, and bursa | 5.43 | 3.73 | 8.47 | 2.33 | 4.59 | 13.11 | 15.13 | 9.27 |
| Operations on the integumentary system | 10.37 | 6.97 | 16.81 | 4.23 | 12.81 | 17.18 | 21.88 | 23.69 |
| Biopsy of breast | 1.31 | * | 2.51 | * | 1.24 | 2.99 | *3.94 | * |
| Local excision of lesion of breast (lumpectomy) | 1.23 | * | 2.38 | * | 1.50 | 2.31 | *6.47 | * |
| Excision or destruction of lesion or tissue of skin and subcutaneous tissue86.2–86.4 | 3.79 | 4.51 | 4.12 | 2.94 | 3.54 | 6.42 | 14.18 | 13.47 |
| Miscellaneous diagnostic and therapeutic procedures and new technologies ² 87–99,00 | 17.83 | 16.98 | 20.55 | 5.91 | 16.30 | 32.02 | 51.48 | 50.44 |
| Arteriography and angiocardiography using contrast material | 5.60 | 6.61 | 5.21 | _ | *1.61 | 10.69 | 30.15 | 25.75 |
| Diagnostic ultrasound | 1.77 | 1.80 | 2.13 | * | 0.95 | 3.87 | 8.82 | 6.49 |
| Injection or infusion of therapeutic or prophylactic substance | 7.85 | 5.90 | 10.94 | 2.04 | 7.75 | 14.67 | 18.02 | 16.65 |
| Operations on the endocrine system, operations on the hemic and lymphatic system, and | | | | | | | | |
| obstetrical procedures | 1.16 | 0.78 | 1.98 | * | 1.07 | 2.54 | *7.97 | *5.08 |

^{*} Figure does not meet standards of reliability or precision.

NOTES: Procedure categories and code numbers are based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM). The relative standard error (RSE) can be obtained by dividing the standard error (SE) of the rate by the rate. The SE of a number in Table 6 can be obtained by multiplying the RSE by the estimate.

⁻ Quantity zero.

^{...} Category not applicable.

¹Rates were calculated using U.S. Census Bureau 2000-based postcensal estimates of the civilian population as of July 1, 2006.

 $^{^{2}\}text{Chapter 00 codes included in this category: }00.01-00.03,\ 00.09,\ 00.10-00.18,\ 00.21-00.25,\ 00.28-00.29,\ 00.31-00.35,\ 00.39,\ 00.40-00.43,\ 00.45-00.48,\ 00.52,\ 00.74-00.76,\ 00.91-00.93.$

Table 8. Number of ambulatory surgery visits by first-listed diagnosis, sex, and age: United States, 2006

| | | S | Sex | | | Age | | |
|---|--------|--------|--------|-------------------|----------------|----------------|----------------|----------------------|
| Category of first-listed diagnosis and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45–64 years | 65–74 years | 75 years and over |
| | | | | Number in | thousands | | | |
| All conditions | 34,738 | 14,707 | 20,032 | 2,471 | 8,351 | 12,948 | 5,887 | 5,081 |
| | • | , | , | z,+/ i | * | , | 5,007 | 5,001 |
| Infectious and parasitic diseases | 145 | 64 | 81 | | | *42 | | |
| Neoplasms | 3,285 | 1,626 | 1,659 | 69 | 381 | 1,474 | 772 | 589 |
| Malignant neoplasms | 1,173 | 534 | 639 | * | 117 | 446 | 285 | 314 |
| Malignant neoplasm of skin | 303 | 164 | 139 | * | 34 | 87 | 59 | 123 |
| Malignant neoplasm of breast | 235 | | 234 | _ | *35 | 121 | *52 | |
| Benign neoplasms | 2,000 | 1,039 | 961 | 53 | 241 | 985 | 468 | 253 |
| Benign neoplasm of colon | 1,389 | 785 | 604 | - | 90 | 730 | 380 | 189 |
| Lipoma | 126 | 61 | 64 | * | *23 | 76 | | * |
| Endocrine, nutritional and metabolic diseases, and immunity disorders | 266 | 74 | 192 | * | 91 | 103 | *34 | * |
| Diseases of the nervous system and sense organs | 5,308 | 2,114 | 3,194 | 729 | 412 | 1,243 | 1,317 | 1,607 |
| Carpal tunnel syndrome | 552 | 171 | 381 | | 138 | 263 | 66 | 86 |
| Cataract | 3,009 | 1,135 | 1,874 | * | 34 | 592 | 1,066 | 1,313 |
| Disorders of the eyelid | 174 | 71 | 103 | * | *12 | 58 | 45 | 48 |
| Otitis media and Eustachian tube disorders | 623 | 324 | 299 | 577 | * | * | * | * |
| Diseases of the circulatory system | 1,736 | 832 | 904 | * | 256 | 860 | 353 | 264 |
| Heart disease | 540 | 318 | 222 | * | *41 | 241 | 131 | 128 |
| Hemorrhoids | 715 | 287 | 427 | * | 151 | 411 | 108 | *45 |
| Diseases of the respiratory system | 1,294 | 591 | 703 | 572 | 396 | 207 | 81 | *38 |
| Deviated nasal septum | 134 | 77 | 57 | * | 75 | 42 | * | * |
| Chronic sinusitis | 141 | 82 | 59 | * | 52 | 56 | * | * |
| Chronic disease of tonsils and adenoids | 680 | 273 | 407 | 496 | 172 | * | _ | _ |
| Diseases of the digestive system | 6,808 | 3,081 | 3,727 | 326 | 1,597 | 2,688 | 1,242 | 955 |
| Diseases of teeth and supporting structures | 221 | 114 | 107 | 171 | * | * | * | * |
| Diseases of esophagus | 1,132 | 531 | 601 | * | 255 | 447 | 224 | 177 |
| Gastritis and duodenitis | 703 | 228 | 475 | * | 170 | 257 | 146 | 118 |
| Hernia | 1,141 | 764 | 377 | 64 | 335 | 418 | 174 | 149 |
| Inguinal hernia | 515 | 470 | *45 | 33 | 131 | 189 | 91 | 71 |
| Noninfectious enteritis and colitis | 228 | 102 | 126 | * | 81 | 87 | *34 | * |
| Diverticula of intestine | 1,135 | 513 | 622 | * | *59 | 522 | 306 | 248 |
| Cholelithiasis | 376 | *64 | 312 | * | 178 | 130 | * | * |
| Diseases of the genitourinary system | 2,932 | 847 | 2,085 | 115 | 1,143 | 1,050 | 358 | 267 |
| Calculus of kidney and ureter | 381 | 178 | 204 | * | 144 | 165 | *40 | *31 |
| Benign mammary dysplasias | 94 | _ | 94 | _ | *35 | *45 | * | * |
| Lump or mass in breast | 198 | * | 191 | * | 83 | 85 | * | * |
| Disorders of menstruation and other abnormal vaginal bleeding | 481 | | 481 | _ | 250 | 201 | * | * |
| Complications of pregnancy, childbirth, and the puerperium | 322 | | 322 | _ | 315 | * | _ | _ |
| Abortion and ectopic and molar pregnancy | 260 | | 260 | _ | 253 | * | _ | _ |
| Diseases of the skin and subcutaneous tissue | 631 | 292 | 339 | 56 | 224 | 233 | * | 49 |
| Sebaceous cyst | 134 | 69 | 65 | * | *44 | 53 | * | * |
| Diseases of the musculoskeletal system and connective tissue | 4,523 | 1,875 | 2,648 | 67 | 1,336 | 2,035 | 599 | 486 |
| Arthropathies and related disorders | 809 | 378 | 431 | * | 276 | 378 | 89 | 52 |
| Internal derangement of knee | 321 | 177 | 144 | * | 116 | 150 | *33 | * |
| Intervertebral disc disorders | 861 | 404 | 456 | _ | 312 | 389 | 93 | 67 |
| Lumbago | 156 | 64 | 91 | _ | 35 | 57 | 31 | 33 |
| Rheumatism, excluding back | 968 | 382 | 586 | *26 | 287 | 484 | 114 | 57 |
| Acquired deformities of toe | 287 | 58 | 229 | | 74 | 121 | 61 | *28 |

Table 8. Number of ambulatory surgery visits by first-listed diagnosis, sex, and age: United States, 2006—Con.

| | | Sex | | Age | | | | | |
|---|-------|-------|--------|-------------------|----------------|----------------|----------------|-------------------|--|
| Category of first-listed diagnosis and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45–64 years | 65–74 years | 75 years and over | |
| Congenital anomalies | 479 | 184 | * | 132 | 126 | * | * | * | |
| Symptoms, signs, and ill-defined conditions | 1,390 | 548 | 842 | * | 403 | 520 | 185 | 147 | |
| Abdominal pain | 167 | 51 | 116 | * | 53 | 71 | * | * | |
| Injury and poisoning | 2,230 | 1,255 | 976 | 169 | 777 | 848 | 270 | 166 | |
| Fractures | 513 | 321 | 192 | 102 | 237 | 107 | *32 | *35 | |
| Current tear of medical cartilage or meniscus of knee | 424 | 253 | 171 | * | 120 | 231 | 53 | *20 | |
| Supplementary classifications | 3,134 | 1,245 | 1,890 | 74 | 778 | 1,406 | 503 | 373 | |
| Visit for sterilization | 292 | 50 | 242 | * | 263 | * | _ | _ | |
| Diseases of the blood and blood-forming organs, mental disorders, and certain | | | | | | | | | |
| conditions originating in the perinatal period | 255 | 80 | 174 | * | *47 | 88 | *47 | *62 | |
| Anemias | 189 | *58 | 131 | * | * | *61 | *40 | *62 | |

^{*} Figure does not meet standards of reliability or precision.

NOTES: Diagnostic categories and code numbers are based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM). The standard error (SE) of an estimate can be obtained by multiplying the estimate by the corresponding relative standard error (RSE). The RSE can be obtained by dividing the SE of the rate by the rate in Table 9.

Quantity zero.

^{...} Category not applicable.

Table 9. Rate and standard error for the rate of ambulatory surgery visits by first-listed diagnosis, sex, and age: United States, 2006

| | | Sex | | Age | | | | | |
|---|-------------|---------|---------|-------------------|----------------|----------------|----------------|----------------------|--|
| Category of first-listed diagnosis and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45–64 years | 65–74 years | 75 years and over | |
| | | | | Rate per 10,00 | | | | | |
| All conditions | 1,164.9 | 1,003.8 | 1,320.4 | 406.7 | 666.0 | 1,731.0 | 3,111.9 | 2,769.8 | |
| Infectious and parasitic diseases | 4.9 | 4.4 | 5.4 | * | * | *5.6 | * | * | |
| 1 | 110.2 | 111.0 | 109.4 | 11.4 | 30.4 | 197.0 | 408.2 | 320.9 | |
| Neoplasms | | | 42.1 | * | 9.3 | | 150.9 | | |
| Malignant neoplasms | 39.3 | 36.4 | 9.2 | * | 9.3 2.7 | 59.6 | | 171.1 | |
| Malignant neoplasm of skin | 10.2 7.9 | 11.2 | | | *2.8 | 11.6 | 31.2 | 67.0 | |
| Malignant neoplasm of breast | | 70.0 | 15.4 | - 0.7 | | 16.1 | *27.4 | 107.7 | |
| Benign neoplasms | 67.1 | 70.9 | 63.3 | 8.7 | 19.2 | 131.7 | 247.3 | 137.7 | |
| Benign neoplasm of colon | 46.6 | 53.6 | 39.8 | _ | 7.1 | 97.6 | 200.9 | 103.1 | |
| Lipoma | 4.2 | 4.2 | 4.2 | _ | *1.8 | 10.2 | *** | | |
| Endocrine, nutritional and metabolic diseases, and immunity disorders | 8.9 | 5.1 | 12.7 | | 7.3 | 13.8 | *18.2 | | |
| Diseases of the nervous system and sense organs | 178.0 | 144.3 | 210.5 | 120.1 | 32.8 | 166.1 | 696.1 | 876.3 | |
| Carpal tunnel syndrome | 18.5 | 11.7 | 25.1 | _ | 11.0 | 35.1 | 35.1 | 46.6 | |
| Cataract | 100.9 | 77.5 | 123.5 | * | 2.7 | 79.2 | 563.7 | 715.6 | |
| Disorders of the eyelid | 5.8 | 4.8 | 6.8 | * | *0.9 | 7.7 | 24.0 | 26.0 | |
| Otitis media and Eustachian tube disorders | 20.9 | 22.1 | 19.7 | 95.0 | * | * | * | * | |
| Diseases of the circulatory system | 58.2 | 56.8 | 59.6 | * | 20.4 | 115.0 | 186.8 | 144.1 | |
| Heart disease | 18.1 | 21.7 | 14.7 | * | *3.2 | 32.2 | 69.2 | 69.7 | |
| Hemorrhoids | 24.0 | 19.6 | 28.2 | * | 12.0 | 54.9 | 57.1 | *24.3 | |
| Diseases of the respiratory system | 43.4 | 40.3 | 46.3 | 94.2 | 31.5 | 27.7 | 42.6 | *20.9 | |
| Deviated nasal septum | 4.5 | 5.3 | 3.8 | * | 6.0 | 5.6 | * | * | |
| Chronic sinusitis | 4.7 | 5.6 | 3.9 | * | 4.1 | 7.5 | * | * | |
| Chronic disease of tonsils and adenoids | 22.8 | 18.6 | 26.8 | 81.7 | 13.7 | * | _ | _ | |
| Diseases of the digestive system | 228.3 | 210.3 | 245.7 | 53.6 | 127.4 | 359.3 | 656.7 | 520.6 | |
| Diseases of teeth and supporting structures | 7.4 | 7.8 | 7.1 | 28.1 | * | * | * | * | |
| Diseases of esophagus | 37.9 | 36.2 | 39.6 | * | 20.3 | 59.8 | 118.2 | 96.5 | |
| Gastritis and duodenitis | 23.6 | 15.5 | 31.3 | * | 13.6 | 34.3 | 77.0 | 64.4 | |
| Hernia | 38.3 | 52.1 | 24.9 | 10.6 | 26.7 | 55.8 | 92.2 | 81.4 | |
| Inguinal hernia | 17.3 | 32.1 | *3.0 | 5.4 | 10.5 | 25.3 | 48.0 | 38.9 | |
| Noninfectious enteritis and colitis | 7.6 | 6.9 | 8.3 | * | 6.4 | 11.7 | *18.2 | 30.9 | |
| | 38.1 | | | * | | | | 125.0 | |
| Diverticula of intestine | | 35.0 | 41.0 | * | *4.7 | 69.8 | 161.7 | 135.0 | |
| Cholelithiasis | 12.6 | *4.4 | 20.6 | 40.0 | 14.2 | 17.4 | 400.4 | 445.5 | |
| Diseases of the genitourinary system | 98.3 | 57.8 | 137.4 | 18.9 | 91.1 | 140.4 | 189.1 | 145.5 | |
| Calculus of kidney and ureter | 12.8 | 12.1 | 13.4 | * | 11.5 | 22.0 | *21.2 | *16.8 | |
| Benign mammary dysplasias | 3.2 | | 6.2 | | *2.8 | *6.0 | * | * | |
| Lump or mass in breast | 6.6 | * | 12.6 | * | 6.6 | 11.4 | * | * | |
| Disorders of menstruation and other abnormal vaginal bleeding | 16.1 | | 31.7 | _ | 20.0 | 26.9 | * | * | |
| Complications of pregnancy, childbirth, and the puerperium | 10.8 | | 21.2 | _ | 25.1 | * | _ | - | |
| Abortion and ectopic and molar pregnancy | 8.7 | | 17.1 | _ | 20.2 | * | _ | _ | |
| Diseases of the skin and subcutaneous tissue | 21.2 | 19.9 | 22.3 | 9.3 | 17.9 | 31.2 | * | 27.0 | |
| Sebaceous cyst | 4.5 | 4.7 | 4.3 | * | *3.5 | 7.1 | * | * | |
| Diseases of the musculoskeletal system and connective tissue | 151.7 | 128.0 | 174.6 | 11.0 | 106.5 | 272.1 | 316.9 | 264.7 | |
| Arthropathies and related disorders | 27.1 | 25.8 | 28.4 | * | 22.0 | 50.6 | 46.9 | 28.3 | |
| Internal derangement of knee | 10.8 | 12.1 | 9.5 | * | 9.2 | 20.0 | *17.2 | * | |
| Intervertebral disc disorders | 28.9 | 27.6 | 30.1 | _ | 24.9 | 52.0 | 49.1 | 36.4 | |
| Lumbago | 5.2 | 4.4 | 6.0 | _ | 2.8 | 7.6 | 16.6 | 17.8 | |
| Rheumatism, excluding back | 32.5 | 26.1 | 38.6 | *4.2 | 22.9 | 64.7 | 60.5 | 31.1 | |
| Acquired deformities of toe | 9.6 | 3.9 | 15.1 | * | 5.9 | 16.2 | 32.2 | *15.5 | |

Table 9. Rate and standard error for the rate of ambulatory surgery visits by first-listed diagnosis, sex, and age: United States, 2006—Con.

| | | S | Sex | | | Age | | |
|--|-------|-------|--------|-------------------|----------------------------|----------------|----------------|-------------------|
| Category of first-listed diagnosis and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45-64 years | 65–74 years | 75 years and over |
| | | | | Rate per 10,00 | 00 population ¹ | | | |
| Congenital anomalies | 16.1 | 12.6 | * | 21.7 | 10.0 | * | * | * |
| Symptoms, signs, and ill-defined conditions | 46.6 | 37.4 | 55.5 | * | 32.2 | 69.5 | 97.7 | 80.3 |
| Abdominal pain | 5.6 | 3.5 | 7.7 | * | 4.2 | 9.4 | * | * |
| Injury and poisoning | 74.8 | 85.6 | 64.3 | 27.9 | 62.0 | 113.4 | 142.6 | 90.4 |
| Fractures | 17.2 | 21.9 | 12.7 | 16.8 | 18.9 | 14.3 | *17.0 | *19.1 |
| Current tear of medical cartilage or meniscus of knee | 14.2 | 17.3 | 11.3 | * | 9.5 | 30.9 | 28.0 | *10.7 |
| Supplementary classifications | 105.1 | 84.9 | 124.6 | 12.2 | 62.1 | 187.9 | 265.9 | 203.4 |
| Visit for sterilization | 9.8 | 3.4 | 16.0 | * | 20.9 | * | 200.9 | 203.4 |
| Diseases of the blood and blood-forming organs, mental disorders, and certain conditions | 3.0 | 5.4 | 10.0 | | 20.9 | | _ | _ |
| originating in the perinatal period | 8.5 | 5.5 | 11.5 | * | *3.8 | 11.8 | *25.1 | *33.8 |
| Anemias | 6.3 | *4.0 | 8.6 | * | * | *8.2 | *21.1 | *33.8 |
| 200 | 0.0 | | 0.0 | Ctondo | | 0.2 | | 00.0 |
| | | | | Standa | a error | | | |
| All conditions | 61.32 | 53.33 | 70.69 | 54.26 | 35.76 | 0.68 | 95.86 | 56.70 |
| Infectious and parasitic diseases | 0.90 | 0.85 | 1.24 | * | * | *1.37 | * | * |
| Neoplasms | 7.96 | 8.89 | 7.90 | 1.94 | 2.75 | 16.81 | 39.52 | 25.97 |
| Malignant neoplasms | 2.76 | 3.20 | 3.01 | * | 1.22 | 5.11 | 15.04 | 18.58 |
| Malignant neoplasm of skin | 1.26 | 1.60 | 1.21 | * | 0.61 | 1.92 | 5.43 | 13.56 |
| Malignant neoplasm of breast | 0.77 | * | 1.52 | _ | *0.76 | 2.17 | *5.07 | * |
| Benign neoplasms | 6.27 | 7.19 | 6.04 | 1.55 | 2.18 | 13.86 | 31.43 | 14.94 |
| Benign neoplasm of colon | 5.42 | 6.13 | 5.18 | _ | 1.68 | 12.00 | 28.25 | 12.22 |
| Lipoma | 0.61 | 0.84 | 0.84 | * | *0.46 | 1.93 | * | * |
| Endocrine, nutritional and metabolic diseases, and immunity disorders | 1.10 | 0.84 | 1.76 | * | 1.38 | 2.07 | *4.00 | * |
| Diseases of the nervous system and sense organs | 13.69 | 10.58 | 17.50 | 22.75 | 3.62 | 13.98 | 75.05 | 75.91 |
| Carpal tunnel syndrome | 2.02 | 1.51 | 2.92 | | 1.95 | 4.87 | 6.23 | 9.54 |
| Cataract | 9.90 | 6.98 | 13.19 | * | 0.50 | 9.24 | 67.68 | 66.28 |
| Disorders of the eyelid | 0.65 | 0.76 | 0.88 | * | *0.25 | 1.34 | 4.50 | 4.36 |
| Otitis media and Eustachian tube disorders | 4.19 | 3.94 | 4.65 | 20.45 | * | * | * | * |
| Diseases of the circulatory system | 5.11 | 6.22 | 5.23 | * | 2.71 | 11.07 | 22.02 | 19.84 |
| Heart disease | 2.68 | 3.57 | 2.37 | * | *0.86 | 5.61 | 12.87 | 13.80 |
| Hemorrhoids | 3.16 | 3.20 | 3.61 | * | 2.39 | 7.12 | 9.11 | *5.26 |
| Diseases of the respiratory system | 5.73 | 5.15 | 6.92 | 20.07 | 3.55 | 4.41 | 7.87 | *5.32 |
| Deviated nasal septum | 0.66 | 0.92 | 0.84 | * | 1.17 | 1.37 | * | * |
| Chronic sinusitis | 0.71 | 1.00 | 0.84 | * | 0.85 | 1.66 | * | * |
| Chronic disease of tonsils and adenoids | 4.48 | 3.48 | 5.71 | 18.27 | 2.03 | * | _ | _ |
| Diseases of the digestive system | 18.04 | 16.10 | 20.74 | 8.11 | 11.77 | 31.61 | 64.45 | 47.47 |
| Diseases of teeth and supporting structures | 1.21 | 1.38 | 1.35 | 4.99 | * | * | * | * |
| Diseases of esophagus | 4.31 | 4.28 | 4.86 | * | 2.81 | 7.88 | 17.63 | 12.02 |
| Gastritis and duodenitis | 3.12 | 2.19 | 4.38 | * | 2.43 | 4.92 | 13.40 | 11.48 |
| Hernia | 3.38 | 4.71 | 2.88 | 2.33 | 2.43 | 5.97 | 11.16 | 11.74 |
| Inguinal hernia | 1.58 | 3.09 | *0.56 | 1.13 | 1.33 | 3.49 | 8.56 | 6.92 |
| Noninfectious enteritis and colitis | 1.42 | 1.38 | 2.11 | * | 1.68 | 2.28 | *4.54 | * |
| Diverticula of intestine | 5.25 | 6.01 | 5.21 | * | *1.03 | 12.67 | 22.33 | 19.19 |
| Cholelithiasis | 1.20 | *0.71 | 2.22 | * | 1.03 | 2.42 | دد.ن * | 13.13 |
| | | | | 2.46 | 5.70 | | 20.19 | 19.20 |
| Diseases of the genitourinary system | 5.71 | 4.23 | 8.89 | 3.46 | | 10.17 | 20.18 | 18.20 |
| Calculus of kidney and ureter | 1.32 | 1.54 | 1.60 | - | 1.95 | 2.73 | *4.20 | *4.63 |
| Benign mammary dysplasias | 0.61 | * | 1.21 | * | *0.69 | *1.48 | * | * |
| · | 1.07 | | 2.04 | | 1.22 | 2.57 | * | * |
| Disorders of menstruation and other abnormal vaginal bleeding | 1.90 | _ | 3.73 | _ | 2.59 | 3.25 | ^ | • |

Table 9. Rate and standard error for the rate of ambulatory surgery visits by first-listed diagnosis, sex, and age: United States, 2006—Con.

| | | Sex | | | | | | |
|--|-------|-------|--------|-------------------|----------------|----------------|----------------|----------|
| Category of first-listed diagnosis and ICD-9-CM code | Total | Male | Female | Under 15 years | 15–44 years | 45–64 years | 65–74 years | 75 years |
| | | | | Standa | ard error | | | |
| Complications of pregnancy, childbirth, and the puerperium | 1.35 | _ | 2.65 | _ | 3.17 | * | _ | _ |
| Abortion and ectopic and molar pregnancy | 1.27 | _ | 2.50 | _ | 2.99 | * | _ | _ |
| Diseases of the skin and subcutaneous tissue | 3.02 | 3.02 | 4.06 | 2.04 | 2.41 | 7.03 | * | 5.30 |
| Sebaceous cyst | 0.69 | 1.11 | 0.77 | * | *0.77 | 1.44 | * | * |
| Diseases of the musculoskeletal system and connective tissue | 11.91 | 11.38 | 13.53 | 1.64 | 10.18 | 21.94 | 28.02 | 32.52 |
| Arthropathies and related disorders | 2.96 | 3.44 | 3.01 | * | 3.58 | 5.37 | 6.84 | 4.84 |
| Internal derangement of knee | 1.79 | 2.69 | 1.36 | * | 2.22 | 3.04 | *4.09 | * |
| Intervertebral disc disorders | 4.49 | 4.23 | 5.10 | _ | 5.40 | 7.26 | 9.32 | 6.28 |
| Lumbago | 0.93 | 0.95 | 1.18 | _ | 0.80 | 1.51 | 4.55 | 4.40 |
| Rheumatism, excluding back | 2.26 | 2.23 | 3.08 | *0.97 | 2.12 | 5.56 | 7.55 | 5.40 |
| Acquired deformities of toe | 1.35 | 0.81 | 2.21 | * | 1.21 | 2.78 | 8.32 | *3.65 |
| Congenital anomalies | 4.79 | 2.66 | * | 3.51 | 2.75 | * | * | * |
| Symptoms, signs, and ill-defined conditions | 7.79 | 6.81 | 9.04 | * | 4.91 | 12.20 | 15.95 | 11.22 |
| Abdominal pain | 0.95 | 0.71 | 1.49 | * | 0.89 | 2.16 | * | * |
| Injury and poisoning | 5.15 | 6.22 | 5.27 | 3.51 | 5.05 | 8.65 | 20.49 | 11.84 |
| Fractures | 1.49 | 2.23 | 1.31 | 2.23 | 2.20 | 2.51 | *4.74 | *4.17 |
| Current tear of medical cartilage or meniscus of knee | 1.58 | 2.46 | 1.28 | * | 1.54 | 3.80 | 5.29 | *2.77 |
| Supplementary classifications | 8.88 | 8.70 | 10.44 | 2.06 | 5.93 | 19.34 | 31.05 | 24.27 |
| Visit for sterilization | 1.15 | 0.52 | 2.20 | * | 2.43 | * | _ | _ |
| Diseases of the blood and blood-forming organs, mental disorders, and certain conditions | | | | | | | | |
| originating in the perinatal period | 1.19 | 1.12 | 1.71 | * | *0.74 | 2.78 | *6.55 | *7.27 |
| Anemias | 1.01 | *0.93 | 1.42 | * | * | *2.09 | *5.94 | *7.27 |

^{*} Figure does not meet standards of reliability or precision.

NOTES: Diagnostic categories and code numbers are based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM). The relative standard error (RSE) can be obtained by dividing the standard error (SE) of the rate by the rate. The SE of a number in Table 8 can be obtained by multiplying the RSE by the estimate.

⁻ Quantity zero.

^{...} Category not applicable.

¹Rates were calculated using U.S. Census Bureau 2000-based postcensal estimates of the civilian population as of July 1, 2006.

Technical Notes

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| | | E. MEDICAL INFOR | MOTTAN | | | | |
|---------------------|---|---|--------------|--|----------|-----------------|----------------------------|
| 16. FINAL | DIAGNOSES (Industrig E-code diagnoses) - No | arsitive description | | | | 101 | Optional - D-9-OM Godes |
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| Other Additional | | | | | | 11 | |
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| b. Did | they reach the patient? If yes. | | PROOF | | -0 | :0 | |
| (1) | What was learned from this follow-up? (ii Patient had a question Patient had no poblems | | | | | | |
| | ↓ Corne back to | | -01 | Nort to an emergen Vax admitted to the Other – Flease spec | hospital | nt | |
| | 3 Nothing 3 Unknown | | | | | | |
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| 100 | | | | | | | |
| 20. Compl | olad by | 21, Done | | OFFICE F | R code | | |

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