Healthy People 2010 Operational Definition

14-18. Reduce the number of courses of antibiotics for ear infections for young children.

National Data Sources National Ambulatory Medical Care Survey (NAMCS), CDC, NCHS; National Hospital Ambulatory Medical Care Survey (NHAMCS), CDC, NCHS. State Data Source Not identified. **Healthy People 2000** Adapted from 20.9 (Immunization and Infectious **Objective** Diseases). Changes since the Revised baseline (see Comments). 2000 Publication Revised target (see Comments). Measure Rate per 100 children (2-year average). Baseline (Year) 69 (1996-97) **Target** 56 **Target-Setting Method** 19 percent improvement. For a discussion of target-setting methods, see Part A, section 4. Numerator Number of antibiotic courses ordered, supplied, administered, or continued at a specific visit for children under age 5 years diagnosed with an ear infection (ICD-9-CM codes 381.0, 381.4, 382.0, 382.4, or 382.9). Denominator Number of children under age 5 years. **Population Targeted** U.S. civilian, noninstitutionalized population. **Questions Used to** From the 1996-97 National Ambulatory Medical Obtain the National Care Survey/National Hospital Ambulatory Medical **Baseline Data** Care Survey: Physician's diagnosis for this visit. As specifically as possible, list diagnoses related to this visit including chronic conditions (e.g. depression, obesity, asthma,

etc.).

Primary diagnosis: _____

Other: _____

Other: _____

- Medications/injections. List names of up to 6 medications that were ordered, supplied, administered, or continued during this visit. Include R_X and OTC medications, immunizations, allergy shots, and anesthetics.
 - None
- Check the box next to drug name if it is from the patient's insurance formulary list. Check here if NO drugs are from a formulary list

1		
2.		
3.		
4.		
5. ¯		
6		

Expected Periodicity

Biennial.

Comments

The number of courses of antibiotics for ear infections among young children (and for the sole diagnosis of the common cold among all ages) are the sum of cases reported by NAMCS and NHAMCS that are listed as any diagnosis (including the primary diagnosis). See Part A, section 8 for a discussion of the Clinical Modification to the International Classification of Diseases (ICD-9-CM).

The original baseline of 108 per 100 children was revised to 69 per 100as the result of changes in methodology. The target was proportionally adjusted from 88 per 100 children to 56 per 100 to reflect the revised baseline using the original target-setting method.

This objective differs from Healthy People 2000 objective 20.9, which tracked restricted activity days due to ear infections among children aged 4 years and under using the National Health Interview Survey (NHIS), CDC, NCHS.

For some measures, data do not meet the criteria for statistical reliability, data quality, or confidentiality and have been suppressed. Information on suppression of data for the major Healthy People 2010 data systems has been published in a *Healthy People Statistical Note.*¹

See Part C for descriptions of NHAMCS and Appendix A for focus area contact information.

References

1. Klein, R.J.; Proctor, S.E.; Boudreault, M.A.; Turczyn, K.M. Healthy People 2010 Criteria for Data Suppression. *Statistical Notes* No. 24. Hyattsville, MD: National Center for Health Statistics. 2002.

Operational Definition: Objective 14-18