Healthy People 2010 Operational Definition

19-17. Increase the proportion of physician office visits made by patients with a diagnosis of cardiovascular disease, diabetes, or hyperlipidemia that include counseling or education related to diet and nutrition.

National Data Source National Ambulatory Medical Care Survey

None.

(NAMCS), CDC, NCHS.

State Data Source Not identified.

Healthy People 2000

Objective

Measure

Adapted from 2.21 (Nutrition).

Changes since the

2000 Publication

Percent (age adjusted--see Comments).

Baseline (Year) 42 (1997)

Target 75

Target-Setting Method Better than the best racial/ethnic subgroup.

For a discussion of target-setting methods, see Part

A, section 4.

Numerator Number of visits by ambulatory patients aged 20

years and older to non-Federal physicians in office-based practice with diagnosis of cardiovascular disease (ICD-9-CM codes 391-392.0, 393-398, 401, 402, 404, 410-416, 420-429), diabetes mellitus (ICD-9-CM code 250), or hyperlipidemia (ICD-9-CM codes 272.0-272.4), in which diet and nutrition counseling or education was ordered or provided.

Denominator Number of visits by ambulatory patients aged 20

years and older to non-Federal physicians in officebased practice with diagnosis of cardiovascular disease, diabetes mellitus, or hyperlipidemia (as

defined above).

Population Targeted U.S. civilian, noninstitutionalized population.

Questions Used to Obtain the National Baseline Data From the 1997 National Ambulatory Medical Care

Survey patient record:

[Item 16:]

Physician's diagnoses for this visit -- as specifically as possible, list diagnose related to this visit including chronic conditions (e.g., depression, obesity, asthma, etc.) [Up to three diagnoses may be reported.]

[Item 18:]

Therapeutic and preventive services -- check all ordered or provided at this visit. Exclude Medications:

[Under the subheading "Counseling/education" a check box is provided for "Diet/Nutrition."]

Expected Periodicity

Periodic.

Comments

Because certain questions in the NAMCS are rotated, update estimates may be available on a periodic rather than an annual basis.

See Part A, section 8 for a discussion of the International Classification of Diseases and ICD-9-CM.

Data area age adjusted to the 2000 standard population using the age groups 20-44, 45-64, and 65 years and over. Age-adjusted rates are weighted sums of age-specific rates. For a discussion of age adjustment, see Part A, section 7.

This objective differs from Healthy People 2000 objective 2.21, which was measured by the 1992 Primary Care Provider Survey and the 1997-98 Prevention in Primary Care Study. These surveys addressed the proportion of primary care providers who provided nutrition assessment and counseling to their patients. Referral to qualified nutritionists or dieticians, although part of the Healthy People 2000 objective, was never measured.

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 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.

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