

VITAL & HEALTH STATISTICS

Utilization of Short-Stay Hospitals by Diagnosis-Related Groups

United States, 1980–84

This report presents statistics on the utilization of non-Federal short-stay hospitals by diagnosis-related groups (DRG's) based on data collected through the National Hospital Discharge Survey. Estimates are provided for patients under 65 years of age and for patients 65 years of age and older on the frequency and average length of stay for each DRG from 1980 through 1984. These statistics are provided by region of the country for the 20 most frequent DRG's.

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Cooperation of the U.S. Bureau of the Census

Under the legislation establishing the National Health Survey, the Public Health Service is authorized to use, insofar as possible, the services or facilities of other Federal, State, or private agencies.

In accordance with specifications established by the National Center for Health Statistics, the Bureau of the Census, under a contractual arrangement, participated in planning the survey and collecting the data.

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Symbols

---	Data not available
...	Category not applicable
-	Quantity zero
0.0	Quantity more than zero but less than 0.05
Z	Quantity more than zero but less than 500 where numbers are rounded to thousands
*	Figure does not meet standard of reliability or precision
#	Figure suppressed to comply with confidentiality requirements

Utilization of Short-Stay Hospitals by Diagnosis-Related Groups

by Robert Pokras, Division of Health Care Statistics

Introduction

Diagnosis-related groups (DRG's) are used by the Health Care Financing Administration, some States, and some third-party payors, as the basis for reimbursing hospitals for inpatient care.¹ The Federal application of DRG's is in the new prospective payment system for Medicare inpatients. The National Center for Health Statistics, by means of the National Hospital Discharge Survey (NHDS), collects the necessary patient information (diagnoses, procedures, age, and discharge status) to determine a patient's diagnosis-related group, and can thereby generate national estimates on hospital utilization for these categories. This report presents estimates from 1980 through 1984 from NHDS on patients discharged from short-stay non-Federal hospitals by DRG's.

In an attempt to control rising Medicare costs, the Health Care Financing Administration has changed the basis for determining how hospitals are reimbursed for inpatient care. Under the Tax Equity and Fiscal Responsibility Act of 1983,² reimbursement for inpatient care changed from fee-for-service to a prospective payment system. Under this system a hospital is reimbursed a preestablished amount based on a series of calculations used to compute the average cost to care for patients with similar conditions and treatment. These similar conditions and treatments are defined as a set of mutually exclusive categories called diagnosis-related groups, commonly referred to as DRG's.

The prospective payment system using DRG's was implemented on October 1, 1983. Individual hospitals started in the system beginning with their first fiscal year after this date. Therefore, by September 30, 1984, all hospitals designated to be under DRG reimbursement were in the system. Data are presented in this report from 1980 through 1984 to give a historical perspective of hospital utilization by DRG's, to provide data for trend analysis, and to publish the most current NHDS data on DRG's. The estimates from 1980 through 1983 represent baseline data; that is, estimates of hospital utilization prior to DRG implementation. Although not all hospitals were in the system during all of 1984, the 1984 estimates provide the first glimpse of DRG data under the new system. Two previous reports on DRG's have been published by the National Center for Health Statistics,^{3,4} but these only included data on the most frequent DRG's. This report includes all DRG's except those for which the number

of records sampled in NHDS was too small to produce an estimate (as noted in the tables). The age breaks used in tables 1-4 (under 65 years and 65 years and over) were chosen to approximate the Medicare and non-Medicare populations.

DRG's were developed at the Yale School of Organization and Management under the guiding principle that "The primary objective in the construction of DRG's was a definition of case type, each of which could be expected to receive similar outputs or services from a hospital."⁵ Initially there were 470 DRG's used in the prospective payment system, each with an associated relative cost weight used to establish the prospective payment for a patient in each DRG. This approach to health care reimbursement operates on the premise that patients with similar medical conditions should receive similar care and use approximately the same resources. Therefore, although there is variation in resource consumption among patients within a DRG, this variation is expected to balance out across the range of all patients.

A detailed description of the development and construction of DRG's is available,⁵ and current DRG's and relative cost weights are published in the *Federal Register*. DRG's and the relative cost weights are subject to modification for any number of reasons. For example, a new DRG was added in 1985 to reflect variance in care required for bilateral versus unilateral joint replacement. It is important for anyone using DRG data to examine changes in the system that could affect their analysis. The data in this report are presented using the 470 DRG's as defined in the *Federal Register* of August 1, 1984 (Vol. 49, No. 171) and as used at the inception of the DRG program.

The statistics in this report are based on data collected by the National Center for Health Statistics by means of the National Hospital Discharge Survey, which is a continuous voluntary survey in use since 1965. The data for the survey are obtained from the face sheets and discharge summaries of a sample of inpatient medical records that are obtained from a national sample of short-stay general and specialty hospitals located in the United States. A brief description of the sample design and the sources of data can be found in appendix I. A detailed report on the design of NHDS was published in 1970.⁶

Highlights

- In 1984, the most common diagnosis-related group (DRG) for patients 65 years of age or older was heart failure and shock (DRG No. 127) with 456,000 discharges.
- The most common DRG for all patients from 1980 through 1984 was No. 373, vaginal delivery without complicating diagnoses.
- Medical back problems (DRG No. 243) was the second most common single DRG. However, it was not as common as the three DRG's (Nos. 182, 183, 184) that represent esophagitis, gastroenteritis, and miscellaneous digestive disorders for all age groups.
- Patients in the Northeast had a longer average length of stay than patients in the West even when case complexity was controlled by DRG. These regional differences are more pronounced for patients 65 years of age and over than for younger patients.
- Average length stay in short-stay hospitals has been decreasing steadily from 1980 through 1984, making the decline in 1984, the first year of the prospective payment system, appear to be in line with the recent past trend. However, when these changes are examined as percent change from year to year, it is evident that the decline in 1984 was relatively larger than the decline in the previous 3 years.

Hospital inpatient utilization by diagnosis-related groups

Data on DRG's for 1980-84 are presented in tables 1,2,3, and 4. Tables 1 and 2 list each DRG with its estimated frequency and average length of stay for patients under 65 and patients 65 years of age and older, respectively. Tables 3 and 4 present these statistics by region of the country, but only for the most frequent DRG's in order to present reliable regional estimates. The DRG's in tables 3 and 4 were selected and ranked according to their frequency of occurrence in 1982, the midpoint of the period studied. All estimates in the tables and figures of this report are derived from the entire NHDS sample, excluding newborns; DRG outliers are not excluded from the estimates in this report.

Tables 1-4 present some apparent contradictions, which may be explained. By definition, some DRG's are only for patients in a specific age range. In such a case the DRG title and the table title together define the age group of the estimate. That is, the most restrictive case of either the table or DRG title determines the age group of the estimate. For example, DRG 294, diabetes age 36 and over (table 1), only refers to patients between 36 and 64 years of age because of the table title; likewise, DRG 89, pneumonia age 70 and over (table 1), does not include a patient under age 65 because of the restriction in the table title. There are some apparent contradictions that can be clarified by looking at DRG 89 in table 1. Table 1 represents "...patients under 65 years of age..."; DRG 89, on the other hand, is for "...age 70 or over..." But, there were 122,000 such discharges in 1984. The full name of DRG 89 is "simple pneumonia and pleurisy age 70 or over and/or substantial complications and/or comorbidity." These 122,000 discharges (table 1, DRG 89) were persons with pneumonia or pleurisy under age 65 (table title) with a complication or comorbidity (DRG title). Tables 1 and 2 are complementary; a national annual estimate of the frequency of any DRG from 1980 through 1984 can be obtained by adding the appropriate estimates in tables 1 and 2.

The most frequent DRG for patients 65 years of age and older in 1982 was lens procedures (DRG 39), with an estimated 429,000 discharges (table 4). This fell to 394,000 in 1984, to be replaced by heart failure and shock (DRG 127), which rose from 387,000 in 1982 to 456,000 in 1984 to become the most common DRG for elderly patients. It is not surprising to find that for patients 65 years of age and over, 7 of the top 20 DRG's (Nos. 132, 127, 88, 14, 89, 140, and 138, in ascending order by frequency) were related to the respiratory system or the cardiovascular system (table 4).

The drop in lens procedures may represent the application of new technologies and not an actual decrease in the frequency of the procedure. These and other procedures are now being performed in surgi-centers and in hospitals for outpatients. Although this does not affect the basic quality of NHDS estimates, it does reduce the comprehensiveness of some estimates because there are no statistics for procedures performed in other than an inpatient setting. For medical and surgical treatment that requires inpatient care, NHDS essentially produces estimates for the entire civilian population.

There were some relatively large changes in the frequency of some DRG's from their 1980-83 levels to 1984. These may be reflections of real change in inpatient morbidity, which reflect the impact of the DRG system on hospital utilization, or reflections of artifactual change arising from the influence of the DRG system on medical data. The prospective payment system places economic importance on medical data, and in doing so, may influence how medical information is collected and recorded.⁷

For example, the number of discharges with atherosclerosis (DRG 132) decreased from 442,000 in 1980 to 406,000 in 1983 for patients 65 years of age or over, followed by a decrease of 31 percent in 1984 to 282,000. This occurred when the number of elderly discharges declined by only 0.7 percent from 1983 to 1984. Chronic obstructive pulmonary disease (DRG 88) had been increasing from 1980 through 1983 (270,000 to 320,000 discharges), but decreased to 272,000 discharges in 1984. Likewise diabetes for the elderly in table 2 (DRG 294) showed between 206,000 and 218,000 discharges in each year from 1980 to 1983, but dropped to 180,000 in 1984. Other DRG's showed dramatic increases. Admissions of patients 65 years of age or over with heart failure and shock (DRG 127) increased by 15 percent from 1980 to 1983, and then increased by 12 percent alone in 1984. The number of discharges for nutritional and miscellaneous metabolic disorders for the elderly (DRG 296, table 2) increased by 39,000 from 1980 to 1983 (118,000 to 157,000) and then increased by 46,000 from 1983 to 1984.

Comparisons of 1980-83 data with 1984 data are made with the assumption that 1984 data reflect the impact of the DRG system. Actually, not all hospitals were in the system for all of 1984. Hospitals were inducted between October 1, 1983 and September 30, 1984 depending on the hospitals' fiscal year, so that some hospitals were in the system for all of 1984 and some for a portion of the year (that is, hospitals with a fiscal year July 1 to June 30 would have

been in the system since July 1, 1984). However, participating hospitals entered the system no later than September 1984.

This report presents estimates of hospital utilization by DRG's for all discharges from non-Federal short-stay hospitals, so it is not surprising that DRG No. 373, vaginal delivery without complicating diagnoses, was the most common DRG in each year from 1983 through 1984, even though Medicare pays for very few of these cases.

The nature of DRG's often requires that sets or groups of DRG's be examined in order to study specific areas of hospital utilization. For example, a current topic of interest is the increasing proportion of deliveries done by cesarean section. There are six DRG's (370-375) related to delivery: two for cesarean section (DRG's 370 and 371) and four for vaginal delivery (DRG's 372-375). To arrive at a cesarean section rate, all six of these DRG's must be used. That is, the sum of DRG's 370-371 must be divided by the sum of DRG's 370-375. This calculation shows the cesarean section rate has risen from 16.5 percent in 1980 to 21.2 percent in 1984.

Similarly, sets of DRG's offer a good example of how DRG's must be aggregated to make accurate statements about the frequency of various types of hospital utilization. It appears that DRG 243, medical back problems, was the second most common condition for persons under 65 years of age (table 1). Despite DRG 243 being the second most common single DRG, DRG's 183 and 184, which represent the same digestive disorders for two separate age groups (esophagitis and gastroenteritis 18-69 years of age and under 18, respectively), and combined were more frequent than medical back problems.

Another difficulty arises if one is interested in analyzing rates of hospital utilization using DRG's. For many DRG's this is not a problem, but for any DRG ending with the delimiter "...age 70 or over and/or c.c.," "...under 70 without c.c.," or "...age 18-69 without c.c.," the calculation of rates is problematic. These terms indicate that certain patients can be classified into one of two DRG's depending on the existence of comorbidities and/or complications. It would be inaccurate to estimate a rate of hospital utilization for persons aged 70 and over for DRG 31, concussion age 70 or over and/or c.c., using the 70 or over population because some persons in this DRG are under 70 years of age. For this reason, rates of discharges by DRG's are not presented in this paper. (It might be reasonable to study rates of Medicare discharges by DRG's based on the total Medicare enrollee population to examine Medicare utilization rates.)

These examples illustrate that DRG's are not an easy tool for studying disease (they were not developed for this purpose), but they can be quite useful in examining hospital utilization. Measuring hospital utilization is a complex task and usually involves measures of patient case complexity, or case mix. Data are regularly published in the Vital and Health Statistics series on numbers and rates of discharges, average length of stay, and number of days of care using data from NHDS. However, these measures do not take into account the effects of patient complications and comorbidities to measure case complexity. While DRG's are not a perfect

instrument for measuring hospital utilization, they are readily available, central to Medicare inpatient reimbursement, and were developed to differentiate patients based on their resource consumption. DRG's were developed to group patients into medically meaningful and statistically homogeneous groups as measured by resource consumption, with average length of stay being a key variable used in measuring resource consumption.⁵ To the extent that DRG's accurately perform this task, an interesting and straightforward analysis is available by simply comparing the average length of stay for a DRG (or selected group of DRG's) across a variable of interest. For example, NHDS estimates have shown the Northeast Region of the United States to have the highest average overall length of stay, while length of stay in the West has consistently been the shortest (figure 1). But does this average length of stay differential exist when patient complexity is included in the analysis?

Patterns of care as measured by average length of stay for DRG's by age and region are compared in tables 3 and 4 and can help shed light on this question. It is readily apparent that for individual DRG's the Northeast demonstrates a longer length of stay than do other regions of the country (tables 3 and 4). Average length of hospital stay has been dropping markedly for the past 4 to 5 years (figure 1) in all regions; but in spite of this, the Northeast lags behind the rest of the country. That is, when comparing hospital utilization as measured by average length of stay, and holding case complexity constant by DRG, there are still substantial differences by region. Examining table 3, we see that in 1980 women in the Northeast with uncomplicated vaginal deliveries (DRG 373) stayed an average of 3.6 days compared with only 2.3 days in the West. While these same estimates are 3.2 and 2.1 days in 1984, a substantial gap still exists for the most common DRG. This general pattern between regions was also evident for many common surgical DRG's: Cesarean section (DRG 371); nonradical hysterectomy (DRG 355); and cholecystectomy (DRG 198). However, there are some DRG's for which average length of stay differences are small across regions: dilation and curettage of uterus (DRG 364) and tonsillectomy and/or adenoidectomy (DRG 60).

Table 4 shows that for persons 65 and over average lengths of stay by region for specific DRG's are even more disparate. In 1984, elderly patients with atherosclerosis (DRG 132) stayed 3.9 days longer in the Northeast than in the West. This was down from a 5.5 day difference for this DRG in 1980. Similarly, in 1980, elderly patients in the Northeast admitted for heart failure and shock (DRG 127) averaged 12.0 days in the hospital versus only 7.4 days for their counterparts in the West—a difference of 4.6 days. The same comparison in 1984 still shows a difference of 3.7 days. At least one surgical DRG, transurethral prostatectomy (No. 336), shows a dramatic decrease in average length of stay from 1980 to 1984 for patients in the Northeast: 13.1 days to 8.7 days. On the other hand, patients with hip and femur procedures (DRG 210) in the Northeast were hospitalized more than a week longer than patients undergoing similar procedures in the West for each year from 1980 through 1984. It is apparent that even when case complexity is controlled by

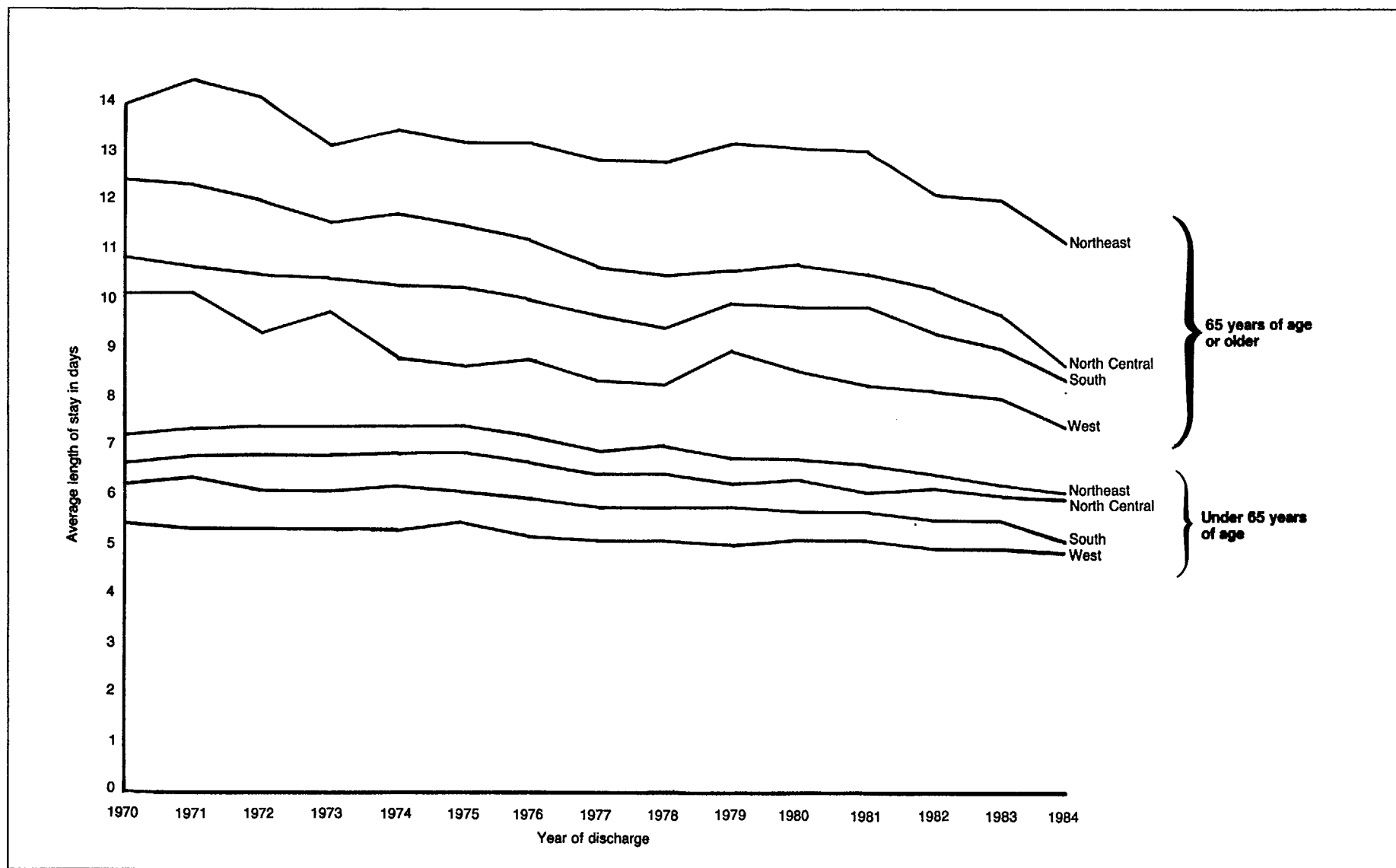


Figure 1. Average length of stay of patients discharged from short-stay non-Federal hospitals by age and region, United States: 1970-84

grouping patients into DRG's, there are substantial regional differences in average length of stay.

The average length of stay associated with a DRG allows hospitals to compare their experience with that of other hospitals. While comparison is tenuous on a case-by-case basis, a hospital with an average length of stay that is 2, 3, or more days longer than the national average for all patients in a specific DRG may need to examine why it is so far from the norm. This kind of comparison may be worthwhile as a starting point, but even within a DRG, average length of stay is not an exact measure of resource consumption. A hospital with average length of stay characteristics similar to hospitals in the same region may be making or losing money under the prospective payment system depending on other economic and efficiency factors of the hospital.

In making these comparisons of average length of stay, it is important to note the general downward trend in the lengths of hospital visits for the previous fifteen years. There has been a steady decline in average length of stay in all regions of the country since 1970, with a more precipitous fall in the last 4 to 5 years. That is, although average length of stay for all patients aged 65 and over declined 2.6 days during the 11-year period 1970-81, an average drop of 0.24 days per year, the drop from 1981 through 1984 was 1.6 days, or 0.4 days per year.

One of the expected outcomes of the prospective payment system was an overall reduction in length of stay. Given this existing trend it may be difficult to evaluate the effects

of DRG's on average length of stay because it decreased significantly before the DRG program and because there is a threshold effect for this variable. That is, at a certain point, length of stay cannot be further reduced. The table translates the data in figure 1 to percent change in length of stay from one year to the next. It is evident from this analysis that in 1984 there was a relatively larger reduction in average length of stay than in previous years for patients 65 years of age and over—patients most affected by changes in the Medicare system. However, because length of stay can only be reduced to a certain point, this trend will at some point end, and hospitals will have to achieve savings by other means.

Table. Annual percent change in average length of stay by age and region, United States: 1980-84

[Discharges from short-stay non-Federal hospitals. Excludes newborn infants.]

Age and region	Year				
	1980	1981	1982	1983	1984
Under 65 years					
	Percent				
Northeast	+0.27	-1.74	-1.58	-3.09	-2.64
North Central	+1.64	-2.22	+1.20	-2.71	-2.13
South	-0.59	-0.03	-2.18	-0.53	-6.22
West	+1.92	-0.36	-2.76	-1.74	-0.22
65 Years and over					
Northeast	-0.59	-0.46	-6.15	-1.32	-6.57
North Central	-0.71	-2.57	-1.55	-6.42	-9.68
South	-0.99	-0.39	-4.38	-3.41	-8.05
West	-4.37	-3.50	-0.52	-2.86	-7.81

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List of detailed tables

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TABLE 1. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS UNDER 65 YEARS OF AGE DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
ALL DISCHARGES.....1-470	27,968	28,136	27,896	27,481	25,936	6.0	6.0	5.9	5.8	5.6
MAJOR DIAGNOSTIC CATEGORY 1: DISEASES AND DISORDERS OF THE NERVOUS SYSTEM										
CRANIOTOMY AGE 18 OR OVER EXCEPT FOR TRAUMA.....1	35	36	38	39	36	22.9	20.7	26.5	23.5	22.1
CRANIOTOMY FOR TRAUMA AGE 18 OR OVER.....2	10	14	12	13	11	26.0	19.9	18.8	23.6	20.1
CRANIOTOMY AGE UNDER 18.....3	20	21	16	20	23	13.4	15.5	15.9	9.7	11.0
SPINAL PROCEDURES.....4	14	15	16	18	16	26.4	25.3	21.5	21.8	18.9
EXTRACRANIAL VASCULAR PROCEDURES.....5	17	18	23	21	24	11.2	9.2	10.6	9.7	8.6
CARPAL TUNNEL RELEASE.....6	62	62	53	47	43	3.0	2.7	2.5	2.5	2.4
PERIPHERAL AND CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES AGE 70 OR OVER AND/OR C.C.....7	*6	*5	*7	*7	*7	*19.4	*23.4	*18.5	*20.3	*19.4
PERIPHERAL AND CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES AGE UNDER 70 WITHOUT C.C.....8	63	67	59	66	48	4.6	4.6	4.7	4.4	3.7
SPINAL DISORDERS AND INJURIES.....9	18	21	19	17	18	18.5	14.6	18.0	21.4	14.1
NERVOUS SYSTEM NEOPLASMS AGE 70 OR OVER AND/OR C.C.....10	*9	10	11	*10	*9	*15.2	15.5	14.4	*10.2	*11.6
NERVOUS SYSTEM NEOPLASMS AGE UNDER 70 WITHOUT C.C.....11	14	16	16	20	11	9.2	11.1	8.8	9.5	6.6
DEGENERATIVE NERVOUS SYSTEM DISORDERS.....12	48	39	44	46	40	11.2	10.8	10.3	10.1	10.6
MULTIPLE SCLEROSIS AND CEREBELLAR ATAXIA.....13	31	28	37	31	37	11.6	10.5	9.5	9.5	9.3
SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TRANSIENT ISCHEMIC ATTACKS.....14	89	92	96	90	98	15.0	12.5	12.4	13.0	11.5
TRANSIENT ISCHEMIC ATTACKS.....15	56	54	55	54	61	5.7	5.9	5.9	5.1	5.2
NONSPECIFIC CEREBROVASCULAR DISORDERS WITH C.C.....16	11	11	11	13	10	10.2	10.9	9.8	7.8	6.5
NONSPECIFIC CEREBROVASCULAR DISORDERS WITHOUT C.C.....17	15	16	13	10	11	5.8	5.4	6.0	6.5	6.1
CRANIAL AND PERIPHERAL NERVE DISORDERS AGE 70 OR OVER AND/OR C.C.....18	11	11	14	13	12	10.8	7.7	8.6	8.3	7.2
CRANIAL AND PERIPHERAL NERVE DISORDERS AGE UNDER 70 WITHOUT C.C.....19	76	72	65	71	56	6.3	8.4	6.8	7.4	5.7
NERVOUS SYSTEM INFECTION EXCEPT VIRAL MENINGITIS.....20	38	35	31	37	36	10.9	11.7	10.3	10.6	10.6
VIRAL MENINGITIS.....21	22	27	28	33	26	5.8	4.4	4.9	4.3	4.5
HYPERTENSIVE ENCEPHALOPATHY.....22	11	*10	*7	12	*10	6.4	*6.0	*6.7	6.1	*6.9
NONTRAUMATIC STUPOR AND COMA.....23	*2	*	*3	*2	*3	*4.6	*	*7.5	*3.5	*7.0
SEIZURE AND HEADACHE AGE 70 OR OVER AND/OR C.C.....24	25	32	27	27	35	5.5	7.2	7.0	5.2	4.9
SEIZURE AND HEADACHE AGE 18-69 WITHOUT C.C.....25	158	157	157	138	136	4.9	4.4	4.5	4.0	3.7
SEIZURE AND HEADACHE AGE UNDER 18.....26	71	75	68	60	61	3.9	3.8	3.4	3.1	2.9
TRAUMATIC STUPOR AND COMA, COMA GREATER THAN ONE HOUR.....27	*2	*4	*4	*5	*6	*16.8	*14.5	*14.1	*4.8	*6.8
TRAUMATIC STUPOR AND COMA, COMA LESS THAN ONE HOUR AGE 70 OR OVER AND/OR C.C.....28	23	20	20	18	19	8.3	10.9	12.6	7.6	11.1
TRAUMATIC STUPOR AND COMA LESS THAN ONE HOUR AGE 18-69 WITHOUT C.C.....29	47	50	43	41	45	6.1	5.4	4.9	5.8	3.6
TRAUMATIC STUPOR AND COMA LESS THAN ONE HOUR AGE UNDER 18.....30	56	58	49	50	54	3.9	4.7	2.4	3.9	3.0
CONCUSSION AGE 70 OR OVER AND/OR C.C.....31	15	16	14	14	12	5.2	6.0	4.1	5.1	4.1
CONCUSSION AGE 18-69 WITHOUT C.C.....32	78	74	79	70	64	3.3	3.6	3.4	3.0	3.0
CONCUSSION AGE UNDER 18.....33	64	73	63	55	48	2.4	1.8	2.2	1.9	1.9
OTHER DISORDERS OF NERVOUS SYSTEM AGE UNDER 70 OR OVER AND/OR C.C.....34	16	20	18	23	21	12.3	11.8	11.8	8.5	8.7
OTHER DISORDERS OF NERVOUS SYSTEM AGE UNDER 70 WITHOUT C.C.....35	45	44	40	42	32	6.9	5.3	6.3	4.8	5.9
MAJOR DIAGNOSTIC CATEGORY 2: DISEASES AND DISORDERS OF THE EYE										
RETINAL PROCEDURES.....36	25	26	23	30	36	6.6	5.3	5.4	4.9	4.4
ORBITAL PROCEDURES.....37	12	*10	*9	*10	12	4.6	*4.7	*5.9	*4.3	3.4
PRIMARY IRIS PROCEDURES.....38	*7	*7	*4	*	*2	*3.8	*4.2	*2.2	*	*4.0
LENS PROCEDURES.....39	118	115	127	118	88	3.2	3.1	2.7	2.3	2.5
EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE 18 OR OVER.....40	55	41	50	37	29	2.5	2.4	2.5	2.3	2.2
EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE UNDER 18.....41	44	52	42	43	28	2.0	1.7	1.6	1.5	1.5
INTRAOCULAR PROCEDURES EXCEPT RETINA, IRIS AND LENS.....42	29	25	30	27	35	5.0	5.7	4.7	3.6	3.7
HYPHEMA.....43	11	15	12	15	*8	4.4	3.8	4.1	4.8	*3.0
ACUTE MAJOR EYE INFECTIONS.....44	10	*10	10	13	14	4.9	*4.0	4.8	4.9	4.0
NEUROLOGICAL EYE DISORDERS.....45	12	15	16	12	*8	5.0	4.2	4.2	4.6	*4.7
OTHER DISORDERS OF THE EYE AGE 18 OR OVER WITH C.C.....46	13	13	13	*10	15	6.1	10.1	9.6	*6.4	5.6
OTHER DISORDERS OF THE EYE AGE 18 OR OVER WITHOUT C.C.....47	21	24	22	19	19	4.3	4.7	3.8	4.1	3.3
OTHER DISORDERS OF THE EYE AGE UNDER 18.....48	23	16	17	*10	*10	2.4	2.6	2.3	*2.6	*2.7

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 1. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS UNDER 65 YEARS OF AGE DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 3: DISEASES AND DISORDERS OF THE EAR, NOSE, AND THROAT										
MAJOR HEAD AND NECK PROCEDURES.....49	*8	*7	*8	*8	*9	*20.0	*15.3	*18.5	*19.2	*16.5
SIALOADENECTOMY.....50	14	16	11	13	17	4.4	3.9	4.6	3.3	3.8
SALIVARY GLAND PROCEDURES EXCEPT SIALOADENECTOMY.....51										
CLEFT LIP AND PALATE REPAIR.....52	*3	*5	*3	*4	*3	*2.9	*3.2	*3.0	*2.5	*3.3
SINUS AND MASTOID PROCEDURES AGE 18 OR OVER.....53	*9	11	*10	17	13	*4.4	4.4	*4.2	3.8	4.0
SINUS AND MASTOID PROCEDURES AGE UNDER 18.....54	45	47	48	48	53	4.3	3.4	3.2	3.0	3.1
MISCELLANEOUS EAR, NOSE AND THROAT PROCEDURES.....55	*7	*9	*9	*8	*10	*3.3	*5.0	*3.0	*2.7	*3.7
RHINOPLASTY.....56	205	209	190	196	185	2.9	2.5	2.7	2.4	2.2
TONSIL AND ADENOID PROCEDURE EXCEPT TONSILLECTOMY AND/OR ADENOIDECTOMY AGE 18 OR OVER.....57	91	93	97	85	80	2.7	2.5	2.5	2.3	2.0
TONSIL AND ADENOID PROCEDURE EXCEPT TONSILLECTOMY AND/OR ADENOIDECTOMY AGE UNDER 18.....58	*9	11	*10	*9	*9	*3.4	4.1	*3.1	*3.5	*3.4
TONSILLECTOMY AND/OR ADENOIDECTOMY ONLY, AGE 18 OR OVER.....59	114	91	86	95	69	1.8	1.7	1.5	1.8	1.6
TONSILLECTOMY AND/OR ADENOIDECTOMY ONLY, AGE UNDER 18.....60	112	113	111	92	77	2.3	2.2	2.1	2.2	1.8
MYRINGOTOMY AGE 18 OR OVER.....61	295	295	279	270	218	1.8	1.8	1.9	1.8	1.6
MYRINGOTOMY AGE UNDER 18.....62	*4	*2	*3	*2	*3	*2.2	*1.5	*1.7	*2.0	*2.8
OTHER EAR, NOSE AND THROAT OPERATING ROOM PROCEDURES.....63										
EAR, NOSE AND THROAT MALIGNANCY.....64	15	19	15	15	13	4.7	5.2	4.8	5.8	3.7
DYSEQUILIBRIUM.....65	24	22	21	22	19	6.8	8.4	6.7	6.6	5.9
EPISTAXIS.....66	48	45	45	43	39	4.9	4.4	4.2	3.9	3.7
EPIGLOTTITIS.....67	10	*9	*9	*7	*7	3.5	*4.0	*4.3	*3.2	*3.8
OTITIS MEDIA AND UPPER RESPIRATORY INFECTION AGE 70 OR OVER AND/OR C.C.....68	*4	*5	*4	*6	*4	*4.8	*4.8	*3.8	*4.5	*4.3
OTITIS MEDIA AND UPPER RESPIRATORY INFECTION AGE 18-69 WITHOUT C.C.....69	38	38	31	31	32	5.5	5.4	5.0	5.5	4.2
OTITIS MEDIA AND UPPER RESPIRATORY INFECTION AGE UNDER 18.....70	113	101	98	107	93	4.0	4.4	3.9	3.8	3.7
LARYNGOTRACHEITIS.....71	250	227	216	228	192	3.6	3.3	3.3	3.2	3.2
NASAL TRAUMA AND DEFORMITY.....72	37	43	24	61	23	3.2	3.2	3.2	2.7	2.7
OTHER EAR, NOSE AND THROAT DIAGNOSES AGE 18 OR OVER.....73	24	25	19	17	15	2.2	2.1	2.5	2.4	2.3
OTHER EAR, NOSE AND THROAT DIAGNOSES AGE UNDER 18.....74	42	39	36	36	27	4.0	3.7	3.4	3.7	3.3
20	25	27	28	27	3.5	3.8	3.0	4.7	3.9	
MAJOR DIAGNOSTIC CATEGORY 4: DISEASES AND DISORDERS OF THE RESPIRATORY SYSTEM										
MAJOR CHEST PROCEDURES.....75	45	47	46	52	48	16.3	16.7	15.2	13.5	14.4
OPERATING ROOM PROCEDURE ON THE RESPIRATORY SYSTEM EXCEPT MAJOR CHEST WITH C.C.....76	13	*7	*9	*7	*10	14.6	*12.2	*21.0	*16.6	*15.6
OPERATING ROOM PROCEDURE ON THE RESPIRATORY SYSTEM EXCEPT MAJOR CHEST WITHOUT C.C.....77	12	12	14	14	*8	8.3	7.7	9.7	7.8	*8.0
PULMONARY EMBOLISM.....78	34	32	31	33	23	11.5	10.1	10.7	10.2	8.9
RESPIRATORY INFECTIONS AND INFLAMMATIONS AGE 70 OR OVER AND/OR C.C.....79	13	14	17	*10	19	13.2	15.9	14.4	*13.7	13.7
RESPIRATORY INFECTIONS AND INFLAMMATIONS AGE 18-69 WITHOUT C.C.....80	14	*10	13	*10	11	14.5	*17.8	10.2	*9.9	12.4
RESPIRATORY INFECTIONS AND INFLAMMATIONS AGE UNDER 18.....81	*6	*5	*5	*4	*5	*11.1	*5.0	*10.7	*6.8	*5.8
RESPIRATORY NEOPLASMS.....82	104	115	135	138	141	11.4	9.5	8.4	8.7	6.8
MAJOR CHEST TRAUMA AGE 70 OR OVER AND/OR C.C.....83	11	11	10	*7	*8	9.2	10.0	9.2	*7.2	*9.4
MAJOR CHEST TRAUMA AGE UNDER 70 WITHOUT C.C.....84	*8	*8	*7	*9	*7	*6.0	*4.7	*4.3	*3.4	*3.0
PLEURAL EFFUSION AGE 70 OR OVER AND/OR C.C.....85	*6	*3	*5	*5	*8	*9.2	*10.5	*6.9	*7.6	*7.1
PLEURAL EFFUSION AGE UNDER 70 WITHOUT C.C.....86	*7	*8	*5	*6	*5	*7.2	*7.2	*5.5	*6.2	*6.6
PULMONARY EDEMA AND RESPIRATORY FAILURE.....87	15	20	14	16	18	7.9	6.9	7.4	6.1	9.6
CHRONIC OBSTRUCTIVE PULMONARY DISEASE.....88	187	194	192	178	161	8.2	8.4	8.0	7.9	7.7
SIMPLE PNEUMONIA AND PLEURISY AGE 70 OR OVER AND/OR C.C.....89	95	86	88	100	122	10.1	9.6	9.5	8.4	7.9
SIMPLE PNEUMONIA AND PLEURISY AGE 18-69 WITHOUT C.C.....90	160	153	162	153	130	6.2	6.6	6.0	6.1	5.4
SIMPLE PNEUMONIA AND PLEURISY AGE UNDER 18.....91	242	243	279	256	216	4.9	5.1	4.8	4.7	4.6
INTERSTITIAL LUNG DISEASE AGE 70 OR OVER AND/OR C.C.....92	10	17	11	14	12	10.6	15.3	10.2	9.2	5.8
INTERSTITIAL LUNG DISEASE AGE UNDER 70 WITHOUT C.C.....93	18	17	14	15	14	6.6	5.8	5.4	6.2	5.1
PNEUMOTHORAX AGE 70 OR OVER AND/OR C.C.....94	*7	*7	*8	*9	*9	*7.9	*9.2	*7.0	*6.6	*6.8
PNEUMOTHORAX AGE UNDER 70 WITHOUT C.C.....95	27	24	24	28	30	5.7	5.4	5.2	5.4	4.8
BRONCHITIS AND ASTHMA AGE 70 OR OVER AND/OR C.C.....96	77	81	84	103	103	7.0	6.9	6.8	6.7	6.2
BRONCHITIS AND ASTHMA AGE 18-69 WITHOUT C.C.....97	230	225	227	227	207	5.3	5.5	5.3	5.1	4.6
BRONCHITIS AND ASTHMA AGE UNDER 18.....98	285	299	313	320	277	4.1	4.1	3.9	3.8	3.7
RESPIRATORY SIGNS AND SYMPTOMS AGE 70 OR OVER AND/OR C.C.....99	-	*	*	*	*	-	*	*	*	*
RESPIRATORY SIGNS AND SYMPTOMS AGE UNDER 70 WITHOUT C.C.....100	22	28	29	32	24	4.0	3.5	3.5	3.2	3.2
OTHER RESPIRATORY DIAGNOSES AGE 70 OR OVER AND/OR C.C.....101	26	26	23	26	34	6.7	8.1	6.5	6.3	6.5
OTHER RESPIRATORY DIAGNOSES AGE UNDER 70.....102	46	48	48	54	49	5.6	4.4	4.0	3.9	3.8

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TABLE 1. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS UNDER 65 YEARS OF AGE DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 5: DISEASES AND DISORDERS OF THE CIRCULATORY SYSTEM										
HEART TRANSPLANT.....103	-	-	*	-	*	-	-	*	-	*
CARDIAC VALVE PROCEDURE WITH PUMP AND WITH CARDIAC CATHETERIZATION.....104	*3	*4	*4	*7	*6	*24.4	*23.5	*20.9	*21.0	*22.5
CARDIAC VALVE PROCEDURE WITH PUMP AND WITHOUT CARDIAC CATHETERIZATION.....105	16	14	14	13	16	21.2	16.0	13.9	13.3	13.9
CORONARY BYPASS WITH CARDIAC CATHETERIZATION.....106	30	30	41	38	47	15.8	15.9	15.7	16.2	13.8
CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION.....107	62	72	70	75	67	13.4	12.5	12.6	12.2	11.3
CARDIOTHORACIC PROCEDURE, EXCEPT VALVE AND CORONARY BYPASS, WITH PUMP.....108	11	*10	16	27	42	16.6	*15.6	11.0	9.6	7.3
CARDIOTHORACIC PROCEDURES WITHOUT PUMP.....109	*10	14	12	13	11	*13.9	15.1	13.6	10.8	14.1
MAJOR RECONSTRUCTIVE VASCULAR PROCEDURES AGE 70 OR OVER AND/OR C.C.....110	16	18	20	22	20	24.0	18.5	16.9	20.4	17.5
MAJOR RECONSTRUCTIVE VASCULAR PROCEDURES AGE UNDER 70 WITHOUT C.C.....111	25	24	23	34	20	14.3	12.6	12.4	12.1	10.6
VASCULAR PROCEDURES EXCEPT MAJOR RECONSTRUCTION.....112	26	25	29	34	30	14.2	13.0	11.6	11.3	9.5
AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS EXCEPT UPPER LIMB AND TOE.....113	*3	*3	*4	*5	*5	*20.4	*16.4	*23.6	*20.4	*22.0
UPPER LIMB AND TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS.....114	*2	*3	*3	*2	*3	*26.0	*20.7	*17.8	*17.0	*11.9
PERMANENT CARDIAC PACEMAKER IMPLANT WITH ACUTE MYOCARDIAL INFARCTION OR CONGESTIVE HEART FAILURE.....115	*	*	*2	*	*	*	*	*9.6	*	*
PERMANENT CARDIAC PACEMAKER IMPLANT WITHOUT ACUTE MYOCARDIAL INFARCTION OR CONGESTIVE HEART FAILURE.....116	12	11	14	11	13	10.1	10.5	9.2	8.4	6.9
CARDIAC PACEMAKER REPLACE AND REVISION EXCEPT PULSE GENERATOR REPLACEMENT ONLY.....117	*3	*	*	*	*2	*6.9	*	*	*	*8.3
CARDIAC PACEMAKER PULSE GENERATOR REPLACEMENT ONLY.....118	*4	*3	*	*2	*2	*4.9	*8.8	*	*4.3	*4.0
VEIN LIGATION AND STRIPPING.....119	51	58	45	45	42	6.0	5.0	5.4	5.6	4.9
OTHER OPERATING ROOM PROCEDURES ON THE CIRCULATORY SYSTEM.....120	*8	*8	*9	*10	11	*21.0	*17.3	*17.3	*10.7	12.0
CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION AND CARDIOVASCULAR COMPLICATIONS, DISCHARGED ALIVE.....121	36	43	44	44	48	14.6	12.3	12.9	11.9	10.9
CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION WITHOUT CARDIOVASCULAR COMPLICATIONS, DISCHARGED ALIVE.....122	192	213	210	203	201	11.3	10.5	9.9	9.6	8.6
CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION, EXPIRED.....123	21	21	26	21	21	6.0	4.6	5.1	5.2	5.5
CIRCULATORY DISORDERS EXCEPT ACUTE MYOCARDIAL INFARCTION, WITH CARDIAC CATHETERIZATION AND COMPLEX DIAGNOSIS.....124	27	31	36	40	41	8.9	7.4	6.6	6.8	7.1
CIRCULATORY DISORDERS EXCEPT ACUTE MYOCARDIAL INFARCTION, WITH CARDIAC CATHETERIZATION WITHOUT COMPLEX DIAGNOSIS.....125	187	207	208	214	213	3.9	3.7	3.4	3.3	3.0
ACUTE AND SUBACUTE ENDOCARDITIS.....126	*3	*3	*4	*3	*6	*15.2	*35.6	*27.4	*18.5	*23.1
HEART FAILURE AND SHOCK.....127	83	81	88	109	112	8.9	9.6	8.5	9.0	7.6
DEEP VEIN THROMBOPHLEBITIS.....128	56	53	51	47	50	9.5	9.2	10.0	8.6	8.2
CARDIAC ARREST.....129	12	13	15	14	16	11.0	8.2	6.4	13.2	12.2
PERIPHERAL VASCULAR DISORDERS AGE 70 OR OVER AND/OR C.C.....130	30	29	37	37	36	10.5	8.9	8.2	8.2	6.9
PERIPHERAL VASCULAR DISORDERS AGE UNDER 70 WITHOUT C.C.....131	71	71	72	76	63	6.6	6.7	7.0	6.5	7.1
ATHEROSCLEROSIS AGE 70 OR OVER AND/OR C.C.....132	153	136	131	132	103	7.2	6.9	6.6	6.6	5.8
ATHEROSCLEROSIS AGE UNDER 70 WITHOUT C.C.....133	98	91	91	85	62	6.0	5.5	5.4	5.2	4.4
HYPERTENSION.....134	215	229	214	199	169	6.0	6.0	5.4	5.5	4.8
CARDIAC CONGENITAL AND VALVULAR DISORDERS AGE 70 OR OVER AND/OR C.C.....135	16	14	15	12	10	8.6	7.4	5.8	8.4	5.7
CARDIAC CONGENITAL AND VALVULAR DISORDERS AGE 18-69 WITHOUT C.C.....136	26	21	28	29	29	5.0	6.3	4.7	3.7	4.4
CARDIAC CONGENITAL AND VALVULAR DISORDERS AGE UNDER 18.....137	20	16	16	13	12	3.4	6.3	5.9	4.0	4.9
CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS AGE 70 OR OVER AND/OR C.C.....138	47	48	54	57	59	5.9	6.5	6.2	5.7	5.2
CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS AGE UNDER 70 WITHOUT C.C.....139	94	99	85	91	85	4.2	4.2	4.2	3.9	3.8
ANGINA PECTORIS.....140	170	170	178	200	224	5.8	5.5	5.4	5.2	4.7
SYNCOPE AND COLLAPSE AGE 70 OR OVER AND/OR C.C.....141	*3	*3	*4	*6	*8	*7.8	*5.3	*5.1	*6.6	*6.3
SYNCOPE AND COLLAPSE AGE UNDER 70 WITHOUT C.C.....142	32	28	26	27	22	3.7	3.5	3.5	3.1	2.9
CHEST PAIN.....143	49	56	58	62	51	3.3	3.1	3.0	2.9	2.8
OTHER CIRCULATORY DIAGNOSES WITH C.C.....144	31	37	33	37	46	8.5	10.3	9.0	8.1	6.9
OTHER CIRCULATORY DIAGNOSES WITHOUT C.C.....145	37	39	41	40	31	6.8	6.1	5.7	5.2	5.1

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 6: DISEASES AND DISORDERS OF THE DIGESTIVE SYSTEM										
RECTAL RESECTION AGE 70 OR OVER AND/OR C.C.....146	*7	*4	*8	*7	10	*21.6	*18.4	*21.0	*21.0	21.2
RECTAL RESECTION AGE UNDER 70 WITHOUT C.C.....147	11	11	*9	15	12	15.0	15.1	*17.3	14.2	13.7
MAJOR SMALL AND LARGE BOWEL PROCEDURES AGE 70 OR OVER AND/OR C.C.....148	33	40	40	41	44	22.2	19.6	18.9	17.5	18.8
MAJOR SMALL AND LARGE BOWEL PROCEDURES AGE UNDER 70 WITHOUT C.C.....149	59	58	56	58	57	13.2	12.8	13.3	11.7	11.8
PERITONEAL ADHESIOLYSIS AGE 70 OR OVER AND/OR C.C.....150	*4	*5	*6	*7	*5	*15.7	*13.1	*14.8	*11.4	*14.3
PERITONEAL ADHESIOLYSIS AGE UNDER 70 WITHOUT C.C.....151	18	20	20	19	20	11.4	9.4	8.6	10.1	8.1
MINOR SMALL AND LARGE BOWEL PROCEDURES AGE 70 OR OVER AND/OR C.C.....152	*4	*9	*10	11	12	*23.5	*14.7	*6.9	9.0	7.6
MINOR SMALL AND LARGE BOWEL PROCEDURES AGE UNDER 70 WITHOUT C.C.....153	20	30	34	34	32	7.7	8.1	6.4	6.1	5.3
STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES AGE 70 OR OVER AND/OR C.C.....154	26	25	28	27	29	18.5	16.9	15.9	14.5	16.3
STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES AGE 18-69 WITHOUT C.C.....155	59	56	50	48	46	12.1	10.5	12.4	10.1	11.2
STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES AGE UNDER 18.....156	12	11	12	13	14	8.0	6.8	9.4	7.6	7.3
ANAL PROCEDURES AGE 70 OR OVER AND/OR C.C.....157	19	18	26	24	21	7.5	7.3	6.1	5.8	6.2
ANAL PROCEDURES AGE UNDER 70 WITHOUT C.C.....158	205	215	194	178	159	5.1	5.6	4.8	4.4	4.3
HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL AGE 70 OR OVER AND/OR C.C.....159	*8	*9	10	*9	12	*10.7	*8.6	8.8	*9.8	8.9
HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL AGE 18-69 WITHOUT C.C.....160	73	76	73	64	68	6.0	6.1	5.6	5.5	4.8
INGUINAL AND FEMORAL HERNIA PROCEDURES AGE 70 OR OVER AND/OR C.C.....161	18	12	16	18	16	9.8	7.6	6.0	6.7	5.2
INGUINAL AND FEMORAL HERNIA PROCEDURES AGE 18-69 WITHOUT C.C.....162	268	253	271	255	236	4.5	4.4	4.2	3.9	3.3
HERNIA PROCEDURES AGE UNDER 18.....163	117	110	103	87	71	2.5	2.4	2.5	1.9	2.5
APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS AGE 70 OR OVER AND/OR C.C.....164	*8	*10	*8	12	11	*11.3	*13.1	*11.1	11.1	9.6
APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS AGE UNDER 70 WITHOUT C.C.....165	27	29	27	27	38	8.6	8.7	8.2	8.2	8.4
APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS AGE 70 OR OVER AND/OR C.C.....166	*10	12	12	*8	11	*9.2	7.9	8.3	*6.5	6.6
APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS AGE UNDER 70 WITHOUT C.C.....167	210	213	195	200	197	4.5	4.4	4.1	4.1	3.8
PROCEDURES ON THE MOUTH AGE 70 OR OVER AND/OR C.C.....168	12	11	13	13	14	8.2	8.0	6.4	7.3	6.1
PROCEDURES ON THE MOUTH AGE UNDER 70 WITHOUT C.C.....169	89	90	82	78	72	3.8	4.1	3.5	3.6	3.8
OTHER DIGESTIVE SYSTEM PROCEDURES AGE 70 OR OVER AND/OR C.C.....170	11	11	11	11	13	18.1	15.4	14.5	13.3	15.3
OTHER DIGESTIVE SYSTEM PROCEDURES AGE UNDER 70 WITHOUT C.C.....171	27	28	31	28	25	7.6	8.0	8.6	5.9	5.4
DIGESTIVE MALIGNANCY AGE 70 OR OVER AND/OR C.C.....172	27	25	27	29	32	9.8	9.5	12.3	13.1	9.8
DIGESTIVE MALIGNANCY AGE UNDER 70 WITHOUT C.C.....173	28	27	27	21	21	9.0	7.7	7.3	6.3	7.2
GASTROINTESTINAL HEMORRHAGE AGE 70 OR OVER AND/OR C.C.....174	50	50	55	54	62	7.1	7.4	6.5	6.5	6.2
GASTROINTESTINAL HEMORRHAGE AGE UNDER 70 WITHOUT C.C.....175	84	85	79	76	73	5.0	5.0	5.1	4.3	4.2
COMPLICATED PEPTIC ULCER.....176	10	13	*9	13	11	7.0	8.0	*6.2	9.3	6.0
UNCOMPLICATED PEPTIC ULCER AGE 70 OR OVER AND/OR C.C.....177	24	24	26	24	17	7.1	6.6	6.1	6.1	5.5
UNCOMPLICATED PEPTIC ULCER UNDER 70 WITHOUT C.C.....178	109	105	92	86	66	5.4	5.1	4.9	4.4	4.3
INFLAMMATORY BOWEL DISEASE.....179	38	41	45	39	37	7.6	8.9	8.7	9.4	9.3
GASTROINTESTINAL OBSTRUCTION AGE 70 OR OVER AND/OR C.C.....180	13	12	14	17	17	7.4	6.3	8.5	6.8	5.9
GASTROINTESTINAL OBSTRUCTION AGE UNDER 70 WITHOUT C.C.....181	38	34	41	40	36	5.1	6.1	5.2	4.0	4.6
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISEASE AGE 70 OR OVER AND/OR C.C.....182	183	184	193	203	223	5.7	5.8	5.2	5.0	4.7
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISEASE AGE 18-69 WITHOUT C.C.....183	702	688	673	633	543	4.5	4.3	4.1	4.1	3.9
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISORDERS AGE UNDER 18.....184	373	379	392	348	319	3.9	3.7	3.8	3.6	3.3
DENTAL AND ORAL DISEASE EXCEPT EXTRACTIONS AND RESTORATIONS AGE 18 OR OVER.....185	43	42	37	41	37	4.8	3.9	4.3	4.6	3.7
DENTAL AND ORAL DISEASE EXCEPT EXTRACTIONS AND RESTORATIONS AGE UNDER 18.....186	21	19	17	17	19	3.1	4.4	3.3	3.0	3.5
DENTAL EXTRACTIONS AND RESTORATIONS.....187	153	125	85	71	51	1.9	1.9	2.2	1.7	1.7
OTHER DIGESTIVE SYSTEM DIAGNOSES AGE 70 OR OVER AND/OR C.C.....188	21	24	30	28	21	6.3	6.1	6.3	6.2	5.6
OTHER DIGESTIVE SYSTEM DIAGNOSES AGE 18-69 WITHOUT C.C.....189	95	82	81	86	82	4.0	3.7	3.8	3.8	3.4
OTHER DIGESTIVE SYSTEM DIAGNOSES AGE UNDER 18.....190	62	51	41	48	43	2.7	2.9	2.5	2.7	2.3

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TABLE 1. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS UNDER 65 YEARS OF AGE DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 7: DISEASES AND DISORDERS OF THE HEPATOBILIARY SYSTEM AND PANCREAS										
MAJOR PANCREAS, LIVER, AND SHUNT PROCEDURES.....191	*9	*9	13	*10	11	*21.9	*22.1	20.7	*21.6	16.3
MINOR PANCREAS, LIVER, AND SHUNT PROCEDURES.....192	*3	*4	*3	*4	*3	*30.3	*18.8	*23.1	*16.4	*17.7
BILIARY TRACT PROCEDURE EXCEPT TOTAL										
CHOLECYSTECTOMY AGE 70 OR OVER AND/OR C.C.....193	*2	*3	*3	*4	*3	*24.3	*23.7	*24.9	*21.6	*15.6
BILIARY TRACT PROCEDURE EXCEPT TOTAL										
CHOLECYSTECTOMY AGE UNDER 70 WITHOUT C.C.....194	*3	*4	*6	*8	*4	*13.5	*16.5	*14.9	*13.4	*8.0
TOTAL CHOLECYSTECTOMY WITH COMMON BILE DUCT										
EXPLORATION AGE 70 OR OVER AND/OR C.C.....195	19	22	19	17	21	13.5	13.2	12.0	13.2	11.7
TOTAL CHOLECYSTECTOMY WITH COMMON BILE DUCT										
EXPLORATION AGE UNDER 70 WITHOUT C.C.....196	14	13	12	10	13	11.4	12.0	11.9	10.1	9.3
TOTAL CHOLECYSTECTOMY WITHOUT COMMON BILE DUCT										
EXPLORATION AGE 70 OR OVER AND/OR C.C.....197	58	61	60	67	75	11.1	11.3	10.8	9.8	8.7
TOTAL CHOLECYSTECTOMY WITHOUT COMMON BILE DUCT										
EXPLORATION AGE UNDER 70 WITHOUT C.C.....198	214	218	233	212	208	8.4	8.1	7.8	7.5	6.5
HEPATOBIILIARY DIAGNOSTIC PROCEDURE FOR										
MALIGNANCY.....199	*5	*5	*4	*3	*4	*26.2	*17.5	*23.3	*22.9	*13.0
HEPATOBIILIARY DIAGNOSTIC PROCEDURE FOR										
NON-MALIGNANCY.....200	25	24	16	18	13	9.3	9.4	11.7	8.9	8.8
OTHER HEPATOBIILIARY OR PANCREAS OPERATING										
ROOM PROCEDURES.....201	*2	*2	*5	*6	*5	*17.1	*21.5	*14.3	*11.3	*11.7
CIRRHOSIS AND ALCOHOLIC HEPATITIS.....202	59	56	47	44	40	11.8	11.9	11.1	9.6	10.7
MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS.....203	21	23	17	19	19	10.7	9.0	9.7	8.5	9.2
DISORDERS OF PANCREAS EXCEPT MALIGNANCY.....204	76	86	84	80	90	8.5	7.5	8.1	7.6	6.8
DISORDERS OF LIVER EXCEPT MALIGNANCY,										
CIRRHOSIS, ALCOHOLIC HEPATITIS AGE										
70 OR OVER AND/OR C.C.....205	23	26	26	25	31	11.2	10.6	9.6	10.4	10.2
DISORDERS OF LIVER EXCEPT MALIGNANCY,										
CIRRHOSIS, ALCOHOLIC HEPATITIS AGE										
UNDER 70 WITHOUT C.C.....206	47	48	51	41	36	7.1	7.4	6.5	6.1	6.6
DISORDERS OF THE BILIARY TRACT AGE										
70 OR OVER AND/OR C.C.....207	25	24	30	21	22	7.6	6.3	6.4	6.0	5.4
DISORDERS OF THE BILIARY TRACT AGE										
UNDER 70 WITHOUT C.C.....208	85	83	79	72	64	4.7	4.5	4.2	4.0	3.4

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TABLE 1. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS UNDER 65 YEARS OF AGE DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 8: DISEASES AND DISORDERS OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE										
MAJOR JOINT PROCEDURES.....209	43	45	50	51	56	18.7	16.7	16.5	16.1	13.7
HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 70 OR OVER AND/OR C.C.....210	13	14	17	16	19	33.4	27.6	24.7	21.9	20.6
HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 18-69 WITHOUT C.C.....211	37	40	37	34	37	18.9	14.2	16.8	16.4	14.1
HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE UNDER 18.....212	19	17	16	18	16	13.9	11.4	14.9	11.8	10.4
AMPUTATIONS FOR MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DISORDERS.....213	*8	*5	*6	*6	*7	*13.5	*12.7	*9.9	*10.9	*20.8
BACK AND NECK PROCEDURES AGE 70 OR OVER AND/OR C.C.....214	13	15	14	17	23	24.0	22.0	23.5	21.2	15.3
BACK AND NECK PROCEDURES AGE UNDER 70 WITHOUT C.C.....215	191	188	219	240	251	12.7	11.3	11.1	10.4	9.2
BIOPSIES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....216	*8	*10	12	12	*9	*10.8	*12.0	10.6	7.2	*5.4
WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND, FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS.....217	31	34	38	32	40	14.6	13.5	12.2	13.7	13.0
LOWER EXTREMITY AND HUMERUS PROCEDURE EXCEPT HIP, FOOT, FEMUR AGE 70 OR OVER AND/OR C.C.....218	*7	*9	*8	11	*10	*31.9	*17.9	*17.3	22.9	*15.6
LOWER EXTREMITY AND HUMERUS PROCEDURE EXCEPT HIP, FOOT, FEMUR AGE 18-69 WITHOUT C.C.....219	104	103	114	109	109	7.2	7.4	6.8	7.1	6.4
LOWER EXTREMITY AND HUMERUS PROCEDURE EXCEPT HIP, FOOT, FEMUR AGE UNDER 18.....220	29	21	27	34	36	5.3	5.3	5.7	6.2	5.2
KNEE PROCEDURES AGE 70 OR OVER AND/OR C.C.....221	*5	*4	*3	*4	*7	*15.4	*12.3	*13.0	*12.4	*6.6
KNEE PROCEDURES AGE UNDER 70 WITHOUT C.C.....222	237	232	226	214	193	5.0	4.6	4.0	3.7	3.3
UPPER EXTREMITY PROCEDURE EXCEPT HUMERUS AND HAND AGE 70 OR OVER AND/OR C.C.....223	*2	*3	*3	*6	*6	*10.3	*9.5	*7.5	*6.9	*7.3
UPPER EXTREMITY PROCEDURE EXCEPT HUMERUS AND HAND AGE UNDER 70 WITHOUT C.C.....224	78	92	84	93	89	4.3	4.3	4.3	4.2	3.9
FOOT PROCEDURES.....225	180	198	210	235	219	4.8	4.1	4.0	3.6	3.3
SOFT TISSUE PROCEDURES AGE 70 OR OVER AND/OR C.C.....226	*3	*5	*3	*3	*2	*11.3	*24.2	*9.2	*15.9	*6.9
SOFT TISSUE PROCEDURES AGE UNDER 70 WITHOUT C.C.....227	68	79	75	66	63	4.3	4.2	4.1	3.3	3.5
GANGLION (HAND) PROCEDURES.....228	45	39	33	23	15	2.2	2.0	2.0	1.8	1.6
HAND PROCEDURES EXCEPT GANGLION.....229	135	127	131	111	102	3.2	2.8	2.8	3.0	2.9
LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES OF HIP AND FEMUR.....230	23	27	21	20	26	4.8	4.6	4.2	4.6	4.2
LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR.....231	107	113	114	102	103	4.2	3.4	4.0	4.3	3.8
ARTHROSCOPY.....232	49	57	51	48	38	3.1	3.3	3.1	2.9	2.2
OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE OPERATING ROOM PROCEDURE AGE 70 OR OVER AND/OR C.C.....233	*8	*8	*7	*8	*6	*16.9	*13.9	*12.9	*16.7	*14.2
OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE OPERATING ROOM PROCEDURE AGE UNDER 70 WITHOUT C.C.....234	47	57	45	51	46	5.8	5.4	5.2	6.1	5.2
FRACTURES OF FEMUR.....235	26	22	19	20	17	20.2	18.7	19.5	18.9	13.9
FRACTURES OF HIP AND PELVIS.....236	27	27	26	23	25	13.3	11.5	12.4	11.2	11.4
SPRAINS, STRAINS, AND DISLOCATIONS OF HIP, PELVIS AND THIGH.....237	*7	*5	*4	*5	*6	*7.3	*7.2	*7.8	*6.1	*6.4
OSTEOMYELITIS.....238	*9	*9	*8	*7	*9	*13.3	*13.5	*12.5	*15.5	*10.9
PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY.....239	55	46	47	43	38	9.2	8.1	7.0	5.0	6.0
CONNECTIVE TISSUE DISORDERS AGE 70 OR OVER AND/OR C.C.....240	18	25	22	26	20	14.5	11.1	10.0	9.3	11.6
CONNECTIVE TISSUE DISORDERS AGE UNDER 70 WITHOUT C.C.....241	48	47	47	47	36	8.6	8.2	8.7	7.6	6.4
SEPTIC ARTHRITIS.....242	*4	*7	*6	*9	*7	*10.1	*8.8	*11.9	*13.2	*11.5
MEDICAL BACK PROBLEMS.....243	781	800	790	827	780	7.4	7.2	7.2	6.6	6.1
BONE DISEASES AND SEPTIC ARTHROPATHY AGE 70 OR OVER AND/OR C.C.....244	*9	10	10	*7	11	*8.7	9.7	7.6	*7.6	6.7
BONE DISEASES AND SEPTIC ARTHROPATHY AGE UNDER 70 WITHOUT C.C.....245	48	35	37	23	27	7.1	6.5	5.7	5.8	5.0
NON-SPECIFIC ARTHROPATHIES.....246	16	15	16	*8	*8	5.4	7.6	5.3	*6.4	*6.9
SIGNS AND SYMPTOMS OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....247	115	101	98	102	88	5.3	5.0	4.7	4.9	4.6
TENDONITIS, MYOSITIS AND BURSITIS.....248	46	55	48	40	41	5.8	5.5	4.9	4.9	4.4
AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....249	11	13	*10	10	*8	4.3	3.7	*5.2	3.2	*5.9
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF FOREARM, HAND, FOOT AGE 70 OR OVER AND/OR C.C.....250	*6	*5	*9	*9	*5	*6.5	*7.1	*8.3	*6.7	*6.1
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF FOREARM, HAND, FOOT AGE 18-69 WITHOUT C.C.....251	57	42	45	49	41	4.1	3.4	3.3	3.2	3.1
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF FOREARM, HAND, FOOT AGE UNDER 18.....252	49	46	44	40	41	2.2	1.9	1.9	1.9	1.6
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF UPPER ARM, LOWER LEG EXCEPT FOOT AGE 70 OR OVER AND/OR C.C.....253	15	14	20	15	16	9.2	6.8	7.6	6.7	6.3
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF UPPER ARM, LOWER LEG EXCEPT FOOT AGE 18-69 WITHOUT C.C.....254	117	92	106	82	80	5.0	4.6	4.4	4.0	4.0
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF UPPER ARM, LOWER LEG EXCEPT FOOT AGE UNDER 18.....255	53	52	53	43	38	3.5	4.1	3.1	3.0	3.2
OTHER DIAGNOSES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....256	55	59	61	58	53	5.1	5.3	5.1	5.7	4.4

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 9: DISEASES AND DISORDERS OF THE SKIN, SUBCUTANEOUS TISSUE AND BREAST										
TOTAL MASTECTOMY FOR MALIGNANCY AGE 70 OR OVER AND/OR C.C.....257	13	17	17	17	15	9.9	10.1	10.5	10.1	7.9
TOTAL MASTECTOMY FOR MALIGNANCY AGE UNDER 70 WITHOUT C.C.....258	37	38	42	46	43	9.4	8.4	8.5	7.0	7.1
SUBTOTAL MASTECTOMY FOR MALIGNANCY AGE 70 OR OVER AND/OR C.C.....259	*2	*3	*2	*	*4	*10.7	*14.9	*14.4	*	*7.5
SUBTOTAL MASTECTOMY FOR MALIGNANCY AGE UNDER 70.....260	*10	*10	10	11	10	*5.7	*5.1	3.3	4.9	3.2
BREAST PROCEDURE FOR NON-MALIGNANCY EXCEPT BIOPSY AND LOCAL EXCISION.....261	80	73	64	77	67	3.6	3.7	3.5	3.6	3.5
BREAST BIOPSY AND LOCAL EXCISION FOR NON-MALIGNANCY.....262	173	161	141	112	99	3.0	2.7	2.6	2.9	2.5
SKIN GRAFTS FOR SKIN ULCER OR CELLULITIS AGE 70 OR OVER AND/OR C.C.....263	*5	*5	*5	*8	*9	*35.5	*24.4	*23.8	*36.6	*26.3
SKIN GRAFTS FOR SKIN ULCER OR CELLULITIS AGE 70 OR OVER WITHOUT C.C.....264	12	10	13	*9	11	16.2	20.2	24.5	*18.0	19.9
SKIN GRAFTS EXCEPT FOR SKIN ULCER OR CELLULITIS WITH C.C.....265	*10	*10	11	11	*10	*14.4	*10.8	18.9	14.2	*10.7
SKIN GRAFTS EXCEPT FOR SKIN ULCER OR CELLULITIS WITHOUT C.C.....266	75	78	65	65	60	6.2	6.9	6.5	5.7	5.7
PERIANAL AND PILONICAL PROCEDURES.....267	54	51	48	44	35	4.0	3.7	3.9	3.4	3.1
SKIN, SUBCUTANEOUS TISSUE AND BREAST PLASTIC PROCEDURES.....268	60	51	40	43	41	3.4	3.8	3.6	3.3	2.9
OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST OPERATING ROOM PROCEDURE AGE 70 OR OVER AND/OR C.C.....269	21	14	16	15	16	12.4	10.1	11.0	8.4	8.4
OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST OPERATING ROOM PROCEDURE AGE UNDER 70 WITHOUT C.C.....270	172	178	156	136	102	3.6	3.8	3.7	3.2	3.4
SKIN ULCERS.....271	11	15	15	12	12	17.1	18.0	15.3	16.7	11.9
MAJOR SKIN DISORDERS AGE 70 OR OVER AND/OR C.C.....272	*7	*6	*8	15	13	*11.5	*10.5	*9.1	10.6	10.4
MAJOR SKIN DISORDERS AGE UNDER 70 WITHOUT C.C.....273	19	16	24	18	14	7.8	8.3	8.2	6.4	7.9
MALIGNANT BREAST DISORDERS AGE 70 OR OVER AND/OR C.C.....274	36	43	33	32	35	11.1	12.7	11.5	10.2	9.3
MALIGNANT BREAST DISORDERS AGE UNDER 70 WITHOUT C.C.....275	22	27	24	21	19	8.2	8.4	6.3	7.8	4.8
NON-MALIGNANT BREAST DISORDERS.....276	15	15	13	12	12	3.4	4.3	3.4	3.5	3.1
CELLULITIS AGE 70 OR OVER AND/OR C.C.....277	30	24	28	39	40	9.1	9.5	8.2	9.3	8.3
CELLULITIS AGE 18-69 WITHOUT C.C.....278	87	96	92	97	114	6.4	6.1	6.1	6.4	5.9
CELLULITIS AGE UNDER 18.....279	38	34	39	34	36	4.8	4.7	4.4	4.7	4.3
TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST AGE 70 OR OVER AND/OR C.C.....280	58	55	51	51	49	5.2	4.5	4.5	4.0	4.0
TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST AGE 18-69 WITHOUT C.C.....281	137	140	141	125	124	3.4	3.3	3.3	3.3	3.4
TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST AGE UNDER 18.....282	58	59	53	45	39	2.8	2.8	2.8	2.7	2.5
MINOR SKIN DISORDERS AGE 70 OR OVER AND/OR C.C.....283	12	14	13	14	14	18.5	7.6	7.0	8.2	6.9
MINOR SKIN DISORDERS AGE UNDER 70 WITHOUT C.C.....284	73	67	64	53	46	4.6	3.6	3.9	3.9	4.5

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 10: ENDOCRINE, NUTRITIONAL, AND METABOLIC DISEASES AND DISORDERS										
AMPUTATIONS FOR ENDOCRINE, NUTRITIONAL, AND METABOLIC DISORDERS.....285	*8	*6	*8	12	*9	*35.5	*36.3	*29.7	33.1	*23.0
ADRENAL AND PITUITARY PROCEDURES.....286	*6	*5	*6	*5	*5	*13.1	*13.0	*13.5	*15.5	*17.8
SKIN GRAFTS AND WOUND DEBRIDEMENT FOR ENDOCRINE, NUTRITIONAL AND METABOLISM DISORDERS.....287	*4	*3	*4	*6	*5	*19.7	*28.1	*25.1	*15.0	*18.3
OPERATING ROOM PROCEDURES FOR OBESITY.....288	27	25	23	17	14	11.2	9.3	10.2	10.6	7.2
PARATHYROID PROCEDURES.....289	*6	*5	*5	*5	*6	*8.5	*11.9	*7.4	*7.4	*5.9
THYROID PROCEDURES.....290	57	48	49	46	52	5.6	5.1	5.0	4.5	4.4
THYROIDECTOMY PROCEDURES.....291	*4	*6	*6	*6	*6	*2.9	*3.4	*2.9	*2.3	*2.3
OTHER ENDOCRINE, NUTRITIONAL AND METABOLISM OPERATING ROOM PROCEDURE AGE 70 OR OVER AND/OR C.C.....292	*4	*5	*5	*8	*6	*18.2	*18.0	*12.7	*21.3	*15.8
OTHER ENDOCRINE, NUTRITIONAL AND METABOLISM OPERATING ROOM PROCEDURE AGE UNDER 70 WITHOUT C.C.....293	*8	*7	*7	*8	*4	*7.8	*7.7	*9.7	*6.7	*4.1
DIABETES AGE 36 OR OVER.....294	256	249	259	243	204	8.6	8.1	8.2	7.4	6.9
DIABETES AGE UNDER 36.....295	102	110	112	111	105	6.8	6.3	5.9	6.3	5.5
NUTRITIONAL AND MISCELLANEOUS METABOLIC DISORDERS AGE 70 OR OVER AND/OR C.C.....296	41	44	51	55	57	8.9	8.4	7.2	7.3	6.3
NUTRITIONAL AND MISCELLANEOUS METABOLIC DISORDERS AGE 18-69 WITHOUT C.C.....297	73	71	67	74	63	5.4	5.4	4.9	5.1	4.4
NUTRITIONAL AND MISCELLANEOUS METABOLIC DISORDERS AGE UNDER 18.....298	40	46	46	49	56	6.4	7.3	5.9	5.3	4.3
INBORN ERRORS OF METABOLISM.....299	15	13	13	13	*9	6.6	7.1	5.9	5.9	*5.1
ENDOCRINE DISORDERS AGE 70 OR OVER AND/OR C.C.....300	15	18	15	16	13	9.3	7.6	8.2	7.7	8.7
ENDOCRINE DISORDERS AGE UNDER 70 WITHOUT C.C.....301	52	48	51	37	39	5.8	5.5	5.3	4.7	4.1
MAJOR DIAGNOSTIC CATEGORY 11: DISEASES AND DISORDERS OF THE KIDNEY AND URINARY TRACT										
KIDNEY TRANSPLANT.....302	*3	*3	*5	*8	*7	*25.1	*29.9	*27.6	*30.5	*25.5
KIDNEY, URETER AND MAJOR BLADDER PROCEDURE FOR NEOPLASM.....303	*9	11	10	*10	*10	*16.3	16.6	16.5	*17.1	*11.7
KIDNEY, URETER AND MAJOR BLADDER PROCEDURE FOR NON-MALIGNANCY AGE 70 OR OVER AND/OR C.C.....304	20	17	19	23	23	14.2	14.0	14.0	14.6	10.7
KIDNEY, URETER AND MAJOR BLADDER PROCEDURE FOR NON-MALIGNANCY AGE UNDER 70 WITHOUT C.C.....305	67	69	63	62	64	9.6	10.1	9.9	8.9	8.0
PROSTATECTOMY AGE 70 OR OVER AND/OR C.C.....306	*2	*3	*4	*4	*3	*17.4	*11.2	*6.9	*9.5	*10.2
PROSTATECTOMY AGE UNDER 70 WITHOUT C.C.....307	*5	*5	*6	*7	*4	*9.2	*7.8	*7.3	*7.8	*6.1
MINOR BLADDER PROCEDURES AGE 70 OR OVER AND/OR C.C.....308	*8	*9	*7	*8	*9	*8.8	*7.3	*6.5	*11.0	*9.9
MINOR BLADDER PROCEDURES AGE UNDER 70 WITHOUT C.C.....309	18	18	17	20	17	6.4	5.1	6.3	5.9	4.0
TRANSURETHRAL PROCEDURES AGE 70 OR OVER AND/OR C.C.....310	*9	11	18	11	17	*6.2	6.2	5.7	5.9	5.8
TRANSURETHRAL PROCEDURES AGE UNDER 70 WITHOUT C.C.....311	51	57	58	58	49	4.4	4.6	4.9	4.1	3.7
URETHRAL PROCEDURES, AGE 70 OR OVER AND/OR C.C.....312	*6	*5	*4	*4	*5	*6.5	*9.8	*5.6	*4.8	*5.6
URETHRAL PROCEDURES, AGE 18-69 WITHOUT C.C.....313	24	26	19	20	14	4.4	5.0	4.2	3.8	3.6
URETHRAL PROCEDURES, AGE UNDER 18.....314	19	17	17	12	11	3.2	2.2	1.9	2.3	1.6
OTHER KIDNEY AND URINARY TRACT OPERATING ROOM PROCEDURES.....315	16	19	23	19	19	10.1	12.6	11.3	12.9	11.7
RENAL FAILURE WITHOUT DIALYSIS.....316	44	42	32	30	32	6.8	7.7	8.5	7.8	7.0
RENAL FAILURE WITH DIALYSIS.....317	*	*	-	-	-	*	*	-	-	-
KIDNEY AND URINARY TRACT NEOPLASMS AGE 70 OR OVER AND/OR C.C.....318	*6	*9	*7	*9	*5	*8.0	*7.1	*12.2	*14.8	*12.0
KIDNEY AND URINARY TRACT NEOPLASMS AGE UNDER 70 WITHOUT C.C.....319	15	*8	11	10	*5	4.2	*5.3	4.6	5.0	*6.6
KIDNEY AND URINARY TRACT INFECTIONS AGE 70 OR OVER AND/OR C.C.....320	53	50	51	58	59	7.3	6.4	6.8	6.6	6.4
KIDNEY AND URINARY TRACT INFECTIONS AGE 18-69 WITHOUT C.C.....321	157	132	142	121	115	4.5	4.6	4.9	4.6	4.5
KIDNEY AND URINARY TRACT INFECTIONS AGE UNDER 18.....322	61	60	55	51	52	3.6	3.8	3.8	3.6	4.3
URINARY STONES AGE 70 OR OVER AND/OR C.C.....323	39	41	37	47	50	4.2	3.6	3.5	3.5	3.1
URINARY STONES AGE UNDER 70 WITHOUT C.C.....324	183	171	166	175	162	2.9	3.0	2.7	2.7	2.4
KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS AGE 70 OR OVER AND/OR C.C.....325	13	10	12	12	14	5.4	5.8	4.4	3.7	4.2
KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS AGE 18-69 WITHOUT C.C.....326	30	32	28	29	19	3.6	3.4	3.3	3.6	3.4
KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS AGE UNDER 18.....327	17	14	15	12	*9	4.2	4.6	4.1	2.7	*3.1
URETHRAL STRICTURE AGE 70 OR OVER AND/OR C.C.....328	*7	*6	*6	*4	*3	*4.7	*4.7	*5.0	*3.8	*5.2
URETHRAL STRICTURE AGE 18-69 WITHOUT C.C.....329	15	10	10	*7	*6	3.3	5.1	3.5	*3.5	*3.6
URETHRAL STRICTURE AGE UNDER 18.....330	11	*8	*8	*5	*5	2.0	*2.0	*1.7	*1.4	*1.2
OTHER KIDNEY AND URINARY TRACT DIAGNOSES AGE 70 OR OVER AND/OR C.C.....331	24	25	24	27	30	9.1	8.4	6.7	7.3	7.0
OTHER KIDNEY AND URINARY TRACT DIAGNOSES AGE 18-69 WITHOUT C.C.....332	49	51	46	35	36	5.1	5.1	4.9	5.3	4.3
OTHER KIDNEY AND URINARY TRACT DIAGNOSES AGE UNDER 18.....333	24	20	17	20	13	5.0	4.5	3.6	3.4	3.9

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 12: DISEASES AND DISORDERS OF THE MALE REPRODUCTIVE SYSTEM										
MAJOR MALE PELVIC PROCEDURES WITH C.C.....334	*2	*2	*	*3	*2	*15.1	*16.5	*	*13.4	*10.5
MAJOR MALE PELVIC PROCEDURES WITHOUT C.C.....335	*6	*5	*6	*5	*5	*13.9	*13.3	*12.5	*12.0	*11.1
TRANSURETHRAL PROSTATECTOMY AGE 70 OR OVER AND/OR C.C.....336	17	17	18	15	23	11.0	7.9	10.3	9.0	7.2
TRANSURETHRAL PROSTATECTOMY AGE UNDER 70 WITHOUT C.C.....337	44	45	48	40	42	7.6	7.2	7.3	7.4	6.3
TESTES PROCEDURES, FOR MALIGNANCY.....338	*7	*4	*6	*6	*8	*6.7	*9.3	*4.1	*7.6	*5.7
TESTES PROCEDURES, NON-MALIGNANT AGE 18 OR OVER.....339	54	47	55	52	50	3.8	3.4	3.5	3.1	3.0
TESTES PROCEDURES, NON-MALIGNANT AGE UNDER 18...340	35	42	40	36	37	2.9	2.6	2.5	2.0	2.0
PENIS PROCEDURES.....341	15	16	15	18	22	6.4	5.3	4.7	5.3	6.1
CIRCUMCISION AGE 18 OR OVER.....342	29	26	24	19	11	2.6	2.3	2.5	1.9	2.0
CIRCUMCISION AGE UNDER 18.....343	30	31	25	18	20	1.7	1.8	1.8	1.7	1.7
OTHER MALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURES FOR MALIGNANCY.....344	*3	*5	*4	*3	*5	*11.4	*10.1	*8.3	*8.7	*6.3
OTHER MALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURE EXCEPT FOR MALIGNANCY.....345	*8	*4	*6	*5	*3	*5.2	*4.2	*4.8	*3.6	*2.7
MALIGNANCY, MALE REPRODUCTIVE SYSTEM, AGE 70 OR OVER AND/OR C.C.....346	*8	*8	*8	*8	*9	*13.4	*11.2	*8.5	*7.5	*9.3
MALIGNANCY, MALE REPRODUCTIVE SYSTEM, AGE UNDER 70 WITHOUT C.C.....347	13	17	16	13	*9	5.5	5.7	5.8	4.3	*6.0
BENIGN PROSTATIC HYPERTROPHY AGE 70 OR OVER AND/OR C.C.....348	*5	*5	*4	*6	*4	*5.7	*5.0	*3.9	*3.1	*4.2
BENIGN PROSTATIC HYPERTROPHY AGE UNDER 70 WITHOUT C.C.....349	18	13	13	12	11	3.4	2.6	2.9	2.9	3.1
INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM...350	56	54	47	45	45	4.7	4.4	4.3	4.3	4.1
STERILIZATION, MALE.....351	*7	*4	*3	*3	*	*1.6	*1.3	*1.5	*1.5	*
OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES.....352	14	13	13	12	10	3.4	2.6	3.0	3.5	3.0
MAJOR DIAGNOSTIC CATEGORY 13: DISEASES AND DISORDERS OF THE FEMALE REPRODUCTIVE SYSTEM										
PELVIC EVISCERATION, RADICAL HYSTERECTOMY AND VULVECTOMY.....353	*5	*6	*8	*6	*9	*14.2	*12.7	*15.0	*10.5	*15.1
NONRADICAL HYSTERECTOMY AGE 70 OR OVER AND/OR C.C.....354	62	60	59	65	78	10.0	9.8	9.0	9.0	8.6
NONRADICAL HYSTERECTOMY AGE UNDER 70 WITHOUT C.C.....355	513	527	495	521	493	7.6	7.3	7.2	6.9	6.6
FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURE.....356	86	91	82	79	83	7.9	7.7	7.1	7.2	6.3
UTERUS AND ADENEXA PROCEDURES, FOR MALIGNANCY...357	*5	*6	*5	*4	*5	*11.6	*10.9	*13.7	*9.7	*10.5
UTERUS AND ADENEXA PROCEDURE FOR NON-MALIGNANCY EXCEPT TUBAL INTERRUPTION.....358	197	207	217	203	217	6.2	6.1	6.1	5.7	5.5
TUBAL INTERRUPTION FOR NON-MALIGNANCY.....359	115	101	89	74	64	2.9	2.7	2.7	2.5	2.5
VAGINA, CERVIX AND VULVA PROCEDURES.....360	114	94	92	78	72	3.0	3.0	2.5	3.1	2.5
LAPAROSCOPY AND ENDOSCOPY (FEMALE) EXCEPT TUBAL INTERRUPTION.....361	136	147	152	140	111	3.1	2.8	3.0	2.7	2.6
LAPAROSCOPIC TUBAL INTERRUPTION.....362	149	142	121	81	59	1.7	1.6	1.5	1.4	1.3
DILATION AND CURETTAGE OF UTERUS, CONIZATION AND RADIO-IMPLANT, FOR MALIGNANCY.....363	26	30	23	24	15	3.6	3.8	3.4	3.4	3.0
DILATION AND CURETTAGE OF UTERUS, CONIZATION EXCEPT FOR MALIGNANCY.....364	452	392	345	283	190	2.2	2.0	2.0	1.9	1.8
OTHER FEMALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURES.....365	24	23	24	28	20	9.2	7.8	8.3	8.0	8.4
MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM AGE 70 OR OVER AND/OR C.C.....366	17	20	20	16	20	9.9	8.2	12.8	8.5	6.5
MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM AGE UNDER 70 WITHOUT C.C.....367	37	48	53	48	48	4.0	3.7	3.6	3.3	2.8
INFECTIONS, FEMALE REPRODUCTIVE SYSTEM.....368	117	114	116	126	123	4.9	4.7	4.7	4.7	4.5
MENSTRUAL AND OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS.....369	123	126	123	115	110	3.3	3.3	3.1	3.2	2.7
MAJOR DIAGNOSTIC CATEGORY 14: PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM										
CESAREAN SECTION WITH C.C.....370	80	71	81	97	101	8.1	8.6	7.9	7.4	7.2
CESAREAN SECTION WITHOUT C.C.....371	539	631	649	708	712	6.3	6.1	5.7	5.6	5.4
VAGINAL DELIVERY WITH COMPLICATING DIAGNOSES...372	151	162	171	160	177	4.4	4.3	4.1	4.0	3.7
VAGINAL DELIVERY WITHOUT COMPLICATING DIAGNOSES.....373	2,742	2,790	2,784	2,746	2,624	3.1	3.0	2.9	2.9	2.7
VAGINAL DELIVERY WITH STERILIZATION AND/OR DILATION AND CURETTAGE OF UTERUS.....374	236	246	247	253	225	3.8	3.6	3.6	3.5	3.3
VAGINAL DELIVERY WITH OPERATING ROOM PROCEDURE EXCEPT STERILIZATION AND/OR DILATION AND CURETTAGE OF UTERUS.....375	*3	*4	*4	*3	*4	*6.2	*5.0	*6.5	*4.1	*4.8
POSTPARTUM DIAGNOSES WITHOUT OPERATING ROOM PROCEDURE.....376	21	30	28	26	30	4.4	4.3	3.5	3.7	4.0
POSTPARTUM DIAGNOSES WITH OPERATING ROOM PROCEDURE.....377	17	19	16	18	18	2.2	2.9	2.8	2.9	3.6
ECTOPIC PREGNANCY.....378	48	61	58	66	72	5.8	5.4	5.2	4.7	4.6
THREATENED ABORTION.....379	62	83	99	101	111	2.8	2.7	2.9	2.8	2.7

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 14: PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM--CON.										
ABORTION WITHOUT DILATION AND CURETTAGE OF UTERUS.....380	97	89	90	94	77	1.8	1.9	1.6	1.7	1.7
ABORTION WITH DILATION AND CURETTAGE OF UTERUS.....381	377	355	325	320	255	1.7	1.7	1.6	1.5	1.8
FALSE LABOR.....382	130	128	123	112	102	1.5	1.2	1.2	1.2	1.3
OTHER ANTEPARTUM DIAGNOSES WITH MEDICAL COMPLICATIONS.....383	148	145	175	201	199	4.0	4.4	4.1	4.0	3.8
OTHER ANTEPARTUM DIAGNOSES WITHOUT MEDICAL COMPLICATIONS.....384	111	103	113	113	107	3.1	2.5	2.8	2.6	2.6
MAJOR DIAGNOSTIC CATEGORY 15: NEWBORNS AND OTHER NEONATES WITH CONDITIONS ORIGINATING IN THE PERINATAL PERIOD										
NEONATES, DIED OR TRANSFERRED.....385	13	28	29	30	19	11.1	9.4	10.0	9.2	12.1
EXTREME IMMATUREITY, NEONATE.....386	*8	22	26	30	21	*17.2	28.1	33.2	33.1	36.3
PREMATURITY WITH MAJOR PROBLEMS.....387	*5	19	18	33	19	*19.6	23.6	17.6	19.2	22.1
PREMATURITY WITHOUT MAJOR PROBLEMS.....388	*7	16	13	19	14	*14.1	13.8	14.6	10.7	9.8
FULL TERM NEONATE WITH MAJOR PROBLEMS.....389	33	42	42	52	47	7.6	7.4	8.7	9.6	7.9
NEONATES WITH OTHER SIGNIFICANT PROBLEMS.....390	16	21	22	29	24	4.7	4.6	4.8	4.3	3.8
NORMAL NEWBORNS.....391	19	32	28	31	33	2.6	2.8	2.9	2.7	2.7
MAJOR DIAGNOSTIC CATEGORY 16: DISEASES AND DISORDERS OF THE BLOOD AND BLOOD-FORMING ORGANS AND IMMUNITY DISORDERS										
SPLENECTOMY AGE 18 OR OVER.....392	*7	*6	*9	*7	*6	*12.5	*11.0	*14.5	*11.0	*12.4
SPLENECTOMY AGE UNDER 18.....393	*2	*2	*4	*2	*	*10.2	*8.2	*22.1	*8.6	*
OTHER OPERATING ROOM PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS.....394	18	19	21	17	15	5.4	4.3	5.0	4.3	3.9
RED BLOOD CELL DISORDERS AGE 18 OR OVER.....395	77	88	81	89	83	6.8	6.5	6.0	7.1	5.9
RED BLOOD CELL DISORDERS AGE UNDER 18.....396	32	28	33	27	28	4.1	3.8	3.7	3.9	4.0
COAGULATION DISORDERS.....397	23	23	18	19	21	4.8	5.8	5.9	5.7	4.4
RETICULOENDOTHELIAL AND IMMUNITY DISORDERS AGE 70 OR OVER AND/OR C.C.....398	*9	12	10	12	16	*7.5	10.3	6.7	8.8	7.7
RETICULOENDOTHELIAL AND IMMUNITY DISORDERS AGE UNDER 70 WITHOUT C.C.....399	25	21	23	24	22	4.9	5.3	5.1	4.9	4.7
MAJOR DIAGNOSTIC CATEGORY 17: MYELOPROLIFERATIVE DISEASES AND DISORDERS, POORLY DIFFERENTIATED MALIGNANCY AND OTHER NEOPLASMS NOT ELSEWHERE CLASSIFIED										
LYMPHOMA OR LEUKEMIA WITH MAJOR OPERATING ROOM PROCEDURE.....400	10	*10	11	13	11	12.7	*18.1	14.7	16.3	17.6
LYMPHOMA OR LEUKEMIA WITH MINOR OPERATING ROOM PROCEDURE AGE 70 OR OVER AND/OR C.C.....401	*3	*3	*	*	*2	*20.6	*15.3	*	*	*10.0
LYMPHOMA OR LEUKEMIA WITH MINOR OPERATING ROOM PROCEDURE AGE UNDER 70 WITHOUT C.C.....402	*9	*7	*8	*10	*6	*8.0	*9.5	*8.0	*7.9	*5.2
LYMPHOMA OR LEUKEMIA AGE 70 OR OVER AND/OR C.C.....403	26	33	31	41	30	15.9	12.6	13.6	11.7	13.6
LYMPHOMA OR LEUKEMIA AGE 18-69 WITHOUT C.C.....404	45	55	55	46	49	7.0	8.9	6.7	6.3	6.6
LYMPHOMA OR LEUKEMIA AGE UNDER 18.....405	13	19	23	34	22	8.2	7.4	6.8	5.4	4.9
MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM WITH MAJOR OPERATING ROOM PROCEDURE AND/OR C.C.....406	*	*4	*4	*2	*6	*	*21.4	*27.4	*17.7	*12.4
MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM WITH MAJOR OPERATING ROOM PROCEDURE WITHOUT C.C.....407	*4	*6	*5	*5	*4	*11.7	*13.6	*16.7	*11.8	*9.5
MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM WITH MINOR OPERATING ROOM PROCEDURE.....408	*5	*3	*3	*	*3	*11.1	*16.9	*8.5	*	*4.4
RADIOTHERAPY.....409	*	*	*	*	*	*	*	*	*	*
CHEMOTHERAPY.....410	*3	*4	*6	*7	*6	*2.4	*7.7	*3.5	*2.8	*2.7
HISTORY OF MALIGNANCY WITHOUT ENDOSCOPY.....411	*9	12	12	15	12	*4.6	3.9	5.0	4.2	7.8
HISTORY OF MALIGNANCY WITH ENDOSCOPY.....412	*3	*2	*2	*5	*4	*5.9	*2.8	*5.0	*1.7	*2.9
OTHER MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM DIAGNOSIS AGE 70 OR OVER AND/OR C.C.....413	12	16	13	*8	22	13.1	14.1	12.4	*13.8	9.0
OTHER MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM DIAGNOSIS AGE UNDER 70 WITHOUT C.C.....414	35	29	28	18	26	7.1	6.7	6.5	5.0	6.2

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 18: INFECTIOUS AND PARASITIC DISEASES (SYSTEMIC OR UNSPECIFIED SITES)										
OPERATING ROOM PROCEDURE FOR INFECTIOUS AND PARASITIC DISEASES.....415	20	20	23	19	17	13.5	13.3	17.8	13.5	15.3
SEPTICEMIA AGE 18 OR OVER.....416	14	15	16	21	28	12.3	12.3	14.8	11.7	10.0
SEPTICEMIA AGE UNDER 18.....417	12	11	14	18	18	6.8	6.2	8.4	5.6	6.1
POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS.....418	17	21	20	18	24	6.4	6.6	7.1	6.7	5.4
FEVER OF UNKNOWN ORIGIN AGE 70 OR OVER AND/OR C.C.....419	-	*	*	*	-	-	*	*	*	-
FEVER OF UNKNOWN ORIGIN AGE 18-69 WITHOUT C.C.....420	*6	*8	*6	*5	*6	*5.8	*6.3	*4.0	*4.8	*4.6
VIRAL ILLNESS AGE 18 OR OVER.....421	71	67	71	70	55	4.8	4.7	4.3	4.2	4.2
VIRAL ILLNESS AND FEVER OF UNKNOWN ORIGIN AGE UNDER 18.....422	100	108	109	95	82	3.4	3.3	3.2	3.3	3.4
OTHER INFECTIOUS AND PARASITIC DISEASES DIAGNOSES.....423	42	47	44	35	21	6.9	8.0	7.2	6.0	9.0
MAJOR DIAGNOSTIC CATEGORY 19: MENTAL DISEASES AND DISORDERS										
OPERATING ROOM PROCEDURES WITH PRINCIPAL DIAGNOSIS OF MENTAL ILLNESS.....424	23	20	24	20	17	17.1	13.4	17.9	16.7	12.7
ACUTE ADJUSTMENT REACTIONS AND DISTURBANCES OF PSYCHOSOCIAL DYSFUNCTION.....425	88	92	93	92	77	6.0	6.7	7.1	6.2	6.4
DEPRESSIVE NEUROSES.....426	225	182	166	149	130	10.7	9.3	10.0	10.8	10.0
NEUROSES EXCEPT DEPRESSIVE.....427	53	69	89	89	93	11.3	10.2	11.3	12.7	11.6
DISORDERS OF PERSONALITY AND IMPULSE CONTROL.....428	58	50	43	41	34	14.1	13.5	14.0	13.2	17.5
ORGANIC DISTURBANCES AND MENTAL RETARDATION.....429	43	45	37	41	37	9.4	10.4	9.5	10.6	10.4
PSYCHOSES.....430	333	383	388	388	423	15.6	16.9	16.5	16.4	15.7
CHILDHOOD MENTAL DISORDERS.....431	12	17	24	20	25	18.4	21.8	19.5	20.7	20.4
OTHER DIAGNOSES OF MENTAL DISORDERS.....432	*	*4	*5	*7	*7	*	*6.6	*4.9	*5.2	*7.1
MAJOR DIAGNOSTIC CATEGORY 20: SUBSTANCE USE AND SUBSTANCE-INDUCED ORGANIC MENTAL DISORDERS										
SUBSTANCE USE AND SUBSTANCE-INDUCED ORGANIC MENTAL DISORDERS, LEFT AGAINST MEDICAL ADVICE.....433	83	79	76	77	82	3.9	4.9	5.6	5.1	4.6
DRUG DEPENDENCE.....434	25	29	33	39	43	17.9	17.4	19.1	17.1	17.1
DRUG USE EXCEPT DEPENDENCE.....435	15	20	27	29	34	10.5	16.7	11.3	14.0	13.3
ALCOHOL DEPENDENCE.....436	17	17	24	29	29	26.1	24.1	20.6	21.6	19.2
ALCOHOL USE EXCEPT DEPENDENCE.....437	31	33	42	35	32	4.5	3.4	3.7	4.1	3.8
ALCOHOL AND SUBSTANCE-INDUCED ORGANIC MENTAL SYNDROME.....438	386	403	360	318	323	10.0	10.0	10.6	11.0	10.0
MAJOR DIAGNOSTIC CATEGORY 21: INJURY, POISONING, AND TOXIC EFFECTS OF DRUGS										
SKIN GRAFTS FOR INJURIES.....439	*9	*9	*7	*9	*10	*12.6	*19.8	*12.9	*13.0	*12.6
WOUND DEBRIDEMENTS FOR INJURIES.....440	19	20	20	18	19	8.3	9.1	9.0	9.2	8.3
HAND PROCEDURES FOR INJURIES.....441	19	16	17	12	14	3.1	4.6	3.6	3.0	3.5
OTHER OPERATING ROOM PROCEDURES FOR INJURIES AGE 70 OR OVER AND/OR C.C.....442	16	17	17	20	26	18.2	19.2	15.8	12.6	13.2
OTHER OPERATING ROOM PROCEDURES FOR INJURIES AGE UNDER 70 WITHOUT C.C.....443	55	62	52	51	69	7.1	6.4	8.2	6.0	6.6
MULTIPLE TRAUMA AGE 70 OR OVER AND/OR C.C.....444	11	13	10	*9	14	6.0	5.4	6.4	*6.9	5.6
MULTIPLE TRAUMA AGE 18-69 WITHOUT C.C.....445	38	40	38	42	34	4.6	4.3	4.6	4.4	4.1
MULTIPLE TRAUMA AGE UNDER 18.....446	14	12	16	16	17	3.4	3.2	3.6	3.6	3.5
ALLERGIC REACTIONS AGE 18 OR OVER.....447	12	14	13	14	12	3.6	3.1	3.1	3.9	3.2
ALLERGIC REACTIONS AGE UNDER 18.....448	*4	*4	*6	*6	*5	*2.4	*2.2	*2.7	*3.0	*3.2
TOXIC EFFECTS OF DRUGS AGE 70 OR OVER AND/OR C.C.....449	40	32	42	39	49	4.9	4.7	5.7	5.4	6.0
TOXIC EFFECTS OF DRUGS AGE 18-69 WITHOUT C.C.....450	118	107	123	107	114	3.1	3.2	3.0	3.2	3.0
TOXIC EFFECTS OF DRUGS AGE UNDER 18.....451	74	65	65	68	65	3.3	2.7	2.2	3.0	2.7
COMPLICATIONS OF TREATMENT AGE 70 OR OVER AND/OR C.C.....452	*10	12	18	14	18	*5.6	5.7	5.4	5.8	7.0
COMPLICATIONS OF TREATMENT AGE UNDER 70 WITHOUT C.C.....453	38	45	43	45	38	4.2	4.3	5.1	4.5	4.0
OTHER INJURIES, POISONINGS AND TOXIC EFFECTS DIAGNOSIS AGE 70 OR OVER AND/OR C.C.....454	*7	*8	*6	*8	*10	*5.8	*6.4	*5.0	*10.4	*7.3
OTHER INJURIES, POISONINGS AND TOXIC EFFECTS DIAGNOSIS AGE UNDER 70 WITHOUT C.C.....455	23	19	23	24	19	4.1	5.2	2.8	2.8	3.8
MAJOR DIAGNOSTIC CATEGORY 22: BURNS										
BURNS, TRANSFERRED TO ANOTHER ACUTE CARE FACILITY.....456	*3	*	*	*2	*2	*13.2	*	*	*5.6	*8.1
EXTENSIVE BURNS.....457	*3	*4	*2	*3	*4	*23.7	*30.1	*22.3	*20.9	*34.1
NON-EXTENSIVE BURNS WITH SKIN GRAFTS.....458	16	15	15	14	15	27.1	19.8	18.4	17.9	18.7
NON-EXTENSIVE BURNS WITH WOUND DEBRIDEMENT AND OTHER OPERATING ROOM PROCEDURE.....459	*9	*7	*8	*9	10	*11.3	*8.9	*12.2	*7.9	9.9
NON-EXTENSIVE BURNS WITHOUT OPERATING ROOM PROCEDURE.....460	44	54	43	50	47	8.0	7.7	6.9	6.2	6.0

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 23: FACTORS INFLUENCING HEALTH STATUS AND OTHER CONTACTS WITH HEALTH SERVICES										
OPERATING ROOM PROCEDURE WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES.....461	47	35	36	36	29	5.4	4.8	6.5	5.3	5.7
REHABILITATION.....462	*	*	-	*	*	*	*	-	*	*
SIGNS AND SYMPTOMS WITH C.C.....463	*	*	*	*	*	*	*	*	*	*
SIGNS AND SYMPTOMS WITHOUT C.C.....464	*8	*7	*8	*7	*6	*3.7	*4.1	*3.3	*4.0	*3.6
AFTERCARE WITH HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS.....465	*	*	*	*	*	*	*	*	*	*
AFTERCARE WITHOUT HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS.....466	*3	*3	*3	*4	*6	*2.5	*3.4	*4.2	*2.7	*1.9
OTHER FACTORS INFLUENCING HEALTH STATUS.....467	237	220	242	228	212	3.8	4.0	3.6	3.7	4.0
UNRELATED OPERATING ROOM PROCEDURE.....468	429	406	401	392	337	10.5	10.7	11.2	10.0	9.8
PRINCIPAL DIAGNOSIS INVALID AS DISCHARGE DIAGNOSIS.....469	*8	10	*8	*4	*8	*2.9	2.6	*3.5	*2.9	*2.4
UNGROUPABLE.....470	-	-	-	*	-	-	-	-	*	-

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
ALL DISCHARGES.....1-470	9,864	10,408	10,697	11,302	11,226	10.7	10.5	10.1	9.7	8.9
MAJOR DIAGNOSTIC CATEGORY 1: DISEASES AND DISORDERS OF THE NERVOUS SYSTEM										
CRANIOTOMY AGE 18 OR OVER EXCEPT FOR TRAUMA.....1	13	17	19	24	21	24.5	30.3	22.7	30.3	23.6
CRANIOTOMY FOR TRAUMA AGE 18 OR OVER.....2	*4	*3	*4	*5	*5	*25.8	*17.5	*16.9	*21.1	*22.5
CRANIOTOMY AGE UNDER 18.....3	...	...	...	...	...	...	...	...	...	...
SPINAL PROCEDURES.....4	*2	*4	*5	*3	*2	*25.7	*21.6	*33.0	*37.5	*17.5
EXTRACRANIAL VASCULAR PROCEDURES.....5	31	38	41	49	54	11.9	12.8	11.6	10.6	9.2
CARPAL TUNNEL RELEASE.....6	14	19	16	18	11	3.0	3.5	3.5	2.8	3.5
PERIPHERAL AND CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES AGE 70 OR OVER AND/OR C.C.....7	*8	*8	11	*6	*9	*18.9	*13.7	11.4	*17.9	*14.7
PERIPHERAL AND CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES AGE UNDER 70 WITHOUT C.C.....8	*5	*4	*4	*2	*2	*4.7	*4.6	*9.3	*9.8	*3.2
SPINAL DISORDERS AND INJURIES.....9	*4	*3	*3	*2	*4	*20.0	*18.2	*12.9	*22.5	*35.0
NERVOUS SYSTEM NEOPLASMS AGE 70 OR OVER AND/OR C.C.....10	10	12	13	13	15	23.6	13.6	17.5	13.8	12.2
NERVOUS SYSTEM NEOPLASMS AGE UNDER 70 WITHOUT C.C.....11	*2	*2	*4	*3	*3	*15.1	*13.2	*14.1	*6.3	*5.5
DEGENERATIVE NERVOUS SYSTEM DISORDERS.....12	74	88	87	100	83	14.3	14.3	15.0	13.7	13.6
MULTIPLE SCLEROSIS AND CEREBELLAR ATAXIA.....13	*3	*2	*3	*4	*	*18.2	*9.7	*10.6	*12.1	*
SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TRANSIENT ISCHEMIC ATTACKS.....14	281	294	295	305	339	15.1	15.8	15.4	14.4	12.0
TRANSIENT ISCHEMIC ATTACKS.....15	148	150	155	175	167	7.2	7.6	7.6	6.7	6.2
NONSPECIFIC CEREBROVASCULAR DISORDERS WITH C.C.....16	43	38	40	33	34	14.1	12.1	11.1	12.6	9.1
NONSPECIFIC CEREBROVASCULAR DISORDERS WITHOUT C.C.....17	46	42	38	31	25	9.2	8.4	8.4	10.8	6.9
CRANIAL AND PERIPHERAL NERVE DISORDERS AGE 70 OR OVER AND/OR C.C.....18	22	21	18	19	19	10.3	7.7	8.6	9.0	7.7
CRANIAL AND PERIPHERAL NERVE DISORDERS AGE UNDER 70 WITHOUT C.C.....19	*7	*5	*5	*5	*5	*9.0	*7.4	*7.4	*9.0	*6.4
NERVOUS SYSTEM INFECTION EXCEPT VIRAL MENINGITIS.....20	*5	*6	*4	*3	*6	*12.2	*12.9	*11.6	*12.3	*8.2
VIRAL MENINGITIS.....21	*	*	*	*	*	*	*	*	*	*
HYPERTENSIVE ENCEPHALOPATHY.....22	*7	*9	10	*7	14	*8.8	*8.9	7.2	*8.2	6.9
NONTRAUMATIC STUPOR AND COMA.....23	*	*	*	*	*	*	*	*	*	*
SEIZURE AND HEADACHE AGE 70 OR OVER AND/OR C.C.....24	17	16	21	20	23	7.9	8.1	8.6	7.7	5.9
SEIZURE AND HEADACHE AGE 18-69 WITHOUT C.C.....25	*6	*9	*7	*5	*6	*4.8	*16.7	*5.9	*6.4	*6.8
SEIZURE AND HEADACHE AGE UNDER 18.....26	...	...	...	...	...	...	...	...	...	...
TRAUMATIC STUPOR AND COMA, COMA GREATER THAN ONE HOUR.....27	-	*	-	*	*	-	*	-	*	*
TRAUMATIC STUPOR AND COMA, COMA LESS THAN ONE HOUR AGE 70 OR OVER AND/OR C.C.....28	13	12	14	12	16	8.9	11.7	7.5	6.4	7.6
TRAUMATIC STUPOR AND COMA LESS THAN ONE HOUR AGE 18-69 WITHOUT C.C.....29	*2	*2	*	*	*	*3.1	*5.7	*	*	*
TRAUMATIC STUPOR AND COMA LESS THAN ONE HOUR AGE UNDER 18.....30	...	...	...	...	...	...	...	...	...	...
CONCUSSION AGE 70 OR OVER AND/OR C.C.....31	11	14	13	10	13	7.0	6.4	6.6	5.4	8.5
CONCUSSION AGE 18-69 WITHOUT C.C.....32	*	*	*	*2	*	*	*	*	*3.6	*
CONCUSSION AGE UNDER 18.....33	...	...	...	...	...	...	...	...	...	...
OTHER DISORDERS OF NERVOUS SYSTEM AGE 70 OR OVER AND/OR C.C.....34	13	13	12	12	13	13.4	12.3	11.6	12.7	10.1
OTHER DISORDERS OF NERVOUS SYSTEM AGE UNDER 70 WITHOUT C.C.....35	*3	*6	*4	*	*2	*9.3	*8.2	*8.1	*	*5.6
MAJOR DIAGNOSTIC CATEGORY 2: DISEASES AND DISORDERS OF THE EYE										
RETINAL PROCEDURES.....36	11	15	13	19	17	6.0	6.0	5.0	5.1	4.6
ORBITAL PROCEDURES.....37	*4	*3	*3	*6	*3	*7.5	*6.9	*8.8	*4.6	*5.8
PRIMARY IRIS PROCEDURES.....38	*6	*7	*6	*4	*3	*6.1	*3.4	*3.1	*2.7	*3.0
LENS PROCEDURES.....39	313	387	429	473	394	3.7	3.2	2.9	2.6	2.3
EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE 18 OR OVER.....40	21	22	18	21	16	3.0	3.0	2.8	4.1	2.6
EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE UNDER 18.....41	...	...	...	...	...	...	...	...	...	...
INTRAOCULAR PROCEDURES EXCEPT RETINA, IRIS AND LENS.....42	29	33	32	39	36	5.4	4.5	4.4	5.4	3.3
HYPHEMA.....43	*	*	*	*	*	*	*	*	*	*
ACUTE MAJOR EYE INFECTIONS.....44	*2	*	*	*4	*2	*8.6	*	*	*11.2	*9.5
NEUROLOGICAL EYE DISORDERS.....45	*6	*6	*5	*8	*8	*7.3	*6.2	*7.7	*4.6	*3.4
OTHER DISORDERS OF THE EYE AGE 18 OR OVER WITH C.C.....46	*6	*7	10	*9	*10	*7.5	*17.1	10.7	*7.3	*7.1
OTHER DISORDERS OF THE EYE AGE 18 OR OVER WITHOUT C.C.....47	13	16	16	13	12	5.7	5.6	5.4	3.4	4.0
OTHER DISORDERS OF THE EYE AGE UNDER 18.....48

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 3: DISEASES AND DISORDERS OF THE EAR, NOSE, AND THROAT										
MAJOR HEAD AND NECK PROCEDURES.....49	*4	*9	*4	*5	*7	*26.7	*21.8	*21.1	*23.6	*24.7
SIALADENECTOMY.....50	*6	*4	*4	*6	*4	*5.7	*5.6	*4.6	*4.1	*7.2
SALIVARY GLAND PROCEDURES EXCEPT										
SIALADENECTOMY.....51	*2	*	*	*	*	*4.4	*	*	*	*
CLEFT LIP AND PALATE REPAIR.....52	-	*	-	-	*	-	*	-	-	*
SINUS AND MASTOID PROCEDURES AGE 18 OR OVER.....53	*6	*8	*8	*8	11	*5.6	*6.1	*4.4	*4.4	4.7
SINUS AND MASTOID PROCEDURES AGE UNDER 18.....54	-	-	-	-	-	-	-	-	-	-
MISCELLANEOUS EAR, NOSE AND THROAT PROCEDURES.....55	18	16	13	16	18	3.0	3.0	2.7	3.5	2.8
RHINOPLASTY.....56	*4	*3	*3	*6	*5	*3.6	*3.4	*3.3	*2.7	*2.4
TONSIL AND ADENOID PROCEDURE EXCEPT										
TONSILLECTOMY AND/OR ADENOIDECTOMY AGE 18 OR OVER.....57	*	*	*	*	*	*	*	*	*	*
TONSIL AND ADENOID PROCEDURE EXCEPT										
TONSILLECTOMY AND/OR ADENOIDECTOMY AGE UNDER 18.....58	...	...	...	...	...	...	...	...	...	...
TONSILLECTOMY AND/OR ADENOIDECTOMY ONLY, AGE 18 OR OVER.....59	*	*	*2	*	*	*	*	*1.7	*	*
TONSILLECTOMY AND/OR ADENOIDECTOMY ONLY, AGE UNDER 18.....60	...	...	...	...	...	...	...	...	...	...
MYRINGOTOMY AGE 18 OR OVER.....61	*	*	*	*	*	*	*	*	*	*
MYRINGOTOMY AGE UNDER 18.....62	...	...	...	...	...	...	...	...	...	...
OTHER EAR, NOSE AND THROAT OPERATING ROOM PROCEDURES.....63										
EAR, NOSE AND THROAT MALIGNANCY.....64	17	17	14	17	15	10.9	7.0	9.3	9.1	11.8
DYSEQUILIBRIUM.....65	32	35	32	38	36	5.7	5.0	5.7	5.0	4.4
EPISTAXIS.....66	*4	*5	*6	*6	*4	*3.8	*3.2	*4.4	*4.9	*4.1
EPIGLOTTITIS.....67	-	*	-	-	-	-	*	-	-	-
OTITIS MEDIA AND UPPER RESPIRATORY INFECTION AGE 70 OR OVER AND/OR C.C.....68										
OTITIS MEDIA AND UPPER RESPIRATORY INFECTION AGE 18-69 WITHOUT C.C.....69	10	*10	*7	*8	*5	5.5	*6.6	*4.8	*5.1	*4.1
OTITIS MEDIA AND UPPER RESPIRATORY INFECTION AGE UNDER 18.....70										
LARYNGOTRACHEITIS.....71	-	-	-	*	*	-	-	-	*	*
NASAL TRAUMA AND DEFORMITY.....72	*4	*2	*	*	*	*5.6	*5.1	*	*	*
OTHER EAR, NOSE AND THROAT DIAGNOSES AGE 18 OR OVER.....73										
OTHER EAR, NOSE AND THROAT DIAGNOSES AGE UNDER 18.....74	...	...	...	...	...	...	...	...	...	...
MAJOR DIAGNOSTIC CATEGORY 4: DISEASES AND DISORDERS OF THE RESPIRATORY SYSTEM										
MAJOR CHEST PROCEDURES.....75	20	25	23	30	26	16.9	18.7	15.9	17.5	15.0
OPERATING ROOM PROCEDURE ON THE RESPIRATORY SYSTEM EXCEPT MAJOR CHEST WITH C.C.....76										
OPERATING ROOM PROCEDURE ON THE RESPIRATORY SYSTEM EXCEPT MAJOR CHEST WITHOUT C.C.....77	*9	*6	*6	*5	*6	*11.2	*10.7	*8.4	*8.2	*10.8
PULMONARY EMBOLISM.....78	31	34	26	28	35	13.1	13.2	14.1	14.5	10.5
RESPIRATORY INFECTIONS AND INFLAMMATIONS AGE 70 OR OVER AND/OR C.C.....79										
RESPIRATORY INFECTIONS AND INFLAMMATIONS AGE 18-69 WITHOUT C.C.....80	*3	*	*3	*3	*	*9.8	*	*8.0	*9.8	*
RESPIRATORY INFECTIONS AND INFLAMMATIONS AGE UNDER 18.....81										
RESPIRATORY NEOPLASMS.....82	122	126	137	143	148	11.8	11.9	10.9	9.9	9.6
MAJOR CHEST TRAUMA AGE 70 OR OVER AND/OR C.C.....83	10	11	11	11	13	10.3	11.2	9.5	12.4	9.2
MAJOR CHEST TRAUMA AGE UNDER 70 WITHOUT C.C.....84	*	*	*	*	*	*	*	*	*	*
PLEURAL EFFUSION AGE 70 OR OVER AND/OR C.C.....85	16	12	18	16	16	12.6	11.3	8.7	9.7	8.2
PLEURAL EFFUSION AGE UNDER 70 WITHOUT C.C.....86	*	*	*	*2	*	*	*	*	*5.9	*
PULMONARY EDEMA AND RESPIRATORY FAILURE.....87	39	39	45	44	60	10.3	8.7	10.4	9.4	9.4
CHRONIC OBSTRUCTIVE PULMONARY DISEASE.....88	270	304	300	320	272	9.8	9.9	9.8	9.6	9.0
SIMPLE PNEUMONIA AND PLEURISY AGE 70 OR OVER AND/OR C.C.....89										
SIMPLE PNEUMONIA AND PLEURISY AGE 18-69 WITHOUT C.C.....90	25	25	20	21	20	7.8	8.5	8.0	6.5	6.6
SIMPLE PNEUMONIA AND PLEURISY AGE UNDER 18.....91										
INTERSTITIAL LUNG DISEASE AGE 70 OR OVER AND/OR C.C.....92	24	18	21	19	26	11.0	10.8	10.2	9.5	8.9
INTERSTITIAL LUNG DISEASE AGE UNDER 70 WITHOUT C.C.....93	*	*3	*2	*2	*2	*	*7.7	*8.2	*10.2	*5.7
PNEUMOTHORAX AGE 70 OR OVER AND/OR C.C.....94	*4	*6	*4	*7	*7	*13.6	*17.7	*12.3	*9.6	*8.1
PNEUMOTHORAX AGE UNDER 70 WITHOUT C.C.....95	*	*	*	*	*	*	*	*	*	*
BRONCHITIS AND ASTHMA AGE 70 OR OVER AND/OR C.C.....96										
BRONCHITIS AND ASTHMA AGE 18-69 WITHOUT C.C.....97	142	126	148	190	186	8.0	8.7	8.3	8.4	7.5
BRONCHITIS AND ASTHMA AGE UNDER 18.....98	33	30	27	30	26	6.2	6.7	6.6	6.2	6.1
RESPIRATORY SIGNS AND SYMPTOMS AGE 70 OR OVER AND/OR C.C.....99										
RESPIRATORY SIGNS AND SYMPTOMS AGE UNDER 70 WITHOUT C.C.....100	*4	*6	*4	*	*4	*5.6	*6.5	*5.9	*	*2.6
OTHER RESPIRATORY DIAGNOSES AGE 70 OR OVER AND/OR C.C.....101										
OTHER RESPIRATORY DIAGNOSES AGE UNDER 70.....102	36	37	43	39	37	9.5	9.4	8.5	8.0	7.9
OTHER RESPIRATORY DIAGNOSES AGE UNDER 70.....102	*5	*3	*6	*4	*3	*5.5	*5.2	*6.4	*5.5	*5.5

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 2. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS 65 YEARS AND OLDER DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 5: DISEASES AND DISORDERS OF THE CIRCULATORY SYSTEM										
HEART TRANSPLANT.....103	-	-	-	-	-	-	-	-	-	-
CARDIAC VALVE PROCEDURE WITH PUMP AND WITH CARDIAC CATHETERIZATION.....104	*5	*5	*7	*5	*5	*22.7	*20.2	*27.0	*21.7	*21.9
CARDIAC VALVE PROCEDURE WITH PUMP AND WITHOUT CARDIAC CATHETERIZATION.....105	*8	*9	*8	*7	*9	*18.1	*21.1	*24.5	*20.5	*16.1
CORONARY BYPASS WITH CARDIAC CATHETERIZATION.....106	14	18	18	23	26	20.7	17.2	22.6	20.0	15.2
CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION.....107	20	26	25	36	36	17.2	13.4	16.0	14.5	14.6
CARDIOTHORACIC PROCEDURE, EXCEPT VALVE AND CORONARY BYPASS, WITH PUMP.....108	*	*3	*3	*4	*10	*	*25.1	*23.6	*11.8	*7.8
CARDIOTHORACIC PROCEDURES WITHOUT PUMP.....109	*3	*3	*5	*4	*5	*17.2	*15.7	*13.7	*15.9	*15.6
MAJOR RECONSTRUCTIVE VASCULAR PROCEDURES AGE 70 OR OVER AND/OR C.C.....110	38	41	48	58	62	21.6	19.5	20.2	20.1	16.4
MAJOR RECONSTRUCTIVE VASCULAR PROCEDURES AGE UNDER 70 WITHOUT C.C.....111	*8	*8	11	11	*9	*14.6	*16.2	12.8	14.9	*12.0
VASCULAR PROCEDURES EXCEPT MAJOR RECONSTRUCTION.....112	26	35	32	43	42	17.0	19.2	14.6	12.6	11.9
AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS EXCEPT UPPER LIMB AND TOE.....113	16	17	16	17	15	29.8	28.3	25.6	23.6	17.5
UPPER LIMB AND TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS.....114	*5	*3	*3	*6	*4	*32.3	*20.7	*15.2	*23.5	*24.2
PERMANENT CARDIAC PACEMAKER IMPLANT WITH ACUTE MYOCARDIAL INFARCTION OR CONGESTIVE HEART FAILURE.....115	*8	*5	15	12	10	*21.1	*11.5	16.0	17.2	13.7
PERMANENT CARDIAC PACEMAKER IMPLANT WITHOUT ACUTE MYOCARDIAL INFARCTION OR CONGESTIVE HEART FAILURE.....116	59	64	62	64	63	11.5	12.0	10.8	10.1	9.7
CARDIAC PACEMAKER REPLACE AND REVISION EXCEPT PULSE GENERATOR REPLACEMENT ONLY.....117	*2	*3	*5	*3	*7	*13.2	*11.4	*8.3	*8.0	*8.9
CARDIAC PACEMAKER PULSE GENERATOR REPLACEMENT ONLY.....118	16	*7	12	*10	13	6.3	*7.9	5.4	*5.1	4.4
VEIN LIGATION AND STRIPPING.....119	*7	*6	*6	*6	*5	*8.7	*9.2	*8.1	*9.0	*7.3
OTHER OPERATING ROOM PROCEDURES ON THE CIRCULATORY SYSTEM.....120	13	15	16	15	20	22.9	26.3	25.1	19.6	18.3
CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION AND CARDIOVASCULAR COMPLICATIONS, DISCHARGED ALIVE.....121	75	82	80	86	102	16.6	15.4	13.7	14.5	12.4
CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION WITHOUT CARDIOVASCULAR COMPLICATIONS, DISCHARGED ALIVE.....122	150	179	174	175	191	13.5	12.6	12.2	11.3	10.4
CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION, EXPIRED.....123	82	80	94	91	81	6.9	6.8	6.7	6.1	6.5
CIRCULATORY DISORDERS EXCEPT ACUTE MYOCARDIAL INFARCTION, WITH CARDIAC CATHETERIZATION AND COMPLEX DIAGNOSIS.....124	13	13	15	20	26	10.6	9.9	10.5	9.6	7.8
CIRCULATORY DISORDERS EXCEPT ACUTE MYOCARDIAL INFARCTION, WITH CARDIAC CATHETERIZATION WITHOUT COMPLEX DIAGNOSIS.....125	42	55	57	65	72	4.8	4.5	4.5	3.7	3.6
ACUTE AND SUBACUTE ENDOCARDITIS.....126	*	*	*2	*2	*3	*	*	*19.6	*34.6	*38.6
HEART FAILURE AND SHOCK.....127	349	363	387	402	456	10.0	9.9	9.7	9.5	8.4
DEEP VEIN THROMBOPHLEBITIS.....128	36	32	33	32	42	11.5	10.8	9.8	11.2	9.1
CARDIAC ARREST.....129	31	36	42	43	35	10.2	12.0	9.8	8.7	9.8
PERIPHERAL VASCULAR DISORDERS AGE 70 OR OVER AND/OR C.C.....130	118	111	110	114	114	10.2	10.0	9.7	8.7	7.9
PERIPHERAL VASCULAR DISORDERS AGE UNDER 70 WITHOUT C.C.....131	16	15	16	20	16	7.6	7.6	6.6	6.8	6.0
ATHEROSCLEROSIS AGE 70 OR OVER AND/OR C.C.....132	442	422	427	406	282	9.8	9.4	8.8	8.7	7.1
ATHEROSCLEROSIS AGE UNDER 70 WITHOUT C.C.....133	29	25	27	21	17	6.5	6.6	7.9	6.3	5.6
HYPERTENSION.....134	149	162	158	168	120	8.6	7.7	7.9	7.2	6.8
CARDIAC CONGENITAL AND VALVULAR DISORDERS AGE 70 OR OVER AND/OR C.C.....135	17	20	19	25	21	8.9	9.3	7.8	7.9	8.7
CARDIAC CONGENITAL AND VALVULAR DISORDERS AGE 18-69 WITHOUT C.C.....136	*2	*	*2	*	*4	*8.6	*	*5.0	*	*3.1
CARDIAC CONGENITAL AND VALVULAR DISORDERS AGE UNDER 18.....137	...	...	...	...	...	...	...	...	...	...
CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS AGE 70 OR OVER AND/OR C.C.....138	140	168	181	193	218	7.8	7.3	7.1	7.0	6.1
CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS AGE UNDER 70 WITHOUT C.C.....139	20	23	23	26	20	6.5	5.2	5.1	5.1	10.0
ANGINA PECTORIS.....140	147	161	195	217	272	7.1	7.0	6.6	6.2	5.6
SYNCOPE AND COLLAPSE AGE 70 OR OVER AND/OR C.C.....141	17	20	24	23	21	5.4	6.2	7.2	5.8	6.5
SYNCOPE AND COLLAPSE AGE UNDER 70 WITHOUT C.C.....142	*5	*5	*3	*3	*5	*5.9	*4.5	*4.1	*2.9	*4.2
CHEST PAIN.....143	*9	10	*7	*9	*9	*4.4	3.9	*4.1	*3.4	*3.1
OTHER CIRCULATORY DIAGNOSES WITH C.C.....144	25	28	34	37	41	10.9	11.7	10.9	10.1	8.3
OTHER CIRCULATORY DIAGNOSES WITHOUT C.C.....145	16	20	18	15	14	8.6	6.9	6.6	8.1	6.1

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TABLE 2. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS 65 YEARS AND OLDER DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 6: DISEASES AND DISORDERS OF THE DIGESTIVE SYSTEM										
RECTAL RESECTION AGE 70 OR OVER AND/OR C.C.	146	15	16	16	18	21.7	26.4	21.9	19.8	16.5
RECTAL RESECTION AGE UNDER 70 WITHOUT C.C.	147	*3	*6	*3	*2	*4	*16.5	*17.2	*15.9	*13.4
MAJOR SMALL AND LARGE BOWEL PROCEDURES AGE 70 OR OVER AND/OR C.C.	148	88	105	101	109	112	21.9	19.5	21.3	19.6
MAJOR SMALL AND LARGE BOWEL PROCEDURES AGE UNDER 70 WITHOUT C.C.	149	13	13	14	16	11	13.9	15.2	16.3	13.8
PERITONEAL ADHESIOLYSIS AGE 70 OR OVER AND/OR C.C.	150	*6	*7	*6	13	12	*19.2	*17.9	*13.6	19.4
PERITONEAL ADHESIOLYSIS AGE UNDER 70 WITHOUT C.C.	151	*2	*2	*4	*	*2	*17.4	*12.7	*11.5	*
MINOR SMALL AND LARGE BOWEL PROCEDURES AGE 70 OR OVER AND/OR C.C.	152	*8	14	20	22	25	*11.9	12.9	13.3	9.3
MINOR SMALL AND LARGE BOWEL PROCEDURES AGE UNDER 70 WITHOUT C.C.	153	*3	*3	*4	*5	*5	*9.5	*13.6	*8.5	*8.0
STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES AGE 70 OR OVER AND/OR C.C.	154	44	48	50	57	53	18.9	19.0	17.7	17.0
STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES AGE 18-69 WITHOUT C.C.	155	*9	*9	*7	*6	*5	*14.0	*12.4	*13.5	*13.8
STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES AGE UNDER 18	156	...	...	...	...	...	...	...	...	...
ANAL PROCEDURES AGE 70 OR OVER AND/OR C.C.	157	37	39	43	45	44	7.1	7.4	7.3	6.8
ANAL PROCEDURES AGE UNDER 70 WITHOUT C.C.	158	16	18	18	17	16	5.1	5.5	5.7	5.0
HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL AGE 70 OR OVER AND/OR C.C.	159	23	21	19	23	27	11.3	10.0	8.7	9.4
HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL AGE 18-69 WITHOUT C.C.	160	*9	10	*9	11	*8	*7.4	7.3	*6.9	6.6
INGUINAL AND FEMORAL HERNIA PROCEDURES AGE 70 OR OVER AND/OR C.C.	161	85	88	100	90	96	7.1	6.9	6.8	6.1
INGUINAL AND FEMORAL HERNIA PROCEDURES AGE 18-69 WITHOUT C.C.	162	37	34	34	34	28	5.2	4.8	4.6	4.1
HERNIA PROCEDURES AGE UNDER 18	163	...	...	...	...	...	...	...	...	...
APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS AGE 70 OR OVER AND/OR C.C.	164	*3	*6	*4	*7	*6	*10.8	*14.5	*14.2	*14.7
APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS AGE UNDER 70 WITHOUT C.C.	165	*	*	*	*	*	*	*	*	*
APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS AGE 70 OR OVER AND/OR C.C.	166	*2	*6	*5	*4	*5	*11.4	*11.0	*9.4	*7.8
APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS AGE UNDER 70 WITHOUT C.C.	167	*	*	*	*2	*2	*	*	*	*5.8
PROCEDURES ON THE MOUTH AGE 70 OR OVER AND/OR C.C.	168	11	12	*10	11	*9	5.5	7.2	*5.0	8.2
PROCEDURES ON THE MOUTH AGE UNDER 70 WITHOUT C.C.	169	*5	*5	*6	*4	*4	*5.5	*4.3	*4.4	*4.5
OTHER DIGESTIVE SYSTEM PROCEDURES AGE 70 OR OVER AND/OR C.C.	170	11	12	12	11	14	17.9	21.3	15.6	17.1
OTHER DIGESTIVE SYSTEM PROCEDURES AGE UNDER 70 WITHOUT C.C.	171	*2	*	*	*2	*	*12.6	*	*	*9.5
DIGESTIVE MALIGNANCY AGE 70 OR OVER AND/OR C.C.	172	70	77	81	75	79	13.1	12.2	11.8	11.4
DIGESTIVE MALIGNANCY AGE UNDER 70 WITHOUT C.C.	173	12	11	15	*8	*8	9.1	10.9	7.9	*8.1
GASTROINTESTINAL HEMORRHAGE AGE 70 OR OVER AND/OR C.C.	174	104	126	127	143	155	9.2	9.2	8.2	7.6
GASTROINTESTINAL HEMORRHAGE AGE UNDER 70 WITHOUT C.C.	175	14	14	13	12	13	5.8	5.5	6.5	5.4
COMPLICATED PEPTIC ULCER	176	*7	*8	*6	*6	*8	*8.4	*11.2	*11.5	*9.0
UNCOMPLICATED PEPTIC ULCER AGE 70 OR OVER AND/OR C.C.	177	44	47	46	44	37	8.0	7.4	6.9	7.8
UNCOMPLICATED PEPTIC ULCER UNDER 70 WITHOUT C.C.	178	10	*10	10	*6	*5	7.5	*5.9	6.0	*6.0
INFLAMMATORY BOWEL DISEASE	179	*9	*7	*5	*6	11	*12.5	*10.4	*9.7	*8.5
GASTROINTESTINAL OBSTRUCTION AGE 70 OR OVER AND/OR C.C.	180	52	45	50	65	70	7.9	7.9	8.0	7.2
GASTROINTESTINAL OBSTRUCTION AGE UNDER 70 WITHOUT C.C.	181	*4	*9	*5	*6	*5	*3.8	*5.1	*4.6	*4.7
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISEASE AGE 70 OR OVER AND/OR C.C.	182	353	372	376	394	345	7.2	7.0	6.7	6.7
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISEASE AGE 18-69 WITHOUT C.C.	183	79	68	71	60	48	5.4	5.4	4.8	4.8
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISORDERS AGE UNDER 18	184	...	...	...	...	...	...	...	...	...
DENTAL AND ORAL DISEASE EXCEPT EXTRACTIONS AND RESTORATIONS AGE 18 OR OVER	185	*8	*7	*9	10	*10	*9.0	*10.3	*6.7	7.7
DENTAL AND ORAL DISEASE EXCEPT EXTRACTIONS AND RESTORATIONS AGE UNDER 18	186	...	...	...	...	...	...	...	...	...
DENTAL EXTRACTIONS AND RESTORATIONS	187	*4	*6	*6	*4	*4	*4.4	*3.3	*3.7	*2.9
OTHER DIGESTIVE SYSTEM DIAGNOSES AGE 70 OR OVER AND/OR C.C.	188	50	55	53	55	55	7.3	6.9	6.9	8.3
OTHER DIGESTIVE SYSTEM DIAGNOSES AGE 18-69 WITHOUT C.C.	189	*10	10	12	12	*9	*6.5	6.4	5.0	4.6
OTHER DIGESTIVE SYSTEM DIAGNOSES AGE UNDER 18	190

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 7: DISEASES AND DISORDERS OF THE HEPATOBILIARY SYSTEM AND PANCREAS										
MAJOR PANCREAS, LIVER, AND SHUNT PROCEDURES.....191	*3	*4	*3	*4	*4	*24.0	*23.0	*23.2	*22.0	*24.3
MINOR PANCREAS, LIVER, AND SHUNT PROCEDURES.....192	*	*	*	*	*2	*	*	*	*	*21.7
BILIARY TRACT PROCEDURE EXCEPT TOTAL CHOLECYSTECTOMY AGE 70 OR OVER AND/OR C.C.....193	11	11	14	14	13	24.9	20.3	22.0	20.7	19.9
BILIARY TRACT PROCEDURE EXCEPT TOTAL CHOLECYSTECTOMY AGE UNDER 70 WITHOUT C.C.....194	*2	*	*	*	*	*13.6	*	*	*	*
TOTAL CHOLECYSTECTOMY WITH COMMON BILE DUCT EXPLORATION AGE 70 OR OVER AND/OR C.C.....195	24	28	22	25	28	17.9	18.3	17.0	16.3	15.2
TOTAL CHOLECYSTECTOMY WITH COMMON BILE DUCT EXPLORATION AGE UNDER 70 WITHOUT C.C.....196	*2	*3	*2	*2	*	*15.2	*13.9	*12.7	*20.6	*
TOTAL CHOLECYSTECTOMY WITHOUT COMMON BILE DUCT EXPLORATION AGE 70 OR OVER AND/OR C.C.....197	59	66	71	81	78	14.1	14.5	13.6	13.4	11.1
TOTAL CHOLECYSTECTOMY WITHOUT COMMON BILE DUCT EXPLORATION AGE UNDER 70 WITHOUT C.C.....198	22	22	21	22	18	10.6	11.1	9.2	9.6	7.9
HEPATOBILIARY DIAGNOSTIC PROCEDURE FOR MALIGNANCY.....199	*5	*9	*4	*6	*7	*22.9	*15.0	*19.7	*16.8	*14.2
HEPATOBILIARY DIAGNOSTIC PROCEDURE FOR NON-MALIGNANCY.....200	*7	*4	*6	*6	*5	*14.5	*10.4	*17.1	*15.1	*12.3
OTHER HEPATOBILIARY OR PANCREAS OPERATING ROOM PROCEDURES.....201	*	*2	*	*	*2	*	*16.6	*	*	*17.3
CIRRHOSIS AND ALCOHOLIC HEPATITIS.....202	19	20	16	14	15	14.0	13.5	12.1	12.2	10.4
MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS.....203	27	31	31	37	34	10.7	12.6	12.3	11.6	10.8
DISORDERS OF PANCREAS EXCEPT MALIGNANCY.....204	24	27	24	26	30	10.3	10.0	8.9	9.1	8.6
DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS, ALCOHOLIC HEPATITIS AGE 70 OR OVER AND/OR C.C.....205	12	13	14	20	22	11.8	13.2	11.9	11.3	11.1
DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS, ALCOHOLIC HEPATITIS AGE UNDER 70 WITHOUT C.C.....206	*5	*3	*2	*3	*2	*9.0	*4.3	*7.1	*9.7	*5.1
DISORDERS OF THE BILIARY TRACT AGE 70 OR OVER AND/OR C.C.....207	61	66	68	68	59	8.0	8.0	8.0	7.2	7.0
DISORDERS OF THE BILIARY TRACT AGE UNDER 70 WITHOUT C.C.....208	11	11	*9	12	*8	5.1	6.1	*4.7	6.1	*4.3

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DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 8: DISEASES AND DISORDERS OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE										
MAJOR JOINT PROCEDURES.....209	98	120	110	116	154	21.1	19.5	19.3	17.7	15.5
HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 70 OR OVER AND/OR C.C.....210	125	121	135	137	140	21.7	21.5	19.5	20.1	16.7
HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 18-69 WITHOUT C.C.....211	10	*8	*8	12	10	18.2	*18.8	*16.1	18.1	19.9
HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE UNDER 18.....212	...	...	...	...	...	...	...	...	...	...
AMPUTATIONS FOR MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DISORDERS.....213	*3	*4	*5	*4	*8	*35.3	*23.8	*34.7	*30.9	*25.4
BACK AND NECK PROCEDURES AGE 70 OR OVER AND/OR C.C.....214	17	14	21	19	25	19.8	22.1	20.5	16.2	17.3
BACK AND NECK PROCEDURES AGE UNDER 70 WITHOUT C.C.....215	*9	11	*9	17	11	*16.6	13.4	*15.0	11.6	11.1
BIOPSIES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....216	*	*4	*5	*4	*3	*	*17.6	*16.8	*13.5	*14.4
WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND, FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS.....217	*5	*4	*5	*5	*6	*29.6	*21.4	*17.3	*20.5	*19.8
LOWER EXTREMITY AND HUMERUS PROCEDURE EXCEPT HIP, FOOT, FEMUR AGE 70 OR OVER AND/OR C.C.....218	12	16	16	18	19	14.8	19.0	15.6	13.1	10.2
LOWER EXTREMITY AND HUMERUS PROCEDURE EXCEPT HIP, FOOT, FEMUR AGE 18-69 WITHOUT C.C.....219	*7	*7	*6	*6	11	*9.1	*7.2	*11.2	*8.9	9.0
LOWER EXTREMITY AND HUMERUS PROCEDURE EXCEPT HIP, FOOT, FEMUR AGE UNDER 18.....220	...	...	...	...	...	...	...	...	...	...
KNEE PROCEDURES AGE 70 OR OVER AND/OR C.C.....221	*8	*9	12	17	18	*13.8	*10.2	10.6	7.7	8.3
KNEE PROCEDURES AGE UNDER 70 WITHOUT C.C.....222	*4	*5	*9	*5	*6	*7.7	*6.2	*5.9	*4.6	*6.2
UPPER EXTREMITY PROCEDURE EXCEPT HUMERUS AND HAND AGE 70 OR OVER AND/OR C.C.....223	*6	*7	12	15	12	*9.6	*7.3	8.3	6.9	7.2
UPPER EXTREMITY PROCEDURE EXCEPT HUMERUS AND HAND AGE UNDER 70 WITHOUT C.C.....224	*3	*5	*4	*8	*5	*4.2	*4.7	*4.4	*5.7	*6.6
FOOT PROCEDURES.....225	27	35	33	56	42	6.7	4.8	4.7	4.7	4.1
SOFT TISSUE PROCEDURES AGE 70 OR OVER AND/OR C.C.....226	*4	*6	*7	*6	*9	*10.1	*8.4	*6.6	*5.2	*9.7
SOFT TISSUE PROCEDURES AGE UNDER 70 WITHOUT C.C.....227	*3	*4	*4	*3	*4	*4.6	*6.0	*5.2	*4.3	*7.2
GANGLION (HAND) PROCEDURES.....228	*	*2	*3	*	*	*2.4	*2.4	*	*	*
HAND PROCEDURES EXCEPT GANGLION.....229	16	15	17	14	12	4.7	4.4	3.4	3.8	3.1
LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES OF HIP AND FEMUR.....230	*6	*5	*6	*5	*4	*8.8	*10.9	*12.6	*7.6	*7.9
LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR.....231	*8	*7	12	13	14	*5.8	*7.4	7.3	7.3	5.6
ARTHROSCOPY.....232	*	*2	*5	*2	*3	*	*4.5	*8.2	*8.9	*6.2
OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE OPERATING ROOM PROCEDURE AGE 70 OR OVER AND/OR C.C.....233	*8	*9	*9	*8	*8	*12.0	*12.6	*9.8	*13.8	*9.9
OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE OPERATING ROOM PROCEDURE AGE UNDER 70 WITHOUT C.C.....234	*4	*2	*3	*5	*3	*7.4	*8.7	*7.8	*6.4	*7.4
FRACTURES OF FEMUR.....235	*8	*7	*9	*6	*6	*23.8	*25.1	*21.6	*22.2	*22.6
FRACTURES OF HIP AND PELVIS.....236	46	48	48	52	54	15.0	17.9	14.5	13.2	11.4
SPRAINS, STRAINS, AND DISLOCATIONS OF HIP, PELVIS AND THIGH.....237	*2	*2	*3	*5	*4	*7.9	*8.6	*10.3	*7.0	*5.3
OSTEOMYELITIS.....238	*3	*5	*3	*3	*6	*18.8	*13.5	*12.7	*19.6	*12.1
PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY.....239	66	68	65	73	82	12.2	11.6	12.1	10.0	9.7
CONNECTIVE TISSUE DISORDERS AGE 70 OR OVER AND/OR C.C.....240	30	31	33	29	22	13.6	10.9	10.5	9.8	9.4
CONNECTIVE TISSUE DISORDERS AGE UNDER 70 WITHOUT C.C.....241	*6	*7	*5	*6	*5	*7.5	*8.9	*8.4	*9.1	*5.9
SEPTIC ARTHRITIS.....242	*	*2	*	*3	*	*7.8	*	*10.7	*	*
MEDICAL BACK PROBLEMS.....243	156	173	186	195	186	9.7	8.8	9.3	8.3	7.4
BONE DISEASES AND SEPTIC ARTHROPATHY AGE 70 OR OVER AND/OR C.C.....244	83	71	70	64	58	9.7	9.4	9.5	8.0	9.1
BONE DISEASES AND SEPTIC ARTHROPATHY AGE UNDER 70 WITHOUT C.C.....245	11	11	*6	*6	*7	7.0	7.4	*5.7	*6.8	*6.9
NON-SPECIFIC ARTHROPATHIES.....246	11	13	13	12	*6	7.8	8.7	7.9	6.5	*7.3
SIGNS AND SYMPTOMS OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....247	21	28	27	26	30	7.4	6.3	6.7	5.3	5.2
TENDONITIS, MYOSITIS AND BURSITIS.....248	14	*9	11	12	12	7.4	*8.0	9.0	7.6	6.1
AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....249	*3	*6	*3	*4	*4	*5.8	*14.8	*13.2	*9.0	*11.5
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF FOREARM, HAND, FOOT AGE 70 OR OVER AND/OR C.C.....250	22	21	22	21	19	6.7	7.2	5.8	7.1	4.8
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF FOREARM, HAND, FOOT AGE 18-69 WITHOUT C.C.....251	*7	*5	*4	*4	*4	*4.6	*4.8	*5.6	*4.7	*3.4
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF FOREARM, HAND, FOOT AGE UNDER 18.....252	...	...	...	...	...	...	...	...	...	...
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF UPPER ARM, LOWER LEG EXCEPT FOOT AGE 70 OR OVER AND/OR C.C.....253	57	46	47	52	48	10.1	10.3	9.3	9.1	7.6
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF UPPER ARM, LOWER LEG EXCEPT FOOT AGE 18-69 WITHOUT C.C.....254	*8	*10	*9	*6	*9	*7.7	*6.6	*7.1	*5.2	*6.1
FRACTURE, SPRAINS, STRAINS AND DISLOCATION OF UPPER ARM, LOWER LEG EXCEPT FOOT AGE UNDER 18.....255	...	...	...	...	...	...	...	...	...	...
OTHER DIAGNOSES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE.....256	13	16	18	16	18	9.9	13.2	9.0	8.0	8.5

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TABLE 2. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS 65 YEARS AND OLDER DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984	
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS					
MAJOR DIAGNOSTIC CATEGORY 9: DISEASES AND DISORDERS OF THE SKIN, SUBCUTANEOUS TISSUE AND BREAST											
TOTAL MASTECTOMY FOR MALIGNANCY AGE 70 OR OVER AND/OR C.C.....	257	30	28	30	33	39	11.4	10.2	10.7	9.9	9.5
TOTAL MASTECTOMY FOR MALIGNANCY AGE UNDER 70 WITHOUT C.C.....	258	*9	*10	*7	*9	12	*10.2	*9.9	*9.2	*8.0	7.2
SUBTOTAL MASTECTOMY FOR MALIGNANCY AGE 70 OR OVER AND/OR C.C.....	259	*5	*6	*7	*9	*10	*7.2	*7.8	*6.8	*10.7	*6.3
SUBTOTAL MASTECTOMY FOR MALIGNANCY AGE UNDER 70.....	260	*	*	*3	*2	*3	*	*	*5.1	*6.0	*4.9
BREAST PROCEDURE FOR NON-MALIGNANCY EXCEPT BIOPSY AND LOCAL EXCISION.....	261	*7	*6	*7	*5	*5	*3.9	*3.9	*3.5	*5.5	*5.2
BREAST BIOPSY AND LOCAL EXCISION FOR NON-MALIGNANCY.....	262	20	19	20	18	19	4.0	3.4	3.0	2.7	2.6
SKIN GRAFTS FOR SKIN ULCER OR CELLULITIS AGE 70 OR OVER AND/OR C.C.....	263	13	11	13	15	20	28.6	25.8	28.0	23.5	21.4
SKIN GRAFTS FOR SKIN ULCER OR CELLULITIS AGE 70 OR OVER WITHOUT C.C.....	264	*	*	*	*2	*	*	*	*	*21.9	*
SKIN GRAFTS EXCEPT FOR SKIN ULCER OR CELLULITIS WITH C.C.....	265	*3	*3	*3	*5	*5	*18.2	*19.5	*22.0	*13.6	*13.0
SKIN GRAFTS EXCEPT FOR SKIN ULCER OR CELLULITIS WITHOUT C.C.....	266	15	15	*9	14	*7	7.8	8.0	*10.2	5.7	*4.7
PERIANAL AND PILONICAL PROCEDURES.....	267	*	*	*	*	*	*	*	*	*	*
SKIN, SUBCUTANEOUS TISSUE AND BREAST PLASTIC PROCEDURES.....	268	*10	11	*9	*8	*8	*4.9	4.9	*5.3	*3.1	*2.7
OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST OPERATING ROOM PROCEDURE AGE 70 OR OVER AND/OR C.C.....	269	34	32	25	33	23	9.7	11.1	8.4	9.3	10.9
OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST OPERATING ROOM PROCEDURE AGE UNDER 70 WITHOUT C.C.....	270	10	*8	*9	*8	*8	4.5	*6.5	*5.7	*3.8	*4.6
SKIN ULCERS.....	271	17	18	19	20	20	18.5	18.2	17.7	15.9	12.8
MAJOR SKIN DISORDERS AGE 70 OR OVER AND/OR C.C.....	272	17	18	19	23	23	13.3	9.8	12.2	9.8	10.3
MAJOR SKIN DISORDERS AGE UNDER 70 WITHOUT C.C.....	273	*4	*3	*3	*3	*4	*7.5	*11.1	*8.0	*6.1	*4.4
MALIGNANT BREAST DISORDERS AGE 70 OR OVER AND/OR C.C.....	274	30	31	35	44	30	13.8	12.8	12.4	11.0	9.7
MALIGNANT BREAST DISORDERS AGE UNDER 70 WITHOUT C.C.....	275	*5	*4	*6	*4	*3	*14.3	*13.6	*7.6	*9.5	*8.2
NON-MALIGNANT BREAST DISORDERS.....	27	*	*3	*	*2	*	*	*3.8	*	*3.9	*
CELLULITIS AGE 70 OR OVER AND/OR C.C.....	277	43	37	48	58	63	10.1	10.7	12.0	9.8	9.8
CELLULITIS AGE 18-69 WITHOUT C.C.....	278	*7	*9	*9	*7	*8	*7.6	*7.6	*8.3	*6.6	*7.6
CELLULITIS AGE UNDER 18.....	279	...	...	...	...	...	...	...	...	...	...
TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST AGE 70 OR OVER AND/OR C.C.....	280	56	54	54	58	50	8.1	8.1	8.4	6.9	7.0
TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST AGE 18-69 WITHOUT C.C.....	281	*8	*3	*6	*7	*3	*6.0	*5.7	*5.3	*4.9	*6.0
TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST AGE UNDER 18.....	282	...	...	...	...	...	...	...	...	...	...
MINOR SKIN DISORDERS AGE 70 OR OVER AND/OR C.C.....	283	20	22	22	22	20	7.2	7.7	9.5	6.6	8.5
MINOR SKIN DISORDERS AGE UNDER 70 WITHOUT C.C.....	284	*6	*4	*4	*2	*2	*6.3	*5.1	*5.7	*5.7	*4.4

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 10: ENDOCRINE, NUTRITIONAL, AND METABOLIC DISEASES AND DISORDERS										
AMPUTATIONS FOR ENDOCRINE, NUTRITIONAL, AND METABOLIC DISORDERS.....285	15	*10	*9	15	17	34.5	*35.7	*27.6	33.6	22.5
ADRENAL AND PITUITARY PROCEDURES.....286	*	*	*2	*	*	*	*	*19.1	*	*
SKIN GRAFTS AND WOUND DEBRIDEMENT FOR ENDOCRINE, NUTRITIONAL AND METABOLISM DISORDERS.....287	*3	*3	*4	*5	*10	*32.7	*22.6	*25.3	*32.3	*20.6
OPERATING ROOM PROCEDURES FOR OBESITY.....288	*	*	*	*	*	*	*	*	*	*
PARATHYROID PROCEDURES.....289	*	*4	*3	*5	*	*	*15.0	*14.5	*10.6	*
THYROID PROCEDURES.....290	*10	*6	*9	*4	*8	*9.0	*6.6	*6.6	*7.2	*5.7
THYROIDECTOMY PROCEDURES.....291	*	*	*	*	-	*	*	*	*	-
OTHER ENDOCRINE, NUTRITIONAL AND METABOLISM OPERATING ROOM PROCEDURE AGE 70 OR OVER AND/OR C.C.....292	*7	*5	*7	*9	*7	*20.0	*19.2	*14.5	*14.7	*16.1
OTHER ENDOCRINE, NUTRITIONAL AND METABOLISM OPERATING ROOM PROCEDURE AGE UNDER 70 WITHOUT C.C.....293	*	*	*	*	*2	*	*	*	*	*5.0
DIABETES AGE 36 OR OVER.....294	206	218	208	214	180	10.5	9.9	10.0	9.3	8.3
DIABETES AGE UNDER 36.....295	...	...	...	...	...	...	...	...	...	...
NUTRITIONAL AND MISCELLANEOUS METABOLIC DISORDERS AGE 70 OR OVER AND/OR C.C.....296	118	123	131	157	203	10.4	10.1	10.4	9.4	8.6
NUTRITIONAL AND MISCELLANEOUS METABOLIC DISORDERS AGE 18-69 WITHOUT C.C.....297	*7	*9	10	11	*8	*6.3	*5.9	7.9	6.4	*6.7
NUTRITIONAL AND MISCELLANEOUS METABOLIC DISORDERS AGE UNDER 18.....298	...	...	...	...	...	...	...	...	...	...
INBORN ERRORS OF METABOLISM.....299	*	*	*3	*3	*	*	*	*7.1	*4.4	*
ENDOCRINE DISORDERS AGE 70 OR OVER AND/OR C.C.....300	21	27	21	23	14	10.5	10.3	10.0	9.8	13.0
ENDOCRINE DISORDERS AGE UNDER 70 WITHOUT C.C.....301	*5	*4	*5	*3	*3	*7.7	*7.0	*6.8	*3.8	*3.5
MAJOR DIAGNOSTIC CATEGORY 11: DISEASES AND DISORDERS OF THE KIDNEY AND URINARY TRACT										
KIDNEY TRANSPLANT.....302	-	-	-	-	-	-	-	-	-	-
KIDNEY, URETER AND MAJOR BLADDER PROCEDURE FOR NEOPLASM.....303	*7	*10	10	11	14	*16.8	*17.9	18.4	19.5	16.3
KIDNEY, URETER AND MAJOR BLADDER PROCEDURE FOR NON-MALIGNANCY AGE 70 OR OVER AND/OR C.C.....304	13	14	16	18	21	16.5	14.1	16.1	15.7	15.8
KIDNEY, URETER AND MAJOR BLADDER PROCEDURE FOR NON-MALIGNANCY AGE UNDER 70 WITHOUT C.C.....305	*5	*7	*4	*8	*7	*12.4	*10.3	*11.0	*9.8	*9.2
PROSTATECTOMY AGE 70 OR OVER AND/OR C.C.....306	19	29	26	28	30	10.9	11.6	11.9	12.1	8.9
PROSTATECTOMY AGE UNDER 70 WITHOUT C.C.....307	*3	*5	*4	*4	*3	*9.7	*9.3	*14.1	*7.1	*6.7
MINOR BLADDER PROCEDURES AGE 70 OR OVER AND/OR C.C.....308	20	20	23	22	24	8.0	9.9	9.9	10.3	7.4
MINOR BLADDER PROCEDURES AGE UNDER 70 WITHOUT C.C.....309	*4	*5	*5	*4	*3	*4.4	*5.4	*6.1	*6.1	*4.6
TRANSURETHRAL PROCEDURES AGE 70 OR OVER AND/OR C.C.....310	45	45	43	51	50	6.9	7.4	6.8	6.5	5.3
TRANSURETHRAL PROCEDURES AGE UNDER 70 WITHOUT C.C.....311	10	*9	*8	*9	*8	6.8	*4.7	*4.2	*4.8	*3.8
URETHRAL PROCEDURES, AGE 70 OR OVER AND/OR C.C.....312	*8	*6	*9	*9	11	*7.1	*6.4	*7.2	*8.3	5.1
URETHRAL PROCEDURES, AGE 18-69 WITHOUT C.C.....313	*2	*2	*	*2	*2	*6.6	*8.3	*	*4.0	*3.1
URETHRAL PROCEDURES, AGE UNDER 18.....314	...	...	...	...	...	...	...	...	...	...
OTHER KIDNEY AND URINARY TRACT OPERATING ROOM PROCEDURES.....315	*6	*8	*9	*9	*8	*15.5	*13.5	*21.0	*14.3	*10.5
RENAL FAILURE WITHOUT DIALYSIS.....316	35	38	37	37	51	13.2	11.8	10.9	12.6	11.9
RENAL FAILURE WITH DIALYSIS.....317	-	-	-	-	-	-	-	-	-	-
KIDNEY AND URINARY TRACT NEOPLASMS AGE 70 OR OVER AND/OR C.C.....318	28	21	27	24	24	12.4	8.0	9.2	9.2	8.9
KIDNEY AND URINARY TRACT NEOPLASMS AGE UNDER 70 WITHOUT C.C.....319	*5	*3	*6	*3	*2	*5.7	*6.4	*4.5	*6.6	*1.9
KIDNEY AND URINARY TRACT INFECTIONS AGE 70 OR OVER AND/OR C.C.....320	129	124	142	157	164	9.0	9.3	8.5	8.9	8.0
KIDNEY AND URINARY TRACT INFECTIONS AGE 18-69 WITHOUT C.C.....321	15	15	14	16	11	6.2	8.3	6.8	5.3	5.6
KIDNEY AND URINARY TRACT INFECTIONS AGE UNDER 18.....322	...	...	...	...	...	...	...	...	...	...
URINARY STONES AGE 70 OR OVER AND/OR C.C.....323	25	25	26	27	28	5.4	5.8	4.5	5.1	5.6
URINARY STONES AGE UNDER 70 WITHOUT C.C.....324	*9	12	*7	14	*9	*3.9	4.0	*3.7	3.4	*2.9
KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS AGE 70 OR OVER AND/OR C.C.....325	22	26	27	25	19	6.4	6.2	5.9	5.4	5.5
KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS AGE 18-69 WITHOUT C.C.....326	*4	*5	*3	*3	*2	*7.2	*2.8	*3.0	*3.8	*2.1
KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS AGE UNDER 18.....327	...	...	...	...	...	...	...	...	...	...
URETHRAL STRICTURE AGE 70 OR OVER AND/OR C.C.....328	*10	11	*9	*7	*7	*7.6	6.7	*6.3	*5.6	*6.0
URETHRAL STRICTURE AGE 18-69 WITHOUT C.C.....329	*3	*	*	*	*	*3.8	*	*	*	*
URETHRAL STRICTURE AGE UNDER 18.....330	...	...	...	...	...	...	...	...	...	...
OTHER KIDNEY AND URINARY TRACT DIAGNOSES AGE 70 OR OVER AND/OR C.C.....331	37	44	50	50	52	8.2	11.7	9.2	8.5	8.8
OTHER KIDNEY AND URINARY TRACT DIAGNOSES AGE 18-69 WITHOUT C.C.....332	*6	*7	*8	*5	*5	*7.9	*7.1	*5.6	*3.6	*3.6
OTHER KIDNEY AND URINARY TRACT DIAGNOSES AGE UNDER 18.....333

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[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 12: DISEASES AND DISORDERS OF THE MALE REPRODUCTIVE SYSTEM										
MAJOR MALE PELVIC PROCEDURES WITH C.C.....334	*9	*8	*9	*7	*9	*17.0	*16.8	*17.7	*14.8	*14.9
MAJOR MALE PELVIC PROCEDURES WITHOUT C.C.....335	14	16	11	14	13	14.4	13.0	13.3	12.0	11.6
TRANSURETHRAL PROSTATECTOMY AGE 70 OR OVER AND/OR C.C.....336	129	140	144	148	158	10.9	10.5	9.3	9.3	8.5
TRANSURETHRAL PROSTATECTOMY AGE UNDER 70 WITHOUT C.C.....337	35	24	29	34	26	8.1	8.6	7.5	6.7	5.9
TESTES PROCEDURES, FOR MALIGNANCY.....338	*9	*7	10	*10	*9	*8.9	*14.5	7.5	*11.1	*6.6
TESTES PROCEDURES, NON-MALIGNANT AGE 18 OR OVER.....339	*7	*7	11	*9	*8	*6.1	*6.9	5.3	*4.4	*3.5
TESTES PROCEDURES, NON-MALIGNANT AGE UNDER 18.....340	...	...	...	...	...	...	...	...	...	...
PENIS PROCEDURES.....341	*2	*2	*3	*4	*6	*4.9	*7.4	*9.9	*5.2	*4.8
CIRCUMCISION AGE 18 OR OVER.....342	*5	*4	*4	*4	*4	*4.0	*4.6	*3.1	*2.2	*2.5
CIRCUMCISION AGE UNDER 18.....343	...	...	...	...	...	...	...	...	...	...
OTHER MALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURES FOR MALIGNANCY.....344	*4	*6	*6	*7	*4	*17.9	*7.5	*11.0	*7.1	*6.3
OTHER MALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURE EXCEPT FOR MALIGNANCY.....345	*6	*6	*7	*7	*6	*4.9	*6.3	*7.8	*6.4	*5.2
MALIGNANCY, MALE REPRODUCTIVE SYSTEM, AGE 70 OR OVER AND/OR C.C.....346	43	43	45	49	40	10.5	10.5	10.6	10.6	8.2
MALIGNANCY, MALE REPRODUCTIVE SYSTEM, AGE UNDER 70 WITHOUT C.C.....347	*4	*4	*5	*8	*4	*5.9	*4.7	*5.7	*6.2	*7.9
BENIGN PROSTATIC HYPERTROPHY AGE 70 OR OVER AND/OR C.C.....348	30	24	30	26	21	6.8	5.4	6.0	5.9	5.7
BENIGN PROSTATIC HYPERTROPHY AGE UNDER 70 WITHOUT C.C.....349	*6	*6	*4	*5	*4	*4.0	*4.0	*3.4	*3.6	*2.5
INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM.....350	10	11	13	12	11	6.1	6.8	6.4	6.2	6.2
STERILIZATION, MALE.....351	-	-	-	-	-	-	-	-	-	-
OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES.....352	*2	*3	*2	*2	*2	*6.5	*5.8	*6.4	*3.9	*3.2
MAJOR DIAGNOSTIC CATEGORY 13: DISEASES AND DISORDERS OF THE FEMALE REPRODUCTIVE SYSTEM										
PELVIC EVISCERATION, RADICAL HYSTERECTOMY AND VULVECTOMY.....353	*2	*3	*3	*3	*4	*12.3	*16.7	*16.6	*14.1	*17.5
NONRADICAL HYSTERECTOMY AGE 70 OR OVER AND/OR C.C.....354	29	36	34	32	36	11.1	10.9	10.5	11.2	9.3
NONRADICAL HYSTERECTOMY AGE UNDER 70 WITHOUT C.C.....355	12	16	18	17	19	9.3	9.8	9.2	9.0	7.5
FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURE.....356	23	23	30	26	27	10.0	9.5	9.3	8.3	7.0
UTERUS AND ADENEXA PROCEDURES, FOR MALIGNANCY.....357	*3	*3	*4	*3	*4	*14.0	*21.0	*16.0	*23.3	*16.7
UTERUS AND ADENEXA PROCEDURE FOR NON-MALIGNANCY EXCEPT TUBAL INTERRUPTION.....358	*5	*4	*5	*6	*4	*9.4	*9.7	*9.7	*11.0	*6.6
TUBAL INTERRUPTION FOR NON-MALIGNANCY.....359	-	*	*	-	-	-	*	*	-	-
VAGINA, CERVIX AND VULVA PROCEDURES.....360	12	*9	*9	*8	10	6.4	*5.2	*8.6	*5.1	5.8
LAPAROSCOPY AND ENDOSCOPY (FEMALE) EXCEPT TUBAL INTERRUPTION.....361	*	*2	*	*	*	*	*2.3	*	*	*
LAPAROSCOPIC TUBAL INTERRUPTION.....362	*	*	-	-	-	*	*	-	-	-
DILATION AND CURETTAGE OF UTERUS, CONIZATION AND RADIO-IMPLANT, FOR MALIGNANCY.....363	10	11	*8	*8	*8	4.9	6.5	*10.5	*5.2	*4.5
DILATION AND CURETTAGE OF UTERUS, CONIZATION EXCEPT FOR MALIGNANCY.....364	27	20	23	22	17	3.7	3.5	3.3	3.0	3.0
OTHER FEMALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURES.....365	*2	*4	*5	*5	*4	*26.9	*25.3	*15.2	*20.7	*18.5
MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM AGE 70 OR OVER AND/OR C.C.....366	22	30	28	33	37	10.7	10.2	8.9	7.9	6.7
MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM AGE UNDER 70 WITHOUT C.C.....367	13	16	11	*9	*7	6.3	3.8	4.7	*2.8	*2.5
INFECTIONS, FEMALE REPRODUCTIVE SYSTEM.....368	*2	*	*2	*	*	*7.7	*	*7.9	*	*
MENSTRUAL AND OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS.....369	11	11	10	10	11	6.7	5.4	6.5	5.2	5.4
MAJOR DIAGNOSTIC CATEGORY 14: PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM										
CESAREAN SECTION WITH C.C.....370	...	...	...	...	...	...	...	...	...	...
CESAREAN SECTION WITHOUT C.C.....371	...	...	...	...	...	...	...	...	...	...
VAGINAL DELIVERY WITH COMPLICATING DIAGNOSES.....372
VAGINAL DELIVERY WITHOUT COMPLICATING DIAGNOSES.....373
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VAGINAL DELIVERY WITH OPERATING ROOM PROCEDURE EXCEPT STERILIZATION AND/OR DILATION AND CURETTAGE OF UTERUS.....375
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NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 2. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS 65 YEARS AND OLDER DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 14: PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM--CON.										
ABORTION WITHOUT DILATION AND CURETTAGE OF UTERUS.....380
ABORTION WITH DILATION AND CURETTAGE OF UTERUS.....381
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MAJOR DIAGNOSTIC CATEGORY 15: NEWBORNS AND OTHER NEONATES WITH CONDITIONS ORIGINATING IN THE PERINATAL PERIOD										
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EXTREME IMMATURETY, NEONATE.....386
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PREMATURITY WITHOUT MAJOR PROBLEMS.....388
FULL TERM NEONATE WITH MAJOR PROBLEMS.....389
NEONATES WITH OTHER SIGNIFICANT PROBLEMS.....390	...	...	...	...	...	...	...	...	...	...
NORMAL NEWBORNS.....391	...	...	...	...	...	...	...	...	...	...
MAJOR DIAGNOSTIC CATEGORY 16: DISEASES AND DISORDERS OF THE BLOOD AND BLOOD-FORMING ORGANS AND IMMUNITY DISORDERS										
SPLENECTOMY AGE 18 OR OVER.....392	*	*	*	*2	*2	*	*	*	*27.5	*9.8
SPLENECTOMY AGE UNDER 18.....393	...	...	...	...	...	...	...	...	...	...
OTHER OPERATING ROOM PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS.....394	*2	*4	*4	*4	*2	*6.6	*8.4	*6.8	*12.3	*6.7
RED BLOOD CELL DISORDERS AGE 18 OR OVER.....395	91	110	122	118	115	9.5	8.6	8.3	6.9	6.9
RED BLOOD CELL DISORDERS AGE UNDER 18.....396	...	...	...	...	...	...	...	...	...	...
COAGULATION DISORDERS.....397	*6	*7	*7	*9	10	*10.7	*10.4	*8.6	*8.7	6.5
RETICULOENDOTHELIAL AND IMMUNITY DISORDERS AGE 70 OR OVER AND/OR C.C.....398	*9	*9	10	12	13	*9.1	*6.4	11.4	8.2	6.8
RETICULOENDOTHELIAL AND IMMUNITY DISORDERS AGE UNDER 70 WITHOUT C.C.....399	*2	*3	*	*	*	*6.2	*7.7	*	*	*
MAJOR DIAGNOSTIC CATEGORY 17: MYELOPROLIFERATIVE DISEASES AND DISORDERS, POORLY DIFFERENTIATED MALIGNANCY AND OTHER NEOPLASMS NOT ELSEWHERE CLASSIFIED										
LYMPHOMA OR LEUKEMIA WITH MAJOR OPERATING ROOM PROCEDURE.....400	*6	*6	*6	*8	*7	*17.2	*18.2	*21.5	*18.1	*17.2
LYMPHOMA OR LEUKEMIA WITH MINOR OPERATING ROOM PROCEDURE AGE 70 OR OVER AND/OR C.C.....401	*6	*5	*5	*5	*8	*18.5	*13.1	*10.4	*14.5	*11.4
LYMPHOMA OR LEUKEMIA WITH MINOR OPERATING ROOM PROCEDURE AGE UNDER 70 WITHOUT C.C.....402	*3	*2	*	*	*2	*9.0	*13.3	*	*	*5.3
LYMPHOMA OR LEUKEMIA AGE 70 OR OVER AND/OR C.C.....403	74	77	75	94	88	12.6	12.7	11.2	11.5	9.9
LYMPHOMA OR LEUKEMIA AGE 18-69 WITHOUT C.C.....404	*10	12	11	*9	*9	*9.9	10.2	8.3	*11.5	*5.6
LYMPHOMA OR LEUKEMIA AGE UNDER 18.....405	...	...	...	...	...	...	...	...	...	...
MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM WITH MAJOR OPERATING ROOM PROCEDURE AND/OR C.C.....406	*	*3	*6	*3	*9	*	*19.8	*17.1	*24.9	*18.5
MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM WITH MAJOR OPERATING ROOM PROCEDURE WITHOUT C.C.....407	*4	*4	*4	*3	*2	*12.5	*14.7	*16.4	*20.5	*16.9
MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM WITH MINOR OPERATING ROOM PROCEDURE.....408	*2	*4	*3	*2	*3	*16.5	*14.1	*13.6	*14.7	*17.4
RADIOTHERAPY.....409	-	*	-	*	-	-	*	-	*	-
CHEMOTHERAPY.....410	*	*2	*	*2	*2	*	*1.0	*	*2.1	*4.0
HISTORY OF MALIGNANCY WITHOUT ENDOSCOPY.....411	*5	*5	*5	*7	*3	*6.2	*7.3	*8.3	*4.9	*3.0
HISTORY OF MALIGNANCY WITH ENDOSCOPY.....412	*3	*2	*3	*4	*3	*3.7	*2.7	*3.0	*4.3	*1.7
OTHER MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM DIAGNOSIS AGE 70 OR OVER AND/OR C.C.....413	31	35	30	22	48	14.1	11.2	14.0	10.5	11.0
OTHER MYELOPROLIFERATIVE DISORDER OR POORLY DIFFERENTIATED NEOPLASM DIAGNOSIS AGE UNDER 70 WITHOUT C.C.....414	*5	*6	*4	*4	*7	*10.4	*11.1	*13.5	*6.9	*6.8

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 2. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS 65 YEARS AND OLDER DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 18: INFECTIOUS AND PARASITIC DISEASES (SYSTEMIC OR UNSPECIFIED SITES)										
OPERATING ROOM PROCEDURE FOR INFECTIOUS AND PARASITIC DISEASES.....415	*7	*8	*10	*10	11	*31.7	*22.7	*26.2	*25.3	29.1
SEPTICEMIA AGE 18 OR OVER.....416	30	29	33	47	75	13.4	14.7	10.6	13.7	10.1
SEPTICEMIA AGE UNDER 18.....417	...	...	...	...	...	...	...	...	...	...
POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS.....418	*5	*5	*5	*6	*8	*11.6	*9.7	*9.5	*9.8	*16.9
FEVER OF UNKNOWN ORIGIN AGE 70 OR OVER AND/OR C.C.....419	*	*	*	*	*	*	*	*	*	*
FEVER OF UNKNOWN ORIGIN AGE 18-69 WITHOUT C.C.....420	*	*	*	*	*	*	*	*	*	*
VIRAL ILLNESS AGE 18 OR OVER.....421	25	27	23	16	15	6.9	7.1	6.8	6.4	4.9
VIRAL ILLNESS AND FEVER OF UNKNOWN ORIGIN AGE UNDER 18.....422	...	...	...	...	...	...	...	...	...	...
OTHER INFECTIOUS AND PARASITIC DISEASES DIAGNOSES.....423	*10	15	17	*7	*8	*8.6	12.8	10.6	*11.9	*12.3
MAJOR DIAGNOSTIC CATEGORY 19: MENTAL DISEASES AND DISORDERS										
OPERATING ROOM PROCEDURES WITH PRINCIPAL DIAGNOSIS OF MENTAL ILLNESS.....424	*6	*9	*9	*10	*7	*22.8	*19.9	*18.5	*26.8	*28.4
ACUTE ADJUSTMENT REACTIONS AND DISTURBANCES OF PSYCHOSOCIAL DYSFUNCTION.....425	14	14	15	19	16	7.3	5.7	6.2	8.7	6.2
DEPRESSIVE NEUROSES.....426	33	33	35	30	28	12.5	11.5	9.9	11.4	9.7
NEUROSES EXCEPT DEPRESSIVE.....427	*2	*5	*5	*6	*6	*9.3	*12.2	*13.0	*17.6	*12.8
DISORDERS OF PERSONALITY AND IMPULSE CONTROL.....428	*	*	*	*2	*	*	*	*	*6.3	*
ORGANIC DISTURBANCES AND MENTAL RETARDATION.....429	82	84	87	86	70	14.4	12.7	13.1	12.1	10.7
PSYCHOSES.....430	55	57	67	75	85	18.4	19.1	17.0	17.3	14.9
CHILDHOOD MENTAL DISORDERS.....431	-	*	*	*	*	-	*	*	*	*
OTHER DIAGNOSES OF MENTAL DISORDERS.....432	-	*	*	*	*	-	*	*	*	*
MAJOR DIAGNOSTIC CATEGORY 20: SUBSTANCE USE AND SUBSTANCE-INDUCED ORGANIC MENTAL DISORDERS										
SUBSTANCE USE AND SUBSTANCE-INDUCED ORGANIC MENTAL DISORDERS, LEFT AGAINST MEDICAL ADVICE.....433	*3	*4	*2	*3	*2	*4.6	*6.6	*8.9	*9.5	*4.0
DRUG DEPENDENCE.....434	*	-	*	*	*	*	-	*	*	*
DRUG USE EXCEPT DEPENDENCE.....435	*	*	*2	*	*	*	*	*8.4	*	*
ALCOHOL DEPENDENCE.....436	*	*	*	*	*3	*	*	*	*	*14.3
ALCOHOL USE EXCEPT DEPENDENCE.....437	*4	*3	*3	*3	*3	*6.8	*5.4	*3.9	*6.1	*4.4
ALCOHOL AND SUBSTANCE-INDUCED ORGANIC MENTAL SYNDROME.....438	35	36	37	32	34	9.7	12.4	12.1	11.9	12.5
MAJOR DIAGNOSTIC CATEGORY 21: INJURY, POISONING, AND TOXIC EFFECTS OF DRUGS										
SKIN GRAFTS FOR INJURIES.....439	*	*2	*	*	*	*	*24.8	*	*	*
WOUND DEBRIDEMENTS FOR INJURIES.....440	*	*2	*	*3	*3	*	*15.4	*	*7.6	*13.9
HAND PROCEDURES FOR INJURIES.....441	*	*	*	*	*2	*	*	*	*	*4.6
OTHER OPERATING ROOM PROCEDURES FOR INJURIES AGE 70 OR OVER AND/OR C.C.....442	19	21	25	28	29	15.1	11.3	13.7	13.8	13.3
OTHER OPERATING ROOM PROCEDURES FOR INJURIES AGE UNDER 70 WITHOUT C.C.....443	*6	*6	*4	*6	*5	*5.2	*14.4	*16.9	*11.4	*7.3
MULTIPLE TRAUMA AGE 70 OR OVER AND/OR C.C.....444	*10	10	*7	*9	11	*8.4	9.9	*7.8	*10.8	5.8
MULTIPLE TRAUMA AGE 18-69 WITHOUT C.C.....445	*	*	*	*2	*	*	*	*	*7.3	*
MULTIPLE TRAUMA AGE UNDER 18.....446	...	...	...	...	...	...	...	...	...	...
ALLERGIC REACTIONS AGE 18 OR OVER.....447	*3	*2	*5	*3	*4	*4.9	*4.7	*7.2	*4.3	*3.9
ALLERGIC REACTIONS AGE UNDER 18.....448	...	...	...	...	...	...	...	...	...	...
TOXIC EFFECTS OF DRUGS AGE 70 OR OVER AND/OR C.C.....449	30	32	41	45	48	7.8	8.0	7.9	7.3	6.5
TOXIC EFFECTS OF DRUGS AGE 18-69 WITHOUT C.C.....450	*5	*5	*7	*6	*4	*5.8	*3.6	*6.0	*5.7	*3.3
TOXIC EFFECTS OF DRUGS AGE UNDER 18.....451	...	...	...	...	...	...	...	...	...	...
COMPLICATIONS OF TREATMENT AGE 70 OR OVER AND/OR C.C.....452	16	17	16	20	20	8.7	10.4	7.8	7.2	5.9
COMPLICATIONS OF TREATMENT AGE UNDER 70 WITHOUT C.C.....453	*3	*5	*5	*4	*4	*5.6	*6.0	*6.3	*7.4	*5.5
OTHER INJURIES, POISONINGS AND TOXIC EFFECTS DIAGNOSIS AGE 70 OR OVER AND/OR C.C.....454	*9	*9	*6	*7	*7	*9.8	*7.7	*7.2	*7.4	*9.9
OTHER INJURIES, POISONINGS AND TOXIC EFFECTS DIAGNOSIS AGE UNDER 70 WITHOUT C.C.....455	*	*	*	*	*	*	*	*	*	*
MAJOR DIAGNOSTIC CATEGORY 22: BURNS										
BURNS, TRANSFERRED TO ANOTHER ACUTE CARE FACILITY.....456	*	-	-	*	*	*	-	-	*	*
EXTENSIVE BURNS.....457	*	*	*	*	*	*	*	*	*	*
NON-EXTENSIVE BURNS WITH SKIN GRAFTS.....458	*2	*2	*	*	*	*40.1	*31.5	*	*	*
NON-EXTENSIVE BURNS WITH WOUND DEBRIDEMENT AND OTHER OPERATING ROOM PROCEDURE.....459	*	*	*	*	-	*	*	*	*	-
NON-EXTENSIVE BURNS WITHOUT OPERATING ROOM PROCEDURE.....460	*6	*2	*3	*3	*3	*18.2	*15.3	*21.0	*12.8	*9.7

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 2. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS 65 YEARS AND OLDER DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS-RELATED GROUPS (DRG'S): UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP AND DRG NUMBER	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
MAJOR DIAGNOSTIC CATEGORY 23: FACTORS INFLUENCING HEALTH STATUS AND OTHER CONTACTS WITH HEALTH SERVICES										
OPERATING ROOM PROCEDURE WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES.....461	*10	*6	*9	*7	*7	*12.5	*11.4	*7.4	*11.2	*9.1
REHABILITATION.....462	-	*	*	*	*	-	*	*	*	*
SIGNS AND SYMPTOMS WITH C.C.....463	-	-	*	*	-	-	-	*	*	-
SIGNS AND SYMPTOMS WITHOUT C.C.....464	*2	*2	*4	*3	*2	*5.9	*3.8	*8.5	*3.7	*8.8
AFTERCARE WITH HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS.....465	-	*	*	-	-	-	*	*	-	-
AFTERCARE WITHOUT HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS.....466	*	*	*	*	*	*	*	*	*	*
OTHER FACTORS INFLUENCING HEALTH STATUS.....467	35	35	31	35	27	7.1	6.2	6.7	6.2	7.8
UNRELATED OPERATING ROOM PROCEDURE.....468	200	211	226	225	224	18.5	18.5	17.3	16.5	15.5
PRINCIPAL DIAGNOSIS INVALID AS DISCHARGE DIAGNOSIS.....469	-	-	-	-	-	-	-	-	-	-
UNGROUPABLE.....470	*	-	-	-	-	*	-	-	-	-

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 3. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS UNDER 65 YEARS OF AGE DISCHARGED FROM SHORT-STAY HOSPITALS, BY SELECTED DIAGNOSIS-RELATED GROUPS (DRG'S) AND GEOGRAPHIC REGION: UNITED STATES, 1980-84

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP, DRG NUMBER, AND REGION	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
ALL DISCHARGES, ALL REGIONS.....1-470	27,968	28,136	27,896	27,481	25,936	6.0	6.0	5.9	5.8	5.6
NORTHEAST.....	5,693	5,621	5,564	5,420	5,023	6.8	6.7	6.5	6.3	6.2
NORTH CENTRAL.....	8,058	8,177	7,930	7,396	6,806	6.4	6.2	6.3	6.1	6.0
SOUTH.....	9,686	9,715	9,804	10,025	9,644	5.7	5.7	5.6	5.6	5.2
WEST.....	4,531	4,624	4,598	4,640	4,463	5.2	5.2	5.0	5.0	4.9
VAGINAL DELIVERY WITHOUT COMPLICATING DIAGNOSES, ALL REGIONS.....373	2,742	2,790	2,784	2,746	2,624	3.1	3.0	2.9	2.9	2.7
NORTHEAST.....	519	517	524	515	467	3.6	3.5	3.4	3.5	3.2
NORTH CENTRAL.....	768	796	765	724	691	3.6	3.5	3.3	3.2	3.0
SOUTH.....	922	922	937	940	911	2.9	2.8	2.7	2.6	2.7
WEST.....	533	555	559	568	555	2.3	2.3	2.2	2.2	2.1
MEDICAL BACK PROBLEMS, ALL REGIONS.....243	781	800	790	827	780	7.4	7.2	7.2	6.6	6.1
NORTHEAST.....	115	126	121	134	120	8.7	8.9	9.0	8.0	7.6
NORTH CENTRAL.....	230	266	245	226	214	7.9	7.4	7.3	6.6	6.3
SOUTH.....	288	280	298	311	323	7.1	6.9	6.8	6.7	6.0
WEST.....	148	127	125	157	123	6.0	5.9	6.2	4.9	5.0
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISEASE AGE 18-69 WITHOUT C.C., ALL REGIONS.....183	702	688	673	633	543	4.5	4.3	4.1	4.1	3.9
NORTHEAST.....	90	83	97	84	78	4.8	5.0	4.5	4.6	4.2
NORTH CENTRAL.....	200	188	178	157	135	4.6	4.4	4.3	4.2	3.8
SOUTH.....	338	340	320	312	273	4.4	4.3	4.2	4.1	3.8
WEST.....	75	76	78	81	58	3.9	3.3	3.3	3.2	3.8
CESAREAN SECTION WITHOUT C.C., ALL REGIONS.....371	539	631	649	708	712	6.3	6.1	5.7	5.6	5.4
NORTHEAST.....	122	133	125	142	126	7.4	7.3	6.7	6.4	6.0
NORTH CENTRAL.....	130	154	145	168	161	6.7	6.3	6.2	5.9	5.9
SOUTH.....	195	228	258	267	281	5.7	5.7	5.4	5.5	5.2
WEST.....	93	115	121	131	144	5.2	5.0	4.8	4.8	4.5
NONRADICAL HYSTERECTOMY AGE UNDER 70 WITHOUT C.C., ALL REGIONS.....355	513	527	495	521	493	7.6	7.3	7.2	6.9	6.6
NORTHEAST.....	81	71	70	86	70	8.4	8.2	7.9	7.7	7.2
NORTH CENTRAL.....	134	130	128	124	115	8.0	8.0	7.6	7.2	6.9
SOUTH.....	213	218	212	219	212	7.4	7.1	7.1	6.9	6.7
WEST.....	86	109	85	93	97	6.4	6.1	6.2	5.6	5.8
UNRELATED OPERATING ROOM PROCEDURE, ALL REGIONS.....468	429	406	401	392	337	10.5	10.7	11.2	10.0	9.8
NORTHEAST.....	76	71	75	69	63	12.8	14.3	13.8	12.1	12.3
NORTH CENTRAL.....	125	117	116	110	94	11.0	10.4	12.0	10.4	9.1
SOUTH.....	155	148	145	146	122	9.9	10.1	9.8	9.2	8.7
WEST.....	72	70	65	67	59	8.3	8.9	10.1	9.1	10.5
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISORDERS AGE UNDER 18, ALL REGIONS.....184	373	379	392	348	319	3.9	3.7	3.8	3.6	3.3
NORTHEAST.....	69	68	69	59	55	3.9	3.9	4.0	4.0	3.2
NORTH CENTRAL.....	113	110	111	90	81	3.8	3.4	3.8	3.7	3.2
SOUTH.....	162	168	173	160	152	3.9	3.7	3.8	3.5	3.5
WEST.....	29	32	39	40	31	3.6	4.0	3.3	2.8	3.1
PSYCHOSES, ALL REGIONS.....430	333	383	388	388	423	15.6	16.9	16.5	16.4	15.7
NORTHEAST.....	86	99	95	79	76	18.0	20.1	19.1	20.2	19.8
NORTH CENTRAL.....	96	129	118	130	141	18.0	17.0	19.7	17.6	17.1
SOUTH.....	82	86	108	115	118	12.0	13.3	13.8	14.4	13.0
WEST.....	69	69	68	64	88	13.4	16.4	11.7	12.8	13.7
ALCOHOL AND SUBSTANCE-INDUCED ORGANIC MENTAL SYNDROME, ALL REGIONS.....438	386	403	360	318	323	10.0	10.0	10.6	11.0	10.0
NORTHEAST.....	192	182	157	137	138	8.9	8.7	9.8	9.7	9.1
NORTH CENTRAL.....	104	112	90	96	84	11.7	12.9	11.9	12.6	12.5
SOUTH.....	56	66	68	47	62	11.2	9.9	10.7	11.6	8.5
WEST.....	34	44	45	39	39	8.7	8.6	10.9	10.7	10.0
DILATION AND CURETTAGE OF UTERUS, CONIZATION EXCEPT FOR MALIGNANCY, ALL REGIONS.....364	452	392	345	283	190	2.2	2.0	2.0	1.9	1.8
NORTHEAST.....	137	114	111	97	67	2.1	1.9	1.9	1.8	1.6
NORTH CENTRAL.....	132	101	85	59	33	2.2	2.1	2.0	2.0	2.1
SOUTH.....	133	135	118	96	67	2.3	2.3	2.1	2.1	2.0
WEST.....	49	42	32	31	24	2.1	1.5	1.5	1.3	1.4
ABORTION WITH DILATION AND CURETTAGE OF UTERUS, ALL REGIONS.....381	377	355	325	320	255	1.7	1.7	1.6	1.5	1.8
NORTHEAST.....	137	140	136	127	91	1.5	1.5	1.4	1.4	1.6
NORTH CENTRAL.....	91	71	65	59	52	1.9	1.9	1.8	1.7	2.0
SOUTH.....	104	101	86	103	82	1.9	1.8	1.7	1.6	1.9
WEST.....	45	44	39	31	30	1.3	1.4	1.4	1.4	1.5
BRONCHITIS AND ASTHMA AGE UNDER 18, ALL REGIONS..98	285	299	313	320	277	4.1	4.1	3.9	3.8	3.7
NORTHEAST.....	63	62	65	54	58	4.5	4.3	4.6	4.0	3.7
NORTH CENTRAL.....	89	95	96	92	72	4.2	4.2	3.9	3.8	4.0
SOUTH.....	107	108	118	136	106	4.0	4.3	3.8	3.8	3.8
WEST.....	27	33	34	38	40	3.2	3.0	3.3	3.4	2.9

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 3. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS UNDER 65 YEARS OF AGE DISCHARGED FROM SHORT-STAY HOSPITALS, BY SELECTED DIAGNOSIS-RELATED GROUPS (DRG'S) AND GEOGRAPHIC REGION: UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP, DRG NUMBER, AND YEAR	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
SIMPLE PNEUMONIA AND PLEURISY AGE UNDER 18,										
ALL REGIONS.....91	242	243	279	256	216	4.9	5.1	4.8	4.7	4.6
NORTHEAST.....	35	29	36	41	29	5.4	5.6	5.4	5.1	4.7
NORTH CENTRAL.....	67	70	86	74	61	5.0	5.2	5.0	4.9	5.1
SOUTH.....	122	120	131	119	97	4.8	5.2	4.6	4.6	4.3
WEST.....	18	25	28	22	29	3.7	3.8	4.1	3.8	4.4
TONSILLECTOMY AND/OR ADENOIDECTOMY ONLY,										
AGE UNDER 18, ALL REGIONS.....60	295	295	279	270	218	1.8	1.8	1.9	1.8	1.6
NORTHEAST.....	49	49	43	41	37	1.6	1.6	1.8	1.5	1.5
NORTH CENTRAL.....	101	109	106	92	71	1.9	1.8	1.9	1.7	1.6
SOUTH.....	90	90	83	98	82	2.0	2.0	2.1	2.2	1.9
WEST.....	55	48	48	39	28	1.5	1.5	1.4	1.4	1.2
INGUINAL AND FEMORAL HERNIA PROCEDURES AGE										
18-69 WITHOUT C.C., ALL REGIONS.....162	268	253	271	255	236	4.5	4.4	4.2	3.9	3.3
NORTHEAST.....	74	68	76	61	57	4.6	4.4	4.0	3.7	3.5
NORTH CENTRAL.....	78	71	74	65	64	4.9	4.7	4.4	4.1	3.5
SOUTH.....	70	67	80	82	81	4.8	4.9	4.7	4.1	3.5
WEST.....	46	47	42	46	35	3.4	3.3	3.1	3.2	2.3
DIABETES AGE 36 OR OVER, ALL REGIONS.....294	256	249	259	243	204	8.6	8.1	8.2	7.4	6.9
NORTHEAST.....	55	52	52	47	48	9.4	10.8	9.9	8.7	8.3
NORTH CENTRAL.....	73	66	72	65	52	8.7	7.7	8.7	7.4	6.8
SOUTH.....	99	103	104	102	79	8.6	7.4	7.4	7.9	6.6
WEST.....	29	27	30	29	26	6.8	6.9	6.4	6.0	5.0
VAGINAL DELIVERY WITH STERILIZATION AND/OR										
DILATION AND CURETTAGE OF UTERUS, ALL REGIONS..374	236	246	247	253	225	3.8	3.6	3.6	3.5	3.3
NORTHEAST.....	33	39	44	37	30	4.4	4.5	4.3	4.1	4.1
NORTH CENTRAL.....	57	51	57	50	45	4.2	3.9	4.1	3.9	3.7
SOUTH.....	113	119	110	127	108	3.6	3.4	3.3	3.3	3.2
WEST.....	34	37	37	39	43	3.2	3.1	2.8	2.7	2.7
OTHER FACTORS INFLUENCING HEALTH STATUS,										
ALL REGIONS.....467	237	220	242	228	212	3.8	4.0	3.6	3.7	4.0
NORTHEAST.....	44	45	53	52	51	3.6	4.7	3.8	3.2	5.4
NORTH CENTRAL.....	65	59	68	62	45	3.8	3.9	4.0	3.4	4.3
SOUTH.....	81	81	75	71	78	4.0	4.1	3.3	3.5	3.1
WEST.....	47	35	46	43	38	3.9	3.3	3.6	5.3	3.8
TOTAL CHOLECYSTECTOMY WITHOUT COMMON BILE DUCT										
EXPLORATION AGE UNDER 70 WITHOUT C.C.,										
ALL REGIONS.....198	214	218	233	212	208	8.4	8.1	7.8	7.5	6.5
NORTHEAST.....	44	45	48	35	41	9.4	8.8	8.1	8.0	7.0
NORTH CENTRAL.....	64	61	63	65	55	8.3	8.1	7.9	7.2	6.8
SOUTH.....	74	77	83	77	73	8.6	8.3	8.1	7.9	6.6
WEST.....	33	35	39	34	39	7.0	6.9	6.7	6.4	5.4
BRONCHITIS AND ASTHMA AGE 18-69 WITHOUT C.C.,										
ALL REGIONS.....97	230	225	227	227	207	5.3	5.5	5.3	5.1	4.6
NORTHEAST.....	44	44	45	48	44	5.0	6.0	6.0	5.2	5.0
NORTH CENTRAL.....	57	61	62	53	49	5.1	5.7	5.8	5.7	4.9
SOUTH.....	87	85	81	83	81	5.6	5.5	4.9	5.3	4.6
WEST.....	41	35	38	44	34	4.5	4.5	4.6	4.1	3.9

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 4. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS 65 YEARS OF AGE AND OVER DISCHARGED FROM SHORT-STAY HOSPITALS, BY SELECTED DIAGNOSIS-RELATED GROUPS (DRG'S) AND GEOGRAPHIC REGION: UNITED STATES, 1980-84

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP, DRG NUMBER, AND REGION	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
ALL DISCHARGES, ALL REGIONS.....1-470	9,864	10,408	10,697	11,302	11,226	10.7	10.5	10.1	9.7	8.9
NORTHEAST.....	2,176	2,201	2,283	2,373	2,385	13.2	13.1	12.3	12.1	11.3
NORTH CENTRAL.....	2,820	2,955	3,008	3,097	3,093	10.8	10.6	10.3	9.7	8.7
SOUTH.....	3,297	3,488	3,631	3,859	3,807	9.9	9.9	9.4	9.1	8.4
WEST.....	1,572	1,764	1,774	1,974	1,941	8.6	8.3	8.2	8.0	7.4
LENS PROCEDURES, ALL REGIONS.....39	313	387	429	473	394	3.7	3.2	2.9	2.6	2.3
NORTHEAST.....	64	75	81	93	81	3.7	3.4	3.0	2.7	2.7
NORTH CENTRAL.....	91	114	127	147	126	4.3	3.4	3.3	2.6	2.4
SOUTH.....	85	100	119	134	100	3.6	3.1	3.0	2.7	2.4
WEST.....	73	97	102	99	87	3.2	2.9	2.4	2.2	1.9
ATHEROSCLEROSIS AGE 70 OR OVER AND/OR C.C., ALL REGIONS.....132	442	422	427	406	282	9.8	9.4	8.8	8.7	7.1
NORTHEAST.....	120	93	99	95	70	12.7	11.7	10.9	11.2	8.9
NORTH CENTRAL.....	112	107	109	102	67	9.3	9.5	9.0	8.5	7.3
SOUTH.....	150	161	157	144	103	8.9	8.9	8.2	8.2	6.7
WEST.....	60	60	62	66	41	7.2	6.8	6.4	6.5	5.0
HEART FAILURE AND SHOCK, ALL REGIONS.....127	349	363	387	402	456	10.0	9.9	9.7	9.5	8.4
NORTHEAST.....	78	83	88	89	105	12.0	12.6	11.8	12.3	10.2
NORTH CENTRAL.....	98	100	108	112	126	10.1	9.9	10.4	9.3	8.1
SOUTH.....	121	122	132	153	162	9.9	9.2	8.8	8.9	8.2
WEST.....	52	59	59	48	64	7.4	7.5	7.7	6.7	6.5
ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISEASE AGE 70 OR OVER AND/OR C.C., ALL REGIONS.....182	353	372	376	394	345	7.2	7.0	6.7	6.7	6.0
NORTHEAST.....	56	58	63	68	66	9.6	8.9	8.3	8.4	7.5
NORTH CENTRAL.....	102	111	102	105	90	7.1	7.0	6.9	6.4	5.8
SOUTH.....	157	154	169	168	145	6.7	6.9	6.3	6.7	5.8
WEST.....	38	49	42	53	43	5.7	5.4	5.9	5.5	4.8
CHRONIC OBSTRUCTIVE PULMONARY DISEASE, ALL REGIONS.....88	270	304	300	320	272	9.8	9.9	9.8	9.6	9.0
NORTHEAST.....	60	59	54	61	60	12.0	11.7	12.0	11.9	11.9
NORTH CENTRAL.....	66	79	76	80	66	9.8	10.1	10.2	8.9	8.6
SOUTH.....	103	116	117	119	99	9.2	9.3	8.8	9.6	8.1
WEST.....	40	50	54	60	48	8.3	9.0	9.3	8.3	7.7
SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TRANSIENT ISCHEMIC ATTACKS, ALL REGIONS.....14	281	294	295	305	339	15.1	15.8	15.4	14.4	12.0
NORTHEAST.....	60	67	64	62	68	18.3	20.4	20.4	19.3	16.3
NORTH CENTRAL.....	77	83	76	77	79	15.9	14.7	16.2	14.3	12.3
SOUTH.....	95	95	103	99	119	13.5	15.2	13.2	13.2	10.4
WEST.....	49	48	52	66	73	13.1	12.2	12.2	11.6	10.0
SIMPLE PNEUMONIA AND PLEURISY AGE 70 OR OVER AND/OR C.C., ALL REGIONS.....89	282	281	276	303	350	11.0	11.2	10.7	10.7	9.3
NORTHEAST.....	57	50	51	54	67	13.1	13.9	11.8	13.2	11.6
NORTH CENTRAL.....	74	75	80	88	94	11.3	11.4	10.6	10.7	9.4
SOUTH.....	109	114	106	116	140	10.4	10.5	10.7	10.0	8.7
WEST.....	42	41	38	46	49	9.3	9.7	9.5	9.7	7.9
UNRELATED OPERATING ROOM PROCEDURE, ALL REGIONS.....468	200	211	226	225	224	18.5	18.5	17.3	16.5	15.5
NORTHEAST.....	52	55	59	49	55	23.7	24.8	20.0	18.5	23.2
NORTH CENTRAL.....	56	66	65	69	60	17.4	16.1	17.5	16.3	13.6
SOUTH.....	61	62	72	71	72	17.0	17.2	15.8	15.2	13.9
WEST.....	32	28	29	35	37	14.8	14.3	15.0	16.3	10.5
DIABETES AGE 36 OR OVER, ALL REGIONS.....294	206	218	208	214	180	10.5	9.9	10.0	9.3	8.3
NORTHEAST.....	50	44	49	45	41	13.2	14.1	13.9	13.0	10.5
NORTH CENTRAL.....	62	61	56	59	48	10.6	9.4	9.7	9.0	7.7
SOUTH.....	72	90	77	85	72	9.0	8.9	8.4	7.7	7.7
WEST.....	22	23	24	25	19	8.6	7.4	8.1	8.4	7.0
ANGINA PECTORIS, ALL REGIONS.....140	147	161	195	217	272	7.1	7.0	6.6	6.2	5.6
NORTHEAST.....	34	35	49	57	68	8.6	8.4	8.0	7.3	6.5
NORTH CENTRAL.....	38	47	47	48	70	7.1	8.0	6.4	6.7	5.4
SOUTH.....	55	58	67	80	93	6.3	6.1	6.6	5.6	5.6
WEST.....	21	21	32	32	42	6.7	5.1	4.9	4.8	4.1
MEDICAL BACK PROBLEMS, ALL REGIONS.....243	156	173	186	195	186	9.7	8.8	9.3	8.3	7.4
NORTHEAST.....	30	31	38	34	34	12.4	10.1	11.5	9.6	9.0
NORTH CENTRAL.....	50	49	58	56	49	9.6	8.6	9.7	8.9	8.4
SOUTH.....	50	64	63	66	67	8.7	8.4	7.7	7.6	6.8
WEST.....	26	28	27	39	35	8.4	8.4	8.9	7.3	5.7
CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS AGE 70 OR OVER AND/OR C.C., ALL REGIONS.....138	140	168	181	193	218	7.8	7.3	7.1	7.0	6.1
NORTHEAST.....	32	36	35	38	41	10.8	9.0	9.1	9.4	6.9
NORTH CENTRAL.....	39	49	51	49	53	7.7	8.2	7.3	7.0	6.4
SOUTH.....	46	51	65	72	84	6.7	6.9	7.1	6.7	6.2
WEST.....	23	32	30	35	40	6.2	5.1	4.8	5.0	4.5

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

TABLE 4. NUMBER AND AVERAGE LENGTH OF STAY OF PATIENTS 65 YEARS OF AGE AND OVER DISCHARGED FROM SHORT-STAY HOSPITALS, BY SELECTED DIAGNOSIS-RELATED GROUPS (DRG'S) AND GEOGRAPHIC REGION: UNITED STATES, 1980-84--CON.

[DISCHARGES FROM NON-FEDERAL SHORT-STAY HOSPITALS. EXCLUDES NEWBORN INFANTS]

DIAGNOSIS-RELATED GROUP, DRG NUMBER, AND REGION	1980	1981	1982	1983	1984	1980	1981	1982	1983	1984
	NUMBER IN THOUSANDS					AVERAGE LENGTH OF STAY IN DAYS				
CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION WITHOUT CARDIOVASCULAR COMPLICATIONS, DISCHARGED ALIVE, ALL REGIONS...122	150	179	174	175	191	13.5	12.6	12.2	11.3	10.4
NORTHEAST.....	38	42	44	45	48	14.8	14.1	13.6	13.3	12.5
NORTH CENTRAL.....	41	44	44	43	48	14.0	13.7	12.9	12.0	10.2
SOUTH.....	48	56	62	55	65	13.7	12.5	11.8	10.5	10.0
WEST.....	24	37	24	32	29	10.2	9.7	9.4	9.0	7.9
HYPERTENSION, ALL REGIONS.....134	149	162	158	168	120	8.6	7.7	7.9	7.2	6.8
NORTHEAST.....	28	26	28	29	28	9.6	9.5	8.8	9.7	8.0
NORTH CENTRAL.....	34	47	43	41	34	8.5	7.6	7.7	6.9	5.8
SOUTH.....	71	68	70	74	43	8.5	7.7	7.6	6.9	6.6
WEST.....	15	22	17	25	16	7.6	5.7	8.4	5.3	7.0
TRANSIENT ISCHEMIC ATTACKS, ALL REGIONS.....15	148	150	155	175	167	7.2	7.6	7.6	6.7	6.2
NORTHEAST.....	37	35	39	37	37	8.9	10.3	9.6	9.2	8.9
NORTH CENTRAL.....	42	39	42	50	46	7.3	8.1	7.8	6.6	6.1
SOUTH.....	51	53	52	60	61	6.8	6.7	7.3	6.1	5.5
WEST.....	19	24	22	29	22	4.5	4.9	4.3	4.8	4.1
BRONCHITIS AND ASTHMA AGE 70 OR OVER AND/OR C.C., ALL REGIONS.....96	142	126	148	190	186	8.0	8.7	8.3	8.4	7.5
NORTHEAST.....	26	25	22	36	33	8.4	12.0	9.2	9.8	9.6
NORTH CENTRAL.....	40	34	38	44	49	7.9	8.4	8.0	8.4	6.8
SOUTH.....	49	46	59	75	72	8.4	8.2	8.3	8.0	7.5
WEST.....	27	21	29	35	31	7.3	6.6	8.0	7.8	6.2
TRANSURETHRAL PROSTATECTOMY AGE 70 OR OVER AND/OR C.C., ALL REGIONS.....336	129	140	144	148	158	10.9	10.5	9.3	9.3	8.5
NORTHEAST.....	29	32	29	33	33	13.1	13.4	11.1	10.7	8.7
NORTH CENTRAL.....	43	39	42	45	45	11.1	10.7	9.5	9.7	9.3
SOUTH.....	35	44	45	45	51	10.4	9.9	9.4	9.2	8.4
WEST.....	23	24	28	25	29	8.6	7.3	6.8	7.2	7.1
KIDNEY AND URINARY TRACT INFECTIONS AGE 70 OR OVER AND/OR C.C., ALL REGIONS.....320	129	124	142	157	164	9.0	9.3	8.5	8.9	8.0
NORTHEAST.....	18	19	23	28	28	10.7	11.0	9.9	11.8	10.0
NORTH CENTRAL.....	34	30	34	45	38	8.0	9.8	8.8	8.4	7.6
SOUTH.....	64	59	67	67	79	9.5	9.2	8.2	8.5	7.7
WEST.....	13	16	17	17	19	6.6	6.4	7.1	7.1	6.5
RESPIRATORY NEOPLASMS, ALL REGIONS.....82	122	126	137	143	148	11.8	11.3	10.9	9.9	9.6
NORTHEAST.....	27	33	36	33	32	13.8	13.4	11.1	12.9	15.1
NORTH CENTRAL.....	41	29	34	39	42	11.8	11.2	11.9	9.7	9.2
SOUTH.....	33	40	43	45	47	12.9	11.4	11.2	9.0	7.5
WEST.....	21	23	24	25	27	7.6	8.3	9.0	7.7	7.6
HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 70 OR OVER AND/OR C.C., ALL REGIONS.....210	125	121	135	137	140	21.7	21.5	19.5	20.1	16.7
NORTHEAST.....	28	26	27	32	29	26.8	29.4	25.1	29.3	21.9
NORTH CENTRAL.....	39	39	45	35	38	22.2	20.8	19.9	18.1	16.2
SOUTH.....	34	33	38	37	40	19.5	19.3	18.5	18.3	15.8
WEST.....	24	23	25	33	32	18.1	17.2	14.3	15.5	13.6

NOTE: IN THIS TABLE THE ABBREVIATION "C.C." STANDS FOR "SUBSTANTIAL COMPLICATION AND/OR COMORBIDITY".

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Appendix I

Technical notes on methods

Statistical design of the National Hospital Discharge Survey

Scope of the survey

The National Center for Health Statistics, by means of the National Hospital Discharge Survey (NHDS), samples records of inpatients discharged from noninstitutional hospitals, exclusive of military and Veterans Administration hospitals, located in the 50 States and the District of Columbia. Only hospitals with six beds or more for patient use and those in which the average length of stay for all patients is less than 30 days are included in the survey. Discharges of all patients from Federal hospitals are excluded.

Sample size

The Master Facility Inventory of Hospitals (MFI) is the universe from which the NHDS sample is drawn. A detailed description of the development, contents, maintenance plans, and assessment of coverage was published in 1965.⁸ As shown in table I, the original universe for the survey consisted of 6,965 short-stay hospitals contained in the 1963 Master Facility Inventory.

As shown in table I, the universe was updated five times from 1965–83. The sample for the survey, which was composed of 315 hospitals in 1965, has been increased six times; it contained 553 hospitals in 1984. Each year some of the sampled hospitals refused to participate in the survey or were found to be out of scope either because they had gone out of business or failed to meet the definition of a short-stay hospital. Thus, the number of hospitals participating in the survey varied from year to year, as did the number of abstracts of medical records provided by participating hospitals. These data for 1980–84 are provided in table II.

Table I. Number of hospitals in the National Hospital Discharge Survey (NHDS) universe and number of hospitals added to the NHDS universe, by year of addition and year of Master Facility Inventory (MFI) used: United States, 1963–81

MFI data year	NHDS universe	
	Year added	Number added
1963	1965	6,965
1969	1969	442
1972	1975	223
1975	1977	273
1977	1979	114
1979	1981	63
1981	1983	50

Table II. Number of hospitals in the National Hospital Discharge Survey (NHDS) universe, number of hospitals in the NHDS sample, number of hospitals participating in NHDS, and number of abstracts of medical records collected: United States, 1980–84

Year	Hospitals			Number of abstracts collected
	In universe	In sample	Participating	
1980	8,017	544	420	224,000
1981	8,080	550	428	227,000
1982	8,080	550	426	214,000
1983	8,130	553	418	206,000
1984	8,130	553	407	192,000

Sample design

All hospitals with 1,000 beds or more in the universe of short-stay hospitals were selected with certainty in the sample. All hospitals with fewer than 1,000 were stratified, the primary strata being 24 bed size-by-region classes. Within each primary stratum, the allocation of the hospitals was made through a controlled selection technique so that hospitals in the sample would be distributed properly with regard to ownership and geographic division. Sample hospitals were drawn with probabilities ranging from certainty for the largest hospitals to 1 in 40 for the smallest hospitals.

The within-hospital sampling ratio for selecting sample discharges varied inversely with the probability of hospital selection. The smallest sampling fraction of discharged patients was taken in the largest hospitals, and the largest fraction was taken in the smallest hospitals. This sampling was done to compensate for hospitals that were selected with probabilities proportionate to their size class and to ensure that the overall probability of selecting a discharge would be approximately the same in each size class.

In nearly all hospitals, the daily listing sheet of discharges was the frame from which the subsamples of discharges were selected within the sample hospitals. The sample discharges were selected by a random technique, usually on the basis of the terminal digit(s) of the patient's medical record number that was assigned when the patient was admitted to the hospital. If the hospital's daily discharge listing did not show the medical record numbers, the sample was selected by starting with a randomly selected discharge and taking every *k*th discharge thereafter.

NOTE: A list of references follows the text.

Data collection and processing

Data collection

Depending on the study procedure agreed on with the hospital administrator, the sample selection and the transcription of information from the hospital records to abstract forms were performed by either the hospital staff or representatives of the National Center for Health Statistics (NCHS) or by both. Whenever possible, this work was performed by the medical records department of the hospital. In the remaining hospitals, the work was performed by personnel of the U.S. Bureau of the Census acting for NCHS.

Survey hospitals used an abstract form to transcribe data from the hospital records. The form provides space for recording demographic data, admission and discharge dates, zip code of the patient's residence, expected sources of payment, disposition of the patient at discharge, and information on discharge diagnoses and surgical operations or procedures (figure 1). All discharge diagnoses and procedures were listed on the abstract in the order of the principal one, or the first-listed one if the principal one was not identified, followed by the order in which all other diagnoses or procedures were entered on the face sheet of the medical record.

Diagnosis-related groups

The DRG's referred to in this report were produced using the DRG program available in the summer of 1983, and are identical to those in the Friday, August 31, 1984 issue of the *Federal Register*. This is a computer program that groups patients into DRG's based on diagnostic, surgical, and patient information. The program is maintained and is commercially available at Health Systems International (DRG Support Group, 100 Broadway, New Haven, Conn. 06511). However, the actual program used to produce estimates in this report was obtained from the Health Care Financing Administration. The entire NHDS file was used to produce estimates, including outliers. No data were excluded, or trimmed, because of an abnormal length of stay.

In publications from the National Center for Health Statistics using NHDS data, several schemes have been used to group patients into categories based on either their diagnoses or the procedures performed. These groups were developed to report general purpose statistics to the many users of NHDS data, and any similarity between the titles of those categories and DRG titles is coincidental.

Patient characteristics not stated

The age and sex of the patient were not stated on the hospital records (the face sheet of the patient's medical record) for about one-half of 1 percent of the discharges. Imputations of these missing items were made by assigning the patient an age or sex consistent with the age or sex of other patients with the same diagnostic code.

If the dates of admission or discharge were not given and could not be obtained from the monthly sample listing sheet transmitted by the sample hospital, a length of stay was imputed by assigning the patient a length of stay characteristic of the stays of other patients of the same age. About

one-tenth of 1 percent of the records were missing the date of admission or discharge.

Rounded numbers

Estimates of the numbers of inpatient discharges have been rounded to the nearest thousand for tabular presentation. Therefore, detailed figures within the tables do not always add to totals.

Completed abstract forms for each sample hospital were shipped, along with sample selection control sheets, to a Census Regional Office. Every shipment of abstracts was reviewed, and each abstract form was checked for completeness. Abstracts then were sent to NCHS for processing.

Medical coding and edit

The medical information recorded on the sample patient abstracts was coded centrally by the NCHS staff. The system currently used for coding the diagnoses and procedures on NHDS sample patient abstracts is the *International Classification of Diseases, 9th Revision, Clinical Modification*⁹ (ICD-9-CM). A maximum of seven diagnostic codes were assigned for each sample abstract; in addition, if the medical information included surgical or nonsurgical procedures, a maximum of four codes for these procedures were assigned. Following conversion of the data on the medical abstract to computer tape, a final medical edit was accomplished by computer inspection runs and a review of rejected abstracts. If the sex or age of the patient was incompatible with the recorded medical information, priority was given to the medical information in the editing decision.

NHDS medical coders code from abstracts of medical records in the order the diagnoses and procedures are entered. For most abstracts, this coding procedure is relatively free of problems. It was noted, however, that acute myocardial infarction frequently was not the lead entry in a group of circulatory diagnoses. For example, the patient's record may have arteriosclerosis listed first and arteriosclerotic heart disease listed second with acute myocardial infarction listed third. If the usual procedure were followed as it was until 1982, acute myocardial infarction would be coded in third place and retrievable only under the heading of all-listed diagnoses. A decision was made to reorder some acute myocardial infarction diagnoses. The new procedure, based on accepted medical coding practice, states that whenever an acute myocardial infarction is encountered with other circulatory diagnoses and is other than the first entry, it should be reordered to first position.

Some ICD-9-CM diagnostic codes cannot appear alone; they must appear with another diagnostic code. Specifically, the following codes cannot be first listed: 320.7, 321.1-321.8, 323.0-323.4, 323.6-323.7, 330.2-330.3, 331.7, 334.4, 336.2-336.3, 337.1, 357.1-357.4, 358.1, 359.5-359.6, 362.01-362.02, 362.71-362.72, 364.11, 365.41-365.44, 366.41-366.44, 370.44, 372.15, 372.31-372.33, 373.4-373.6, 374.51, 376.13-376.22, 380.13, 380.15, 382.02, 420.0, 421.1, 422.0, 424.91, 425.7-425.8, 443.81, 456.20-

NOTE: A list of references follows the text.

CONFIDENTIAL — All information which would permit identification of an individual or of an establishment will be held confidential, will be used only by persons engaged in and for the purposes of the survey, and will not be disclosed or released to other persons or used for any other purpose.

FORM **HDS-1**
(8-5-82)

DEPARTMENT OF HEALTH AND HUMAN SERVICES
U.S. PUBLIC HEALTH SERVICE
NATIONAL CENTER FOR HEALTH STATISTICS

MEDICAL ABSTRACT — NATIONAL HOSPITAL DISCHARGE SURVEY

<p>A. PATIENT IDENTIFICATION</p> <p>1. Hospital number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>2. HDS number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>3. Medical record number _____</p>	<p style="text-align: right;">Month Day Year</p> <p>4. Date of admission .. <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/></p> <p>5. Date of discharge .. <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/></p> <p>6. Residence ZIP code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
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<p>B. PATIENT CHARACTERISTICS</p> <p>7. Date of birth Month Day Year <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p>8. Age (Complete only if date of birth not given) <input type="text"/> <input type="text"/> Units</p> <p style="text-align: right;"> <input type="checkbox"/> Years <input type="checkbox"/> Months <input type="checkbox"/> Days </p>
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9. Sex (Mark (X) one) 1 Male 2 Female 3 Not stated

10. Race 1 White 3 American Indian/Alaskan Native 5 Other (Specify) _____
 2 Black 4 Asian/Pacific Islander 6 Not stated

11. Ethnicity (Mark (X) one) 1 Hispanic origin 2 Non-Hispanic 3 Not stated

12. Marital status (Mark (X) one) 1 Married 3 Widowed 5 Separated
 2 Single 4 Divorced 6 Not stated

<p>13. Expected source(s) of payment</p> <table style="width:100%;"> <tr> <td style="width:30%;"></td> <td style="width:20%; text-align: center;">Principal (Mark one only)</td> <td style="width:20%; text-align: center;">Other additional sources (Mark accordingly)</td> </tr> <tr> <td>Government sources</td> <td></td> <td></td> </tr> <tr> <td>1. Workmen's Compensation</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>2. Medicare</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>3. Medicaid</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>4. Title V</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>5. Other government payments</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Private sources</td> <td></td> <td></td> </tr> <tr> <td>6. Blue Cross</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>7. Other private or commercial insurance</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Other sources</td> <td></td> <td></td> </tr> <tr> <td>8. Self pay</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>9. No charge</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>10. Other (Specify)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> <p><input type="checkbox"/> No source of payment indicated</p>		Principal (Mark one only)	Other additional sources (Mark accordingly)	Government sources			1. Workmen's Compensation	<input type="checkbox"/>	<input type="checkbox"/>	2. Medicare	<input type="checkbox"/>	<input type="checkbox"/>	3. Medicaid	<input type="checkbox"/>	<input type="checkbox"/>	4. Title V	<input type="checkbox"/>	<input type="checkbox"/>	5. Other government payments	<input type="checkbox"/>	<input type="checkbox"/>	Private sources			6. Blue Cross	<input type="checkbox"/>	<input type="checkbox"/>	7. Other private or commercial insurance	<input type="checkbox"/>	<input type="checkbox"/>	Other sources			8. Self pay	<input type="checkbox"/>	<input type="checkbox"/>	9. No charge	<input type="checkbox"/>	<input type="checkbox"/>	10. Other (Specify)	<input type="checkbox"/>	<input type="checkbox"/>	<p>14. Status/Disposition of patient (Mark (X) appropriate box(es))</p> <table style="width:100%;"> <tr> <td style="width:50%;">Status</td> <td style="width:50%;">Disposition</td> </tr> <tr> <td>1 <input type="checkbox"/> Alive</td> <td>a. <input type="checkbox"/> Routine discharge/ discharged home</td> </tr> <tr> <td></td> <td>b. <input type="checkbox"/> Left against medical advice</td> </tr> <tr> <td></td> <td>c. <input type="checkbox"/> Discharged, transferred to another short-term hospital</td> </tr> <tr> <td></td> <td>d. <input type="checkbox"/> Discharged, transferred to long-term care institution</td> </tr> <tr> <td></td> <td>e. <input type="checkbox"/> Disposition not stated</td> </tr> <tr> <td>2 <input type="checkbox"/> Died</td> <td></td> </tr> <tr> <td>3 <input type="checkbox"/> Status not stated</td> <td></td> </tr> </table>	Status	Disposition	1 <input type="checkbox"/> Alive	a. <input type="checkbox"/> Routine discharge/ discharged home		b. <input type="checkbox"/> Left against medical advice		c. <input type="checkbox"/> Discharged, transferred to another short-term hospital		d. <input type="checkbox"/> Discharged, transferred to long-term care institution		e. <input type="checkbox"/> Disposition not stated	2 <input type="checkbox"/> Died		3 <input type="checkbox"/> Status not stated	
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3 <input type="checkbox"/> Status not stated																																																											

C. FINAL DIAGNOSES

Principal: _____

Other/additional: _____

See reverse side

D. SURGICAL AND DIAGNOSTIC PROCEDURES

Principal: _____

Other/additional: _____

NONE See reverse side

Completed by _____ Date _____

Figure I. Medical abstract for the National Hospital Discharge Survey

456.21, 484.1-484.8, 516.1, 517.1-517.8, 567.0, 573.1-573.2, 580.81, 581.81, 582.81, 583.81, 590.81, 595.4, 598.01, 601.4, 604.91, 608.81, 616.11, 616.51, 628.1, 711.10-711.89, 712.10-712.39, 713.0-713.8, 720.81, 727.01, 730.70-730.89, 731.1, 731.8, 737.40-737.43, 774.0, 774.31, 774.5. In addition, all discharges with the diagnostic codes 640.0-643.9 and 645.0-676.9 with a fifth digit of 1 or 2 or 650 (indicating delivery) must have a code V27.0-V27.9 as a first-listed diagnosis. Conversely, every discharge with a first-listed diagnosis of V27.0-V27.9 also must have one of these delivery codes.

Starting with 1979 data, procedures coding has followed the guidelines of the Uniform Hospital Discharge Data Set (UHDDS).^{10,11} UHDDS is a minimum data set of items uniformly defined and abstracted from hospital medical records. These items were selected on the basis of their continuous usefulness to organizations and agencies requiring hospital information. According to UHDDS guidelines, all procedures are allocated into one of four classes. Classes 1-3 consist of procedures that carry an operative or anesthetic risk or require highly trained personnel, special facilities, or special equipment. Class 4 procedures do not meet these criteria. See appendix II for the procedure codes included in these classes.

Until 1983, the only Class 4 procedures coded in NHDS were circumcision (ICD-9-CM code 64.0), episiotomy (code 73.6), and removal of intrauterine contraceptive device (code 97.71). The coding of additional Class 4 procedures, listed in appendix II, that are used in the assignment of diagnosis-related groupings, was begun in mid-1983.

Reliability of estimates

Estimation

Statistics produced by NHDS are derived by a complex estimating procedure. The basic unit of estimation is the sample inpatient discharge abstract. The estimating procedure used to produce essentially unbiased national estimates in NHDS has three principal components: Inflation by reciprocals of the probabilities of sample selection, adjustment for nonresponse, and ratio adjustment to fixed totals. These components of estimation are described in appendix I of two earlier publications.^{12,13}

Measurement errors

As in any survey, results are subject to nonsampling or measurement errors, which include errors because of hospital nonresponse, missing abstracts, information incompletely or inaccurately recorded on abstract forms, and processing errors. Some of these errors were discussed in an earlier section entitled "Patient characteristics not stated."

The Institute of Medicine (IOM) has conducted three studies on the reliability of hospital abstract data collection;

the most recent study was on NHDS. The IOM NHDS study was performed by using data coded according to ICDA,¹⁴ however, some of the findings are relevant to current NHDS data even though these data were coded according to ICD-9-CM. Of special interest to this report is the finding that, in a number of cases, the first-listed diagnosis in NHDS was not the principal diagnosis as determined by IOM after a study of the entire medical record. For example, when diagnoses at the ICDA class level were examined, the principal diagnosis from IOM matched the first-listed diagnosis from NHDS in approximately 86 percent of the cases. Detailed accounts of this and other IOM findings have been published.¹⁵⁻¹⁷

Sampling errors

The standard error is primarily a measure of the variability attributed to a value obtained from a sample as an estimate of a population value. In this report it also reflects part of the measurement error. The value that would have been obtained if a complete enumeration of the population had been made will be contained in an interval represented by the sample estimate plus or minus 1 standard error about 68 of every 100 times and plus or minus 2 standard errors about 95 of every 100 times.

The relative standard error is obtained by dividing the standard error by the estimate. The resulting value is multiplied by 100, which expresses the standard error as a percent of the estimate.

The standard error of one statistic generally is different from that of another, even when the two come from the same survey. To derive standard errors that would be applicable to a wide variety of statistics that could be prepared at a moderate cost, a number of approximations are required. As a result, the figures in this appendix provide general relative standard errors for a wide variety of estimates rather than the specific error for a particular statistic.

Approximate relative standard errors and standard errors have been prepared for measuring the variances applicable to DRG's. These are presented in figure II. Approximate relative standard errors for estimates of average length of stay are presented in table III.

Table III. Approximate standard errors of average lengths of stay by number of discharges

Number of discharges	Average length of stay in days			
	2	6	10	20
	Standard error in days			
10,000	0.7	1.2	1.7	2.2
50,000	0.3	0.7	1.0	1.4
100,000	0.3	0.6	0.9	1.2
500,000	0.2	0.5	0.8	0.9
1,000,000	0.2	0.5	0.8	0.7
5,000,000	0.2	0.5	0.8	...

NOTE: A list of references follows the text.

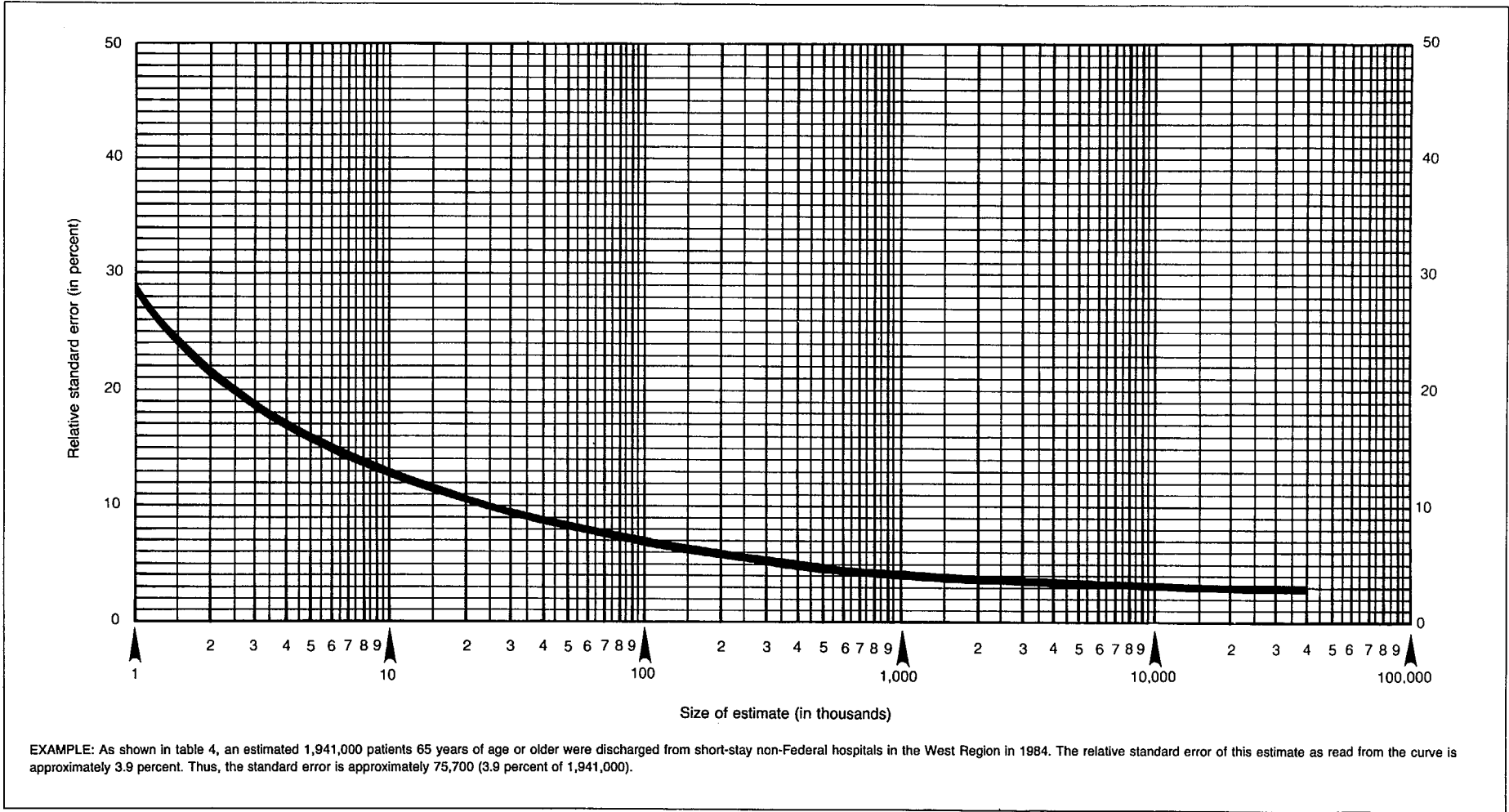


Figure II. Approximate relative standard errors of estimated numbers of patients discharged, 1980-84

Tests of significance

In this report, the determination of statistical inference is based on the *t*-test with a critical value of 1.96 (0.05 level of significance). Terms relating to differences, such as “higher” and “less,” indicate that the differences are statisti-

cally 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 to be not significant.

Appendix II

Definitions of terms

Hospitals and hospital characteristics

Hospitals—Short-stay special and general hospitals have six beds or more for inpatient use and an average length of stay of less than 30 days. Federal hospitals and hospital units of institutions are not included.

Patient—A person who is formally admitted to the inpatient service of a short-stay hospital for observation, care, diagnosis, or treatment is considered a patient. In this report the number of patients refers to the number of discharges during the year, including any multiple discharges of the same individual from one short-stay hospital or more. Infants admitted on the day of birth, directly or by transfer from another medical facility, with or without mention of a disease, disorder, or immaturity, are included. All newborn infants, defined as those admitted by birth to the hospital, are excluded from the tables in this report except those in the newborn section of the report. The terms “patient” and “inpatient” are used synonymously.

Newborn infant—A newborn infant is defined as a patient admitted by birth to a hospital.

Discharge—Discharge is the formal release of a patient by a hospital; that is, the termination of a period of hospitalization by death or by disposition to place of residence, nursing home, or another hospital. The terms “discharges” and “patients discharged” are used synonymously.

Average length of stay—The average length of stay is the total number of patient days accumulated at time of discharge by patients discharged during the year divided by the number of patients discharged.

Terms relating to diagnoses

Discharge diagnoses—One or more diseases or injuries (or some factor that influences health status and contact with health services that is not itself a current illness or injury) listed by the attending physician on the medical record of patients. In NHDS, all discharge (or final) diagnoses listed on the face sheet (summary sheet) of the medical record for patients discharged from the inpatient service of short-stay hospitals are transcribed in the order listed. Each sample discharge is assigned a maximum of seven 5-digit codes according to ICD-9-CM. The number of principal or first-listed diagnoses is equivalent to the number of discharges.

Principal diagnosis—The condition established after study to be chiefly responsible for occasioning the admission of the patient to the hospital for care is called the principal diagnosis.

First-listed diagnosis—The coded diagnosis identified as the principal diagnosis or listed first on the face sheet of the medical record is the first-listed diagnosis. The number of first-listed diagnoses is equivalent to the number of discharges.

Terms relating to surgical and nonsurgical procedures

Procedure—A procedure is one or more surgical or nonsurgical operations, diagnostic procedures, or special treatments assigned by the physician to the medical record of patients discharged from the inpatient service of short-stay hospitals. In NHDS, all terms listed on the face sheet of the medical record under captions such as “operation,” “operative procedures,” “operations and/or special treatments” are transcribed in the order listed. A maximum of four 4-digit codes are assigned per sample discharge according to ICD-9-CM and NHDS directives. (See “Medical coding and edit” in the “Data collection and processing” section of appendix I for further details.)

UHDDS classes of procedures—Procedures are categorized into four classes according to UHDDS guidelines. Classes 1-3 consist of significant procedures—that is, procedures that carry an operative or anesthetic risk or require highly trained personnel, special facilities, or special equipment. Class 4 procedures do not meet these criteria.

UHDDS Class 1 procedures—All procedures not categorized as Class 2, 3, or 4 procedures.

UHDDS Class 2 procedures—The following ICD-9-CM procedure codes identify Class 2 procedures as categorized by the UHDDS:

03.31, 03.91-03.92, 04.80-04.89, 21.01, 24.7,31.41-31.42, 34.91-34.92, 37.92-37.93, 42.22-42.23, 44.12-44.13, 45.12-45.13, 45.22-45.24, 48.22, 50.92, 54.91, 54.97-54.98, 57.31, 58.22, 59.95, 62.91, 66.8, 69.6-69.7, 69.93, 70.0, 73.01-73.1, 73.3, 73.51-73.59, 76.96, 81.91-81.92, 82.92-82.96, 83.94-83.98, 85.91-85.92, 86.01, 87.03-87.08, 87.13-87.15, 87.31-87.35, 87.38, 87.41-87.42, 87.51-87.52, 87.54-87.66, 87.71-87.73, 87.75, 87.77-87.78, 87.81-87.84, 87.91, 87.93-87.94, 88.01-88.03, 88.12-88.15, 88.38, 88.71-88.89, 89.14, 89.21-89.25, 89.32, 89.41-89.44, 89.54, 89.61-89.65, 89.8, 92.01-92.29, 93.45-93.54, 93.56-93.59, 93.92-93.93, 93.95, 93.97, 94.24, 94.26-94.27, 95.04, 95.12-95.13, 95.16-95.26, 96.01-96.08, 96.21-96.25,

96.31-96.33, 97.11-97.13, 98.02-98.04, 98.14-98.16, 98.19, 99.01, 99.60-99.69, 99.81.

UHDDS Class 3 procedures—The following ICD-9-CM procedure codes identify Class 3 procedures as categorized by UHDDS:

29.11, 57.94-57.95, 60.19, 84.41-84.43, 84.45-84.47, 86.26, 93.98, 98.01, 98.05-98.13, 98.17, 98.18, 98.20-98.29, 99.25.

UHDDS Class 4 procedures—From 1979 through the middle of 1983, only three Class 4 procedures were coded for NHDS: circumcision (ICD-9-CM code 64.0), episiotomy (code 73.6), and removal of intrauterine contraceptive device (code 97.71). The ICD-9-CM codes for the Class 4 procedures coded from the last half of 1983 and onward are as follows:

01.18-01.19, 03.39, 04.19, 05.19, 06.19, 07.19, 08.91-08.93, 09.19, 09.41-09.49, 10.29, 11.29, 12.29, 14.19, 15.09, 16.29, 20.39, 28.19, 33.28-33.29, 34.28-34.29, 38.29, 40.19, 50.19, 51.19, 52.19, 54.29, 55.29, 56.39, 57.39, 59.29, 60.18, 62.19, 63.09, 64.0, 65.19, 66.19, 67.19, 68.19, 70.29, 71.19, 73.6, 76.19, 78.8, 81.98, 83.29, 97.71.

The following ICD-9-CM procedure codes identify Class 4 procedures not coded by NHDS:

08.19, 16.21, 18.01, 18.11, 18.19, 21.21, 21.29, 22.19, 24.19, 25.09, 25.91, 26.19, 27.29, 27.91, 29.19, 31.48-31.49, 37.29, 41.38-41.39, 42.29, 44.19, 45.19, 45.28-45.29, 48.23, 48.29, 49.21, 49.29, 49.41, 58.29, 61.19, 64.19, 64.91, 64.94, 69.92, 70.21, 73.91-73.92, 75.35, 85.19, 86.19, 86.92, 87.09-87.12, 87.16-87.17, 87.22-87.29, 87.36-87.37, 87.39, 87.43-87.49, 87.69, 87.79, 87.85-87.89, 87.92, 87.95-87.99, 88.09, 88.16-88.31, 88.33, 88.35, 88.37, 88.39, 89.01-89.13, 89.16, 89.26-89.31, 89.33-89.39, 89.45-89.53, 89.56, 89.59, 89.66, 89.7, 90.01-91.99, 93.01-93.25, 93.27-93.28, 93.31-93.39, 93.42-93.44, 93.61-93.91, 93.94, 93.96, 93.99-94.23, 94.25, 94.29-95.03, 95.05-95.11, 95.14-95.15, 95.31-95.49, 96.09-96.19, 96.26-96.28, 96.34-97.04, 97.14-97.69, 97.72-97.89, 99.02-99.24, 99.26-99.59, 99.71-99.79, 99.82-99.99, 45.14-45.15, 45.25-

45.27, 48.24-48.26, 49.22-49.23, 50.11-50.12, 51.12-51.13, 52.11-52.12, 54.22-54.23, 55.23-55.24, 56.32-56.33, 57.33-57.34, 58.23-58.24, 59.21, 60.11-60.15, 61.11, 62.11-62.12, 63.01, 64.11, 65.11-65.12, 66.11, 67.11-67.12, 68.13-68.14, 70.23-70.24, 71.11, 76.11, 77.40-77.49, 80.30-80.39, 83.21, 85.11-85.12, 86.11.

Nonsurgical procedures—Procedures generally not considered to be surgery are listed as nonsurgical procedures. These include diagnostic endoscopy and radiography, radiotherapy and related therapies, physical medicine and rehabilitation, and other nonsurgical procedures. The following ICD-9-CM codes are for diagnostic and nonsurgical procedures:

03.31, 11.21, 12.21, 14.11, 16.22, 20.31, 29.11, 31.41-31.42, 33.21-33.23, 34.21-34.22, 39.95, 42.21-42.23, 44.11-44.13, 45.11-45.13, 45.21-45.24, 48.21-48.22, 51.11, 54.21, 55.21-55.22, 56.31, 57.31-57.32, 58.21-58.22, 60.19, 68.11-68.12, 70.22, 80.20-80.29, 87.01-99.99.

Demographic terms

Age—Patient's age refers to age at birthday prior to admission to the hospital inpatient service.

Geographic region—Hospitals are classified by location in one of the four geographic regions of the United States that correspond to those used by the U.S. Bureau of the Census.

<i>Region</i>	<i>States included</i>
Northeast	Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, and Pennsylvania
North Central	Michigan, Ohio, Illinois, Indiana, Wisconsin, Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, and Kansas
South	Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida, Kentucky, Tennessee, Alabama, Mississippi, Arkansas, Louisiana, Oklahoma, and Texas
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