

# NATIONAL HOSPITAL DISCHARGE SURVEY

2006

PUBLIC USE DATA FILE DOCUMENTATION

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## PUBLIC USE DATA FILE DOCUMENTATION

### Abstract

This document provides information for users of the National Hospital Discharge Survey (NHDS) Public Use Data File for 2006. Conducted annually by the National Center for Health Statistics (NCHS), the NHDS is a principal source of information on inpatient hospital utilization in the United States.

**Section I** describes the survey and includes information on the history and scope of the NHDS; the methodology, including data collection and medical coding procedures; population estimates; measurement errors and sampling errors.

**Section II** provides technical details about the file.

**Section III** provides a detailed description of the contents of each data record.

**Appendix A** defines certain terms used in this document;

**Appendix B** lists the ICD-9-CM Addenda;

**Appendix C** provides population estimates to allow for the calculation of utilization rates;

**Appendix D** provides unweighted and weighted frequencies for selected variables; and

**Appendix E** includes a copy of the NHDS Medical Abstract Form.

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## I. DESCRIPTION OF THE NATIONAL HOSPITAL DISCHARGE SURVEY

**Introduction.** This document and its appendices contain information for users of the 2006 National Hospital Discharge Survey (NHDS) public use data file. Conducted annually by the National Center for Health Statistics, NHDS collects medical and demographic information from a sample of inpatient discharge records selected from a national probability sample of non-Federal, short-stay hospitals. The data serve as a basis for calculating statistics on hospital inpatient utilization in the United States. For a brief description of the survey design and data collection procedures, see below. For a more detailed description of the survey design, data collection procedures, and the estimation process, see Reference 1. Publications based on the data for each survey year can be obtained from the NCHS website at: <http://www.cdc.gov/nchs/about/major/hdasd/listpubs.htm>.

**History.** To provide more complete and precise information on the utilization of the Nation's hospitals and on the nature and treatment of illness among the hospitalized population, in 1962 the NCHS began exploring possibilities for surveying morbidity in hospitals. A national advisory group was established. The NCHS conducted planning discussions with other officials of the Public Health Service. Hospitalization material from the Survey Research Center of the University of Michigan, the American Hospital Association, and the Professional Activities Study was examined and evaluated. In 1963, a study by the School of Public Health of the University of Pittsburgh under contract to the NCHS demonstrated the feasibility of an NHDS type of program. An additional pilot study using enumerators from the Bureau of the Census was conducted in late 1964 and confirmed the University of Pittsburgh's findings.

Finally, with advice and support from the American Hospital Association, the American Medical Association, individual experts, other professional groups, and officials of the U.S. Public Health Service, the NCHS initiated the National Hospital Discharge Survey in 1964.

### SURVEY METHODOLOGY

**Source of the Data.** The National Hospital Discharge Survey (NHDS) covers discharges from noninstitutional hospitals, excluding Federal, military, and Veterans Administration hospitals, located in the 50 States and the District of Columbia. Only short-stay hospitals (hospitals with an average length of stay for all patients of less than 30 days) or those whose specialty is general (medical or surgical) or children's general are included in the survey. These hospitals must also have six or more beds staffed for patient use. These criteria, used from 1988 through the current survey year, differ slightly from those used prior to 1988.

In 2006, the sample consisted of 501 hospitals. Of these hospitals, 23 were found to be out-of-scope (ineligible) because they went out of business or otherwise failed to meet the criteria for the NHDS universe. Of the 478 in-scope (eligible) hospitals, 438 hospitals (92%) responded to the survey.

**Sample design and data collection.** NCHS has conducted the NHDS continuously since 1965. The original sample was selected in 1964 from a frame of short-stay hospitals listed in the National Master Facility Inventory (NMFI). That sample was updated periodically with samples of hospitals that opened later. In the original design, a two-stage sampling design was used in which hospitals were sampled at the first stage, with probabilities ranging from certainty for the largest hospitals to 1 in 40 for the smallest hospitals. At the second stage,

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a systematic random sample of discharges was selected from each sampled hospital. A report on the design and development of the original NHDS has been published (3).

In 1988, the NHDS was redesigned to provide geographic sampling comparability with other surveys conducted by the NCHS; to update the sample of hospitals selected into the survey; and to maximize the use of data collected through automated systems. The 1988 hospital sample was drawn from a sampling frame that consisted of hospitals that were listed in the April 1987 SMG Hospital Market Database (2), met the above criteria, and began accepting patients by August 1987. This sampling frame was used until 2003. In 2003 and 2006, the sampling frame was constructed from the "Healthcare Market Index" and the "Hospital Market Profiling Solution", both formerly known as the SMG Hospital Market Database, and both produced by Verispan, L.L.C. The hospital sample is updated every three years to allow for hospitals that opened later or changed their eligibility status since the previous sample update. Updates were performed in 1991, 1994, 1997, 2000, 2003 and 2006.

When the survey was redesigned in 1988, a modified, three-stage design was implemented. Units selected at the first stage of sampling consisted of either hospitals or geographic areas, such as counties, groups of counties, or metropolitan statistical areas in the 50 states and the District of Columbia. Within sampled geographic areas, additional hospitals were selected. Finally at the last stage, discharges were selected within the sampled hospitals using systematic random sampling.

These changes in the survey may affect trend data. That is, some of the differences between NHDS statistics based on the 1965-87 sample and statistics based on the sample drawn in 1988 may be due to sampling error rather than actual changes in hospital utilization.

Two data collection procedures were used for the survey. The first was a manual system of sample selection and data abstraction, used for approximately 55 percent of the responding hospitals. The second was an automated method, used for approximately 45 percent of the responding hospitals. The automated method involved the purchase of computerized data files from abstracting service organizations, state data systems, or from the hospitals themselves.

In the manual system, the sample selection and the transcription of information from the hospital records to abstract forms were performed at the hospitals. Of the hospitals using this system in 2006, about 25 percent had the work performed by their own medical records staff. In the remaining hospitals using the manual system, personnel of the U.S. Bureau of the Census did the work on behalf of NCHS. The completed forms, along with sample selection control sheets, were forwarded to NCHS for editing, and weighting.

For the automated system, NCHS purchased files containing machine-readable medical record data from which records were systematically sampled by NCHS.

The Medical Abstract Form (Appendix E) and the automated data contain items relating to the personal characteristics of the patient, including birth date or age, sex, race, and marital status, but not name and address; administrative information, including admission and discharge dates, and discharge status; and medical information, including diagnoses and surgical and nonsurgical procedures. Since 1977, patient zip code, expected source of payment, and dates of surgery have also been collected. (Patient date of birth and zip code are confidential information and are not available to the public). Beginning in the 2001 survey year, two additional items were included in the medical abstract form: Type of

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Admission and Source of Admission. The coding of all variables can be found in section III of this document which describes the record layout.

**Medical Coding and Edits.** The medical information that was recorded manually on the sample patient abstracts was coded centrally by NCHS staff. A maximum of seven diagnostic codes was assigned for each sample abstract. In addition, if the medical information included surgical or nonsurgical procedures, a maximum of four codes for these procedures was assigned. The system currently used for coding the diagnoses and procedures on the medical abstract forms as well as on the commercial abstracting services data files is the *International Classification of Diseases, 9th Revision, Clinical Modification*, or ICD-9-CM (4).

NHDS usually presents diagnoses and procedures in the order they are listed on the abstract form or obtained from abstract services; however, there are exceptions. For women discharged after a delivery, a code of V27 from the supplemental classification is entered as the first-listed code, with a code designating either normal or abnormal delivery in the second-listed position. In another exception, a decision was made to reorder some acute myocardial infarction diagnoses. If an acute myocardial infarction is listed with other circulatory diagnoses and is other than the first entry, it is reordered to the first position. If a symptom appears as a first-listed code and a diagnosis appears as a secondary code, the diagnosis replaces the symptom which is moved back.

Following conversion of the data on the medical abstract to a computer file and combining it with the automated data files, a final medical edit was accomplished by computer inspection and by a manual review of rejected records. Priority was given to medical information in the editing decision.

The methodology for editing the NHDS was revised in the 1996 data year. As before, the updated edit program was designed to make as few changes as possible in the data, while following the same general specifications as the previous edit program,. However, there may be some minor anomalies which would be apparent when examining data over time, performing trend analyses, or examining combinations of variables. Particular features of the updated edit program which may affect certain variables are:

- When imputation for missing **age** and **sex** data is performed, the known distribution of these variables is maintained, according to categories of the First-Listed Diagnosis.
- **Procedure codes** are no longer reordered. However, if the length of stay is missing for a discharge, it is imputed based on the first-listed procedure.
- Principal and additional **expected sources of payment** are no longer re-ordered, with one exception: *Self-Pay* is listed as the principal source only if there are no other sources, or the only other source is *Not Stated*; otherwise it must be listed after every other source (except *Not Stated*).
- An arbitrary **month of admission** is no longer assigned to records received from abstract services that do not provide the exact date of admission and discharge.
- For hospitals that failed to provide **month of discharge** but did provide the quarter of discharge, discharge month within the quarter was sequentially assigned to each record. For example, for discharges within the first quarter, a discharge month of January, February, or March was assigned. In 2006, this affected less than 2 percent of responding hospitals.

Users of the National Hospital Discharge Survey (NHDS) diagnostic and/or procedure data, which is coded to the ICD-9-CM, must take into account the annual ICD-9-CM addendum. The addendum lists new codes, new fourth or fifth digits to existing codes, as well as other

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modifications. Changes go into effect October 1 of the calendar year. Coding of the 2006 data is consistent with the ICD-9-CM and the addendum which became effective October 1, 2005. Addendum changes for 1986 through 2005 are listed in Appendix B. More information about the ICD-9-CM can be obtained at: <http://www.cdc.gov/nchs/icd9.htm>.

In 2002, the ICD-9-CM Coordination and Maintenance Committee created a new procedure chapter to accommodate space limitations in the existing hierarchical classification system and to alleviate inappropriate categorization of new procedures. Chapter 00, Procedures and Interventions, Not Elsewhere Classified, has been coded in the NHDS since 2003, since October addendum changes are not implemented in the NHDS until the following data collection year.

**The Uniform Hospital Discharge Data Set (UHDDS).** Starting with 1979 data, the NHDS has followed guidelines of the Uniform Hospital Discharge Data Set (UHDDS) within the confines of its contractual agreement with participating hospitals. The UHDDS is a minimum data set of items uniformly defined (5). These items were selected on the basis of their usefulness to a broad range of organizations and agencies requiring hospital information, uniformity of definition, and general availability from medical records and abstract services.

**Population Estimates.** Estimates of the civilian population of the United States as of July 1, 2006 are presented in Appendix C. These estimates were provided by the U.S. Bureau of the Census, and are based on the 2000 Census. Because of new federal guidelines implemented in the 2000 Census which regulate the reporting of race data, population estimates by race based on the 2000 Census are not directly comparable with estimates from earlier censuses. See Appendix C for further explanation.

**Confidentiality.** Persons using the public use file agree to abide by the confidentiality restrictions that accompany use of the data. Specifically, they agree that, in the event of inadvertent discovery of the identity of any individual or establishment, then: (a) no use will be made of this knowledge; (b) the director of NCHS will be advised of the incident; (c) the information that would identify the individual or establishment will be safe-guarded or destroyed, as requested by NCHS; and (d) no one else will be informed of the discovered identity.

Maintaining the confidentiality of survey respondents, whether individuals or establishments, is a responsibility of NCHS as described in section 308(d) of the Public Health Service Act. As such it may be necessary for NCHS to block the release of data or modify variables that may, because of their unique nature, lead to inadvertent disclosure of the identity of a participating facility or respondent.

**Measurement Errors.** As in any survey, results are subject to nonsampling or measurement errors, which include errors due to hospital nonresponse, missing abstracts, information incompletely or inaccurately recorded on abstract forms, and processing errors. A very small proportion (less than one percent) of the discharge records failed to include the sex, age, or date of birth of the patient. If the hospital record did not state either the age or sex of patient, it was imputed by assigning an age or sex value according to the specifications described above. In a very few cases (less than one percent of the records), the age or sex was edited because it was inconsistent with the diagnosis. In 2006, data for RACE were missing for 28 percent of the discharges, and no attempt was made to impute for these missing values.

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Other edit and imputation procedures may have been applied to data in the NHDS collected in automated form.

**Sampling errors and rounding of numbers.** The standard error is primarily a measure of sampling variability that occurs by chance because only a sample rather than the entire universe is surveyed. The relative standard error of the estimate is obtained by dividing the standard error by the estimate itself. The resulting value is multiplied by 100, so the relative standard error is expressed as a percent of the estimate. Estimates of sampling variability were calculated with SUDAAN software, which computes standard errors by using a first-order Taylor series approximation of the deviation of estimates from their expected values. A description of the software and the approach it uses was published by Bieler and Williams (6).

### **Relative Standard Errors for Aggregate Estimates**

Parameter values for generalized variance curves needed to calculate approximate relative standard errors for aggregate estimates are presented in Table 1. To derive error estimates that would be applicable to a wide variety of statistics, numerous estimates and their variances were produced. A regression model then used these data to produce best-fit curves, based on an empirically determined relationship between the size of an estimate X and its relative variance. The square root of the relative variance of an estimate is the relative standard error of that estimate, and is designated by RSE(X). Using the generalized variance curves, RSE(X) may be calculated from the formula:

$$\mathbf{RSE(X) = SQRT (a + b/X)}$$

with a and b provided in Table 1. When multiplied by 100, the RSE(X) is expressed as a percent of X.

For example, in 2006 the estimated number of discharges from short-stay hospitals for children under age 15 with a first-listed diagnosis of asthma (ICD-9-CM code 493) was 145,000. Using the applicable constants from Table 1 for estimates by age produces:

$$\mathbf{RSE(145,000) = SQRT( .02734 + ( 220.637 / 145,000 ) )}$$

$$\mathbf{RSE(145,000) = .170}$$

When multiplied by 100, the relative standard error for the estimate of interest becomes 17.0 percent. The standard error of the estimate is obtained by multiplying the relative standard error by the estimate itself:

$$\mathbf{SE(145,000) = 145,000 * .170 = 24,650}$$

The standard error can be used to generate confidence intervals for statistical testing. In this example, the 95% confidence interval for the estimate of children under age 15 with a first-listed diagnosis of asthma is:

$$\mathbf{( 145,000 - 2*24,650 ) \leftrightarrow ( 145,000 + 2*24,650 )}$$

$$\mathbf{95,700 \leftrightarrow 194,300}$$



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### Relative Standard Error for Estimates of Percents

Approximate relative standard errors for estimates of percents may also be calculated from Table 1. The relative standard error for a percent,  $100p$  ( $0 < p < 1$ ), may be calculated using the formula:

$$\text{RSE}(p) = \text{SQRT}(b * (1 - p) / (p * X))$$

where  $100p$  is the percent of interest,  $X$  is the base of the percent, and  $b$  is the parameter  $b$  in the formula for approximating the  $\text{RSE}(X)$ . The values for  $b$  are given in Table 1. When multiplied by 100, the  $\text{RSE}(p)$  is expressed as a percent of the estimate,  $p$ .

For example, in 2006 the estimated number of discharges from short-stay hospitals who were women was 20,864,000. This is 59.9 percent of the estimated 34,854,000 total discharges for that year. Using the applicable constants from Table 1 for estimates by sex produces:

$$\text{RSE}(.599) = \text{SQRT}(335.486 * (1 - .599) / (.599 * 34,854,000))$$

$$\text{RSE}(.599) = .00254$$

When multiplied by 100, the relative standard error for the estimate of interest becomes 0.254 percent. The standard error is obtained by multiplying the relative standard error by the estimate itself:

$$\text{SE}(.599) = .599 * .00254 = .0015$$

The standard error can be used to calculate confidence intervals for statistical testing. In this example, the 95% confidence interval for the estimate of the percentage of female inpatients is:

$$(.599 - 2 * .0015) <-> (.599 + 2 * .0015)$$

$$.596 <-> .602$$

$$\text{or, equivalently, } 59.6\% <-> 60.2\%$$

### Relative Standard Error for Ratio Estimators

The approximate RSE of a ratio ( $X/Y$ ) in which the numerator ( $X$ ) and the denominator ( $Y$ ) are both estimated from the same survey, but the numerator is not a subclass of the denominator, is calculated using the formula:

$$\text{RSE}(X/Y) = \text{SQRT}(\text{RSE}^2(X) + \text{RSE}^2(Y))$$

The approximation is valid if the RSE of the denominator is less than 5 percent or the RSE's of the numerator and denominator are both less than 10 percent. When multiplied by 100, the  $\text{RSE}(X/Y)$  is expressed as a percent of the ratio estimate,  $X/Y$ .

For example, average length of stay (ALOS) is considered a ratio estimator since it is the ratio of days of care to the number of discharges. In 2006, the estimated number of days of care for inpatients with a first-listed diagnosis of septicemia (ICD-9-CM code 038) was 4,589,000. The estimated number of discharges for inpatients with a first-listed diagnosis of

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septicemia was 530,000. The ALOS for inpatients with a first-listed diagnosis of septicemia was  $4,589,000/530,000 = 8.7$  days.

To compute the RSE for ALOS, first compute the RSE for the estimated number of days of care and the RSE for the estimated number of discharges. See the section above on *Relative Standard Errors for Aggregate Estimates* for computation of these RSE's.

$$\mathbf{RSE(4,589,000) = .0537}$$

$$\mathbf{RSE(530,000) = .0518}$$

Next, substitute those RSE's into the formula above to approximate the RSE for the ALOS estimate:

$$\mathbf{RSE(8.7) = \text{SQRT} ( (.0537)^2 + (.0518)^2 )}$$

$$\mathbf{RSE(8.7) = .0746}$$

The standard error of the estimate is obtained by multiplying the relative standard error by the estimate itself:

$$\mathbf{SE(8.7) = .0746 * 8.7 = .649}$$

The standard error can be used to generate confidence intervals for statistical testing. In this example, the 95% confidence interval for the estimate of the ALOS for inpatients diagnosed with septicemia is:

$$\mathbf{(8.7 - 2*.649) <-> (8.7 + 2*.649)}$$

$$\mathbf{7.4 <-> 10.0}$$

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Table 1. Parameter values for generalized variance curves for National Hospital Discharge Survey aggregate statistics by statistic type: United States, 2006

CHARACTERISTIC	FIRST-LISTED DIAGNOSIS		DAYS OF CARE		ALL-LISTED DIAGNOSES		ALL-LISTED PROCEDURES	
	<u>a</u>	<u>b</u>	<u>a</u>	<u>b</u>	<u>a</u>	<u>b</u>	<u>a</u>	<u>b</u>
<b>TOTAL</b>	0.00203	346.658	0.00265	1048.885	0.00210	340.544	0.00411	285.906
<b>SEX</b>								
Male	0.00233	321.677	0.00326	1048.558	0.00223	385.004	0.00354	414.588
Female	0.00204	335.486	0.00284	1229.584	0.00486	331.276	0.00382	336.057
<b>AGE GROUP</b>								
Under 15 years	0.02734	220.637	0.04430	299.840	0.03159	175.490	0.04016	212.752
15-44 years	0.00233	294.541	0.00353	1060.103	0.00228	306.103	0.00280	331.208
45-64 years	0.00193	309.675	0.00349	961.964	0.00217	302.140	0.00420	303.910
65 years and over	0.00216	337.597	0.00298	1570.563	0.00234	307.562	0.00270	350.029
<b>REGION</b>								
Northeast	0.00680	188.911	0.00945	568.080	0.01020	173.480	0.01935	222.379
Midwest	0.01430	212.247	0.01655	431.979	0.01490	309.321	0.01752	196.701
South	0.00330	336.326	0.00461	1362.983	0.00371	282.142	0.00419	332.265
West	0.00631	357.712	0.01283	788.148	0.00713	384.090	0.00826	404.867
<b>RACE</b>								
White	0.00425	361.300	0.00556	986.620	0.00492	334.352	0.00910	431.929
Black/African American	0.00394	262.940	0.00661	979.607	0.00442	276.243	0.00472	263.607
All other races	0.02221	206.169	0.03796	508.248	0.02143	234.648	0.02085	254.126
Race not stated	0.01489	250.184	0.01738	750.883	0.01723	240.815	0.01543	294.908
<b>EXPECTED SOURCE OF PAYMENT</b>								
Medicare	0.00256	308.113	0.00350	1187.919	0.00261	296.990	0.00575	402.437
Medicaid	0.00718	271.894	0.01017	845.987	0.00667	274.905	0.00807	281.606
Worker's compensation & other government payments	0.00641	326.968	0.01263	1536.898	0.00904	347.481	0.00594	381.945
HMO/PPO	0.00651	249.205	0.00870	687.995	0.00713	298.372	0.00888	296.655
BC/BS & other private insurance	0.00255	356.134	0.00419	993.237	0.00296	348.198	0.00402	310.888
Self pay	0.00438	235.273	0.00837	506.645	0.00610	240.669	0.00441	305.267
No charge and other	0.02094	245.828	0.03074	658.388	0.01895	248.794	0.02223	243.282

Users of NHDS data are cautioned that computed estimates based on fewer than 30 unweighted records are not reliable and should not be reported. Because these estimates are based on so few data points, they are excluded from the calculation of the generalized variance curves. Thus, application of generalized variance curves is appropriate only for estimates based on at least 30 records.

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**Presentation of Estimates.** Publication of estimates for the NHDS is based on the relative standard error of the estimate and the number of sample records on which the estimate is based (referred to as the sample size). Estimates are not presented in NCHS reports unless a reasonable assumption regarding the probability distribution of the sampling error is possible.

Based on consideration of the complex sample design of the NHDS, the following guidelines are used for presenting the NHDS estimates:

If the sample size is less than 30, the value of the estimate is not reported.

If the sample size is 30-59, the value of the estimate is reported but should not be assumed reliable.

If the sample size is 60 or more and the relative standard error is less than 30 percent, the estimate is reported.

If the relative standard error of any estimate is over 30 percent, the estimate is considered to be unreliable. It is left to the author to decide whether or not to present it. However, if the author chooses to present the unreliable estimate, the consumer of the statistic must be informed that the statistic is not reliable.

**Monthly and Seasonal Estimates Under the New Design.** An important difference between the old and new designs is the method used to adjust for nonresponse. In the old design, weights for responding hospitals were adjusted each month to account for hospitals that did not respond for that month. In the new design, the type of nonresponse adjustment applied depended on whether the hospital was considered a nonrespondent or partial respondent. A nonresponding hospital was one which failed to provide at least half of the expected number of discharges for at least half of the months for which it was in-scope. In this case, weights of discharges from hospitals similar to the nonresponding hospital were inflated to account for discharges of the nonrespondent hospital. However, this adjustment was performed just once, after the close out of the survey for the year, instead of monthly as before.

For partially responding hospitals, one or both of two adjustments were made. If the hospital provided at least half, but not all, of the expected number of abstracts for a given month, the weights of the abstracts actually collected for that month were inflated to account for the missing abstracts. If fewer than half of the expected number of abstracts were provided, the weights of the abstracts provided were inflated by a factor of two, and then a second adjustment was made to account for the excess nonresponse. In the second adjustment, the weights of the discharges in the hospital's respondent months were inflated by ratios that varied by category of first-listed ICD-9-CM diagnostic code. This adjustment ratio was based on the hospital's month(s) of nonresponse and the month-by-month distributions of first-listed diagnostic groups among discharges from hospitals which responded for all twelve months. The ratio accounts for the seasonality in the occurrence of the first-listed diagnostic groups for annual statistics, but not for partial year estimates. As a result monthly and seasonal estimates may be skewed. While the effect is believed to be small, it is recommended that partial year estimates NOT be produced. In the 2006 NHDS, 93 percent of the 438 responding hospitals provided data for all twelve months, and 98 percent provided at least nine months of data.

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**How to Use the Data File.** The NHDS records are weighted to allow inflation to national or regional estimates. The weight applied to each record is found in location 21-25. To produce an estimate of the number of discharges, the weights for the desired records must be summed. To produce an estimate for number of days of care, the weight must be multiplied by the days of care (location 13-16) and these products are summed. Average length of stay data can be obtained by dividing the days of care by the number of discharges as calculated above.

Appendix D contains weighted and unweighted frequencies for selected variables. These may be used as a cross-check when processing NHDS data. Please note that, beginning in 2003, Chapter 00 – Procedures and Interventions, Not Elsewhere Classified – was added to the list of frequencies for all-listed procedures on page 58.

**Diagnosis-Related Groups (DRGs).** Many users of the NHDS data have expressed an interest in converting the medical data to DRGs. This has been done using DRG Grouper Programs obtained from the Centers for Medicare and Medicaid Services (formerly HCFA). The DRGs and the DRG Grouper Programs were developed outside of the National Center for Health Statistics; any questions about DRGs, other than specific questions about how they relate to NHDS data, should be addressed elsewhere.

**Questions.** Questions concerning NHDS data should be directed to:

Centers for Disease Control and Prevention  
National Center for Health Statistics  
Division of Health Care Statistics  
Ambulatory and Hospital Care Statistics Branch  
3311 Toledo Road  
Hyattsville, Maryland 20782  
Phone: 301.458.4321  
Fax: 301.458.4032  
email: [NHDS@cdc.gov](mailto:NHDS@cdc.gov)

For more information about the NHDS, visit our website:  
<http://www.cdc.gov/nchs/about/major/hdasd/nhds.htm>

For email discussions and dissemination of NHDS data, join the Hospital Discharge and Ambulatory Surgery Data listserv (HDAS-DATA). In the body of an email message (leaving the subject line blank), type:

subscribe hdas-data Your Name

Send this message to:  
[listserv@cdc.gov](mailto:listserv@cdc.gov)

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## REFERENCES

<sup>1</sup>Dennison C, Pokras R. Plan and Operation of the National Hospital Discharge Survey. National Center for Health Statistics. Vital Health Stat 1 (39). 2000.  
[http://www.cdc.gov/nchs/data/series/sr\\_01/sr01\\_039.pdf](http://www.cdc.gov/nchs/data/series/sr_01/sr01_039.pdf)

<sup>2</sup>SMG Marketing Group, Inc. Hospital Market Database. Chicago: Healthcare Information Specialists, Chicago, IL. April 1987, April 1991, April 1994, April 1997, April 2000; Verispan, L.L.C. Healthcare Market Index and Hospital Market Profiling Solution, 2003 and 2006.

<sup>3</sup>Simmons WR, Schnack GA. Development of the Design of the NCHS Hospital Discharge Survey. National Center for Health Statistics. Vital Health Stat 2(39). 1977.

<sup>4</sup>International Classification of Diseases, 9<sup>th</sup> Revision, Clinical Modification, 6<sup>th</sup> edition. U.S. Department of Health and Human Services, National Center for Health Statistics, Health Care Financing Administration. 2004.

<sup>5</sup>Office of the Secretary, Department of Health and Human Services: Health Information Policy Council: 1984 Revision of the Uniform Hospital Discharge Data Set. Federal Register, Volume 50, No. 147. July 31, 1985.

<sup>6</sup>Bieler GS, Williams RL. *Analyzing Survey Data Using SUDAAN Release 7.5*. Research Triangle Institute: Research Triangle Park, N.C. 1997.

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## II. TECHNICAL DESCRIPTION OF DATA FILE

Data Set Name	NHDS06.PU.TXT
Record Length	88
Number of Records	376,328

## III. RECORD LAYOUT: Location and Coding of Data Elements

This section provides detailed information for each sampled record on the file, with a description of each item included on the record. Data elements are arranged sequentially according to their physical location on the file. Unless otherwise stated in the Item Description, the data are derived from the abstract form or from automated sources. The SMG Hospital Market Database file, Verispan's data products, and the hospital interview are alternate sources of data; some other items are computer generated.

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Item Number	Location	Number of Positions	Item description	Code description
1	1-2	2	Survey Year	06
2	3	1	Newborn status	1=Newborn 2=Not newborn
3	4	1	Units for age	1=Years 2=Months 3=Days
4	5-6	2	Age in years, months, or days	If units=years: 00-99* If units=months: 01-11 If units=days: 00-28 *Ages 100 and over were recoded to 99
5	7	1	Sex	1=Male 2=Female
6	8	1	Race	1=White 2=Black/African American 3=American Indian/Alaskan Native 4=Asian 5=Native Hawaiian or other Pacific Isldr 6=Other 8=Multiple race indicated 9=Not stated
7	9	1	Marital status	1=Married 2=Single 3=Widowed 4=Divorced 5=Separated 9=Not stated
8	10-11	2	Discharge month	01-12=January to December
9	12	1	Discharge Status	1=Routine/discharged home 2=Left against medical advice 3=Discharged/transferred to short-term facility 4=Discharged/transferred to long-term care institution 5=Alive, disposition not stated 6=Dead 9=Not stated or not reported
10	13-16	4	Days of care	Use to calculate number of days of care. Values of zero generated by the computer from admission and discharge dates were changed to one. (Discharges for which dates of admission and discharge are the



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Item Number	Location	Number of Positions	Item description	Code description
				same are identified in Item Number 11)
11	17	1	Length of stay flag	0=Less than 1 day 1=One day or more
12	18	1	Geographic region	1=Northeast 2=Midwest 3=South 4=West
13	19	1	Number of beds, recode	1=6-99 2=100-199 3=200-299 4=300-499 5=500 and over
14	20	1	Hospital ownership	1=Proprietary 2=Government 3=Nonprofit, including church
15	21-25	5	Analysis weight	Use to obtain weighted estimates
16	26-27	2	First two digits of survey year	20
17	28-32	5	Diagnosis code #1	*
18	33-37	5	Diagnosis code #2	*
19	38-42	5	Diagnosis code #3	*
20	43-47	5	Diagnosis code #4	*
21	48-52	5	Diagnosis code #5	*
22	53-57	5	Diagnosis code #6	*
23	58-62	5	Diagnosis code #7	*
24	63-66	4	Procedure code#1	*
25	67-70	4	Procedure code#2	*
26	71-74	4	Procedure code#3	*
27	75-78	4	Procedure code#4	*
28	79-80	2	Principal expected source of payment	01=Worker's compensation 02=Medicare 03=Medicaid 04=Other government 05=Blue Cross/Blue Shield 06=HMO/PPO

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Item Number	Location	Number of Positions	Item description	Code description
				07=Other private insurance 08=Self-pay 09=No charge 10=Other 99=Not stated
29	81-82	2	Secondary expected source of payment	Same coding as item 28 above, except Not Stated left blank (not coded to 99)
30	83-85	3	Diagnosis-Related Groups (DRG)	grouper version 23.0
31	86	1	Type of Admission	1 = Emergency 2 = Urgent 3 = Elective 4 = Newborn 9 = Not available
32	87-88	2	Source of Admission	01 = Physician referral 02 = Clinical referral 03 = HMO referral 04 = Transfer from a hospital 05 = Transfer from skilled nursing facility 06 = Transfer from other health facility 07 = Emergency room 08 = Court/law enforcement 09 = Other 99 = Not available

\*Diagnosis and procedure codes are in compliance with the *International Classification of Diseases, 9th Revision, Clinical Modification, (ICD-9-CM)*. For **diagnosis** codes, there is an implied decimal between positions 3 and 4. For E-codes, the implied decimal is between the 4th and 5th position. For inapplicable 4th or 5th digits, a dash is inserted. For **procedure** codes, there is an implied decimal between positions 2 and 3. For inapplicable 3rd or 4th digits, a dash is inserted.

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## APPENDIX A

### DEFINITION OF TERMS

#### *Terms relating to hospitals and hospitalization*

**Hospitals:** Short stay hospitals or hospitals whose specialty is general (medical or surgical), or children's general. Hospitals must have 6 beds or more staffed for patients use. Federal hospitals and hospital units of institutions are not included.

**Type of ownership of hospital:** The type of organization that controls and operates the hospital. Hospitals are grouped as follows:

**Not for Profit:** Hospitals operated by a church or another not for profit organization.

**Government:** Hospitals operated by State and local government.

**Proprietary:** Hospitals operated by individuals, partnerships, or corporations for profit.

**Patient:** A person who is formally admitted to the inpatient service of a short-stay hospital for observation, care, diagnosis, or treatment, or by birth.

**Discharge:** 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.

**Discharge rate:** The ratio of the number of hospital discharges during the year to the number of persons in the civilian population on July 1 of that year.

**Days of care:** The total number of patient days accumulated at time of discharge by patients discharged from short stay hospitals during a year. A stay of less than 1 day (patient admission and discharge on the same day) is counted as 1 day in the summation of total days of care. For patients admitted and discharged on different days, the number of days of care is computed by counting all days from (and including) the date of admission to (but not including) the date of discharge.

**Rate of days of care:** The ratio of the number of patient days accumulated at time of discharge to the number of persons in the civilian population on July 1 of that year.

**Average length of stay:** The total number of days of care accumulated at time of discharge by patients discharged during the year, divided by the number of patients discharged.

#### *Terms relating to diagnoses and procedures*

**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 a patient. In the NHDS, discharge (or final) diagnoses listed on the face sheet (summary sheet) of the medical record are transcribed in the order listed. Each sample discharge is assigned a maximum of seven five-digit codes according to ICD-9-CM (4).

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**Principal diagnosis:** The condition established after study to be chiefly responsible for occasioning the admission of the patient to the hospital for care.

**First-listed diagnosis:** The coded diagnosis identified as the principal diagnosis or listed first on the face sheet of the medical record if the principal diagnosis cannot be identified. The number of first-listed diagnoses is equivalent to the number of discharges.

**Procedure:** One or more surgical or nonsurgical operations, procedures, or special treatments listed by the physician on the medical record. In the NHDS, all terms listed on the face sheet (summary sheet) of the medical record under the caption "operation," "operative procedures," "operations and/or special treatment," and the like are transcribed in the order listed. A maximum of four procedures are coded.

**Rate of procedures:** The ratio of the number of all-listed procedures during a year to the number of persons in the civilian population on July 1 of that year determines the rate of procedures.

### Demographic terms

**Age:** Refers to the age of the patient on the birthday prior to admission to the hospital inpatient service.

**Population:** Civilian population is the resident population excluding members of the Armed Forces.

**Geographic regions:** Hospitals are classified by location in one of the four geographic regions of the United States corresponding to those used by the U.S. Bureau of the Census:

U.S. CENSUS REGIONS			
NORTHEAST	MIDWEST	SOUTH	WEST
Maine	Michigan	Delaware	Montana
New Hampshire	Ohio	Maryland	Idaho
Vermont	Illinois	District of Columbia	Wyoming
Massachusetts	Indiana	Virginia	Colorado
Connecticut	Wisconsin	West Virginia	New Mexico
Rhode Island	Minnesota	North Carolina	Arizona
New York	Iowa	South Carolina	Utah
New Jersey	Missouri	Georgia	Nevada
Pennsylvania	North Dakota	Florida	Washington
	South Dakota	Kentucky	Oregon
	Nebraska	Tennessee	California
	Kansas	Alabama	Hawaii
		Mississippi	Alaska
		Arkansas	
		Louisiana	
		Oklahoma	
		Texas	

## APPENDIX B

The *International Classification of Diseases, 9th Revision, Clinical Modification* has been used for coding NHDS data since 1979. The classification system undergoes annual updating, which involves the assignment of new diagnostic and procedure codes, fourth or fifth digit expansion of existing codes, as well as code deletions. Changes are contained in addenda developed by the ICD-9-CM Coordination and Maintenance Committee and approved by the Director of NCHS and the Administrator of the Centers for Medicare and Medicaid Services (formerly HCFA). Addenda to the ICD-9-CM become effective on October 1 of the calendar year and have been released for 1986 through 2006, except for 1999 when there was no addendum due to concerns about possible complications for instituting coding changes prior to the millennium crossover.

As described earlier in this document, the 2006 NHDS involved two data collection modes: manual and automated abstract services. All data collected manually were coded using the sixth edition of the ICD-9-CM, including addendum changes for 1986 through 2005. Because addendum changes become effective in the last quarter of the calendar year, data collected via abstract services were coded using two different ICD-9-CM revisions. For the first 9 months of 2006, the ICD-9-CM with addendum changes up to October 1, 2005 was used; but for the last 3 months, the October 2006 addendum changes were incorporated. Therefore, to preserve consistent coding across the 12 months and to prevent NHDS data users from mistaking partial year estimates for annual estimates, abstract service data for the last quarter of 2006 were converted back to their previous code assignments under the October 2005 addendum.

In 2002, the ICD-9-CM Coordination and Maintenance Committee created a new procedure chapter to accommodate space limitations in the existing hierarchical classification system and to alleviate inappropriate categorization of new procedures. Chapter 00, Procedures and Interventions, Not Elsewhere Classified, has been coded in the NHDS since 2003, since, as noted above, October addendum changes are not implemented in the NHDS until the following data collection year.

In order to assist users, a conversion table is provided which shows the date of introduction of each new code and the previously assigned code equivalent, which had been used for reporting the selected diagnosis or procedure prior to issuance of the new code. This conversion table can be obtained online at the following location:  
<http://www.cdc.gov/nchs/icd9.htm>.

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
005.81, 005.89	1995	005.8
007.4	1997	007.8
007.5	2000	007.8
008.00-008.09	1992	008.0
008.43-008.47	1992	008.49
008.61-008.69	1992	008.6
031.2	1997	031.8
038.10-038.11, 038.19	1997	038.1
040.82	2002	040.89
041.00-041.05, 041.09	1992	041.0
041.04 (Code title restated)	1997	041.04
041.10-041.19	1992	041.1
041.81-041.85, 041.89	1992	041.8
041.86	1995	041.84
042	1994	042.0-042.2, 042.9, 043.0-043.3, 043.9, 044.0, 044.9 (codes deleted)
042.0-044.9	1986	279.19
066.4	2002	066.3
066.40-066.42, 066.49	2004	066.4
070.20-070.21	1991	070.2
070.22	1994	070.20
070.23	1994	070.21
070.30-070.31	1991	070.3
070.32	1994	070.30
070.33	1994	070.31
070.41-070.43	1991	070.4
070.44	1994	070.41
070.49	1991	070.4
070.51-070.53	1991	070.5
070.54	1994	070.51
070.59	1991	070.5
070.70	2004	070.51
070.71	2004	070.41
077.98-077.99	1993	077.9
078.10-078.11, 078.19	1993	078.1

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
078.88	1993	078.89
079.4	1993	079.8
079.50-079.53, 079.59	1993	079.8
079.6	1996	079.89
079.81	1995	079.89
079.82	2003	079.89
079.88-079.89	1993	079.8
079.98-079.99	1993	079.9
082.40-082.41, 082.49	2000	082.8
088.81, 088.89	1989	088.8
088.82	1993	088.89
099.40-099.49	1992	099.4
099.50-099.59	1992	078.89
112.84-112.85	1992	112.89
114.4-114.5	1993	114.3
176.0-176.9	1991	173.0-173.9
203.00	1991	203.0
203.01	1991	V10.79
203.10	1991	203.1
203.11	1991	V10.79
203.80	1991	203.8
203.81	1991	V10.79
204.00	1991	204.0
204.01	1991	V10.61
204.10	1991	204.1
204.11	1991	V10.61
204.20	1991	204.2
204.21	1991	V10.61
204.80	1991	204.8
204.81	1991	V10.61
204.90	1991	204.9
204.91	1991	V10.61
205.00	1991	205.0
205.01	1991	V10.62
205.10	1991	205.1
205.11	1991	V10.62
205.20	1991	205.2
205.21	1991	V10.62

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
205.30	1991	205.3
205.31	1991	V10.62
205.80	1991	205.8
205.81	1991	V10.62
205.90	1991	205.9
205.91	1991	V10.62
206.00	1991	206.0
206.01	1991	V10.63
206.10	1991	206.1
206.11	1991	V10.63
206.20	1991	206.2
206.21	1991	V10.63
206.80	1991	206.8
206.81	1991	V10.63
206.90	1991	206.9
206.91	1991	V10.63
207.00	1991	207.0
207.01	1991	V10.69
207.10	1991	207.1
207.11	1991	V10.69
207.20	1991	207.2
207.21	1991	V10.69
207.80	1991	207.8
207.81	1991	V10.69
208.00	1991	208.0
208.01	1991	V10.60
208.10	1991	208.1
208.11	1991	V10.60
208.20	1991	208.2
208.21	1991	V10.60
208.80	1991	208.8
208.81	1991	V10.60
208.90	1991	208.9
208.91	1991	V10.60
237.70-237.72	1990	237.7
250.02	1993	250.90
250.03	1993	250.91
250.12	1993	250.10
250.13	1993	250.11
250.22	1993	250.20
250.23	1993	250.21
250.32	1993	250.30
250.33	1993	250.31



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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
250.42	1993	250.40
250.43	1993	250.41
250.52	1993	250.50
250.53	1993	250.51
250.62	1993	250.60
250.63	1993	250.61
250.72	1993	250.70
250.73	1993	250.71
250.82	1993	250.80
250.83	1993	250.81
250.92	1993	250.90
250.93	1993	250.91
252.00-252.02, 252.08	2004	252.0
255.10-255.14	2003	255.1
256.31-256.39	2001	256.3
<b>259.5</b>	<b>2005</b>	<b>257.8</b>
273.4	2004	277.6
275.40-275.42, 275.49	1997	275.4
<b>276.50-276.52</b>	<b>2005</b>	<b>276.5</b>
277.02-277.03, 277.09	2002	277.00
277.7	2001	277.8
277.81-277.84, 277.89	2003	277.8
277.85-277.86	2004	277.89
277.87	2004	277.89, 758.89
278.00-278.01	1995	278.0
<b>278.02</b>	<b>2005</b>	<b>278.00</b>
282.41-282.42, 282.49	2003	282.4
282.64	2003	282.63
282.68	2003	282.69
283.10-283.11, 283.19	1993	283.1
285.21-285.22, 285.29	2000	285.8
<b>287.30-287.33, 287.39</b>	<b>2005</b>	<b>287.3</b>
289.52	2003	289.59
289.81-289.82, 289.89	2003	289.8

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
291.81	1996	291.8
<b>291.82</b>	<b>2005</b>	<b>291.89</b>
291.89	1996	291.8
<b>292.85</b>	<b>2005</b>	<b>292.89</b>
293.84	1996	293.89
294.10-294.11	2000	294.1
300.82	1996	300.81
305.1	1994	305.10, 305.11, 305.12, 305.13 (Codes deleted)
312.81-312.82, 312.89	1994	312.8
315.32	1996	315.39
320.81-320.89	1992	320.8
<b>327.00</b>	<b>2005</b>	<b>780.51; 780.52</b>
<b>327.01</b>	<b>2005</b>	<b>780.51; 780.52</b>
<b>327.02</b>	<b>2005</b>	<b>307.41</b>
<b>327.09</b>	<b>2005</b>	<b>780.51; 780.52</b>
<b>327.10-327.14</b>	<b>2005</b>	<b>780.53; 780.54</b>
<b>327.15</b>	<b>2005</b>	<b>307.43</b>
<b>327.19</b>	<b>2005</b>	<b>780.53; 780.54</b>
<b>327.20-327.27</b>	<b>2005</b>	<b>780.57</b>
<b>327.29</b>	<b>2005</b>	<b>780.51; 780.53; 780.57</b>
<b>327.30-327.37; 327.39</b>	<b>2005</b>	<b>307.45</b>
<b>327.40-327.44; 327.49</b>	<b>2005</b>	<b>780.59</b>
<b>327.51</b>	<b>2005</b>	<b>780.58</b>
<b>327.52</b>	<b>2005</b>	<b>729.82</b>
<b>327.53</b>	<b>2005</b>	<b>306.8</b>
<b>327.59</b>	<b>2005</b>	<b>780.58</b>
<b>327.8</b>	<b>2005</b>	<b>780.50</b>
331.11, 331.19	2003	331.1
331.82	2003	331.89
333.92-333.93	1994	333.99
337.20-337.22, 337.29	1993	337.9
337.3	1998	337.9
342.00-342.02	1994	342.0

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
342.10-342.12	1994	342.1
342.80-342.82	1994	342.9
342.90-342.92	1994	342.9
344.00-344.04, 344.09	1994	344.0
344.30-344.32	1994	344.3
344.40-344.42	1994	344.4
344.81, 344.89	1993	344.8
345.00-345.01	1989	345.0
345.10-345.11	1989	345.1
345.40-345.41	1989	345.4
345.50-345.51	1989	345.5
345.60-345.61	1989	345.6
345.70-345.71	1989	345.7
345.80-345.81	1989	345.8
345.90-345.91	1989	345.9
346.00-346.01	1992	346.0
346.10-346.11	1992	346.1
346.20-346.21	1992	346.2
346.80-346.81	1992	346.8
346.90-346.91	1992	346.9
347.00-347.01	2004	347
347.10-347.11	2004	347
348.30-348.31, 348.39	2003	348.3
355.71	1993	354.4
355.79	1993	355.7
357.81-357.82, 357.89	2002	357.8
358.00-358.01	2003	358.0
359.81, 359.89	2002	359.8
<b>362.03-362.07</b>	<b>2005</b>	<b>362.02</b>
365.83	2002	365.89
371.82	1992	371.89
372.81, 372.89	2000	372.8
374.87	1990	374.89

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
380.03	2004	733.99
403.00-403.01	1989	403.0
403.10-403.11	1989	403.1
403.90-403.91	1989	403.9
404.00-404.03	1989	404.0
404.10-404.13	1989	404.1
404.90-404.93	1989	404.9
410.00-410.02	1989	410.0
410.10-410.12	1989	410.1
410.20-410.22	1989	410.2
410.30-410.32	1989	410.3
410.40-410.42	1989	410.4
410.50-410.52	1989	410.5
410.60-410.62	1989	410.6
410.70-410.72	1989	410.7
410.80-410.82	1989	410.8
410.90-410.92	1989	410.9
411.81	1989	410.9
411.89	1989	411.8
414.00-414.01	1994	414.0
414.02-414.03	1994	996.03
414.04-414.05	1996	414.00
414.06	2002	414.00
414.07	2003	414.06
414.12	2002	414.11
415.11	1995	997.3 + 415.1
415.19	1995	415.1
<b>426.82</b>	<b>2005</b>	<b>794.31</b>
428.20-428.23	2002	428.0
428.30-428.33	2002	428.0
428.40-428.43	2002	428.0
429.71, 429.79	1989	410.0-410.9
433.00-433.01	1993	433.0
433.10-433.11	1993	433.1
433.20-433.21	1993	433.2
433.30-433.31	1993	433.3
433.80-433.81	1993	433.8
433.90-433.91	1993	433.9

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
434.00-434.01	1993	434.0
434.10-434.11	1993	434.1
434.90-434.91	1993	434.9
435.3	1995	435.0 + 435.1
437.7	1992	780.9
438.0	1997	294.9 + 438
438.10	1997	784.5 + 438
438.11	1997	784.3 + 438
438.12	1997	784.4 + 438
438.19	1997	784.5 + 438
438.20	1997	342.90 + 438
438.21	1997	342.91 + 438
438.22	1997	342.92 + 438
438.30	1997	344.40 + 438
438.31	1997	344.41 + 438
438.32	1997	344.42 + 438
438.40	1997	344.30 + 438
438.41	1997	344.31 + 438
438.42	1997	344.32 + 438
438.50-438.52	1997	344.89 + 438
438.53	1998	438.50
438.6-438.7	2002	438.89
438.81	1997	784.69 + 438
438.82	1997	787.2 + 438
438.83-438.85	2002	438.89
438.89	1997	438
438.9	1997	438
440.20-440.22	1992	440.2
440.23	1993	440.20 + (707.1 or 707.8 or 707.9)
440.24	1993	440.20 + 785.4
440.29	1993	440.2
440.30-440.32	1994	996.1
441.00-441.03	1994	441.0
441.6	1993	441.1 + 441.3
441.7	1993	441.2 + 441.4
443.21	2002	442.81
443.22	2002	442.2
443.23	2002	442.1
443.24, 443.29	2002	442.89
<b>443.82</b>	<b>2005</b>	<b>443.89</b>

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
445.01-445.02	2002	440.29
445.81	2002	440.1
445.89	2002	440.8
446.20-446.21, 446.29	1990	446.2
451.82-451.84	1993	451.89
453.40-453.42	2004	453.8
454.8	2002	454.9
458.2	1995	997.9 + 458.9
458.21, 458.29	2003	458.2
458.8	1997	458.9
459.10-459.13; 459.19	2002	459.1
459.30-459.33; 459.39	2002	459.89
464.00-464.01	2001	464.0
464.50-464.51	2001	464.0
466.11, 466.19	1996	466.1
474.0 (Code title restated)	1997	474.0
474.00-474.02	1997	474.0
477.1	2000	477.8
477.2	2004	477.8
480.3	2003	480.8
482.30-482.39	1992	482.3
482.40-482.41, 482.49	1998	482.4
482.81-482.83, 482.89	1992	482.8
482.84	1997	482.83
483.0	1992	483
483.1	1996	078.88 + 484.8
483.8	1992	483
491.20-491.21	1991	491.2
491.22	2004	491.21
493.02	2000	493.00
493.12	2000	493.10
493.20	1989	493.90

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
493.21	1989	493.91
493.22	2000	493.20
493.81	2003	519.1
493.82	2003	493.90-493.91
493.92	2000	493.90
494.0-494.1	2000	494
512.1	1994	997.3
517.3	2003	282.62
518.6	1997	518.89
518.81	1987	799.1
518.82-518.89	1987	518.8
518.83, 518.84	1998	518.81
519.00-519.02; 519.09	1998	519.0
521.00-521.05, 521.09	2001	521.0
521.06-521.08	2004	521.09
521.10-521.15	2004	521.1
521.20-521.25	2004	521.2
521.30-521.35	2004	521.3
521.40-521.45	2004	521.4
523.20-523.25	2004	523.2
524.00-524.06, 524.09	1992	524.0
524.07	2004	524.09
524.10-524.12, 524.19	1992	524.1
524.20-524.29	2004	524.2
524.30-524.37, 524.39	2004	524.3
524.50-524.57, 524.59	2004	524.5
524.60-524.63, 524.69	1991	524.6
524.64	2004	524.69
524.70-524.77, 524.79	1992	524.8
524.75-524.76	2004	524.79
524.81-524.82, 524.89	2004	524.8
525.10-525.13, 525.19	2001	525.1
525.20-525.26	2004	525.2
<b>525.40-525.44</b>	<b>2005</b>	<b>525.10</b>
<b>525.50-525.54</b>	<b>2005</b>	<b>525.10</b>
528.71-528.72, 528.79	2004	528.7
530.10-530.11, 530.19	1993	530.1

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
530.12	2001	530.10
530.20-530.21	2003	530.2
530.81	1993	530.1
530.82-530.84, 530.89	1993	530.8
530.85	2003	530.2
530.86-530.87	2004	997.4
535.00-535.01	1991	535.0
535.10-535.11	1991	535.1
535.20-535.21	1991	535.2
535.30-535.31	1991	535.3
535.40-535.41	1991	535.4
535.50-535.51	1991	535.5
535.60-535.61	1991	535.6
536.3	1994	536.8
536.40-536.42, 536.49	1998	997.4
537.82	1990	537.89
537.83	1991	537.82
537.84	2002	531.00
556.0-556.6, 556.8-556.9	1994	556
558.3	2000	558.9
562.02	1991	562.00
562.03	1991	562.01
562.12	1991	562.10
562.13	1991	562.11
564.00-564.09	2001	564.0
564.81, 564.89	1998	564.8
<b>567.21-567.23, 567.29</b>	<b>2005</b>	<b>567.2</b>
<b>567.31</b>	<b>2005</b>	<b>728.89</b>
<b>567.38</b>	<b>2005</b>	<b>567.2</b>
<b>567.39</b>	<b>2005</b>	<b>567.9</b>
<b>567.81-567.82, 567.89</b>	<b>2005</b>	<b>567.8</b>
569.60-569.61, 569.69	1995	569.6
569.62	1998	569.69
569.84	1990	557.1
569.85	1991	569.84
569.86	2002	569.82
574.60	1996	574.00 + 574.30
574.61	1996	574.01 + 574.31



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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
574.70	1996	574.10 + 574.40
574.71	1996	574.11 + 574.41
574.80	1996	574.00 + 574.10, 574.30 + 574.40
574.81	1996	574.01 + 574.11, 574.31 + 574.41
574.90	1996	574.20 + 574.50
574.91	1996	574.21 + 574.51
575.10-575.11	1996	575.1
575.12	1996	575.0 + 575.1
<b>585.1-585.6, 585.9</b>	<b>2005</b>	<b>585</b>
588.81, 588.89	2004	588.8
593.70-593.73	1994	593.7
596.51-596.53	1992	596.5
596.54	1992	344.61
596.55-596.59	1992	596.5
<b>599.60, 599.69</b>	<b>2005</b>	<b>599.6</b>
599.81-599.89	1992	599.8
600.0-600.3, 600.9	2000	600
600.00-600.01	2003	600.0
600.10-600.11	2003	600.1
600.20-600.21	2003	600.2
600.90-600.91	2003	600.9
602.3	2001	602.8
607.85	2003	607.89
608.82	2001	608.83
608.87	2001	608.89
618.00-618.05, 618.09	2004	618.0
618.81-618.83, 618.89	2004	618.8
621.30-621.33	2004	621.3
622.10-622.12	2004	622.1
629.20-629.23	2004	629.8
633.00-633.01	2002	633.0
633.10-633.11	2002	633.1
633.20-633.21	2002	633.2

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
633.80-633.81	2002	633.8
633.90-633.91	2002	633.9
645.00-645.01, 645.03	1991	645.0-645.1, 645.3 (amended 10/02/2004)
645.10-645.11, 645.13	2000	645.00-645.01, 645.03
645.20-645.21, 645.23	2000	645.00-645.01, 645.03
651.30-651.31, 651.33	1989	651.00-651.01, 651.03
651.40-651.41, 651.43	1989	651.10-651.11, 651.13
651.50-651.51, 651.53	1989	651.20-651.21, 651.23
651.60-651.61, 651.63	1989	651.80-651.81, 651.83
<b>651.70-651.71, 651.73</b>	<b>2005</b>	<b>651.8</b>
654.20-654.21, 654.23	1990	654.2, 654.9
654.90-654.94	1990	654.2, 654.9
655.70-655.71, 655.73	1997	655.8
657.00-657.01, 657.03	1991	657.0-657.1, 657.3 (amended 10/02/2004)
659.60-659.61, 659.63	1992	659.80-659.81, 659.83
659.70-659.71, 659.73	1998	656.30-656.31, 656.33
665.10, 665.11	1992	665.10-665.12, 665.14 <sup>1</sup>
670.00, 670.02, 670.04	1991	670.0-670.1, 670.3 (amended 10/02/2004)
672.00, 672.02, 672.04	1991	672.0-672.1, 672.3 (amended 10/02/2004)
674.50-674.54	2003	674.80, 674.82, 674.84
677	1994	None
686.00-686.01, 686.09	1997	686.0
690.10, 690.18	1995	690
690.11	1995	691.8 + 704.8
690.12	1995	691.8
690.8	1995	690
692.72-692.74	1992	692.79
692.75	2000	692.79
692.76-692.77	2001	692.71
692.82-692.83	1992	692.89

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
692.84	2004	692.89
702.0-702.8	1991	702
702.11, 702.19	1994	702.1
704.02	1993	704.09
705.21-705.22	2004	780.8
707.00-707.07, 707.09	2004	707.0
707.10-707.15, 707.19	2000	707.1
709.00-709.01, 709.09	1994	709.0
710.5	1992	288.3, 729.1
718.70-718.79	2001	718.80-718.89
719.7	2003	719.70, 719.75-719.79 (codes deleted)
727.83	2000	727.89
728.86	1995	729.4
728.87	2003	728.9
728.88	2003	728.89
733.10-733.16, 733.19	1993	733.1
733.93	2001	733.16
733.94-733.95	2001	733.19
738.10-738.19	1992	738.1
747.60-747.64, 747.69	1993	747.6
747.82	1993	747.89
747.83	2002	747.89, 747.9
752.51-752.52	1996	752.5
752.61-752.63	1996	752.6
752.64-752.65, 752.69	1996	752.8
752.81, 752.89	2003	752.8
753.10-753.17, 753.19	1990	753.1
753.20-753.23, 753.29	1996	753.2
756.70-756.71, 756.79	1997	756.7
758.31-758.33, 758.39	2004	758.3

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
758.81	1996	758.8
758.89	1996	758.9
759.81-759.82, 759.89	1989	759.8
759.83	1994	759.89
760.75	1991	760.79
760.76	1994	760.79
<b>760.77-760.78</b>	<b>2005</b>	<b>760.79</b>
763.81-763.83, 763.89	1998	763.8
<b>763.84</b>	<b>2005</b>	<b>770.1</b>
764.00-764.09	1988	764.0
764.10-764.19	1988	764.1
764.20-764.29	1988	764.2
764.90-764.99	1988	764.9
765.00-765.09	1988	765.0
765.10-765.19	1988	765.1
765.20-765.24	2002	765.00-765.09
765.25-765.29	2002	765.10-765.19
766.21-766.22	2003	766.2
767.11-767.19	2003	767.1
<b>770.10-770.18</b>	<b>2005</b>	<b>770.1</b>
770.81-770.84, 770.89	2002	770.8
<b>770.85-770.86</b>	<b>2005</b>	<b>770.1</b>
771.81-771.83, 771.89	2002	771.8
772.10-772.14	2001	772.1
779.7	2001	772.1
779.81-779.82	2002	779.8
779.83	2003	779.89
<b>779.84</b>	<b>2005</b>	<b>None (omit code)</b>
779.89	2002	779.8
780.01-780.02, 780.09	1992	780.0
780.03	1993	780.01
780.31, 780.39	1997	780.3
780.57	1992	780.51, 780.53
780.58	2004	780.59
780.71, 780.79	1998	780.7
780.91-780.92	2002	780.9

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
780.93-780.94	2003	780.99
<b>780.95</b>	<b>2005</b>	<b>780.99</b>
780.99	2002	780.9
781.8	1994	781.9
781.91-781.92, 781.99	2000	781.9
781.93	2002	723.5
781.94	2003	781.99
783.21	2000	783.2
783.22	2000	783.4
783.40-783.43	2000	783.4
783.7	2000	783.4
785.52	2003	785.59
786.03-786.07	1998	786.09
787.01-787.03	1994	787.0
787.91	1995	558.9
787.99	1995	787.9
788.20-788.21, 788.29	1993	788.2
788.30-788.37; 788.39	1992	788.3
788.38	2004	788.39
788.41-788.43	1993	788.4
788.61-788.62, 788.69	1993	788.6
788.63	2003	788.69
789.00-789.07, 789.09	1994	789.0
789.30-789.37, 789.39	1994	789.3
789.40-789.47, 789.49	1994	789.4
789.60-789.67, 789.69	1994	789.6
790.01, 790.09	2000	790.0
790.21-790.22, 790.29	2003	790.2
790.91, 790.93, 790.99	1993	790.9
790.92	1993	286.9
790.94	1997	790.99
790.95	2004	790.99
792.5	2000	792.9
793.80-793.81, 793.89	2001	793.8
795.00-795.02, 795.09	2002	795.0
795.03, 795.04	2004	622.1
795.05, 795.08	2004	795.09

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
795.31-795.39	2002	795.3
795.71	1994	795.8 (Code deleted)
795.79	1994	795.7
795.8	1986	795.7
796.5	1997	796.9
796.6	2004	796.9
<b>799.01-799.02</b>	<b>2005</b>	<b>799.0</b>
799.81, 799.89	2003	799.8
813.45	2002	813.42
823.40-823.42	2002	823.80-823.82
840.7	2001	840.8
850.11-850.12	2003	850.1
864.05	1992	864.09
864.15	1992	864.19
909.5	1994	909.9
922.31-922.33	1996	922.3
925.1-925.2	1993	925
959.0 (Code title restated)	1997	959.0
959.01	1997	854.00
959.09	1997	959.0
959.11-959.14, 959.19	2003	959.1
965.61, 965.69	1998	965.6
989.81-989.84, 989.89	1995	989.8
995.50-995.55, 995.59	1996	995.5
995.60-995.69	1993	995.0
995.7	2000	None
995.80, 995.82-995.85	1996	995.81
995.81 (Code title restated)	1996	995.81
995.86	1998	995.89
995.90-995.94	2002	038.0-038.9
996.04	1994	996.09
<b>996.40-996.47, 996.49</b>	<b>2005</b>	<b>996.4</b>
996.51-996.59	1987	996.5

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
996.55	1998	996.52
996.56	1998	996.59
996.57	2003	996.59
996.60-996.69	1989	996.6
996.68	1998	996.69
996.70-996.79	1989	996.7
996.80-996.84, 996.86, 996.89	1987	996.8
996.85	1990	996.89
996.87	2000	996.89
997.00-997.01, 997.09	1995	997.0
997.02	1995	997.9 + 430-434, 436
997.71	2001	997.4
997.72	2001	997.5
997.79	2001	997.2
997.91, 997.99	1995	997.9
998.11-998.12	1996	998.1
998.13	1996	998.89
998.31-998.32	2002	998.3
998.51, 998.59	1996	998.5
998.81-998.82, 998.89	1994	998.8
998.83	1996	998.89
V01.71, V01.79	2004	V01.7
V01.81, V01.89	2002	V01.8
V01.82	2003	V01.89
V01.83-V01.84	2004	V01.89
V02.51-V02.52, V02.59	1998	V02.5
V02.60-V02.62, V02.69	1997	V02.6
V03.81-V03.82, V03.89	1994	V03.8
V04.81-V04.82, V04.89	2003	V04.8
V05.3-V05.4	1993	V05.8
V06.5-V06.6	1994	V06.8
V07.31, V07.39	1994	V07.3
V07.4	1992	V07.8
V08	1994	044.9, 795.8 (codes deleted)
V09.0-V09.91	1993	None

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
V10.48	1998	V10.49
V10.53	2001	V10.59
V12.00-V12.03, V12.09	1994	V12.0
V12.40-V12.41, V12.49	1997	V12.4
<b>V12.42</b>	<b>2005</b>	<b>V12.49</b>
V12.50-V12.52, V12.59	1995	V12.5
<b>V12.60-V12.61; V12.69</b>	<b>2005</b>	<b>V12.6</b>
V12.70-V12.72, V12.79	1994	V12.7
V13.00-V13.01, V13.09	1994	V13.0
<b>V13.02-V13.03</b>	<b>2005</b>	<b>V13.09</b>
V13.21, V13.29	2002	V13.2
V13.61, V13.69	1998	V13.6
V15.01-V15.09	2000	V15.0
V15.41-V15.42, V15.49	1996	V15.4
V15.82	1994	305.13 (code deleted)
V15.84-V15.86	1995	V15.89
V15.87	2003	V15.89
<b>V15.88</b>	<b>2005</b>	<b>V15.49</b>
V16.40-V16.43, V16.49	1997	V16.4
V16.51, V16.59	1998	V16.5
<b>V17.81, V17.89</b>	<b>2005</b>	<b>V17.8</b>
V18.61, V18.69	1998	V18.6
<b>V18.9</b>	<b>2005</b>	<b>V19.8</b>
V21.30-V21.35	2000	None
V23.41, V23.49	2002	V23.4
V23.7	1989	V23.8
V23.81-V23.84, V23.89	1998	V23.8
V25.03	2003	V25.01
V25.43	1992	V25.49
V25.5	1992	V25.8
V26.21-V26.22, V26.29	2000	V26.2
<b>V26.31-V26.33</b>	<b>2005</b>	<b>V26.3</b>
V26.51, V26.52	1998	None
V28.6	1997	V28.8
V29.0-V29.1, V29.8	1992	V71.8
V29.2	1994	V29.8



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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
V29.3	1998	V29.8
V29.9	1992	V71.9
V30.00-V30.01	1989	V30.0
V31.00-V31.01	1989	V31.0
V32.00-V32.01	1989	V32.0
V33.00-V33.01	1989	V33.0
V34.00-V34.01	1989	V34.0
V35.00-V35.01	1989	V35.0
V36.00-V36.01	1989	V36.0
V37.00-V37.01	1989	V37.0
V39.00-V39.01	1989	V39.0
V42.81-V42.83, V42.89	1997	V42.8
V42.84	2000	V42.89
V43.21-V43.22	2003	V43.2
V43.60-43.66, V43.69	1994	V43.6
V43.81-V43.82, V43.89	1995	V43.8
V43.83	1998	V43.89
V44.50-V44.52, V44.59	1998	V44.5
V45.00, V45.02, V45.09	1994	V45.89
V45.01	1994	V45.0
V45.51	1994	V45.5
V45.52, V45.59	1994	V45.89
V45.61, V45.69	1997	V45.6
V45.71	1997	611.8
V45.72	1997	569.89
V45.73	1997	593.89
V45.74	2000	593.89, 596.8
V45.75	2000	V45.89
V45.76	2000	518.89
V45.77	2000	602.8, 607.89, 608.89, 620.8, 621.8,
V45.78	2000	622.8
V45.79	2000	360.89
V45.82	1994	255.8, 289.59, 388.8, 569.49, 577.8
V45.83	1995	V45.89
V45.84	2001	None
V45.85	2003	V45.89
V46.11-V46.12	2004	V46.1
<b>V46.13-V46.14</b>	<b>2005</b>	<b>V46.11</b>
V46.2	2002	V46.8

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
V49.60-V49.67	1994	V49.5
V49.70-V49.77	1994	V49.5
V49.81	2000	None
V49.82	2001	None
V49.83	2004	None
<b>V49.84</b>	<b>2005</b>	<b>V49.89</b>
V49.89	2000	V49.8
V50.41-V50.42, V50.49	1994	V50.8
V53.01-V53.02, V53.09	1997	V53.0
V53.31-V53.32, V53.39	1994	V53.9
V53.90-V53.91, V53.99	2003	V53.9
V54.01-V54.02, V54.09	2003	V54.0
V54.10-V54.17, V54.19	2002	V54.8
V54.20-V54.27, V54.29	2002	V54.8
V54.81, V54.89	2002	V54.8
V56.1	1995	V58.89
V56.1 (Code title restated)	1998	V56.1
V56.2	1998	V56.1
V56.31-V56.32	2000	V56.8
V57.21-V57.22	1994	V57.2
<b>V58.11</b>	<b>2005</b>	<b>V58.1</b>
<b>V58.12</b>	<b>2005</b>	<b>140-208; 230-239</b>
V58.41, V58.49	1994	V58.4
V58.42, V58.43	2002	V58.49
V58.44	2004	V58.71-V58.78
V58.61, V58.69	1995	V67.51
V58.62	1998	V58.69
V58.63-V58.65	2003	V58.69
V58.66-V58.67	2004	V58.69
V58.71-V58.78	2002	V58.49
V58.81, V58.89	1994	V58.8
V58.82	1995	V58.89
V58.83	2000	V58.89
V59.01-V59.02, V59.09	1995	V59.0
V59.6	1995	V59.8
<b>V59.70-V59.74</b>	<b>2005</b>	<b>V59.8</b>
V61.10-V61.12	1996	V61.1
V61.22	1996	V61.21
V62.83	1996	V65.49

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
<b>V62.84</b>	<b>2005</b>	<b>V62.89</b>
<b>V64.00-V64.05</b>	<b>2005</b>	<b>V64.0</b>
<b>V64.06</b>	<b>2005</b>	<b>V64.2</b>
<b>V64.07-V64.09</b>	<b>2005</b>	<b>V64.0</b>
V64.4	1997	None
V64.41-V64.43	2003	V64.4
V65.11, V65.19	2003	V65.1
V65.40-V65.45, V65.49	1994	V65.4
V65.46	2003	V65.1
V66.7	1996	None
V67.00-V67.01, V67.09	2000	V67.0
V69.0-V69.3	1994	None
V69.4	2004	V69.8
<b>V69.5</b>	<b>2005</b>	<b>V69.8</b>
V69.8-V69.9	1994	None
V71.81, V71.89	2000	V71.8
V71.82-V71.83	2002	V71.89
V72.31-V72.32	2004	V72.3
V72.40-V72.41	2004	V72.4
<b>V72.42</b>	<b>2005</b>	<b>V22.0-V22.1</b>
V72.81-V72.85	1993	V72.8
<b>V72.86</b>	<b>2005</b>	<b>V72.83</b>
V73.88-V73.89	1993	V73.8
V73.98-V73.99	1993	V73.9
V76.10-V76.12, V76.19	1997	V76.1
V76.44-V76.45	1998	V76.49
V76.46-V76.47	2000	V76.49
V76.50-V76.52	2000	V76.49
V76.81, V76.89	2000	V76.8
V77.91, V77.99	2000	V77.9
V82.81, V82.89	2000	V82.8
V83.01-V83.02	2001	None
V83.81	2002	None
V83.89	2002	V19.8
V84.01-V84.04, V84.09	2004	None

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
V84.8	2004	None
<b>V85.0</b>	<b>2005</b>	<b>None</b>
<b>V85.1</b>	<b>2005</b>	<b>None</b>
<b>V85.21-V85.25</b>	<b>2005</b>	<b>None</b>
<b>V85.30-V85.39</b>	<b>2005</b>	<b>None</b>
<b>V85.4</b>	<b>2005</b>	<b>None</b>
E854.8	1995	E858.8
E869.4	1994	E869.8
E880.1	1995	E884.9
E884.3-E884.4	1995	E884.2
E884.5-E884.6	1995	E884.9
E885.0	2002	E885.9
E885.1-E885.4, E885.9	2000	E885
E888.0	2001	E920
E888.1, E888.8-E888.9	2001	E888
E906.5	1995	E906.3
E908.0-E908.4, E908.8-E908.9	1995	E908
E909.0-E909.4, E909.8-E909.9	1995	E909
E917.3, E917.4	2001	E917.9
E917.5	2001	E886.0
E917.6	2001	E917.1
E917.7, E917.8	2001	E888
E920.5	1995	E920.4
E922.4	1997	E917.9
E922.5	2002	E922.8
E924.2	1995	E924.0
E928.3	2000	E928.8
E928.4, E928.5	2003	E928.8
E955.6	1997	E955.9
E955.7	2002	E955.4

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## Changes in ICD-9-CM diagnosis codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
E967.2	1996	E967.0
E967.3	1996	None
E967.4-E967.8	1996	E967.1
E968.5	1995	E968.8
E968.6	1997	E968.8
E968.7	2000	E968.8
E985.6	1997	E985.4
E985.7	2002	E985.4
E979.0-E979.9	2002	E960.0-E966, E968.0-E968.9
E999.0	2002	E999
E999.1	2002	E969

<sup>1</sup>The title for the subcategory, 665.1, has been changed, making the fifth-digit subclassification, 665.12 and 665.14, invalid.

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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
00.01-00.03, 00.09	2002	99.99
00.10	2002	99.25
00.11	2002	99.19
00.12	2002	93.98
00.13	2002	99.29
00.14	2002	99.21
00.15	2003	99.28
00.16	2004	None
00.17	2004	99.29
<b>00.18</b>	<b>2005</b>	<b>99.29</b>
00.21	2004	88.71
00.22	2004	88.73
00.23	2004	88.77
00.24	2004	88.72
00.25	2004	88.75
00.28-00.29	2004	88.79
00.31-00.35, 00.39	2004	None
<b>00.40-00.43, 00.45-00.48</b>	<b>2005</b>	<b>None</b>
00.50	2002	37.80-37.87 & 37.70-37.74, 37.76
00.51	2002	37.94
00.52	2002	None
00.53	2002	37.80-37.87
00.54	2002	37.96
00.55	2002	39.90
00.61-00.62	2004	39.50
00.63-00.65	2004	00.55, 39.90
<b>00.66</b>	<b>2005</b>	<b>36.01 (deleted), 36.02 (deleted), 36.05 (deleted)</b>
<b>00.70-00.73</b>	<b>2005</b>	<b>81.53</b>
<b>00.74-00.76</b>	<b>2005</b>	<b>None</b>
<b>00.80-00.84</b>	<b>2005</b>	<b>81.55</b>
00.91-00.93	2004	None
<b>01.26-01.27</b>	<b>2005</b>	<b>None</b>
02.96	1992	89.19
03.90	1987	03.99 (Insertion of catheter)

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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
05.25	1995	39.7
11.75	1989	11.79
11.76	1989	11.62
20.96-20.98	1986	20.95
22.12	1988	22.11
26.12	1988	26.11
27.64	2004	27.69
29.31	1991	83.02
29.32, 29.33, 29.39	1991	29.3
31.45	1988	31.43-31.44
31.95	1989	31.75
32.01, 32.09	1989	32.0
32.22	1995	32.29, 32.9
32.28	1989	32.29
33.27	1987	33.22 + 33.27
33.28	1987	33.27
33.29	1987	33.28-33.29
33.50-33.52	1995	33.5
33.6	1990	33.5 + 37.5
34.05	1994	34.99
35.84	1988	35.82
35.96	1986	35.03
36.00-36.03	1986	36.0
36.04	1986	39.97
36.05	1986	36.01 <sup>1</sup> , 36.02
36.05	1987	36.01
36.06	1995	36.01, 36.02, 36.03, 36.05
36.07	2002	36.06
36.09	1986	36.0
36.09	1991	36.00 (Code deleted)
36.17	1996	36.19
36.31, 36.32, 36.39	1998	36.3
37.26-37.27	1988	37.29
37.28	2001	88.72
37.34	1988	37.33

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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
37.35	1997	37.33
<b>37.41, 37.49</b>	<b>2005</b>	<b>37.99</b>
37.51	2003	37.5
37.52	2003	37.62
37.53, 37.54	2003	37.63
37.65, 37.66	1995	37.62
37.67	1998	37.4
37.68	2004	37.62
37.70 (Leads only)	1987	37.70 (Leads/device)
37.71-37.72 (Leads only)	1987	37.74 (Leads/device)
37.73 (Leads only)	1987	37.73 (Leads/device)
37.74 (Leads only)	1987	37.76 (Leads/device)
37.75 (Leads only)	1987	37.89 (Leads/device)
37.76 (Leads only)	1987	37.81 (Leads/device)
37.77 (Leads only)	1987	37.83-37.84 (Leads/device)
37.78	1987	37.71-37.72
37.79	1987	86.09
37.80-37.87	1992	89.49 (Code deleted; this procedure is included in the code for pacemaker insertion/replacement)
37.80-37.83 (Device only)	1987	37.73-37.77 (Leads/device)
37.85-37.87	1987	37.85
37.89	1987	37.86 + 37.89
37.90	2004	37.99
37.94-37.98	1986	37.99
38.22	1986	38.29
38.44 (Abdominal aorta only)	1986	38.44 (Entire aorta)
38.45 (Thoracic aorta added)	1989	38.44-38.45
38.95	1989	38.93
39.28	1991	39.29
39.50	1995	39.59
39.65	1988	39.61
39.66	1990	39.65
39.71, 39.79	2000	39.52
39.72	2002	39.79
<b>39.73</b>	<b>2005</b>	<b>39.79</b>
39.90	1996	39.50
41.00-41.03	1988	41.0
41.04	1994	99.79
41.05, 41.06	1997	None
41.07	2000	41.04
41.08	2000	41.05
41.09	2000	41.01
42.25	1988	42.24



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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
42.33	1989	42.32, 42.39
42.33	1990	42.91
43.11	1989	43.1
43.19	1989	43.1, 43.2
43.41	1989	43.41, 43.49
44.21, 44.29	1986	44.2
44.22	1986	44.99
44.32	2001	44.39
44.38	2004	44.39
44.43	1989	43.49, 45.32
44.44	1989	38.86
44.49	1989	43.0
44.67	2004	44.66
44.68	2004	44.69
44.93-44.94	1986	44.99
44.95, 44.96	2004	44.69
44.97, 44.98	2004	44.99
45.16	1988	45.14 (45.15 before 1987)
45.30	1989	45.31, 45.32
45.42	1988	45.41
45.43	1989	45.49
45.75	1988	48.66 (Code deleted; Hartmann resection added)
45.95	1987	45.93
46.13	1992	46.12 (Code deleted)
46.32	1989	46.39
46.85	1989	46.99
46.97	2000	46.99
47.01, 47.09	1996	47.0
47.11, 47.19	1996	47.1
48.36	1995	45.42
49.31, 49.39	1989	49.3
49.75, 49.76	2002	49.79
51.10	1989	51.97
51.11	1989	51.11, 51.97
51.14	1989	51.12
51.15	1989	51.97
51.21	1996	51.22, 51.23
51.22	1991	51.21 (Code deleted), 51.22
51.23	1991	51.22

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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
51.24	1996	51.22, 51.23
51.64	1989	51.69
51.84-51.88	1989	51.97
51.97	1986	52.91, 51.99 or 51.82
51.98	1986	51.99
52.13	1989	51.97, 52.91
52.14	1989	52.11
52.21-52.22	1989	52.2
52.84-52.86	1996	99.29
52.93	1989	52.93 + 52.91
52.94	1989	52.09
52.97, 52.98	1989	52.91
52.99	1989	52.93, 52.94, 52.99
54.24	1987	54.23
54.25	1993	54.98
54.51, 54.59	1996	54.5
55.03-55.04	1986	55.02
56.33-56.34	1987	56.33
56.35	1987	45.12
57.17-57.18	1989	57.21
57.22	1989	57.22, 57.82
58.31, 58.39	1990	58.3
58.93	1986	57.99
59.03	1996	59.02
59.12	1996	59.11
59.72	1995	59.79
59.96	1986	59.95
60.21, 60.29	1995	60.2
60.95	1991	60.99
60.96, 60.97	2000	60.29
64.97	1986	64.95
65.01, 65.09	1996	65.0
65.13	1996	65.12
65.14	1996	65.19
65.23	1996	65.21
65.24	1996	65.22
65.25	1996	65.29

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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
65.31, 65.39	1996	65.3
65.41, 65.49	1996	65.4
65.53	1996	65.51
65.54	1996	65.52
65.63	1996	65.61
65.64	1996	65.62
65.74	1996	65.71
65.75	1996	65.72
65.76	1996	65.73
65.81, 65.89	1996	65.8
66.01	1992	66.0
66.02	1992	66.73
67.51, 67.59	2001	67.5
68.15	1987	68.14
68.16	1987	68.13
68.23	1996	68.29
68.31, 68.39	2003	68.3
68.51, 68.59	1996	68.5
68.9	1992	68.4
74.3	1992	69.11 (Code deleted)
75.37	1998	99.29
75.38	2001	75.34
77.56	1989	77.89, 78.49, 81.18
77.57	1989	77.89, 80.48, 81.18, 83.85
77.58	1989	77.59, 81.18
78.10	1991	78.40
78.11	1991	78.41
78.12	1991	78.42
78.13	1991	78.43
78.14	1991	78.44
78.15	1991	78.45
78.16	1991	78.46
78.17	1991	78.47
78.18	1991	78.48
78.19	1991	78.49
78.20	1991	78.10, 78.20, 78.30
78.21	1991	78.11, 78.31
78.22	1991	78.12, 78.22, 78.32
78.23	1991	78.13, 78.23, 78.33
78.24	1991	78.14, 78.34
78.25	1991	78.15, 78.25, 78.35

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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
78.27	1991	78.17, 78.27, 78.37
78.28	1991	78.18, 78.38
78.29	1991	78.11, 78.16, 78.19, 78.29, 78.39
78.39	1991	78.31
78.90 <sup>2</sup>	1987	78.40
78.91 <sup>2</sup>	1987	78.41
78.92 <sup>2</sup>	1987	78.42
78.93 <sup>2</sup>	1987	78.43
78.94 <sup>2</sup>	1987	78.44
78.95 <sup>2</sup>	1987	78.45
78.96 <sup>2</sup>	1987	78.46
78.97 <sup>2</sup>	1987	78.47
78.98 <sup>2</sup>	1987	78.48
78.99 <sup>2</sup>	1987	78.49
80.50-80.59	1986	80.5
81.03	1989	81.02
81.04-81.05	1989	81.03, 81.04, 81.05
81.06-81.07	1989	81.06, 81.07
81.08	1989	81.06, 81.07, 81.08
81.09	1989	81.08
<b>81.18</b>	<b>2005</b>	<b>81.99</b>
81.30-81.39	2001	81.09
81.40	1989	81.69
81.51	1989	81.51, 81.59
81.52	1989	81.61-81.64
81.53	1989	81.51, 81.59, 81.61-81.64
81.54-81.55	1989	81.41
81.56	1989	81.48
81.57	1989	81.31, 81.39
81.59	1989	81.39
81.61 <sup>3</sup>	2002	81.00-81.08, 81.30-81.39
81.62-81.64	2003	None
81.65, 81.66	2004	78.49
81.72	1989	81.79
81.73-81.74	1989	81.86 (Code deleted)
81.75	1989	81.87 (Code deleted)
81.79	1989	81.79, 81.87
81.80	1989	81.81
81.97	1992	81.59
84.51, 84.52	2002	None
84.53, 84.54	2004	78.30, 78.32-78.35, 78.37-78.39
84.55, 84.59	2004	None
<b>84.56-84.57</b>	<b>2005</b>	<b>None</b>
<b>84.58</b>	<b>2005</b>	<b>84.59</b>

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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
84.60-84.69 <b>84.71-84.73</b>	2004 <b>2005</b>	80.51 <b>None</b>
85.95, 85.96	1987	85.99
86.06	1987	86.09
86.07	1990	86.09
86.27	1986	86.22-86.23
86.28	1988	86.22
86.67	1998	86.65
86.93	1987	86.89
86.94-86.96 <b>86.97</b> <b>86.98</b>	2004 <b>2005</b> <b>2005</b>	02.93, 03.93, 04.92 <b>86.94</b> <b>86.95</b>
88.90	1986	88.39
88.91	1986	89.15
88.92	1986	89.39
88.93	1986	89.15
88.94	1986	89.39
88.95	1986	89.29
88.96	2002	88.91-88.97
88.97	1989	88.99
88.98	1989	88.90
88.99	1986	89.39
89.10, 89.19	1989	89.15
89.17-89.18	1988	89.15
89.49	2004	89.59
89.50	1991	89.54
89.60	2002	89.65
<b>92.20</b>	<b>2005</b>	<b>92.28</b>
92.3	1995	01.59, 04.07, 07.63, 07.68
92.30-92.33, 92.39	1998	92.3
93.90	1988	93.92
94.61-94.69	1989	94.25
96.29	1998	96.39
96.6	1986	96.35
96.70-96.72	1991	93.92 (code deleted)
97.05	1989	51.97
97.44	2001	37.64

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## Changes in ICD-9-CM in procedure codes, 1986-2005

<u>Current code(s) assignment</u>	<u>Effective October 1</u>	<u>Previous code(s) assignment</u>
98.51-98.52, 98.59	1989	59.96 (code deleted)
99.00	1995	99.02
99.10	1998	99.29
99.15	1986	99.29
99.20	1998	99.29
99.28	1994	99.25
99.71-99.79 <sup>4</sup>	1988	99.07
99.75	2000	99.29
99.76	2002	99.79
99.77	2002	None
99.78	2004	99.71
99.85	1987	93.35
99.86	1987	93.39
99.88	1988	99.83

<sup>1</sup>Before October 1986 contents of current code 36.05 would have been assigned to 36.0.

<sup>2</sup>Codes 78.90-78.99 were retitled as "Insertion of bone growth stimulator" in October 1987; the previous contents of codes 78.90-78.99 were reassigned to codes 78.40-78.49.

<sup>3</sup>Code 81.61 was deleted effective 10/01/2005.

<sup>4</sup>Codes 99.71-99.79 were deleted in October 1987; their contents were not transferred elsewhere. In the October 1988 revision, codes 99.71-99.79 were reclassified as "Therapeutic apheresis".

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## APPENDIX C

This appendix provides estimates of the civilian population of the United States as of July 1, 2006. These figures are based on the results of the 2000 Census and were obtained from the U.S. Bureau of the Census, Population Division. All estimates are rounded to thousands.

Three tables are provided:

TABLE 1: Civilian population of the United States, by sex, selected age and racial groups and geographic region

TABLE 2: Civilian population of the United States, by sex, 5-year age groups, and geographic region

TABLE 3: Civilian population of the United States by sex, single-year age groups, and race

In 1997, the Federal Office of Management and Budget (OMB) revised standards that regulated how the Federal government would collect and report data on race and ethnicity in the 2000 Census. In addition to changes in some of the racial categories previously reported, it also permitted respondents to self-identify with more than one racial group. The goal was to improve the accuracy of information on racial diversity in the United States.

The major implication of the new Federal guidelines is that Census 2000 race data are not directly comparable with race data from the 1990 or earlier censuses. A number of new tabulations of racial categories are now available, but the National Hospital Discharge Survey utilizes tabulations based on six race-alone and one multiple race categorization. The six single race-alone groups are White, African-American, American Indian and Alaskan Native, Asian, Native Hawaiian and Other Pacific Islander, and Some Other Race; and the multiple-race category groups together all respondents who identified with two or more races. These categories are mutually exclusive and when summed together add to 100 percent of the US population.

It is not known to what extent these groupings differ from earlier ones where no attempt was made to identify respondents with multi-racial backgrounds. Census cautions that direct comparisons of racial categories from the 1990's to 2000 can not be made, and recommends that the data user decide whether the single race-alone estimate is appropriate for their analysis.

The Census population tables provided in the NHDS data file documentation contain groupings for three primary racial groups: White, Black/African American, and All Other Races. The reason for this is simply that NHDS statistics based on the smaller racial groups (e.g. Asian, American Indian/Alaskan Native, and Native Hawaiian/Other Pacific Islander) often do not meet NCHS standards for reliability of published estimates. Calculating rates with NHDS data by race is complicated by the fact that there is substantial underreporting of race in the survey (28% nonresponse in 2006). Extreme caution should be exercised when using NHDS race data, especially when reporting population-based utilization rates.

The OMB standards discussed above do not apply to how hospitals record patient information in medical records, the source document for the NHDS. As a result, reporting of multiple races in the NHDS is almost non-existent. For the 2006 NHDS, 108 of the 376,000 sample records had more than one race marked and all of these records were from hospitals using the manual data collection method.

# 2006 NHDS DATA FILE DOCUMENTATION

TABLE 1: Civilian population of the United States, by sex, age, race, and geographic region: July 1, 2006. [Source: U.S. Bureau of the Census, Population Division.]

	Estimates in thousands						
	Total	Male	Female	Total	Male	Female	
<b>All ages</b>	298,219	146,511	151,708	<b>15 to 44 years</b>	125,399	63,310	62,089
White	238,862	118,026	120,836	Northeast	22,594	11,308	11,286
Black/AfAm	38,123	18,118	20,005	Midwest	27,466	13,906	13,560
Other	21,234	10,367	10,867	South	45,456	22,795	22,660
				West	29,883	15,301	14,582
Northeast	54,683	26,557	28,126	<b>45 to 64 years</b>	74,805	36,462	38,342
Midwest	66,133	32,539	33,594	45 to 54 years	43,223	21,243	21,980
South	108,410	53,013	55,398	55 to 64 years	31,581	15,219	16,362
West	68,992	34,402	34,590				
<b>Under 15 years</b>	60,755	31,082	29,673	White	62,058	30,589	31,469
Under 1 year	4,130	2,113	2,017	Black/AfAm	8,284	3,775	4,509
1 to 4 years	16,287	8,329	7,959	Other	4,462	2,098	2,364
5 to 14 years	40,337	20,640	19,697				
				Northeast	14,337	6,932	7,405
White	46,314	23,745	22,569	Midwest	16,884	8,294	8,590
Black/AfAm	9,286	4,714	4,572	South	27,013	13,076	13,937
Other	5,155	2,623	2,533	West	16,572	8,161	8,411
				<b>65 years and over</b>	37,261	15,657	21,603
Northeast	10,304	5,270	5,035	65 to 74 years	18,917	8,670	10,247
Midwest	13,310	6,810	6,500	75 to 84 years	13,047	5,298	7,748
South	22,352	11,429	10,923	85 years and over	5,297	1,688	3,609
West	14,789	7,574	7,215				
<b>15 to 44 years</b>	125,399	63,310	62,089	White	32,444	13,730	18,713
15 to 24 years	41,989	21,471	20,519	Black/AfAm	3,168	1,217	1,951
25 to 34 years	40,003	20,215	19,787	Other	1,649	709	939
35 to 44 years	43,407	21,624	21,783				
				Northeast	7,448	3,048	4,400
White	98,046	49,962	48,085	Midwest	8,474	3,529	4,945
Black/AfAm	17,384	8,411	8,973	South	13,590	5,712	7,878
Other	9,968	4,937	5,031	West	7,748	3,367	4,381

\*The NHDS used the civilian noninstitutionalized population to calculate hospital utilization rates from 1965 through 1980. Beginning in 1981, the civilian resident population has been used to calculate rates. If you have NHDS data files for years before 1981 and used the civilian noninstitutionalized population provided in the documentation to calculate rates, these rates will have to be adjusted to be comparable to 2000 rates using the civilian resident population.



# 2006 NHDS DATA FILE DOCUMENTATION

TABLE 2: Civilian population of the United States by sex, age, and geographic region: July 1, 2006.  
Source: U.S. Bureau of the Census, Population Division.

Age	Estimates in thousands														
	UNITED STATES			NORTHEAST			MIDWEST			SOUTH			WEST		
All	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
All	298,219	146,511	151,708	54,683	26,557	28,126	66,133	32,539	33,594	108,410	53,013	55,398	68,992	34,402	34,590
0-4	20,418	10,442	9,976	3,333	1,704	1,629	4,381	2,243	2,138	7,650	3,910	3,741	5,053	2,585	2,468
5-9	19,710	10,077	9,633	3,342	1,708	1,634	4,344	2,219	2,125	7,261	3,712	3,549	4,763	2,439	2,324
10-14	20,627	10,563	10,065	3,629	1,857	1,772	4,585	2,348	2,237	7,441	3,808	3,633	4,973	2,550	2,423
15-19	21,245	10,869	10,376	3,879	1,979	1,900	4,772	2,445	2,327	7,603	3,887	3,716	4,991	2,558	2,433
20-24	20,744	10,602	10,142	3,689	1,870	1,819	4,690	2,399	2,291	7,411	3,766	3,645	4,954	2,567	2,388
25-29	20,463	10,378	10,085	3,368	1,695	1,673	4,452	2,269	2,183	7,572	3,800	3,772	5,071	2,614	2,457
30-34	19,540	9,837	9,703	3,427	1,708	1,719	4,151	2,095	2,056	7,164	3,576	3,588	4,798	2,459	2,339
35-39	21,030	10,514	10,516	3,928	1,939	1,989	4,498	2,257	2,241	7,615	3,778	3,837	4,989	2,540	2,449
40-44	22,377	11,110	11,267	4,303	2,117	2,186	4,904	2,441	2,463	8,091	3,989	4,102	5,079	2,563	2,516
45-49	22,756	11,226	11,530	4,374	2,144	2,230	5,169	2,559	2,609	8,124	3,985	4,139	5,088	2,538	2,551
50-54	20,467	10,017	10,450	3,907	1,903	2,004	4,677	2,311	2,367	7,300	3,542	3,758	4,584	2,261	2,322
55-59	18,220	8,841	9,379	3,498	1,680	1,817	4,094	2,007	2,087	6,613	3,185	3,427	4,016	1,969	2,047
60-64	13,362	6,378	6,984	2,558	1,205	1,353	2,944	1,417	1,527	4,976	2,363	2,613	2,884	1,393	1,491
65-59	10,376	4,839	5,537	1,972	908	1,064	2,311	1,084	1,228	3,890	1,804	2,087	2,202	1,043	1,159
70-74	8,541	3,831	4,710	1,665	736	929	1,909	857	1,052	3,182	1,419	1,763	1,785	819	966
75-79	7,381	3,119	4,262	1,500	621	880	1,680	708	972	2,681	1,129	1,552	1,519	662	858
80-84	5,666	2,179	3,486	1,177	438	739	1,307	497	810	2,009	772	1,237	1,172	472	701
85+	5,297	1,688	3,609	1,133	345	788	1,266	384	882	1,827	588	1,239	1,070	371	699
0-14	60,755	31,082	29,673	10,304	5,270	5,035	13,310	6,810	6,500	22,352	11,429	10,923	14,789	7,574	7,215
15-44	125,399	63,310	62,089	22,594	11,308	11,286	27,466	13,906	13,560	45,456	22,795	22,660	29,883	15,301	14,582
45-64	74,804	36,462	38,342	14,337	6,932	7,405	16,884	8,294	8,590	27,013	13,076	13,937	16,572	8,161	8,411
15+	237,464	115,429	122,035	44,379	21,288	23,091	52,824	25,729	27,094	86,058	41,584	44,475	54,203	26,828	27,375
45+	112,065	52,119	59,946	21,785	9,980	11,805	25,358	11,823	13,534	40,603	18,788	21,814	24,320	11,527	12,792
65+	37,260	15,657	21,603	7,448	3,048	4,400	8,474	3,529	4,945	13,590	5,712	7,878	7,748	3,367	4,381
75+	18,344	6,987	11,357	3,811	1,404	2,407	4,253	1,589	2,665	6,518	2,489	4,028	3,762	1,505	2,257

# 2006 NHDS DATA FILE DOCUMENTATION

TABLE 3: Civilian Population of the United States by sex, age, and race: July 1, 2006.  
[Source: U.S. Bureau of the Census, Population Division.]

	Estimates in thousands											
	ALL RACES			WHITE			BLACK			OTHER		
	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
<b>ALL AGES</b>	298,219	146,511	151,708	238,862	118,026	120,836	38,123	18,118	20,005	21,234	10,367	10,867
0-4	20,418	10,442	9,976	15,549	7,962	7,587	3,073	1,561	1,512	1,795	918	877
0	4,130	2,113	2,017	3,131	1,603	1,528	628	320	308	371	190	181
1	4,108	2,101	2,007	3,111	1,593	1,518	629	320	309	368	188	180
2	4,104	2,099	2,005	3,129	1,603	1,526	612	311	301	363	186	177
3	4,054	2,074	1,980	3,101	1,589	1,513	599	304	295	353	181	172
4	4,022	2,055	1,967	3,077	1,575	1,501	605	306	299	340	173	167
5-9	19,710	10,077	9,633	15,044	7,713	7,331	2,967	1,505	1,461	1,699	859	840
5	4,080	2,084	1,996	3,117	1,595	1,521	621	315	306	342	174	168
6	3,928	2,010	1,917	2,999	1,539	1,460	588	298	290	341	173	168
7	3,885	1,986	1,899	2,965	1,521	1,444	579	294	285	341	172	169
8	3,896	1,993	1,903	2,969	1,523	1,446	588	299	289	339	171	168
9	3,922	2,004	1,918	2,994	1,534	1,460	591	300	291	337	170	167
10-14	20,627	10,563	10,065	15,721	8,070	7,651	3,246	1,647	1,599	1,660	845	815
10	4,005	2,050	1,956	3,063	1,572	1,491	604	306	297	339	171	167
11	4,070	2,085	1,985	3,106	1,595	1,511	631	320	310	333	169	164
12	4,104	2,102	2,003	3,122	1,603	1,520	652	330	321	330	169	162
13	4,188	2,147	2,041	3,184	1,636	1,548	676	344	332	329	168	161
14	4,260	2,180	2,080	3,246	1,665	1,581	684	347	338	330	168	161
15-19	21,245	10,869	10,376	16,298	8,359	7,938	3,345	1,691	1,653	1,603	819	784
15	4,328	2,217	2,111	3,303	1,695	1,608	697	354	343	328	168	161
16	4,406	2,259	2,147	3,366	1,730	1,636	710	360	350	331	169	161
17	4,244	2,175	2,069	3,251	1,670	1,581	672	341	331	322	165	157
18	4,167	2,131	2,036	3,208	1,645	1,563	644	325	319	315	160	154
19	4,100	2,088	2,013	3,171	1,620	1,551	622	312	310	307	156	151
20-24	20,744	10,602	10,142	16,119	8,279	7,840	3,029	1,518	1,511	1,596	805	791
20	4,124	2,101	2,023	3,197	1,634	1,563	616	309	307	311	158	153
21	4,151	2,117	2,034	3,226	1,652	1,574	611	307	305	313	158	155
22	4,085	2,089	1,995	3,173	1,630	1,542	597	300	297	316	159	157
23	4,169	2,140	2,030	3,245	1,674	1,571	601	303	299	323	163	160
24	4,215	2,155	2,060	3,278	1,688	1,590	604	300	304	333	167	166
25-29	20,463	10,378	10,085	15,907	8,158	7,749	2,854	1,379	1,474	1,702	841	862
25	4,270	2,166	2,104	3,321	1,699	1,622	606	296	310	343	171	172
26	4,264	2,162	2,102	3,310	1,695	1,615	608	296	312	345	171	175
27	4,065	2,064	2,002	3,156	1,621	1,535	570	275	295	339	168	171
28	3,957	2,008	1,949	3,082	1,584	1,498	540	260	280	335	165	170
29	3,907	1,978	1,928	3,038	1,559	1,478	529	252	277	340	167	173
30-34	19,540	9,837	9,703	15,154	7,736	7,419	2,593	1,223	1,370	1,793	879	914
30	3,814	1,929	1,884	2,959	1,518	1,441	509	241	267	346	170	176
31	3,925	1,982	1,943	3,046	1,560	1,486	519	245	274	360	177	184
32	3,812	1,919	1,893	2,952	1,507	1,446	502	236	266	357	175	182
33	3,902	1,958	1,944	3,016	1,534	1,482	522	246	276	364	178	185
34	4,087	2,050	2,038	3,181	1,617	1,564	541	254	287	365	179	187

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	ALL RACES			WHITE			BLACK			OTHER		
	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
35-39	21,030	10,514	10,516	16,620	8,416	8,204	2,709	1,268	1,441	1,701	830	871
35	4,313	2,155	2,158	3,387	1,714	1,673	564	263	301	363	178	185
36	4,397	2,208	2,189	3,465	1,763	1,702	568	267	301	364	178	186
37	4,154	2,079	2,075	3,290	1,667	1,623	524	246	278	340	166	174
38	4,077	2,036	2,041	3,224	1,631	1,593	527	247	281	326	159	167
39	4,089	2,036	2,053	3,255	1,641	1,614	526	245	280	309	150	159
40-44	22,377	11,110	11,267	17,949	9,014	8,935	2,856	1,332	1,524	1,573	764	809
40	4,207	2,097	2,109	3,341	1,686	1,655	553	259	294	313	153	161
41	4,495	2,241	2,254	3,584	1,808	1,776	588	275	313	323	158	165
42	4,563	2,263	2,300	3,662	1,838	1,825	580	270	310	321	155	165
43	4,549	2,250	2,299	3,662	1,832	1,831	570	265	305	316	153	163
44	4,564	2,259	2,305	3,699	1,851	1,848	565	263	302	300	145	155
45-49	22,756	11,226	11,530	18,539	9,250	9,289	2,773	1,288	1,485	1,444	688	755
45	4,611	2,276	2,335	3,752	1,873	1,879	565	262	303	295	141	154
46	4,693	2,327	2,367	3,799	1,905	1,894	588	275	313	306	147	160
47	4,501	2,219	2,282	3,666	1,828	1,838	550	255	295	285	135	149
48	4,502	2,220	2,283	3,680	1,833	1,847	539	251	288	284	136	148
49	4,448	2,186	2,263	3,643	1,810	1,833	531	245	285	274	130	144
50-54	20,467	10,017	10,450	16,877	8,358	8,519	2,335	1,069	1,266	1,255	589	666
50	4,275	2,097	2,178	3,502	1,739	1,763	504	232	272	268	126	143
51	4,293	2,111	2,181	3,522	1,753	1,769	503	232	271	268	127	141
52	4,104	2,006	2,098	3,386	1,675	1,711	468	214	254	250	117	133
53	3,965	1,934	2,031	3,285	1,621	1,664	440	201	239	240	113	128
54	3,830	1,868	1,962	3,182	1,572	1,611	420	190	230	228	107	122
55-59	18,220	8,841	9,379	15,271	7,495	7,776	1,902	859	1,042	1,047	487	560
55	3,728	1,812	1,915	3,092	1,522	1,570	416	188	227	220	102	118
56	3,711	1,806	1,905	3,066	1,510	1,555	416	189	227	229	107	122
57	3,561	1,726	1,835	2,973	1,458	1,515	378	171	208	209	97	112
58	3,525	1,707	1,818	2,971	1,454	1,517	355	160	195	199	92	106
59	3,695	1,790	1,905	3,170	1,551	1,619	336	151	185	189	88	101
60-64	13,362	6,378	6,984	11,371	5,486	5,885	1,274	558	716	717	334	383
60	2,748	1,321	1,427	2,317	1,127	1,190	272	120	152	158	74	84
61	2,733	1,311	1,422	2,309	1,120	1,189	271	120	151	153	71	82
62	2,682	1,280	1,402	2,285	1,102	1,184	254	112	142	143	67	76
63	2,768	1,317	1,451	2,381	1,144	1,236	251	109	142	135	63	72
64	2,432	1,149	1,283	2,078	993	1,085	226	97	129	127	59	68
65-69	10,376	4,839	5,537	8,839	4,165	4,675	992	421	571	544	253	291
65	2,249	1,057	1,191	1,914	910	1,004	215	92	123	120	56	64
66	2,177	1,020	1,157	1,844	873	971	216	92	124	118	55	63
67	2,059	963	1,097	1,759	830	929	193	82	111	107	50	57
68	2,010	933	1,077	1,716	805	912	190	80	110	103	48	56
69	1,880	866	1,014	1,606	747	859	178	75	103	96	44	52
70-74	8,541	3,831	4,710	7,339	3,329	4,010	789	321	468	413	181	232
70	1,833	837	996	1,566	723	843	175	73	102	92	41	51
71	1,822	825	996	1,559	714	846	173	72	101	89	40	50
72	1,650	740	910	1,415	642	773	154	63	91	81	36	45
73	1,637	726	911	1,409	633	776	149	60	90	78	34	45
74	1,600	703	897	1,390	618	772	138	54	83	72	31	41

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	ALL RACES			WHITE			BLACK			OTHER		
	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
75-79	7,381	3,119	4,262	6,481	2,770	3,711	590	221	369	310	129	181
75	1,566	680	886	1,370	602	768	127	49	78	69	29	40
76	1,569	672	897	1,369	593	776	131	50	81	69	29	40
77	1,455	615	840	1,278	547	732	116	43	73	61	25	36
78	1,427	594	834	1,259	530	729	111	40	70	58	24	34
79	1,363	558	805	1,205	498	707	105	38	67	53	22	32
80-84	5,666	2,179	3,486	5,041	1,951	3,089	417	144	273	208	84	124
80	1,279	511	768	1,131	456	675	99	35	64	49	19	30
81	1,237	483	754	1,097	432	665	94	32	61	46	19	28
82	1,142	437	706	1,019	391	627	82	28	54	41	17	25
83	1,039	392	647	927	351	575	75	25	50	37	15	22
84	968	357	611	867	321	546	68	23	45	34	14	20
85-89	3,341	1,149	2,193	3,001	1,035	1,965	231	72	159	110	42	69
85	877	316	561	790	286	504	58	19	39	29	11	18
86	784	274	510	699	246	454	58	18	39	27	10	17
87	631	214	417	565	192	373	44	14	31	21	8	13
88	577	192	384	521	175	346	38	11	27	18	7	11
89	474	152	321	426	137	289	32	9	23	15	6	10
90-94	1,457	424	1,033	1,306	380	926	105	28	77	46	16	31
90	405	125	280	365	113	253	27	8	19	13	4	9
91	350	105	245	314	94	220	25	7	18	11	4	7
92	287	82	205	257	74	183	21	6	16	9	3	6
93	232	64	169	207	57	150	18	4	13	7	2	5
94	182	48	133	162	43	119	14	4	10	6	2	4
95-99	425	101	324	375	88	287	36	9	28	14	5	9
95	142	35	107	126	31	95	12	3	9	5	2	3
96	108	26	82	95	23	72	10	2	7	3	1	2
97	76	17	59	67	15	52	6	1	5	2	1	2
98	60	13	46	53	12	41	5	1	4	2	1	1
99	39	8	31	34	7	27	4	1	3	1	0	1
100+	74	14	59	62	12	50	9	2	7	3	1	2
0 to 14	60,755	31,082	29,673	46,314	23,745	22,569	9,286	4,714	4,572	5,155	2,623	2,533
15 to 44	125,399	63,310	62,089	98,046	49,962	48,085	17,384	8,411	8,973	9,968	4,937	5,031
45 to 64	74,804	36,462	38,342	62,058	30,589	31,469	8,284	3,775	4,509	4,462	2,098	2,364
15+	237,464	115,429	122,035	192,548	94,281	98,267	28,837	13,404	15,433	16,079	7,745	8,334
45+	112,065	52,119	59,946	94,502	44,319	50,183	11,452	4,992	6,460	6,111	2,808	3,303
65+	37,260	15,657	21,603	32,444	13,730	18,713	3,168	1,217	1,951	1,649	709	939
75+	18,344	6,987	11,357	16,265	6,236	10,028	1,387	475	912	692	275	416
85+	5,297	1,688	3,609	4,743	1,515	3,228	380	110	270	174	63	111

# 2006 NHDS DATA FILE DOCUMENTATION

## APPENDIX D

### UNWEIGHTED FREQUENCIES FOR SELECTED VARIABLES

	NEWBORN INFANTS	NON-NEWBORNS	TOTAL SAMPLE
<b>SURVEY YEAR</b>			
2006	40,026	336,302	376,328
<b>UNITS</b>			
YEARS	.	328,806	328,806
MONTHS	.	4,890	4,890
DAYS	40,026	2,606	42,632
<b>AGE</b>			
U15 YEARS	40,026	24,120	64,146
15-44 YEARS	.	104,105	104,105
45-64 YEARS	.	84,486	84,486
65 YEARS &UP	.	123,591	123,591
<b>SEX</b>			
MALE	20,487	134,190	154,677
FEMALE	19,539	202,112	221,651
<b>RACE</b>			
WHITE	19,797	180,571	200,368
BLACK/AFRICAN AMERICAN	4,606	46,589	51,195
AMERICAN INDIAN//ALASKAN NATIVE	154	871	1,025
ASIAN	574	2,444	3,018
NATIVE HAWAIIAN/OTH PACIFIC ISLANDER	61	344	405
OTHER	2,582	12,740	15,322
MULTIPLE RACE	27	81	108
NOT STATED	12,225	92,662	104,887
<b>MARITAL STATUS</b>			
MARRIED	.	55,046	55,046
SINGLE	40,026	38,678	78,704
WIDOWED	.	18,224	18,224
DIVORCED	.	8,622	8,622
SEPARATED	.	1,565	1,565
NOT STATED	.	214,167	214,167
<b>DISCHARGE STATUS</b>			
ROUTINE	38,990	261,403	300,393
LEFT AGAINST MEDICAL ADVICE	11	3,534	3,545
SHORT-TERM TRANSFER	466	9,068	9,534
LONG-TERM TRANSFER	28	31,979	32,007
ALIVE, OTHER	296	20,648	20,944
DEAD	128	7,208	7,336
NOT STATED	107	2,462	2,569
<b>LOSFLAG</b>			
LESS THAN 1 DAY	333	6,027	6,360
ONE DAY OR MORE	39,693	330,275	369,968

# 2006 NHDS DATA FILE DOCUMENTATION

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## NEWBORN INFANTS NON-NEWBORNS TOTAL SAMPLE

<b>REGION</b>			
NORTHEAST	8,257	81,935	90,192
MIDWEST	9,470	88,186	97,656
SOUTH	14,922	126,917	141,839
WEST	7,377	39,264	46,641
<b>BEDSIZE</b>			
6-99	3,140	37,949	41,089
100-199	9,418	76,298	85,716
200-299	9,032	73,379	82,411
300-499	13,631	106,272	119,903
500&UP	4,805	42,404	47,209
<b>OWNERSHIP</b>			
PROPRIETARY	4,508	34,361	38,869
GOVERNMENT	3,243	28,809	32,052
NOT FOR PROFIT	32,275	273,132	305,407
<b>PRINCIPAL EXPECTED SOURCE OF PAYMENT</b>			
WORKER'S COMPENSATION	.	1,486	1,486
MEDICARE	2	130,883	130,885
MEDICAID	14,359	54,562	68,921
OTHER GOVERNMENT PAYMENT	347	4,026	4,373
BLUE CROSS/BLUE SHIELD	5,704	32,989	38,693
HMO/PPO	10,961	51,771	62,732
OTHER PRIVATE/COMMERCIAL INSUR	4,702	30,024	34,726
SELF PAY	1,554	14,354	15,908
NO CHARGE	21	2,034	2,055
OTHER	1,681	10,270	11,951
SOURCE NOT STATED	695	3,903	4,598
<b>DISCHARGE MONTH</b>			
JANUARY	3,213	28,130	31,343
FEBRUARY	3,008	27,164	30,172
MARCH	3,359	30,421	33,780
APRIL	3,154	27,578	30,732
MAY	3,230	28,438	31,668
JUNE	3,394	28,264	31,658
JULY	3,572	27,965	31,537
AUGUST	3,584	28,739	32,323
SEPTEMBER	3,579	27,836	31,415
OCTOBER	3,414	27,384	30,798
NOVEMBER	3,191	26,683	29,874
DECEMBER	3,328	27,700	31,028
<b>TYPE OF ADMISSION</b>			
EMERGENCY	.	164,603	164,603
URGENT	.	67,899	67,899
ELECTIVE	.	82,727	82,727
NEWBORN	40,026	.	40,026
NOT STATED	.	21,073	21,073

## 2006 NHDS DATA FILE DOCUMENTATION

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	<b>NEWBORN INFANTS</b>	<b>NON-NEWBORNS</b>	<b>TOTAL SAMPLE</b>
<b>SOURCE OF ADMISSION</b>			
PHYSICIAN REFERRAL	.	112,964	112,964
CLINICAL REFERRAL	.	5,101	5,101
HMO REFERRAL	.	1,731	1,731
TRANSFER FROM HOSPITAL	.	10,728	10,728
TRANSFER FROM SNF	.	1,819	1,819
TRANSFER FROM OTHER	.	2,448	2,448
EMERGENCY ROOM	.	156,902	156,902
COURT/LAW ENFORCEMENT	.	747	747
OTHER	40,026	3,299	43,325
NOT AVAILABLE	.	40,563	40,563
<b>FIRST-LISTED DIAGNOSIS ICD-9-CM CHAPTER</b>			
CHAPTER 01	.	11,228	11,228
CHAPTER 02	.	16,425	16,425
CHAPTER 03	.	16,104	16,104
CHAPTER 04	.	4,559	4,559
CHAPTER 05	.	23,572	23,572
CHAPTER 06	.	6,306	6,306
CHAPTER 07	.	61,065	61,065
CHAPTER 08	.	32,552	32,552
CHAPTER 09	.	33,707	33,707
CHAPTER 10	.	18,483	18,483
CHAPTER 11	.	4,815	4,815
CHAPTER 12	.	7,409	7,409
CHAPTER 13	.	19,133	19,133
CHAPTER 14	.	2,096	2,096
CHAPTER 15	.	1,999	1,999
CHAPTER 16	.	1,446	1,446
CHAPTER 17	.	27,249	27,249
V-CODES	40,026	48,154	88,180

# 2006 NHDS DATA FILE DOCUMENTATION

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## WEIGHTED FREQUENCIES FOR SELECTED VARIABLES

	NEWBORN INFANTS	NON-NEWBORNS	TOTAL SAMPLE
<b>SURVEY YEAR</b>			
2006	4,019,881	34,853,896	38,873,777
<b>UNITS</b>			
YEARS	.	34,102,855	34,102,855
MONTHS	.	495,740	495,740
DAYS	4,019,881	255,301	4,275,182
<b>AGE</b>			
U15 YEARS	4,019,881	2,297,691	6,317,572
15-44 YEARS	.	10,799,738	10,799,738
45-64 YEARS	.	8,685,968	8,685,968
65 YEARS &UP	.	13,070,499	13,070,499
<b>SEX</b>			
MALE	2,040,679	13,990,227	16,030,906
FEMALE	1,979,202	20,863,669	22,842,871
<b>RACE</b>			
WHITE	2,209,270	20,906,742	23,116,012
BLACK/AFRICAN AMERICAN	445,061	4,240,877	4,685,938
AMERICAN INDIAN//ALASKAN NATIVE	15,609	103,303	118,912
ASIAN	113,306	536,298	649,604
NATIVE HAWAIIAN/OTH PACIFIC ISLANDER	11,880	83,163	95,043
OTHER	115,653	595,369	711,022
MULTIPLE RACE	7,871	25,505	33,376
NOT STATED	1,101,231	8,362,639	9,463,870
<b>MARITAL STATUS</b>			
MARRIED	.	9,336,056	9,336,056
SINGLE	4,019,881	6,911,481	10,931,362
WIDOWED	.	3,083,076	3,083,076
DIVORCED	.	1,471,056	1,471,056
SEPARATED	.	234,303	234,303
NOT STATED	.	13,817,924	13,817,924
<b>DISCHARGE STATUS</b>			
ROUTINE	3,830,879	26,906,047	30,736,926
LEFT AGAINST MEDICAL ADVICE	1,580	330,586	332,166
SHORT-TERM TRANSFER	60,773	1,534,890	1,595,663
LONG-TERM TRANSFER	4,051	3,160,539	3,164,590
ALIVE, OTHER	46,041	1,678,076	1,724,117
DEAD	13,227	730,248	743,475
NOT STATED	63,330	513,510	576,840
<b>LOSFLAG</b>			
LESS THAN 1 DAY	45,690	709,318	755,008
ONE DAY OR MORE	3,974,191	34,144,578	38,118,769



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	NEWBORN INFANTS	NON-NEWBORNS	TOTAL SAMPLE
<b>REGION</b>			
NORTHEAST	722,066	7,276,715	7,998,781
MIDWEST	833,077	7,951,159	8,784,236
SOUTH	1,464,410	13,139,572	14,603,982
WEST	1,000,328	6,486,450	7,486,778
<b>BEDSIZE</b>			
6-99	731,241	7,996,671	8,727,912
100-199	863,485	7,307,986	8,171,471
200-299	755,635	6,719,406	7,475,041
300-499	1,089,184	8,052,712	9,141,896
500&UP	580,336	4,777,121	5,357,457
<b>OWNERSHIP</b>			
PROPRIETARY	572,997	4,106,525	4,679,522
GOVERNMENT	483,386	4,278,952	4,762,338
NOT FOR PROFIT	2,963,498	26,468,419	29,431,917
<b>PRINCIPAL EXPECTED SOURCE OF PAYMENT</b>			
WORKER'S COMPENSATION	.	157,957	157,957
MEDICARE	542	13,523,208	13,523,750
MEDICAID	1,614,026	5,912,678	7,526,704
OTHER GOVERNMENT PAY	48,294	568,479	616,773
BLUE CROSS/BLUE SHIELD	536,705	3,233,300	3,770,005
HMO/PPO	936,496	4,865,957	5,802,453
OTHER PRIVATE/COMMERCIAL			
INS	472,695	3,261,174	3,733,869
SELF PAY	186,189	1,626,716	1,812,905
NO CHARGE	3,142	176,205	179,347
OTHER	155,731	969,930	1,125,661
SOURCE NOT STATED	66,061	558,292	624,353
<b>DISCHARGE MONTH</b>			
JANUARY	331,927	2,994,453	3,326,380
FEBRUARY	306,167	2,821,826	3,127,993
MARCH	346,096	3,129,651	3,475,747
APRIL	306,511	2,882,716	3,189,227
MAY	322,230	3,006,885	3,329,115
JUNE	336,701	2,956,064	3,292,765
JULY	353,632	2,887,357	3,240,989
AUGUST	355,668	2,986,365	3,342,033
SEPTEMBER	361,567	2,860,188	3,221,755
OCTOBER	347,758	2,781,984	3,129,742
NOVEMBER	325,649	2,742,428	3,068,077
DECEMBER	325,975	2,803,979	3,129,954
<b>TYPE OF ADMISSION</b>			
EMERGENCY	.	14,781,383	14,781,383
URGENT	.	8,499,636	8,499,636
ELECTIVE	.	8,382,888	8,382,888
NEWBORN	4,019,881	.	4,019,881
NOT STATED	.	3,189,989	3,189,989

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<b>SOURCE OF ADMISSION</b>	<b>NEWBORN INFANTS</b>	<b>NON-NEWBORNS</b>	<b>TOTAL SAMPLE</b>
PHYSICIAN REFERRAL	.	12,728,421	12,728,421
CLINICAL REFERRAL	.	861,246	861,246
HMO REFERRAL	.	169,737	169,737
TRANSFER FROM HOSPITAL	.	1,069,107	1,069,107
TRANSFER FROM SNF	.	218,427	218,427
TRANSFER FROM OTHER	.	210,381	210,381
EMERGENCY ROOM	.	14,921,494	14,921,494
COURT/LAW ENFORCEMENT	.	102,001	102,001
OTHER	4,019,881	511,666	4,531,547
NOT AVAILABLE	.	4,061,416	4,061,416
<b>FIRST-LISTED DIAGNOSIS BY ICD-9-CM CHAPTER</b>			
CHAPTER 01	.	1,087,933	1,087,933
CHAPTER 02	.	1,640,988	1,640,988
CHAPTER 03	.	1,663,055	1,663,055
CHAPTER 04	.	450,838	450,838
CHAPTER 05	.	2,419,330	2,419,330
CHAPTER 06	.	614,541	614,541
CHAPTER 07	.	6,161,089	6,161,089
CHAPTER 08	.	3,485,258	3,485,258
CHAPTER 09	.	3,517,279	3,517,279
CHAPTER 10	.	1,973,985	1,973,985
CHAPTER 11	.	519,495	519,495
CHAPTER 12	.	780,470	780,470
CHAPTER 13	.	1,968,715	1,968,715
CHAPTER 14	.	192,665	192,665
CHAPTER 15	.	200,431	200,431
CHAPTER 16	.	188,554	188,554
CHAPTER 17	.	2,967,647	2,967,647
V-CODES	4,019,881	5,021,623	9,041,504

# 2006 NHDS DATA FILE DOCUMENTATION

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## UNWEIGHTED FREQUENCIES FOR ALL-LISTED DIAGNOSES BY ICD-9-CM CHAPTERS

	NEWBORN INFANTS	NON-NEWBORNS	TOTAL SAMPLE
ALL DIAGNOSES	100,902	1,763,996	1,864,898
CHAPTER 01	91	42,089	42,180
CHAPTER 02	154	45,235	45,389
CHAPTER 03	380	202,693	203,073
CHAPTER 04	64	50,696	50,760
CHAPTER 05	13	130,336	130,349
CHAPTER 06	141	41,705	41,846
CHAPTER 07	168	349,600	349,768
CHAPTER 08	114	120,991	121,105
CHAPTER 09	335	109,509	109,844
CHAPTER 10	291	99,805	100,096
CHAPTER 11		106,494	106,494
CHAPTER 12	332	27,454	27,786
CHAPTER 13	193	65,757	65,950
CHAPTER 14	3,318	8,237	11,555
CHAPTER 15	33,841	6,678	40,519
CHAPTER 16	1,085	100,200	101,285
CHAPTER 17	101	68,105	68,206
ECODES	65	29,822	29,887
VCODES	60,216	158,590	218,806

## WEIGHTED FREQUENCIES FOR ALL-LISTED DIAGNOSES BY ICD-9-CM CHAPTERS

ALL DIAGNOSES	9,781,215	178,753,357	188,534,572
CHAPTER 01	11,383	4,364,256	4,375,639
CHAPTER 02	15,419	4,494,783	4,510,202
CHAPTER 03	42,244	20,812,302	20,854,546
CHAPTER 04	10,274	5,189,224	5,199,498
CHAPTER 05	1,606	13,115,482	13,117,088
CHAPTER 06	12,101	4,336,885	4,348,986
CHAPTER 07	22,051	35,396,451	35,418,502
CHAPTER 08	11,042	12,209,203	12,220,245
CHAPTER 09	33,324	11,233,454	11,266,778
CHAPTER 10	31,529	10,007,478	10,039,007
CHAPTER 11		10,601,557	10,601,557
CHAPTER 12	29,740	2,724,623	2,754,363
CHAPTER 13	21,229	7,089,637	7,110,866
CHAPTER 14	347,148	758,106	1,105,254
CHAPTER 15	3,237,275	646,006	3,883,281
CHAPTER 16	106,797	8,917,863	9,024,660
CHAPTER 17	13,573	7,416,226	7,429,799
ECODES	9,431	4,231,011	4,240,442
VCODES	5,825,049	15,208,810	21,033,859

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## WEIGHTED FREQUENCIES FOR ALL-LISTED PROCEDURES BY ICD-9-CM CHAPTERS

	NEWBORN INFANTS	NON-NEWBORNS	TOTAL SAMPLE
ALL PROCEDURES	3,453,415	45,963,407	49,416,822
CHAPTER 00*	1,984	2,001,448	2,003,432
CHAPTER 01	19,553	1,155,460	1,175,013
CHAPTER 02	741	101,233	101,974
CHAPTER 03	969	76,390	77,359
CHAPTER 04	472	53,427	53,899
CHAPTER 05	3,669	298,342	302,011
CHAPTER 06	12,621	1,166,708	1,179,329
CHAPTER 07	139,124	6,490,597	6,629,721
CHAPTER 08	1,138	370,881	372,019
CHAPTER 09	18,011	5,571,462	5,589,473
CHAPTER 10	1,365	1,025,228	1,026,593
CHAPTER 11	1,145,849	250,091	1,395,940
CHAPTER 12	39	1,956,707	1,956,746
CHAPTER 13	.	7,075,820	7,075,820
CHAPTER 14	2,187	4,187,678	4,189,865
CHAPTER 15	10,045	1,597,504	1,607,549
CHAPTER 16	2,095,648	12,584,431	14,680,079

## UNWEIGHTED FREQUENCIES FOR ALL-LISTED PROCEDURES BY ICD-9-CM CHAPTERS

ALL PROCEDURES	35,318	471,761	507,079
CHAPTER 00*	14	20,049	20,063
CHAPTER 01	210	12,364	12,574
CHAPTER 02	1	1,067	1,068
CHAPTER 03	9	788	797
CHAPTER 04	6	549	555
CHAPTER 05	44	2,787	2,831
CHAPTER 06	103	12,133	12,236
CHAPTER 07	1,222	67,786	69,008
CHAPTER 08	2	3,726	3,728
CHAPTER 09	168	56,960	57,128
CHAPTER 10	10	10,668	10,678
CHAPTER 11	12,383	2,272	14,655
CHAPTER 12	1	18,231	18,232
CHAPTER 13	.	72,106	72,106
CHAPTER 14	7	41,109	41,116
CHAPTER 15	81	15,005	15,086
CHAPTER 16	21,057	134,161	155,218

\* In 2002, the ICD-9-CM Coordination and Maintenance Committee created procedure Chapter 00 – Procedures and Interventions, Not Elsewhere Classified – as a way of handling space limitations in the existing hierarchical structure and alleviating inappropriate categorization of new procedures. Since October addendum changes are not implemented in the NHDS until the following data collection year, 2003 was the first year these codes were used.

**APPENDIX E**

**NHDS Medical Abstract Form**

Form HDS-1

Notice - All information which would permit identification of an individual or 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 9-9-2005)

U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU ACTING AS COLLECTING AGENT FOR DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR DISEASE CONTROL AND PREVENTION NATIONAL CENTER FOR HEALTH STATISTICS

MEDICAL ABSTRACT - NATIONAL HOSPITAL DISCHARGE SURVEY

A. PATIENT IDENTIFICATION

1. Hospital number, 2. HDS number, 3. (Item deleted), 4. Date of admission, 5. Date of discharge, 6. Residence ZIP Code

B. PATIENT CHARACTERISTICS

7. Date of birth, 8. Age - Complete only if date of birth not given, 9. Sex - Mark (X) one, 10. Ethnicity - Mark (X) one, 11. Race - Mark all that apply, 12. Marital status - Mark (X) one

C. ADMINISTRATIVE INFORMATION

13. Type of Admission - Mark (X) one, 14. Source of Admission - Mark (X) one, 15. Status/Disposition of patient - Mark (X) appropriate box(es), 16. Expected source(s) of payment

(Over)

**D. MEDICAL INFORMATION**

**17. Final Diagnoses (including E-code diagnoses) (Enter ICD-9-CM codes as well as narrative if available)**

Principal: \_\_\_\_\_

Other/additional: \_\_\_\_\_

**18. Surgical and Diagnostic Procedures (Enter ICD-9-CM codes as well as narrative if available)**

Date of procedure(s)

Month		Day		Year		

Principal: \_\_\_\_\_

Other/additional: \_\_\_\_\_

NONE

Completed by

Date