

4C.

## CHARACTERISTICS OF EMERGENCY ROOM VISITS BY DISEASE CATEGORY, DIAGNOSIS GROUP AND AGE GROUP

The data in this section are focused on ambulatory care visits to emergency rooms of non-Federal, short-stay hospitals. The emergency room (ER) and the inpatient hospitalization data are mutually exclusive. The ER data include only those who were not admitted as inpatients.

All emergency room visits are those of the residents of Arizona. Ambulatory care visits to hospital emergency rooms of outof-state residents are not included in this report. Diagnostic groupings and code numbers are based on the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM).

\*Findings of the National Hospital Ambulatory Medical Care Survey, including data on trends in ER utilization, are available in bound reports of the National Center for Health Statistics and online at <a href="http://www.cdc.gov/nchs/ahcd.htm">http://www.cdc.gov/nchs/ahcd.htm</a>

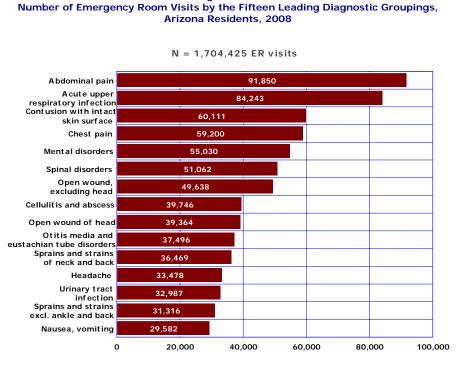


Figure 4C-1

During 2008, more than 1.7 million visits were made by Arizona residents to hospital emergency rooms (ER), about 26 visits per 100 persons. Nationally, the ER utilization rate was 40.5 visits per 100 persons. The utilization rates vary by geographic region, with the West having the lowest ER visit rate (29.4/100 in 2006).\*

In Arizona, the number of ER visits increased by one percent from 1,680,473 in 2007.

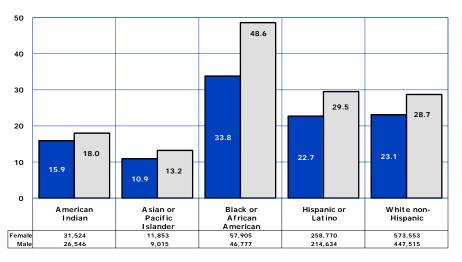
In 2008, abdominal pain, acute upper respiratory infection, contusion with intact skin surface, chest pain, mental disorders, and spinal disorders were the leading diagnostic categories, accounting for approximately one-fourth (23.6 percent) of all visits (Figure 4C-1, Table 4C-2).

Both *headache* (33,478 visits) and *urinary tract infection* (32,987) were among the top fifteen complaints, symptoms, or reasons for a visit to the emergency room.

\*www.cdc.gov/nchs/data/nhsr/nhsr007.pdf

Note: Based on first-listed diagnosis. See Table 4C-2.

Figure 4C-2 Rates<sup>\*</sup> of Emergency Room Visits by Race/Ethnicity and Gender, Arizona, 2008



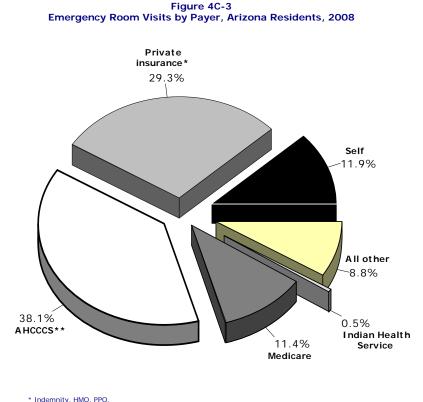
■Male ■Female

Prior to 2008, patient's race/ethnicity was available for hospital inpatients but not emergency room visits

In 2008, the ER utilization rates (the number of ER visits per 100 persons) for Black or African American females and males were the highest rates among the race-by-gender groups (**Figure 4C-2**).

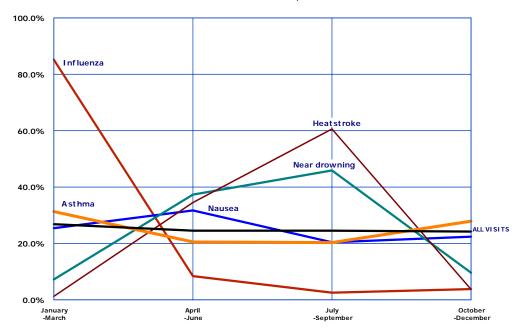
The ER utilization rates for American Indian females and males are likely to be underestimated, because the federal – Indian Health Service hospitals – are not included in the reporting system.

\*Number of visits per 100 persons. The actual number of ER visits for each group is provided below the bars. The denominators are in Table 10C-1. The Arizona Health Care Cost Containment System (AHCCCS, the State's Medicaid program) was the most frequently recorded expected source of payment, accounting for 38.1 percent of ER visits (**Figure 4C-3**). Private insurance was the second most frequent payer (29.3 percent of ER visits), followed by self-pay patients (11.9 percent), and Medicare (11.4 percent).



\*\*The Arizona Health Care Cost Containment System (AHCCCS) is the State's Medicaid Program.





Note: Percent distribution of visits to the emergency room during 2008 by calendar quarter.

Unlike hospital births (Figure 1Bhospital 14) and inpatient excluding admissions newborn infants (Figure 4A-4), the temporal pattern of emergency room visits showed little variation by day of the week, month of the year or calendar quarter. However, seasonal variation was evident in the quarterly volume of visits due to certain patient complaints such as heatstroke (60.6 percent of all visits were made in the 3rd quarter), near drowning (2nd and 3<sup>rd</sup> quarter accounted for 83.2 percent of annual visits), asthma (visits were lowest in the 3rd quarter), nausea (the volume of visits was highest in the second and fourth quarter), and influenza (visits were highest in the first quarter; Figure 4C-4).