

4C.

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

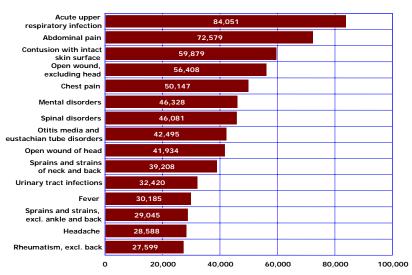
The data in this section are focused on ambulatory care visits to emergency departments of non-Federal, short-stay hospitals. The emergency department (ED) and the inpatient hospitalization data are mutually exclusive. The ED data include only those who were not admitted as inpatients.

All emergency department visits are those of the residents of Arizona. Ambulatory care visits to hospital emergency department of out-of-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 ED utilization, are available in bound reports of the National Center for Health Statistics and online at http://www.cdc.gov/nchs/data/ad/ad372.pdf

Figure 4C-1
Number of Emergency Department Visits by
Fifteen Leading Patient's Complaints,
Arizona Residents, 2005

N = 1,610,060 ED visits



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

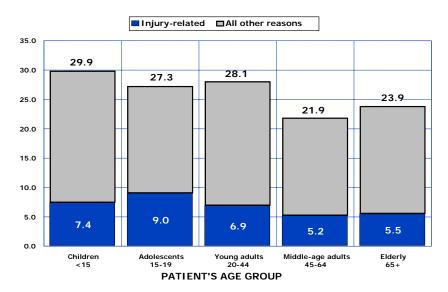
During 2005, more than 1.6 million visits were made by Arizona residents to hospital emergency departments (ED), about 27 visits per 100 persons.

The number of ED visits increased by 153,045 from 1,457,015 in 2004.

In 2005, acute upper respiratory infection, abdominal pain, contusion with intact skin surface, open wound, chest pain, mental disorders and spinal disorders were the leading diagnostic categories, accounting for more than one-fourth (25.8 percent) of all visits (Figure 4C-1, Table 4C-2).

Both *fever* (30,185 visits) and *headache* (28,588) were among the top fifteen complaints, symptoms or reasons for a visit to the emergency room.

Figure 4C-2
Rates* of Emergency Department Visits by Age Group,
Arizona, 2005



*Number of visits per 100 persons

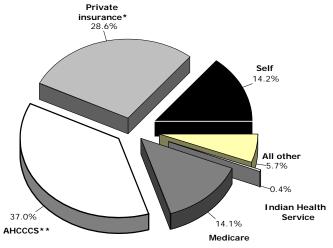
In 2005, the ED utilization rates (the number of ED visits per 100 persons) for children under 15 years of age and young adults aged 20-44 years were the highest rates among the age groups (**Figure 4C-2**).

Injury-related ED visits accounted for 33 percent of all ED visits by adolescents 15-19 years old. Their annual rate of injury-related ED visits was 9.0 visits per 100 adolescents ages 15-19 years (**Figure 4C-2**).

The Arizona Health Care Cost Containment System (AHCCCS) was the most frequently recorded expected source of payment, accounting for 37 percent of ED visits (Figure 4C-3). Private insurance was the second most frequent payer (28.6 percent of ED visits), followed by

Medicare (14.1 percent).

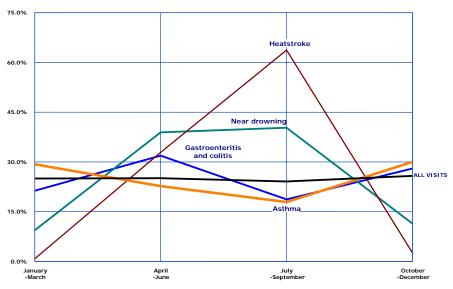




*Indemnity, HMO, PPO.

Unlike hospital births (Figure 1B-14) and hospital inpatient admissions excluding newborn infants (Figure 4A-4), the temporal pattern of emergency department 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* (64 percent of all visits were made in the 3rd quarter), *near drowning* (2nd and 3rd quarter accounted for 80 percent of annual visits), asthma (visits were lowest in the third quarter), gastroenteritis and colitis (the volume of visits was highest in the second and fourth quarter, Figure 4C-4).

Figure 4C-4
Seasonal Variation in Selected Reasons for Visits to the Emergency Department, Arizona Residents, 2005



Note: percent distribution of visits to the emergency department during 2005 by calendar quarter.

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