

## **National Ambulatory Medical Care Survey: 2012 State and National Summary Tables**

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The Ambulatory and Hospital Care Statistics Branch is pleased to release the most current nationally representative data on ambulatory care visits to physician offices in the United States. Statistics are presented on the physician's practice, patient and visit characteristics based on data collected in the 2012 National Ambulatory Medical Care Survey (NAMCS). NAMCS is an annual nationally representative sample survey of visits to nonfederal office-based patient care physicians, excluding anesthesiologists, radiologists, and pathologists. For the first time, visit estimates for the 34 most populous states are included in the summary tables. Visit estimates for the following states are available: Alabama, Arizona, Arkansas, California, Colorado, Connecticut, Florida, Georgia, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, New Jersey, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Utah, Virginia, Washington, and Wisconsin. Estimates for the remaining states are included in Census Division estimates. Four tables presenting state estimates are included for the first time in addition to the tables presenting national estimates.

The sampling frame for the 2012 NAMCS was composed of all physicians contained in the master files maintained by the AMA and AOA. The 2012 NAMCS utilized a two-stage probability design that involved probability samples of physicians within targeted states/Census divisions, and patient visits within practices. Although an additional sample of physicians and non-physician practitioners from community health center (CHC) delivery sites was also selected, CHC estimates are not included in the summary tables. CHC visit estimates will be presented in a separate report.

The 2012 NAMCS sample included 15,740 physicians. A total of 6,166 physicians did not meet all of the criteria and were ruled out of scope (ineligible) for the study. Of the 9,574 in-scope (eligible) physicians, 3,583 completed Patient Record Forms (PRFs) in the study. PRFs were not completed by 750 physicians because they saw no patients during their sample week due to vacations, illness, or other reasons for being temporarily not in practice. Of the 3,583 physicians who completed PRFs, 3,010 participated fully or adequately (i.e., at least half of the PRFs expected, based on the total number of visits during the reporting week, were submitted), and 573 participated minimally (i.e., fewer than half of the expected number of PRFs were submitted). Within physician practices, data are abstracted from medical records for up to 30 sampled visits during a randomly assigned 1-week reporting period. In all, 76,330 PRFs were submitted. The unweighted response rate was 39.3 percent (39.4 percent weighted), based on the number of full participants only. Among the 34 states, response ranged from 31.5%-58.5% (weighted).

The 2012 NAMCS was conducted from December 28, 2011 through December 26, 2012. The U.S. Bureau of the Census was the data collection agent for the 2012 NAMCS. For the first time, NAMCS was collected electronically using a computerized instrument developed by the U.S. Census Bureau. The physician, office staff or Census field representatives completed a PRF for a sample of up to 30 visits during a randomly assigned 1-week reporting period. The PRF may be viewed at the website:

[http://www.cdc.gov/nchs/data/ahcd/2015\\_NHAMCS\\_AS\\_PRF\\_Sample\\_Card.pdf](http://www.cdc.gov/nchs/data/ahcd/2015_NHAMCS_AS_PRF_Sample_Card.pdf)

Data processing and medical coding were performed by SRA International, Inc., Durham, North Carolina. As part of the quality assurance procedure, a 10 percent quality control sample of NAMCS survey records were independently recoded and compared. Differences were adjudicated by a quality control supervisor with error rates reported to NCHS. Coding error rates for the 10 percent sample ranged between 0.3 and 1.0 percent. For further details, see 2012 NAMCS Public Use Data File Documentation at the website:

[ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf)

Web table estimates include physician visits to office-based practices. Visit estimates are based on sample data weighted to produce annual national estimates and include standard errors. Because of the complex multistage design of NAMCS, a sample weight is computed for each sample visit that takes all stages of design into account. The survey data are inflated or weighted to produce unbiased national annual estimates. The visit weight includes four basic components: inflation by reciprocals of selection probabilities, adjustment for nonresponse, population ratio adjustments, and weight smoothing. Estimates of the sampling variability were calculated using Taylor approximations in SUDAAN, which take into account the complex sample design of NAMCS. Detailed information on the design, conduct, and estimation procedures of 2012 NAMCS are discussed in the NAMCS Public Use Data File Documentation at the website:

[ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf)

As in any survey, results are subject to sampling and nonsampling errors. Nonsampling errors include reporting and processing errors as well as biases due to nonresponse and incomplete response. In 2012, race data were missing for 32.9 percent of visits, and ethnicity data were missing for 35.1 percent of visits. The high amounts of missing data are of concern. Tables 8, 14, 15, 18, and 22 presenting race and ethnicity data include estimates based on both imputed and reported (known) values and estimates based on reported values only. The “best” estimates of visits to office-based physicians by race and ethnicity are those that include both imputed and reported data. Starting with 2009 data, NAMCS adopted the technique of model-based single imputation for NAMCS race and ethnicity data. Race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 NAMCS Public Use Data File Documentation at the website:

[ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf)

Information on missing data for other variables is provided in table footnotes. In the following tables, estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk (\*) appears in the tables. The relative standard error (RSE) of an estimate is obtained by dividing the standard error by the estimate itself. The result is then expressed as a percentage of the estimate. Estimates based on 30 or more cases include an asterisk if the RSE of the estimate exceeds 30 percent.

**Table 1. Physician office visits, by selected physician characteristics: United States, 2012**

Physician characteristic	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Number of visits per 100 persons per year <sup>1,2,3</sup> (standard error of rate)	
All visits	928,630	(13,217)	100.0	...	300.8	(4.3)
Physician specialty <sup>4</sup>						
General and family practice	192,342	(9,455)	20.7	(1.0)	62.3	(3.1)
Pediatrics <sup>5</sup>	129,583	(9,138)	14.0	(1.0)	176.1	(12.4)
Internal medicine	117,998	(8,426)	12.7	(0.9)	38.2	(2.7)
Obstetrics and gynecology <sup>6</sup>	71,657	(6,335)	7.7	(0.7)	55.9	(4.9)
Orthopedic surgery	47,484	(4,585)	5.1	(0.5)	15.4	(1.5)
Ophthalmology	43,934	(4,134)	4.7	(0.4)	14.2	(1.3)
Dermatology	38,702	(5,562)	4.2	(0.6)	12.5	(1.8)
Psychiatry	29,209	(2,797)	3.1	(0.3)	9.5	(0.9)
Cardiovascular diseases	23,856	(2,938)	2.6	(0.3)	7.7	(1.0)
Otolaryngology	19,133	(3,995)	2.1	(0.4)	6.2	(1.3)
Urology	18,055	(2,443)	1.9	(0.3)	5.8	(0.8)
General surgery	15,176	(1,783)	1.6	(0.2)	4.9	(0.6)
Neurology	14,242	(2,984)	1.5	(0.3)	4.6	(1.0)
Oncology	13,003	(1,327)	1.4	(0.1)	4.2	(0.4)
Pulmonology	9,719	(1,140)	1.0	(0.1)	3.1	(0.4)
Allergy	8,094	(1,095)	0.9	(0.1)	2.6	(0.4)
All other specialties	136,443	(7,596)	14.7	(0.8)	44.2	(2.5)
Professional identity						
Doctor of medicine	868,123	(13,638)	93.5	(0.6)	281.2	(4.4)
Doctor of osteopathy	60,507	(5,651)	6.5	(0.6)	19.6	(1.8)
Specialty type <sup>4</sup>						
Primary care	506,586	(10,099)	54.6	(0.8)	164.1	(3.3)
Medical specialty	240,750	(9,001)	25.9	(0.9)	78.0	(2.9)
Surgical specialty	181,294	(8,040)	19.5	(0.8)	58.7	(2.6)
Geographic region						
Northeast	184,502	(7,392)	19.9	(0.7)	335.4	(13.4)
New England	50,821	(2,695)	5.5	(0.3)	353.5	(18.7)
Mid-Atlantic	133,681	(6,885)	14.4	(0.7)	329.0	(16.9)
Midwest	170,783	(4,718)	18.4	(0.5)	257.5	(7.1)
East North Central	120,803	(4,296)	13.0	(0.4)	263.1	(9.4)
West North Central	49,980	(2,040)	5.4	(0.2)	244.9	(10.0)
South	367,311	(8,276)	39.6	(0.7)	319.7	(7.2)
South Atlantic	187,179	(6,066)	20.2	(0.6)	312.2	(10.1)
East South Central	60,889	(2,449)	6.6	(0.3)	332.9	(13.4)
West South Central	119,243	(5,366)	12.8	(0.5)	325.2	(14.6)
West	206,034	(5,931)	22.2	(0.6)	284.3	(8.2)
Mountain	61,933	(2,276)	6.7	(0.2)	278.2	(10.2)
Pacific	144,101	(5,483)	15.5	(0.5)	287.0	(10.9)
Metropolitan status <sup>7</sup>						
MSA	831,459	(13,819)	89.5	(0.6)	319.1	(5.3)
Non-MSA	97,171	(5,981)	10.5	(0.6)	201.9	(12.4)

<sup>1</sup>Visit rates are based on the July 1, 2012 set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

<sup>2</sup>Population estimates by metropolitan statistical area definitions status are based on estimates of the civilian noninstitutional population of the United States as of July 1, 2012 from the 2012 National Health Interview Survey, National Center for Health Statistics, compiled according to November 2009 Office of Management and Budget definitions of core-based statistical areas. See <http://www.census.gov/population/metro/> for more about metropolitan statistical definitions.

<sup>3</sup>For geographic and metropolitan statistical area, population denominators are different for each category and thus do not add to total population rate. For other variables, the denominator is the total population.

<sup>4</sup>Physician specialty and specialty type are defined in the 2012 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf).

<sup>5</sup>Number of visits (numerator) and population estimate (denominator) include children under 18 years of age.

<sup>6</sup>Number of visits (numerator) and population estimate (denominator) include females 15 years of age and older.

<sup>7</sup>MSA is metropolitan statistical area.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 2. Office visits by selected states: United States, 2012**

Selected states		Number of visits in thousands (standard error in thousands)		Number of visits per 100 persons per year <sup>1</sup> (standard error of rate)	
All visits		928,630	(13,217)	300.8	(4.3)
	State				
Alabama		15,250	(1,202)	321.5	(25.3)
Arizona		18,175	(1,661)	282.1	(25.8)
Arkansas		7,178	(511)	248.0	(17.7)
California		111,488	(7,620)	297.2	(20.3)
Colorado		14,399	(1,186)	282.8	(23.3)
Connecticut		17,550	(1,581)	496.4	(44.7)
Florida		70,325	(5,983)	370.3	(31.5)
Georgia		30,414	(3,103)	313.5	(32.0)
Illinois		37,896	(3,323)	298.7	(26.2)
Indiana		18,456	(1,358)	286.7	(21.1)
Iowa		7,269	(669)	240.0	(22.1)
Kansas		7,414	(677)	262.8	(24.0)
Kentucky		13,247	(1,189)	309.3	(27.8)
Louisiana		14,613	(1,359)	325.2	(30.2)
Maryland		21,720	(3,302)	375.2	(57.0)
Massachusetts		20,603	(2,213)	313.8	(33.7)
Michigan		21,245	(3,219)	217.4	(32.9)
Minnesota		14,872	(1,532)	279.5	(28.8)
Mississippi		7,150	(608)	245.4	(20.9)
Missouri		9,866	(1,011)	166.9	(17.1)
New Jersey		37,109	(3,863)	423.9	(44.1)
New York		63,084	(6,191)	326.6	(32.1)
North Carolina		21,660	(2,395)	227.3	(25.1)
Ohio		27,783	(3,003)	244.3	(26.4)
Oklahoma		10,845	(944)	290.8	(25.3)
Oregon		11,543	(1,233)	299.0	(31.9)
Pennsylvania		32,549	(3,128)	259.2	(24.9)
South Carolina		10,670	(969)	231.0	(21.0)
Tennessee		25,235	(2,528)	397.5	(39.8)
Texas		86,783	(6,314)	339.7	(24.7)
Utah		8,672	(585)	306.7	(20.7)
Virginia		24,860	(2,785)	311.9	(34.9)
Washington		14,920	(1,346)	219.7	(19.8)
Wisconsin		15,331	(1,284)	271.3	(22.7)

<sup>1</sup>Visit rates are based on the July 1, 2012 set of estimates of the civilian noninstitutionalized population of the United States as developed by the Population Division, U.S. Census Bureau.

NOTE: Numbers do not add to national total because estimates are only available for 34 states.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 3. Office visits, by selected physician practice characteristics: United States, 2012**

Physician practice characteristics	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits	928,630	(13,217)	100.0	...
Employment status				
Owner	616,011	(14,239)	66.3	(1.2)
Full-Owner	358,532	(12,602)	38.6	(1.2)
Part-Owner	257,478	(10,992)	27.7	(1.1)
Employee	275,983	(11,236)	29.7	(1.1)
Contractor	30,430	(3,969)	3.3	(0.4)
Blank <sup>1</sup>	*6,207	(1,993)	*0.7	(0.2)
Ownership				
Physician or group	734,897	(14,412)	79.1	(1.0)
Other health care corporation	56,412	(5,441)	6.1	(0.6)
Other hospital	47,190	(4,923)	5.1	(0.5)
HMO <sup>2</sup>	13,015	(2,768)	1.4	(0.3)
Medical or academic health center	18,957	(2,881)	2.0	(0.3)
Other <sup>3</sup>	17,822	(2,967)	1.9	(0.3)
Blank <sup>1</sup>	40,337	(4,545)	4.3	(0.5)
Practice size				
Solo	316,196	(11,814)	34.0	(1.2)
2	88,080	(6,802)	9.5	(0.7)
3-5	244,500	(10,272)	26.3	(1.1)
6-10	161,497	(9,219)	17.4	(1.0)
11 or more	114,145	(8,360)	12.3	(0.9)
Nonsolo, practice size not reported	3,924	(937)	0.4	(0.1)
Blank <sup>1</sup>	*287	(159)	*0.0	(0.0)
Type of practice				
Single-specialty group	390,406	(12,757)	42.0	(1.2)
Multispecialty group	221,424	(10,347)	23.8	(1.1)
Solo	316,196	(11,814)	34.0	(1.2)
Blank <sup>1</sup>	*603	(245)	*0.1	(0.0)
Office type				
Private practice	839,990	(14,015)	90.5	(0.7)
Freestanding clinic or urgicenter	49,960	(5,083)	5.4	(0.5)
Other <sup>4</sup>	38,679	(4,537)	4.2	(0.5)
Electronic medical records				
Yes-all electronic	526,482	(13,670)	56.7	(1.2)
Yes-part paper and part electronic	115,150	(8,042)	12.4	(0.8)
No	281,012	(11,249)	30.3	(1.1)
Blank <sup>1</sup>	*5,986	(2,471)	*0.6	(0.3)
Practice submits claims electronically				
Yes	825,462	(14,022)	88.9	(0.8)
No	83,452	(6,946)	9.0	(0.7)
Blank <sup>1</sup>	19,716	(3,269)	2.1	(0.4)

...Category not applicable.

\*Figure does not meet standards of reliability or precision.

<sup>1</sup>Blank may include missing, unknown, and/or 'refused to answer the question' data.

<sup>2</sup>HMO is health maintenance organization.

<sup>3</sup>'Other' includes owners such as local government (state, county or city) and charitable organizations.

<sup>4</sup>'Other' includes the following office types: HMO, nonfederal government clinic, mental health center, family planning clinic and faculty practice plan.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 4. Office visits, by patient age and sex: United States, 2012**

Patient age and sex	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Number of visits per 100 persons per year <sup>1</sup> (standard error of rate)	
All visits	928,630	(13,217)	100.0	...	300.8	(4.3)
Age						
Under 15 years	147,387	(8,108)	15.9	(0.8)	241.2	(13.3)
Under 1 year	27,919	(1,969)	3.0	(0.2)	708.4	(50.0)
1-4 years	46,891	(2,988)	5.0	(0.3)	292.1	(18.6)
5-14 years	72,578	(3,795)	7.8	(0.4)	176.6	(9.2)
15-24 years	71,451	(2,431)	7.7	(0.2)	166.3	(5.7)
25-44 years	186,852	(5,112)	20.1	(0.5)	231.5	(6.3)
45-64 years	275,307	(5,938)	29.6	(0.5)	335.5	(7.2)
65 years and over	247,634	(6,022)	26.7	(0.5)	591.7	(14.4)
65-74 years	126,436	(3,078)	13.6	(0.3)	532.2	(13.0)
75 years and over	121,197	(3,472)	13.1	(0.3)	669.9	(19.2)
Sex and age						
Female	540,221	(8,771)	58.2	(0.5)	342.0	(5.6)
Under 15 years	69,656	(4,034)	7.5	(0.4)	233.1	(13.5)
15-24 years	45,040	(1,862)	4.9	(0.2)	211.5	(8.7)
25-44 years	125,650	(4,362)	13.5	(0.4)	306.1	(10.6)
45-64 years	158,469	(3,842)	17.1	(0.3)	374.6	(9.1)
65-74 years	70,443	(1,880)	7.6	(0.2)	556.0	(14.8)
75 years and over	70,963	(2,260)	7.6	(0.2)	659.6	(21.0)
Male	388,409	(7,358)	41.8	(0.5)	257.7	(4.9)
Under 15 years	77,731	(4,324)	8.4	(0.4)	249.0	(13.9)
15-24 years	26,411	(1,108)	2.8	(0.1)	121.8	(5.1)
25-44 years	61,202	(2,154)	6.6	(0.2)	154.3	(5.4)
45-64 years	116,838	(3,247)	12.6	(0.3)	293.8	(8.2)
65-74 years	55,993	(1,717)	6.0	(0.2)	505.0	(15.5)
75 years and over	50,234	(1,648)	5.4	(0.2)	685.1	(22.5)

...Category not applicable....Category not applicable.

<sup>1</sup>Visit rates are based on the July 1, 2012 set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 5. Number of office visits per 100 persons per year by patient age and by patient sex, according to selected states: United States, 2012**

Selected states	Patient age						Patient sex			
	Under 18 years		18-64 years		65 years and over		Female		Male	
All visits	232.4	(11.8)	263.9	(5.2)	591.7	(14.4)	342.0	(5.6)	257.7	(4.9)
State										
Alabama	238.7	(50.8)	289.2	(27.9)	598.6	(80.8)	371.4	(31.5)	267.8	(25.6)
Arizona	203.4	(51.9)	243.1	(35.8)	572.1	(82.8)	324.6	(39.7)	238.1	(25.3)
Arkansas	265.6	(55.2)	186.4	(18.3)	472.6	(56.5)	266.2	(18.7)	228.8	(22.4)
California	*204.6	(62.2)	264.0	(24.7)	662.2	(85.4)	333.7	(23.8)	259.8	(27.5)
Colorado	253.3	(44.3)	216.3	(23.8)	706.0	(102.9)	321.5	(34.3)	243.6	(22.3)
Connecticut	287.0	(60.2)	449.7	(52.5)	1025.7	(139.6)	586.4	(64.4)	401.0	(44.3)
Florida	217.3	(59.3)	298.2	(33.0)	789.4	(107.6)	429.0	(39.9)	307.8	(30.3)
Georgia	192.1	(45.3)	283.3	(37.6)	751.5	(102.4)	348.4	(35.4)	275.9	(37.3)
Illinois	297.3	(66.4)	254.8	(30.6)	516.5	(88.0)	324.4	(29.0)	271.8	(32.2)
Indiana	230.8	(55.8)	241.0	(22.1)	604.6	(69.4)	324.8	(25.7)	247.0	(21.1)
Iowa	216.9	(40.8)	205.2	(26.1)	422.3	(41.0)	261.1	(27.2)	218.4	(22.2)
Kansas	175.8	(51.0)	229.3	(26.6)	583.7	(76.9)	304.6	(32.9)	219.7	(23.3)
Kentucky	295.8	(73.5)	253.8	(32.3)	583.2	(86.6)	353.2	(35.7)	263.1	(31.3)
Louisiana	300.8	(80.3)	283.1	(31.2)	578.0	(71.7)	373.4	(37.1)	273.5	(31.3)
Maryland	*298.7	(98.7)	334.4	(66.6)	718.5	(168.4)	418.9	(64.1)	327.9	(56.6)
Massachusetts	277.9	(62.2)	274.2	(44.6)	551.5	(87.0)	347.4	(46.3)	278.0	(32.9)
Michigan	*177.5	(55.2)	185.4	(35.1)	421.0	(74.6)	234.0	(35.1)	200.0	(32.9)
Minnesota	*331.3	(113.2)	228.5	(25.2)	429.2	(71.0)	296.5	(30.6)	262.3	(35.8)
Mississippi	137.1	(35.4)	233.4	(25.4)	506.3	(64.7)	296.0	(28.9)	190.4	(20.3)
Missouri	146.3	(30.7)	145.1	(19.2)	295.5	(50.3)	183.6	(21.9)	149.3	(17.9)
New Jersey	226.2	(55.4)	390.9	(49.6)	904.8	(128.7)	480.0	(54.5)	364.4	(46.1)
New York	317.5	(81.4)	286.5	(34.6)	528.4	(83.0)	353.9	(40.1)	297.4	(36.7)
North Carolina	262.5	(57.8)	166.0	(24.6)	444.0	(91.3)	255.2	(32.3)	197.1	(24.5)
Ohio	*238.8	(71.9)	228.7	(38.4)	321.2	(48.3)	281.2	(37.7)	205.5	(28.3)
Oklahoma	*189.1	(64.5)	269.7	(23.5)	568.3	(74.9)	351.0	(34.0)	228.2	(22.1)
Oregon	172.9	(48.7)	256.7	(31.4)	668.3	(104.5)	357.9	(37.9)	238.4	(32.9)
Pennsylvania	251.8	(63.7)	215.4	(28.6)	444.6	(68.0)	274.6	(29.2)	242.8	(29.0)
South Carolina	*134.1	(45.7)	201.9	(24.7)	507.5	(65.0)	265.8	(28.2)	193.2	(21.9)
Tennessee	247.6	(51.9)	381.8	(46.0)	718.6	(108.3)	439.9	(44.7)	352.3	(44.0)
Texas	330.0	(82.1)	280.3	(26.8)	704.8	(82.4)	387.8	(31.1)	289.9	(28.3)
Utah	228.9	(40.8)	287.6	(25.2)	684.2	(70.2)	354.7	(26.4)	258.8	(22.1)
Virginia	268.0	(72.9)	254.3	(33.0)	673.0	(115.8)	347.3	(40.5)	274.0	(35.5)
Washington	*108.8	(37.4)	205.1	(24.2)	487.7	(67.6)	250.7	(25.1)	188.0	(22.7)
Wisconsin	*184.1	(56.5)	258.3	(28.1)	473.1	(56.0)	342.2	(33.0)	198.8	(22.2)

\*Figure does not meet standards of reliability or precision

<sup>1</sup>Visit rates are based on the July 1, 2012 set of estimates of the civilian noninstitutionalized population of the United States as developed by the Population Division, U.S. Census Bureau.

NOTE: Numbers do not add to total because estimates are only available for 34 states.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 6. Office visits, by patient race and age, and ethnicity: United States, 2012**

Patient characteristic	Reported plus imputed <sup>1,2</sup>						Reported only <sup>3,4</sup>			
	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Number of visits per 100 persons per year (standard error of rate) <sup>5</sup>		Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits	928,630	(13,217)	100.0	...	300.8	(4.3)	...	...	...	...
Race and age <sup>6</sup>										
Reported visits	622,960	(12,647)	67.1	(1.0)	...	...	622,960	(12,647)	100.0	...
Imputed (missing) visits	305,670	(10,049)	32.9	(1.0)	...	...	...	...	...	...
White	794,238	(12,133)	85.5	(0.4)	329.7	(5.0)	529,036	(11,532)	84.9	(0.6)
Under 15 years	122,501	(7,037)	13.2	(0.7)	273.9	(15.7)	67,178	(4,941)	10.8	(0.8)
15-24 years	60,298	(2,143)	6.5	(0.2)	188.5	(6.7)	39,697	(1,647)	6.4	(0.2)
25-44 years	154,845	(4,358)	16.7	(0.4)	250.6	(7.1)	106,807	(3,720)	17.1	(0.5)
45-64 years	235,296	(5,366)	25.3	(0.4)	354.2	(8.1)	162,179	(4,796)	26	(0.5)
65-74 years	111,924	(2,813)	12.1	(0.3)	554.5	(13.9)	77,735	(2,488)	12.5	(0.3)
75 years and over	109,373	(3,249)	11.8	(0.3)	693.0	(20.6)	75,439	(2,705)	12.1	(0.4)
Black or African American	87,988	(3,230)	9.5	(0.3)	221.1	(8.1)	61,723	(2,972)	9.9	(0.5)
Under 15 years	16,113	(1,431)	1.7	(0.2)	175.2	(15.6)	8,957	(1,095)	1.4	(0.2)
15-24 years	8,059	(577)	0.9	(0.1)	121.8	(8.7)	5,419	(473)	0.9	(0.1)
25-44 years	20,184	(1,078)	2.2	(0.1)	190.5	(10.2)	15,012	(983)	2.4	(0.2)
45-64 years	26,860	(1,323)	2.9	(0.1)	275.6	(13.6)	20,006	(1,183)	3.2	(0.2)
65-74 years	9,277	(619)	1.0	(0.1)	421.2	(28.1)	6,785	(543)	1.1	(0.1)
75 years and over	7,496	(534)	0.8	(0.1)	521.6	(37.2)	5,545	(473)	0.9	(0.1)
Other <sup>7</sup>	46,404	(2,440)	5.0	(0.3)	165.8	(8.7)	32,201	(2,291)	5.2	(0.4)
Ethnicity <sup>6</sup>										
Reported visits	602,370	(12,899)	64.9	(1.0)	...	...	602,370	(12,899)	100.0	...
Imputed (missing) visits	326,260	(10,706)	35.1	(1.0)	...	...	...	...	...	...
Hispanic or Latino	110,085	(4,965)	11.9	(0.5)	210.2	(9.5)	73,171	(4,448)	12.1	(0.7)
Not Hispanic or Latino	818,545	(12,337)	88.1	(0.5)	319.3	(4.8)	529,198	(11,917)	87.9	(0.7)

...Category not applicable.

<sup>1</sup>'Reported plus imputed' includes race that was reported directly by physician offices and that was imputed for the 32.9 percent of visits for which race was not reported.

<sup>2</sup>'Reported plus imputed' includes ethnicity that was reported directly by physician offices and that was imputed for the 35.1 percent of visits for which ethnicity was not reported.

<sup>3</sup>'Reported only' calculations are based on 622,960,000 visits with race reported directly by physician offices. The 32.9 percent of visits for which race was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed race values.

<sup>4</sup>'Reported only' calculations are based on 602,370,000 visits with ethnicity reported directly by physician offices. The 35.1 percent of visits for which ethnicity was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed ethnicity values.

<sup>5</sup>Visit rates are based on the July 1, 2012 set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

<sup>6</sup>The race groups, White, Black or African American, Other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for NAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf). For 2012, race data were missing for 32.9 percent of visits, and ethnicity data were missing for 35.1 percent of visits. Either race or ethnicity data were missing for 40.4 percent of visits.

<sup>7</sup>Other race includes visits by Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 7. Expected sources of payment at office visits: United States, 2012**

Expected source of payment	Number of visits in thousands <sup>1</sup>		Percent of visits	
		(standard error in thousands)	(standard error of percent)	
All visits	928,630	(13,217)	...	...
Private Insurance	559,449	(10,960)	60.2	(0.7)
Medicare	231,111	(5,944)	24.9	(0.5)
Medicaid or CHIP <sup>2</sup>	117,662	(5,131)	12.7	(0.5)
Medicare and Medicaid <sup>3</sup>	16,497	(1,084)	1.8	(0.1)
No insurance <sup>4</sup>	44,711	(3,545)	4.8	(0.4)
Self-pay	43,218	(3,509)	4.7	(0.4)
No charge or charity	1,550	(327)	0.2	(0.0)
Workers' compensation	13,122	(1,733)	1.4	(0.2)
Other	26,987	(2,049)	2.9	(0.2)
Unknown or blank	50,421	(3,666)	5.4	(0.4)

...Category not applicable.

<sup>1</sup>Combined total of expected sources of payment exceeds "all visits" and "percent of visits" exceeds 100% because more than one source of payment may be reported per visit.

<sup>2</sup>CHIP is Children's Health Insurance Program.

<sup>3</sup>The visits in this category are also included in both the Medicare and Medicaid or CHIP categories.

<sup>4</sup>"No insurance" is defined as having only self-pay, no charge, or charity as payment sources. The individual self-pay and no charge or charity categories are not mutually exclusive.

NOTE: Numbers may not add to totals because of rounding. More than one category could be indicated.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 8. Primary care provider and referral status of office visits, by prior-visit status: United States, 2012**

Prior-visit status, primary care provider, and referral status	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits	928,630	(13,217)	100.0	...
Visit to PCP <sup>1</sup>	382,547	(10,478)	41.2	(1.0)
Visit to non-PCP <sup>1,2</sup>	482,598	(11,210)	52.0	(0.9)
Referred for this visit	150,140	(5,644)	16.2	(0.6)
Not referred for this visit	273,255	(8,995)	29.4	(0.8)
Unknown if referred <sup>3</sup>	59,204	(3,676)	6.4	(0.4)
Unknown if PCP <sup>1</sup> visit <sup>2,3</sup>	63,485	(3,922)	6.8	(0.4)
Established patient				
All visits	781,149	(11,816)	100.0	(0.0)
Visit to PCP <sup>1</sup>	360,293	(9,937)	46.1	(1.0)
Visit to non-PCP <sup>1,2</sup>	370,005	(9,292)	47.4	(1.0)
Referred for this visit	84,032	(4,091)	10.8	(0.5)
Not referred for this visit	243,268	(8,284)	31.1	(0.9)
Unknown if referred <sup>3</sup>	42,705	(2,827)	5.5	(0.4)
Unknown if PCP <sup>1</sup> visit <sup>2,3</sup>	50,850	(3,375)	6.5	(0.4)
New patient				
All visits	147,481	(4,103)	100.0	(0.0)
Visit to PCP <sup>1</sup>	22,253	(1,530)	15.1	(1.0)
Visit to non-PCP <sup>1,2</sup>	112,593	(3,783)	76.3	(1.1)
Referred for this visit	66,108	(2,615)	44.8	(1.3)
Not referred for this visit	29,987	(2,062)	20.3	(1.2)
Unknown if referred <sup>3</sup>	16,499	(1,429)	11.2	(0.9)
Unknown if PCP <sup>1</sup> visit <sup>2,3</sup>	12,634	(958)	8.6	(0.6)

...Category not applicable.

<sup>1</sup>PCP is patient's primary care provider as indicated by a positive response to the question "Are you the patient's primary care physician/provider?"

<sup>2</sup>Referral status was only asked for visits to non-PCPs and visits with unknown PCP status. Among these visits, referral information was unknown for 18.1 percent of visits.

<sup>3</sup>The unknown category includes blanks.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 9. Primary care provider and referral status, by physician specialty: United States, 2012**

Physician specialty	Total	Visit to PCP <sup>1</sup>		Visit to non-PCP <sup>1,2</sup>							
		Referred by other physician	Not referred by other physician	Unknown if referred <sup>3</sup>	Unknown if PCP <sup>1</sup> visit <sup>2,3</sup>						
Percent distribution (standard error of percent)											
All visits	100.0	41.2	(1.0)	16.2	(0.6)	29.4	(0.8)	6.4	(0.4)	6.8	(0.4)
General and family practice	100.0	77.7	(1.8)	2.5	(0.5)	8.4	(1.3)	2.5	(0.6)	8.9	(1.0)
Pediatrics	100.0	84.2	(2.0)	1.4	(0.3)	7.1	(1.6)	*1.8	(0.6)	5.6	(1.2)
Internal medicine	100.0	81.4	(2.3)	3.0	(0.9)	5.2	(1.2)	1.8	(0.4)	8.7	(1.4)
Obstetrics and gynecology	100.0	16.6	(2.9)	15.6	(2.6)	45.8	(3.8)	7.3	(1.2)	14.7	(2.7)
Orthopedic surgery	100.0	*2.6	(1.2)	36.8	(2.8)	46.7	(3.1)	11.3	(2.0)	*2.6	(1.0)
Ophthalmology	100.0	*1.7	(0.7)	20.0	(2.1)	62.9	(3.2)	10.6	(2.5)	4.8	(1.4)
Dermatology	100.0	*1.8	(1.4)	15.8	(3.1)	66.2	(4.6)	14.0	(4.0)	*2.2	(1.0)
Psychiatry	100.0	*	...	12.0	(2.1)	68.5	(3.5)	13.1	(2.4)	*5.8	(2.1)
Cardiovascular diseases	100.0	*7.7	(3.2)	39.9	(4.6)	36.4	(4.5)	11.2	(2.8)	*4.8	(1.7)
Otolaryngology	100.0	*	...	43.4	(7.8)	43.1	(6.7)	8.5	(2.4)	*4.0	(1.4)
Urology	100.0	*	...	30.7	(3.7)	51.3	(4.9)	*10.0	(3.3)	*5.4	(1.7)
General surgery	100.0	*3.0	(1.1)	52.7	(4.3)	32.6	(3.9)	8.3	(1.8)	3.4	(1.0)
Neurology	100.0	*1.9	(1.1)	48.5	(7.0)	37.8	(6.1)	*9.2	(2.8)	*2.6	(1.3)
Oncologists	100.0	*4.1	(2.5)	36.6	(5.0)	49.4	(5.2)	*3.1	(1.1)	*6.7	(2.2)
Pulmonologists	100.0	*14.5	(4.9)	34.7	(4.5)	36.6	(4.3)	*6.5	(2.1)	7.6	(2.3)
Allergists	100.0	*4.6	(3.8)	25.0	(3.3)	42.8	(4.9)	21.7	(5.7)	*6.0	(2.0)
All other specialties	100.0	5.8	(1.4)	32.6	(1.9)	46.6	(2.3)	10.3	(1.3)	4.8	(0.7)

...Category not applicable.

\*Figure does not meet standards of reliability or precision.

<sup>1</sup>PCP is patient's primary care provider as indicated by a positive response to the question "Are you the patient's primary care physician/provider?"

<sup>2</sup>Referral status was asked only for visits to non-PCPs and visits with unknown PCP status. Among these visits, referral information was unknown for 18.1 percent of visits.

<sup>3</sup>The unknown category includes blanks.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 10. Continuity-of-care office visit characteristics according to specialty type: United States, 2012**

Continuity-of-care visit characteristic	Specialty type <sup>1</sup>								Specialty type <sup>1</sup>							
	All specialties		Primary care		Surgical specialties		Medical specialties		All specialties		Primary care		Surgical specialties		Medical specialties	
	Number of visits in thousands (standard error in thousands)								Percent distribution (standard error of percent)							
All visits	928,630	(13,217)	506,586	(10,099)	181,294	(8,040)	240,750	(9,001)	100.0	...	100.0	...	100.0	...	100.0	...
Prior-visit status and number of visits in last 12 months																
Established patient <sup>2</sup>	781,149	(11,816)	451,213	(9,479)	137,768	(6,188)	192,168	(7,534)	84.1	(0.4)	89.1	(0.5)	76.0	(0.8)	79.8	(0.8)
None	77,051	(2,617)	41,476	(1,858)	16,302	(1,266)	19,273	(1,508)	8.3	(0.3)	8.2	(0.3)	9.0	(0.6)	8.0	(0.5)
1-2 visits	285,048	(5,326)	149,797	(3,906)	59,510	(2,801)	75,742	(3,469)	30.7	(0.4)	29.6	(0.5)	32.8	(0.7)	31.5	(0.7)
3-5 visits	228,213	(4,563)	137,654	(3,649)	38,475	(2,105)	52,084	(2,570)	24.6	(0.3)	27.2	(0.5)	21.2	(0.7)	21.6	(0.7)
6 or more visits	190,837	(5,413)	122,286	(4,631)	23,481	(1,577)	45,069	(2,790)	20.6	(0.5)	24.1	(0.7)	13.0	(0.7)	18.7	(1.0)
New patient	147,481	(4,103)	55,373	(2,607)	43,526	(2,523)	48,582	(2,605)	15.9	(0.4)	10.9	(0.5)	24.0	(0.8)	20.2	(0.8)

...Category not applicable.

<sup>1</sup>Specialty types are defined in the 2012 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf).

<sup>2</sup>Number of previous visits by established patients to responding physician in last 12 months (excludes sampled visit).

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 11. Twenty leading principal reasons for office visits, by patient's sex: United States, 2012**

Principal reason for visit and RVC code <sup>1</sup>	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Female <sup>2</sup> Percent distribution (standard error of percent)		Male <sup>3</sup> Percent distribution (standard error of percent)	
All visits	928,630	(13,217)	100.0	...	100.0	...	100.0	...
Progress visit, not otherwise specified	T800	74,103 (3,518)	8.0	(0.4)	7.7	(0.4)	8.3	(0.4)
General medical examination	X100	70,435 (2,768)	7.6	(0.3)	6.6	(0.3)	8.9	(0.4)
Postoperative visit	T205	28,829 (1,642)	3.1	(0.2)	3.3	(0.2)	2.8	(0.2)
Cough	S440	25,853 (1,398)	2.8	(0.1)	2.6	(0.2)	3.0	(0.2)
Medication, other and unspecified kinds	T115	18,282 (1,447)	2.0	(0.2)	1.8	(0.1)	2.2	(0.2)
Prenatal examination, routine	X205	15,964 (1,753)	1.7	(0.2)	3.0	(0.3)	...	...
Knee symptoms	S925	14,608 (1,166)	1.6	(0.1)	1.5	(0.1)	1.7	(0.2)
Gynecological examination	X225	14,402 (1,656)	1.6	(0.2)	2.7	(0.3)	...	...
Well baby examination	X105	13,838 (1,142)	1.5	(0.1)	1.3	(0.1)	1.8	(0.2)
Low back symptoms	S910	13,335 (1,470)	1.4	(0.2)	1.2	(0.1)	1.8	(0.2)
Back symptoms	S905	13,232 (980)	1.4	(0.1)	1.4	(0.1)	1.5	(0.1)
Counseling, not otherwise specified	T605	12,987 (1,072)	1.4	(0.1)	1.4	(0.1)	1.4	(0.2)
Symptoms referable to throat	S455	12,895 (771)	1.4	(0.1)	1.4	(0.1)	1.4	(0.1)
Skin rash	S860	12,511 (879)	1.3	(0.1)	1.2	(0.1)	1.6	(0.1)
Stomach and abdominal pain, cramps and spasms	S545	12,284 (735)	1.3	(0.1)	1.4	(0.1)	1.2	(0.1)
For other and unspecified test results	R700	12,115 (868)	1.3	(0.1)	1.2	(0.1)	1.4	(0.1)
Diabetes mellitus	D205	11,706 (1,107)	1.3	(0.1)	1.1	(0.1)	1.5	(0.2)
Fever	S010	10,902 (1,081)	1.2	(0.1)	1.0	(0.1)	1.4	(0.1)
Hypertension	D510	10,546 (771)	1.1	(0.1)	1.1	(0.1)	1.2	(0.1)
Earache, or ear infection	S355	9,701 (744)	1.0	(0.1)	1.0	(0.1)	1.1	(0.1)
All other reasons		520,102 (8,960)	56.0	(0.5)	56.1	(0.6)	55.8	(0.6)

...Category not applicable.

<sup>1</sup>Based on A Reason for Visit Classification for Ambulatory Care (RVC) defined in the 2012 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf).

<sup>2</sup>Based on 540,221,000 visits made by females.

<sup>3</sup>Based on 388,409,000 visits made by males.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 12. Provider-assessed major reason for office visit, by selected patient and visit characteristics: United States, 2012**

Patient and visit characteristic	Number of visits in thousands		Total percent	New problem	Chronic problem, routine		Chronic problem, flare-up		Pre- or post-surgery		Preventive care <sup>1</sup>		Unknown or blank		
	(standard error in thousands)														
All visits	928,630	(13,217)	100.0	34.4	(0.6)	30.1	(0.6)	7.7	(0.3)	6.6	(0.3)	20.4	(0.6)	0.8	(0.1)
Age															
Under 15 years	147,387	(8,108)	100.0	51.5	(1.2)	9.3	(0.6)	3.9	(0.3)	1.7	(0.3)	33.1	(1.1)	0.5	(0.1)
Under 1 year	27,919	(1,969)	100.0	37.6	(1.7)	3.3	(0.6)	1.3	(0.3)	*	...	56.3	(1.7)	*	...
1-4 years	46,891	(2,988)	100.0	56.2	(1.6)	5.8	(0.7)	3.7	(0.5)	1.7	(0.4)	32.3	(1.4)	*	...
5-14 years	72,578	(3,795)	100.0	53.8	(1.4)	13.9	(0.9)	5.1	(0.5)	1.9	(0.3)	24.8	(1.3)	0.6	(0.2)
15-24 years	71,451	(2,431)	100.0	43.4	(1.4)	18.0	(1.0)	5.7	(0.5)	4.4	(0.5)	27.6	(1.3)	0.9	(0.2)
25-44 years	186,852	(5,112)	100.0	33.9	(0.9)	27.2	(1.0)	7.4	(0.4)	6.7	(0.4)	23.8	(1.2)	1.0	(0.2)
45-64 years	275,307	(5,938)	100.0	30.7	(0.7)	35.6	(0.8)	9.1	(0.5)	8.1	(0.4)	15.4	(0.6)	1.0	(0.2)
65 years and over	247,634	(6,022)	100.0	25.9	(0.6)	42.1	(0.9)	9.3	(0.4)	8.4	(0.4)	13.7	(0.6)	0.6	(0.1)
65-74 years	126,436	(3,078)	100.0	25.8	(0.8)	40.9	(1.0)	9.8	(0.5)	8.7	(0.5)	14.3	(0.7)	0.6	(0.1)
75 years and over	121,197	(3,472)	100.0	26.0	(0.7)	43.4	(1.0)	8.8	(0.5)	8.1	(0.5)	13.1	(0.8)	0.6	(0.1)
Sex															
Female	540,221	(8,771)	100.0	33.8	(0.6)	28.6	(0.7)	7.6	(0.3)	6.7	(0.3)	22.4	(0.7)	0.8	(0.1)
Male	388,409	(7,358)	100.0	35.2	(0.6)	32.2	(0.7)	7.8	(0.4)	6.4	(0.3)	17.6	(0.6)	0.8	(0.1)
Race <sup>2</sup>															
Reported	622,960	(12,647)	100.0	33.6	(0.7)	30.8	(0.7)	8.0	(0.4)	6.9	(0.4)	20.1	(0.7)	0.6	(0.1)
Imputed (missing)	305,670	(10,049)	100.0	35.8	(0.9)	28.9	(1.1)	7.1	(0.4)	6.0	(0.4)	21.0	(0.8)	1.3	(0.3)
Reported plus imputed <sup>3</sup>															
White	794,238	(12,133)	100.0	34.2	(0.6)	30.4	(0.6)	7.8	(0.3)	6.7	(0.3)	20.1	(0.6)	0.8	(0.1)
Black or African American	87,988	(3,230)	100.0	34.7	(1.0)	29.6	(1.2)	7.1	(0.6)	6.1	(0.5)	21.9	(1.1)	0.6	(0.1)
Other <sup>4</sup>	46,404	(2,440)	100.0	36.7	(1.6)	26.3	(1.5)	8.1	(0.9)	5.1	(0.6)	23.0	(1.6)	*	...
Reported only <sup>5</sup>															
White	529,036	(11,532)	100.0	33.5	(0.7)	31.0	(0.8)	8.1	(0.4)	7.1	(0.4)	19.8	(0.7)	0.6	(0.1)
Black or African American	61,723	(2,972)	100.0	33.6	(1.3)	30.9	(1.6)	7.8	(0.9)	6.0	(0.6)	21.3	(1.4)	0.5	(0.2)
Other <sup>4</sup>	32,201	(2,291)	100.0	35.8	(2.0)	27.1	(2.0)	8.3	(1.1)	5.7	(0.9)	22.6	(2.0)	0.4	(0.2)
Ethnicity <sup>2</sup>															
Reported	602,370	(12,899)	100.0	33.9	(0.7)	30.3	(0.8)	7.9	(0.4)	6.9	(0.4)	20.5	(0.7)	0.6	(0.1)
Imputed (missing)	326,260	(10,706)	100.0	35.3	0.9	29.8	1.1	7.4	0.4	6.1	0.4	20.3	0.9	1.1	0.2
Reported plus imputed <sup>6</sup>															
Hispanic or Latino	110,085	(4,965)	100.0	38.6	(1.5)	22.6	(1.3)	7.1	(0.6)	5.5	(0.6)	25.4	(1.5)	0.8	(0.2)
Not Hispanic or Latino	818,545	(12,337)	100.0	33.8	(0.6)	31.1	(0.6)	7.8	(0.3)	6.7	(0.3)	19.7	(0.6)	0.8	(0.1)
Reported only <sup>7</sup>															
Hispanic or Latino	73,171	(4,448)	100.0	37.2	(2.0)	23.3	(1.7)	7.1	(0.9)	6.0	(0.8)	25.6	(1.9)	0.8	(0.3)
Not Hispanic or Latino	529,198	(11,917)	100.0	33.4	(0.7)	31.3	(0.8)	8.0	(0.4)	7.0	(0.4)	19.8	0.7	0.6	0.1
Expected source of payment <sup>8</sup>															
Private insurance	559,449	(10,960)	100.0	35.9	(0.7)	28.1	(0.7)	7.7	(0.3)	6.4	(0.3)	21.3	(0.7)	0.6	(0.1)
Medicare	231,111	(5,944)	100.0	25.9	(0.6)	42.1	(0.9)	9.9	(0.5)	8.2	(0.4)	13.4	(0.6)	0.6	(0.1)
Medicaid or CHIP <sup>9</sup>	16,497	(1,084)	100.0	24.2	(1.5)	45.1	(2.2)	10.9	(1.4)	7.3	(1.0)	12.1	(1.6)	*	...
Medicare and Medicaid <sup>10</sup>	117,662	(5,131)	100.0	38.3	(1.3)	23.1	(1.2)	7.2	(0.5)	4.3	(0.4)	26.8	(1.3)	0.3	(0.1)
No insurance <sup>11</sup>	44,711	(3,545)	100.0	30.1	(2.9)	37.6	(3.6)	6.3	(0.9)	11.1	(1.8)	12.9	(1.5)	*2.0	(0.9)
Other <sup>12</sup>	73,158	(4,048)	100.0	31.6	(1.3)	32.6	(1.8)	7.1	(0.6)	7.0	(0.7)	19.6	(1.5)	*2.0	(1.0)

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...Category not applicable.

\*Figure does not meet standards of reliability or precision.

<sup>1</sup>Preventive care includes routine prenatal, well-baby, screening, insurance or general exams (see Major reason for this visit question on Patient Record Sample Card) at: [http://www.cdc.gov/nchs/data/ahcd/2012\\_NAMCS\\_PRF\\_Sample\\_Card.pdf](http://www.cdc.gov/nchs/data/ahcd/2012_NAMCS_PRF_Sample_Card.pdf).

<sup>2</sup>The race groups, White, Black or African American, Other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for NAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf). For 2012, race data were missing for 32.9 percent of visits, and ethnicity data were missing for 35.1 percent of visits.

<sup>3</sup>'Reported plus imputed' includes race that was reported directly by physician offices and that was imputed for the 32.9 percent of visits for which race was not reported.

<sup>4</sup>Other race includes visits by Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

<sup>5</sup>'Reported only' calculations are based on 622,960,000 visits with race reported directly by physician offices. The 32.9 percent of visits for which race was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed race values.

<sup>6</sup>'Reported plus imputed' includes ethnicity that was reported directly by physician offices and that was imputed for the 35.1 percent of visits for which ethnicity was not reported.

<sup>7</sup>'Reported only' calculations are based on 602,370,000 visits with ethnicity reported directly by physician offices. The 35.1 percent of visits for which ethnicity was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed ethnicity values.

<sup>8</sup>Combined total of individual sources exceeds "all visits" and percent of visits exceeds 100% because more than one source of payment may be reported per visit.

<sup>9</sup>CHIP is Children's Health Insurance Program.

<sup>10</sup>The visits in this category are also included in both the Medicaid or CHIP and Medicare categories.

<sup>11</sup>No insurance is defined as having only self-pay, no charge or charity as payment sources.

<sup>12</sup>Other includes workers' compensation, unknown or blank, and sources not classified elsewhere.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 13. Preventive care visits, by selected patient and visit characteristics: United States, 2012**

Patient and visit characteristics	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Number of visits per 100 persons per year <sup>1</sup> (standard error of rate)		Percent of preventive care visits made to primary care specialists <sup>2</sup> (standard error of percent)	
All preventive care visits <sup>3</sup>	189,442	(5,792)	100.0	...	61.4	(1.9)	82.4	(1.2)
Age								
Under 15 years	48,827	(3,320)	25.8	(1.6)	79.9	(5.4)	96.5	(0.8)
Under 1 year	15,715	(1,271)	8.3	(0.6)	398.7	(32.2)	98.5	(0.6)
1-4 years	15,146	(1,154)	8.0	(0.6)	94.4	(7.2)	96.8	(1.0)
5-14 years	17,966	(1,380)	9.5	(0.7)	43.7	(3.4)	94.3	(1.1)
15-24 years	19,736	(1,217)	10.4	(0.5)	45.9	(2.8)	91.5	(1.3)
25-44 years	44,454	(2,917)	23.5	(1.2)	55.1	(3.6)	87.5	(1.7)
45-64 years	42,490	(1,961)	22.4	(0.9)	51.8	(2.4)	71.9	(2.2)
65 years and over	33,934	(1,802)	17.9	(0.9)	81.1	(4.3)	63.1	(2.6)
65-74 years	18,058	(984)	9.5	(0.5)	76.0	(4.1)	64.9	(2.6)
75 years and over	15,876	(1,032)	8.4	(0.5)	87.8	(5.7)	61.0	(3.2)
Sex and age								
Female	120,932	(4,714)	63.8	(1.2)	76.6	(3.0)	85.6	(1.2)
Under 15 years	23,790	(1,780)	12.6	(0.9)	79.6	(6.0)	97.4	(0.6)
15-24 years	15,504	(1,162)	8.2	(0.5)	72.8	(5.5)	93.9	(1.2)
25-44 years	36,613	(2,809)	19.3	(1.2)	89.2	(6.8)	91.5	(1.6)
45-64 years	25,597	(1,452)	13.5	(0.6)	60.5	(3.4)	75.2	(2.6)
65-74 years	10,144	(619)	5.4	(0.3)	80.1	(4.9)	66.5	(2.9)
75 years and over	9,284	(668)	4.9	(0.3)	86.3	(6.2)	68.2	(3.2)
Male	68,509	(2,693)	36.2	(1.2)	45.4	(1.8)	76.6	(1.7)
Under 15 years	25,036	(1,746)	13.2	(0.9)	80.2	(5.6)	95.6	(1.2)
15-24 years	4,232	(359)	2.2	(0.2)	19.5	(1.7)	82.9	(3.1)
25-44 years	7,842	(780)	4.1	(0.4)	19.8	(2.0)	69.1	(4.5)
45-64 years	16,893	(1,031)	8.9	(0.5)	42.5	(2.6)	66.8	(2.8)
65-74 years	7,914	(571)	4.2	(0.3)	71.4	(5.1)	62.8	(3.4)
75 years and over	6,592	(536)	3.5	(0.3)	89.9	(7.3)	50.9	(4.1)
Race <sup>4</sup>								
Reported	125,295	(4,959)	66.1	(1.5)	...	...	83.6	(1.5)
Imputed (missing)	64,147	(3,377)	33.9	(1.5)	...	...	79.9	(2.0)
Reported plus imputed <sup>5</sup>								
White	159,511	(5,069)	84.2	(0.7)	66.2	(2.1)	81.7	(1.3)
Black or African American	19,266	(1,242)	10.2	(0.6)	48.4	(3.1)	86.1	(1.9)
Other <sup>6</sup>	10,665	(891)	5.6	(0.4)	38.1	(3.2)	86.0	(2.8)
Reported only <sup>7</sup>								
White	104,894	(4,348)	83.7	(0.9)	...	...	83.0	(1.6)
Black or African American	13,126	(1,071)	10.5	(0.8)	...	...	87.5	(2.2)
Other <sup>6</sup>	7,276	(818)	5.8	(0.6)	...	...	86.2	(3.8)
Ethnicity <sup>4</sup>								
Reported	123,212	(4,970)	65.0	(1.6)	...	...	83.9	(1.5)
Imputed (missing)	66,229	(3,597)	35.0	(1.6)	...	...	79.6	(2.0)
Reported plus imputed <sup>8</sup>								
Hispanic or Latino	27,929	(2,135)	14.7	(1.0)	53.3	(4.1)	88.7	(1.9)
Not Hispanic or Latino	161,513	(5,119)	85.3	(1.0)	63.0	(2.0)	81.3	(1.3)
Reported only <sup>9</sup>								
Hispanic or Latino	18,692	(1,814)	15.2	(1.3)	...	...	89.7	(2.3)
Not Hispanic or Latino	104,520	(4,431)	84.8	(1.3)	...	...	82.8	(1.6)
Expected source(s) of payment <sup>10</sup>								
Private insurance	119,150	(4,562)	62.9	(1.3)	64.6	(2.5)	83.5	(1.4)
Medicare	30,872	(1,664)	16.3	(0.8)	67.4	(3.6)	64.1	(2.6)
Medicaid or CHIP <sup>11</sup>	31,521	(2,133)	16.6	(1.0)	67.8	(4.6)	93.9	(1.2)
Medicare and Medicaid <sup>12</sup>	1,993	(308)	1.1	(0.2)	...	...	67.4	(7.2)
No insurance <sup>13</sup>	5,782	(728)	3.1	(0.4)	12.8	(1.6)	66.3	(6.8)
Other <sup>14</sup>	14,343	(1,439)	7.6	(0.7)	...	...	72.8	(4.4)

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...Category not applicable

<sup>1</sup>Visit rates for age, sex, race and ethnicity are based on the July 1, 2012 set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau. Visit rates for expected source(s) of payment are based on the 2012 National Health Interview Survey estimates of health insurance.

<sup>2</sup>Primary care specialty defined in the 2012 public use file documentation ([ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf)).

<sup>3</sup>Preventive care includes routine prenatal, well-baby, screening, insurance or general exams (see Major reason for this visit question on Patient Record Sample Card) at: [http://www.cdc.gov/nchs/data/ahcd/2012\\_NAMCS\\_PRF\\_Sample\\_Card.pdf](http://www.cdc.gov/nchs/data/ahcd/2012_NAMCS_PRF_Sample_Card.pdf).

<sup>4</sup>The race groups, White, Black or African American, Other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for NAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf). For 2012, race data were missing for 32.9 percent of visits, and ethnicity data were missing for 35.1 percent of visits.

<sup>5</sup>Reported plus imputed<sup>1</sup> includes race that was reported directly by physician offices and that was imputed for the 33.9 percent of visits for which race was not reported.

<sup>6</sup>Other race includes visits by Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

<sup>7</sup>Reported only<sup>1</sup> calculations are based on 125,295,000 visits with race reported directly by physician offices. The 33.9 percent of visits for which race was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed race values.

<sup>8</sup>Reported plus imputed<sup>1</sup> includes ethnicity that was reported directly by physician offices and that was imputed for the 35.0 percent of visits for which ethnicity was not reported.

<sup>9</sup>Reported only<sup>1</sup> calculations are based on 123,212,000 visits with ethnicity reported directly by physician offices. The 35.0 percent of visits for which ethnicity was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed ethnicity values.

<sup>10</sup>Combined total of individual sources exceeds "all visits" and percent of visits exceeds 100% because more than one source of payment may be reported per visit.

<sup>11</sup>CHIP is Children's Health Insurance Program.

<sup>12</sup>The visits in this category are also included in both the Medicaid or CHIP and Medicare categories.

<sup>13</sup>No insurance is defined as having only self-pay, no charge or charity as payment sources. The visit rate was calculated using "uninsured" as the denominator from the 2012 estimates of health insurance coverage from the National Health Interview Survey.

<sup>14</sup>Other includes workers' compensation, unknown or blank, and sources not classified elsewhere.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 14. Preventive care visits made to primary care specialists, by selected states: United States, 2012**

Selected states	Number of visits in thousands (standard error in thousands)		Number of visits per 100 persons per year <sup>1</sup> (standard error of rate)		Percent of preventive care visits made to primary care specialists <sup>2</sup> (standard error of percent)	
All preventive care visits <sup>3</sup>	189,442	(5,792)	61.4	(1.9)	82.4	(1.2)
State						
Alabama	2,871	(425)	60.5	(9.0)	77.7	(5.4)
Arizona	5,333	(1,176)	82.8	(18.2)	79.0	(7.5)
Arkansas	958	(159)	33.1	(5.5)	79.5	(5.6)
California	21,957	(3,446)	58.5	(9.2)	83.9	(7.2)
Colorado	3,347	(460)	65.7	(9.0)	92.2	(2.9)
Connecticut	4,243	(838)	120.0	(23.7)	76.6	(8.9)
Florida	14,593	(2,417)	76.8	(12.7)	83.5	(8.6)
Georgia	6,791	(1,211)	70.0	(12.5)	87.2	(3.8)
Illinois	8,443	(1,191)	66.6	(9.4)	83.3	(5.0)
Indiana	2,978	(436)	46.3	(6.8)	80.2	(5.1)
Iowa	1,217	(208)	40.2	(6.9)	85.5	(4.6)
Kansas	1,833	(405)	64.9	(14.3)	93.6	(3.0)
Kentucky	3,347	(649)	78.1	(15.1)	79.4	(8.2)
Louisiana	3,452	(647)	76.8	(14.4)	83.1	(5.4)
Maryland	3,971	(1,023)	68.6	(17.7)	81.0	(7.4)
Massachusetts	5,128	(1,103)	78.1	(16.8)	85.1	(6.0)
Michigan	3,992	(735)	40.9	(7.5)	81.9	(5.7)
Minnesota	3,200	(711)	60.2	(13.4)	84.2	(7.8)
Mississippi	1,953	(341)	67.0	(11.7)	87.7	(3.8)
Missouri	2,324	(578)	39.3	(9.8)	68.4	(16.1)
New Jersey	8,000	(1,505)	91.4	(17.2)	73.8	(7.2)
New York	9,599	(1,699)	49.7	(8.8)	73.3	(7.1)
North Carolina	3,826	(685)	40.1	(7.2)	80.9	(5.6)
Ohio	8,196	(1,815)	72.1	(16.0)	91.0	(3.8)
Oklahoma	1,606	(293)	43.1	(7.9)	92.9	(2.5)
Oregon	1,594	(333)	41.3	(8.6)	92.9	(4.2)
Pennsylvania	4,922	(1,069)	39.2	(8.5)	82.4	(7.1)
South Carolina	1,909	(358)	41.3	(7.7)	87.1	(8.3)
Tennessee	5,037	(1,003)	79.3	(15.8)	65.7	(11.6)
Texas	19,012	(3,133)	74.4	(12.3)	86.9	(4.6)
Utah	2,150	(297)	76.0	(10.5)	91.6	(2.1)
Virginia	4,404	(686)	55.2	(8.6)	82.4	(5.5)
Washington	2,386	(539)	35.1	(7.9)	87.2	(4.9)
Wisconsin	3,462	(565)	61.3	(10.0)	93.6	(2.3)

<sup>1</sup>Visit rates are based on the July 1, 2012 set of estimates of the civilian noninstitutionalized population of the United States as developed by the Population Division, U.S. Census Bureau.

<sup>2</sup>Primary care specialty defined in the 2012 public use file documentation ([ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf)).

<sup>3</sup>Preventive care includes routine prenatal, well-baby, screening, insurance or general exams (see Major reason for this visit question on Patient Record Sample Card) at: [http://www.cdc.gov/nchs/data/ahcd/2012\\_NAMCS\\_PRF\\_Sample\\_Card.pdf](http://www.cdc.gov/nchs/data/ahcd/2012_NAMCS_PRF_Sample_Card.pdf).

NOTE: Numbers do not add to total because estimates are only available for 34 states.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 15. Primary diagnosis at office visits, classified by major disease category: United States, 2012**

Major disease category and ICD-9-CM code range <sup>1</sup>		Number of visits		Percent distribution	
		in thousands	(standard error in thousands)	(standard error of percent)	(standard error of percent)
All visits		928,630	(13,217)	100.0	(0.0)
Infectious and parasitic diseases	001-139	20,192	(1,116)	2.2	(0.1)
Neoplasms	140-239	31,590	(2,017)	3.4	(0.2)
Endocrine, nutritional, metabolic diseases, and immunity disorders	240-279	54,804	(2,927)	5.9	(0.3)
Mental disorders	290-319	51,827	(3,038)	5.6	(0.3)
Diseases of the nervous system and sense organs	320-389	77,694	(4,005)	8.4	(0.4)
Diseases of the circulatory system	390-459	69,184	(3,018)	7.5	(0.3)
Diseases of the respiratory system	460-519	82,652	(3,003)	8.9	(0.3)
Diseases of the digestive system	520-579	32,077	(1,996)	3.5	(0.2)
Diseases of the genitourinary system	580-629	40,453	(2,407)	4.4	(0.3)
Diseases of the skin and subcutaneous tissue	680-709	47,434	(3,386)	5.1	(0.3)
Diseases of the musculoskeletal and connective tissue	710-739	93,582	(4,457)	10.1	(0.5)
Symptoms, signs, and ill-defined conditions	780-799	73,690	(2,199)	7.9	(0.2)
Injury and poisoning	800-999	43,760	(2,296)	4.7	(0.2)
Supplementary classification <sup>2</sup>	V01-V89	177,747	(5,414)	19.1	(0.5)
All other diagnoses <sup>3</sup>		24,553	(1,548)	2.6	(0.2)
Blank		7,391	(1,298)	0.8	(0.1)

...Category not applicable.

<sup>1</sup>Based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) (U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No.(PHS) 06-1260).

<sup>2</sup>Supplementary classification is preventive and follow-up care and includes general medical examination, routine prenatal examination, and health supervision of an infant or child, and other diagnoses not classifiable to injury or illness.

<sup>3</sup>Includes diseases of the blood and blood-forming organs(280-289); complications of pregnancy, childbirth, and the puerperium (630-679); congenital anomalies (740-759); certain conditions originating in perinatal period (760-779); and entries not codable to the ICD-9-CM (e.g. "illegible entries", "left against medical advice", "transferred", entries of "none", or "no diagnoses").

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 16. Twenty leading primary diagnosis groups for office visits: United States, 2012**

Primary diagnosis group and ICD-9-CM code(s) <sup>1</sup>	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Female <sup>2</sup> percent distribution (standard error of percent)		Male <sup>3</sup> percent distribution (standard error of percent)	
All visits		928,630 (13,217)	100.0	...	100.0	...	100.0	...
Routine infant or child health check	V20.0-V20.2	37,510 (2,752)	4.0	(0.3)	3.4	(0.3)	4.9	(0.4)
Arthropathies and related disorders	710-719	34,169 (2,225)	3.7	(0.2)	4.0	(0.3)	3.3	(0.2)
Essential hypertension	401	34,016 (1,692)	3.7	(0.2)	3.3	(0.2)	4.1	(0.2)
Spinal disorders	720-724	33,423 (2,549)	3.6	(0.3)	3.3	(0.3)	4.0	(0.3)
General medical examination	V70	25,948 (1,723)	2.8	(0.2)	2.4	(0.2)	3.3	(0.3)
Acute upper respiratory infections, excluding pharyngitis	460-461,463-466	25,779 (1,371)	2.8	(0.1)	2.6	(0.1)	3.0	(0.2)
Diabetes mellitus	249-250	23,556 (1,527)	2.5	(0.2)	2.1	(0.2)	3.1	(0.2)
Malignant neoplasms	140-208,209-209.36,209.7-209.79,230-234	20,141 (1,202)	2.2	(0.1)	2.0	(0.1)	2.4	(0.2)
Rheumatism, excluding back	725-729	19,012 (966)	2.0	(0.1)	2.2	(0.1)	1.9	(0.1)
Follow up examination	V67	18,807 (1,310)	2.0	(0.1)	2.2	(0.2)	1.8	(0.1)
Specific procedures and aftercare	V50-V59.9	17,591 (1,220)	1.9	(0.1)	2.0	(0.2)	1.7	(0.1)
Normal pregnancy	V22	16,299 (1,708)	1.8	(0.2)	3.0	(0.3)	...	...
Gynecological examination	V72.3	12,426 (1,475)	1.3	(0.2)	2.3	(0.3)	...	...
Heart disease, excluding ischemic	391-392.0,393-398,402,404,415-416,420-429	12,035 (952)	1.3	(0.1)	1.1	(0.1)	1.5	(0.1)
Benign neoplasms	210-229,209.4-209.69,235-239	11,449 (1,311)	1.2	(0.1)	1.4	(0.2)	1.1	(0.1)
Otitis media and eustachian tube disorders	381-382	11,210 (903)	1.2	(0.1)	1.0	(0.1)	1.5	(0.1)
Disorders of lipid metabolism	272	11,027 (865)	1.2	(0.1)	1.0	(0.1)	1.4	(0.1)
Asthma	493	10,529 (629)	1.1	(0.1)	1.0	(0.1)	1.3	(0.1)
Psychoses, excluding major depressive disorder	290-295,296.0-296.1,296.4-299	10,330 (1,026)	1.1	(0.1)	1.0	(0.1)	1.3	(0.2)
Acute pharyngitis	462	9,240 (699)	1.0	(0.1)	1.0	(0.1)	0.9	(0.1)
All other diagnoses <sup>4</sup>		534,134 (8,946)	57.5	(0.5)	57.6	(0.6)	57.3	(0.6)

...Category not applicable.

<sup>1</sup>Based on the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) (U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No.(PHS) 06-1260). However, certain codes have been combined in this table to form larger categories that better describe the utilization of ambulatory care services.

<sup>2</sup>Based on 540,221,000 visits made by females.

<sup>3</sup>Based on 388,409,000 visits made by males.

<sup>4</sup>Includes all other diagnoses not listed above, as well as unknown and blank diagnoses.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 17. Injury visits to office-based physicians, by selected patient characteristics: United States, 2012**

Patient characteristics	Number of visits in thousands		Percent distribution		Number of visits per 100 persons per year <sup>1</sup> (standard error of rate)	
	(standard error in thousands)	(standard error of percent)	(standard error of percent)	(standard error of percent)	(standard error of rate)	(standard error of rate)
All injury visits <sup>2</sup>	62,121	(2,983)	100.0	...	20.1	(1.0)
Age						
Under 15 years	7,959	(608)	12.8	(0.9)	13.0	(1.0)
Under 1 year	*	...	*	...	*	...
1-4 years	1,764	(229)	2.8	(0.4)	11.0	(1.4)
5-14 years	5,923	(511)	9.5	(0.7)	14.4	(1.2)
15-24 years	6,835	(554)	11.0	(0.7)	15.9	(1.3)
25-44 years	15,018	(997)	24.2	(1.0)	18.6	(1.2)
45-64 years	20,221	(1,261)	32.6	(1.1)	24.6	(1.5)
65 years and over	12,087	(745)	19.5	(1.0)	28.9	(1.8)
65-74 years	6,225	(463)	10.0	(0.6)	26.2	(1.9)
75 years and over	5,862	(463)	9.4	(0.7)	32.4	(2.6)
Sex and age						
Female	31,337	(1,565)	50.4	(1.0)	19.8	(1.0)
Under 15 years	3,443	(332)	5.5	(0.5)	11.5	(1.1)
15-24 years	2,997	(298)	4.8	(0.4)	14.1	(1.4)
25-44 years	7,274	(543)	11.7	(0.7)	17.7	(1.3)
45-64 years	9,915	(689)	16.0	(0.7)	23.4	(1.6)
65-74 years	3,724	(328)	6.0	(0.4)	29.4	(2.6)
75 years and over	3,985	(353)	6.4	(0.5)	37.0	(3.3)
Male	30,784	(1,657)	49.6	(1.0)	20.4	(1.1)
Under 15 years	4,517	(411)	7.3	(0.6)	14.5	(1.3)
15-24 years	3,838	(380)	6.2	(0.5)	17.7	(1.8)
25-44 years	7,744	(655)	12.5	(0.8)	19.5	(1.7)
45-64 years	10,306	(726)	16.6	(0.7)	25.9	(1.8)
65-74 years	2,502	(244)	4.0	(0.4)	22.6	(2.2)
75 years and over	1,877	(232)	3.0	(0.4)	25.6	(3.2)
Race <sup>3</sup>						
Reported	40,592	(2,337)	65.3	(2.0)	...	...
Imputed (missing)	21,529	(1,605)	34.7	(2.0)	...	...
Reported plus imputed <sup>4</sup>						
White	53,095	(2,605)	85.5	(1.0)	22.0	(1.1)
Black or African American	5,860	(600)	9.4	(0.8)	14.7	(1.5)
Other <sup>5</sup>	3,166	(356)	5.1	(0.5)	11.3	(1.3)
Reported only <sup>6</sup>						
White	34,419	(2,038)	84.8	(1.3)	...	...
Black or African American	4,226	(543)	10.4	(1.2)	...	...
Other <sup>5</sup>	1,948	(264)	4.8	(0.6)	...	...
Ethnicity and race <sup>3</sup>						
Reported	38,488	(2,370)	62.0	(2.2)	...	...
Imputed (missing)	23,633	(1,717)	38.0	(2.2)	...	...
Reported plus imputed <sup>7</sup>						
Hispanic or Latino	7,381	(718)	11.9	(1.0)	14.1	(1.4)
Not Hispanic or Latino	54,740	(2,681)	88.1	(1.0)	21.4	(1.0)
White	46,131	(2,338)	74.3	(1.3)	23.7	(1.2)
Black or African American	5,663	(590)	9.1	(0.8)	15.2	(1.6)
Other <sup>4</sup>	2,947	(322)	4.7	(0.5)	12.1	(1.3)
Reported only <sup>8</sup>						
Hispanic or Latino	4,169	(594)	10.8	(1.4)	...	...
Not Hispanic or Latino	34,320	(2,169)	89.2	(1.4)	...	...

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...Category not applicable.

\*Figure does not meet standards of reliability or precision.

<sup>1</sup> Visit rates for age, sex, race, and ethnicity are based on the July 1, 2012 set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.

<sup>2</sup>The National Ambulatory Medical Care Survey definition of injury visits, as shown in this table, changed in 2010 and includes only first-, second-, and third- listed reason for visit and diagnosis codes that are injury or poisoning related. Adverse effects and complications are excluded. Reason for visit was coded using A Reason for Visit Classification for Ambulatory Care; diagnosis was coded using the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) (U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. Official version International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No.(PHS) 06-1260). Injury visits, using this definition, accounted for 6.7 percent (SE=0.3) of all office visits in 2012. For more information on why this definition changed, see the 2012 National Ambulatory Medical Care Survey Public Use Data File Documentation, available at: [http://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](http://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf).

<sup>3</sup>The race groups, White, Black or African American, and Other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for NAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf). For 2012, race data were missing for 34.7 percent of injury visits, and ethnicity data were missing for 38.0 percent of injury visits.

<sup>4</sup>'Reported plus imputed' includes race that was reported directly by physician offices and that was imputed for the 34.7 percent of injury-related visits for which race was not reported.

<sup>5</sup>Other race includes visits by Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

<sup>6</sup>'Reported only' calculations are based on 40,592,000 injury-related visits with race reported directly by physician offices. The 34.7 percent of injury-related visits for which race was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed race values.

<sup>7</sup>'Reported plus imputed' includes ethnicity that was reported directly by physician offices and that was imputed for the 38.0 percent of injury-related visits for which ethnicity was not reported.

<sup>8</sup>'Reported only' calculations are based on 38,488,000 injury-related visits with ethnicity reported directly by physician offices. The 38.0 percent of injury-related visits for which ethnicity was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed ethnicity values.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 18. Office visits related to injury, poisoning, and adverse effect: United States, 2012**

Intent	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits related to injury, poisoning, and adverse effect <sup>1</sup>	69,883	(3,062)	100.0	...
Unintentional injury/poisoning	34,299	(2,169)	49.1	(1.7)
Intentional injury/poisoning	755	(137)	1.1	(0.2)
Injury/poisoning - unknown intent	26,503	(1,462)	37.9	(1.5)
Adverse effect of medical treatment/surgical care or adverse effect of medicinal drug	8,325	(583)	11.9	(0.9)

...Category not applicable.

<sup>1</sup>Data are based on item 2 of the survey instrument (Patient Record form) in conjunction with first-, second-, and third-listed reason for visit and diagnosis codes related to injury, poisoning, and adverse effects of medical or surgical care or adverse effects of medicinal drug. Reason for visit was coded using A Reason for Visit Classification for Ambulatory Care; diagnosis codes are based on the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) (U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Centers for Medicare and Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No.(PHS) 06-1260). Visits related to injury, poisoning, and adverse effect accounted for 7.5 percent (S.E.=0.3) of all office visits in 2012.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 19. Presence of selected chronic conditions at office visits, by patient age and sex: United States, 2012**

Chronic conditions <sup>1</sup>	Age								Sex	
	Total	Under 45 years		45-64 years	65-74 years	75 years and over		Female	Male	
Percent distribution (standard error of percent)										
All visits	100.0	...	100.0	...	100.0	...	100.0	...	100.0	...
None	44.9	(0.7)	70.2	(0.7)	31.9	(0.8)	19.7	(0.9)	15.9	(0.8)
One or more chronic conditions	51.7	(0.8)	25.9	(0.6)	64.7	(0.8)	77.9	(0.9)	81.2	(0.9)
One	23.6	(0.3)	19.3	(0.5)	28.5	(0.5)	25.6	(0.7)	24.6	(0.7)
Two	13.3	(0.3)	4.6	(0.2)	17.9	(0.4)	22.3	(0.6)	22.5	(0.6)
Three or more	14.9	(0.5)	2.1	(0.1)	18.4	(0.7)	29.9	(0.9)	34.1	(1.0)
Blank	3.4	(0.3)	3.9	(0.4)	3.4	(0.4)	2.4	(0.3)	3.0	(0.3)
Percent of visits (standard error of percent)										
Hypertension	25.1	(0.6)	5.0	(0.2)	32.5	(0.8)	46.8	(1.0)	52.7	(1.1)
Hyperlipidemia	15.2	(0.5)	2.6	(0.2)	21.0	(0.8)	29.6	(1.0)	28.8	(1.0)
Arthritis	13.0	(0.4)	4.0	(0.2)	17.3	(0.7)	21.7	(0.8)	23.8	(0.9)
Diabetes	10.7	(0.3)	2.5	(0.2)	13.9	(0.4)	21.3	(0.7)	19.7	(0.6)
Depression	8.7	(0.3)	6.5	(0.3)	12.2	(0.5)	9.3	(0.5)	7.7	(0.5)
Obesity	6.3	(0.2)	4.9	(0.2)	8.8	(0.4)	7.9	(0.5)	3.6	(0.3)
Asthma	5.9	(0.2)	7.0	(0.3)	5.7	(0.2)	4.8	(0.3)	4.3	(0.3)
Cancer	5.5	(0.2)	0.9	(0.1)	6.0	(0.3)	11.1	(0.5)	13.7	(0.6)
COPD <sup>2</sup>	3.7	(0.2)	1.2	(0.1)	3.7	(0.2)	7.4	(0.4)	8.0	(0.4)
Ischemic heart disease	3.3	(0.2)	0.2	(0.0)	3.4	(0.3)	7.3	(0.5)	9.4	(0.5)
Osteoporosis	2.5	(0.1)	0.2	(0.0)	2.1	(0.2)	5.4	(0.4)	8.6	(0.5)
Cerebrovascular disease	1.9	(0.1)	0.2	(0.0)	1.8	(0.1)	3.7	(0.3)	6.0	(0.4)
CHF <sup>3</sup>	1.6	(0.1)	0.1	(0.0)	1.1	(0.1)	3.2	(0.3)	5.8	(0.5)
Chronic renal failure	1.5	(0.1)	0.2	(0.0)	1.3	(0.2)	2.7	(0.3)	5.0	(0.4)

...Category not applicable.

<sup>1</sup>Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses. Combined total visits by patients with chronic conditions (percent of visits) exceeds 100% because more than one chronic condition may be reported per visit.

<sup>2</sup>COPD is chronic obstructive pulmonary disease.

<sup>3</sup>CHF is congestive heart failure.

NOTE: Numbers may not add to totals because more than one chronic condition may be reported per visit.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 20. Presence of selected chronic conditions at office visits, by selected states: United States, 2012**

Selected states	Hypertension	Hyperlipidemia	Arthritis	Diabetes	Depression	Obesity	Asthma	Cancer	COPD <sup>1</sup>	Osteoporosis										
	Percent of visits (standard error of percent)										Percent of visits (standard error of percent)									
All visits	25.1	(0.6)	15.2	(0.5)	13.0	(0.4)	10.7	(0.3)	8.7	(0.3)	6.3	(0.2)	5.9	(0.2)	5.5	(0.2)	3.7	(0.2)	2.5	(0.1)
State																				
Alabama	33.1	(3.0)	14.2	(2.5)	17.1	(2.1)	12.5	(1.2)	9.7	(1.6)	7.2	(1.4)	5.9	(0.8)	4.4	(1.0)	4.5	(0.7)	3.5	(0.8)
Arizona	17.8	(2.5)	10.3	(2.4)	10.8	(2.2)	9.0	(1.6)	4.7	(1.0)	4.1	(1.0)	5.1	(1.0)	3.5	(0.7)	3.2	(0.8)	*	*
Arkansas	28.1	(3.1)	14.3	(2.3)	14.4	(2.0)	11.4	(1.4)	8.2	(1.3)	6.8	(1.2)	5.0	(0.7)	9.5	(2.8)	4.8	(0.8)	1.7	(0.4)
California	22.4	(2.6)	18.4	(2.4)	13.6	(2.1)	9.4	(1.3)	7.8	(1.0)	8.9	(1.4)	7.6	(1.0)	5.7	(0.9)	3.2	(0.5)	4.0	(0.8)
Colorado	20.5	(2.4)	11.3	(1.8)	11.2	(2.0)	7.7	(1.1)	10.2	(1.7)	3.6	(0.7)	5.8	(0.8)	5.8	(1.2)	4.0	(1.0)	3.2	(0.8)
Connecticut	18.5	(2.7)	10.3	(2.0)	10.1	(1.6)	7.1	(1.1)	7.9	(1.7)	4.0	(0.9)	5.4	(1.1)	7.6	(1.9)	3.3	(0.8)	1.8	(0.5)
Florida	33.3	(3.6)	18.4	(3.4)	14.4	(2.1)	14.2	(2.3)	10.8	(1.5)	8.1	(1.8)	6.3	(1.1)	6.7	(1.2)	5.2	(1.1)	4.9	(0.9)
Georgia	29.8	(2.8)	14.7	(2.4)	14.9	(2.0)	12.8	(1.8)	8.1	(1.5)	7.9	(1.7)	6.6	(0.9)	7.9	(2.0)	3.9	(0.7)	*	*
Illinois	20.6	(3.2)	14.3	(2.6)	10.4	(1.9)	8.3	(1.2)	9.7	(2.2)	8.1	(1.8)	6.0	(0.9)	5.1	(1.3)	4.0	(0.8)	2.6	(0.7)
Indiana	30.0	(2.9)	16.3	(2.3)	14.1	(2.1)	12.7	(1.5)	10.7	(1.5)	7.2	(1.1)	7.2	(0.8)	5.4	(1.1)	4.1	(0.7)	2.0	(0.4)
Iowa	24.9	(2.4)	17.5	(2.1)	13.0	(1.8)	11.1	(1.3)	7.5	(1.2)	7.5	(1.3)	5.4	(0.8)	8.9	(1.7)	4.6	(0.7)	1.7	(0.3)
Kansas	22.8	(2.9)	12.2	(2.5)	12.1	(1.8)	12.3	(1.9)	7.6	(1.4)	5.9	(1.3)	6.4	(1.5)	*5.3	(1.6)	4.3	(0.7)	*	*
Kentucky	24.1	(3.6)	13.9	(2.8)	11.9	(2.1)	7.3	(1.2)	6.9	(1.4)	5.3	(1.4)	5.8	(1.0)	5.0	(1.4)	6.8	(1.4)	*	*
Louisiana	23.5	(3.0)	10.5	(2.3)	10.7	(1.6)	9.2	(1.5)	6.0	(1.0)	4.7	(1.2)	4.8	(1.1)	4.8	(1.1)	*4.6	(1.7)	2.1	(0.4)
Maryland	24.2	(4.4)	14.1	(3.2)	8.0	(1.9)	11.5	(2.6)	5.5	(1.4)	6.9	(1.5)	*10.0	(3.4)	4.0	(1.1)	*4.3	(1.5)	*	*
Massachusetts	27.2	(3.1)	15.1	(2.5)	10.4	(1.7)	10.0	(1.6)	13.8	(2.5)	7.1	(1.2)	7.9	(1.0)	3.4	(0.7)	*3.7	(1.3)	2.7	(0.7)
Michigan	19.9	(3.3)	13.7	(3.5)	11.8	(3.2)	9.4	(1.9)	6.9	(1.4)	3.5	(0.9)	7.5	(1.5)	*3.6	(1.1)	3.6	(1.1)	*	*
Minnesota	16.2	(3.2)	12.9	(3.1)	10.7	(2.1)	7.8	(1.6)	10.0	(1.8)	5.6	(1.1)	7.4	(1.0)	4.8	(1.3)	2.4	(0.6)	*	*
Mississippi	36.1	(4.0)	11.9	(2.4)	17.0	(2.3)	14.1	(1.5)	5.7	(0.9)	4.1	(0.9)	3.9	(0.6)	6.0	(1.2)	3.8	(1.0)	2.6	(0.8)
Missouri	20.9	(4.3)	11.2	(2.4)	11.6	(3.3)	11.8	(1.9)	8.3	(1.9)	4.8	(1.0)	4.9	(0.8)	*2.5	(0.8)	1.9	(0.5)	*	*
New Jersey	23.8	(2.8)	15.4	(3.3)	8.5	(1.4)	9.9	(1.9)	5.0	(1.4)	*5.3	(1.7)	6.3	(1.3)	7.4	(1.4)	2.5	(0.7)	2.9	(0.8)
New York	27.1	(4.7)	20.6	(4.6)	18.3	(4.2)	6.7	(1.1)	6.6	(1.4)	6.1	(1.3)	5.5	(0.9)	6.3	(1.3)	2.3	(0.5)	*5.2	(1.7)
North Carolina	20.3	(3.3)	12.3	(2.8)	11.6	(2.4)	9.3	(1.4)	8.7	(1.6)	4.3	(1.2)	6.0	(1.1)	7.2	(1.6)	4.8	(1.2)	*3.6	(1.5)
Ohio	18.5	(3.0)	10.3	(2.5)	13.9	(2.9)	8.5	(1.5)	8.4	(1.6)	5.4	(1.1)	6.1	(1.1)	4.5	(1.3)	*3.8	(1.3)	*	*
Oklahoma	25.4	(2.9)	14.7	(2.3)	18.1	(2.5)	11.5	(1.2)	11.1	(1.8)	5.8	(1.3)	6.2	(1.1)	4.4	(1.1)	4.1	(0.7)	2.5	(0.7)
Oregon	27.9	(4.5)	15.0	(2.4)	15.1	(2.4)	9.8	(1.5)	14.8	(2.0)	5.8	(1.0)	7.2	(1.5)	*10.1	(3.3)	2.9	(0.6)	2.3	(0.5)
Pennsylvania	23.8	(3.0)	16.6	(3.3)	14.9	(2.9)	9.7	(1.5)	9.1	(2.2)	7.0	(1.5)	9.6	(1.7)	5.8	(1.5)	5.1	(1.3)	2.8	(0.6)
South Carolina	35.2	(3.9)	19.3	(3.5)	12.3	(2.2)	13.7	(2.1)	9.2	(2.5)	4.2	(0.9)	5.1	(1.4)	5.0	(1.3)	4.1	(0.8)	2.7	(0.6)
Tennessee	28.5	(3.4)	18.5	(4.1)	13.3	(1.8)	11.8	(1.4)	9.5	(1.7)	7.4	(1.3)	4.7	(0.7)	7.1	(1.1)	6.8	(1.0)	2.2	(0.5)
Texas	22.8	(2.8)	10.6	(1.8)	10.1	(1.8)	10.9	(1.8)	5.7	(1.0)	4.2	(0.7)	6.3	(1.1)	4.1	(0.8)	3.6	(0.5)	1.3	(0.3)
Utah	16.1	(1.5)	8.0	(1.0)	8.2	(1.3)	9.4	(1.2)	10.0	(1.3)	4.2	(0.6)	5.2	(0.6)	4.5	(0.9)	1.5	(0.3)	1.1	(0.2)
Virginia	23.1	(3.5)	15.2	(3.2)	10.2	(2.9)	11.2	(1.7)	6.8	(1.4)	5.9	(1.1)	5.9	(1.1)	9.4	(2.0)	3.1	(0.8)	2.4	(0.7)
Washington	24.6	(2.6)	13.3	(2.2)	13.1	(1.6)	10.8	(1.3)	13.8	(1.9)	5.0	(1.4)	6.4	(1.2)	5.5	(1.0)	4.0	(1.0)	2.7	(0.7)
Wisconsin	22.3	(2.7)	15.5	(2.5)	7.6	(1.2)	10.1	(1.3)	10.7	(2.2)	7.0	(1.2)	6.2	(0.7)	6.1	(1.2)	2.8	(0.6)	2.4	(0.7)

\*Figure does not meet standards of reliability or precision

<sup>1</sup>COPD is chronic obstructive pulmonary disease.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 21. Selected services ordered or provided at office visits, by patient sex: United States, 2012**

Selected services ordered or provided	Number of visits in thousands <sup>1</sup> (standard error in thousands)		Percent of visits (standard error of percent)		Female <sup>2</sup>		Male <sup>3</sup>	
					Percent of visits (standard error of percent)		Percent of visits (standard error of percent)	
All visits	928,630	(13,217)	100.0	...	100.0	...	100.0	...
One or more services ordered or provided <sup>4</sup>	905,519	(13,249)	97.5	(0.3)	97.5	(0.3)	97.6	(0.3)
None	23,111	(2,338)	2.5	(0.3)	2.5	(0.3)	2.4	(0.3)
Examinations								
Skin	115,273	(6,980)	12.4	(0.7)	12.1	(0.7)	12.8	(0.8)
Pelvic	44,203	(3,932)	4.8	(0.4)	8.2	(0.7)	*	...
Breast	29,274	(2,283)	3.2	(0.2)	5.1	(0.4)	0.4	(0.1)
Foot	22,887	(1,864)	2.5	(0.2)	2.3	(0.2)	2.7	(0.2)
Rectal	17,305	(1,983)	1.9	(0.2)	1.6	(0.2)	2.2	(0.3)
Retinal	26,263	(3,088)	2.8	(0.3)	2.6	(0.3)	3.1	(0.4)
Depression screening	13,276	(1,504)	1.4	(0.2)	1.6	(0.2)	1.2	(0.2)
Neurologic	48,792	(4,038)	5.3	(0.4)	5.0	(0.4)	5.6	(0.5)
General physical exam	530,887	(11,895)	57.2	(1.0)	55.1	(1.1)	60.0	(1.1)
Vital signs								
Weight	687,658	(11,802)	74.1	(0.8)	74.0	(0.9)	74.1	(0.9)
Blood pressure	588,288	(11,594)	63.4	(1.0)	64.9	(1.0)	61.2	(1.1)
Height	559,839	(11,631)	60.3	(0.9)	60.2	(1.0)	60.4	(1.0)
Temperature	348,742	(10,873)	37.6	(1.0)	35.0	(1.1)	41.1	(1.2)
Blood tests								
Complete blood count (CBC)	91,122	(4,653)	9.8	(0.5)	9.5	(0.5)	10.2	(0.6)
Lipids or cholesterol	61,717	(3,855)	6.6	(0.4)	5.9	(0.4)	7.7	(0.6)
Glucose	37,419	(2,791)	4.0	(0.3)	3.8	(0.3)	4.4	(0.4)
Glycohemoglobin (HgbA1C)	34,892	(3,249)	3.8	(0.3)	3.2	(0.3)	4.5	(0.5)
Prostate specific antigen (PSA)	14,263	(1,734)	1.5	(0.2)	*	...	3.7	(0.4)
Other blood test	*	...	*	...	*	...	*	...
Other tests								
Urinalysis (UA)	64,020	(4,165)	6.9	(0.4)	7.1	(0.5)	6.6	(0.6)
Pap test	21,736	(2,233)	2.3	(0.2)	4.0	(0.4)	*	...
Electrocardiogram (EKG or ECG)	21,151	(1,636)	2.3	(0.2)	2.0	(0.2)	2.7	(0.2)
Biopsy	12,168	(1,476)	1.3	(0.2)	1.3	(0.2)	1.3	(0.2)
Sigmoidoscopy	*1,150	(502)	*0.1	(0.1)	*	...	*0.2	(0.1)
Colonoscopy	10,294	(1,059)	1.1	(0.1)	1.0	(0.1)	1.2	(0.2)
Peak flow	803	(147)	0.1	(0.0)	0.1	(0.0)	0.1	(0.0)
Electroencephalogram (EEG)	1,026	(195)	0.1	(0.0)	0.1	(0.0)	0.1	(0.0)
Electromyogram (EMG)	3,008	(816)	0.3	(0.1)	*0.3	(0.1)	0.3	(0.1)
Audiometry	7,050	(1,047)	0.8	(0.1)	0.6	(0.1)	1.0	(0.2)
Spirometry	7,046	(1,053)	0.8	(0.1)	0.7	(0.1)	0.9	(0.1)
Tonometry	4,772	(1,292)	0.5	(0.1)	0.5	(0.1)	0.6	(0.2)
Cardiac stress test	4,099	(508)	0.4	(0.1)	0.4	(0.1)	0.5	(0.1)
Fetal monitoring	4,944	(1,029)	0.5	(0.1)	0.9	(0.2)	*	...
Chlamydia test	5,058	(863)	0.5	(0.1)	0.8	(0.2)	0.2	(0.0)
HIV test <sup>5</sup>	3,214	(398)	0.3	(0.0)	0.4	(0.1)	0.2	(0.0)
Pregnancy/HCG test	4,718	(650)	0.5	(0.1)	0.9	(0.1)	*	...
HPV DNA test <sup>6</sup>	2,957	(496)	0.3	(0.1)	0.5	(0.1)	*	...
Imaging								
Any imaging	116,436	(4,529)	12.5	(0.5)	13.6	(0.5)	11.0	(0.5)
X ray	56,096	(3,082)	6.0	(0.3)	5.7	(0.3)	6.6	(0.4)
Ultrasound, excluding echocardiogram	25,814	(2,086)	2.8	(0.2)	3.6	(0.3)	1.7	(0.2)
Magnetic resonance imaging (MRI)	12,165	(913)	1.3	(0.1)	1.3	(0.1)	1.3	(0.1)
Computed tomography (CT) scan	12,514	(1,164)	1.3	(0.1)	1.2	(0.1)	1.5	(0.2)
Mammography	12,101	(1,098)	1.3	(0.1)	2.2	(0.2)	*	...
Echocardiogram	8,403	(1,121)	0.9	(0.1)	0.8	(0.1)	1.1	(0.1)
Bone mineral density	3,857	(567)	0.4	(0.1)	0.7	(0.1)	*	...
Other imaging	2,140	(295)	0.2	(0.0)	0.2	(0.0)	0.3	(0.0)
Non-medication treatment								
Physical therapy	17,356	(1,828)	1.9	(0.2)	1.7	(0.2)	2.1	(0.3)

Excision of tissue	16,352	(1,634)	1.8	(0.2)	1.7	(0.2)	1.9	(0.2)	
Wound care	15,101	(1,477)	1.6	(0.2)	1.4	(0.2)	1.9	(0.2)	
Psychotherapy	13,241	(1,915)	1.4	(0.2)	1.4	(0.2)	1.5	(0.2)	
Other mental health counseling	9,836	(1,312)	1.1	(0.1)	1.0	(0.1)	1.1	(0.2)	
Cast, splint, or wrap	7,121	(781)	0.8	(0.1)	0.7	(0.1)	0.9	(0.1)	
Complementary and alternative medicine (CAM)	6,252	(1,800)	0.7	(0.2)	*0.7	(0.2)	0.6	(0.2)	
Durable medical equipment	3,566	(450)	0.4	(0.0)	0.3	(0.1)	0.5	(0.1)	
Home health care	*2,912	(1,081)	*0.3	(0.1)	*0.3	(0.1)	*0.3	(0.1)	
Radiation therapy	389	(92)	0.0	(0.0)	*0.0	(0.0)	*	...	
Health education/Counseling									
Asthma	6,526	(676)	0.7	(0.1)	0.6	(0.1)	0.8	(0.1)	
Diet/Nutrition	70,194	(3,780)	7.6	(0.4)	7.1	(0.4)	8.1	(0.5)	
Exercise	47,020	(2,988)	5.1	(0.3)	4.9	(0.3)	5.3	(0.4)	
Family planning/Contraception	7,525	(1,269)	0.8	(0.1)	1.3	(0.2)	0.2	(0.0)	
Growth/Development	19,442	(2,410)	2.1	(0.3)	1.8	(0.3)	2.4	(0.3)	
Injury Prevention	16,741	(1,678)	1.8	(0.2)	1.5	(0.2)	2.2	(0.2)	
Stress Management	9,356	(1,282)	1.0	(0.1)	1.2	(0.2)	0.8	(0.1)	
Tobacco Use/Exposure	14,333	(1,026)	1.5	(0.1)	1.4	(0.1)	1.7	(0.1)	
Weight Reduction	17,948	(1,353)	1.9	(0.1)	1.9	(0.2)	1.9	(0.2)	

...Category not applicable.

\*Figure does not meet standards of reliability or precision.

--Quantity zero.

<sup>1</sup>Combined total of diagnostic, screening and non-medication treatment services exceeds "All visits" and percent of visits exceeds 100% because more than one service may be reported per visit.

<sup>2</sup>Based on 540,221,000 visits made by females.

<sup>3</sup>Based on 388,409,000 visits made by males.

<sup>4</sup>Includes up to 9 write-in procedures from items 7 and 9. Procedures are coded to the International Classification of Diseases, Ninth Revision, Clinical Modification, Volume 3, Procedure Classification. Records with write-in procedures that overlap checkboxes (for example, procedure 93.11, "Physical therapy exercises: Assisting exercise", which could also be coded in the item 9 checkbox for physical therapy) are edited to ensure that the check box is marked; in this way the check box always provides a summary estimate, but should not be added to the corresponding ICD-9-CM procedure to avoid doublecounting. Procedures codes were reviewed against checkboxes for x-ray, bone mineral density, CT scan, echocardiogram, other ultrasound, mammography, MRI, other imaging, EKG/ECG, complementary/alternative medicine, physical therapy, speech/occupational therapy, psychotherapy, excision of tissue, wound care, cast, biopsy, and splint or wrap. Procedures that could not be included in one of these checkboxes are included in the estimated total number of visits with services, but are not shown separately.

<sup>5</sup>HIV is human immunodeficiency virus.

<sup>6</sup>HPV is human papilloma virus; DNA is deoxyribonucleic acid.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 22. Initial blood pressure measurements recorded at office visits to primary care providers for adults aged 18 and over, by selected patient characteristics: United States, 2012**

Patient characteristic	Number of visits in thousands	Total	Initial blood pressure <sup>1</sup>							
			Not high	Mildly high		Moderately high		Severely high		
			Percent distribution (standard error of percent)							
All visits <sup>2</sup>	342,319	100.0	31.5	(0.8)	46.6	(0.7)	17.2	(0.5)	4.7	(0.2)
Age										
18-24 years	27,443	100.0	56.8	(1.7)	37.3	(1.5)	5.1	(0.7)	*	...
25-44 years	99,049	100.0	43.5	(1.2)	43.4	(1.0)	10.6	(0.6)	2.5	(0.2)
45-64 years	119,376	100.0	23.7	(0.8)	51.0	(1.0)	20.2	(0.8)	5.2	(0.4)
65-74 years	49,536	100.0	21.5	(1.0)	48.6	(1.3)	23.2	(1.0)	6.7	(0.6)
75 years and over	46,914	100.0	21.9	(1.0)	45.5	(1.2)	24.5	(1.0)	8.2	(0.7)
Sex										
Female	219,156	100.0	36.7	(0.9)	44.4	(0.8)	14.8	(0.6)	4.1	(0.3)
Male	123,163	100.0	22.3	(0.8)	50.6	(0.9)	21.5	(0.7)	5.7	(0.4)
Race <sup>3</sup>										
Reported	247,527	100.0	31.5	(0.9)	46.8	(0.8)	17.1	(0.6)	4.6	(0.3)
Imputed (missing)	94,791	100.0	31.4	(1.3)	46.1	(1.1)	17.5	(0.8)	5.0	(0.4)
Reported plus imputed <sup>4</sup>										
White	288,028	100.0	31.8	(0.8)	46.6	(0.7)	17.0	(0.5)	4.5	(0.2)
Black or African American	35,551	100.0	26.3	(1.6)	47.4	(1.5)	20.2	(1.1)	6.1	(0.7)
Other <sup>5</sup>	18,740	100.0	36.4	(2.9)	44.8	(3.1)	14.5	(1.8)	4.3	(0.9)
Reported only <sup>6</sup>										
White	205,518	100.0	32.0	(0.9)	46.7	(0.8)	17.0	(0.7)	4.3	(0.3)
Black or African American	27,203	100.0	24.8	(1.9)	48.4	(1.8)	20.2	(1.3)	6.6	(0.9)
Other <sup>5</sup>	14,806	100.0	37.2	(3.5)	44.8	(3.8)	13.5	(2.0)	4.6	(1.0)
Ethnicity <sup>3</sup>										
Reported	234,162	100.0	31.6	(0.9)	46.7	(0.8)	17.3	(0.6)	4.5	(0.3)
Imputed (missing)	108,157	100.0	31.3	(1.2)	46.5	(1.1)	17.1	(0.8)	5.1	(0.4)
Reported plus imputed <sup>7</sup>										
Hispanic or Latino	40,590	100.0	35.8	(2.4)	46.4	(2.4)	13.9	(1.3)	3.9	(0.6)
Not Hispanic or Latino	301,728	100.0	30.9	(0.7)	46.6	(0.6)	17.7	(0.5)	4.8	(0.2)
Reported only <sup>8</sup>										
Hispanic or Latino	30,612	100.0	35.8	(2.9)	47.6	(3.0)	12.9	(1.5)	3.8	(0.7)
Not Hispanic or Latino	203,550	100.0	31.0	(0.9)	46.5	(0.8)	17.9	(0.6)	4.6	(0.3)

...Category not applicable.

<sup>1</sup>Figure does not meet standards of reliability or precision.

<sup>2</sup>Blood pressure (BP) levels were categorized using the following hierarchical definitions. Severely high BP is defined as 160 mm Hg systolic or above, or 100 mm Hg diastolic or above. Moderately high BP is defined as 140-159 mm Hg systolic or 90-99 mm Hg diastolic. Mildly high BP is defined as 120-139 mm Hg systolic or 80-89 mm Hg diastolic. Not high is defined as any BP <120 mm Hg systolic and <80 mm Hg diastolic. Similar to 2010 but in contrast to prior years, low BP has been combined with normal BP in 2010 because there is no accepted clinical demarcation between normal and low on the population level. High BP classification was based on the 'Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure (JNC-7)'. 'Mildly high' BP corresponds to the JNC-7 prehypertensive range. 'Moderately high' BP corresponds to the JNC-7 stage 1 hypertensive range. 'Severely high' BP corresponds to the JNC-7 stage 2 hypertensive range.

<sup>3</sup>Visits where blood pressure recorded represent 93.4 percent (SE=0.5) of all office visits made to primary care providers by adults (aged 18 and over).

<sup>4</sup>The race groups, White, Black or African American, Other include persons of Hispanic and not Hispanic origin. Persons of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for NAMCS race and ethnicity data. The race imputation is restricted to three categories (white, black, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than white and black. The imputation technique is described in more detail in the 2012 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf). For 2012, race data were missing for 32.9 percent of visits, and ethnicity data were missing for 35.1 percent of visits. For 2012 where blood pressure was taken, race data were missing for 27.7 percent of visits, and ethnicity data were missing for 31.6 percent of visits.

<sup>5</sup>'Reported plus imputed' includes race that was reported directly by physician offices and that was imputed for the 27.7 percent of visits where blood pressure was recorded for which race was not reported.

<sup>6</sup>Other race includes visits by Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.

<sup>7</sup>'Reported only' calculations are based on 247,527,000 visits where blood pressure was recorded with race reported directly by physician offices. The 27.7 percent of visits for which race was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed race values.

<sup>8</sup>'Reported plus imputed' includes ethnicity that was reported directly by physician offices and that was imputed for the 31.6 percent of visits where blood pressure was recorded for which ethnicity was not reported.

<sup>9</sup>'Reported only' calculations are based on 234,162,000 visits where blood pressure was recorded with ethnicity reported directly by physician offices. The 31.6 percent of visits for which ethnicity was missing are excluded from the denominator so readers can compare differences between estimates that include and exclude imputed ethnicity values.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 23. Medication therapy and number of medications mentioned at office visits, by patient sex: United States, 2012**

Medication therapy <sup>3</sup>	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Female <sup>1</sup>		Male <sup>2</sup>	
					Percent distribution (standard error of percent)		Percent distribution (standard error of percent)	
All visits	928,630	(13,217)	100.0	...	100.0	...	100.0	...
Visits with mention of medication <sup>4</sup>	624,319	(10,965)	67.2	(0.7)	66.3	(0.8)	68.5	(0.7)
Visits without mention of medication	304,311	(7,739)	32.8	(0.7)	33.7	(0.8)	31.5	(0.7)
Number of medications provided or prescribed								
All visits	928,630	(13,217)	100.0	...	100.0	...	100.0	...
0	304,311	(7,739)	32.8	(0.7)	33.7	(0.8)	31.5	(0.7)
1	180,777	(4,231)	19.5	(0.4)	19.2	(0.4)	19.8	(0.4)
2	122,078	(2,972)	13.1	(0.3)	12.7	(0.3)	13.7	(0.4)
3	78,786	(2,311)	8.5	(0.2)	8.1	(0.2)	9.0	(0.3)
4	55,905	(1,816)	6.0	(0.2)	5.9	(0.2)	6.2	(0.2)
5	39,229	(1,514)	4.2	(0.1)	4.1	(0.2)	4.4	(0.2)
6	28,966	(1,133)	3.1	(0.1)	3.0	(0.1)	3.3	(0.2)
7	23,619	(1,018)	2.5	(0.1)	2.6	(0.1)	2.5	(0.1)
8	18,982	(869)	2.0	(0.1)	2.0	(0.1)	2.1	(0.1)
9	21,003	(1,015)	2.3	(0.1)	2.3	(0.1)	2.2	(0.1)
10	54,974	(2,470)	5.9	(0.3)	6.3	(0.3)	5.3	(0.3)

...Category not applicable.

<sup>1</sup>Based on 540,221,000 visits made by females.

<sup>2</sup>Based on 388,409,000 visits made by males.

<sup>3</sup>Includes prescription drugs, over-the-counter preparations, immunizations, and desensitizing agents.

<sup>4</sup>A drug mention is documentation in a patient's record of a drug provided, prescribed, or continued at a visit. Up to ten drug mentions were collected per visit in 2012 compared to a maximum of 8 drug mentions collected in 2011. Also defined as drug visits.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 24. Office drug visits and drug mentions, by physician specialty: United States, 2012**

Physician specialty	Drug visits <sup>1</sup>				Drug mentions <sup>2</sup>				Percent of office visit with drug mentions <sup>3</sup>		Drug mention rates <sup>4</sup> (standard error of rate)	
	Number in thousands (standard error in thousands)	Percent distribution (standard error of percent)			Number in thousands (standard error in thousands)	Percent distribution (standard error of percent)			(standard error of percent)			
All specialties	624,319 (10,965)	100.0	...	...	2,310,812 (55,598)	100.0	...	...	67.2 (0.7)	248.8 (5.0)		
General and family practice	151,357 (7,914)	24.2 (1.2)			576,846 (34,332)	25.0 (1.4)			78.7 (1.1)	299.9 (10.0)		
Internal medicine	96,369 (7,314)	15.4 (1.1)			463,050 (38,725)	20.0 (1.5)			81.7 (1.7)	392.4 (16.2)		
Pediatrics	84,934 (6,425)	13.6 (1.0)			194,210 (16,417)	8.4 (0.7)			65.5 (1.5)	149.9 (6.5)		
Obstetrics and gynecology	35,522 (3,937)	5.7 (0.6)			90,218 (12,664)	3.9 (0.6)			49.6 (2.9)	125.9 (13.0)		
Ophthalmology	24,867 (2,753)	4.0 (0.4)			93,148 (13,435)	4.0 (0.6)			56.6 (3.1)	212.0 (22.0)		
Orthopedic surgery	21,357 (2,414)	3.4 (0.4)			70,836 (10,717)	3.1 (0.5)			45.0 (2.7)	149.2 (16.8)		
Dermatology	21,572 (3,344)	3.5 (0.5)			51,967 (10,318)	2.2 (0.4)			55.7 (3.4)	134.3 (17.8)		
Cardiovascular diseases	19,059 (2,453)	3.1 (0.4)			114,007 (14,937)	4.9 (0.6)			79.9 (2.8)	477.9 (30.6)		
Psychiatry	23,163 (2,425)	3.7 (0.4)			61,090 (6,925)	2.6 (0.3)			79.3 (2.6)	209.1 (10.8)		
Oncology	8,520 (941)	1.4 (0.2)			40,050 (5,360)	1.7 (0.2)			65.5 (3.7)	308.0 (29.8)		
Urology	11,624 (1,750)	1.9 (0.3)			45,640 (8,160)	2.0 (0.4)			64.4 (3.6)	252.8 (27.9)		
Otolaryngology	10,409 (2,239)	1.7 (0.4)			29,805 (7,164)	1.3 (0.3)			54.4 (3.5)	155.8 (30.7)		
Neurology	9,799 (1,555)	1.6 (0.2)			40,295 (7,550)	1.7 (0.3)			68.8 (11.8)	282.9 (55.7)		
General surgery	6,051 (882)	1.0 (0.1)			23,918 (3,999)	1.0 (0.2)			39.9 (3.9)	157.6 (20.5)		
Allergy	6,977 (974)	1.1 (0.2)			23,197 (2,958)	1.0 (0.1)			86.2 (2.2)	286.6 (24.0)		
Pulmonology	7,742 (1,019)	1.2 (0.2)			40,065 (6,356)	1.7 (0.3)			79.7 (2.7)	412.3 (33.9)		
All other specialties	84,998 (5,552)	13.6 (0.8)			352,469 (27,569)	15.3 (1.1)			62.3 (1.9)	258.3 (14.0)		

...Category not applicable.

<sup>1</sup>Visits at which one or more drugs were provided or prescribed.

<sup>2</sup>A drug mention is documentation in a patient's record of a drug provided, prescribed, or continued at a visit. Up to ten drug mentions were collected per visit in 2012 compared to a maximum of 8 drug mentions collected in 2011. Also defined as drug visits.

<sup>3</sup>Percent of visits that included one or more drugs provided or prescribed (number of visits divided by number of office visits multiplied by 100).

<sup>4</sup>Average number of drugs that were provided or prescribed per 100 visits (total number of drug mentions divided by total number of visits multiplied by 100).

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 25. Twenty most frequently mentioned drugs by therapeutic drug category at office visits: United States, 2012**

Therapeutic drug category <sup>1</sup>	Number of occurrences in thousands (standard error in thousands)		Percent of drug mentions <sup>2</sup> (standard error of percent)	
Analgesics	262,846	(8,654)	11.4	(0.2)
Antihyperlipidemic agents	120,042	(4,459)	5.2	(0.1)
Antidepressants	108,730	(3,764)	4.7	(0.1)
Anxiolytics, sedatives, and hypnotics	92,053	(3,311)	4.0	(0.1)
Antidiabetic agents	82,027	(3,744)	3.5	(0.1)
Antiplatelet agents	76,915	(3,345)	3.3	(0.1)
Beta-adrenergic blocking agents	75,543	(2,957)	3.3	(0.1)
Dermatological agents	74,862	(3,845)	3.2	(0.2)
Anticonvulsants	73,315	(2,860)	3.2	(0.1)
Vitamins	72,218	(3,236)	3.1	(0.1)
Bronchodilators	69,229	(2,698)	3.0	(0.1)
Proton pump inhibitors	67,025	(2,514)	2.9	(0.1)
Immunostimulants	63,651	(4,565)	2.8	(0.2)
Diuretics	56,142	(2,124)	2.4	(0.1)
Angiotensin converting enzyme inhibitors	56,121	(2,113)	2.4	(0.1)
Antihistamines	53,603	(1,920)	2.3	(0.1)
Adrenal cortical steroids	48,994	(1,926)	2.1	(0.1)
Vitamin and mineral combinations	45,736	(2,123)	2.0	(0.1)
Thyroid hormones	44,682	(1,899)	1.9	(0.1)
Minerals and electrolytes	43,026	(1,797)	1.9	(0.1)

<sup>1</sup>Based on Multum Lexicon second level therapeutic drug category (see [www.multum.com/lexicon.htm](http://www.multum.com/lexicon.htm)).

<sup>2</sup>Based on an estimated 2,310,812,000 drug mentions at office visits in 2012.

<sup>3</sup>Includes narcotic and nonnarcotic analgesics and nonsteroidal anti-inflammatory drugs.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 26. Twenty most frequently mentioned drug names at office visits, by new or continued status: United States, 2012**

Drug name <sup>1</sup>	Number of mentions in thousands (standard error in thousands)		Percent distribution (standard error of percent)		Total	Percent distribution (standard error of percent)						Therapeutic drug category <sup>3</sup>	
						New	Continued	Unknown <sup>2</sup>					
All drug mentions	2,310,812	(55,598)	100.0	...	100.0	24.7	(0.6)	74.1	(0.6)	1.2	(0.1)	...	
Aspirin	62,196	(2,717)	2.7	(0.1)	100.0	4.8	(0.5)	94.4	(0.5)	0.8	(0.2)	Analgesics, Antiplatelet agents	
Lisinopril	42,979	(1,741)	1.9	(0.1)	100.0	8.7	(0.7)	90.5	(0.8)	0.8	(0.2)	Angiotensin converting enzyme inhibitors	
Levothyroxine	41,438	(1,767)	1.8	(0.1)	100.0	6.4	(0.7)	92.9	(0.7)	0.7	(0.2)	Thyroid hormones	
Albuterol	38,496	(1,544)	1.7	(0.1)	100.0	21.8	(1.3)	77.0	(1.3)	1.1	(0.3)	Bronchodilators	
Simvastatin	37,060	(1,624)	1.6	(0.1)	100.0	4.9	(0.6)	94.2	(0.6)	0.9	(0.2)	Antihyperlipidemic agents	
Omeprazole	35,991	(1,503)	1.6	(0.0)	100.0	12.6	(0.9)	86.5	(1.0)	0.9	(0.2)	Proton pump inhibitors	
Acetaminophen-hydrocodone	35,609	(2,123)	1.5	(0.1)	100.0	27.8	(1.8)	71.0	(1.8)	*1.3	(0.4)	Analgesics	
Metoprolol	34,214	(1,569)	1.5	(0.0)	100.0	6.0	(0.7)	93.3	(0.7)	*0.7	(0.2)	Beta-adrenergic blocking agents	
Multivitamin	32,433	(1,579)	1.4	(0.1)	100.0	6.3	(0.8)	92.1	(0.9)	1.6	(0.4)	Vitamin and mineral combinations	
Metformin	29,362	(1,308)	1.3	(0.0)	100.0	7.5	(0.8)	91.7	(0.9)	*0.7	(0.3)	Antidiabetic agents	
Ibuprofen	28,320	(1,508)	1.2	(0.1)	100.0	42.8	(2.3)	54.9	(2.2)	*2.3	(0.7)	Analgesics	
Atorvastatin	26,223	(1,319)	1.1	(0.0)	100.0	6.7	(0.8)	92.3	(0.9)	*1.0	(0.3)	Antihyperlipidemic agents	
Amlodipine	25,273	(1,197)	1.1	(0.0)	100.0	8.3	(0.8)	90.9	(0.9)	*0.8	(0.3)	Calcium channel blocking agents	
Ergocalciferol	23,724	(1,411)	1.0	(0.1)	100.0	15.7	(1.3)	83.4	(1.3)	*0.9	(0.3)	Vitamins	
Furosemide	23,416	(1,075)	1.0	(0.0)	100.0	6.8	(0.8)	91.8	(0.9)	1.4	(0.4)	Diuretics	
Omega-3 polyunsaturated fatty acids	22,200	(1,169)	1.0	(0.0)	100.0	6.0	(0.8)	93.3	(0.8)	0.8	(0.2)	Nutraceutical products	
Fluticasone nasal	21,610	(1,119)	0.9	(0.0)	100.0	26.0	(1.7)	72.6	(1.8)	*1.4	(0.4)	Nasal preparations	
Alprazolam	20,640	(1,063)	0.9	(0.0)	100.0	11.7	(1.1)	86.8	(1.1)	*1.5	(0.5)	Anxiolytics, sedatives, and hypnotics	
Hydrochlorothiazide	20,519	(926)	0.9	(0.0)	100.0	6.9	(0.8)	91.7	(0.9)	*1.3	(0.4)	Diuretics	
Acetaminophen	20,504	(1,323)	0.9	(0.1)	100.0	41.8	(2.7)	56.4	(2.7)	*1.8	(0.6)	Analgesics	
Other	1,688,606	(38,702)	73.1	(0.3)	100.0	29.0	(0.7)	69.7	(0.7)	1.3	(0.1)	Other	

...Category not applicable.

0.0 Quantity more than zero but less than 0.05.

\*Figure does not meet standards of reliability or precision.

<sup>1</sup>Based on Multum Lexicon terminology, drug name reflects the active ingredient(s) of a drug provided, prescribed, or continued.

<sup>2</sup>Unknown includes drugs provided or prescribed that did not have either the new drug or continued drug checkboxes marked.

<sup>3</sup>Based on Multum Lexicon second-level therapeutic drug category (see [www.multum.com/lexicon.htm](http://www.multum.com/lexicon.htm)).

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 27. Providers seen at office visits: United States, 2012**

Type of Provider	Number of visits in thousands <sup>1</sup>		Percent of visits	
	(standard error in thousands)		(standard error of percent)	
All visits	928,630	(13,217)	...	...
Physician	901,528	(13,032)	97.1	(0.3)
R.N. <sup>2</sup> or L.P.N. <sup>3</sup>	169,592	(8,301)	18.3	(0.9)
Physician assistant	42,735	(4,667)	4.6	(0.5)
Nurse practitioner or midwife	28,624	(3,431)	3.1	(0.4)
Mental health provider	6,463	(1,252)	0.7	(0.1)
Other provider	141,357	(7,876)	15.2	(0.8)
Blank	2,724	(309)	0.3	(0.0)

...Category not applicable.

<sup>1</sup>Combined total of individual providers exceeds "all visits" and "percent of visits" exceeds 100%, because more than one provider may be reported per visit. The sample of visits was drawn from all scheduled visits to a sampled physician during the 1-week reporting period. However, at 2.9 percent of these visits, the physician was not seen; instead, the patient saw another provider. In addition, at many visits, patients were seen by multiple providers, the most common being a physician and an R.N. or L.P.N.

<sup>2</sup>R.N. is registered nurse.

<sup>3</sup>L.P.N. is licensed practical nurse.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 28. Disposition of office visits: United States, 2012**

Disposition	Number of visits in thousands <sup>1</sup>		Percent of visits	
	(standard error in thousands)		(standard error of percent)	
All visits	928,630	(13,217)	...	...
Return at specified time	621,312	(11,239)	66.9	(0.8)
Referred to other physician	74,453	(2,917)	8.0	(0.3)
Refer to emergency room/Admit to hospital	4,994	(542)	0.5	(0.1)
Other disposition	244,034	(7,880)	26.3	(0.7)
Blank	29,613	(2,802)	3.2	(0.3)

...Category not applicable.

<sup>1</sup>Combined total of individual dispositions exceeds "all visits", and "percent of visits" exceeds 100% because more than one disposition may be reported per visit.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 29. Time spent with physician: United States, 2012**

Time spent with physician	Number of visits in thousands (standard error in thousands)		Percent distribution (standard error of percent)	
All visits	928,630	(13,217)	100.0	...
Visits at which no physician was seen	27,102	(2,481)	2.9	(0.3)
Visits at which a physician was seen	901,528	(13,032)	97.1	(0.3)
Total <sup>1</sup>	901,528	...	100.0	...
1-5 minutes	13,308	(1,269)	1.5	(0.1)
6-10 minutes	87,486	(4,244)	9.7	(0.4)
11-15 minutes	295,938	(8,783)	32.8	(0.8)
16-30 minutes	369,280	(7,692)	41.0	(0.7)
31-60 minutes	121,428	(4,507)	13.5	(0.5)
61 minutes and over	14,089	(941)	1.6	(0.1)

...Category not applicable.

<sup>1</sup>Time spent with physicians only reported for visits where a physician was seen. Time spent with physicians was missing for 37.4 percent of visits where a physician was seen. Estimates presented include imputed values for missing data.

NOTE: Numbers may not add to totals because of rounding.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 30. Mean time spent with physician, by physician specialty: United States, 2012**

Physician specialty	Mean time in minutes spent with physician <sup>1</sup>	Standard error of mean	25th percentile	Median	75th percentile
All visits	22.6	0.2	14.3	18.9	29.1
Psychiatry	33.0	1.4	15.0	29.4	44.9
Neurology	30.5	1.7	14.9	25.4	39.1
Oncology	26.1	1.1	14.8	20.0	29.7
Internal medicine	24.4	0.5	14.5	19.6	29.6
Cardiovascular diseases	23.5	0.8	14.4	19.5	29.3
General surgery	22.2	1.1	14.1	16.1	29.0
General and family practice	21.4	0.4	14.3	17.4	26.7
Otolaryngology	19.4	1.2	14.1	14.8	20.6
Urology	21.4	0.7	14.3	17.8	24.6
Obstetrics and gynecology	21.5	0.6	14.3	18.4	26.4
Pediatrics	20.3	0.5	14.2	16.7	23.8
Orthopedic surgery	17.7	0.6	10.9	14.6	19.5
Ophthalmology	23.3	1.1	14.1	17.6	27.4
Dermatology	16.6	0.5	10.0	14.5	19.1
Allergy	27.9	0.9	15.0	24.5	31.2
Pulmonology	23.1	0.8	14.4	19.3	29.3
All other specialties	25.5	0.5	14.5	19.7	29.7

<sup>1</sup>Only visits where a physician was seen are included. Time spent with physicians was missing for 37.4 percent of visits where a physician was seen. Estimates presented include imputed values for missing data.

SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

**Table 31. In-scope sample physicians, their weighted percent distributions by Patient Record Form (PRF) response status, and PRF response rate, by physician characteristics: National Ambulatory Medical Care Survey, 2012 (Weighted by calibrated sampling weights.)**

Physician characteristic <sup>1</sup>	Number of sampled in-scope physicians <sup>2</sup>	In-scope sample percent distribution <sup>3</sup> (weighted)	Full PRF response status (weighted)		Response rate <sup>6</sup>
			Percent distribution of respondents <sup>4</sup>	Percent distribution of non-respondents <sup>5</sup>	
All office-based physicians	9,574	100.0	100.0	100.0	0.394
Age					
Under 50 years	3,741	40.4	40.4	40.4	0.394
50 years and over	5,833	59.6	59.6	59.6	0.393
Sex					
Male	7,239	71.6	70.8	72.1	0.389
Female	2,335	28.4	29.2	27.9	0.405
Division <sup>7</sup>					
New England	684	6.2	5.8	6.4	0.370
Middle Atlantic <sup>8,9</sup>	812	15.3	13.6	16.4	0.349
East North Central <sup>8</sup>	1,166	13.0	14.0	12.4	0.422
West North Central <sup>8</sup>	1,067	5.9	6.4	5.6	0.425
South Atlantic <sup>8,9</sup>	1,593	18.8	17.1	19.8	0.359
East South Central	1,092	5.7	5.6	5.8	0.386
West South Central	1,039	10.6	10.9	10.5	0.402
Mountain <sup>8</sup>	1,018	6.9	7.6	6.5	0.431
Pacific	1,103	17.5	19.0	16.5	0.429
Metropolitan Status <sup>7,10</sup>					
MSA <sup>8</sup>	8,473	91.7	90.8	92.3	0.390
Non-MSA <sup>8,9</sup>	1,101	8.3	9.2	7.7	0.438
Professional identity					
Doctor of medicine	9,083	94.1	94.0	94.3	0.393
Doctor of osteopathy	491	5.9	6.0	5.7	0.405
Physician specialty <sup>7,8,11</sup>					
General or family practice	1,265	17.1	17.8	16.7	0.409
Internal medicine <sup>8,9</sup>	811	12.8	11.2	13.9	0.343
Pediatrics <sup>8,9</sup>	688	10.3	13.2	8.4	0.506
General surgery	391	2.7	2.9	2.6	0.422
Obstetrics and gynecology	509	7.2	6.9	7.5	0.374
Orthopedic surgery	555	4.5	4.0	4.8	0.351
Cardiovascular diseases	416	3.6	3.4	3.8	0.367
Dermatology	260	2.5	2.7	2.3	0.428
Urology	243	1.9	1.8	1.9	0.375
Psychiatry	597	5.9	5.8	6.0	0.383
Neurology	232	2.3	2.5	2.1	0.438
Ophthalmology	448	3.8	3.8	3.8	0.392
Otolaryngology	220	1.9	1.7	2.0	0.355
All other specialties	1,705	19.0	18.1	19.6	0.375
Oncologists <sup>8,9</sup>	416	1.9	1.4	2.2	0.301
Allergists	398	0.9	0.9	0.8	0.437
Pulmonologists	420	1.8	1.9	1.7	0.431
Specialty type <sup>11</sup>					
Primary care	3,204	46.7	48.2	45.8	0.406
Surgical <sup>8</sup>	2,411	20.7	19.5	21.5	0.371
Medical	3,959	32.5	32.3	32.7	0.390
Practice type					
Solo	2,089	23.7	24.6	23.2	0.408
Two physicians	426	4.4	4.2	4.5	0.377
Group or HMO <sup>12</sup>	5,993	59.4	58.6	60.0	0.388
Medical school or government	116	1.3	1.3	1.3	0.406
Other	88	1.1	1.3	1.0	0.474
Unclassified	862	10.0	9.9	10.1	0.390
Annual visit volume <sup>7</sup>					
0-25% Percentile <sup>8</sup>	2,607	25.0	34.7	18.8	0.545
26-50% Percentile <sup>8</sup>	2,574	25.2	20.6	28.1	0.322

51-75% Percentile <sup>8</sup>	2,155	24.8	17.9	29.3	0.283
76-100% Percentile <sup>8</sup>	2,238	25.0	26.9	23.8	0.423

<sup>1</sup>Characteristic information is from the master files of the American Medical Association, the American Osteopathic Association, updated during the survey.

<sup>2</sup>In-scope physicians are those who verified that they were nonfederal and involved in direct patient care in an office-based setting, excluding the specialties of radiology, pathology, and anesthesiology.

<sup>3</sup>Total physicians are those who were selected from (a) the master files of the American Medical Association, (b) the American Osteopathic Association. In-scope determination was also used for inclusion in NAMCS.

<sup>4</sup>Responding physicians are those who were in-scope and participated fully in completion of PRFs or were unavailable to complete PRFs.

<sup>5</sup>Nonresponding physicians are those physicians those who were in-scope and participated minimally or refused to participate in the NAMCS.

<sup>6</sup>Values represent a response rate among physicians selected from the office-based sample. Numerator is the number of in-scope physicians from the physician sample who participated fully in NAMCS or who did not see any patients during their sampled reporting week. Denominator is all in-scope physicians selected from the physician sample.

<sup>7</sup>Chi-square test of association is significant ( $p < 0.05$ ) between physician response and indicated physician characteristic.

<sup>8</sup>Difference between responding and nonresponding percentage is statistically significant ( $p < 0.05$ ).

<sup>9</sup>Response rate is significantly different from national rate ( $p < 0.05$ ).

<sup>10</sup>MSA is metropolitan statistical area.

<sup>11</sup>Physician specialty type defined in the 2012 NAMCS Public Use DataFile Documentation (see [ftp://ftp.cdc.gov/pub/Health\\_Statistics/NCHS/Dataset\\_Documentation/NAMCS/doc2012.pdf](ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2012.pdf)).

<sup>12</sup>HMO health maintenance organization.

SOURCE: CDC/NCHS, 2012 National Ambulatory Medical Care Survey.

**Table 32. In-scope sample physicians, their weighted percent distributions by Patient Record Form (PRF) response status, and PRF response rate, by state location of physician office: National Ambulatory Medical Care Survey, 2012 (Weighted by calibrated sampling weights.)**

Location of office where most visits were seen		Number of sampled in-scope physicians <sup>2</sup>	In-scope sample percent distribution <sup>3</sup> (weighted)	Full PRF response status (weighted)		
Division	State <sup>1</sup>			Percent distribution of respondents <sup>4</sup>	Percent distribution of non-respondents <sup>5</sup>	Response rate <sup>6</sup>
Total		9,574	100.0	100.0	100.0	0.394
New England						
	Connecticut	276	1.6	1.7	1.6	0.402
	Massachusetts	249	2.7	2.7	2.6	0.401
	Remainder States (ME, NH, RH, VT) <sup>7,8</sup>	159	1.9	1.4	2.2	0.300
Middle Atlantic						
	New Jersey <sup>7,8</sup>	291	3.9	3.3	4.3	0.333
	New York	287	7.5	7.0	7.8	0.367
	Pennsylvania <sup>7</sup>	233	3.9	3.3	4.3	0.333
East North Central						
	Illinois	264	3.9	4.0	3.9	0.402
	Indiana <sup>7,8</sup>	274	2.0	2.4	1.7	0.476
	Michigan	175	2.3	2.6	2.1	0.443
	Ohio	210	3.0	2.9	3.0	0.384
	Wisconsin	243	1.9	2.1	1.7	0.443
West North Central						
	Iowa <sup>7,8</sup>	263	0.8	1.0	0.7	0.481
	Kansas	232	0.8	0.9	0.7	0.462
	Minnesota	262	1.9	1.6	2.0	0.347
	Missouri <sup>7,8</sup>	188	1.2	1.4	1.0	0.471
	Remainder States (NE, ND, SD)	122	1.2	1.4	1.1	0.437
South Atlantic						
	Florida <sup>7,8</sup>	304	7.0	6.0	7.7	0.334
	Georgia	255	2.8	2.7	2.9	0.380
	Maryland <sup>7,8</sup>	226	2.2	1.7	2.5	0.315
	North Carolina	199	2.3	2.3	2.2	0.409
	South Carolina	187	1.0	0.9	1.1	0.355
	Virginia	234	2.4	2.5	2.4	0.407
	Remainder States (DC, DE, WV)	188	1.0	0.9	1.1	0.353
East South Central						
	Alabama	265	1.4	1.3	1.4	0.393
	Kentucky	253	1.3	1.1	1.3	0.357
	Mississippi	252	0.7	0.7	0.7	0.397
	Tennessee	322	2.4	2.5	2.4	0.394
West South Central						
	Arkansas	226	0.7	0.7	0.7	0.392
	Louisiana <sup>7,8</sup>	251	1.4	1.1	1.6	0.311
	Oklahoma	221	0.9	1.0	0.8	0.440
	Texas	342	7.6	8.0	7.3	0.416
Mountain						
	Arizona	277	1.9	2.1	1.8	0.424
	Colorado	271	1.8	2.0	1.7	0.440
	Utah <sup>7,8</sup>	257	0.8	1.2	0.5	0.585
	Remainder States (ID,NM,MT,NV,WY)	212	2.4	2.3	2.4	0.379
Pacific						
	California <sup>7</sup>	346	13.3	14.9	12.3	0.441
	Oregon <sup>7</sup>	269	1.5	1.3	1.7	0.336
	Washington	215	1.9	2.1	1.8	0.420
	Remainder States (AK, HI)	274	0.7	0.8	0.7	0.401

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<sup>1</sup>Chi-square test of association is significant ( $p < 0.05$ ) between physician response and indicated physician characteristic.

<sup>2</sup>In-scope physicians are those who verified that they were nonfederal and involved in direct patient care in an office-based, excluding the specialties of radiology, pathology, and anesthesiology.

<sup>3</sup>Total physicians are those who were selected from (a) the master files of the American Medical Association, (b) the American Osteopathic Association. In-scope determination was also used for inclusion in NAMCS.

<sup>4</sup>Responding physicians are those who were in-scope and participated fully in completion of PRFs or were unavailable to complete PRFs.

<sup>5</sup>Nonresponding physicians are those physicians those who were in-scope and participated minimally or refused to participate in the NAMCS.

<sup>6</sup>Values represent a response rate among physicians selected from the office-based sample. Numerator is the number of in-scope physicians from the physician sample who participated fully in NAMCS or who did not see any patients during their sampled reporting week. Denominator is all in-scope physicians selected from the physician sample.

<sup>7</sup>Difference between responding and nonresponding percentage is statistically significant ( $p < 0.05$ ).

<sup>8</sup>State response rate is significantly different from national rate ( $p < 0.05$ ).

SOURCE: CDC/NCHS, 2012 National Ambulatory Medical Care Survey