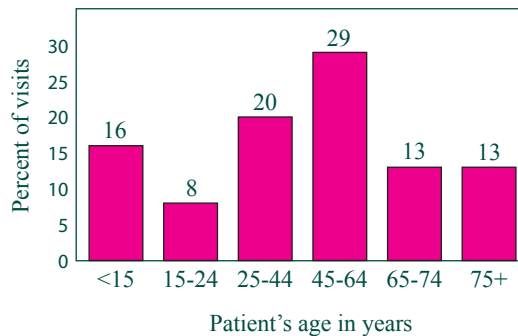


## PHYSICIAN OFFICE VISITS

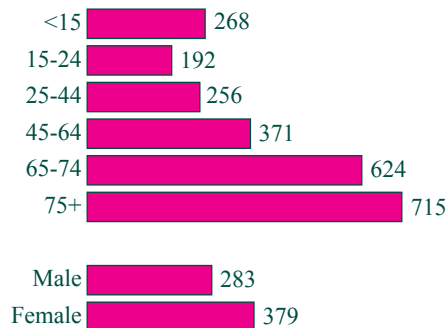
**In 2010, there were an estimated 1 billion visits to nonfederally employed, office-based physicians in the United States. Almost half of the visits were made by persons 25–64 years of age.**

Percent distribution of office visits by patient's age: 2010



**The annual visit rate increased with age from age 15. The visit rate was highest for persons 75 years and over. Females had a higher visit rate than males.**

Annual office visit rates by patient's age and sex: 2010



Number of visits per 100 persons per year

**Expected source(s) of payment included:**

- Private insurance — 53%
- Medicare — 25%
- Medicaid/CHIP — 12%
- No insurance<sup>1</sup> — 4%
- Worker's compensation — 1%

<sup>1</sup> No insurance is defined as having only self-pay, no charge, or charity visits as payment sources.

**The major reason for visit was:**

- New problem — 34%
- Chronic problem, routine — 29%
- Preventative care — 21%
- Chronic problem, flare-up — 8%
- Pre- or post-surgery/injury follow-up — 6%

**The top 5 reasons given by patients for visiting physicians were:**

- Progress visit
- General medical examination
- Cough
- Postoperative visit
- Medication visit

**The top 5 diagnoses were:**

- Routine infant or child health check
- Essential hypertension
- Diabetes mellitus
- Normal pregnancy
- General medical examination

**Medications were provided or prescribed at 74 percent of office visits. The top 5 generic substances utilized were:**

- Aspirin
- Simvastatin
- Lisinopril
- Levothyroxine
- Albuterol

**For more information, contact the Ambulatory and Hospital Care Statistics Branch at 301-458-4600 or visit our Web site at <[www.cdc.gov/namcs](http://www.cdc.gov/namcs)>.**

**NAMCS data are widely used in research studies appearing in nationally recognized medical journals, including *JAMA*, *Archives of Internal Medicine* (renamed *JAMA Internal Medicine*), and the *American Journal of Medicine*. Here are a few recent publications using NAMCS data:**

Kraschnewski JL, Sciamanna CN, Stuckey HL, Chuang CH, Lehman EB, Hwang KO, Sherwood LL, Nembhard HB. A silent response to the obesity epidemic: decline in US physician weight counseling. *Med Care*. 51(2):186-192. Feb 2013.

Kale MS, Bishop TF, Federman AD, Keyhani S. Trends in the overuse of ambulatory health care services in the United States. *Arch Intern Med*. 24:1-7. Dec 2012.

Tundia NL, Kelton CM, Cavanaugh TM, Guo JJ, Hanseman DJ, Heaton PC. The effect of electronic medical record system sophistication on preventive healthcare for women. *J Am Med Inform Assoc*. Oct 2012. [Epub ahead of print]

Mehta H, Patel J, Parikh R, Abughosh S. Differences in obesity management among physicians. *Popul Health Manag*. 15(5):287-292. Oct 2012.

Kepka D, Berkowitz Z, Yabroff KR, Roland K, Saraiya M. Human papillomavirus vaccine practices in the USA: do primary care providers use sexual history and cervical cancer screening results to make HPV vaccine recommendations? *Sex Transm Infect*. 88(6):433-435. Oct 2012.

Jamal A, Dube SR, Malarcher AM, Shaw L, Engstrom MC; Office on Smoking and Health, National Center for Chronic Disease Prevention and Health Promotion. Tobacco use screening and counseling during physician office visits among adults - National Ambulatory Medical Care Survey and National Health Interview Survey, United States, 2005-2009. *MMWR Surveill Summ*. 61(2):38-45. Jun 2012.

Bishop TF, Federman AD, Ross JS. Association between physician quality improvement incentives and ambulatory quality measures. *Am J Manag Care*. 18(4):e126-e134. Apr 2012.

Hollingsworth JM, Saint S, Sakshaug JW, Hayward RA, Zhang L, Miller DC. Physician practices and readiness for medical home reforms: policy, pitfalls, and possibilities. *Health Serv Res*. 47(1 Pt 2):486-508. Feb 2012.

Pickett-Blakely O, Bleich SN, Cooper LA. Patient-physician gender concordance and weight-related counseling of obese patients. *Am J Prev Med*. 40(6):616-619. Jun 2011.

Strumpf EC. Racial/Ethnic disparities in primary care: the role of physician-patient concordance. *Med Care*. 49(5):496-503. May 2011.

Sacks JJ, Luo YH, Helmick CG. Prevalence of specific types of arthritis and other rheumatic conditions in the ambulatory health care system in the United States, 2001-2005. *Arthritis Care Res (Hoboken)*. 62(4):460-464. Apr 2010.

**A complete list of publications using NAMCS data, which includes articles and reports, can be found at our Web site: [http://www.cdc.gov/nchs/ahcd/ahcd\\_products.htm](http://www.cdc.gov/nchs/ahcd/ahcd_products.htm)**