NCHS Update for the Board of Scientific Counselors



Charles J. Rothwell

Director, NCHS

September 24, 2015



BSC Updates

- Thank you to our retiring members:
 - Raynard S. Kington, M.D., Ph.D., Chair
 - Christine L. Himes, Ph.D.
 - Hermann Habermann, Ph.D.

ADMINISTRATIVE AND BUDGET UPDATES



Goodbye to our friend and colleague, Al Zarate

- 30 years of service with NCHS, retired in 2009.
- As Confidentiality Officer, Al developed the policies and practices which enabled NCHS to meet our legislative mandate for protecting the identity of survey participants.
- Provided leadership throughout the federal statistical community on privacy and confidentiality.



Staff Updates

 David Woodwell is returning to NCHS as Planning Branch Chief for Division of Health and Nutrition Examination Surveys.

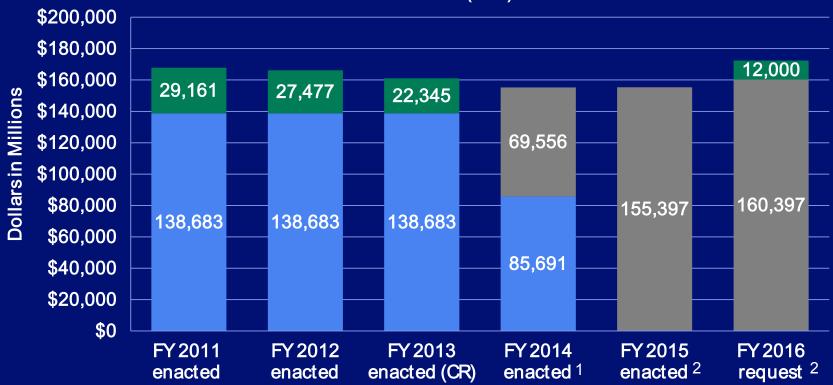
Budget Update

- FY 2015 Health Statistics Appropriation: \$155,397,000 in Budget Authority – level with FY 2014 and consistent with the FY 2015 request.
- FY 2016 budget unknown...

FY 2016 Budget	President's request	House version	Senate version
Budget Authority	\$160,397,000	\$160,397,000	\$145,397,000
Prevention and Public Health Fund	\$12,000,000	\$0	\$0
TOTAL	\$172,397,000	\$160,397,000	\$145,397,000

NCHS Budget History

- Prevention and Public Health Fund
- ■Budget Authority
- Public Health Service (PHS) Evaluation Funds



¹Amount includes \$15,397 million in Budget Authority for administrative and business services through the CDC Working Capital Fund.

²Amount includes funding for administrative and business services through the CDC Working Capital Fund.

NOTE: CR is continuing resolution.

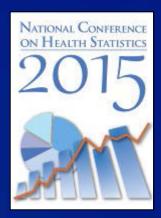
Other Administrative Updates

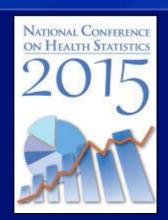
Building move date:



2015 NATIONAL CONFERENCE ON HEALTH STATISTICS







- Approximately 900 attendees (1,300 registered)
 - 42% of registrants were federal employees from CDC, USDA, SAMHSA, SSA, AHRQ, VA, ASPR, NCI, FDA, CMS, DOJ, DOT, IHS, and others
 - 10% from NCHS
 - 58% of registrants were from non-profits, state/local governments, businesses, universities, and health care practitioners

- 23 Learning Institute Sessions
 - 15 Hands-on Sessions
 - 8 Lecture Sessions





30 Scientific Sessions



2 Plenary Sessions

- Session I: Health Disparities and Health Equity
 - Irma E Arispe, Ph.D., Division Director, Office of Analysis and Epidemiology (CDC/NCHS)
 - J. Nadine Gracia, M.D., M.S.C.E replaced by Alexis Bakos, PhD, MPH, RN, Senior Advisor to the Deputy Assistant Secretary for Minority Health in the Office of Minority Health, HHS

- Session II: The Federal Statistical System: Joining Forces to Meet Future Data Needs and Challenges (Panel Discussion)
 - Moderator: Charles J. Rothwell, Director, NCHS
 - Panelists:
 - Katherine K. Wallman, Chief Statistician, U.S. Office of Management and Budget
 - John H. Thompson, Director, U.S. Census Bureau
 - Barry D. Nussbaum, Chief Statistician, Environmental Protection Agency (EPA) and President-elect of the American Statistical Association



- Meet NCHS Leadership session
- Exhibit Hall expanded to include NCHS booths on:
 - Employment
 - Social media
 - Ask the expert
 - Data access tools and resources
 - NCHS History Project
- 10 non-NCHS exhibits





2015 NCHS Conference Poster Session

- 180 abstracts submitted from all over the world
 - 40% increase in submissions from 2012
 - 30% submitted by student researchers
 - >50% from academic institutions or medical centers
- Overall 69% acceptance rate



Two Student Award Opportunities

- The Student Research Showcase recognized the four best poster abstracts first authored by a student
 - Sharifa Z. Barracks, M.S., M.P.H. (Columbia University)
 - Mary Kwakyepeprah, M.A. (University of Ottawa)
 - Yu-Hsiu Lin, M.B.A., RN. (University of South Carolina)
 - Crystal E Romeo Upperman, M.P.A. (University of Maryland)
- The Student Poster Prize recognized the best poster presentations by 6 students
 - 1st Place: Alison Stewart Ng
 - 2nd Place: Betelihem B. Tobo
 - 3rd Place: Adrian Matias Bacong
 - Walid A. Al-Soneidar
 - Sahel Hazrati
 - Cassandra A. Phillips

Congratulations!

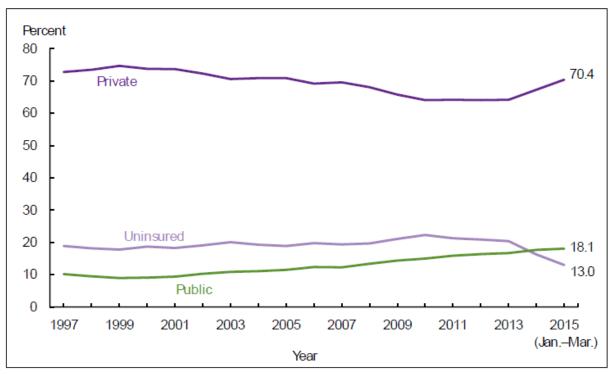


PROGRAM UPDATES



Monitoring Health Insurance Using the National Health Interview Survey (NHIS)

Figure 1. Percentage of adults aged 18–64 who were uninsured or had private or public coverage at the time of interview: United States, 1997–March 2015



NOTE Data are based on household interviews of a sample of the civilian noninstitutionalized population. SOURCE CDC/NCHS, National Health Interview Survey, 1997–2015, Family Core component.

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population. SOURCE: CDC/NCHS, National Health Interview Survey, 1997-2015, Family Core component.

Media Coverage of Latest NHIS Release

The New york Times

Number of Uninsured Has Declined by 15 Million Since 2013, Administration Says

By ROBERT PEAR AUG. 12, 2015



U.S. uninsured rate drops steeply over past year

By Kevin Liptak, CNN White House Producer
Updated 4:56 PM FT, Wed August 12, 2015





Federal report: 7 million fewer Americans uninsured this year

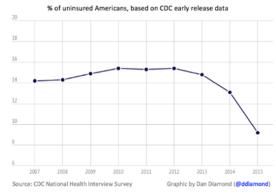
Laura Ungar, USAToday 1:28 a.m. EDT August 12, 2015

Forbes

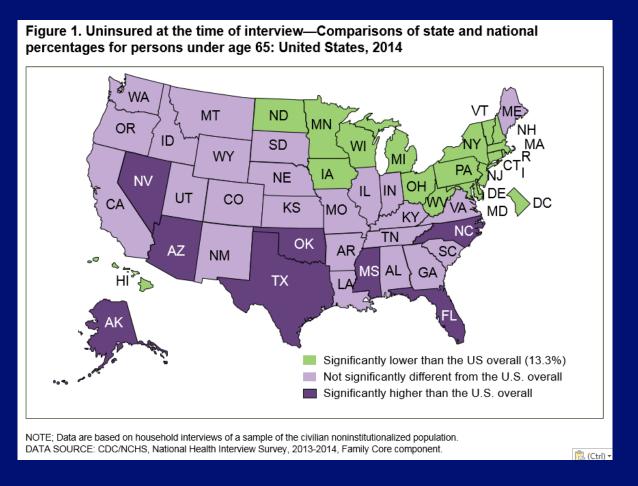
PHARMA & HEALTHCARE 8/12/2015 @ 10:17AM | 24,968 view

Thanks, Obamacare: America's Uninsured Rate Is Below 10% For First Time Ever

CDC: Uninsured rate falls below 10%



First Time for State-Specific Health Insurance Estimates for all 50 States and D.C.



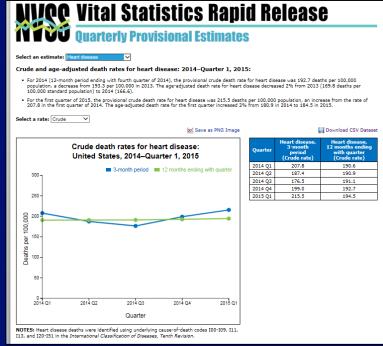
NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population. SOURCE: CDC/NCHS, National Health Interview Survey, 2013-2014, Family Core component.

Outcome of Faster Vital Statistics Reporting: Quarterly Monitoring of Key Indicators

First release of provisional mortality through first Quarter of 2015 released in August 2015.

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- Alzheimer's
- Diabetes
- Heart disease
- Stroke
- HIV/AIDS
- Influenza
- Falls among aged 65+



 Plan to expand list of provisional mortality estimates and add provisional estimates of birth data in 2016.

Vital Statistics Rapid Release Quarterly Provisional Estimates

Select an estimate: Influenza and pneumonia ✓

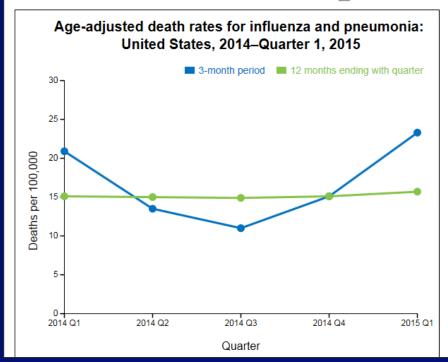
Crude and age-adjusted death rates for influenza and pneumonia: 2014-Quarter 1, 2015:

- For 2014 (12-month period ending with fourth quarter of 2014), the provisional crude death rate for influenza and pneumonia was 17.3 deaths per 100,000 population, a decrease from 18.0 deaths per 100,000 in 2013. The age-adjusted death rate for influenza and pneumonia decreased 5% from 2013 (15.9 deaths per 100,000 standard population) to 2014 (15.1).
- For the first quarter of 2015, the provisional crude death rate for influenza and pneumonia was 27.2 deaths per 100,000 population, higher than the death rate of 23.8 in the first quarter of 2014. The increase remained after adjustment for age (23.3 and 20.9, respectively).

Select a rate: Age-adjusted ✓

🔀 Save as PNG Image





Quarter	Influenza and pneumonia, 3-month period (Age-adjusted rate)	Influenza and pneumonia, 12 months ending with quarter (Age-adjusted rate)		
2014 Q1	20.9	15.1		
2014 Q2	13.5	15.0		
2014 Q3	11.0	14.9		
2014 Q4	15.1	15.1		
2015 Q1	23.3	15.7		



QQ Vital Statistics Rapid Release

Quarterly Provisional Estimates

Select an estimate: Falls, ages 65 and over ∨

Crude and age-adjusted death rates for falls, ages 65 and over: 2014-Quarter 1, 2015:

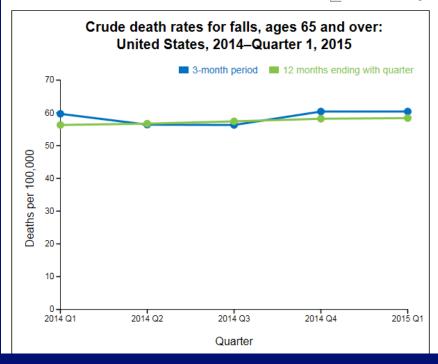
- . For 2014 (12-month period ending with fourth quarter of 2014), the provisional crude death rate for falls among persons ages 65 and over was 58.2 deaths per 100,000 population, an increase from 57.0 deaths per 100,000 in 2013. The age-adjusted death rate for falls in this age group increased 3% from 2013 (56.7 deaths per 100,000 standard population) to 2014 (58.4).
- . For the first quarter of 2015, the provisional crude death rate from falls among persons ages 65 and over was 60.4 deaths per 100,000 population, similar to that for the first quarter of 2014 (59.7). The death rates remained similar after adjustment for age (61.1 and 59.8, respectively).

Select a rate:

Save as PNG Image



Download CSV Dataset



Quarter	Falls, ages 65 and over, 3-month period (Crude rate)	Falls, ages 65 and over, 12 months ending with quarter (Crude rate)
2014 Q1	59.7	56.3
2014 Q2	56.4	56.7
2014 Q3	56.3	57.4
2014 Q4	60.4	58.2
2015 Q1	60.4	58.4

Health, United States, 2014

Vital Statistics/National Survey of Family Growth

- Births: Final Data for 2013
- Trends in Long-acting Reversible Contraception Use Among U.S. Women Aged 15–44
- Drug Poisoning Deaths Involving Heroin: United States, 2000-2013
- Hypertension-related Mortality in the United States, 2000–2013
- Interpregnancy Intervals in the United States: Data From the Birth Certificate and the National Survey of Family Growth
- Unintentional Injury Deaths Among Adults Aged 65 and Over: United States, 2000-2013
- When Are Babies Born: Morning, Noon, or Night? Birth Certificate Data for 2013
- Maternal Morbidity for Vaginal and Cesarean Deliveries according to Previous Cesarean
 History: New Data from the Birth Certificate
- Measuring Gestational Age in Vital Statistics Data: Transitioning to the Obstetric Estimate
- HIV Testing in the Past Year Among the U.S. Household Population Aged 15-44: National Survey of Family Growth, 2011-2013

Vital Statistics/National Survey of Family Growth (cont.)

- Three Decades of Nonmarital First Births Among Fathers Aged 15-44 in the United States
- Births: Preliminary Data for 2014
- Differences in Stroke Mortality Among Adults Aged 45 and Over in the United States, 2010 2013
- Sexual Activity, Contraceptive Use and Childbearing of Teens Aged 15-19 in the United States
- Fetal and Perinatal Mortality: United States, 2013
- Deaths: Final Data for 2011
- Deaths: Leading Causes for 2011
- Infant Mortality Statistics From the 2013 Period Linked Birth Infant Death Data Set
- Quarterly Provisional Estimates for Selected Causes of Death: Q1 2014 Q1 2015
- Deaths: Final Data for 2012
- Deaths: Leading Causes for 2012

National Health Care Surveys

- Hospitalizations for Patients Aged 85 Years and Over in the United States: 2000 to 2010
- Emergency Department Visits for Motor Vehicle Traffic Injuries: United States, 2010-2011
- Hospitalization for Total Hip Replacements Among Inpatients Age 45 and Over: United States, 2000-2010
- Progress with Electronic Health Records Adoption among Emergency Departments and Outpatient Departments: U.S., 2006–2011
- Emergency Department Visits and Proximity To Patients' Residence: United States, 2009 2010
- Acceptance by Office-based Physicians of New Patients with Public and Private Insurance:
 United States, 2013
- Trends in Emergency Department Visits for Ischemic Stroke and Transient Ischemic Attack:
 United States, 2001-2011
- Emergency Department Visits for Drug Poisoning: United States, 2008-2011
- Hospitalization for Total Knee Replacement Among Inpatients Aged 45 and Over: United States, 2000-2010
- Variation in Physician Office Visit Rates by Patient Characteristics and State, 2012

National Health and Nutrition Examination Survey

- Lung Obstruction Among U.S. Adults Aged 40-79, NHANES 2007-2012
- Cigarette Smoking and Lung Obstruction Among U.S. Adults Aged 40-79: United States,
 2007-2012
- Prevalence of Reduced Muscle Strength in Older U.S. Adults: United States, 2011-2012
- Prescription Opioid Use Among U.S. Adults
- Dental Caries and Sealant Prevalence in Children and Adolescents in the United States,
 2011-12
- Trends in Elevated Triglyceride in Adults, United States, 2001-2012
- Dental Caries and Dentate Status in Adults in the United States, 2011-12
- National Health and Nutrition Examination Survey Biospecimen Program: NHANES III (1988–1994) and NHANES 1999–2014
- Percentage of Adults Age 65 Years and Over with Osteoporosis or Low Bone Mass at the Femur Neck or Lumbar Spine: United States, 2005-2010
- Prevalence of Childhood Obesity in Canada and the United States
- Caloric Intake from Fast Food among Children and Adolescents in the US, 2011-2012

National Health Interview Survey

- Strategies Used by Adults to Reduce their Prescription Drug Costs, 2013
- Health Care Utilization Among Adults with Diagnosed Diabetes
- Use of Complementary Health Approaches among Children Aged 4-17 Years in the United States: National Health Interview Survey, 2007 and 2012
- Trends in the Use of Complementary Health Approaches Among Adults: United States,
 2002-2012
- Problems Paying Medical Bills: Early Release of Estimates from the National Health Interview Survey, January 2011-June 2014
- Early Release of Estimates Based on Data From the January-September 2014 National Health Interview Survey
- Health Insurance Coverage: Estimates from the National Health Interview Survey, January-September 2014
- Health Insurance Coverage Status by Selected Demographics, Year and Quarter 2010 September 2014
- Association Between Diagnosed ADHD and Selected Characteristics Among Children Aged
 4–17 Years: United States, 2011–2013

National Health Interview Survey (cont.)

- Insurance Status by State Medicaid Expansion Status: Early Release of Estimates From the National Health Interview Survey, 2013-September 2014
- Serious Psychological Distress in Adults: United States, 2009-2013
- Characteristics of Children in Medicaid Managed Care and Medicaid Fee for Service, 2003 2005
- Communication Disorders and Utilization of Intervention Services Among Children Aged 3 17 Years: United States, 2012
- Racial and Ethnic Disparities in Men's Use of Mental Health Treatments
- Early Release of Estimates Based on Data From the 2014 National Health Interview Survey
- Health Insurance Coverage: Estimates from the National Health Interview Survey, 2014
- Health Insurance Annual State Estimate Tables, 2014
- Wireless Substitution: Early Release of Estimates From the National Health Interview Survey, July-December 2015
- Health Care Access and Utilization Among Adults Aged 18-64, by Race and Hispanic Origin:
 United States, 2013-2014

2015 NCHS Publications

National Health Interview Survey (cont.)

- Any Visit to the Eye Doctor in the Past 12 Months Among Adults Diagnosed With Diabetes,
 by Years Since Diabetes Diagnosis and by Age: United States, 2012-2013
- Health Insurance Coverage: Estimates from the National Health Interview Survey, January-March 2015
- Early Release of Selected Estimates Based on Data From the January–March 2015 National Health Interview Survey
- Diagnostic Experiences of Children with Attention-Deficit/Hyperactivity Disorder
- Reported Child Health Status, Hispanic Ethnicity, and Language of Interview: United States,
 2011-2012
- Comparison of the Prevalence of Uninsured Persons From the National Health Interview
 Survey and the Current Population Survey, January—April 201
- Self-Reported Hearing Trouble in Adults Aged 18 and Over: United States, 2014

NCHS Data Visualization Gallery

- Exploring visualization methods to allow users to customize charts and maps.
- Starting with vital statistics, dashboards are currently available for:
 - U.S. and State Trends on Teen Births, 1990–2013
 - Deaths in the United States, 1900–2013
 - Top 10 Leading Causes of Death: United States, 1999–2013
 - Natality Trends in the United States, 1909–2013
 - Births and Birth Rates for Unmarried Women: United States,
 Selected Years 1940–2013

NCHS /

Data Visualization Gallery

...Visualizing the Nation's Health

Home

Chart Type

Area Charts

Bar Charts

Line Graphs

Maps

Data Systems

NVSS

Health Topics

Births and Deaths

leading causes of deaths

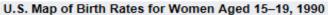
mortality trends

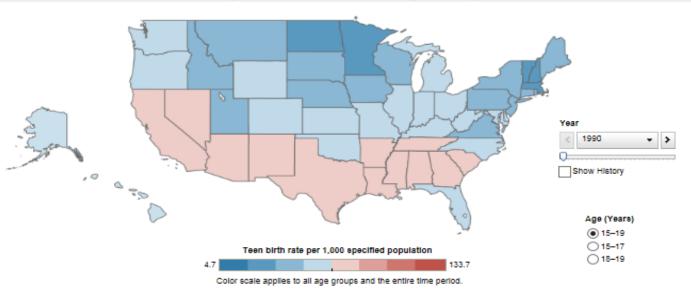
natality trends

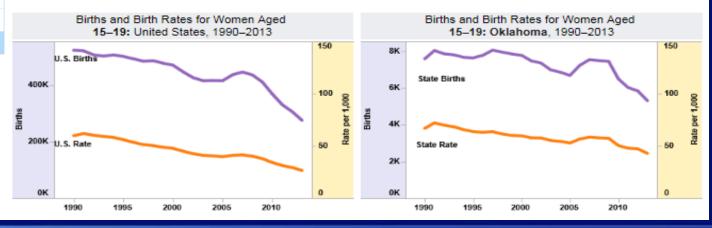
nonmarital births

teen births

Archive





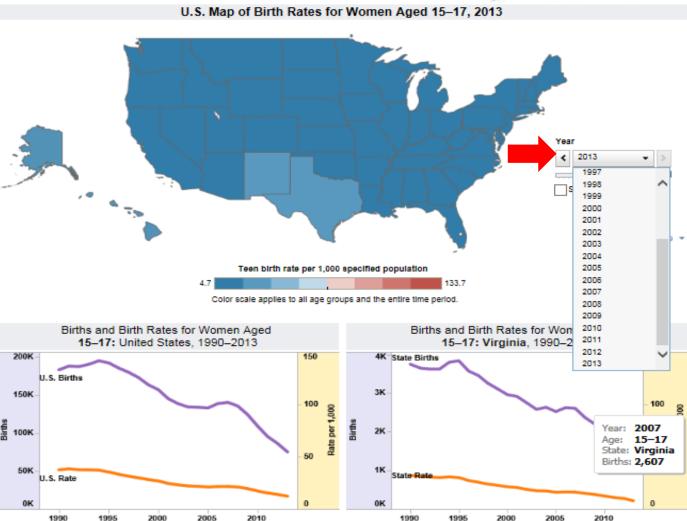


NCHS /:

Data Visualization Gallery

...Visualizing the Nation's Health

Archive



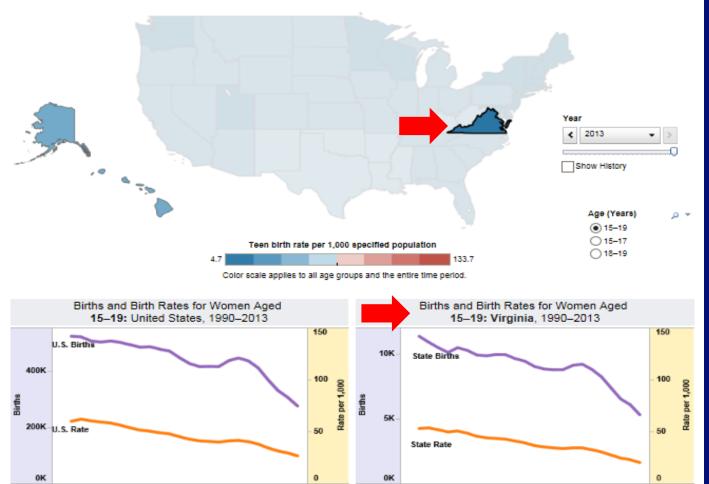
NCHS 📜

Data Visualization Gallery

...Visualizing the Nation's Health

U.S. Map of Birth Rates for Women Aged 15-19, 2013

Archive

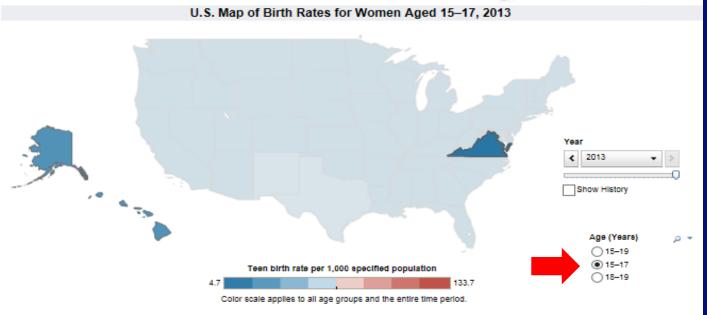


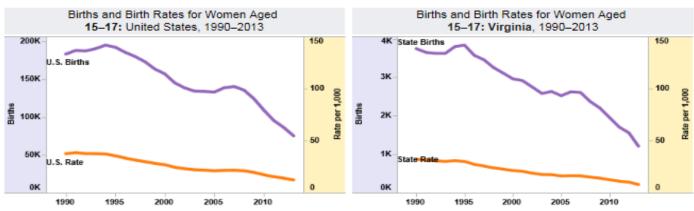
NCHS :

Data Visualization Gallery

...Visualizing the Nation's Health

Archive





NHANES 2013–2014 Data Release and Key Publications

9 month turnaround on 2013-2014 data release

January 31
Data Collection Completed

August 28
First files sent for Collaborator Review

October 30
Public Data Release



6 Exams

23 Questionnaire

34 Laboratory

9 Key NCHS Data Briefs to coincide with data release

Obesity, HTN, Cholesterol, Diabetes, Tobacco Exposure, Asthma, Hepatitis, HPV

NHANES Longitudinal Follow-Ups

Oral HPV Follow-Up Study

- DHANES is collaborating with NCI, NIDCR, and Ohio State University to pilot test the inclusion of a longitudinal follow-up to learn about the natural history of oral HPV.
- Recruited 215 participants ages 18-69 who completed an oral rinse to do a second rinse using a kit mailed to their home during July-August 2015. Also asked to complete a short questionnaire (on-line, by phone, or paper form).
- Pilot will inform us about the rates of successful re-contact and followup participation; and 2) to evaluate the quality of self-collected oral rinse samples.
- New component would include self-collection of oral specimens at 6, 12, 18, and 24 months from baseline, beginning in 2017.

NHANES Longitudinal Follow-Ups

NHANES Follow-Up Study

- Random sample of 600 participants will be traced, recontacted, and asked to participate in an interview (on-line, phone or paper).
 - If funding permits, hospital records data will be obtained for recent hospitalizations.
 - If approved, next-of-kin would be contacted to get information on participants who have died during the follow-up period.
- Initially, CDC's Division of Diabetes Translation is collaborating with DHANES. Should the feasibility test be successful, a wide-range of collaborators will be sought to partner with NCHS on a main longitudinal study.

NHANES Biospecimen Program

- "National Health and Nutrition Examination Survey Biospecimen Program: NHANES III (1988–1994) and NHANES 1999–2014" published July 2015.
- NHANES Biospecimen Program Web page updated: http://www.cdc.gov/nchs/nhanes/biospecimens/biospecimens.htm
- DNA repository to open in early 2016.

Overview of Biochecimene Table

Biospecimen availability by type and NHANES survey cycle									
	Specimen Type								
NHANES Cycle	Pristine			Surplus			DNA		
	Sera	Plasma	Urine	Sera	Plasma	Urine	DNA		
III(1988-1994)	Х			X			X		
1999-2000	Х	Х	Х	X	Х	Х	Х		
2001-2002	Х	Х	X	X	Х	Х	Х		
2001-2002	Х	X	X	X	Х	Х	X		
2003-2004	Х	Х	Х	X					
2005-2006	Х	X	Х	X					
2007-2008	Х	Х	Х	X			Х		
2009-2010	Х	Х	Х	X			Х		
2011-2012	Х		Х	X			Х		
2013-2014	X		X	Х					

SOURCE: CDC/NCHS, National Health and Nutrition Examination Survey, 2015.

The FastStats Application

Topic-specific statistics at your fingertips:

- Content is updated automatically
- Most up-to-date health statistics available
- View updated statistics on more than 100 public health topics
- Highlight, annotate, and bookmark important data within the app
- Share data discoveries with colleagues through social media such as Facebook and Twitter



CDC FastStats FastStats



Whats New (2)	>	
2015 National Conference on Health Statistics (10)		
Chronic Diseases and Conditions (10)		
Infectious Diseases (9)	>	
Family Life (2)	>	
Health Care and Insurance (9)		
Disability and Risk Factors (8)		
Injuries (4)		
Life Stages and Populations (6)		
Reproductive Health (4)	>	

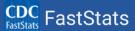
CDC FastStats



AIDS and HIV	>
Hepatitis	>
Infectious Disease	>
Influenza	>
Measles	>
Pneumonia	>
Sexually Transmitted Diseases	>
Sinusitis (Chronic)	>
Whooping Cough (Pertussis)	>











Influenza

Data are for the U.S.

Vaccination

- Percent of children 6 months to 17 years who received an influenza vaccination during the past 12 months: 49.9%
- Percent of adults 18-49 years who received an influenza vaccination during the past 12 months: 31.2%
- Percent of adults 50-64 years who received an influenza vaccination during the past 12 months: 45.5%
- Percent of adults 65 years and over who received an influenza vaccination

Mortality

- Number of deaths: 3,697
- Deaths per 100,000 population: 1.2

Source: Deaths: Final Data for 2013, tables 10, 11 [PDF - 1.5 MB]

More data

- Influenza vaccination among adults 18 years of age and over, by selected characteristics Health, United States, 2014, table 74 [PDF - 9.8 MB]
- Search Tables for Influenza in Health **Data Interactive**

Page last viewed: N/A

Page last updated: July 17, 2015





Next



Previous

ICD-10-CM IS COMING OCTOBER 1, 2015 TO A HEALTH CARE PROVIDER NEAR YOU!

ICD-9-CM & to ICD-10-CM Comparison

ICD-9-CM (14,025 codes)

- 3-5 Characters
- First character is numeric or alpha
- Characters 2-5 are numeric
- Always at least 3 characters
- Use of decimal after 3 characters

ICD-10-CM (68,069 codes)

- 3-7 characters
- Character1 is alpha (exclude U)
- Character 2 is numeric
- Characters 3-7 are alpha or numeric
- Use of decimal after 3 characters
- Use "x" placeholder
- Alpha characters are not case sensitive

Health, United States at the University of Iowa: Iowa Institute for Public Health and Public Policy

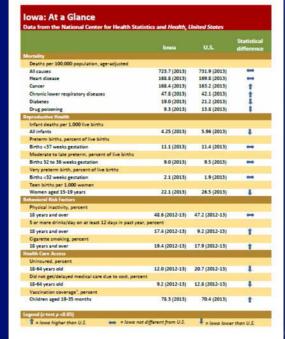
 In June, NCHS staff presented to an audience of academics and local health practitioners from the lowa Department of Public Health

Overview of NCHS data systems, Health, United States and Health

Indicators Warehouse

Focused on state and national level data on:

- Mortality
- Reproductive Health
- Behavioral Risk Factors
- Health Care Access
- Customized a snapshot of lowa health



HHS Survey Alignment

- ASPE asked HHS Data Council to review HHS major survey portfolio to assess and identify opportunities for alignment and improved comparability across the survey questions, measures and estimates. Interagency workgroups currently reviewing:
 - Health insurance coverage
 - Behavioral/mental health
 - Sexual orientation and gender identity
 - Tobacco use and control
- Report to ASPE in September 2015.

Save the Date: October 20, 2015 #STATSDAY15



Improved data sources, sound statistical methods, new technologies and strengthened statistical systems enable better decisions that eventually result in better lives for all of us.

Inspiring Future Statisticians

- Health Statistics Day workshop for high school juniors and seniors coming Spring 2016.
- Approximately 30 students will be invited from two local area high schools for this 1-day workshop that will include presentations and hands-on group activities conducted by NCHS epidemiologists, statisticians, and research scientists.

Measuring Scholarly Use of Government Information

"Dominant source of federal statistics was the National Center for Health Statistics, followed by the Census Bureau, and then the Bureau of Labor Statistics. Prevalent qualitative themes underlying the studies in this dataset included mortality and population studies, linked datasets, international studies, and critical studies (i.e. presenting alternative measures for federal statistics)."



Contents lists available at ScienceDirect

Government Information Quarterly

journal homepage: www.elsevier.com/locate/govinf



Measuring scholarly use of government information: An altmetrics analysis of federal statistics



Tara Das

Government Information Librarian, Columbia University, Lehman Social Sciences Library, 420 W. 118th St., New York, NY 10027, USA

ARTICLE INFO

Article history:
Received 4 December 2014
Received in revised form 13 May 2015
Accepted 19 May 2015
Available online 7 June 2015

Keywords: Citation analysis Government information Altmetrics Statistics Content analysis

ABSTRACT

Purpose: This paper examines how federal statistics is used in scholarly research via a new type of citation analysis that leverages the strengths of information aggregators, like Altmetric LIP, in looking for evidence of government information use beyond traditional citations/references. In this citation analysis, abstracts were examined.

Results: Drawing on a dataset containing articles aggregated via Altmetric Explorer, a querying interface provided by Altmetric ILP, content analysis was used to 1) determine the distribution of federal statistics incorporated in scholarly studies, and 2) qualitatively understand the particular ways in which studies incorporated federal statistics. It was found that the dominant source of federal statistics was the National Center for Health Statistics (NCHS), followed by the Census Bureau, and then the Bureau of Labor Statistics. Prevalent qualitative themes underlying the studies in this dataset included mortality and population studies, linked datasets, international studies, and critical studies (i.e., presenting alternative measures for federal statistics).

Conclusions: When querying studies referencing one or more of the principal US statistical agencies in Altmetric Explorer, almost all studies in the final dataset cited these agencies because they had cited federal statistics. This finding need not have been the case however. A separate study on the use of federal statistics in scholarly research will compare altmetrics to traditional citation analysis.

Preliminary results from Google Scholar, using traditional citations, found non-dataset publications to be the most frequently cited titles from NCHS and the Census Bureau.

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