Data Brief 331. Characteristics of Office-based Physician Visits, 2016

Patient characteristic	Rate	Standard error
Total visits	278	9
Age group (years)		
Under 1	736	102
1–17	213	20
18–44	190	10
45–64	302	14
65 and over	498	23
Sex		
Female	315	12
Male	239	9

Data table for Figure 1. Visit rates, by selected demographics: United States, 2016

NOTES: Visit rates are based on the July 1, 2016, set of estimates of the civilian noninstitutionalized population of the United States, as developed by the Population Division, U.S. Census Bureau. Total visits includes all visits by patients of all ages. For more information, see the 2016 National Ambulatory Medical Care Survey documentation, ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2016.pdf.

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Data table for Figure 2. Primary expected source of payment, by age: United States, 2016

Primary expected source of payment, by age group (years)	Percent	Standard error
Total visits	100	
Private	54	1
Medicaid	15	1
Medicare	26	1
No insurance	3	1
Under 18	100	
Private	63	5
Medicaid	32	5
Medicare	1	Less than 1
No insurance	3	1
18–64 years	100	
Private	71	2
Medicaid	15	2
Medicare	7	1
No insurance	5	1
65 and over	100	
Private	14	1
Medicaid	2	Less than 1
Medicare	82	1
No insurance	1	Less than 1

...Category not applicable.

NOTES: All sources of payment were combined into one mutually exclusive primary source of payment, using the following hierarchy: Medicare, Medicaid or Children's Health Insurance Program, or other state-based program, private insurance; and no insurance. Total visits includes all visits by patients of all ages. No insurance is defined as having only self-pay, no charge, or charity as payment sources. Other sources of payment and missing or blank data are not included in this table and represent 6.9% (weighted) of visits. Excludes 5.3% (weighted) of visits for which data were missing or blank. For more information, see the 2016 National Ambulatory Medical Care Survey documentation, ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2016.pdf.

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Data table for Figure 3. Major reason for office-based physician visit, by age: United States, 2016

Major reason for office visit, by age group (years)	Percent	Standard error
Total visits	100	
Injury	7	1
Preventive care	23	1
Chronic condition	37	1
New problem	27	1
Pre- and post-surgery	6	Less than 1
Under 18	100	
Injury	8	1
Preventive care	32	3
Chronic condition	17	3
New problem	41	3
Pre- and post-surgery	2	Less than 1
18–64	100	
Injury	8	1
Preventive care	24	2
Chronic condition	37	2
New problem	24	1
Pre- and post-surgery	6	1
65 and over	100	
Injury	5	Less than 1
Preventive care	15	1
Chronic condition	51	2
New problem	21	1
Pre- and post-surgery	8	1

...Category not applicable.

NOTES: Provider-assessed major reason for visit was combined with injury to create a combined mutually exclusive reason for visit, with an injury visit having precedence over all other reasons. In 2016, the definition of injury changed due to the switch from using the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) to the International Classification of Diseases, Noth Revision, Clinical Modification (ICD-9-CM) to the International Classification of Diseases, Noth Revision, Clinical Modification (ICD-9-CM) to the International Classification of Diseases, Noth Revision, Clinical Modification (ICD-9-CM) to the International Classification or Diseases, not revisus years of injury estimates. Total visits includes all visits by patients of all ages. Numbers may not add to 100% due to rounding. Excludes 2.3% (weighted) of visits for which data were missing either injury or reason for visit. For more information, see the 2016 National Ambulatory Medical Care Survey documentation, ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2016.pdf.

Data table for Figure 4. Selected services ordered or provided at office-based physician visits, by age: United States, 2016

Selected services ordered or provided, by age group (years)	Percent	Standard error
Total visits		
	48	2
Examinations and screenings	40 29	2
Laboratory tests	29 22	2
Health education and counseling	14	2 1
Imaging services Procedures	14	•
Procedures	14	1
Under 18		
Examinations and screenings	55	3
Laboratory tests	23	4
Health education and counseling	29	4
Imaging services	*	*
Procedures	*	*
18–64		
Examinations and screenings	45	2
Laboratory tests	31	2
Health education and counseling	21	2
Imaging services	16	1
Procedures	13	1
65 and over		I
Examinations and screenings	48	2
•	40 28	2
Laboratory tests	20 19	2
Health education and counseling		
Imaging services	16	1
Procedures	18	2

...Category not applicable. *Estimate does not meet NCHS standards of reliability.

NOTES: More than one service may be reported per visit. Total visits includes all visits by patients of all ages. Note that, due to the switch from using the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) to the International Classification of Diseases, 10th Revision, Clinical Modification (ICD–10–CM), the method used to derive examinations and screenings has changed from that used in prior years. Therefore, estimates for examinations and screenings should not be considered comparable to previous years of examinations and screenings estimates. See the definitions section for the specific services included in each category. For the complete list of services, see the 2016 National Ambulatory Medical Care Survey documentation, ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_ Documentation/NAMCS/doc2016.pdf#page=53.