National Ambulatory Medical Care Survey: 2015 State and National Summary Tables

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 physician practices as well as patient and visit characteristics using data collected in the 2015 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. Visit estimates for the following 16 states that were targeted for separate estimation are included in the summary tables: Arizona, California, Florida, Georgia, Illinois, Indiana, Massachusetts, Michigan, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Texas, Virginia, and Washington. The remaining 34 states and DC were grouped into four region remainders (North, South, East, and West) or groups of states that comprise Census regions excluding the 16 states for which state estimates were calculated. Four tables presenting state estimates are included, in addition to the tables presenting national estimates.

The sampling frame for the 2015 NAMCS was composed of physicians listed in the master files maintained by the American Medical Association and the American Osteopathic Association. The 2015 NAMCS utilized a two-stage probability design that involved probability samples of physicians within targeted states and Census regions, 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 and will be presented in a separate report.

The 2015 NAMCS sample included 8,091 physicians. A total of 3,181 physicians did not meet all of the criteria and were ruled out of scope (ineligible) for the study. Of the 4,910 in- scope (eligible) physicians, 1,410 completed Patient Record Forms (PRFs) in the study. PRFs were not completed by 327 physicians because they saw no patients during their sample week due to vacation, illness, or other reasons for being temporarily not in practice. Of the 1,410 physicians who completed PRFs, 1,088 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 322 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, 28,332 PRFs were submitted. The participation rate—the percentage of in-scope physicians for whom at least one PRF was completed—was 36.5% percent. The response rate—the percentage of in-scope physicians for whom at least one-half of their expected number of PRFs was completed—was 29.6%. Among the 16 targeted states, response rates ranged from 14.3% to 55.6%.

The 2015 NAMCS was conducted from December 22, 2014, through December 20, 2015. The U.S. Bureau of the Census was the data collection agent for the 2015 NAMCS. NAMCS was collected electronically, using a computerized instrument developed by the U.S. Census Bureau. For 2015, abstraction by Census field representatives using laptop computers to access the automated PRF instrument was the preferred mode of data collection. The PRF may be viewed at: https://www.cdc.gov/nchs/data/ahcd/2015_NAMCS_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% 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% sample ranged between 0.5 and 1.4%. For further details, see the 2015 NAMCS

Public Use Data File Documentation at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf.

Web table estimates consist of visits to physicians at 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 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 the 2015 NAMCS are discussed in the NAMCS Public Use Data File Documentation.

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 2015, race data were missing for 28.6% of visits, and ethnicity data were missing for 23.4% of visits. 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 2015 NAMCS Public Use Data File Documentation (see above for link). Information on missing data for other variables is provided in table footnotes.

In the following tables, estimates are not presented and replaced with an asterisk (*) if they are based on fewer than 30 cases in the sample data. Estimates based on 30 or more cases include an asterisk if the relative standard error (RSE) of the estimate exceeds 30 percent.

Suggested citation: Rui P, Okeyode T. National Ambulatory Medical Care Survey: 2015 State and National Summary Tables. Available from: http://www.cdc.gov/nchs/ahcd/ahcd_products.htm.

Table 1. Physician office visits, by selected physician characteristics: United States, 2015

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[1,2,3] (standard error of rate)
All visits	990,808 (49,038)	100.0 ...	313.3 (15.5)
Physician specialty[4]			
General and family practice	192,789 (31,485)	19.5 (2.8)	61.0 (10.0)
Internal medicine	139,028 (29,149)	14.0 (2.7)	44.0 (9.2)
Pediatrics[5]	94,861 (12,045)	9.6 (1.3)	122.6 (15.8)
Obstetrics and gynecology[6]	81,045 (13,273)	8.2 (1.4)	61.0 (10.0)
Ophthalmology	57,938 (8,095)	5.8 (0.8)	18.3 (2.6)
Orthopedic surgery	56,427 (8,367)	5.7 (0.9)	17.8 (2.6)
Psychiatry	45,863 (9,509)	4.6 (1.0)	14.5 (3.0)
Cardiovascular diseases	41,223 (8,033)	4.2 (0.8)	13.0 (2.5)
Dermatology	37,110 (5,515)	3.7 (0.6)	11.7 (1.7)
Otolaryngology	24,798 (3,320)	2.5 (0.4)	7.8 (1.0)
Urology	20,735 (2,677)	2.1 (0.3)	6.6 (0.8)
General surgery	16,806 (2,556)	1.7 (0.3)	5.3 (0.8)
Neurology	15,635 (3,521)	1.6 (0.4)	4.9 (1.1)
All other specialties	166,552 (31,285)	16.8 (2.8)	52.7 (9.9)
Professional identity			
Doctor of medicine	933,628 (49,194)	94.2 (1.3)	295.2 (15.6)
Doctor of osteopathy	57,180 (12,491)	5.8 (1.3)	18.1 (3.9)
Specialty type[4]			
Primary care	505,522 (38,066)	51.0 (2.6)	159.8 (12.0)
Medical specialty	281,430 (32,708)	28.4 (2.7)	89.0 (10.3)
Surgical specialty	203,856 (13,179)	20.6 (1.6)	64.5 (4.2)
Geographic region			
Northeast	200,430 (17,743)	20.2 (1.7)	360.8 (31.9)
Midwest	174,667 (14,124)	17.6 (1.4)	261.0 (21.1)
South	355,705 (30,239)	35.9 (2.4)	299.2 (25.4)
West	260,007 (31,521)	26.2 (2.6)	347.0 (42.1)
Metropolitan status[7]			
MSA	921,047 (48,815)	93.0 (1.3)	333.1 (17.7)
Non-MSA	69,761 (13,263)	7.0 (1.3)	175.5 (33.4)

[1]Visit rates are based on the July 1, 2015, set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.
[2]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, 2015, from the 2015 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 https://www.census.gov/programs-surveys/metro-micro.html for more about metropolitan statistical definitions.
[3]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.
[4]Physician specialty and specialty type are defined in the 2015 National Ambulatory Medical Care Survey public use file documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf.
[5]Number of visits (numerator) and population estimate (denominator) consist of children under 18 years of age.
[6]Number of visits (numerator) and population estimate (denominator) consist of females 15 years and over.
[7]MSA is metropolitan statistical area.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 2. Office visits by selected states: United States, 2015

Selected states	Number of visits in thousands (standard error in thousands)	Number of visits per 100 persons per year[1] (standard error of rate)
All visits	990,808 (49,038)	313.3 (15.5)
State		
Arizona	19,902 (2,585)	296.2 (38.5)
California	161,353 (30,549)	417.8 (79.1)
Florida	56,104 (8,580)	281.3 (43.0)
Georgia	19,527 (4,330)	195.1 (43.3)
Illinois	29,704 (4,198)	234.4 (33.1)
Indiana	24,596 (4,700)	377.2 (72.1)
Massachusetts	17,551 (3,863)	261.3 (57.5)
Michigan	21,874 (2,075)	223.0 (21.1)
New Jersey	47,479 (13,081)	536.4 (147.8)
New York	72,661 (9,740)	371.6 (49.8)
North Carolina	20,732 (3,915)	211.0 (39.8)
Ohio	30,720 (4,406)	268.5 (38.5)
Pennsylvania	38,520 (6,001)	305.8 (47.6)
Texas	93,724 (22,578)	347.5 (83.7)
Virginia	30,413 (5,704)	372.2 (69.8)
Washington	19,578 (2,279)	277.4 (32.3)

[1]Visit rates are based on the July 1, 2015, set of estimates of the civilian noninstitutional 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 16 states.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 3. Office visits, by selected physician practice characteristics: United States, 2015

Physician practice characteristics	Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)
All visits	990,808 (49,038)	100.0 ...
Employment status		
Full-owner	382,800 (39,442)	38.6 (3.1)
Part-owner	266,604 (26,744)	26.9 (2.5)
Employee	324,526 (31,169)	32.8 (2.8)
Contractor	*12,993 (3,898)	*1.3 (0.4)
Blank[1]	*3,885 (2,944)	*0.4 (0.3)
Ownership		
Physician or group	792,842 (49,198)	80.0 (2.1)
Other health care corporation	64,351 (12,881)	6.5 (1.3)
Other hospital	46,258 (11,672)	4.7 (1.2)
HMO[2]	17,010 (4,645)	1.7 (0.5)
Medical or academic health center	29,384 (6,015)	3.0 (0.6)
Other[3]	*8,372 (2,949)	*0.8 (0.3)
Blank[1]	32,592 (9,127)	3.3 (0.9)
Practice size		
Solo	368,295 (38,670)	37.2 (3.1)
2	86,863 (13,924)	8.8 (1.4)
3–5	248,415 (24,309)	25.1 (2.3)
6–10	178,044 (22,645)	18.0 (2.2)
11 or more	107,749 (22,768)	10.9 (2.2)
Blank[1]	*1,442 (730)	*0.1 (0.1)
Type of practice		
Single-specialty group	354,447 (24,147)	35.8 (2.6)
Multispecialty group	267,939 (34,449)	27.0 (3.0)
Solo	368,295 (38,670)	37.2 (3.1)
Blank[1]	* ...	* ...
Office type		
Private practice	922,208 (49,591)	93.1 (1.1)
Freestanding clinic or urgicenter	24,904 (6,625)	2.5 (0.7)
Other[4]	43,697 (7,763)	4.4 (0.8)
Electronic medical records		
Yes—all electronic	750,882 (49,468)	75.8 (2.3)
Yes—part paper and part electronic	114,191 (14,473)	11.5 (1.5)
No	124,382 (17,518)	12.6 (1.8)
Blank[1]	*1,355 (726)	*0.1 (0.1)
Practice submits claims electronically		
Yes	902,293 (49,350)	91.1 (1.4)
No	73,429 (12,426)	7.4 (1.3)
Blank[1]	*15,087 (7,146)	*1.5 (0.7)

... Category not applicable.
*Figure does not meet standards of reliability or precision.
[1]Blank may include missing, unknown, and/or "refused to answer the question" data.
[2]HMO is health maintenance organization.
[3]"Other" includes owners such as local government (state, county or city) and charitable organizations.
[4]"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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 4. Office visits, by patient age and sex: United States, 2015

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[1] (standard error of rate)
All visits	990,808 (49,038)	100.0 ...	313.3 (15.5)
Age			
Under 15 years	125,386 (11,829)	12.7 (1.3)	205.6 (19.4)
Under 1 year	24,522 (3,554)	2.5 (0.4)	616.7 (89.4)
1–4 years	38,205 (4,271)	3.9 (0.5)	239.9 (26.8)
5–14 years	62,660 (5,758)	6.3 (0.6)	152.6 (14.0)
15–24 years	75,861 (7,688)	7.7 (0.7)	176.9 (17.9)
25–44 years	178,819 (12,919)	18.0 (1.0)	216.3 (15.6)
45–64 years	305,071 (20,537)	30.8 (1.0)	366.3 (24.7)
65 years and over	305,670 (22,379)	30.9 (1.4)	657.8 (48.2)
65–74 years	159,752 (10,511)	16.1 (0.7)	584.7 (38.5)
75 years and over	145,918 (13,072)	14.7 (0.9)	762.3 (68.3)
Sex and age			
Female	585,795 (30,238)	59.1 (1.0)	362.2 (18.7)
Under 15 years	58,858 (6,082)	5.9 (0.7)	197.2 (20.4)
15–24 years	49,976 (6,271)	5.0 (0.6)	235.3 (29.5)
25–44 years	127,017 (10,926)	12.8 (0.9)	302.7 (26.0)
45–64 years	179,058 (12,897)	18.1 (0.8)	417.3 (30.1)
65–74 years	88,254 (6,162)	8.9 (0.4)	606.7 (42.4)
75 years and over	82,633 (7,390)	8.3 (0.5)	736.2 (65.8)
Male	405,013 (23,023)	40.9 (1.0)	262.1 (14.9)
Under 15 years	66,529 (6,461)	6.7 (0.7)	213.7 (20.8)
15–24 years	25,886 (2,986)	2.6 (0.3)	119.6 (13.8)
25–44 years	51,802 (4,217)	5.2 (0.4)	127.3 (10.4)
45–64 years	126,014 (10,016)	12.7 (0.6)	312.1 (24.8)
65–74 years	71,499 (5,358)	7.2 (0.4)	559.5 (41.9)
75 years and over	63,284 (6,424)	6.4 (0.5)	799.2 (81.1)

... Category not applicable.
[1]Visit rates are based on the July 1, 2015, 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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 5. Number of office visits per 100 persons per year by patient age and sex, in selected states: United States, 2015

Selected states	Patient age			Patient sex	
	Under 18 years (standard error)	18-64 years (standard error)	65 years and over (standard error)	Female (standard error)	Male (standard error)
All visits	203.5 (17.8)	272.8 (16.7)	657.8 (48.2)	362.2 (18.7)	262.1 (14.9)
State					
Arizona	*199.0 (75.9)	249.9 (35.3)	605.1 (139.6)	301.2 (41.2)	291.0 (42.8)
California	*234.2 (70.8)	318.5 (63.4)	1222.0 (353.3)	451.1 (81.4)	383.6 (82.5)
Florida	*112.7 (65.4)	205.1 (35.2)	694.8 (142.7)	321.1 (55.2)	238.8 (43.1)
Georgia	*123.0 (49.1)	177.6 (48.0)	422.5 (109.7)	225.3 (51.0)	162.5 (38.3)
Illinois	*176.6 (73.6)	183.8 (32.9)	558.6 (122.2)	272.8 (46.6)	194.2 (32.3)
Indiana	*273.6 (82.6)	329.5 (71.7)	758.8 (164.8)	396.3 (70.3)	357.4 (81.3)
Massachusetts	*200.1 (113.6)	*212.5 (67.5)	554.6 (130.0)	359.0 (106.2)	157.1 (27.5)
Michigan	128.3 (33.7)	210.2 (27.3)	409.4 (53.6)	243.6 (23.9)	201.4 (24.7)
New Jersey	*338.3 (143.0)	*533.0 (178.5)	854.3 (213.4)	541.2 (136.0)	*531.4 (175.0)
New York	*257.7 (90.4)	338.7 (65.0)	681.1 (104.3)	461.6 (85.3)	275.4 (38.3)
North Carolina	*151.2 (71.7)	175.4 (45.7)	449.8 (85.4)	232.7 (49.2)	187.5 (38.1)
Ohio	*291.8 (112.1)	219.6 (36.1)	428.3 (72.1)	323.7 (47.1)	210.5 (36.2)
Pennsylvania	*191.3 (104.5)	251.0 (43.7)	656.0 (125.7)	339.6 (53.5)	270.2 (45.9)
Texas	255.8 (65.8)	*337.4 (114.1)	*611.0 (187.2)	442.1 (116.1)	249.6 (56.1)
Virginia	*185.1 (55.5)	329.7 (78.4)	861.4 (207.5)	466.9 (99.9)	271.7 (55.2)
Washington	189.2 (55.5)	220.1 (32.7)	666.2 (94.2)	284.0 (39.1)	270.6 (32.3)

* Figure does not meet standards of reliability or precision.

NOTES: Visit rates are based on the July 1, 2015, set of estimates of the civilian noninstritutionalized population of the United States as developed by the Population Division, U.S.Census Bureau. Numbers may not add to totals because estimates are only available for 16 states.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 6. Office visits, by patient race and age, and ethnicity: United States, 2015

Patient characteristic	Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)	Number of visits per 100 persons per year[1] (standard error of rate)
All visits	990,808 (49,038)	100 ...	313.3 (15.5)
Race and age[2]			
White	769,517 (34,016)	77.7 (2.0)	315.0 (13.9)
Under 15 years	94,485 (8,944)	9.5 (1.0)	213.8 (20.2)
15–24 years	57,933 (5,690)	5.8 (0.5)	183.2 (18.0)
25–44 years	139,940 (9,707)	14.1 (0.8)	224.6 (15.6)
45–64 years	234,250 (14,140)	23.6 (0.9)	351.4 (21.2)
65–74 years	125,867 (7,166)	12.7 (0.6)	547.6 (31.2)
75 years and over	117,043 (8,656)	11.8 (0.7)	709.9 (52.5)
Black or African American	130,562 (13,454)	13.2 (1.1)	316.4 (32.6)
Under 15 years	15,688 (3,117)	1.6 (0.3)	170.8 (33.9)
15–24 years	11,717 (2,329)	1.2 (0.2)	178.3 (35.4)
25–44 years	23,762 (3,470)	2.4 (0.3)	212.2 (31.0)
45–64 years	46,064 (6,481)	4.6 (0.6)	455.8 (64.1)
65–74 years	19,447 (3,716)	2.0 (0.3)	742.9 (142.0)
75 years and over	13,884 (2,616)	1.4 (0.3)	873.5 (164.6)
Other[3]	90,729 (21,305)	9.2 (1.9)	295.1 (69.3)
Race, ethnicity, and age[2]			
Hispanic or Latino	139,853 (14,011)	14.1 (1.2)	250.0 (25.0)
Under 15 years	29,624 (4,850)	3.0 (0.5)	193.7 (31.7)
15–24 years	15,556 (3,558)	1.6 (0.3)	166.2 (38.0)
25–44 years	30,319 (4,993)	3.1 (0.5)	180.3 (29.7)
45–64 years	38,090 (6,534)	3.8 (0.6)	354.6 (60.8)
65–74 years	13,681 (2,229)	1.4 (0.2)	605.8 (98.7)
75 years and over	12,583 (3,455)	1.3 (0.3)	860.7 (236.4)
Not Hispanic or Latino	850,956 (43,797)	85.9 (1.2)	326.9 (16.8)
White	640,625 (29,476)	64.7 (2.1)	328.5 (15.1)
Under 15 years	68,674 (6,884)	6.9 (0.7)	221.0 (22.2)
15–24 years	42,803 (4,034)	4.3 (0.4)	182.6 (17.2)
25–44 years	110,903 (7,252)	11.2 (0.6)	233.6 (15.3)
45–64 years	199,466 (11,976)	20.1 (0.9)	350.0 (21.0)
65–74 years	114,158 (6,739)	11.5 (0.6)	545.6 (32.2)
75 years and over	104,621 (7,067)	10.6 (0.6)	691.3 (46.7)
Black or African American	126,527 (13,126)	12.8 (1.1)	327.8 (34.0)
Under 15 years	14,779 (3,023)	1.5 (0.3)	176.7 (36.2)
15–24 years	11,667 (2,329)	1.2 (0.2)	191.1 (38.2)
25–44 years	23,332 (3,450)	2.4 (0.3)	224.2 (33.1)
45–64 years	43,744 (5,898)	4.4 (0.5)	452.7 (61.0)
65–74 years	19,226 (3,713)	1.9 (0.3)	760.0 (146.8)
75 years and over	13,779 (2,615)	1.4 (0.3)	896.2 (170.1)
Other[3]	83,804 (21,075)	8.5 (1.9)	313.7 (78.9)

... Category not applicable.
[1]Visit rates are based on the July 1, 2015, set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.
[2]The race groups white, black or African American, and other include persons of Hispanic and not of 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 2015 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf. For 2015, race data were missing for 28.6% of visits, and ethnicity data were missing for 23.4% of visits.
[3]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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 7. Expected sources of payment at office visits: United States, 2015

Expected source of payment	Number of visits in thousands[1] (standard error in thousands)	Percent of visits (standard error of percent)
All visits	990,808 (49,038)	... ...
Private insurance	552,975 (28,160)	55.8 (1.7)
Medicare	269,578 (21,510)	27.2 (1.5)
Medicaid or CHIP or other state-based program[2]	156,303 (14,454)	15.8 (1.4)
Medicare and Medicaid[3]	19,929 (3,053)	2.0 (0.3)
No insurance[4]	51,720 (10,027)	5.2 (0.9)
Self-pay	47,566 (9,516)	4.8 (0.9)
No charge or charity	*4,175 (3,222)	0.4 (0.3)
Workers' compensation	6,721 (1,422)	0.7 (0.1)
Other	16,717 (2,395)	1.7 (0.2)
Unknown or blank	58,801 (14,368)	5.9 (1.4)

... Category not applicable.
[1]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.
[2]CHIP is Children's Health Insurance Program.
[3]The visits in this category are also included in both the Medicare and Medicaid or CHIP or other state-based program categories.
[4]"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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 8. Primary care provider and referral status of office visits, by prior-visit status: United States, 2015

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	990,808 (49,038)	100.0 ...
Visit to PCP[1]	422,327 (37,718)	42.6 (2.6)
Visit to non-PCP[1,2]	550,151 (31,436)	55.5 (2.6)
Referred for this visit	164,024 (13,237)	16.6 (1.2)
Not referred for this visit	322,490 (23,181)	32.5 (2.0)
Unknown if referred[3]	63,638 (6,712)	6.4 (0.7)
Unknown if PCP[1] visit[2,3]	18,330 (2,501)	1.8 (0.3)
Established patient		
All visits	829,576 (41,121)	83.7 (0.9)
Visit to PCP[1]	387,543 (33,027)	46.7 (2.6)
Visit to non-PCP[1,2]	428,378 (25,550)	51.6 (2.6)
Referred for this visit	91,541 (10,453)	11.0 (1.2)
Not referred for this visit	291,416 (20,861)	35.1 (2.2)
Unknown if referred[3]	45,422 (5,282)	5.5 (0.6)
Unknown if PCP[1] visit[2,3]	13,655 (1,985)	1.6 (0.2)
New patient		
All visits	161,232 (12,224)	16.3 (0.9)
Visit to PCP[1]	34,785 (6,989)	21.6 (3.6)
Visit to non-PCP[1,2]	121,773 (9,839)	75.5 (3.6)
Referred for this visit	72,483 (5,476)	45.0 (3.3)
Not referred for this visit	31,074 (6,898)	19.3 (3.6)
Unknown if referred[3]	18,216 (2,710)	11.3 (1.6)
Unknown if PCP[1] visit[2,3]	4,674 (1,008)	2.9 (0.7)

... Category not applicable.
[1]PCP is patients primary care provider as indicated by a positive response to the question "Are you the patient's primary care physician/provider?"
[2]Referral status was only asked for visits to non-PCPs and visits with unknown PCP status. Among these visits, referral information was unknown for 13.2% of visits.
[3]The unknown category includes blanks.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 9. Primary care provider and referral status, according to physician specialty: United States, 2015

Physician specialty	Total	Visit to PCP[1]	Visit to non-PCP[1,2]			
			Referred by other physician	Not referred by other physician	Unknown if referred[3]	Unknown if PCP[1] visit[2,3]
	Percent distribution (Standard error of percent)					
All visits	100.0	42.6 (2.6)	16.6 (1.2)	32.5 (2.0)	6.4 (0.7)	1.8 (0.3)
Pediatrics	100.0	89.4 (2.4)	*2.5 (1.1)	*4.7 (2.0)	*2.2 (1.0)	*1.2 (0.4)
Internal medicine	100.0	86.6 (4.9)	*5.0 (2.6)	*4.3 (2.2)	*1.9 (1.6)	*2.3 (0.8)
General and family practice	100.0	90.9 (1.8)	* ...	*4.6 (1.7)	1.5 (0.4)	*1.6 (0.5)
Cardiovascular diseases	100.0	*18.4 (8.0)	25.7 (4.9)	41.7 (6.3)	*12.7 (5.6)	*1.5 (0.6)
Obstetrics and gynecology	100.0	*13.4 (4.6)	12.2 (2.6)	66.2 (5.8)	5.2 (1.5)	*2.9 (1.2)
Psychiatry	100.0	*6.3 (3.4)	*10.4 (3.2)	71.5 (6.9)	*9.0 (3.3)	*2.9 (2.0)
Otolaryngology	100.0	*1.9 (1.1)	48.1 (5.1)	36.8 (4.6)	8.9 (2.1)	*4.5 (2.3)
Urology	100.0	*1.3 (0.5)	42.0 (4.7)	46.6 (4.9)	*8.5 (3.2)	*1.6 (0.9)
Neurology	100.0	* ...	45.0 (6.9)	46.2 (7.3)	*4.5 (1.6)	*3.7 (2.7)
General surgery	100.0	*7.5 (4.1)	37.0 (4.6)	42.8 (5.7)	*11.5 (3.5)	* ...
Ophthalmology	100.0	*0.6 (0.4)	20.0 (3.7)	68.6 (4.3)	10.6 (3.0)	* ...
Orthopedic surgery	100.0	* ...	38.0 (4.6)	42.3 (4.7)	17.6 (4.9)	* ...
Dermatology	100.0	* ...	20.1 (3.7)	55.1 (5.1)	21.3 (4.3)	*3.4 (1.9)
All other specialties	100.0	*10.6 (4.0)	31.4 (4.9)	49.5 (5.4)	7.1 (1.5)	*1.3 (0.6)

... Category not applicable.
* Figure does not meet standards of reliability or precision.
[1]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?"
[2]Referral status was asked only for visits to non-PCPs and visits with unknown PCP status. Among these visits, referral information was unknown for 13.2% of visits.
[3]The unknown category includes blanks.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 10. Continuity-of-care office visit characteristics, by specialty type: United States, 2015

Continuity-of-care visit characteristic	Specialty type[1]				Specialty type[1]			
	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	990,808 (49,038)	505,522 (38,066)	203,856 (13,179)	281,430 (32,708)	100.0 ...	100.0 ...	100.0 ...	100.0 ...
Prior-visit status and number of visits in last 12 months								
Established patient[2]	829,750 (41,138)	448,906 (32,534)	155,262 (10,636)	225,582 (26,677)	83.7 (0.9)	88.8 (1.1)	76.2 (1.4)	80.2 (2.1)
None	59,643 (3,758)	29,611 (3,088)	16,817 (1,601)	13,215 (1,689)	6.0 (0.4)	5.9 (0.6)	8.2 (0.6)	4.7 (0.6)
1–2 visits	294,966 (18,059)	148,835 (15,603)	64,477 (4,200)	81,654 (9,230)	29.8 (1.0)	29.4 (1.7)	31.6 (1.1)	29.0 (1.6)
3–5 visits	264,706 (17,551)	144,193 (12,317)	44,951 (3,553)	75,562 (12,861)	26.7 (0.9)	28.5 (1.4)	22.1 (0.8)	26.8 (2.1)
6 or more visits	210,435 (13,792)	126,267 (11,792)	29,017 (3,555)	55,151 (7,233)	21.2 (1.1)	25.0 (1.9)	14.2 (1.3)	19.6 (1.8)
New patient	161,059 (12,223)	56,616 (7,958)	48,594 (4,070)	55,848 (8,995)	16.3 (0.9)	11.2 (1.1)	23.8 (1.4)	19.8 (2.1)

... Category not applicable.
[1]Specialty types are defined in the 2015 public use file documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf.
[2]Number of previous visits by established patients to responding physician in the last 12 months.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 11. Twenty leading principal reasons for office visits, by patient's sex: United States, 2015

Principal reason for visit and RVC code[1]		Number of visits in thousands[1] (standard error in thousands)	Percent distribution (standard error of percent)	Female[2] Percent distribution (standard error of percent)	Male[3] Percent distribution (standard error of percent)
All visits		990,808 (49,038)	100.0 ...	100.0 ...	100.0 ...
Progress visit, not otherwise specified	T800	140,842 (12,765)	14.2 (1.2)	13.6 (1.2)	15.1 (1.4)
General medical examination	X100	75,412 (6,690)	7.6 (0.6)	6.9 (0.6)	8.6 (0.8)
Medication, other and unspecified kinds	T115	35,232 (7,003)	3.6 (0.6)	2.9 (0.5)	4.5 (0.9)
Counseling, not otherwise specified	T605	26,528 (5,495)	2.7 (0.5)	2.8 (0.6)	2.5 (0.4)
Postoperative visit	T205	25,441 (2,679)	2.6 (0.3)	2.7 (0.3)	2.4 (0.3)
Cough	S440	20,984 (2,718)	2.1 (0.3)	1.9 (0.3)	2.4 (0.5)
Gynecological examination	X225	20,735 (4,607)	2.1 (0.4)	3.5 (0.7)	... ...
Prenatal examination, routine	X205	18,152 (4,460)	1.8 (0.5)	3.1 (0.7)	... ...
Knee symptoms	S925	16,241 (2,629)	1.6 (0.3)	1.7 (0.3)	1.6 (0.3)
Back symptoms	S905	15,875 (3,701)	1.6 (0.4)	1.5 (0.4)	1.7 (0.5)
Hypertension	D510	*15,762 (4,820)	1.6 (0.5)	1.2 (0.2)	*2.2 (1.1)
For other and unspecified test results	R700	15,159 (3,625)	1.5 (0.3)	1.6 (0.4)	1.4 (0.4)
Stomach and abdominal pain, cramps and spasms	S545	15,026 (2,796)	1.5 (0.3)	1.9 (0.4)	1.0 (0.2)
Well baby examination	X105	13,217 (2,019)	1.3 (0.2)	0.9 (0.2)	1.9 (0.3)
Shoulder symptoms	S940	*12,619 (4,604)	*1.3 (0.4)	*1.1 (0.4)	*1.6 (0.5)
Diabetes mellitus	D205	12,432 (2,608)	1.3 (0.3)	1.1 (0.3)	1.5 (0.4)
Skin rash	S860	9,464 (1,373)	1.0 (0.1)	0.7 (0.1)	1.3 (0.3)
Preoperative visit for specified and unspecified types of surgery	T200	9,443 (1,424)	1.0 (0.1)	0.9 (0.2)	1.1 (0.2)
Symptoms referable to throat	S455	9,346 (2,021)	0.9 (0.2)	1.0 (0.2)	0.8 (0.2)
Other special examination	X240	9,092 (1,473)	0.9 (0.2)	0.9 (0.2)	0.9 (0.2)
All other reasons		473,807 (24,570)	47.8 (1.2)	48.0 (1.3)	47.5 (1.5)

...Category not applicable.
*Figure does not meet standards of reliability or precision.
[1]Based on A Reason for Visit Classification for Ambulatory Care (RVC), defined in the 2015 public use file documentation (ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf).
[2]Based on 585,795,000 visits made by females.
[3]Based on 405,013,000 visits made by males.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 12. Provider-assessed major reason for office visit, by selected patient and visit characteristics: United States, 2015

Patient and visit characteristic	Total number of visits in thousands (standard error in thousands)	Total percent	New problem	Chronic problem, routine	Chronic problem, flare-up	Pre-surgery	Post-surgery	Preventive care[1]	Unknown or blank
All visits	990,808 (49,038)	100.0	30.9 (1.1)	33.3 (1.5)	7.0 (0.6)	1.5 (0.2)	4.6 (0.5)	20.4 (1.2)	2.3 (0.6)
Age									
Under 15 years	125,386 (11,829)	100.0	48.8 (2.1)	10.9 (1.7)	2.8 (0.5)	* ...	1.2 (0.2)	33.8 (2.0)	*2.2 (0.8)
Under 1 year	24,522 (3,554)	100.0	35.7 (3.2)	* ...	* ...	* ...	* ...	53.7 (3.3)	* ...
1–4 years	38,205 (4,271)	100.0	55.2 (2.5)	5.8 (1.4)	*1.9 (0.7)	* ...	1.3 (0.3)	34.2 (2.4)	*1.5 (0.5)
5–14 years	62,660 (5,758)	100.0	50.1 (2.8)	16.8 (2.4)	4.0 (0.7)	* ...	1.3 (0.3)	25.8 (2.3)	* ...
15–24 years	75,861 (7,688)	100.0	35.2 (2.9)	21.4 (3.2)	4.9 (1.1)	* ...	3.5 (1.0)	32.2 (4.3)	*1.6 (0.6)
25–44 years	178,819 (12,919)	100.0	30.9 (1.8)	26.0 (1.8)	6.9 (0.8)	1.4 (0.3)	4.8 (0.6)	27.5 (2.5)	2.5 (0.7)
45–64 years	305,071 (20,537)	100.0	29.0 (1.7)	37.6 (1.9)	9.3 (1.1)	1.6 (0.3)	6.0 (0.9)	14.0 (1.4)	*2.4 (0.9)
65 years and over	305,670 (22,379)	100.0	24.2 (1.4)	45.3 (2.3)	7.0 (0.8)	2.2 (0.4)	4.7 (0.5)	14.2 (1.4)	*2.4 (0.8)
65–74 years	159,752 (10,511)	100.0	24.1 (1.4)	41.0 (2.3)	7.9 (1.1)	2.4 (0.5)	5.4 (0.6)	17.0 (1.9)	*2.1 (0.7)
75 years and over	145,918 (13,072)	100.0	24.4 (2.2)	50.1 (2.9)	6.0 (0.8)	1.8 (0.5)	4.0 (0.5)	11.1 (1.4)	*2.7 (1.0)
Sex									
Female	585,795 (30,238)	100.0	31.2 (1.2)	30.1 (1.7)	7.4 (0.8)	1.4 (0.2)	4.4 (0.5)	23.1 (1.7)	2.3 (0.7)
Male	405,013 (23,023)	100.0	30.4 (1.4)	37.9 (1.8)	6.4 (0.5)	1.7 (0.3)	4.8 (0.6)	16.6 (1.0)	2.3 (0.7)
Race[2]									
White	769,517 (34,016)	100.0	30.3 (1.1)	33.4 (1.5)	7.1 (0.5)	1.6 (0.2)	5.1 (0.5)	20.0 (1.1)	2.4 (0.7)
Black or African American	130,562 (13,454)	100.0	29.8 (2.3)	31.9 (2.9)	7.5 (1.8)	1.6 (0.5)	3.2 (0.7)	22.9 (2.9)	*3.0 (1.0)
Other[3]	90,729 (21,305)	100.0	36.7 (2.5)	34.2 (5.6)	5.3 (1.5)	* ...	*1.7 (0.6)	20.0 (4.3)	* ...
Race and ethnicity[2]									
Hispanic or Latino	139,853 (14,011)	100.0	35.6 (3.1)	17.7 (2.0)	6.9 (1.3)	*1.6 (0.5)	5.8 (1.7)	26.2 (3.5)	*6.2 (3.4)
Not Hispanic or Latino	850,956 (43,797)	100.0	30.1 (1.2)	35.8 (1.6)	7.0 (0.6)	1.5 (0.2)	4.4 (0.4)	19.5 (1.1)	1.7 (0.3)
White	640,625 (29,476)	100.0	29.5 (1.2)	36.4 (1.6)	7.2 (0.6)	1.6 (0.2)	5.0 (0.4)	18.7 (1.0)	1.6 (0.3)
Black or African American	126,527 (13,126)	100.0	29.4 (2.3)	32.6 (2.9)	7.2 (1.6)	1.5 (0.4)	3.2 (0.7)	23.1 (2.9)	*3.0 (1.0)
Other[3]	83,804 (21,075)	100.0	35.6 (2.6)	36.2 (5.6)	*5.4 (1.7)	* ...	*1.5 (0.5)	19.9 (4.6)	* ...
Expected source(s) of payment[4]									
Private insurance	552,975 (28,160)	100.0	32.3 (1.2)	31.1 (1.4)	7.5 (0.8)	1.7 (0.3)	5.2 (0.6)	20.7 (1.1)	1.5 (0.3)
Medicare	269,578 (21,510)	100.0	24.3 (1.4)	45.6 (2.6)	7.3 (0.9)	2.2 (0.4)	4.4 (0.5)	13.5 (1.7)	*2.7 (1.0)
Medicare and Medicaid[5]	19,929 (3,053)	100.0	25.7 (4.6)	40.8 (5.9)	*9.1 (2.9)	* ...	2.9 (0.7)	8.0 (2.1)	* ...
Medicaid or CHIP or other state-based program[6]	156,303 (14,454)	100.0	36.0 (2.6)	20.3 (2.2)	6.4 (1.1)	0.9 (0.2)	3.2 (0.6)	28.7 (3.7)	*4.6 (2.4)
No insurance[7]	51,720 (10,027)	100.0	33.0 (4.5)	43.6 (4.9)	6.5 (1.5)	* ...	*3.5 (1.1)	10.1 (2.4)	* ...
Other[8]	47,959 (4,740)	100.0	26.0 (2.4)	37.0 (3.5)	8.6 (1.6)	* ...	7.1 (1.0)	17.6 (2.8)	* ...

* Figure does not meet standards of reliability or precision.
… Category not applicable.
[1]Preventive care includes routine prenatal, well-baby, screening and insurance, or general exams (see major reason for visit question on the Patient Record Sample Card at https://www.cdc.gov/nchs/data/ahcd/2015_NAMCS_PRF_Sample_Card.pdf).
[2]The race groups white, black or African American, and other include persons of Hispanic and not of 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 2015 National Ambulatory Medical Care Survey Public Use Data file documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf. For 2015, race data were missing for 28.6% of visits, and ethnicity data were missing for 23.4% of visits.
[3]Other race includes visits by Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.
[4]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.
[5]The visits in this category are also included in both the Medicaid or CHIP or other state-based program and Medicare categories.
[6]CHIP is Children's Health Insurance Program.
[7]No insurance is defined as having only self-pay, no charge, or charity as payment sources.
[8]Other includes workers' compensation, unknown or blank, and sources not classified elsewhere.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 13. Preventive care visits made to primary care specialists, by selected patient and visit characteristics: United States, 2015

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[1] (standard error of rate)	Percent of preventive care visits made to primary care specialists[2] (standard error of percent)
All preventive care visits[3]	202,266 (14,826)	100.0 ...	64.0 (4.7)	82.9 (2.2)
Age				
Under 15 years	42,358 (4,965)	20.9 (2.8)	69.5 (8.1)	93.6 (2.9)
Under 1 year	13,157 (1,992)	6.5 (1.1)	330.9 (50.1)	96.3 (1.9)
1–4 years	13,048 (1,712)	6.5 (0.9)	81.9 (10.8)	94.2 (3.5)
5–14 years	16,153 (2,072)	8.0 (1.1)	39.3 (5.0)	90.9 (3.5)
15–24 years	24,445 (4,791)	12.1 (1.9)	57.0 (11.2)	91.1 (3.3)
25–44 years	49,247 (6,592)	24.3 (2.3)	59.6 (8.0)	91.9 (1.9)
45–64 years	42,743 (5,205)	21.1 (1.9)	51.3 (6.2)	77.4 (4.0)
65 years and over	43,473 (5,738)	21.5 (2.5)	93.6 (12.3)	63.3 (5.6)
65–74 years	27,209 (3,867)	13.5 (1.7)	99.6 (14.2)	66.7 (5.6)
75 years and over	16,264 (2,234)	8.0 (1.0)	85.0 (11.7)	57.7 (6.4)
Sex and age				
Female	135,131 (12,483)	66.8 (2.3)	83.6 (7.7)	87.1 (2.0)
Under 15 years	19,809 (2,470)	9.8 (1.4)	66.4 (8.3)	93.4 (2.6)
15–24 years	20,945 (4,734)	10.4 (1.9)	98.6 (22.3)	95.5 (1.6)
25–44 years	43,256 (6,499)	21.4 (2.4)	103.1 (15.5)	94.6 (1.5)
45–64 years	25,502 (3,094)	12.6 (1.2)	59.4 (7.2)	80.5 (3.8)
65–74 years	15,177 (2,717)	7.5 (1.2)	104.3 (18.7)	70.6 (6.6)
75 years and over	10,442 (1,854)	5.2 (0.8)	93.0 (16.5)	67.3 (7.0)
Male	67,134 (5,205)	33.2 (2.3)	43.4 (3.4)	74.6 (3.2)
Under 15 years	22,549 (2,907)	11.1 (1.6)	72.4 (9.3)	93.8 (3.3)
15–24 years	3,499 (967)	1.7 (0.5)	16.2 (4.5)	65.1 (14.8)
25–44 years	5,991 (914)	3.0 (0.5)	14.7 (2.2)	72.2 (6.1)
45–64 years	17,241 (2,844)	8.5 (1.1)	42.7 (7.0)	72.7 (5.6)
65–74 years	12,032 (1,748)	5.9 (0.8)	94.2 (13.7)	61.8 (6.7)
75 years and over	5,822 (906)	2.9 (0.5)	73.5 (11.4)	40.4 (8.0)
Race[4]				
White	154,164 (10,191)	76.2 (2.4)	63.1 (4.2)	80.4 (2.3)
Black or African American	29,961 (5,362)	14.8 (2.0)	72.6 (13.0)	90.1 (3.4)
Other[5]	18,141 (3,064)	9.0 (1.3)	59.0 (10.0)	92.9 (3.3)
Ethnicity[4]				
Hispanic or Latino	36,649 (6,589)	18.1 (2.6)	65.5 (11.8)	92.6 (2.2)
Not Hispanic or Latino	165,616 (11,924)	81.9 (2.6)	63.6 (4.6)	80.8 (2.5)
White	119,800 (7,601)	59.2 (3.3)	61.4 (3.9)	76.9 (2.6)
Black or African American	29,173 (5,363)	14.4 (2.0)	75.6 (13.9)	89.9 (3.5)
Other[5]	16,644 (3,035)	8.2 (1.3)	62.3 (11.4)	92.7 (3.5)
Expected source(s) of payment[6]				
Private insurance	114,208 (8,039)	56.5 (3.1)	58.0 (4.1)	81.6 (2.5)
Medicare	36,292 (6,103)	17.9 (2.7)	72.2 (12.1)	66.1 (6.6)
Medicaid or CHIP or other state-based program[7]	44,878 (8,157)	22.2 (3.5)	80.7 (14.7)	94.3 (2.0)
Medicare and Medicaid	1,595 (411)	0.8 (0.2)	... ...	* ...
No insurance[8]	5,208 (1,033)	2.6 (0.5)	18.2 (3.6)	67.1 (10.3)
Other[9]	8,441 (1,649)	4.2 (0.8)	... ...	82.4 (5.8)

* Figure does not meet standards of reliability or precision.
... Category not applicable.
[1]Visit rates for age, sex, and race and ethnicity are based on the July 1, 2015, 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 2015 National Health Interview Survey estimates of health insurance.
[2]Primary care specialty as defined in the 2015 public use file documentation (ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf).
[3]Preventive care includes routine prenatal, well-baby, screening, insurance or general exams (see "Major reason for this visit" question on the Patient Record Sample card, available at: https://www.cdc.gov/nchs/data/ahcd/2015_NAMCS_PRF_Sample_Card.pdf).
[4]The race groups white, black or African American, and other include persons of Hispanic and not of 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 2015 National Ambulatory Medical Care Survey Public Use Data file documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf. For 2015, race data were missing for 31.7% of preventive care visits, and ethnicity data were missing for 24.8% of preventive care visits.
[5]Other includes visits by Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native, and persons with more than one race.
[6]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.
[7]CHIP is Children's Health Insurance Program.
[8]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 2015 estimates of health insurance coverage from the National Health Interview Survey.
[9]Other includes workers' compensation, unknown or blank, and sources not classified elsewhere.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 14. Preventive care visits made to primary care specialists, by selected states: United States, 2015

Selected states	Number of visits in thousands (standard error in thousands)	Number of visits per 100 persons per year[1] (standard error of rate)	Percent of preventive care visits made to primary care specialists[2] (standard error of percent)
All preventive care visits[3]	202,266 (14,826)	64.0 (4.7)	82.9 (2.2)
State			
Arizona	3,059 (833)	45.5 (12.4)	62.7 (12.8)
California	29,139 (6,703)	75.5 (17.4)	88.6 (5.4)
Florida	7,882 (2,096)	39.5 (10.5)	75.3 (8.7)
Georgia	3,027 (821)	30.2 (8.2)	*47.7 (21.5)
Illinois	7,515 (2,140)	59.3 (16.9)	85.5 (5.1)
Indiana	4,678 (1,186)	71.7 (18.2)	83.5 (6.4)
Massachusetts	*3,264 (1,654)	*48.6 (24.6)	80.5 (14.1)
Michigan	3,351 (672)	34.2 (6.9)	91.9 (5.2)
New Jersey	*4,326 (2,002)	*48.9 (22.6)	52.5 (15.5)
New York	7,941 (1,916)	40.6 (9.8)	74.9 (11.2)
North Carolina	*3,406 (1,287)	*34.7 (13.1)	71.7 (14.1)
Ohio	6,407 (1,405)	56.0 (12.3)	87.7 (4.6)
Pennsylvania	*5,475 (1,676)	*43.5 (13.3)	79.1 (7.0)
Texas	*21,884 (8,851)	*81.1 (32.8)	97.6 (1.2)
Virginia	4,212 (1,066)	51.5 (13.0)	88.2 (4.4)
Washington	2,205 (400)	31.2 (5.7)	92.2 (2.7)

* Figure does not meet standards of reliability or precision.
[1]Visit rates are based on the July 1, 2015, set of estimates of the civilian noninstitutionalized population of the United States as developed by the Population Division, U.S. Census Bureau.
[2]Primary care specialty as defined in the 2015 public use file documentation (ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf).
[3]Preventive care includes routine prenatal, well-baby, screening, insurance or general exams (see Major reason for this visit question on the Patient Record Sample Card, available from http://www.cdc.gov/nchs/data/ahcd/2015_NAMCS_PRF_Sample_card.pdf).

NOTE: Numbers do not add to total because estimates are only available for 16 states.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 15. Primary diagnosis at office visits, classified by major disease category: United States, 2015

Major disease category and ICD-9-CM code range[1]		Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)
All visits		990,808 (49,038)	100.0 ...
Infectious and parasitic diseases	001–139	16,794 (2,027)	1.7 (0.2)
Neoplasms	140–239	37,075 (6,205)	3.7 (0.6)
Endocrine, nutritional, metabolic diseases, and immunity disorders	240–279	69,845 (10,227)	7.0 (0.9)
Mental disorders	290–319	59,776 (8,211)	6.0 (0.8)
Diseases of the nervous system and sense organs	320–389	89,562 (6,596)	9.0 (0.7)
Diseases of the circulatory system	390–459	88,343 (10,475)	8.9 (0.9)
Diseases of the respiratory system	460–519	64,624 (6,269)	6.5 (0.5)
Diseases of the digestive system	520–579	32,271 (5,976)	3.3 (0.6)
Diseases of the genitourinary system	580–629	45,388 (4,399)	4.6 (0.4)
Diseases of the skin and subcutanaous tissue	680–709	44,576 (4,672)	4.5 (0.5)
Diseases of the musculoskeletal and connective tissue	710–739	108,700 (17,702)	11.0 (1.5)
Symptoms, signs, and ill-defined conditions	780–799	73,149 (6,519)	7.4 (0.5)
Injury and poisoning	800–999	31,659 (3,848)	3.2 (0.4)
Supplementary classification[2]	V01–V90	198,910 (13,104)	20.1 (1.1)
All other diagnoses[3]	...	26,802 (3,919)	2.7 (0.4)
Blank	...	3,333 (738)	0.3 (0.1)

... Category not applicable.

[1]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) 11–1260).

[2]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.

[3]Includes diseases of the blood and blood-forming organs (280–289); complications of pregnancy, childbirth, and the puerperium (630–677); 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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 16. Twenty leading primary diagnosis groups for office visits: United States, 2015

Primary diagnosis group and ICD-9-CM code(s)[1]		Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)	Female[2] percent distribution (standard error of percent)	Male[3] percent distribution (standard error of percent)
All visits		990,808 (49,038)	100.0 ...	100.0 ...	100.0 ...
Arthropathies and related disorders	710–719	46,997 (9,732)	4.7 (0.9)	4.7 (1.1)	4.8 (0.8)
Essential hypertension	401	42,749 (5,982)	4.3 (0.5)	3.6 (0.5)	5.4 (0.9)
Spinal disorders	720–724	37,833 (7,164)	3.8 (0.6)	3.4 (0.6)	4.4 (0.9)
Routine infant or child health check	V20.0–V20.2	37,473 (4,371)	3.8 (0.5)	3.1 (0.4)	4.7 (0.6)
Diabetes mellitus	249–250	34,593 (4,971)	3.5 (0.5)	2.7 (0.4)	4.7 (0.7)
General medical examination	V70	32,078 (5,029)	3.2 (0.4)	3.0 (0.5)	3.6 (0.6)
Acute upper respiratory infections, excluding pharyngitis	460–461,463–466	25,162 (3,204)	2.5 (0.3)	2.8 (0.4)	2.2 (0.4)
Malignant neoplasms	140–208,209–209.36,209.7–209.79,230–234	24,601 (5,887)	2.5 (0.6)	2.3 (0.6)	2.8 (0.6)
Specific procedures and aftercare	V50–V59.9	23,591 (4,681)	2.4 (0.5)	2.2 (0.4)	2.6 (0.6)
Rheumatism, excluding back	725–729	20,864 (5,302)	2.1 (0.5)	2.3 (0.6)	1.9 (0.4)
Gynecological examination	V72.3	18,171 (4,469)	1.8 (0.4)	3.1 (0.7)	... ...
Heart disease, excluding ischemic	391–392.0,393–398,402,404,415–416, 420–429	15,486 (2,488)	1.6 (0.3)	1.3 (0.3)	1.9 (0.4)
Disorders of lipoid metabolism	272	14,474 (2,973)	1.5 (0.3)	1.3 (0.3)	1.7 (0.4)
Normal pregnancy	V22	14,324 (2,945)	1.4 (0.3)	2.4 (0.5)	... ...
Benign neoplasms	210–229,209.4–209.69,235–239	12,474 (1,628)	1.3 (0.2)	1.1 (0.2)	1.4 (0.2)
Ischemic heart disease	410–414.9	11,594 (2,599)	1.2 (0.3)	0.7 (0.2)	1.9 (0.5)
Attention deficit disorder	314	11,457 (2,436)	1.2 (0.2)	0.9 (0.2)	1.6 (0.4)
Anxiety states	300	10,943 (1,814)	1.1 (0.2)	1.1 (0.2)	1.2 (0.2)
Psychoses, excluding major depressive disorder	290–295,296.0-296.1,296.4–299	10,710 (1,954)	1.1 (0.2)	1.1 (0.2)	1.1 (0.2)
Follow up examination	V67	9,941 (1,740)	1.0 (0.2)	0.9 (0.2)	1.1 (0.3)
All other diagnoses[4]		535,293 (25,194)	54.0 (1.4)	56.1 (1.5)	51.0 (1.7)

... Category not applicable.
[1]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 & Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No. (PHS) 11–1260). However, certain codes have been combined in this table to form larger categories that better describe the utilization of ambulatory care services.
[2]Based on 585,795,000 visits made by females.
[3]Based on 405,013,000 visits made by males.
[4]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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 17. Injury visits to office-based physicians, by selected patient and visit characteristics: United States, 2015

Patient characteristics	Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)	Number of visits per 100 persons per year[1] (standard error of rate)
All injury visits[2]	82,358 (7,503)	100.0 ...	26.0 (2.4)
Age			
Under 15 years	8,720 (1,738)	10.6 (1.7)	14.3 (2.8)
Under 1 year	* ...	* ...	* ...
1–4 years	1,861 (416)	2.3 (0.5)	11.7 (2.6)
5–14 years	6,694 (1,639)	8.1 (1.6)	16.3 (4.0)
15–24 years	9,049 (2,313)	11.0 (2.1)	21.1 (5.4)
25–44 years	13,247 (1,601)	16.1 (1.6)	16.0 (1.9)
45–64 years	24,986 (2,459)	30.3 (1.8)	30.0 (3.0)
65 years and over	26,355 (2,640)	32.0 (2.5)	56.7 (5.7)
65–74 years	14,421 (1,715)	17.5 (1.7)	52.8 (6.3)
75 years and over	11,934 (1,449)	14.5 (1.6)	62.3 (7.6)
Sex and age			
Female	42,267 (4,598)	51.3 (1.8)	26.1 (2.8)
Under 15 years	4,446 (1,220)	5.4 (1.2)	14.9 (4.1)
15–24 years	*4,398 (1,434)	5.3 (1.5)	*20.7 (6.7)
25–44 years	5,716 (934)	6.9 (1.0)	13.6 (2.2)
45–64 years	12,679 (1,490)	15.4 (1.3)	29.5 (3.5)
65–74 years	7,943 (1,187)	9.6 (1.2)	54.6 (8.2)
75 years and over	7,084 (1,179)	8.6 (1.3)	63.1 (10.5)
Male	40,091 (3,396)	48.7 (1.8)	25.9 (2.2)
Under 15 years	4,273 (739)	5.2 (0.8)	13.7 (2.4)
15–24 years	4,651 (1,102)	5.6 (1.0)	21.5 (5.1)
25–44 years	7,531 (1,073)	9.1 (1.2)	18.5 (2.6)
45–64 years	12,307 (1,274)	14.9 (1.1)	30.5 (3.2)
65–74 years	6,478 (1,044)	7.9 (1.2)	50.7 (8.2)
75 years and over	4,850 (684)	5.9 (0.8)	61.3 (8.6)
Race[3]			
White	68,083 (6,456)	82.7 (3.2)	27.9 (2.6)
Black or African American	6,898 (954)	8.4 (1.2)	16.7 (2.3)
Other[4]	*7,376 (2,932)	*9.0 (3.3)	*24.0 (9.5)
Race and ethnicity[3]			
Hispanic or Latino	8,271 (1,370)	10.0 (1.5)	14.8 (2.4)
Not Hispanic or Latino	74,087 (6,972)	90.0 (1.5)	28.5 (2.7)
White	61,272 (5,899)	74.4 (3.1)	31.4 (3.0)
Black or African American	6,554 (924)	8.0 (1.1)	17.0 (2.4)
Other[4]	*6,261 (2,843)	*7.6 (3.2)	*23.4 (10.6)

* Figure does not meet standards of reliability or precision.
... Category not applicable.
[1]Visit rates for age, sex, race, and ethnicity are based on the July 1, 2015, set of estimates of the civilian noninstitutional population of the United States as developed by the Population Division, U.S. Census Bureau.
[2]The National Ambulatory Medical Care Survey definition of injury visits, as shown in this table, changed in 2010 and includes only first-, second-, third-, fourth-, and fifth-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, 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) 11–1260). Injury visits, using this definition, accounted for 8.3% (SE = 0.7) of all office visits in 2015. For more information on why this definition changed, see the 2015 National Ambulatory Medical Care Survey Public Use Data File Documentation, available at: http://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf.
[3]The race groups white, black or African American, and other include persons of Hispanic and not of 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 2015 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf. For 2015, race data were missing for 26.7% of injury visits, and ethnicity data were missing for 25.5% of injury visits.
[4]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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 18. Office visits related to injury or trauma, overdose or poisoning, and adverse effects, by intent and mechanism: United States, 2015

Intent[1], mechanism[2], and cause-of-injury code[2]		Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)
All visits related to injury, poisoning, and adverse effect[1]	...	92,217 (7,842)	100.0 ...
Unintentional injury or poisoning[1]	...	56,843 (6,159)	61.6 (3.2)
Falls	E880.0–E886.9,E888	13,199 (2,126)	14.3 (1.6)
Exposure to radiation	E926	11,709 (2,123)	12.7 (2.3)
Natural and environmental factors	E900–E909,E928.0–E928.2	5,553 (1,439)	6.0 (1.5)
Overexertion and strenuous movements	E927	5,462 (1,425)	5.9 (1.3)
Cutting or piercing instruments or objects	E920	* ...	* ...
Motor vehicle traffic	E810–E819	4,612 (916)	5.0 (0.9)
Struck against or struck accidentally by objects or persons	E916–E917	3,557 (1,017)	3.9 (0.9)
Poisoning	E850–E869	* ...	* ...
Other mechanism[3]	E800–E807(.0–.3,.8–.9),E820–E825, E826–E848,E890–E899,E910–E915, E918–E919,E921,E922,E923–E925, E928.3–.5,.8,E929.0–.5,.8	8,157 (1,227)	8.8 (1.1)
Mechanism unspecified and blank	E887,E928.9,E929.9	3,243 (489)	3.5 (0.5)
Intentional injury or poisoning[1]	...	1,477 (424)	1.6 (0.5)
Injury or poisoning—unknown intent[1]	...	23,180 (3,028)	25.1 (2.7)
Adverse effect of medical treatment, or surgical care or adverse effect of medicinal drug[1]	...	10,717 (1,883)	11.6 (2.0)
Medical or sugical complication	E870–E879	*4,075 (1,610)	*4.4 (1.7)
Adverse drug effects	E930–E949	2,416 (639)	2.6 (0.7)
Other and blank[4]	...	4,226 (720)	4.6 (0.8)

... Category not applicable.
* Figure does not meet standards of reliability or precision.
[1]The definition of visits related to injury or trauma, overdose or poisoning, and adverse effect of medical or surgical treatment or adverse effect of medicinal drug used in this table is based on automated Patient Record form entries for patient's reason for visit, diagnosis, and cause of injury. Starting in 2014, up to five reasons and diagnoses and up to three causes could be coded for each visit. Categories shown reflect the classifications used. Reason for visit was coded using "A Reason for Visit Classification for Ambulatory Care (RVC)" as defined in the 2015 public use file documentation, available from ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf. Diagnosis codes are 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 & Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No. (PHS) 11–1260). Visits related to injury or trauma, overdose or poisoning, and adverse effect of medical or surgical treatment or adverse effect of medicinal drug accounted for 9.3% (SE = 0.7) of all office visits in 2015. For more information, see the 2015 NAMCS Public Use Data File documentation.
[2]Mechanism of injury is based on the "Supplementary Classification of External Cause of Injury or Poisoning" in 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 & Medicaid Services. Official version: International Classification of Diseases, Ninth Revision, Clinical Modification, Sixth Edition. DHHS Pub No. (PHS) 11–1260. Data are based on first-listed external cause of injury or poisoning. Up to three external cause of injury or poisoning codes could be collected per visit.
[3]Includes injuries caused by drowning, firearms, fire and flames, pedal cycle (nontraffic), motor vehicle (nontraffic and other), suffocation, foreign bodies, other transportation, caught accidentally between objects, machinery, and other mechanism.
[4]Other includes visits that were classified as adverse effects of medical or surgical care or adverse effect of medicinal drug based on the PRF in conjunction with first-, second-, third-, fourth-, or fifth-listed reason for visit and diagnosis codes related to adverse effects but that could not be classified as such based on first-listed external cause of injury or poisoning.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 19. Presence of selected chronic conditions at office visits, by patient age and sex: United States, 2015

Chronic conditions[1]	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 ...	100.0 ...	100.0 ...
None	37.3 (1.6)	65.8 (2.2)	24.6 (1.4)	16.3 (1.3)	12.5 (1.3)	39.5 (1.7)	34.1 (2.0)
One or more chronic conditions	61.0 (1.7)	31.8 (2.1)	73.8 (1.5)	82.9 (1.4)	86.4 (1.4)	59.0 (1.7)	63.9 (2.0)
One	24.6 (1.0)	22.2 (1.6)	30.1 (1.3)	22.0 (1.5)	22.3 (1.9)	25.6 (1.1)	23.2 (1.1)
Two	14.6 (0.8)	6.3 (0.7)	19.0 (1.1)	20.9 (1.4)	20.4 (1.8)	13.4 (0.6)	16.4 (1.4)
Three or more	21.8 (1.5)	3.4 (0.4)	24.8 (1.8)	40.1 (2.3)	43.7 (3.3)	20.1 (1.4)	24.3 (2.0)
Blank	1.7 (0.3)	2.4 (0.7)	1.6 (0.3)	0.8 (0.2)	1.1 (0.3)	1.5 (0.3)	2.0 (0.5)
Hypertension	29.9 (1.6)	6.2 (0.7)	34.7 (1.7)	51.6 (2.5)	57.5 (2.9)	27.0 (1.5)	34.1 (2.1)
Hyperlipidemia	20.2 (1.5)	3.4 (0.7)	25.6 (2.1)	36.7 (2.2)	34.8 (2.9)	17.5 (1.3)	24.1 (2.0)
Arthritis	16.0 (1.5)	4.1 (0.5)	18.9 (2.0)	25.6 (2.3)	30.1 (3.2)	16.9 (1.6)	14.6 (1.5)
Diabetes mellitus (DM)	15.2 (0.9)	3.3 (0.6)	19.9 (1.5)	26.8 (1.5)	23.8 (1.5)	13.6 (1.0)	17.6 (1.2)
Diabetes mellitus (DM), Type 1	0.6 (0.1)	0.2 (0.0)	1.2 (0.3)	0.8 (0.2)	*0.6 (0.2)	0.5 (0.1)	0.8 (0.2)
Diabetes mellitus (DM), Type 2	8.4 (0.8)	1.6 (0.3)	10.3 (1.1)	16.5 (1.5)	13.2 (1.6)	7.7 (0.7)	9.4 (1.1)
Diabetes mellitus (DM), Type unspecified	6.2 (0.6)	1.6 (0.4)	8.4 (1.0)	9.5 (1.0)	10.1 (1.4)	5.4 (0.6)	7.3 (0.9)
Depression	10.4 (0.7)	9.1 (0.9)	14.0 (1.2)	8.7 (1.0)	8.0 (1.4)	11.9 (0.8)	8.3 (0.8)
Obesity	7.9 (0.6)	6.6 (0.8)	10.5 (1.0)	9.6 (1.1)	3.7 (0.6)	8.4 (0.8)	7.1 (0.7)
Cancer	6.5 (0.7)	1.1 (0.3)	6.0 (0.9)	13.5 (1.6)	13.9 (1.7)	5.9 (0.8)	7.4 (0.8)
Coronary artery disease (CAD), ischemic heart disease (IHD), or history of myocardial infarction (MI)	6.4 (0.6)	0.2 (0.1)	5.1 (0.9)	13.1 (1.3)	17.6 (1.9)	4.2 (0.5)	9.5 (0.9)
Asthma	6.2 (0.4)	6.6 (0.6)	6.9 (0.6)	5.9 (0.8)	4.0 (0.6)	6.7 (0.5)	5.4 (0.5)
Chronic kidney disease (CKD)	4.5 (1.2)	* *	3.6 (0.8)	8.2 (2.4)	*13.5 (4.1)	*3.8 (1.2)	5.4 (1.3)
Chronic Obstructive pulmonary disease (COPD)	3.2 (0.3)	0.5 (0.1)	2.8 (0.5)	6.8 (1.0)	7.4 (1.0)	3.0 (0.4)	3.6 (0.5)
Obstructive sleep apnea (OSA)	2.6 (0.3)	1.1 (0.2)	3.7 (0.4)	4.3 (0.7)	2.4 (0.4)	2.0 (0.3)	3.4 (0.4)
Osteoporosis	2.5 (0.2)	* *	1.8 (0.3)	5.9 (0.9)	6.4 (0.9)	3.7 (0.4)	0.7 (0.2)
Substance abuse or dependence	2.3 (0.3)	1.9 (0.3)	3.7 (0.6)	1.4 (0.3)	*1.2 (0.5)	1.8 (0.3)	3.0 (0.4)
Cerebrovascular disease, history of stroke (CVA), or transient ischemic attack (TIA)	1.8 (0.2)	* *	1.0 (0.2)	3.1 (0.5)	6.0 (1.0)	1.8 (0.3)	1.7 (0.2)
Congestive heart failure (CHF)	1.6 (0.3)	* *	1.2 (0.3)	3.6 (0.8)	4.6 (0.7)	1.7 (0.4)	1.6 (0.2)
Alzheimer's disease and dementia	0.9 (0.2)	* *	* *	1.1 (0.3)	4.4 (1.0)	1.0 (0.2)	0.9 (0.2)
Alcohol misuse, abuse or dependence	0.6 (0.1)	0.6 (0.1)	0.8 (0.2)	0.6 (0.2)	* *	0.4 (0.1)	1.0 (0.2)
History of pulmonary embolism (PE), deep vein thrombosis (DVT), or venous thromboembolism (VTE)	0.6 (0.1)	* *	*0.8 (0.3)	*1.0 (0.4)	1.1 (0.3)	0.5 (0.1)	0.8 (0.2)
Autism spectrum disorder	0.2 (0.1)	0.5 (0.1)	* *	* *	* *	* *	*0.4 (0.1)
HIV infection and AIDS	*0.2 (0.1)	* *	* *	* *	* *	* *	*0.3 (0.1)
End-stage renal disease (ESRD)	*0.2 (0.1)	* *	* *	* *	* *	* *	*0.2 (0.1)

... Category not applicable.
* Figure does not meet standards of reliability or precision.
[1]Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses. Combined total visits by patients with chronic condtions and percent of visits exceeds 100% because more than one chronic condition may be reported per visit.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 20. Presence of selected chronic conditions at office visits, by selected states: United States, 2015

Selected states	Hypertension	Hyperlipidemia	Arthritis	Diabetes[1]	Depression	Obesity	Asthma	Cancer	COPD[2]	Osteoporosis
	Percent of visits (standard error of percent)									
All visits	30.0 (2.1)	21.3 (1.8)	17.1 (2.0)	15.8 (1.1)	9.6 (0.8)	8.1 (0.8)	6.4 (0.5)	6.7 (0.9)	3.5 (0.4)	2.6 (0.3)
State										
Arizona	27.3 (4.5)	15.2 (3.2)	12.7 (2.7)	15.2 (2.6)	10.6 (2.1)	*5.6 (1.8)	6.3 (1.4)	5.6 (1.5)	* ...	* ...
California	34.0 (7.3)	23.7 (5.3)	20.0 (5.5)	20.4 (3.6)	7.2 (1.9)	7.9 (1.8)	4.9 (1.1)	*5.4 (2.8)	* ...	* ...
Florida	42.5 (6.4)	37.0 (6.7)	19.5 (3.0)	16.1 (2.7)	6.6 (1.6)	10.3 (2.9)	7.9 (2.1)	13.3 (3.1)	8.3 (2.2)	*4.7 (1.7)
Georgia	27.7 (4.0)	*13.5 (4.2)	17.3 (2.9)	13.2 (2.1)	*16.6 (5.1)	4.9 (0.9)	8.4 (1.8)	6.6 (1.7)	* ...	* ...
Illinois	33.4 (5.2)	18.2 (4.2)	15.8 (3.1)	15.2 (3.4)	9.7 (2.4)	*7.1 (2.6)	5.0 (1.0)	5.4 (1.2)	* ...	* ...
Indiana	32.2 (4.2)	24.9 (4.1)	14.1 (2.4)	18.1 (3.2)	15.2 (2.0)	10.3 (2.6)	6.7 (1.8)	*9.5 (4.8)	5.7 (1.5)	2.5 (0.7)
Massachusetts	16.6 (4.1)	*9.6 (4.4)	12.8 (3.4)	6.7 (1.8)	17.8 (5.2)	* ...	*7.5 (2.7)	5.3 (1.5)	* ...	* ...
Michigan	30.5 (3.5)	22.1 (3.3)	16.2 (2.5)	13.0 (1.7)	16.1 (4.2)	7.7 (1.5)	7.1 (0.9)	4.4 (0.8)	4.4 (0.8)	*2.3 (0.7)
New Jersey	27.4 (5.3)	22.9 (6.6)	14.3 (3.9)	13.2 (3.2)	*13.5 (6.1)	10.1 (2.5)	7.4 (1.7)	* ...	* ...	* ...
New York	25.5 (3.6)	25.7 (5.9)	17.4 (4.4)	16.3 (2.4)	*5.3 (1.6)	8.0 (1.9)	6.2 (1.0)	7.3 (1.5)	* ...	*3.2 (1.3)
North Carolina	24.6 (4.6)	17.3 (4.3)	8.7 (2.3)	11.2 (2.9)	8.2 (1.7)	7.8 (1.7)	6.4 (1.8)	*6.6 (2.1)	* ...	* ...
Ohio	29.9 (5.3)	17.5 (3.8)	*10.1 (3.4)	11.8 (2.9)	15.2 (3.8)	*9.6 (3.9)	6.8 (1.1)	6.3 (1.2)	* ...	* ...
Pennsylvania	32.9 (4.2)	21.2 (4.5)	14.9 (3.7)	14.8 (2.6)	*9.8 (3.5)	7.7 (1.8)	6.6 (1.3)	7.5 (1.6)	3.1 (0.7)	* ...
Texas	23.7 (3.7)	*11.8 (3.6)	*21.9 (9.1)	15.0 (2.6)	8.7 (1.4)	*7.8 (3.8)	6.6 (1.4)	*4.9 (1.7)	*2.2 (0.7)	* ...
Virginia	24.9 (6.3)	*15.7 (4.8)	*9.9 (3.1)	14.0 (4.2)	*6.5 (2.0)	6.3 (1.9)	*7.5 (3.0)	*14.4 (9.3)	*8.7 (3.1)	* ...
Washington	30.9 (4.1)	23.5 (3.6)	18.1 (3.1)	12.9 (2.1)	17.1 (2.9)	10.3 (2.5)	6.8 (1.1)	5.2 (1.1)	3.7 (1.1)	2.8 (0.7)

* Figure does not meet standards of reliability or precision.
[1]Diabetes includes both Type I diabetes mellitus (insulin dependent or IDDM), Type II diabetes mellitus (non-insulin dependent or NIDDM), and diabetes with type unspecified. Excludes diabetes insipidus and gestational diabetes.
[2]COPD is chronic obstructive pulmonary disease.

NOTES: Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses. Combined total visits by patients with chronic condtions and percent of visits exceeds 100% because more than one chronic condition may be reported per visit. Numbers may not add to totals because more than one chronic condition may be reported per visit.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 21. Selected services ordered or provided at office visits, by patient sex: United States, 2015

Services	Number of visits in thousands[1] (standard error in thousands)	Both sexes	Female[2]	Male[3]
		Percent distribution (standard error of percent)		
All visits	990,808 (49,038)	100.0 (0.0)	100.0 (0.0)	100.0 (0.0)
One or more services ordered or provided[4]	967,598 (48,591)	97.7 (0.5)	97.9 (0.5)	97.3 (0.5)
None	23,211 (4,619)	2.3 (0.5)	2.1 (0.5)	2.7 (0.5)
Examinations and screenings				
Skin	184,944 (17,327)	18.7 (1.6)	17.7 (1.6)	20.0 (1.9)
Retinal or eye	149,662 (16,076)	15.1 (1.5)	14.5 (1.4)	16.0 (1.9)
Neurologic	145,770 (22,465)	14.7 (2.0)	13.8 (1.7)	16.0 (2.9)
Pelvic	52,258 (7,747)	5.3 (0.8)	8.9 (1.2)	* ...
Foot	50,962 (10,601)	5.1 (1.0)	5.1 (1.0)	5.2 (1.1)
Depression screening	43,525 (7,964)	4.4 (0.8)	4.7 (0.7)	4.0 (1.0)
Breast	37,671 (5,411)	3.8 (0.5)	6.0 (0.8)	*0.6 (0.3)
Alcohol misuse screening (includes AUDIT, MAST, CAGE, T-ACE)	*17,694 (7,665)	*1.8 (0.8)	*1.8 (0.8)	*1.8 (0.7)
Rectal	17,274 (3,529)	1.7 (0.4)	1.8 (0.4)	1.7 (0.4)
Substance abuse screening (includes NIDA/NM ASSIST, CAGE-AID, DAST-10)	10,782 (2,816)	1.1 (0.3)	1.2 (0.3)	*0.9 (0.3)
Domestic violence screening	*5,436 (2,481)	*0.5 (0.2)	*0.6 (0.3)	* ...
Vital signs				
Weight	753,804 (45,727)	76.1 (1.7)	77.3 (1.7)	74.3 (2.0)
Height	698,091 (46,892)	70.5 (2.0)	71.0 (2.1)	69.6 (2.2)
Blood pressure	677,507 (47,416)	68.4 (2.0)	70.9 (2.0)	64.7 (2.4)
Temperature	383,829 (39,819)	38.7 (2.9)	37.6 (3.1)	40.3 (3.1)
Laboratory tests				
Complete blood count (CBC)	130,395 (18,298)	13.2 (1.5)	14.2 (2.0)	11.7 (1.2)
Lipids or cholesterol	101,742 (16,199)	10.3 (1.4)	10.5 (1.8)	10.0 (1.1)
Urinalysis (UA)	99,152 (13,957)	10.0 (1.3)	11.4 (1.8)	8.0 (1.0)
Comprehensive metabolic panel (CMP)	97,237 (17,445)	9.8 (1.5)	10.0 (1.8)	9.5 (1.3)
Glycohemoglobin (HgbA1C)	69,212 (12,547)	7.0 (1.1)	7.4 (1.6)	6.4 (0.9)
TSH or thyroid panel	56,184 (8,312)	5.7 (0.7)	6.7 (1.0)	4.1 (0.5)
Basic metabolic panel (BMP)	41,147 (6,860)	4.2 (0.7)	4.5 (1.0)	3.7 (0.6)
Glucose	36,263 (8,687)	3.7 (0.9)	4.5 (1.3)	2.5 (0.6)
Creatinine or renal function panel	28,643 (7,493)	2.9 (0.7)	*3.1 (1.0)	2.6 (0.7)
Pap test	28,450 (5,312)	2.9 (0.5)	4.9 (0.8)	* ...
Vitamin D test	23,402 (5,455)	2.4 (0.5)	2.6 (0.5)	2.0 (0.5)
Liver enzymes or hepatic function panel	*21,410 (7,278)	*2.2 (0.7)	*2.6 (1.1)	*1.5 (0.5)
Prostate specific antigen (PSA)	15,859 (2,572)	1.6 (0.2)	* ...	3.9 (0.6)
HPV DNA test[5]	*13,150 (9,358)	*1.3 (0.9)	*1.8 (1.1)	* ...
Rapid strep test	*12,093 (3,976)	*1.2 (0.4)	*1.4 (0.5)	1.0 (0.3)
Hepatitis testing	*11,701 (4,762)	*1.2 (0.5)	*1.5 (0.5)	*0.7 (0.4)
HIV test[6]	*9,981 (4,369)	*1.0 (0.4)	*1.2 (0.5)	* ...
Chlamydia test	9,764 (2,718)	1.0 (0.3)	1.4 (0.4)	* ...
Pregnancy or HCG test	8,498 (2,252)	0.9 (0.2)	1.5 (0.4)	* ...
Gonorrhea test	*7,964 (2,833)	*0.8 (0.3)	*1.1 (0.5)	* ...
Culture				
Urine	24,632 (6,779)	2.5 (0.7)	*3.1 (1.0)	*1.6 (0.5)
Throat	*5,698 (2,000)	*0.6 (0.2)	*0.5 (0.2)	*0.7 (0.3)
Blood	4,475 (1,302)	0.5 (0.1)	0.5 (0.2)	*0.3 (0.2)
Other	5,211 (884)	0.5 (0.1)	0.7 (0.1)	0.2 (0.0)
Procedures				
Electrocardiogram (EKG or ECG)	40,886 (7,408)	4.1 (0.7)	3.5 (0.6)	5.1 (0.9)
Biopsy	19,035 (5,260)	1.9 (0.5)	1.9 (0.5)	2.0 (0.6)
Colonoscopy	17,531 (4,381)	1.8 (0.4)	*2.0 (0.6)	1.4 (0.3)
Excision of tissue	12,347 (1,327)	1.2 (0.1)	1.0 (0.1)	1.6 (0.2)
Audiometry	10,737 (2,188)	1.1 (0.2)	0.9 (0.2)	1.3 (0.3)
Spirometry	*10,000 (3,544)	*1.0 (0.3)	*1.0 (0.4)	*1.0 (0.4)
Sigmoidoscopy	*7,576 (4,829)	*0.8 (0.5)	*1.2 (0.8)	*0.2 (0.1)
Cryosurgery (cryotherapy)	7,438 (1,321)	0.8 (0.1)	0.5 (0.1)	1.1 (0.2)
Upper gastrointestinal endoscopy or EGD	*6,977 (2,934)	*0.7 (0.3)	*1.0 (0.5)	* ...
Fetal monitoring	*6,458 (2,802)	*0.7 (0.3)	*1.1 (0.5)	* ...
Cardiac stress test	6,260 (1,740)	0.6 (0.2)	0.4 (0.1)	*1.0 (0.3)
Tonometry	5,677 (1,586)	0.6 (0.2)	*0.6 (0.2)	0.5 (0.2)
Electromyogram (EMG)	*4,221 (1,892)	*0.4 (0.2)	*0.5 (0.3)	*0.3 (0.1)
Tuberculosis skin testing or PPD	*3,105 (1,187)	*0.3 (0.1)	*0.4 (0.1)	* ...
Electroencephalogram (EEG)	1,246 (299)	0.1 (0.0)	*0.1 (0.0)	0.1 (0.0)
Peak flow	* ...	* ...	* ...	* ...

See footnotes at end of table.

Table 21. Selected services ordered or provided at office visits, by patient sex: United States, 2015—Con.

Services	Number of visits in thousands[1] (standard error in thousands)	Both sexes	Female[2]	Male[3]
		Percent distribution (standard error of percent)		
Imaging				
Any imaging	164,853 (16,460)	16.6 (1.2)	19.0 (1.4)	13.2 (1.2)
X ray	58,537 (6,531)	5.9 (0.6)	5.6 (0.6)	6.3 (0.7)
Ultrasound, excluding echocardiogram	49,104 (10,501)	5.0 (0.9)	6.3 (1.1)	3.1 (0.8)
Mammography	22,587 (4,080)	2.3 (0.4)	3.8 (0.6)	* ...
Magnetic resonance imaging (MRI)	21,309 (3,007)	2.2 (0.3)	2.2 (0.3)	2.1 (0.3)
Computed tomography (CT) scan	17,428 (3,054)	1.8 (0.3)	1.8 (0.4)	1.7 (0.3)
Echocardiogram	11,604 (2,706)	1.2 (0.3)	1.2 (0.3)	1.2 (0.3)
Bone mineral density	7,724 (2,040)	0.8 (0.2)	1.2 (0.3)	* ...
Other imaging	*4,443 (1,497)	*0.4 (0.1)	*0.3 (0.1)	*0.6 (0.3)
Treatment				
Physical therapy	21,330 (3,224)	2.2 (0.3)	2.4 (0.4)	1.8 (0.3)
Other mental health counseling	14,949 (3,476)	1.5 (0.4)	1.5 (0.4)	1.6 (0.4)
Wound care	14,325 (1,814)	1.4 (0.2)	1.3 (0.2)	1.7 (0.3)
Psychotherapy	11,347 (2,619)	1.1 (0.3)	1.1 (0.3)	1.3 (0.3)
Home health care	*10,818 (3,494)	*1.1 (0.3)	*1.2 (0.4)	*1.0 (0.4)
Cast, splint, or wrap	7,622 (1,416)	0.8 (0.1)	0.7 (0.1)	0.9 (0.2)
Durable medical equipment	6,833 (1,844)	0.7 (0.2)	0.4 (0.1)	*1.1 (0.4)
Complementary and alternative medicine (CAM)	*2,507 (1,288)	*0.3 (0.1)	*0.2 (0.1)	* ...
Occupation therapy	*914 (299)	*0.1 (0.0)	* ...	* ...
Radiation therapy	* ...	* ...	* ...	* ...
Health education and counseling				
Diet or nutrition	146,889 (16,427)	14.8 (1.5)	15.3 (1.7)	14.2 (1.5)
Exercise	101,678 (15,386)	10.3 (1.3)	10.2 (1.4)	10.4 (1.4)
Injury prevention	47,237 (8,054)	4.8 (0.8)	4.2 (0.8)	5.5 (1.0)
Growth or evelopment	28,068 (5,844)	2.8 (0.6)	2.8 (0.8)	2.9 (0.6)
Weight reduction	27,280 (3,575)	2.8 (0.3)	2.6 (0.4)	3.0 (0.4)
Tobacco use or exposure	25,735 (7,098)	2.6 (0.7)	2.2 (0.6)	3.1 (0.8)
Diabetes education	19,481 (3,729)	2.0 (0.4)	1.9 (0.4)	2.1 (0.4)
Family planning or contraception	8,297 (1,765)	0.8 (0.2)	1.2 (0.3)	* ...
Substance abuse counseling	*6,571 (2,537)	*0.7 (0.2)	*0.5 (0.2)	*0.8 (0.3)
Asthma	5,910 (1,486)	0.6 (0.1)	0.5 (0.1)	*0.8 (0.3)
Stress management	5,413 (1,072)	0.5 (0.1)	0.6 (0.1)	*0.5 (0.1)
STD Prevention	5,036 (1,361)	0.5 (0.1)	0.6 (0.2)	*0.4 (0.1)
Alcohol abuse counseling	*4,032 (2,025)	*0.4 (0.2)	*0.3 (0.1)	*0.6 (0.3)
Genetic counseling	*2,336 (1,335)	*0.2 (0.1)	*0.4 (0.2)	* ...
Asthma action plan given to patient	*2,239 (740)	*0.2 (0.1)	* ...	* ...

... Category not applicable.
0.0 Quantity more than zero but less than 0.05.
* Figure does not meet standards of reliability or precision.
-- Quantity zero.
[1]Combined total of all listed services exceeds "all visits" and percent of visits exceeds 100% because more than one service may be reported per visit.
[2]Based on 585,795,000 visits made by females.
[3]Based on 405,013,000 visits made by males.
[4]Includes up to nine write-in procedures from the Services item on the Patient Record Form. 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 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 double counting. Procedures that could not be included in one of the checkboxes are included in the estimated total number of visits with services, but are not shown separately.
[5]HPV is human papilloma virus; DNA is deoxyribonucleic acid.
[6]HIV is human immunodeficiency virus.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

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, 2015

Patient characteristic	Number of visits in thousands	Initial blood pressure[1]				
		Total	Not high	Mildly high	Moderately high	Severely high
			Percent distribution (standard error of percent)			
All visits[2]	371,911	100.0	29.9 (1.7)	46.1 (1.6)	18.5 (1.3)	5.6 (0.9)
Age						
18–24 years	28,869	100.0	54.9 (4.0)	32.3 (3.7)	*10.4 (3.6)	* ...
25–44 years	103,263	100.0	43.6 (2.9)	43.6 (2.4)	10.3 (1.7)	*2.6 (0.8)
45–64 years	130,766	100.0	19.4 (1.6)	50.3 (2.4)	22.9 (2.3)	7.4 (1.3)
65–74 years	57,546	100.0	22.9 (2.2)	47.7 (3.7)	24.0 (2.2)	*5.3 (2.2)
75 years and over	51,467	100.0	22.9 (2.0)	46.3 (3.9)	22.0 (2.2)	*8.9 (3.4)
Sex						
Female	245,420	100.0	35.6 (2.3)	45.8 (1.8)	13.8 (1.2)	4.8 (1.2)
Male	126,491	100.0	18.8 (1.5)	46.6 (2.7)	27.5 (2.5)	7.1 (0.9)
Race[3]						
White	273,033	100.0	31.7 (1.7)	46.4 (1.7)	17.2 (1.6)	4.8 (0.9)
Black or African American	69,867	100.0	20.2 (2.6)	46.6 (2.7)	25.3 (3.1)	7.9 (1.5)
Other[4]	29,011	100.0	36.3 (5.1)	41.8 (4.1)	14.7 (3.2)	* ...
Ethnicity[3]						
Hispanic or Latino	61,851	100.0	37.2 (5.1)	37.6 (4.9)	18.5 (4.3)	* ...
Not Hispanic or Latino	310,060	100.0	28.4 (1.4)	47.8 (1.5)	18.5 (1.3)	5.3 (0.8)
White	215,747	100.0	29.7 (1.5)	48.9 (1.7)	17.2 (1.5)	4.1 (0.7)
Black or African American	67,603	100.0	20.6 (2.5)	46.1 (2.8)	25.2 (3.2)	8.1 (1.5)
Other[4]	26,710	100.0	37.6 (4.7)	42.9 (4.9)	* ...	* ...

... Category not applicable.
* Figure does not meet standards of reliability or precision.
[1]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 BP is defined as any BP less than 120 mm Hg systolic and less than 80 mm Hg diastolic. 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.
[2]Visits where blood pressure was taken represent 94.3% (SE = 1.2) of all office visits made to primary care specialists by adults (aged 18 and over).
[3]The race groups white, black or African American, and other include persons of Hispanic and not of 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 2015 National Ambulatory Medical Care Survey Public Use Data File documentation, available at: ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf. For 2015, race data were missing for 27.6% of adult visits made to primary care specialists, and ethnicity data were missing for 16.5% of adult visits made to primary care specialists.
[4]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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 23. Medication therapy and number of medications mentioned at office visits, by patient sex: United States, 2015

Medication therapy[1]	Number of visits in thousands[1] (standard error in thousands)	Both sexes	Female[2]	Male[3]
		Percent distribution (standard error of percent)		
All visits	990,808 (49,038)	100.0 ...	100.0 ...	100.0 ...
Visits with mention of medication[4]	755,286 (43,578)	76.2 (1.3)	76.5 (1.5)	75.9 (1.5)
Visits without mention of medication	235,523 (14,437)	23.8 (1.3)	23.5 (1.5)	24.1 (1.5)
Number of medications provided or prescribed				
All visits	990,808 (49,038)	100.0 ...	100.0 ...	100.0 ...
0	235,523 (14,437)	23.8 (1.3)	23.5 (1.5)	24.1 (1.5)
1	176,873 (11,490)	17.9 (0.9)	18.7 (1.0)	16.6 (1.1)
2	124,529 (10,390)	12.6 (0.7)	12.7 (0.9)	12.3 (0.7)
3	94,793 (8,203)	9.6 (0.5)	9.1 (0.6)	10.2 (0.8)
4	65,726 (5,153)	6.6 (0.4)	6.1 (0.6)	7.4 (0.6)
5	52,756 (4,437)	5.3 (0.4)	5.4 (0.5)	5.2 (0.4)
6	43,980 (4,463)	4.4 (0.4)	4.4 (0.4)	4.6 (0.5)
7	37,156 (3,794)	3.8 (0.3)	4.1 (0.5)	3.2 (0.4)
8	30,389 (2,990)	3.1 (0.3)	3.2 (0.4)	2.9 (0.3)
9	25,144 (3,137)	2.5 (0.3)	2.6 (0.3)	2.4 (0.3)
10	19,611 (2,578)	2.0 (0.2)	2.0 (0.3)	1.9 (0.3)
11	16,780 (1,860)	1.7 (0.2)	1.7 (0.2)	1.7 (0.2)
12	14,696 (3,237)	1.5 (0.3)	1.2 (0.2)	1.9 (0.6)
13	11,102 (1,927)	1.1 (0.2)	1.2 (0.2)	1.0 (0.2)
14	7,915 (1,287)	0.8 (0.1)	0.8 (0.2)	0.8 (0.2)
15 or more	33,837 (4,349)	3.4 (0.4)	3.3 (0.4)	3.6 (0.5)

... Category not applicable.
[1]Includes prescription drugs, over-the-counter preparations, immunizations, and desensitizing agents.
[2]Based on 585,795,000 visits made by females.
[3]Based on 405,013,000 visits made by males.
[4]A drug mention is documentation in a patient's record of a drug provided, prescribed, or continued at a visit (up to 30 per visit). Also defined as drug visits.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 24. Office drug visits and drug mentions, by physician specialty: United States, 2015

Physician speciality	Drug visits[1]		Drug mentions[2]		Percent of office visits with drug mentions[3] (standard error of percent)	Drug mention rates[4] (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)		
All specialties	755,286 (43,578)	100.0 ...	3,657,642 (266,769)	100.0 ...	76.2 (1.3)	369.2 (17.4)
General and family practice	163,903 (28,434)	21.7 (3.3)	869,427 (141,910)	23.8 (3.5)	85.0 (2.5)	451.0 (38.3)
Internal medicine	116,773 (25,385)	15.5 (3.0)	733,527 (190,288)	20.1 (4.4)	84.0 (4.4)	527.6 (62.9)
Pediatrics	66,633 (8,816)	8.8 (1.3)	167,576 (25,277)	4.6 (0.8)	70.2 (2.3)	176.7 (13.9)
Obstetrics and gynecology	54,640 (10,614)	7.2 (1.4)	168,049 (36,698)	4.6 (1.0)	67.4 (4.9)	207.4 (24.6)
Ophthalmology	39,651 (5,201)	5.2 (0.7)	176,307 (27,765)	4.8 (0.8)	68.4 (4.7)	304.3 (41.8)
Psychiatry	38,929 (8,329)	5.2 (1.1)	113,183 (24,041)	3.1 (0.7)	84.9 (4.1)	246.8 (25.2)
Orthopedic surgery	35,754 (5,859)	4.7 (0.8)	139,084 (23,459)	3.8 (0.7)	63.4 (4.3)	246.5 (29.3)
Cardiovascular diseases	35,055 (7,038)	4.6 (0.9)	258,006 (59,119)	7.1 (1.6)	85.0 (5.4)	625.9 (69.9)
Dermatology	27,102 (4,334)	3.6 (0.6)	104,961 (19,225)	2.9 (0.6)	73.0 (2.9)	282.8 (25.4)
Otolaryngology	15,621 (2,459)	2.1 (0.3)	71,267 (14,393)	1.9 (0.4)	63.0 (3.7)	287.4 (35.2)
Urology	15,273 (2,066)	2.0 (0.3)	76,974 (11,528)	2.1 (0.4)	73.7 (3.0)	371.2 (32.4)
Neurology	12,463 (2,872)	1.7 (0.4)	67,903 (19,495)	1.9 (0.5)	79.7 (5.2)	434.3 (76.5)
General surgery	9,727 (1,877)	1.3 (0.3)	52,129 (11,901)	1.4 (0.3)	57.9 (5.4)	310.2 (45.6)
All other specialties	123,763 (25,480)	16.4 (3.0)	659,249 (134,813)	18.0 (3.3)	74.3 (3.8)	395.8 (54.8)

... Category not applicable.
[1]Visits at which one or more drugs were provided or prescribed.
[2]A drug mention is documentation in a patient's record of a drug provided, prescribed, or continued at a visit (up to 30 per visit). Also defined as drug visits.
[3]Percent of visits that included one or more drugs provided or prescribed (number of visits divided by number of office visits multiplied by 100).
[4]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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 25. Twenty most frequently mentioned drugs by therapeutic drug category at office visits: United States 2015

Therapeutic drug category[1]	Number of occurrences in thousands (standard error in thousands)	Percent of drug mentions[2] (standard error of percent)
Analgesics[3]	402,939 (35,239)	11.0 (0.4)
Antihyperlipidemic agents	173,523 (14,480)	4.7 (0.2)
Antidepressants	166,198 (14,134)	4.5 (0.3)
Vitamins	150,302 (13,587)	4.1 (0.2)
Antidiabetic agents	142,685 (15,118)	3.9 (0.2)
Dermatological agents	139,609 (12,218)	3.8 (0.3)
Anxiolytics, sedatives, and hypnotics	127,757 (10,529)	3.5 (0.2)
Antiplatelet agents	124,670 (13,177)	3.4 (0.2)
Anticonvulsants	122,286 (12,559)	3.3 (0.2)
Proton pump inhibitors	115,079 (13,579)	3.1 (0.3)
Beta-adrenergic blocking agents	106,098 (9,255)	2.9 (0.1)
Vitamin and mineral combinations	99,127 (10,605)	2.7 (0.2)
Bronchodilators	97,887 (9,001)	2.7 (0.2)
Immunostimulants	97,297 (14,985)	2.7 (0.4)
Diuretics	92,510 (9,332)	2.5 (0.1)
Angiotensin converting enzyme inhibitors	83,966 (7,735)	2.3 (0.1)
Antihistamines	75,194 (6,194)	2.1 (0.1)
Calcium channel blocking agents	73,840 (7,713)	2.0 (0.1)
Ophthalmic preparations	73,150 (7,867)	2.0 (0.2)
Minerals and electrolytes	71,653 (8,256)	2.0 (0.1)

[1]Based on Multum Lexicon second level therapeutic drug category (see https://www.cerner.com/solutions/drug-database).
[2]Based on an estimated 3,657,642,000 drug mentions.
[3]Includes narcotic and nonnarcotic analgesics and nonsteroidal anti-inflammatory drugs.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 26. Twenty most frequently mentioned drug names at office visits, by new or continued status: United States, 2015

Drug name[1]	Number of mentions in thousands (standard error in thousands)	Percent distribution (standard error of percent)	Total	New	Continued	Unknown[2]	Therapeutic drug category[3]
				Percent distribution (standard error of percent)			
All drug mentions	3,657,642 (266,769)	100.0 ...	100.0	20.0 (1.5)	79.1 (1.6)	0.9 (0.2)	...
Aspirin	103,951 (10,194)	2.8 (0.1)	100.0	4.1 (0.8)	95.2 (1.0)	*0.7 (0.3)	Analgesics, Antiplatelet agents
Multivitamin	77,015 (8,404)	2.1 (0.2)	100.0	4.8 (0.9)	94.5 (0.9)	*0.7 (0.3)	Vitamin and mineral combinations
Omeprazole	62,408 (6,919)	1.7 (0.1)	100.0	10.8 (2.0)	88.9 (2.0)	*0.3 (0.1)	Proton pump inhibitors
Lisinopril	60,917 (6,014)	1.7 (0.1)	100.0	6.8 (1.5)	92.5 (1.6)	*0.7 (0.3)	Angiotensin converting enzyme inhibitors
Albuterol	59,480 (6,041)	1.6 (0.1)	100.0	16.6 (3.3)	82.4 (3.3)	*0.9 (0.4)	Bronchodilators
Levothyroxine	58,081 (6,143)	1.6 (0.1)	100.0	4.6 (1.1)	94.8 (1.1)	*0.6 (0.2)	Thyroid hormones
Atorvastatin	53,372 (4,709)	1.5 (0.1)	100.0	6.5 (1.8)	92.7 (1.8)	*0.9 (0.4)	Antihyperlipidemic agents
Amlodipine	50,894 (4,958)	1.4 (0.1)	100.0	9.1 (2.5)	90.3 (2.5)	*0.6 (0.2)	Calcium channel blocking agents
Metoprolol	50,373 (4,544)	1.4 (0.1)	100.0	5.5 (1.2)	93.4 (1.3)	*1.1 (0.4)	Beta-adrenergic blocking agents
Metformin	46,660 (4,508)	1.3 (0.1)	100.0	6.3 (1.5)	93.1 (1.5)	*0.6 (0.3)	Antidiabetic agents
Acetaminophen-hydrocodone	46,033 (8,990)	1.3 (0.2)	100.0	20.6 (5.7)	78.9 (5.8)	*0.5 (0.3)	Analgesics
Simvastatin	43,262 (4,347)	1.2 (0.1)	100.0	5.6 (1.5)	94.1 (1.6)	*0.3 (0.2)	Antihyperlipidemic agents
Omega-3 polyunsaturated fatty acids	40,252 (4,667)	1.1 (0.1)	100.0	*4.4 (1.6)	95.1 (1.6)	*0.5 (0.2)	Nutraceutical products
Ibuprofen	40,154 (4,063)	1.1 (0.1)	100.0	25.4 (2.8)	74.4 (2.8)	*0.1 (0.1)	Analgesics
Hydrochlorothiazide	36,645 (4,529)	1.0 (0.1)	100.0	*14.6 (5.1)	84.9 (5.1)	*0.5 (0.3)	Diuretics
Losartan	36,605 (4,497)	1.0 (0.1)	100.0	*12.3 (3.9)	87.5 (3.8)	*0.2 (0.1)	Angiotensin II inhibitors
Gabapentin	35,461 (4,421)	1.0 (0.1)	100.0	10.5 (2.7)	86.5 (2.8)	*3.1 (1.9)	Anticonvulsants
Furosemide	35,382 (4,217)	1.0 (0.1)	100.0	8.0 (1.9)	91.5 (1.9)	*0.5 (0.2)	Diuretics
Acetaminophen	34,986 (4,367)	1.0 (0.1)	100.0	24.2 (3.9)	75.0 (3.9)	*0.8 (0.3)	Analgesics
Ergocalciferol	34,948 (3,424)	1.0 (0.1)	100.0	12.2 (2.1)	87.3 (2.1)	*0.5 (0.2)	Vitamins
Other	2,650,765 (193,899)	72.5 (0.6)	100.0	23.9 (1.8)	75.2 (1.8)	*1.0 (0.2)	Other

... Category not applicable.
* Figure does not meet standards of reliability or precision.
[1]Based on Multum Lexicon terminology, drug name reflects the active ingredient(s) of a drug provided, prescribed, or continued.
[2]Unknown includes drugs provided or prescribed that did not have either the new drug or continued drug checkboxes marked.
[3]Based on Multum Lexicon second-level therapeutic drug category (see https://www.cerner.com/solutions/drug-database).

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 27. Providers seen at office visits: United States, 2015

Type of provider	Number of visits in thousands[1] (standard error in thousands)	Percent of visits (standard error of percent)
All visits	990,808 (49,038)	... ...
Physician	980,750 (48,769)	99.0 (0.2)
R.N.[2] or L.P.N.[3]	175,988 (27,226)	17.8 (2.5)
Physician assistant	74,786 (19,105)	7.5 (1.8)
Nurse practitioner or midwife	*30,845 (10,413)	*3.1 (1.0)
Mental health provider	*4,234 (1,425)	*0.4 (0.1)
Other provider	340,604 (36,922)	34.4 (2.9)
Blank	2,169 (586)	0.2 (0.1)

... Category not applicable.
* Figure does not meet standards of reliability or precision.
[1]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 1% of these visits, the physician was not seen; instead, the patient saw another provider.
[2]R.N. is registered nurse.
[3]L.P.N. is licensed practical nurse.

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

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 28. Disposition of office visits: United States, 2015

Disposition	Number of visits in thousands[1] (standard error in thousands)	Percent of visits (standard error of percent)
All visits	990,808 (49,038)	... ...
Return to referring physician	29,287 (4,597)	3.0 (0.5)
Refer to other physician	81,808 (10,749)	8.3 (0.9)
Return in less than 1 week	35,022 (4,282)	3.5 (0.4)
Return in 1 week to less than 2 months	305,110 (19,999)	30.8 (1.6)
Return in 2 months or greater	270,959 (17,023)	27.3 (1.4)
Return at unspecified time	55,298 (6,573)	5.6 (0.6)
Return as needed (p.r.n.)	226,859 (26,647)	22.9 (2.2)
Refer to emergency room/ Admit to hospital	6,798 (1,403)	0.7 (0.1)
Other disposition	86,435 (12,309)	8.7 (1.2)
Blank	16,027 (3,000)	1.6 (0.3)

... Category not applicable.
[1]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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 29. Time spent with physician: United States, 2015

Time spent with physician	Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)
All visits	990,808 ...	100.0 ...
Visits at which no physician was seen	10,058 (1,663)	1.0 (0.2)
Visits at which a physician was seen	980,750 (48,769)	99.0 (0.2)
Total[1]	980,750 ...	100.0 ...
1–5 minutes	9,452 (2,339)	1.0 (0.2)
6–10 minutes	85,784 (13,024)	8.7 (1.3)
11–15 minutes	326,626 (27,844)	33.3 (2.1)
16–30 minutes	411,324 (24,603)	41.9 (1.6)
31–60 minutes	138,070 (11,430)	14.1 (1.0)
61 minutes and over	9,494 (2,193)	1.0 (0.2)

... Category not applicable.
[1]Time spent with physician was reported only for visits where a physician was seen. Time spent with physician was missing for 30.4% 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: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 30. Time spent with physician, by physician specialty: United States, 2015

Physician specialty	Mean time in minutes spent with physician (standard error of mean)[1]	25th percentile	Median	75th percentile
All visits	22.8 (0.4)	14.4	19.2	29.2
Psychiatry	34.3 (1.7)	19.9	29.7	44.8
Neurology	28.9 (2.6)	15.0	25.0	39.2
Ophthalmology	28.8 (2.9)	14.5	20.1	34.2
General surgery	22.8 (1.2)	14.4	19.0	29.2
Cardiovascular diseases	22.6 (1.2)	14.5	19.1	29.1
Internal medicine	22.2 (1.4)	14.5	19.1	29.2
Urology	22.1 (0.9)	14.3	16.4	29.2
Orthopedic surgery	21.7 (1.4)	14.3	15.8	29.0
Pediatrics	21.7 (1.1)	14.4	19.1	27.9
Otolaryngology	21.1 (0.7)	14.3	16.4	24.6
General and family practice	20.3 (0.8)	14.1	15.8	24.7
Obstetrics and gynecology	20.1 (0.8)	14.2	15.0	23.8
Dermatology	17.9 (0.8)	11.5	14.7	19.7
All other specialities	24.0 (1.4)	14.5	19.7	29.2

[1]Only visits where a physician was seen are included. Time spent with physician was missing for 30.4% of visits where physician was seen. Estimates presented include imputed values for missing data.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 31. Physician characteristics, by response status: United States, 2015

Physician characteristic[1]	Number of sampled in-scope physicians[2]	Total in-scope sample percent distribution[3] (weighted)	Responding physician percent distribution[4] (weighted)	Nonresponding physician percent distribution[5] (weighted)	Physician response rate (weighted)[6]	Participants[7]	Particpation rate (weighted)[8]
All office-based physicians	4,910	100.0	100.0	100.0	0.296	1,737	0.365
Age							
Under 50 years	1,896	39.3	40.2	38.9	0.303	654	0.353
50 years and over	3,014	60.7	59.8	61.1	0.291	1,083	0.373
Sex							
Male	3,591	67.6	67.7	67.6	0.296	1,259	0.362
Female	1,319	32.4	32.3	32.4	0.295	478	0.371
Metropolitan status[9]							
MSA	4,550	91.8	92.7	91.4	0.299	1,617	0.368
Non-MSA	360	8.2	7.3	8.6	0.263	120	0.328
Type of doctor							
Doctor of medicine	4,707	94.7	95.1	94.6	0.297	1,671	0.364
Doctor of osteopathy	203	5.3	4.9	5.4	0.277	66	0.388
Physician specialty[10,11]							
General or family practice	358	18.4	18.9	18.2	0.303	147	0.403
Internal medicine	275	13.1	9.6	14.6	0.217	90	0.309
Pediatrics	274	8.9	13.0	7.2	0.432	128	0.504
General surgery	263	3.0	3.2	3.0	0.314	97	0.360
Obstetrics and gynecology	383	7.2	6.9	7.3	0.284	141	0.359
Orthopedic surgery	396	4.7	4.0	5.0	0.251	129	0.313
Cardiovascular diseases	342	3.9	4.4	3.7	0.338	107	0.360
Dermatology	406	2.2	2.2	2.2	0.291	146	0.349
Urology	396	2.0	1.8	2.0	0.277	139	0.376
Psychiatry	278	5.8	4.7	6.2	0.240	90	0.358
Neurology	302	2.0	1.6	2.2	0.239	86	0.284
Ophthalmology	418	3.8	3.7	3.8	0.294	159	0.377
Otolaryngology	411	1.9	1.9	1.9	0.288	135	0.338
All other specialties	408	23.2	24.0	22.8	0.307	143	0.337
Specialty type[11]							
Primary care	1,248	46.5	47.0	46.3	0.299	491	0.389
Surgical	2,032	20.7	20.0	20.9	0.287	715	0.340
Medical	1,630	32.8	32.9	32.7	0.297	531	0.347
Practice type							
Solo	1,018	21.4	22.4	21.0	0.310	371	0.425
Two physicians	219	4.7	4.0	5.0	0.254	80	0.343
Group or HMO[12]	2,935	57.6	56.7	58.1	0.291	1,030	0.346
Medical school or government	109	2.0	1.8	2.0	0.272	33	0.325
Other	168	3.3	3.6	3.1	0.326	64	0.397
Unclassified	461	11.0	11.5	10.8	0.309	159	0.354
Annual visit volume[10]							
0–25 percentile	1,228	22.5	35.1	17.1	0.463	559	0.528
26–50 percentile	1,228	23.0	22.1	23.4	0.284	376	0.353
51–75 percentile	1,227	32.2	18.7	37.9	0.172	298	0.209
76–100 percentile	1,227	22.3	24.1	21.5	0.320	504	0.440

[1]Characteristic information is from a combination of sources: the master files of the American Medical Association, the American Osteopathic Association, and the NAMCS physician induction form.
[2]In-scope physicians are those who verified that they were nonfederal and involved in direct patient care in an office-based practice, excluding the specialties of radiology, pathology, and anesthesiology.
[3]Total in-scope sample physicians are those who were selected from (a) the master files of the American Medical Association, and (b) the American Osteopathic Association. In-scope determination was also used for inclusion in NAMCS.
[4]Responding physicians are those who were in-scope and participated fully in completion of PRFs or were unavailable to complete PRFs.
[5]Nonresponding physicians are those who were in-scope and participated minimally or refused to participate in the NAMCS.
[6]Values represent a response rate among physicians selected from the core 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.
[7]Participants are physicians for whom at least one Patient Record form was completed (full and minimal responders) and also include physicians who saw no patients during their sample week.
[8]Participation rate is the number of participants divided by the number of in-scope physicians.
[9]MSA is metropolitan statistical area.
[10]Chi-square test of association is statistically significant ($p<0.05$) between physician response and indicated physician characteristic.
[11]Physician specialty type defined in the 2015 National Ambulatory Medical Care Survey Public Use Data File Documentation (see ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NAMCS/doc2015.pdf).
[12]HMO is health maintenance organization.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.

Table 32. State location of physician office, by response status: United States, 2015

Region and state[1]	Number of sampled in-scope physicians[2,3]	Total in-scope sample percent distribution (weighted)	Percent distribution of respondents[4]	Percent distribution of non-respondents[5]	Response rate[6] (weighted)	Participants[7]	Participation rate[8] (weighted)
Total	4,910	55.3	16.4	38.9	0.296	1,737	0.365
Northeast							
Massachusetts	178	2.3	1.6	2.6	0.204	52	0.278
New Jersey	258	4.0	2.0	4.8	0.150	59	0.234
New York	286	7.8	5.9	8.6	0.225	90	0.347
Pennsylvania	239	3.9	4.2	3.7	0.326	79	0.382
Remainder states (CT, ME, NH, RI, VT)	262	3.0	2.8	3.0	0.278	97	0.362
Midwest							
Illinois	224	3.7	3.1	3.9	0.248	67	0.295
Indiana	305	2.4	2.1	2.6	0.258	107	0.297
Michigan	244	3.0	5.7	1.9	0.558	129	0.577
Ohio	231	3.4	2.4	3.8	0.206	70	0.264
Remainder States (IA, KS, NE, ND, SD, MN, MO, WI)	289	8.4	8.6	8.3	0.305	96	0.330
South							
Florida	206	5.4	4.4	5.8	0.243	93	0.436
Georgia	178	1.9	2.8	1.5	0.441	98	0.580
North Carolina	161	1.8	0.9	2.2	0.152	61	0.324
Texas	279	8.1	6.4	8.9	0.232	72	0.252
Virginia	239	2.8	2.4	2.9	0.261	85	0.352
Remainder states (AR,AL,DE,DC,KY,MD,MS,LA,OK,SC,TN,WV)	272	12.7	16.9	11.0	0.393	130	0.515
West							
Arizona	251	1.9	2.0	1.9	0.302	79	0.359
California	288	14.8	15.2	14.6	0.304	82	0.319
Washington	232	2.4	2.7	2.3	0.329	82	0.330
Remainder states (CO, ID, MT, NV, NM, OR, UT, WY, AK, HI)	288	6.5	7.9	5.9	0.360	109	0.418

[1]Chi-square test of association is statistically significant ($p<0.05$) between physician response and state location of office where most visits were seen.
[2]In-scope sample physicians are those confirmed during the survey to be nonfederal and involved in direct patient care in an office-based practice, excluding the specialities of radiology, pathology, and anesthesiology.
[3]Total in-scope sample physicians are those who were selected from (a) the master files of the American Medical Association, and (b) the American Osteopathic Association. In-scope determination was also used for inclusion in NAMCS.
[4]Responding physicians are those who were in-scope and participated fully in completion of PRFs or who saw no patients during their sample week.
[5]Non-responding physicians are those physicians who were in-scope and participated minimally or refused to participate in the NAMCS.
[6]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.
[7]Participants are physicians for whom at least one Patient Record form was completed (full and minimal responders) and also include physicians who saw no patients during their sample week.
[8]Participation rate is the number of participants divided by the number of in-scope physicians.

SOURCE: NCHS, National Ambulatory Medical Care Survey, 2015.