

National Hospital Ambulatory Medical Care Survey (NHAMCS)

(Used for Indicator H3)

Brief description of the data set	The National Hospital Ambulatory Medical Care Survey (NHAMCS) is designed to collect information on the services provided in hospital emergency and outpatient departments and in ambulatory surgery centers.
Who provides the data set?	Centers for Disease Control and Prevention, National Center for Health Statistics.
How are the data gathered?	Sampled hospitals are noninstitutional general and short-stay hospitals located in all states and Washington DC, but exclude federal, military, and Veteran’s Administration hospitals. Data from sampled visits are obtained on the demographic characteristics, expected source(s) of payments, patients’ complaints, physician’s diagnoses, diagnostic and screening services, procedures, types of health care professionals seen, and causes of injury.
What documentation is available describing data collection procedures?	See http://www.cdc.gov/nchs/ahcd/ahcd_data_collection.htm#nhamcs_collection for data collection documentation.
What types of data relevant for children’s environmental health indicators are available from this database?	Relevant data include physicians’ diagnoses for ambulatory visits to hospital emergency rooms and outpatient departments as well as demographic information.
What is the spatial representation of the database (national or other)?	NHAMCS sampling procedures provide nationally representative data, and may also be analyzed by four broad geographic regions: North, Midwest, South and West. In addition the database identifies whether or not the hospital is in an MSA. Analysis of data for any other geographic area (state, patient or facility zip code) is possible only by special arrangement with the NCHS Research Data Center.
Are raw data (individual measurements or survey responses) available?	Data for each year of the NHAMCS are available for download and analysis (http://www.cdc.gov/nchs/ahcd/ahcd_questionnaires.htm). Annual reports from the NHAMCS are also available (http://www.cdc.gov/nchs/ahcd/ahcd_products.htm) as are interactive data tables (http://www.cdc.gov/nchs/hdi.htm).
How are database files obtained?	http://www.cdc.gov/nchs/ahcd/ahcd_questionnaires.htm .
Are there any known data quality or data analysis concerns?	Responses to some demographic and other questions (birth year, sex, race, ethnicity, immediacy of being seen) are statistically imputed for survey participants lacking a reported response.
What documentation is available describing quality assurance procedures?	http://www.cdc.gov/nchs/ahcd/ahcd_questionnaires.htm summarizes the quality assurance procedures.
For what years are data available?	1992–present.
What is the frequency of data collection?	Continuously throughout the year.
What is the frequency of data release?	Annually.

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Are the data comparable across time and space?	Changes to some survey questions or to the set of possible responses make their responses non-comparable for different time periods (e.g., reason for visit). Some diagnosis codes are not comparable from year to year due to annual revisions to the International Classification of Diseases (ICD-9).
Can the data be stratified by race/ethnicity, income, and location (region, state, county or other geographic unit)?	Data can be stratified by race, ethnicity, and region (four regions only). For 2006 and later, data can also be stratified by median income, % below poverty, % with college degree or higher level of education, and urban/rural classification for patient's zip code (the zip code itself is not included in the public release version).