

Activity in Acute Public Hospitals in Ireland

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Activity in Acute Public Hospitals in Ireland Annual Report, 2010

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Summary Description

This is a report on in-patient and day patient discharges from acute public hospitals participating in the Hospital In-Patient Enquiry (HIPE) scheme in 2010. Discharge activity is examined by type of patient and hospital, and by demographic parameters (such as age and sex). Particular issues of relevance to the Irish health care system covered in the report relate to the composition of discharges by medical card and public/private status. Discharges are also analysed by diagnoses, procedures, major diagnostic categories, and diagnosis related groups. *Maternity* discharges are examined separately from other discharges. The analysis is presented at the national level and is also disaggregated by Health Service Executive (HSE) administrative areas.

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Please note that there is the potential for minor revisions to data presented in this report. Please check online at www.esri.ie for the latest version.

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Inevitably, a small number of individuals have to carry most of the responsibility of producing a report of this type. In this case Sheelagh Bonham, Aoife Brick, Eoin Feeney, Conor Keegan, Aisling Mulligan and Sinéad O'Hara were to the fore in the preparation of the report for publication. We wish to express our sincere thanks to these colleagues for all of their hard work on the report. Their commitment, enthusiasm, and professionalism are gratefully acknowledged and sincerely appreciated.

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EXECUTIVE SUMMARY

The Hospital In-Patient Enquiry (HIPE) scheme, established in 1971, is a health information system designed to collect clinical and administrative data on discharges from, and deaths in, acute hospitals in Ireland. The Economic and Social Research Institute (ESRI) oversees the administration and management of this scheme on behalf of the Health Service Executive. Within the ESRI, the Health Research and Information Division (HRID) is responsible for overseeing all functions associated with the operation of this database, including the development and support of the data collection and reporting software, training of coders and data quality audit, reporting, and responding to requests for data.

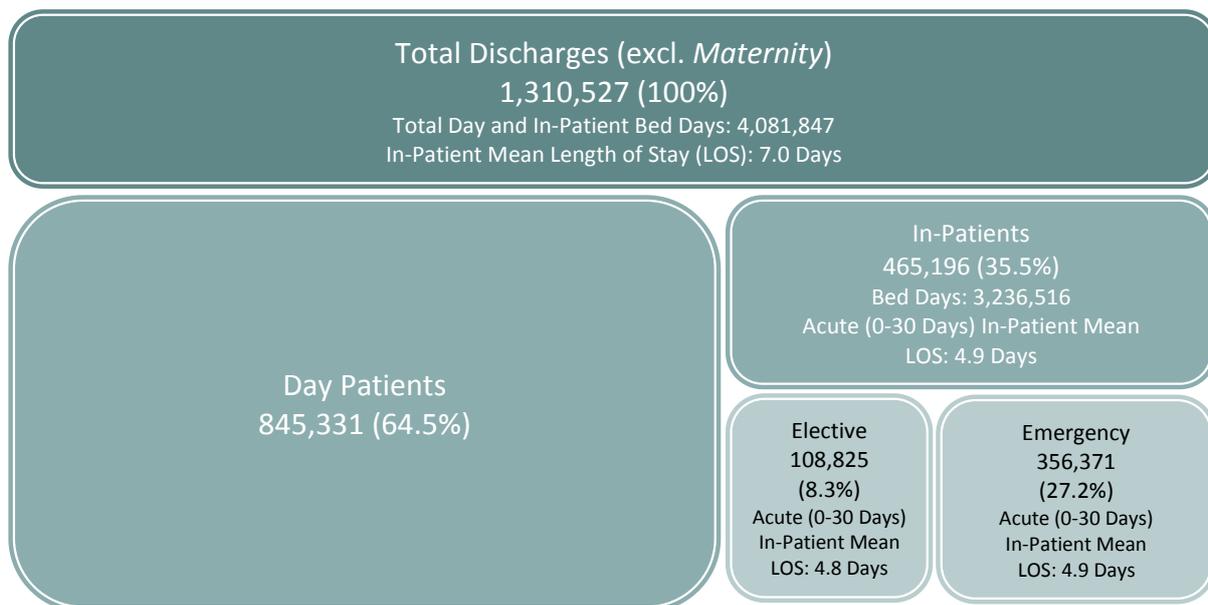
This report relates to discharges that occurred in the 2010 calendar year. The aim is to present an overview of discharge activity in acute public hospitals in Ireland. Marking a change to previous reports, the demographic and morbidity analysis for *Maternity* discharges are analysed separately for specified sections of the *Activity in Acute Public Hospitals in Ireland Annual Report, 2010* to enable a more comprehensive overview of trends in this area.

Total Discharges
1,447,108 (100%)

Discharges excluding *Maternity*
1,310,527 (90.6%)

Maternity
136,581
(9.4%)

TOTAL DISCHARGES (EXCL. MATERNITY), 2010



WHO

Sex

- Females accounted for 48.5 per cent of total discharges (excl. *Maternity*) with males accounting for 51.5 per cent.

Age

- The 65–74 years age group accounted for the largest proportion of male discharges (20.0 per cent) whereas the 55–64 years age group accounted for the largest proportion of female discharges (excl. *Maternity*) (16.9 per cent).

Marital Status

- Married discharges accounted for 47.5 per cent of total discharges (excl. *Maternity*).

Public/Private Status

- Over 81 per cent of total discharges (excl. *Maternity*) were treated on a public basis with 18.9 per cent treated on a private basis.
- The 85 years and over age group had the highest proportion of total discharges (excl. *Maternity*) treated publicly (89.7 per cent) with only 10.3 per cent treated on a private basis.

General Medical Service (GMS) Status

- Of total discharges (excl. *Maternity*), 56.9 per cent were GMS discharges.
- The highest proportion of GMS discharges were in the 85 years and over age group (87.8 per cent).

WHERE

HSE Area of Hospitalisation

- The highest proportion of total discharges (excl. *Maternity*) were hospitalised in the HSE Dublin Mid Leinster area (30.7 per cent) with the lowest proportion hospitalised in the HSE Dublin North East area (21.5 per cent).

HSE Area of Residence

- The HSE South area had the highest proportion of residents aged 65–74 years (19.1 per cent) compared to the HSE Dublin North East area and HSE Dublin Mid Leinster area who both had 17.6 per cent of residents in this age group.

Admission Source

- The majority of total discharges (excl. *Maternity*) in all HSE areas were admitted from home, ranging from 95.1 per cent in the HSE Dublin North East area to 97.0 per cent in the HSE West area.

Discharge Destination

- The majority of in-patient discharges (excl. *Maternity*) were discharged home, ranging from 85.7 per cent in HSE West area to 87.0 per cent in the HSE Dublin Mid Leinster area.

WHEN

Day of Admission

- The proportion of in-patient discharges (excl. *Maternity*) admitted on an elective basis decreased throughout the week, with the over 63 per cent admitted from Monday to Wednesday, falling to 10.9 per cent at the weekend.

Day of Discharge

- The proportion of elective in-patients discharged rose throughout the week, going from 10.6 per cent on Monday to 22.8 per cent on Friday, falling to 5.0 per cent on Sunday.

Month of Admission

- May recorded the highest number of emergency in-patient admissions (30,712 discharges).

MORBIDITY ANALYSIS

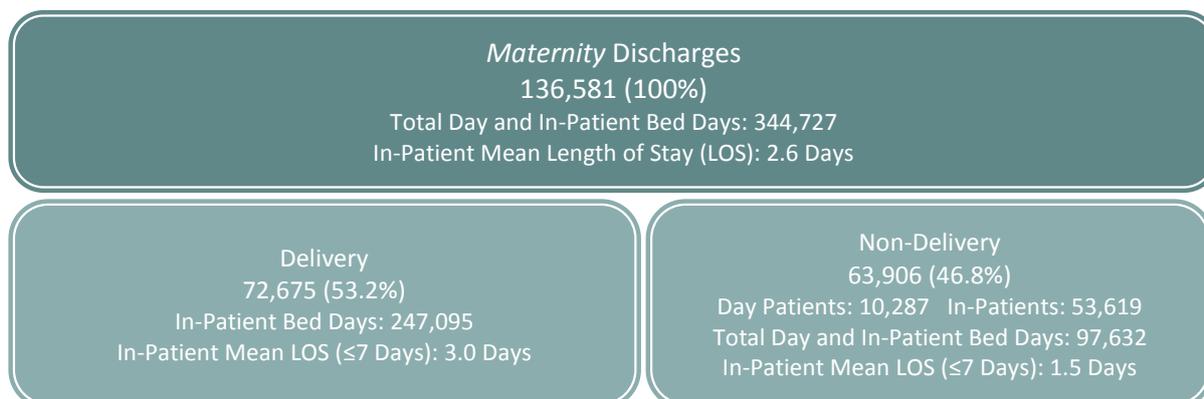
Day Patients

- The principal diagnosis of *other medical care*, which includes chemotherapy and radiotherapy encounters, accounted for the largest proportion of total day patient discharges (21.0 per cent).
- At least one procedure was recorded for 93.9 per cent of day patient discharges.
- *Haemodialysis* was reported as a principal procedure for 21.2 per cent of day patient discharges with at least one procedure reported.

In-Patients

- In-patient discharges with a principal diagnosis of *pain in throat and chest* accounted for 3.4 per cent of in-patients.
- At least one procedure was recorded for 66.2 per cent of in-patient discharges.
- *Generalised allied health interventions* were reported as a principal procedure for 13.9 per cent of in-patient discharges with at least one procedure. This category includes interventions such as physiotherapy, dietetics, pharmacy, social work, and occupational therapy.

MATERNITY DISCHARGES, 2010



DELIVERY

- Almost 59 per cent of *Delivery* discharges were in the 25–34 years age group.
- Non-instrumental deliveries accounted for the largest proportion of *Delivery* discharges (57.3 per cent), followed by Caesarean section at 26.4 per cent. Instrumental deliveries accounted for 16.3 per cent.
- Of *Delivery* discharges 75.8 per cent were treated on a public basis and 24.2 per cent on a private basis.
- Almost 24 per cent of *Delivery* discharges who were treated on a public basis had a Caesarean section compared to 34.7 per cent of those treated privately.
- Over 23 per cent of *Delivery* discharges had a principal diagnosis of *perineal laceration during delivery*.
- At least one procedure was recorded for 93.1 per cent of *Delivery* discharges.

NON-DELIVERY

Day Patients

- The principal diagnosis of *special screening examination for other diseases and disorders* accounted for the largest proportion of *Non-Delivery* day patient discharges (17.4 per cent).
- At least one procedure was recorded for 29.7 per cent of *Non-Delivery* day patient discharges.
- *Curettage and evacuation of uterus* was reported as a principal procedure for 54.3 per cent of *Non-Delivery* day patient discharges with at least one procedure.

In-Patients

- Almost 24 per cent of *Non-Delivery* in-patient discharges had a principal diagnosis of *other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium* while *false labour* accounted for a further 14.4 per cent.
- At least one procedure was recorded for 19.0 per cent of *Non-Delivery* in-patient discharges.
- *Curettage and evacuation of uterus* was reported as a principal procedure for 34.1 per cent of *Non-Delivery* in-patient discharges with at least one procedure.

CASE MIX ANALYSIS

Total Discharges
1,447,108 (100%)

- The MDC with the highest volume of total discharges (14.5 per cent) was *Diseases and Disorders of the Kidney and Urinary Tract*, MDC 11. Day patient discharges accounted for over 89 per cent of activity within this MDC.
 - * Within this MDC, *Haemodialysis* (AR-DRG L61Z) accounted for 167,963 discharges or 11.6 per cent total discharges. *Haemodialysis* was the highest ranked AR-DRG for day patients accounting for 19.6 per cent of total day patients.
- The MDC with the largest number of day patient discharges reported was MDC 17 *Neoplastic Disorders (Haematological and Solid Neoplasms)*, at 22.9 per cent.
 - * *Radiotherapy* (AR-DRG R64Z), accounted for 47.3 per cent of day patients within this MDC and 10.9 per cent total day patients.
 - * *Chemotherapy* (AR-DRG R63Z), accounted for 40.9 per cent of day patients within this MDC and 9.4 per cent of total day patients.
- The MDC with the largest proportion of in-patient discharges (21.1 per cent) was *Pregnancy, Childbirth and the Puerperium*, MDC 14.
 - * *Vaginal Delivery* (AR-DRG O60Z), accounted for 41.9 per cent of in-patients within this MDC and 8.9 per cent of total in-patient discharges.

Overview SECTION

ONE

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1.1 INTRODUCTION

The aim of the Activity in Acute Public Hospitals Annual Report is to present an overview of discharge activity in acute public hospitals in Ireland during 2010 using data from the Hospital In-Patient Enquiry (HIPE) scheme. HIPE collects information on day patient and in-patient activity from participating hospitals.¹ A HIPE discharge record is created when a patient is discharged from (or dies in) hospital. This record contains administrative, demographic and clinical information for an episode of care. An episode of care begins at admission to hospital and ends at discharge from (or death in) that hospital.

Section One provides an overview of the 2010 report. It outlines briefly the background of the HIPE scheme which is the principal data source for the report, and highlights other data sources used throughout the report. This is followed by an outline of the structure of the 2010 report including details of the changes from previous HIPE annual reports. In addition, the scope of the HIPE data and the methods used in the report are outlined. Finally, an analysis of the trends in the main HIPE variables is undertaken using data from 2006–2010.

1.2 BACKGROUND

The Economic and Social Research Institute (ESRI) oversees the administration and management of the HIPE scheme on behalf of the Health Service Executive and the Department of Health. Within the ESRI, the Health Research and Information Division (HRID) is responsible for overseeing all functions associated with the operation of this database, including the development and support of the data collection and reporting software, training of coders, data quality, audit, reporting, and responding to requests for data.^{2, 3}

Given the comprehensive coverage achieved by this information system, the data gathered by HIPE have become increasingly used by policymakers, clinical teams and researchers. Data sets for HIPE discharges are provided to a number of state agencies in order to address specific data requirements. In addition to responding to requests for HIPE data, the HRID also manages an online data reporting tool.⁴

¹ See Appendix I for a list of hospitals participating in HIPE in 2010.

² The HIPE Portal is a web-based software application designed and developed in the ESRI for the collection and reporting of HIPE data within public hospitals.

³ The ESRI's HRID also oversees the administration and management of the National Perinatal Reporting System (NPRS) on behalf of the HSE.

⁴ An online data reporting tool is now available at www.hipe.ie

1.3 DATA SOURCES FOR ANNUAL REPORT 2010

- HIPE:** The Hospital In-Patient Enquiry (HIPE) scheme, established in 1971, is a health information system designed to collect clinical and administrative data on discharges from, and deaths in, acute hospitals in Ireland.^{5,6} In 2010, 57 public hospitals in Ireland reported to HIPE (see Appendix I).⁷
- Hospital Beds:** Hospital bed data from 2006–2010 were obtained from the Business Intelligence Unit in the Corporate Planning and Corporate Performance Directorate of the HSE (see Appendix IV for 2010 bed data).
- Population Estimates:** For 2006, population data were obtained from Census 2006 (Central Statistics Office). Population estimates for 2007–2010 were obtained from the ESRI (see Appendix V for 2010 population estimates).

1.4 CHANGES TO ANNUAL REPORT 2010

This report marks a change from the way in which HIPE data are presented compared with previous *Activity in Acute Public Hospitals* Annual Reports. In the previous reports, tables and figures presented in all Sections of the report were based on total discharges. For Annual Report 2010, *Maternity* discharges are excluded from the analyses in Sections Two and Three and a new section has been added to the report that looks exclusively at *Maternity* discharges (Section Four). *Maternity* discharges in HIPE are those who were *admitted* in relation to their obstetrical experience (from conception to 6 weeks post delivery), that is they were allocated to Admission Type code *Maternity*.⁵

Maternity discharges are a large subset of the acute public hospital discharge population. All discharges are female and are within a narrow age range. Discharges in this group report a very narrow range of diagnoses and procedures and the majority have a short acute in-patient mean length of stay (2.6 days) compared to total discharges excluding *Maternity* (4.9 days). By excluding *Maternity* discharges from Sections Two and Three this report can focus more specifically on the broad range of non-maternity activity taking place in acute public hospitals.

In addition to this significant change, there have been several other small changes to the way in which the data are reported:

- **Age:** The way in which the younger age categories are presented has changed. There is now a less than 1-year-old category, a 1–14 years category and a 15–24 years category instead of the previous 0–4 years, 5–14 years, 15–19 years, and 20–24 years categories.

⁵ See Appendix II for details of data collected by HIPE and the HIPE Data Dictionary 2010 Version 2.0 available at www.esri.ie

⁶ A copy of the HIPE data entry form for 2010 is contained in Appendix III.

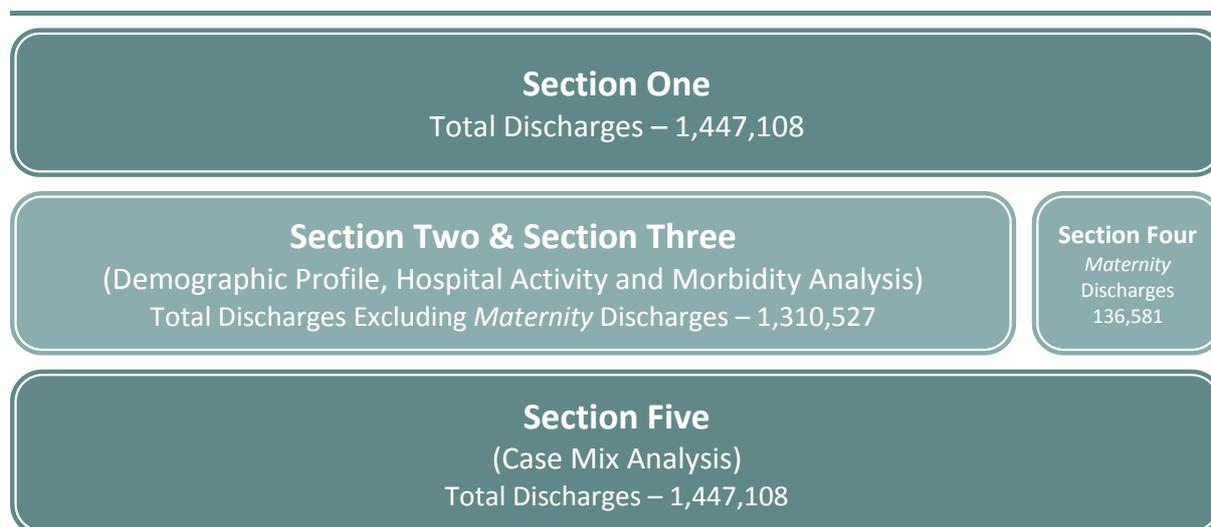
⁷ For historic reasons, a small number of non-acute hospitals also reported to HIPE in 2010. Discharges from these hospitals have been included in this report.

- **Additional Variables:** Variables available in HIPE which were not presented in previous reports are now used. For example, admission source and discharge destination are presented for the first time in Sections Two and Three, and county of residence of discharges is also presented in Section Two in order to provide a more detailed analysis of patient flows.
- **Cross-Tabulations:** There is now a more detailed analysis of the data by making more use of cross-tabulations. For example, there is more extensive use of the admission type variable, whereby in-patient data are broken down by elective and emergency discharges. Section Three presents principal and all-listed diagnoses and procedures cross-tabulated by sex and age group.
- **Length of Stay:** In addition to the mean length of stay, the median length of stay is provided to highlight the effect of outlier cases.
- **Annex:** There is now an additional analysis on a chosen topic of interest. For this year's report, the topic chosen is Stroke.

1.5 STRUCTURE OF ANNUAL REPORT 2010

Figure 1.1 outlines the structure of Annual Report 2010. It illustrates the number of discharges included in each of the five sections and the exclusion of *Maternity* discharges from Sections Two and Three.

FIGURE 1.1 Structure of the Activity in Acute Public Hospitals in Ireland Annual Report, 2010



The remainder of the report is structured as follows:

Section Two

In Section Two the report is concerned with providing a demographic (**WHO**), regional (**WHERE**) and temporal (**WHEN**) profile of discharges reported to HIPE in 2010. Section Two *excludes Maternity* discharges which are reported separately in Section Four. Section Two includes many of the administrative variables reported to HIPE, including age, sex, marital status, GMS status, and discharge status. The regional analysis uses HSE area of residence, county of residence, and HSE area of hospitalisation to see where discharges are being hospitalised, while the temporal analysis looks at day of admission, day of discharge, and month of admission to see when activity is occurring.

Section Three

Section Three focuses on the diagnoses and procedures recorded for discharges reported to HIPE. Section Three *excludes Maternity* discharges which are reported separately in Section Four. Section Three presents analysis of hospital activity by patient type with top 20 breakdowns for principal diagnoses and procedures presented for day patients and for total, elective and emergency in-patients. Further analysis is presented for diagnoses and procedures reported for total discharges (*excl. Maternity*), by sex and age group. The mean length of stay for acute in-patient discharges is presented for principal diagnoses and principal procedures.

Section Four

Section Four analyses *Maternity* discharges reported to HIPE. Data in Section Four are disaggregated by the delivery status of the discharges, that is, if they had a diagnosis of delivery or not. Variables presented include method of delivery, length of stay, age, marital status, public/private status, and day of admission. Analysis of principal diagnoses and procedures is also presented.

Section Five

Section Five provides analysis of all HIPE data by case mix. Each Major Diagnostic Category (MDC) is presented with its associated Australian Refined Diagnosis Related Groups (AR-DRGs) for all discharges, including *Maternity*. The analyses provide a breakdown of MDCs and AR-DRGs by day patient and in-patient, with elective and emergency in-patients also presented. In-patient (elective, emergency and total) mean and median length of stay is also provided for each MDC and AR-DRG.

1.6 SCOPE OF HIPE DATA

- *Each HIPE discharge record represents one episode of care.* Patients may be admitted to hospital more than once in any given time period with the same or different diagnoses. In the absence of a unique health identifier, therefore, the data reported to HIPE facilitate analysis of hospital discharge activity, but do not permit analysis of certain parameters, such as the number of hospital encounters per patient, or to estimate incidence or prevalence of a particular disease.
- *Emergency In-Patient Admissions:* HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.
- *Coverage of data:* In previous annual reports, the coverage of the HIPE system was estimated from hospital returns and data provided from the DoH and subsequently from the HSE. Because of differences in the approach to compiling hospital activity data it not currently possible to adopt that approach here. Work is underway to address these differences between the systems. In the meantime, we have used the data returned as 'coded' as a proportion of total discharges appropriate for inclusion in the HIPE system as an estimate of coverage. The data available from participating hospitals for 2010 indicate that for day patient and in-patient discharges, that are appropriate for inclusion in the HIPE data set, 99.9 per cent of the discharges were coded and returned for inclusion in the national HIPE data set.⁸
- *Hospital factors:* There has been restructuring within the hospital system which will be reflected in the analysis presented in this report.

⁸ This method of calculating coverage does not capture the under-reporting of data in particular hospitals as it cannot make any comparison for cases that were not actually downloaded within the hospital.

1.7 METHODS AND DEFINITIONS

Some of the methods used to present data in the report are detailed below.

- *Maternity Discharges:* *Maternity* discharges in HIPE are those who were *admitted* in relation to their obstetrical experience (from conception to 6 weeks post delivery); that is, they were allocated to Admission Type code *Maternity*.⁵
- *Hospital Type:* Due to confidentiality constraints, data cannot be published on a named hospital basis. Data are therefore presented at the more aggregated hospital category groupings of 'General' and 'Other' hospitals. General hospitals comprise voluntary, regional and county hospitals, while 'Other' hospitals specialise in the treatment of particular conditions or patient groupings.⁹
- *Derived Variables:* For some of the categorical administrative variables, aggregation of categories has been necessary to ensure confidentiality. These derivations are presented in Appendix VI for admission type, admission source, and discharge destination.
- *Length of Stay:* In addition to the mean length of stay, the median length of stay is provided to highlight the effect of outlier cases.

⁹ See Appendix I for a list of hospitals participating in HIPE in 2010.

1.8 DISCHARGES REPORTED TO HIPE, 2006–2010

In 2010, 1,447,108 discharges were reported to HIPE by participating acute public hospitals, representing a mean annual percentage increase of 3.8 per cent over the period 2006–2010 and a 2.6 per cent increase between 2009 and 2010.

Table 1.1 and Figures 1.2 to 1.3 show the distribution of discharges over the period 2006–2010 by selected variables.

- The number of day patients has increased from 662,096 in 2006 to 855,618 in 2010, a mean annual increase of 6.6 per cent (see Figure 1.2).
- The number of in-patients has increased from 582,794 in 2006 to 591,490 in 2010, a mean annual increase of 0.4 per cent.
- *Maternity* discharges increased by a mean of 4.8 per cent over the period 2006–2010 from 113,462 to 136,581 discharges.
- The male-female split has remained consistent with a slightly higher proportion of females (53.4 per cent) in 2010.
- Across the age groups, the 65 years and over age group accounted for 32.7 per cent of total discharges, with the smallest proportion in the under 15 years age group (8.9 per cent).
- There was a slight increasing trend in the proportion of public discharges rising from 77.4 per cent in 2006 to 80.9 per cent in 2010, with the remainder of each accounted for by private discharges.
- The number of GMS discharges increased by a mean of 6.4 per cent per year between 2006 and 2010, from 604,983 to 773,622 discharges.
- While total and acute in-patient mean length of stay have consistently fallen over the period 2006 to 2010.
- General hospitals continued to account for the largest proportion of total discharges (86.5 per cent) in 2010 with the remainder accounted for by 'other' hospitals (13.5 per cent). Voluntary and county hospitals accounted for the greatest proportions of total discharges (30.2 and 30.1 per cent) in the general hospital category in 2010 (see Figure 1.3).

TABLE 1.1 Acute Public Hospital Discharges in HIPE (N, %), 2006-2010

| | 2006 | 2007 | 2008 | 2009 | 2010 | Mean Annual % Change 2006–2010 ^a | % Change 2009–2010 |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|--------------------|
| | N (%) | | |
| Total Discharges | 1,244,890 (100) | 1,317,626 (100) | 1,368,594 (100) | 1,410,394 (100) | 1,447,108 (100) | 3.8 | 2.6 |
| Patient Type | | | | | | | |
| Day Patients | 662,096 (53.2) | 718,851 (54.6) | 771,145 (56.3) | 820,234 (58.2) | 855,618 (59.1) | 6.6 | 4.3 |
| In-Patients | 582,794 (46.8) | 598,775 (45.4) | 597,449 (43.7) | 590,160 (41.8) | 591,490 (40.9) | 0.4 | 0.2 |
| Total Discharges (excl. Maternity)^b | 1,131,428 (90.9) | 1,190,960 (90.4) | 1,235,092 (90.2) | 1,275,238 (90.4) | 1,310,527 (90.6) | 3.7 | 2.8 |
| Day Patients | 657,375 (52.8) | 712,076 (54.0) | 764,399 (55.9) | 808,469 (57.3) | 845,331 (58.4) | 6.5 | 4.6 |
| In-Patients | 474,053 (38.1) | 478,884 (36.3) | 470,693 (34.4) | 466,769 (33.1) | 465,196 (32.1) | -0.5 | -0.3 |
| Elective | 122,435 (9.8) | 120,012 (9.1) | 115,507 (8.4) | 110,355 (7.8) | 108,825 (7.5) | -2.9 | -1.4 |
| Emergency ^c | 351,618 (28.2) | 358,872 (27.2) | 355,186 (26.0) | 356,414 (25.3) | 356,371 (24.6) | 0.3 | 0.0 |
| Maternity Discharges | 113,462 (9.1) | 126,666 (9.6) | 133,502 (9.8) | 135,156 (9.6) | 136,581 (9.4) | 4.8 | 1.1 |
| Day Patients | 4,721 (0.4) | 6,775 (0.5) | 6,746 (0.5) | 11,765 (0.8) | 10,287 (0.7) | 26.2 | -12.6 |
| In-Patients | 108,741 (8.7) | 119,891 (9.1) | 126,756 (9.3) | 123,391 (8.7) | 126,294 (8.7) | 3.9 | 2.4 |
| Patient Characteristics | | | | | | | |
| Sex | | | | | | | |
| Males | 586,077 (47.1) | 615,312 (46.7) | 630,950 (46.1) | 651,525 (46.2) | 674,978 (46.6) | 3.6 | 3.6 |
| Females | 658,813 (52.9) | 702,314 (53.3) | 737,644 (53.9) | 758,869 (53.8) | 772,130 (53.4) | 4.7 | 1.7 |
| Age Group | | | | | | | |
| Under 15 years | 127,461 (10.2) | 125,348 (9.5) | 127,471 (9.3) | 127,264 (9.0) | 128,551 (8.9) | 0.2 | 1.0 |
| 15–44 years | 390,774 (31.4) | 420,388 (31.9) | 430,068 (31.4) | 435,965 (30.9) | 439,317 (30.4) | 3.0 | 0.8 |
| 45–64 years | 345,500 (27.8) | 371,405 (28.2) | 389,558 (28.5) | 395,924 (28.1) | 406,013 (28.1) | 4.1 | 2.5 |
| 65 years and over | 381,155 (30.6) | 400,485 (30.4) | 421,497 (30.8) | 451,241 (32.0) | 473,227 (32.7) | 5.6 | 4.9 |
| Public/Private Status^d | | | | | | | |
| Public Discharges | 963,620 (77.4) | 1,037,584 (78.7) | 1,077,917 (78.8) | 1,123,154 (79.6) | 1,171,066 (80.9) | 5.0 | 4.3 |
| Private Discharges | 281,270 (22.6) | 280,042 (21.3) | 290,677 (21.2) | 287,240 (20.4) | 276,042 (19.1) | -0.4 | -3.9 |
| GMS Status | | | | | | | |
| GMS (Medical card holders) | 604,983 (48.6) | 663,162 (50.3) | 686,181 (50.1) | 735,723 (52.2) | 773,622 (53.5) | 6.4 | 5.2 |
| Non-GMS (Non-medical card holders) | 579,950 (46.6) | 620,708 (47.1) | 641,093 (46.8) | 660,812 (46.9) | 657,214 (45.4) | 3.2 | -0.5 |
| Unknown ^e | 59,957 (4.8) | 33,756 (2.6) | 41,320 (3.0) | 13,859 (1.0) | 16,272 (1.1) | -17.6 | 17.4 |
| Mean Length of Stay | | | | | | | |
| Total In-Patients | 6.3 | 6.2 | 6.2 | 6.1 | 6.0 | -1.2 | -1.6 |
| Acute ^f | 4.8 | 4.7 | 4.6 | 4.5 | 4.4 | -2.2 | -2.2 |
| Extended ^g | 60.0 | 59.8 | 62.5 | 64.9 | 65.1 | 2.1 | 0.3 |
| Hospital Type^h | | | | | | | |
| General Hospitals | 1,074,202 (86.3) | 1,130,965 (85.8) | 1,192,755 (87.2) | 1,225,574 (86.9) | 1,252,454 (86.5) | 3.9 | 2.2 |
| Voluntary Hospitals | 365,761 (29.4) | 396,926 (30.1) | 417,850 (30.5) | 424,683 (30.1) | 437,638 (30.2) | 4.6 | 3.1 |
| Regional Hospitals | 317,643 (25.5) | 325,484 (24.7) | 355,837 (26.0) | 369,774 (26.2) | 379,846 (26.2) | 4.6 | 2.7 |

| | 2006 | 2007 | 2008 | 2009 | 2010 | Mean Annual % Change 2006–2010 ^a | % Change 2009–2010 |
|--|---------------------|---------------------|---------------------|---------------------|---------------------|---|--------------------|
| | N (%) | | |
| County Hospitals | 390,798 (31.4) | 408,555 (31.0) | 419,068 (30.6) | 431,117 (30.6) | 434,970 (30.1) | 2.7 | 0.9 |
| 'Other' Hospitals | 170,688 (13.7) | 186,661 (14.2) | 175,839 (12.8) | 184,820 (13.1) | 194,654 (13.5) | 3.5 | 5.3 |
| Discharge Rate Per 1,000 Population ⁱ | 293.6 | 303.2 | 309.1 | 315.9 | 323.2 | 2.4 | 2.3 |
| Total Bed Days | 4,350,877 | 4,451,301 | 4,472,104 | 4,428,882 | 4,426,574 | 0.4 | -0.1 |
| Day Patients | 662,096 (15.2) | 718,851 (16.1) | 771,145 (17.2) | 820,234 (18.5) | 855,618 (19.3) | 6.6 | 4.3 |
| In-Patients | 3,688,781 (84.8) | 3,732,450 (83.9) | 3,700,959 (82.8) | 3,608,648 (81.5) | 3,570,956 (80.7) | -0.8 | -1.0 |
| Under 15 Years | 302,697 (7.0) | 301,025 (6.8) | 309,361 (6.9) | 301,909 (6.8) | 295,262 (6.7) | -0.6 | -2.2 |
| 15 to 44 Years | 834,045 (19.2) | 863,476 (19.4) | 847,468 (19.0) | 814,708 (18.4) | 785,964 (17.8) | -1.4 | -3.5 |
| 45 to 64 Years | 769,340 (17.7) | 790,809 (17.8) | 768,845 (17.2) | 730,938 (16.5) | 714,472 (16.1) | -1.8 | -2.3 |
| 65 Years and Over | 1,782,699 (41.0) | 1,777,140 (39.9) | 1,775,285 (39.7) | 1,761,093 (39.8) | 1,775,258 (40.1) | -0.1 | 0.8 |

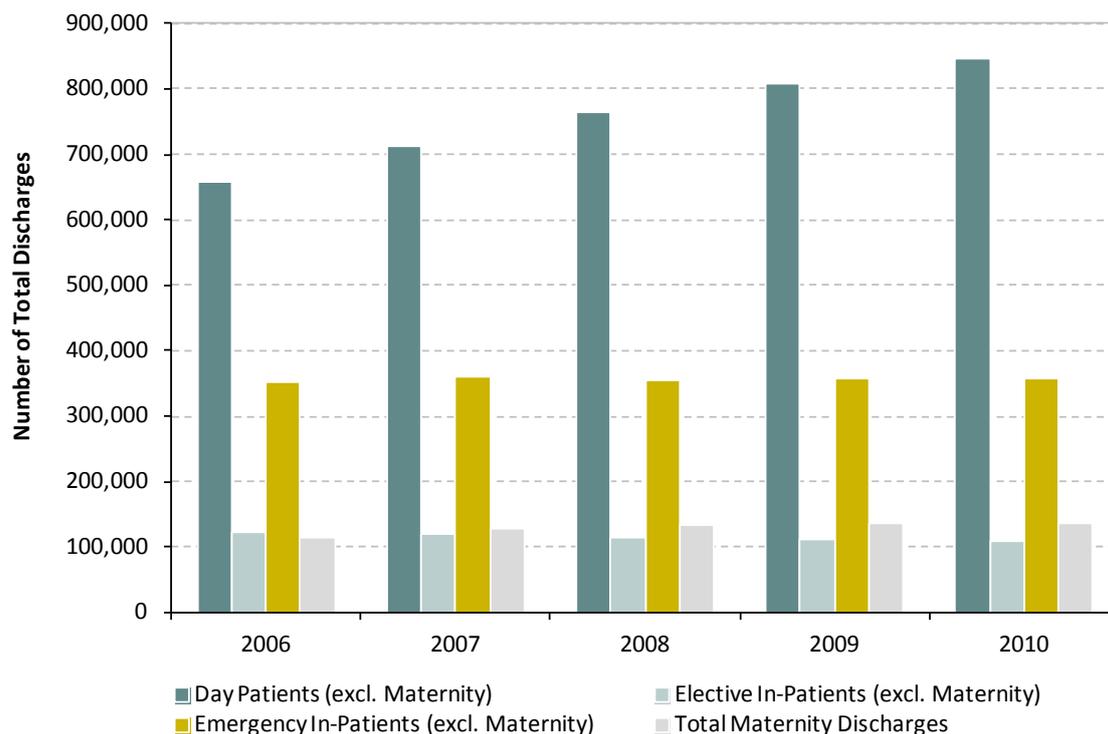
Notes: Percentage columns are subject to rounding.

- a The mean annual percentage change is the mean of the four annual percentage growth rates over the five years.
- b Annual Reports from 2006 to 2009 did not exclude *Maternity* discharges. We have presented them in this report allow for comparability over the five year period.
- c Emergency in-patient admissions include patients who visited the Emergency Department and were subsequently admitted to hospital. Therefore, emergency admissions do not capture all of those patients who attended the Emergency Department. For this reason, it is not possible to use emergency admissions reported to HIPE to draw conclusions about the volume of activity in Emergency Departments.
- d Public/Private status refers to the patient's status on discharge, which may be public (private) if the patient saw the consultant publicly (privately). This does not relate to the type of bed occupied by the patient during the hospital stay.
- e Includes discharges for which GMS status was not known.
- f Relates to lengths of stay for in-patients between 0 and 30 days (inclusive).
- g Relates to lengths of stay of more than 30 days.
- h As a result of the reconfiguration of maternity services in Cork in March 2007, activity previously reported as 'Maternity Hospital' activity for this region is reported as 'Regional Hospital' activity from 1 January 2008.
- i Crude discharge rate is calculated as the ratio of total discharges to the population of Ireland, multiplied by 1,000. When those discharges with no fixed abode and who were living outside Ireland were excluded, the crude discharge rate was 322.5 per 1,000 population.

Sources: Data on discharges and bed days for 2006–9 were obtained from HIPE.

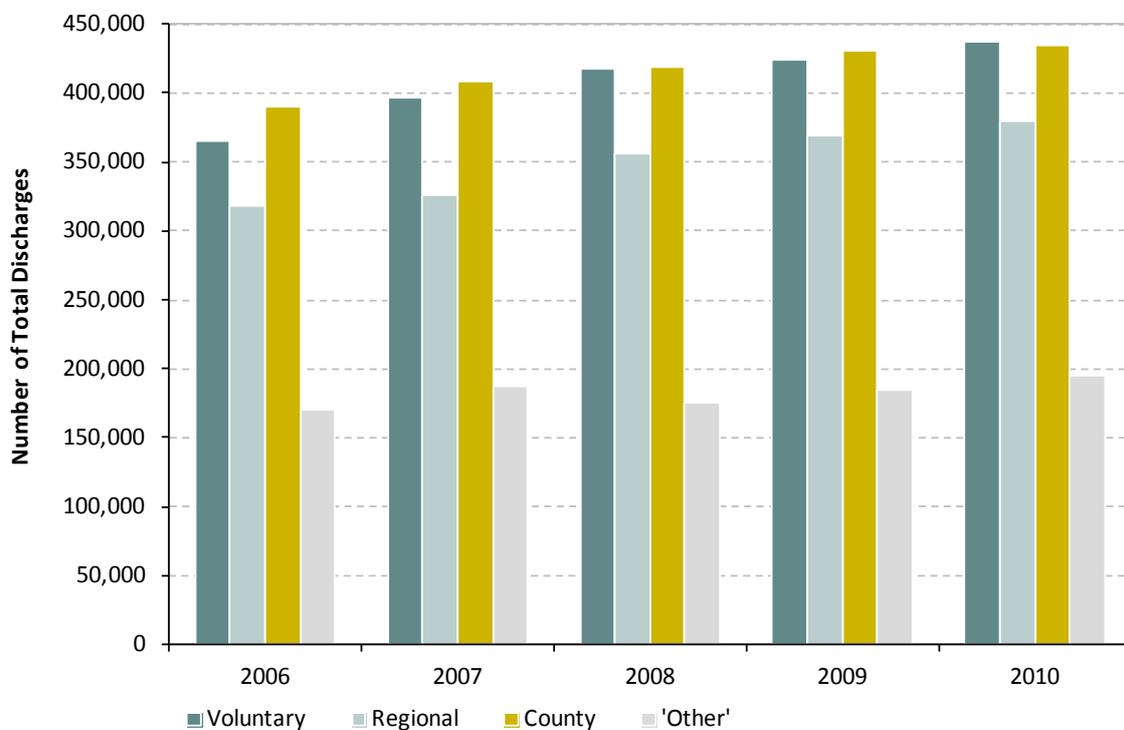
For 2007–10 population estimates were obtained from the Economic and Social Research Institute (see Appendix V for 2010 data). For 2006, population data were obtained from Census 2006 (Central Statistics Office).

FIGURE 1.2 Total Discharges by Patient Type and Admission Type (N), 2006-2010



Notes: See Appendix I for a list of hospitals that participated in HIPE in 2010.
Sources: Data for 2006–2009 were obtained from HIPE.

FIGURE 1.3 Total Discharges by Hospital Type (N), 2006-2010



Notes: See Appendix I for a list of hospitals that participated in HIPE in 2010.
Sources: Data for 2006–2009 were obtained from HIPE.

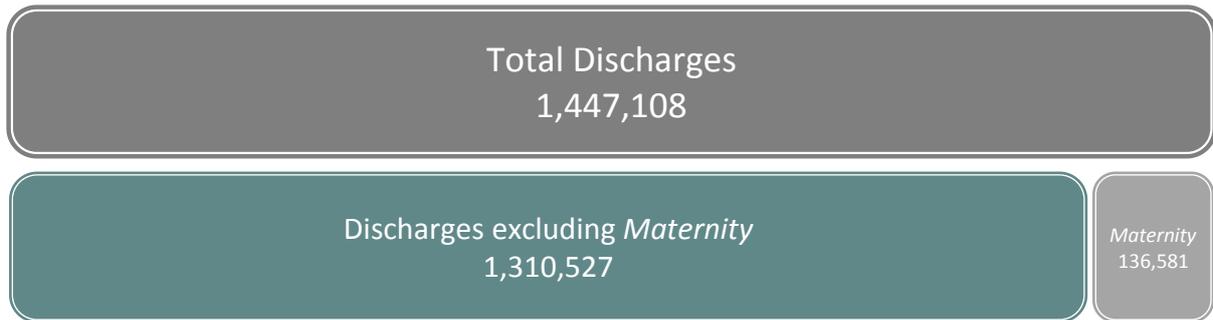
Discharge Overview
2010

SECTION

TWO

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2.1 INTRODUCTION

Section Two provides an overview of the demographic, regional and temporal distribution of day patient and in-patient discharges. The discharges reported in this section relate to total discharges excluding those with Admission Type *Maternity*.¹ Section Two therefore provides an analysis of 1,310,527 discharges and is divided into three sections.

- Section 2.2 discusses *who* discharges were (age, sex, marital status, GMS status, public/private status).
- Section 2.3 discusses *where* discharges were hospitalised, reside, where they were coming from, and where they were discharged to (HSE area of hospitalisation, hospital type, HSE area of residence, admission source and discharge destination).
- Section 2.3 discusses *when* discharges were admitted to, and discharged from, hospital (day of admission, day of discharge, and month of admission).

¹ Section Four of this report provides a similar analysis of activity for discharges with Admission Type *Maternity*.

2.2 WHO

Section 2.2 examines patient characteristics. Total discharges (excl. *Maternity*) are disaggregated in the following tables and figures by age, sex, marital status, public/private status, and GMS status.

A day patient is admitted to hospital for treatment on an elective (rather than an emergency) basis and who is discharged alive, as scheduled, on the same day. In 2010, day patient discharges accounted for 64.5 per cent of total discharges (excl. *Maternity*). In-patient discharges accounted for the remaining 35.5 per cent of total discharges (excl. *Maternity*) with 76.6 per cent of in-patients admitted on an emergency basis and 23.4 per cent admitted on an elective basis.

2.2.1 Age

Table 2.1a disaggregates total discharges (excl. *Maternity*) by patient type, (day patient and in-patient) and age group. In-patient discharges are disaggregated into acute and extended stay discharges. Acute in-patient discharges are defined as those with a length of stay of 30 days or less, while extended stay in-patient discharges have a length of stay in excess of 30 days.

Discharges

- The largest proportion of total discharges (excl. *Maternity*) were in the 65–74 years age group (18.3 per cent). They accounted for the largest proportion of day patient discharges (20.4 per cent) and acute in-patient discharges (14.3 per cent).
- The 75–84 years age group accounted for the highest proportion of extended stay in-patient discharges (29.1 per cent).
- The 1–14 years age group accounted for 11.7 per cent of in-patient discharges and 4.1 per cent of in-patient bed days.
- Discharges in the older age groups accounted for a high proportion of bed days; the 75–84 years age group accounted for 14.2 per cent of in-patient discharges and 23.8 per cent of in-patient bed days.

Length of Stay

- Apart from those aged less than one year, mean length of stay increased with age for acute in-patient discharges rising from 2.3 days for discharges aged 1–14 years to 8.2 days for discharges aged 85 years and over.
- Extended stay in-patient discharges did not show a similar increase with age. Those aged 85 years and over had the longest mean length of stay of 69.5 days, however, median length of stay was similar across all age groups ranging from 45 to 49 days.

TABLE 2.1a Total Discharges (excl. *Maternity*): Patient Type by Age Group (N, %, Bed Days, %, and In-Patient Length of Stay)

| | Discharges and Bed Days | | | | | | | | | | | | | | | |
|--|-------------------------|------------|-------------------|------------|------------------|------------|----------------------|------------|------------------|------------|-------------------|------------|------------------|------------|---|------------|
| | Day Patients | | In-Patients | | | | | | | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
| | | | Acute (0–30 days) | | | | Extended (> 30 days) | | | | Total In-Patients | | | | | |
| | N | % | N | % | Bed Days | % | N | % | Bed Days | % | N | % | Bed Days | % | N | % |
| < 1 Year | 4,404 | 0.5 | 26,871 | 6.0 | 105,632 | 4.8 | 948 | 5.9 | 56,007 | 5.4 | 27,819 | 6.0 | 161,639 | 5.0 | 32,223 | 2.5 |
| 1–14 Years | 41,884 | 5.0 | 54,236 | 12.1 | 122,257 | 5.6 | 178 | 1.1 | 11,308 | 1.1 | 54,414 | 11.7 | 133,565 | 4.1 | 96,298 | 7.3 |
| 15–24 Years | 31,708 | 3.8 | 31,985 | 7.1 | 92,915 | 4.2 | 236 | 1.5 | 15,916 | 1.5 | 32,221 | 6.9 | 108,831 | 3.4 | 63,929 | 4.9 |
| 25–34 Years | 66,612 | 7.9 | 35,830 | 8.0 | 119,417 | 5.4 | 483 | 3.0 | 30,758 | 3.0 | 36,313 | 7.8 | 150,175 | 4.6 | 102,925 | 7.9 |
| 35–44 Years | 94,872 | 11.2 | 40,729 | 9.1 | 150,716 | 6.9 | 651 | 4.1 | 42,969 | 4.1 | 41,380 | 8.9 | 193,685 | 6.0 | 136,252 | 10.4 |
| 45–54 Years | 126,730 | 15.0 | 48,263 | 10.7 | 208,641 | 9.5 | 1,104 | 6.9 | 71,357 | 6.8 | 49,367 | 10.6 | 279,998 | 8.7 | 176,097 | 13.4 |
| 55–64 Years | 168,640 | 19.9 | 58,931 | 13.1 | 309,466 | 14.1 | 2,005 | 12.6 | 123,899 | 11.9 | 60,936 | 13.1 | 433,365 | 13.4 | 229,576 | 17.5 |
| 65–74 Years | 172,300 | 20.4 | 64,181 | 14.3 | 405,533 | 18.5 | 3,069 | 19.2 | 192,983 | 18.5 | 67,250 | 14.5 | 598,516 | 18.5 | 239,550 | 18.3 |
| 75–84 Years | 114,995 | 13.6 | 61,199 | 13.6 | 456,805 | 20.8 | 4,643 | 29.1 | 313,039 | 30.0 | 65,842 | 14.2 | 769,844 | 23.8 | 180,837 | 13.8 |
| 85 Years and Over | 23,186 | 2.7 | 27,003 | 6.0 | 222,614 | 10.1 | 2,651 | 16.6 | 184,284 | 17.7 | 29,654 | 6.4 | 406,898 | 12.6 | 52,840 | 4.0 |
| Total Discharges (excl. <i>Maternity</i>) | 845,331 | 100 | 449,228 | 100 | 2,193,996 | 100 | 15,968 | 100 | 1,042,520 | 100 | 465,196 | 100 | 3,236,516 | 100 | 1,310,527 | 100 |

| | In-Patient Length of Stay | | | | | | | |
|---|---------------------------|----------|--|-------------|------------------|---|------------|----------|
| | Acute (0–30 days) | | Extended (> 30 days) | | Total In-Patient | | | |
| | Mean | Median | Mean | Median | Mean | Median | | |
| < 1 Year | 3.9 | 2 | < 1 Year | 59.1 | 46 | < 1 Year | 5.8 | 2 |
| 1–14 Years | 2.3 | 1 | 1–14 Years | 63.5 | 45 | 1–14 Years | 2.5 | 1 |
| 15–24 Years | 2.9 | 2 | 15–24 Years | 67.4 | 45 | 15–24 Years | 3.4 | 2 |
| 25–34 Years | 3.3 | 2 | 25–34 Years | 63.7 | 46 | 25–34 Years | 4.1 | 2 |
| 35–44 Years | 3.7 | 2 | 35–44 Years | 66.0 | 47 | 35–44 Years | 4.7 | 2 |
| 45–54 Years | 4.3 | 3 | 45–54 Years | 64.6 | 47 | 45–54 Years | 5.7 | 3 |
| 55–64 Years | 5.3 | 3 | 55–64 Years | 61.8 | 45 | 55–64 Years | 7.1 | 4 |
| 65–74 Years | 6.3 | 4 | 65–74 Years | 62.9 | 46 | 65–74 Years | 8.9 | 5 |
| 75–84 Years | 7.5 | 6 | 75–84 Years | 67.4 | 48 | 75–84 Years | 11.7 | 6 |
| 85 Years and Over | 8.2 | 6 | 85 Years and Over | 69.5 | 49 | 85 Years and Over | 13.7 | 7 |
| Acute In-Patients (excl. <i>Maternity</i>) | 4.9 | 3 | Extended In-Patients (excl. <i>Maternity</i>) | 65.3 | 47 | Total In-Patients (excl. <i>Maternity</i>) | 7.0 | 3 |

Note: Percentage columns are subject to rounding.

2.2.1.1 Age and Sex

The data presented in Table 2.1a is disaggregated by male and female discharges in Tables 2.1b and 2.1c respectively. In 2010, females accounted for 48.5 per cent of total discharges (excl. *Maternity*).

Discharges

- The 65–74 years age group accounted for the largest proportion of male discharges (20.0 per cent) whereas the 55–64 years age group accounted for the largest proportion of female discharges (16.9 per cent).
- Discharges aged 65 years and over accounted for 33.5 per cent of male in-patient discharges and 51.8 per cent of male in-patient bed days, while for females this group accounted for 36.5 per cent of female in-patient discharges and 58.1 per cent of female in-patient bed days.
- The 75–84 years age group accounted for the highest proportion of in-patient bed days for both males (22.6 per cent) and females (25.0 per cent).

Length of Stay

- Female acute in-patient discharges had a longer mean length of stay (5.0 days) compared to male acute in-patients (4.8 days). As displayed in Figure 2.1, acute mean length of stay generally increased with age for both sexes.
- Mean length of stay for extended stay in-patient discharges was broadly similar across the age groups for both males and females (see Figure 2.2). Median length of stay ranged between 44 days and 49 days for male discharges and between 42 days and 49 days for female discharges. Median length of stay was generally highest in the older age categories for both sexes.

TABLE 2.1b Total Male Discharges: Patient Type by Age Group (N, %, Bed Days, % and In-Patient Length of Stay)

| | Discharges and Bed Days | | | | | | | | | | | | | | | |
|------------------------------|-------------------------|------------|-------------------|------------|------------------|------------|----------------------|------------|----------------|------------|-------------------|------------|------------------|------------|-----------------------|------------|
| | Day Patients | | In-Patients | | | | | | | | | | | | Total Male Discharges | |
| | | | Acute (0–30 days) | | | | Extended (> 30 days) | | | | Total In-Patients | | | | | |
| | N | % | N | % | Bed Days | % | N | % | Bed Days | % | N | % | Bed Days | % | N | % |
| < 1 Year | 2,563 | 0.6 | 15,050 | 6.5 | 58,727 | 5.3 | 529 | 6.5 | 32,199 | 6.1 | 15,579 | 6.5 | 90,926 | 5.6 | 18,142 | 2.7 |
| 1–14 Years | 24,320 | 5.6 | 30,026 | 13 | 65,319 | 5.9 | 95 | 1.2 | 6,653 | 1.3 | 30,121 | 12.6 | 71,972 | 4.4 | 54,441 | 8.1 |
| 15–24 Years | 15,691 | 3.6 | 16,263 | 7.0 | 47,384 | 4.3 | 160 | 2.0 | 10,798 | 2.0 | 16,423 | 6.9 | 58,182 | 3.6 | 32,114 | 4.8 |
| 25–34 Years | 30,130 | 6.9 | 17,675 | 7.7 | 59,727 | 5.4 | 274 | 3.4 | 18,268 | 3.5 | 17,949 | 7.5 | 77,995 | 4.8 | 48,079 | 7.1 |
| 35–44 Years | 41,862 | 9.6 | 20,071 | 8.7 | 75,273 | 6.8 | 341 | 4.2 | 22,089 | 4.2 | 20,412 | 8.5 | 97,362 | 6.0 | 62,274 | 9.2 |
| 45–54 Years | 57,894 | 13.3 | 24,355 | 10.5 | 106,314 | 9.6 | 630 | 7.8 | 42,419 | 8.0 | 24,985 | 10.5 | 148,733 | 9.1 | 82,879 | 12.3 |
| 55–64 Years | 88,706 | 20.3 | 32,191 | 13.9 | 169,484 | 15.3 | 1,203 | 14.9 | 73,860 | 14.0 | 33,394 | 14.0 | 243,344 | 14.9 | 122,100 | 18.1 |
| 65–74 Years | 98,734 | 22.6 | 34,806 | 15.1 | 219,601 | 19.9 | 1,778 | 22.0 | 113,249 | 21.5 | 36,584 | 15.3 | 332,850 | 20.4 | 135,318 | 20.0 |
| 75–84 Years | 63,698 | 14.6 | 30,188 | 13.1 | 220,891 | 20.0 | 2,197 | 27.1 | 148,410 | 28.1 | 32,385 | 13.5 | 369,301 | 22.6 | 96,083 | 14.2 |
| 85 Years and Over | 12,323 | 2.8 | 10,334 | 4.5 | 83,350 | 7.5 | 891 | 11.0 | 59,666 | 11.3 | 11,225 | 4.7 | 143,016 | 8.8 | 23,548 | 3.5 |
| Total Male Discharges | 435,921 | 100 | 230,959 | 100 | 1,106,070 | 100 | 8,098 | 100 | 527,611 | 100 | 239,057 | 100 | 1,633,681 | 100 | 674,978 | 100 |

| In-Patient Length of Stay | | | | | | | | |
|-------------------------------|-------------------|----------|----------------------------------|----------------------|-----------|-------------------------------|------------------|----------|
| | Acute (0–30 days) | | | Extended (> 30 days) | | | Total In-Patient | |
| | Mean | Median | | Mean | Median | | Mean | Median |
| < 1 Year | 3.9 | 2 | < 1 Year | 60.9 | 45 | < 1 Year | 5.8 | 2 |
| 1–14 Years | 2.2 | 1 | 1–14 Years | 70.0 | 46 | 1–14 Years | 2.4 | 1 |
| 15–24 Years | 2.9 | 2 | 15–24 Years | 67.5 | 44 | 15–24 Years | 3.5 | 2 |
| 25–34 Years | 3.4 | 2 | 25–34 Years | 66.7 | 46 | 25–34 Years | 4.3 | 2 |
| 35–44 Years | 3.8 | 2 | 35–44 Years | 64.8 | 46 | 35–44 Years | 4.8 | 2 |
| 45–54 Years | 4.4 | 3 | 45–54 Years | 67.3 | 48 | 45–54 Years | 6.0 | 3 |
| 55–64 Years | 5.3 | 3 | 55–64 Years | 61.4 | 45 | 55–64 Years | 7.3 | 4 |
| 65–74 Years | 6.3 | 4 | 65–74 Years | 63.7 | 47 | 65–74 Years | 9.1 | 5 |
| 75–84 Years | 7.3 | 5 | 75–84 Years | 67.6 | 48 | 75–84 Years | 11.4 | 6 |
| 85 Years and Over | 8.1 | 6 | 85 Years and Over | 67.0 | 49 | 85 Years and Over | 12.7 | 7 |
| Acute Male In-Patients | 4.8 | 3 | Extended Male In-Patients | 65.2 | 47 | Total Male In-Patients | 6.8 | 3 |

Note: Percentage columns are subject to rounding.

TABLE 2.1c Total Female Discharges (excl. *Maternity*): Patient Type by Age Group (N, %, Bed Days, % and In-Patient Length of Stay)

| | Discharges and Bed Days | | | | | | | | | | | | | | | |
|---|-------------------------|------------|-------------------|------------|------------------|------------|---------------------|------------|----------------|------------|-------------------|------------|------------------|------------|---|------------|
| | Day Patients | | In-Patients | | | | | | | | | | | | Total Female Discharges (excl. <i>Maternity</i>) | |
| | | | Acute (0–30 days) | | | | Extended (>30 days) | | | | Total In-Patients | | | | | |
| | N | % | N | % | Bed Days | % | N | % | Bed Days | % | N | % | Bed Days | % | N | % |
| < 1 Year | 1,841 | 0.4 | 11,821 | 5.4 | 46,905 | 4.3 | 419 | 5.3 | 23,808 | 4.6 | 12,240 | 5.4 | 70,713 | 4.4 | 14,081 | 2.2 |
| 1–14 Years | 17,564 | 4.3 | 24,210 | 11.1 | 56,938 | 5.2 | 83 | 1.1 | 4,655 | 0.9 | 24,293 | 10.7 | 61,593 | 3.8 | 41,857 | 6.6 |
| 15–24 Years | 16,017 | 3.9 | 15,722 | 7.2 | 45,531 | 4.2 | 76 | 1.0 | 5,118 | 1.0 | 15,798 | 7.0 | 50,649 | 3.2 | 31,815 | 5.0 |
| 25–34 Years | 36,482 | 8.9 | 18,155 | 8.3 | 59,690 | 5.5 | 209 | 2.7 | 12,490 | 2.4 | 18,364 | 8.1 | 72,180 | 4.5 | 54,846 | 8.6 |
| 35–44 Years | 53,010 | 12.9 | 20,658 | 9.5 | 75,443 | 6.9 | 310 | 3.9 | 20,880 | 4.1 | 20,968 | 9.3 | 96,323 | 6.0 | 73,978 | 11.6 |
| 45–54 Years | 68,836 | 16.8 | 23,908 | 11.0 | 102,327 | 9.4 | 474 | 6.0 | 28,938 | 5.6 | 24,382 | 10.8 | 131,265 | 8.2 | 93,218 | 14.7 |
| 55–64 Years | 79,934 | 19.5 | 26,740 | 12.3 | 139,982 | 12.9 | 802 | 10.2 | 50,039 | 9.7 | 27,542 | 12.2 | 190,021 | 11.9 | 107,476 | 16.9 |
| 65–74 Years | 73,566 | 18.0 | 29,375 | 13.5 | 185,932 | 17.1 | 1,291 | 16.4 | 79,734 | 15.5 | 30,666 | 13.6 | 265,666 | 16.6 | 104,232 | 16.4 |
| 75–84 Years | 51,297 | 12.5 | 31,011 | 14.2 | 235,914 | 21.7 | 2,446 | 31.1 | 164,629 | 32.0 | 33,457 | 14.8 | 400,543 | 25.0 | 84,754 | 13.3 |
| 85 Years and Over | 10,863 | 2.7 | 16,669 | 7.6 | 139,264 | 12.8 | 1,760 | 22.4 | 124,618 | 24.2 | 18,429 | 8.1 | 263,882 | 16.5 | 29,292 | 4.6 |
| Total Female Discharges (excl. <i>Maternity</i>) | 409,410 | 100 | 218,269 | 100 | 1,087,926 | 100 | 7,870 | 100 | 514,909 | 100 | 226,139 | 100 | 1,602,835 | 100 | 635,549 | 100 |

| | In-Patient Length of Stay | | | | | | | |
|--|---------------------------|----------|---|-------------|------------------|--|------------|----------|
| | Acute (0–30 days) | | Extended (> 30 days) | | Total In-Patient | | | |
| | Mean | Median | Mean | Median | Mean | Median | | |
| < 1 Year | 4.0 | 2 | < 1 Year | 56.8 | 46 | < 1 Year | 5.8 | 2 |
| 1–14 Years | 2.4 | 1 | 1–14 Years | 56.1 | 42 | 1–14 Years | 2.5 | 1 |
| 15–24 Years | 2.9 | 2 | 15–24 Years | 67.3 | 45 | 15–24 Years | 3.2 | 2 |
| 25–34 Years | 3.3 | 2 | 25–34 Years | 59.8 | 45 | 25–34 Years | 3.9 | 2 |
| 35–44 Years | 3.7 | 2 | 35–44 Years | 67.4 | 48 | 35–44 Years | 4.6 | 2 |
| 45–54 Years | 4.3 | 3 | 45–54 Years | 61.1 | 46 | 45–54 Years | 5.4 | 3 |
| 55–64 Years | 5.2 | 3 | 55–64 Years | 62.4 | 44 | 55–64 Years | 6.9 | 4 |
| 65–74 Years | 6.3 | 4 | 65–74 Years | 61.8 | 45 | 65–74 Years | 8.7 | 5 |
| 75–84 Years | 7.6 | 6 | 75–84 Years | 67.3 | 48 | 75–84 Years | 12.0 | 6 |
| 85 Years and Over | 8.4 | 7 | 85 Years and Over | 70.8 | 49 | 85 Years and Over | 14.3 | 7 |
| Acute Female In-Patients (excl. <i>Maternity</i>) | 5.0 | 3 | Extended Female In-Patients (excl. <i>Maternity</i>) | 65.4 | 47 | Total Female In-Patients (excl. <i>Maternity</i>) | 7.1 | 3 |

Note: Percentage columns are subject to rounding

FIGURE 2.1 Acute In-Patients (excl. *Maternity*): Mean Length of Stay by Sex and Age Group

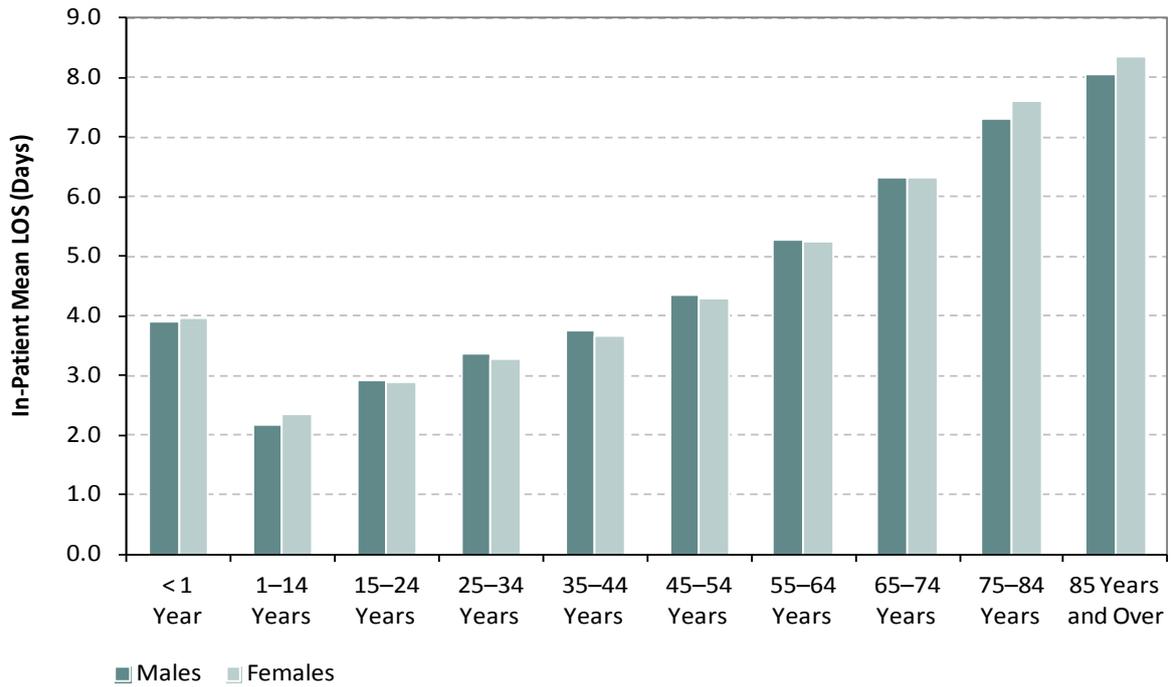
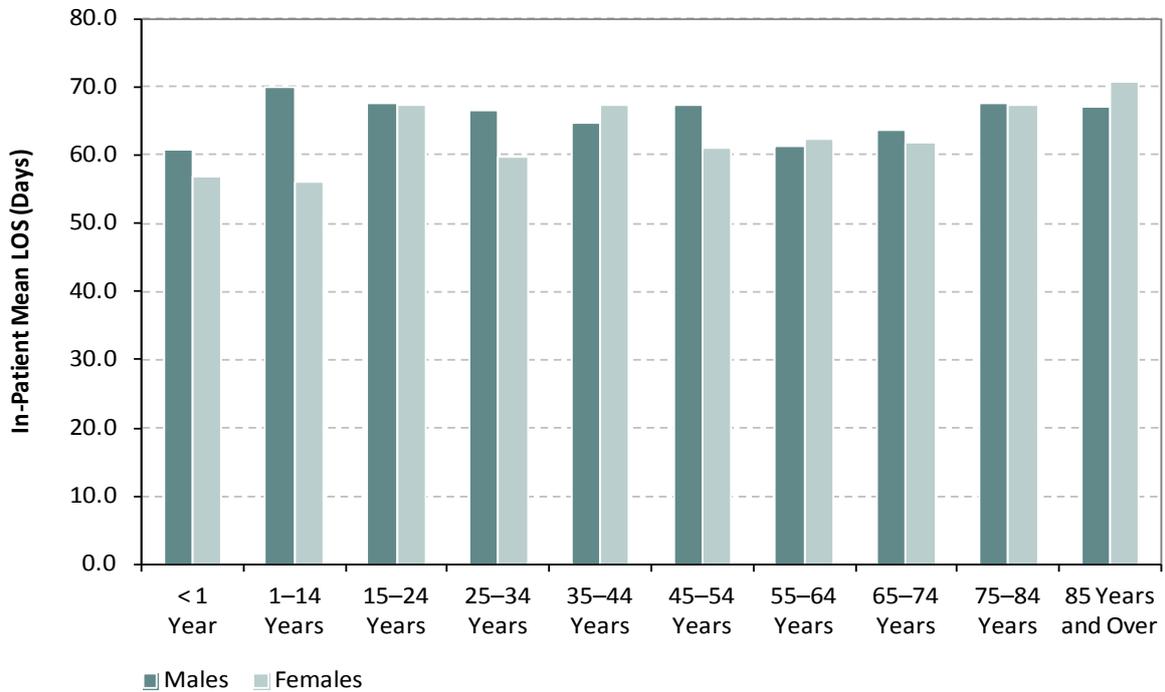


FIGURE 2.2 Extended Stay In-Patients (excl. *Maternity*): Mean Length of Stay by Sex and Age Group

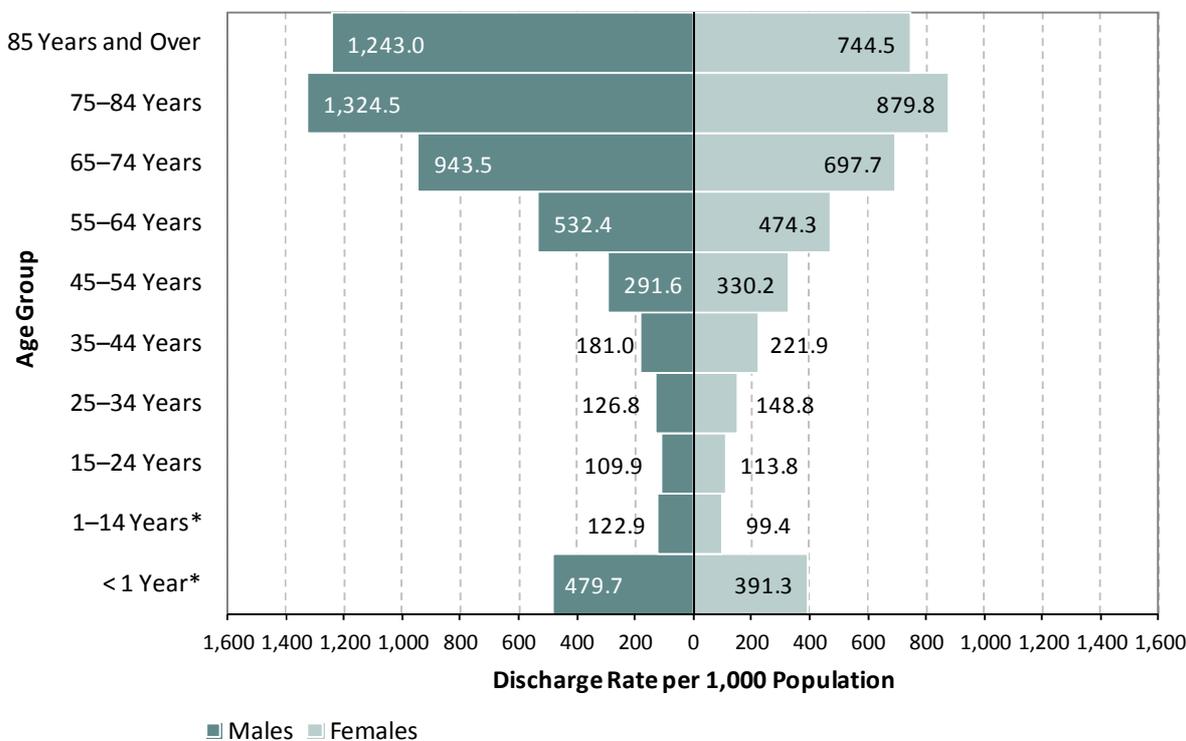


2.2.1.2 Discharge Rates by Age and Sex²

Figure 2.3 shows the discharge rates per 1,000 population by sex and age group for total discharges (excl. *Maternity*).

- Apart from the youngest and oldest age groups, for both males and females, the discharge rate generally increased with age, with those aged 75–84 years recording the highest discharge rates (1,324.5 per 1,000 population for males and 879.8 per 1,000 population for females).
- Apart from females aged between 15 and 54, males had a higher discharge rate per 1,000 population for all other age groups.

FIGURE 2.3 Total Discharges (excl. *Maternity*): Sex by Age Group (Discharge rate per 1,000 Population)



Notes: Rates are based on population data estimated by the ESRI (see Appendix V).
 * Rates for these age groups were amended given revisions to population estimates (See Appendix V), November 2012.

² Rates are based on population data estimated by the ESRI (See Appendix V). This section has been amended given revisions to population estimates for the <1 year and 1–14 years age groups, November 2012.

2.2.2 Marital Status

2.2.2.1 Marital Status by Patient Type

Table 2.2 disaggregates total discharges (excl. *Maternity*) by patient type and marital status.

- Married discharges accounted for 47.5 per cent of total discharges (excl. *Maternity*).
- Discharges who were single accounted for the highest proportion of acute in-patient discharges (44.1 per cent).
- Discharges with 'widowed' marital status accounted for 10.0 per cent of total discharges (excl. *Maternity*). However, they accounted for almost a quarter of extended stay in-patient discharges.

TABLE 2.2 Total Discharges (excl. *Maternity*): Patient Type by Marital Status (N, %)

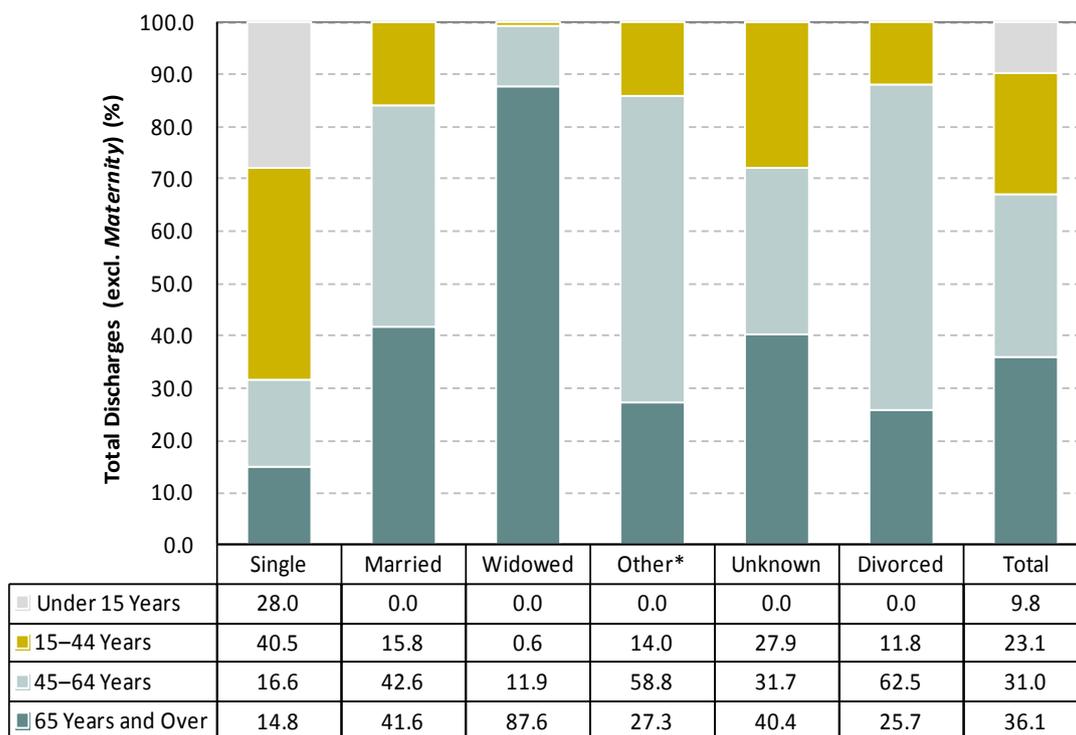
| | Day Patients | | In-Patients | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
|--|----------------|------------|----------------------|------------|-------------------------|------------|----------------------|------------|---|------------|
| | | | Acute (0–30 days) | | Extended (> 30 days) | | Total In-Patients | | | |
| | N | % | N | % | N | % | N | % | N | % |
| Single | 255,424 | 30.2 | 197,933 | 44.1 | 5,074 | 31.8 | 203,007 | 43.6 | 458,431 | 35.0 |
| Married | 445,880 | 52.7 | 171,069 | 38.1 | 5,770 | 36.1 | 176,839 | 38.0 | 622,719 | 47.5 |
| Widowed | 76,072 | 9.0 | 51,756 | 11.5 | 3,813 | 23.9 | 55,569 | 11.9 | 131,641 | 10.0 |
| Other (includes separated) | 39,568 | 4.7 | 19,347 | 4.3 | 816 | 5.1 | 20,163 | 4.3 | 59,731 | 4.6 |
| Unknown | 24,845 | 2.9 | 7,754 | 1.7 | 441 | 2.8 | 8,195 | 1.8 | 33,040 | 2.5 |
| Divorced | 3,542 | 0.4 | 1,369 | 0.3 | 54 | 0.3 | 1,423 | 0.3 | 4,965 | 0.4 |
| Total Discharges (excl. <i>Maternity</i>) | 845,331 | 100 | 449,228 | 100 | 15,968 | 100 | 465,196 | 100 | 1,310,527 | 100 |

Note: Percentage columns are subject to rounding.

2.2.2.2 Marital Status by Age

Figure 2.4 shows the proportion of total discharges (excl. *Maternity*) by marital status and age group.

- Over two-fifths of discharges who were single were aged 15–44 years.
- 87.6 per cent of widowed patients were 65 years and over.

FIGURE 2.4 Total Discharges (excl. *Maternity*): Marital Status by Age Group (%)

Notes: Percentage columns are subject to rounding.
* 'Other' includes separated.

2.2.3 Public/Private Status

In HIPE, public/private status relates to whether the patient saw the consultant on a private or public basis. Private consultant care may be funded through private health insurance and/or out-of-pocket payment; HIPE does not distinguish between these two methods of payment.³

Table 2.3 disaggregates total discharges (excl. *Maternity*) by public/private status and age group.

- Of total discharges (excl. *Maternity*), 81.1 per cent were discharged on a public basis.
- The 85 years and over age group had the highest proportion of total discharges (excl. *Maternity*) treated publicly (89.7 per cent) with only 10.3 per cent treated on a private basis.
- The 1–14 years age group had the highest proportion of total discharges (excl. *Maternity*) that were treated on a private basis, which accounted for 26.2 per cent of all discharges in this age group.

³ For length of stay analysis see Table 2.11.

TABLE 2.3 Total Discharges (excl. *Maternity*): Public/Private Status by Age Group (N, %)

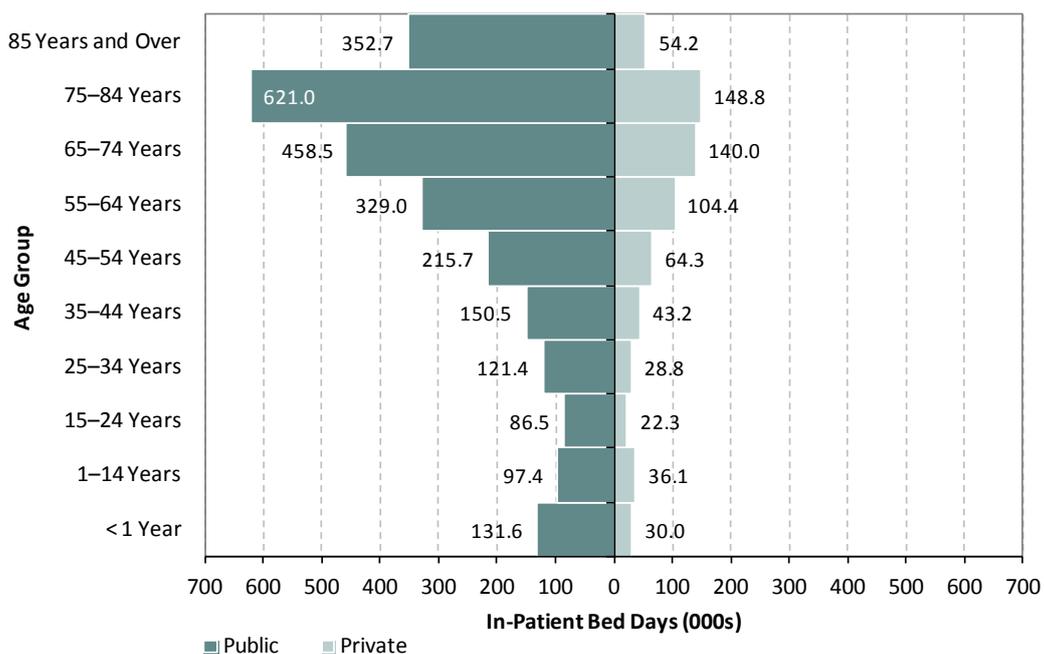
| | Public | | Private | | Total Discharges (excl. <i>Maternity</i>) | |
|--|------------------|-------------|----------------|-------------|--|------------|
| | N | % | N | % | N | % |
| < 1 Years | 25,283 | 78.5 | 6940 | 21.5 | 32,223 | 100 |
| 1–14 Years | 71,028 | 73.8 | 25270 | 26.2 | 96,298 | 100 |
| 15–24 Years | 52,128 | 81.5 | 11801 | 18.5 | 63,929 | 100 |
| 25–34 Years | 86,282 | 83.8 | 16643 | 16.2 | 102,925 | 100 |
| 35–44 Years | 108,990 | 80.0 | 27262 | 20.0 | 136,252 | 100 |
| 45–54 Years | 140,105 | 79.6 | 35992 | 20.4 | 176,097 | 100 |
| 55–64 Years | 181,496 | 79.1 | 48080 | 20.9 | 229,576 | 100 |
| 65–74 Years | 194,273 | 81.1 | 45277 | 18.9 | 239,550 | 100 |
| 75–84 Years | 155,875 | 86.2 | 24962 | 13.8 | 180,837 | 100 |
| 85 Years and Over | 47,398 | 89.7 | 5442 | 10.3 | 52,840 | 100 |
| Total Discharges (excl. <i>Maternity</i>) | 1,062,858 | 81.1 | 247,669 | 18.9 | 1,310,527 | 100 |

Note: Percentage columns are subject to rounding.

Figure 2.5 disaggregates total in-patient bed days (excl. *Maternity*) by public/private status and age group.

- The largest number of in-patient bed days was recorded by public in-patient discharges aged 75–84 years, which accounted for approximately 621,000 bed days.
- The lowest number of in-patient bed days for both public and private patients was recorded in the 15–24 years age group, which accounted for approximately 86,500 public bed days and 22,300 private bed days.

FIGURE 2.5 Total In-Patient Bed Days (excl. *Maternity*): Public/Private Status by Age Group (Bed Days)



2.2.4 GMS Status

GMS status refers to the medical card status of each HIPE discharge.⁴ Eligibility for a medical card is predominately dependent on income or age. It should be noted that where discharges are recorded as having a medical card this does not necessarily imply that the hospital discharge was publicly funded and vice versa.⁵

Table 2.4 disaggregates total discharges (excl. *Maternity*) by GMS status and age group.

- Of total discharges (excl. *Maternity*), 56.9 per cent were GMS discharges.
- The proportion of total discharges (excl. *Maternity*) that were GMS discharges rose with age, with the highest proportion in the 85 years and over age group (87.8 per cent).

TABLE 2.4 Total Discharges (excl. *Maternity*): GMS Status by Age Group (N, %)

| | GMS | | Non-GMS | | Unknown ^a | | Total Discharges (excl. <i>Maternity</i>) | |
|--|----------------|-------------|----------------|-------------|----------------------|------------|--|------------|
| | N | % | N | % | N | % | N | % |
| < 1 Years | 5,890 | 18.3 | 25,389 | 78.8 | 944 | 2.9 | 32,223 | 100 |
| 1–14 Years | 42,486 | 44.1 | 53,487 | 55.5 | 325 | 0.3 | 96,298 | 100 |
| 15–24 Years | 25,821 | 40.4 | 37,064 | 58.0 | 1,044 | 1.6 | 63,929 | 100 |
| 25–34 Years | 41,400 | 40.2 | 59,884 | 58.2 | 1,641 | 1.6 | 102,925 | 100 |
| 35–44 Years | 59,438 | 43.6 | 75,480 | 55.4 | 1,334 | 1.0 | 136,252 | 100 |
| 45–54 Years | 81,959 | 46.5 | 92,911 | 52.8 | 1,227 | 0.7 | 176,097 | 100 |
| 55–64 Years | 118,629 | 51.7 | 109,670 | 47.8 | 1,277 | 0.6 | 229,576 | 100 |
| 65–74 Years | 167,992 | 70.1 | 69,639 | 29.1 | 1,919 | 0.8 | 239,550 | 100 |
| 75–84 Years | 155,484 | 86.0 | 23,257 | 12.9 | 2,096 | 1.2 | 180,837 | 100 |
| 85 Years and Over | 46,375 | 87.8 | 6,043 | 11.4 | 422 | 0.8 | 52,840 | 100 |
| Total Discharges (excl. <i>Maternity</i>) | 745,474 | 56.9 | 552,824 | 42.2 | 12,229 | 0.9 | 1,310,527 | 100 |

Notes: Percentage columns are subject to rounding.

a Relates to discharges for whom GMS status was not known.

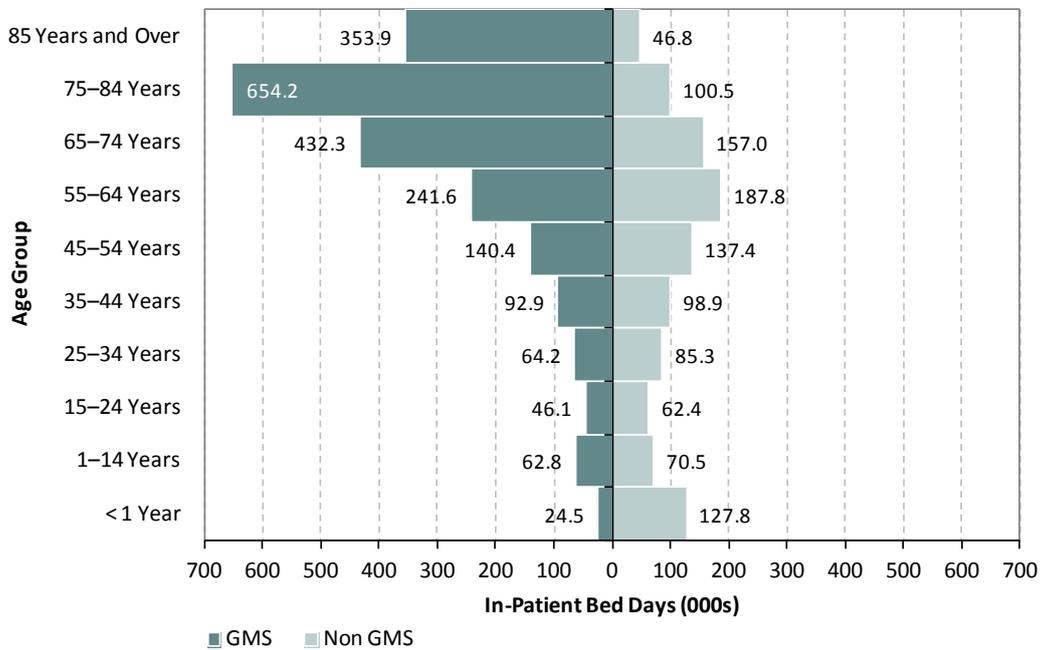
⁴ For 2010, the HSE reported that 1,615,809 individuals were covered by a medical card. Using population estimates from Appendix V, this equates to 36.1 per cent of the population.

⁵ http://www.hse.ie/eng/services/Publications/corporate/performance-reports/December_2010_Performance_Report.pdf
For length of stay analysis see Table 2.7.

Figure 2.6 disaggregates in-patient bed days (excl. *Maternity*) by GMS status and age group. The discharges they relate to are presented in Table 2.4.

- The largest number of in-patient bed days for GMS discharges was in the 75–84 years age group, which accounted for approximately 654,200 bed days.
- The largest number of in-patient bed days for non-GMS discharges was in the 55–64 years age group, which accounted for approximately 187,800 bed days. The lowest number of in-patient bed days for GMS discharges was 24,500 in the less than one year age group, while the lowest number of in-patient bed days for non-GMS discharges was 46,800 in the 85 years and over age group.

FIGURE 2.6 Total In-Patient Bed Days (excl. *Maternity*): GMS Status by Age Group (Bed Days)



Note: Data for discharges whose GMS status was 'unknown' are not presented in this figure.

2.2.5 Public/Private Status by GMS Status and Patient Type

Table 2.5 and Figure 2.7 disaggregate total discharges (excl. *Maternity*) by public/private status, GMS status and patient type.

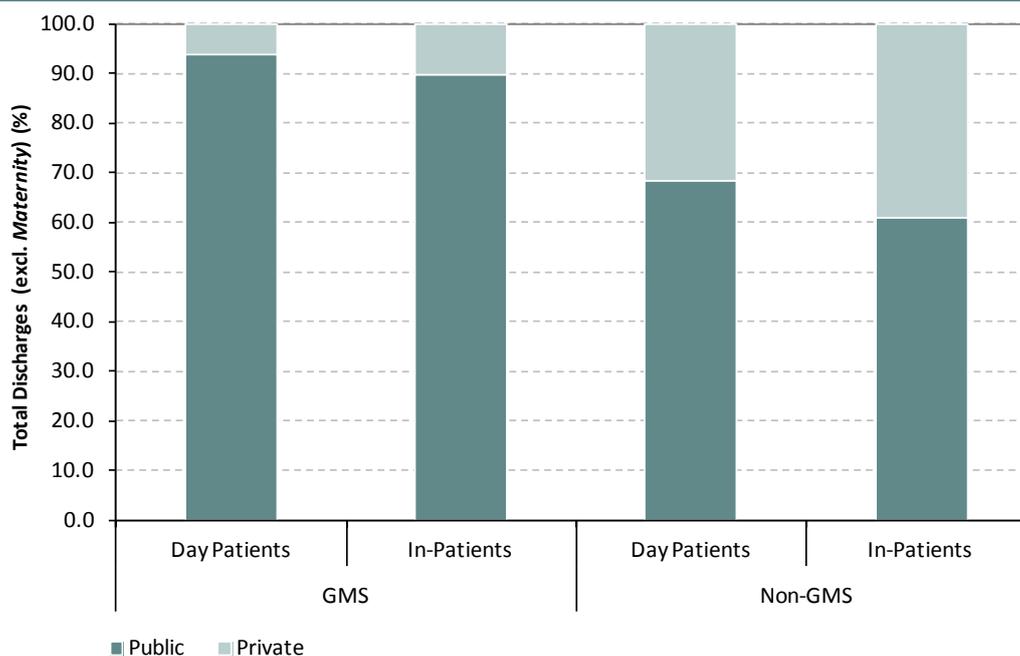
- For GMS in-patient discharges, 89.7 per cent were treated on a public basis compared to 10.3 per cent who were treated privately.
- For non-GMS day patient discharges, 68.5 per cent were treated on a public basis with the remaining 31.5 per cent treated on a private basis.

TABLE 2.5 Total Discharges (excl. *Maternity*): Public/Private Status by GMS Status and Patient Type (N, %)

| | | Public | | Private | | Total Discharges (excl. <i>Maternity</i>) | |
|----------------------|--|------------------|-------------|----------------|-------------|--|------------|
| | | N | % | N | % | N | % |
| GMS | Day Patients | 458,700 | 93.8 | 30,179 | 6.2 | 488,879 | 100 |
| | In-Patients | 230,119 | 89.7 | 26,476 | 10.3 | 256,595 | 100 |
| | Total GMS | 688,819 | 92.4 | 56,655 | 7.6 | 745,474 | 100 |
| Non-GMS | Day Patients | 238,255 | 68.5 | 109,656 | 31.5 | 347,911 | 100 |
| | In-Patients | 125,217 | 61.1 | 79,696 | 38.9 | 204,913 | 100 |
| | Total Non-GMS | 363,472 | 65.7 | 189,352 | 34.3 | 552,824 | 100 |
| Unknown ^a | Day Patients | 7,097 | 83.1 | 1,444 | 16.9 | 8,541 | 100 |
| | In-Patients | 3,470 | 94.1 | 218 | 5.9 | 3,688 | 100 |
| | Total GMS Unknown | 10,567 | 86.4 | 1,662 | 13.6 | 12,229 | 100 |
| Total | Day Patients | 704,052 | 83.3 | 141,279 | 16.7 | 845,331 | 100 |
| | In-Patients | 358,806 | 77.1 | 106,390 | 22.9 | 465,196 | 100 |
| | Total Discharges (excl. <i>Maternity</i>) | 1,062,858 | 81.1 | 247,669 | 18.9 | 1,310,527 | 100 |

Notes: Percentage columns are subject to rounding.
 a Relates to discharges for whom GMS status was not known.

FIGURE 2.7 Total Discharges (excl. *Maternity*): Public/Private Status, by GMS Status and Patient Type (%)



Note: Discharges for whom GMS status was 'unknown' are not presented.

2.3 WHERE

Section 2.3 examines where discharges were hospitalised, where they were resident, and where they were admitted from and discharged to. Data are presented in the following tables and figures by HSE area of hospitalisation, HSE area of residence, hospital type, and admission source and discharge destination.

2.3.1 HSE Area of Hospitalisation

HSE area of hospitalisation reflects the HSE administrative area in which the discharge was hospitalised. Total discharges (excl. *Maternity*) are disaggregated by patient type and admission type across each HSE area, followed by a further breakdown by GMS status to show the distribution of medical card holders across the HSE areas by patient type.

2.3.1.1 Patient Type and Admission Type by HSE Area of Hospitalisation

Table 2.6 disaggregates total discharges (excl. *Maternity*) by HSE area of hospitalisation, patient type and admission type.

Discharges

- The highest proportion of total discharges (excl. *Maternity*) were hospitalised in the HSE Dublin Mid Leinster area (30.7 per cent) with the lowest proportion hospitalised in the HSE Dublin North East area (21.5 per cent).
- The highest proportion of day patients were hospitalised in the HSE Dublin Mid Leinster area (32.5 per cent) while the lowest proportion of day patient discharges were hospitalised in the HSE South area (21.3 per cent).
- The highest proportion of acute in-patient emergency discharges were hospitalised in the HSE West area (27.1 per cent) while the lowest were hospitalised in the HSE Dublin North East area (21.1 per cent).

Length of Stay

- Acute in-patient mean length of stay ranged from 4.5 days in the HSE South area to 5.2 days in the HSE Dublin Mid Leinster area.
- Extended stay in-patient mean length of stay was highest in HSE Dublin North East (78.2 days) which was nearly 26 days longer than in the HSE West area (52.5 days).

TABLE 2.6 Total Discharges (excl. *Maternity*): HSE Area of Hospitalisation by Patient Type and Admission Type (N, % and In-Patient Length of Stay)

| | | | Discharges | | | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
|--|------------------------|--------------------------|-------------------|-------------|---------------------|-------------|----------------|-------------|----------------|-------------|---|------------|
| | | | Dublin North East | | Dublin Mid Leinster | | South | | West | | | |
| | | | N | % | N | % | N | % | N | % | N | % |
| Day Patients | | | 182,770 | 21.6 | 274,489 | 32.5 | 179,981 | 21.3 | 208,091 | 24.6 | 845,331 | 100 |
| In-Patients | Elective | Acute (0–30 days) | 22,503 | 21.4 | 28,773 | 27.4 | 28,069 | 26.7 | 25,705 | 24.5 | 105,050 | 100 |
| | | Extended (>30 days) | 721 | 19.1 | 1,954 | 51.8 | 632 | 16.7 | 468 | 12.4 | 3,775 | 100 |
| | | Total Elective | 23,224 | 21.3 | 30,727 | 28.2 | 28,701 | 26.4 | 26,173 | 24.1 | 108,825 | 100 |
| | Emergency ^a | Acute (0–30 days) | 72,466 | 21.1 | 92,379 | 26.8 | 86,027 | 25.0 | 93,306 | 27.1 | 344,178 | 100 |
| | | Extended (> 30 days) | 3,277 | 26.9 | 4,630 | 38.0 | 2,421 | 19.9 | 1,865 | 15.3 | 12,193 | 100 |
| | | Total Emergency | 75,743 | 21.3 | 97,009 | 27.2 | 88,448 | 24.8 | 95,171 | 26.7 | 356,371 | 100 |
| | Total | Acute (0–30 days) | 94,969 | 21.1 | 121,152 | 27.0 | 114,096 | 25.4 | 119,011 | 26.5 | 449,228 | 100 |
| | | Extended (> 30 days) | 3,998 | 25.0 | 6,584 | 41.2 | 3,053 | 19.1 | 2,333 | 14.6 | 15,968 | 100 |
| | | Total In-Patients | 98,967 | 21.3 | 127,736 | 27.5 | 117,149 | 25.2 | 121,344 | 26.1 | 465,196 | 100 |
| Total Discharges (excl. <i>Maternity</i>) | | | 281,737 | 21.5 | 402,225 | 30.7 | 297,130 | 22.7 | 329,435 | 25.1 | 1,310,527 | 100 |

| | | In-Patient Length of Stay | | | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
|------------------------|---|---------------------------|----------|---------------------|----------|------------|----------|------------|----------|---|----------|
| | | Dublin North East | | Dublin Mid Leinster | | South | | West | | | |
| | | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median |
| Elective | Acute (0–30 days) | 5.4 | 3 | 5.1 | 3 | 4.4 | 2 | 4.5 | 2 | 4.8 | 3 |
| | Extended (> 30 days) | 61.5 | 44 | 57.6 | 46 | 63.6 | 46 | 58.7 | 43 | 59.5 | 45 |
| | Total Elective | 7.1 | 3 | 8.5 | 3 | 5.7 | 3 | 5.4 | 3 | 6.7 | 3 |
| Emergency ^a | Acute (0–30 days) | 5.1 | 3 | 5.3 | 3 | 4.5 | 2 | 4.8 | 3 | 4.9 | 3 |
| | Extended (> 30 days) | 81.9 | 52 | 68.6 | 49 | 56.5 | 45 | 51.0 | 42 | 67.1 | 47 |
| | Total Emergency | 8.4 | 3 | 8.3 | 3 | 6.0 | 3 | 5.7 | 3 | 7.0 | 3 |
| Total | Acute (0–30 days) | 5.1 | 3 | 5.2 | 3 | 4.5 | 2 | 4.7 | 3 | 4.9 | 3 |
| | Extended (> 30 days) | 78.2 | 50 | 65.3 | 48 | 58.0 | 45 | 52.5 | 42 | 65.3 | 47 |
| | Total In-Patients (excl. <i>Maternity</i>) | 8.1 | 3 | 8.3 | 3 | 5.9 | 3 | 5.6 | 3 | 7.0 | 3 |

Notes: Percentage columns are subject to rounding.

a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

Figures 2.8a and 2.8b show the cumulative distribution of length of stay for elective and emergency in-patient discharges respectively by HSE area of hospitalisation.

- 81.0 per cent of elective in-patients discharged in the HSE South and 80.5 per cent in the HSE West areas spent 7 days or less in hospital. By contrast, 72.9 per cent of elective in-patients discharged in the HSE Dublin North East area and 73.1 per cent in the HSE Dublin Mid Leinster area had a length of stay of 7 days or less.
- 79.9 per cent of emergency in-patients discharged in the HSE South and 79.2 per cent in the HSE West areas spent 7 days or less in hospital. This compared to 75.0 per cent in the HSE Dublin North East area and 73.8 per cent in the HSE Dublin Mid Leinster area.

FIGURE 2.8a Elective In-Patient Discharges: Length of Stay by HSE Area of Hospitalisation (Cumulative Percentage)

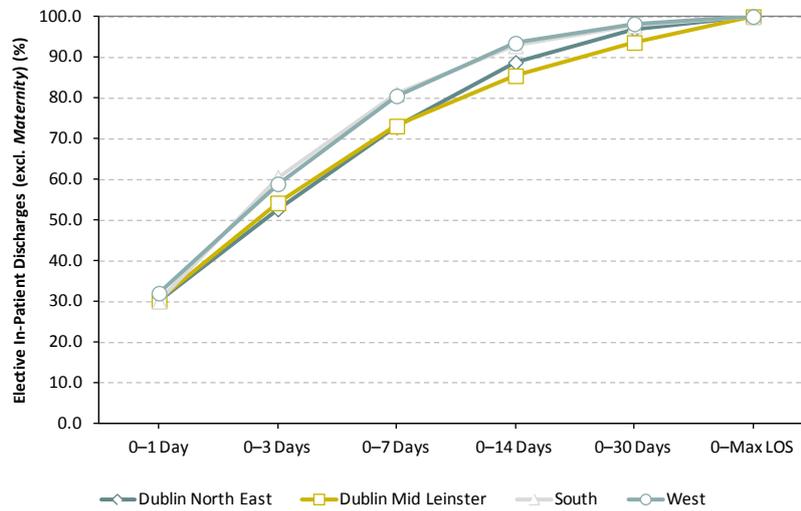
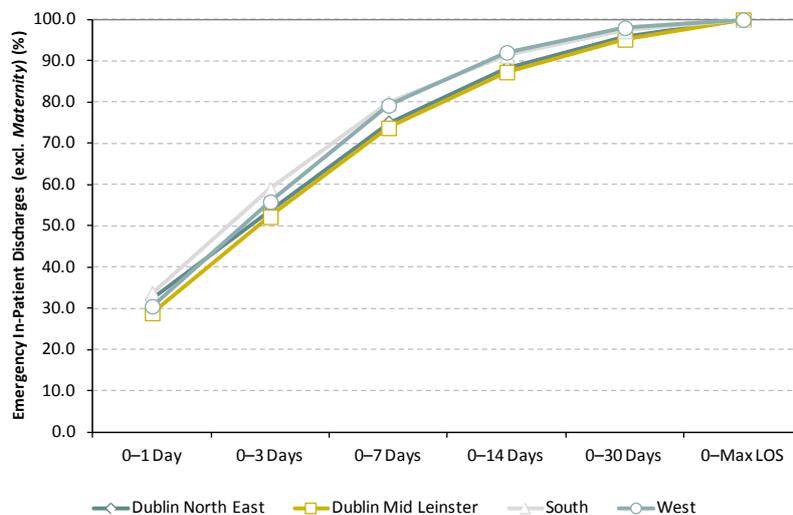


FIGURE 2.8b Emergency In-Patient Discharges^a: Length of Stay by HSE Area of Hospitalisation (Cumulative Percentage)



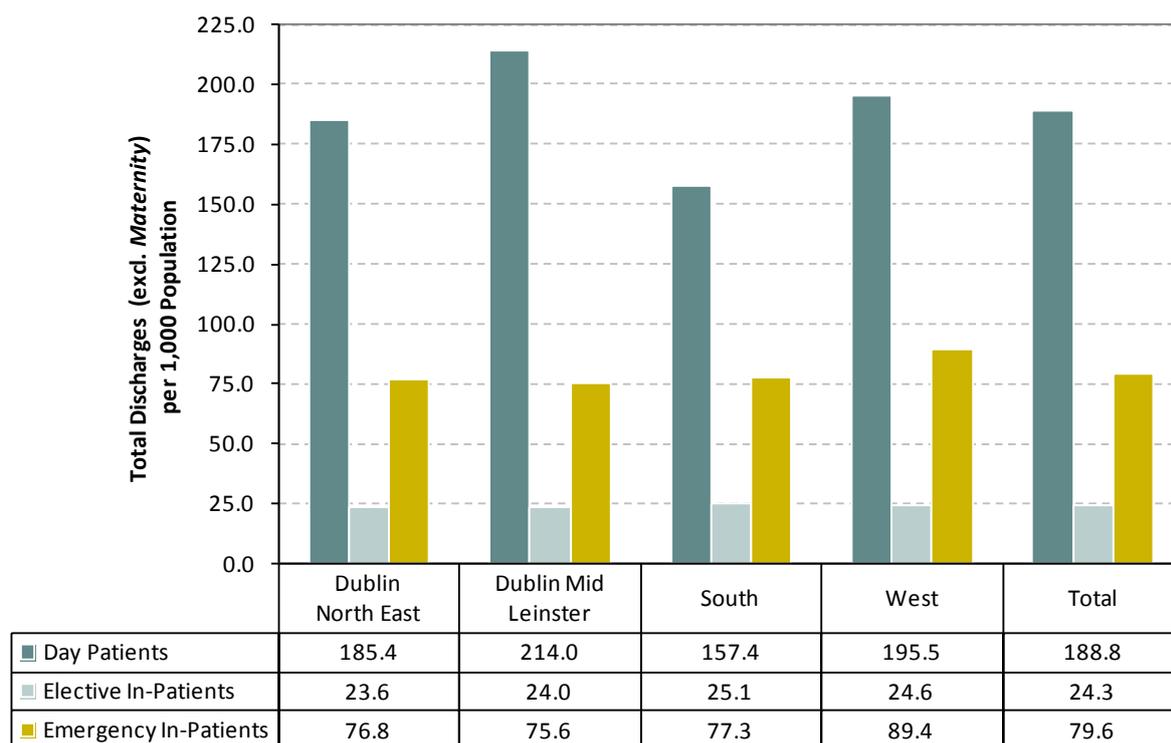
Notes: a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.3.1.2 Discharge Rates by HSE Area of Hospitalisation

Figure 2.9 shows the discharge rates per 1,000 population for total discharges (excl. *Maternity*) by HSE area of hospitalisation, patient and admission type.

- The HSE Dublin Mid Leinster area recorded the highest discharge rate for day patients (214.0 per 1,000 population) compared with the lowest rate in the HSE South area (157.4 per 1,000 population).
- Elective in-patient discharges recorded a similar rate across all areas ranging from 23.6 in HSE Dublin North East to 25.1 per 1,000 population in the HSE South area.
- The HSE West area recorded the highest discharge rate for emergency in-patient discharges (89.4 per 1,000 population) compared with the lowest rate in the HSE Dublin Mid Leinster area (75.6 per 1,000 population).

FIGURE 2.9 Total Discharges (excl. *Maternity*): HSE Area of Hospitalisation by Patient Type and Admission Type (Discharge rate per 1,000 population)



Notes: Rates are based on population estimates from the ESRI (see Appendix V).

HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.3.1.3 HSE Area of Hospitalisation by GMS Status

Table 2.7 disaggregates total discharges (excl. *Maternity*) by HSE area of hospitalisation and GMS status.

Discharges

- The HSE West area treated the highest proportion of GMS discharges (29.7 per cent) while the HSE Dublin North East area treated the lowest proportion of GMS discharges (19.8 per cent).
- For extended stay in-patients, the HSE Dublin Mid Leinster area treated the highest proportion of both GMS discharges (38.3 per cent) and non-GMS discharges (48.3 per cent).

Length of Stay

- GMS discharges had a mean length of stay which was 3 days longer than their non-GMS counterparts (8.2 days compared to 5.2 days). Similarly, median length of stay was 2 days longer for GMS discharges.
- The HSE West area recorded the lowest in-patient mean length of stay for both GMS discharges (6.5 days) and non-GMS discharges (4.0 days).
- The HSE Dublin North East area had the longest mean length of stay for extended stay in-patient discharges for both GMS discharges (87.4 days) and non-GMS discharges (64.5 days).

TABLE 2.7 Total Discharges (excl. *Maternity*): HSE Area of Hospitalisation by GMS Status and Patient Type (N, % and In-Patient Length of Stay)

| | | Discharges | | | | | | | | | | |
|--|-------------|----------------------|--------|---------------------|---------|---------|---------|---------|---------|--|---------|-----|
| | | Dublin North East | | Dublin Mid Leinster | | South | | West | | Total Discharges (excl. <i>Maternity</i>) | | |
| | | N | % | N | % | N | % | N | % | N | % | |
| GMS | Day Patient | 98,567 | 20.2 | 136,268 | 27.9 | 110,061 | 22.5 | 143,983 | 29.5 | 488,879 | 100 | |
| | In-Patients | Acute (0–30 days) | 46,593 | 19.0 | 58,487 | 23.8 | 65,364 | 26.6 | 75,244 | 30.6 | 245,688 | 100 |
| | | Extended (> 30 days) | 2,539 | 23.3 | 4,180 | 38.3 | 2,345 | 21.5 | 1,843 | 16.9 | 10,907 | 100 |
| | Total | 49,132 | 19.1 | 62,667 | 24.4 | 67,709 | 26.4 | 77,087 | 30.0 | 256,595 | 100 | |
| Total GMS | | 147,699 | 19.8 | 198,935 | 26.7 | 177,770 | 23.8 | 221,070 | 29.7 | 745,474 | 100 | |
| Non-GMS | Day Patient | 83,610 | 24.0 | 137,249 | 39.4 | 64,476 | 18.5 | 62,576 | 18.0 | 347,911 | 100 | |
| | In-Patients | Acute (0–30 days) | 46,950 | 23.4 | 61,431 | 30.7 | 48,498 | 24.2 | 43,360 | 21.7 | 200,239 | 100 |
| | | Extended (> 30 days) | 1,234 | 26.4 | 2,256 | 48.3 | 702 | 15.0 | 482 | 10.3 | 4,674 | 100 |
| | Total | 48,184 | 23.5 | 63,687 | 31.1 | 49,200 | 24.0 | 43,842 | 21.4 | 204,913 | 100 | |
| Total Non-GMS | | 131,794 | 23.8 | 200,936 | 36.3 | 113,676 | 20.6 | 106,418 | 19.2 | 552,824 | 100 | |
| Unknown ^a | Day Patient | 593 | 6.9 | 972 | 11.4 | 5,444 | 63.7 | 1,532 | 17.9 | 8,541 | 100 | |
| | In-Patients | Acute (0–30 days) | 1,426 | 43.2 | 1,234 | 37.4 | 234 | 7.1 | 407 | 12.3 | 3,301 | 100 |
| | | Extended (> 30 days) | 225 | 58.1 | 148 | 38.2 | 6 | 1.6 | 8 | 2.1 | 387 | 100 |
| | Total | 1,651 | 44.8 | 1,382 | 37.5 | 240 | 6.5 | 415 | 11.3 | 3,688 | 100 | |
| Total GMS Unknown | | 2,244 | 18.3 | 2,354 | 19.2 | 5,684 | 46.5 | 1,947 | 15.9 | 12,229 | 100 | |
| Total | Day Patient | 182,770 | 21.6 | 274,489 | 32.5 | 179,981 | 21.3 | 208,091 | 24.6 | 845,331 | 100 | |
| | In-Patients | Acute (0–30 days) | 94,969 | 21.1 | 121,152 | 27.0 | 114,096 | 25.4 | 119,011 | 26.5 | 449,228 | 100 |
| | | Extended (> 30 days) | 3,998 | 25.0 | 6,584 | 41.2 | 3,053 | 19.1 | 2,333 | 14.6 | 15,968 | 100 |
| | Total | 98,967 | 21.3 | 127,736 | 27.5 | 117,149 | 25.2 | 121,344 | 26.1 | 465,196 | 100 | |
| Total Discharges (excl. <i>Maternity</i>) | | 281,737 | 21.5 | 402,225 | 30.7 | 297,130 | 22.7 | 329,435 | 25.1 | 1,310,527 | 100 | |

| | | In Patient Length of Stay | | | | | | | | | |
|----------------------|---|---------------------------|--------|---------------------|--------|-------|--------|------|--------|--|--------|
| | | Dublin North East | | Dublin Mid Leinster | | South | | West | | Total Discharges (excl. <i>Maternity</i>) | |
| | | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median |
| GMS | Acute (0–30 days) | 5.8 | 4 | 6.1 | 4 | 5.3 | 3 | 5.4 | 3 | 5.6 | 3 |
| | Extended (> 30 days) | 87.4 | 53 | 66.4 | 49 | 57.9 | 45 | 52.5 | 42 | 67.1 | 47 |
| | Total GMS | 10.0 | 4 | 10.2 | 4 | 7.1 | 3 | 6.5 | 4 | 8.2 | 4 |
| Non-GMS | Acute (0–30 days) | 4.2 | 2 | 4.4 | 2 | 3.5 | 2 | 3.5 | 2 | 3.9 | 2 |
| | Extended (> 30 days) | 64.5 | 48 | 63.2 | 47 | 58.5 | 44 | 52.8 | 43 | 61.8 | 47 |
| | Total Non-GMS | 5.8 | 2 | 6.4 | 2 | 4.3 | 2 | 4.0 | 2 | 5.2 | 2 |
| Unknown ^a | Acute (0–30 days) | 13.1 | 13 | 5.2 | 2 | 4.4 | 2 | 3.1 | 1 | 8.3 | 6 |
| | Extended (> 30 days) | 49.6 | 41 | 67.6 | 55 | 50.2 | 43 | 46.5 | 41 | 56.4 | 44 |
| | Total GMS Unknown | 18.1 | 14 | 11.9 | 2 | 5.6 | 2 | 4.0 | 1 | 13.4 | 8 |
| Total | Acute (0–30 days) | 5.1 | 3 | 5.2 | 3 | 4.5 | 2 | 4.7 | 3 | 4.9 | 3 |
| | Extended (> 30 days) | 78.2 | 50 | 65.3 | 48 | 58.0 | 45 | 52.5 | 42 | 65.3 | 47 |
| | Total In-Patients (excl. <i>Maternity</i>) | 8.1 | 3 | 8.3 | 3 | 5.9 | 3 | 5.6 | 3 | 7.0 | 3 |

Notes: Percentage columns are subject to rounding.
 a Relates to discharges for whom GMS status was not known.

Figures 2.10a and 2.10b show the cumulative distribution of length of stay for GMS and non GMS in-patient discharges respectively by HSE area of hospitalisation.

- Approximately 74 per cent of GMS discharges in both the HSE South and HSE West areas spent 7 days or less in hospital. This compared to 69.1 per cent in the HSE Dublin North East area and 66.7 per cent in HSE Dublin Mid Leinster area.
- Approximately 88 per cent of non-GMS discharges in both the HSE South and HSE West areas spent 7 days or less in hospital. This compared to 81.9 per cent in the HSE Dublin North East area and 80.5 per cent in HSE Dublin Mid Leinster area.

FIGURE 2.10a GMS In-Patient Discharges (excl. *Maternity*): Length of Stay by HSE Area of Hospitalisation (Cumulative Percentage)

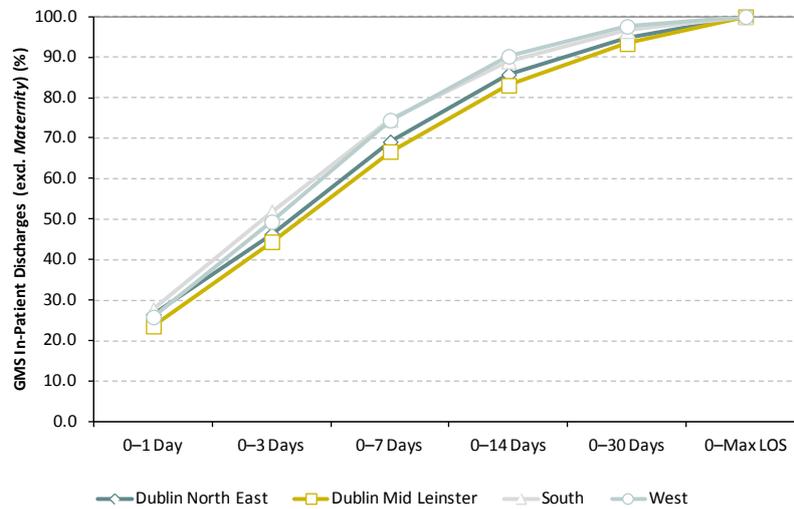
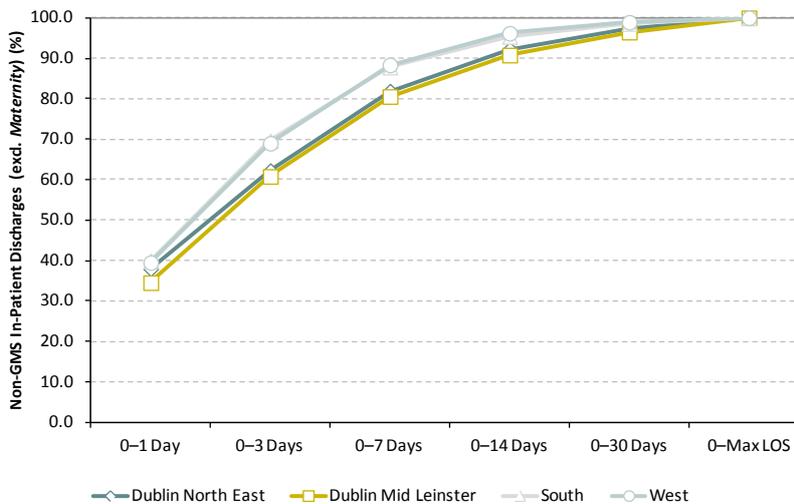


FIGURE 2.10b Non-GMS In-Patient Discharges (excl. *Maternity*): Length of Stay by HSE Area of Hospitalisation (Cumulative Percentage)



2.3.2 HSE Area of Residence

HSE area of residence reflects the HSE administrative area in which the discharge was resident. Total discharges (excl. *Maternity*) are disaggregated by age group across each HSE administrative area.

2.3.2.1 HSE Area of Residence by Age Group

Table 2.8 disaggregates total discharges (excl. *Maternity*) by HSE area of residence and age group.

- The HSE West area had the highest proportion of residents aged 85 years and over (4.6 per cent).
- The HSE South area had the highest proportion of residents aged 65–74 years (19.1 per cent) compared to the HSE Dublin North East area and HSE Dublin Mid Leinster area who both had 17.6 per cent of residents in this age group.

TABLE 2.8 Total Discharges (excl. *Maternity*): HSE Area of Residence and Age Group (N, %)

| | Dublin North East | | Dublin Mid Leinster | | South | | West | | Total Discharges (excl. <i>Maternity</i>) ^a | |
|--|-------------------|------------|---------------------|------------|----------------|------------|----------------|------------|---|------------|
| | N | % | N | % | N | % | N | % | N | % |
| < 1 Years | 6,891 | 2.4 | 9,130 | 2.5 | 8,236 | 2.6 | 7,869 | 2.3 | 32,126 | 2.5 |
| 1–14 Years | 18,259 | 6.4 | 27,312 | 7.5 | 24,783 | 7.9 | 25,683 | 7.4 | 96,037 | 7.3 |
| 15–24 Years | 14,105 | 4.9 | 17,493 | 4.8 | 15,870 | 5.0 | 16,210 | 4.7 | 63,678 | 4.9 |
| 25–34 Years | 25,072 | 8.8 | 30,751 | 8.5 | 21,782 | 6.9 | 25,019 | 7.2 | 102,624 | 7.9 |
| 35–44 Years | 32,932 | 11.5 | 39,474 | 10.9 | 31,392 | 10.0 | 32,036 | 9.3 | 135,834 | 10.4 |
| 45–54 Years | 38,932 | 13.6 | 51,272 | 14.2 | 40,245 | 12.8 | 45,180 | 13.1 | 175,629 | 13.4 |
| 55–64 Years | 48,949 | 17.2 | 61,911 | 17.1 | 55,601 | 17.7 | 62,549 | 18.1 | 229,010 | 17.5 |
| 65–74 Years | 50,062 | 17.6 | 63,732 | 17.6 | 60,118 | 19.1 | 65,050 | 18.8 | 238,962 | 18.3 |
| 75–84 Years | 39,113 | 13.7 | 46,704 | 12.9 | 44,388 | 14.1 | 50,263 | 14.5 | 180,468 | 13.8 |
| 85 Years and Over | 10,903 | 3.8 | 13,973 | 3.9 | 11,988 | 3.8 | 15,927 | 4.6 | 52,791 | 4.0 |
| Total Discharges (excl. <i>Maternity</i>) | 285,218 | 100 | 361,752 | 100 | 314,403 | 100 | 345,786 | 100 | 1,307,159 | 100 |

Notes: Percentage columns are subject to rounding.

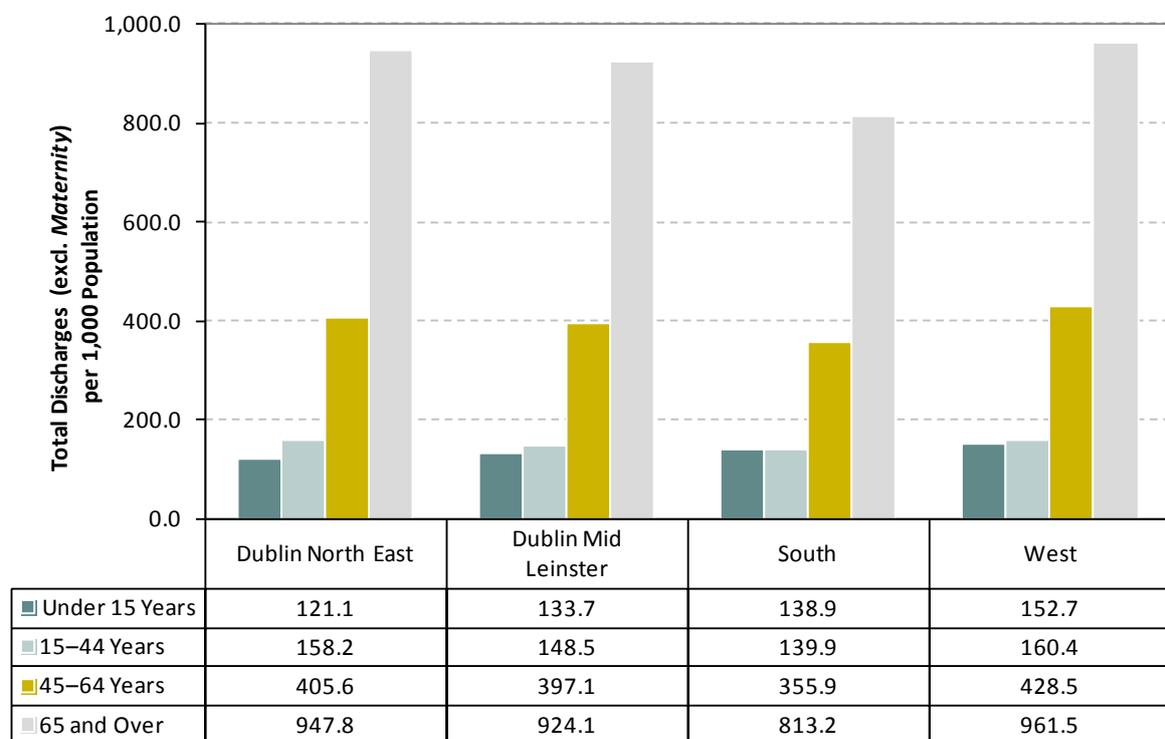
- a A small number of discharges have no HSE area of residence (including discharges resident outside the Republic of Ireland and those with no fixed abode). This table excludes discharges for whom HSE area of residence was unknown or not applicable.

2.3.2.2 Discharge Rates by HSE Area of Residence and Age Group

Figure 2.11 shows the discharge rates per 1,000 population for total discharges (excl. *Maternity*) by HSE area of residence and age group.

- For the 65 years and over age group the HSE West area recorded the highest discharge rate of 961.5 per 1,000 population compared to the lowest rate recorded for this age group in the HSE South area (813.2 per 1,000 population).
- The highest discharge rate for the youngest age group, aged under 15 years, was recorded for residents of the HSE West area (152.7 per 1,000 population) compared to a much lower rate in the HSE Dublin North East area (121.1 per 1,000 population).

FIGURE 2.11 Total Discharges (excl. *Maternity*): HSE Area of Residence by Age (Discharge rate per 1,000 population)



Notes: Rates are based on population estimates from the ESRI (see Appendix V)

A small number of discharges have no HSE area of residence (including discharges resident outside the Republic of Ireland and those with no fixed abode). This figure excludes discharges for whom HSE area of residence was unknown or not applicable.

2.3.3 Inter-Regional Flows

Where a patient is hospitalised may be influenced by many factors including services required and proximity to local hospital, therefore there may be a greater flow of patients across HSE areas in border counties. To illustrate this in greater detail the following section examines inter-regional flows by HSE administrative area and by county.

2.3.3.1 HSE Area of Residence by HSE Area of Hospitalisation

Table 2.9 disaggregates total discharges (excl. *Maternity*) by HSE area of hospitalisation, HSE area of residence and patient type.

- Inter-regional flows are evident for elective in-patient discharges. For example, 81.6 per cent of elective in-patient discharges residing in the HSE West area were hospitalised in this area compared to 93.2 per cent of emergency in-patient discharges and 92.5 per cent of day patient discharges.
- There was significant crossover between the HSE Dublin North East and HSE Dublin Mid Leinster areas. For example, for total discharges (excl. *Maternity*), of the 16.1 per cent of HSE Dublin North East area residents who were hospitalised outside their HSE area of residence, 15.7 per cent were hospitalised in the HSE Dublin Mid Leinster area.

TABLE 2.9 Total Discharges (excl. *Maternity*): HSE Area of Hospitalisation by HSE Area of Residence, Patient Type and Admission Type (%)

| | | HSE Area of Hospitalisation | | | | Total Discharges (excl. <i>Maternity</i>) % |
|-----------------------|--|--|-----------------------------|-------------|-------------|--|
| | | Dublin North East % | Dublin Mid Leinster % | South % | West % | |
| HSE Area of Residence | Day Patients | | | | | |
| | Dublin North East | 81.4 | 18.3 | 0 | 0.2 | 100 |
| | Dublin Mid Leinster | 8.3 | 89.7 | 0.2 | 1.8 | 100 |
| | South | 1.4 | 6.8 | 90.9 | 0.9 | 100 |
| | West | 1.9 | 3.9 | 1.7 | 92.5 | 100 |
| | Elective In-Patients | | | | | |
| | Dublin North East | 82.1 | 17.5 | 0.1 | 0.3 | 100 |
| | Dublin Mid Leinster | 14.4 | 82.8 | 0.4 | 2.3 | 100 |
| | South | 3.5 | 10.5 | 84.5 | 1.5 | 100 |
| | West | 4.9 | 9.6 | 3.9 | 81.6 | 100 |
| | Emergency In-Patients^a | | | | | |
| | Dublin North East | 90.8 | 8.5 | 0.3 | 0.5 | 100 |
| | Dublin Mid Leinster | 6.1 | 90.4 | 0.8 | 2.7 | 100 |
| | South | 1 | 3 | 95.1 | 0.9 | 100 |
| | West | 1.8 | 2.5 | 2.5 | 93.2 | 100 |
| | | Total Discharges (excl. <i>Maternity</i>) | | | | |
| | Dublin North East | 83.9 | 15.7 | 0.1 | 0.3 | 100 |
| | Dublin Mid Leinster | 8.2 | 89.4 | 0.4 | 2.1 | 100 |
| | South | 1.5 | 6.1 | 91.4 | 0.9 | 100 |
| | West | 2.1 | 4.0 | 2.1 | 91.7 | 100 |

Notes:

Percentage columns are subject to rounding

A small number of discharges have no HSE area of residence (including discharges resident outside the Republic of Ireland and those with no fixed abode). This table excludes discharges for whom HSE area of residence was unknown or not applicable.

- a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.3.3.2 County of Residence by HSE Area of Hospitalisation

Figure 2.12a to Figure 2.12d present county level inter-regional flows for total discharges (excl. *Maternity*), day patients, elective in-patients, and emergency in-patients.⁶

- Over 95 per cent of discharges in Cork, Galway and Mayo were hospitalised within their HSE area of residence for total discharges (excl. *Maternity*), day patients, and emergency in-patients.
- For elective in-patient discharges the proportion hospitalised within their area of residence is lower than for emergency in-patients in all counties.
- Carlow (total discharges (excl. *Maternity*): 63.6 per cent and day patients: 47.8 per cent) and Tipperary North (elective in-patients: 65.2 per cent and emergency in-patients: 66.8 per cent) had the lowest proportion of discharges hospitalised within their HSE area of residence.

⁶ The reference table containing the data for these figures is in Appendix VII.

FIGURE 2.12a Total Discharges (excl. *Maternity*): Proportion of Discharges Hospitalised within their HSE Area of Residence (%)

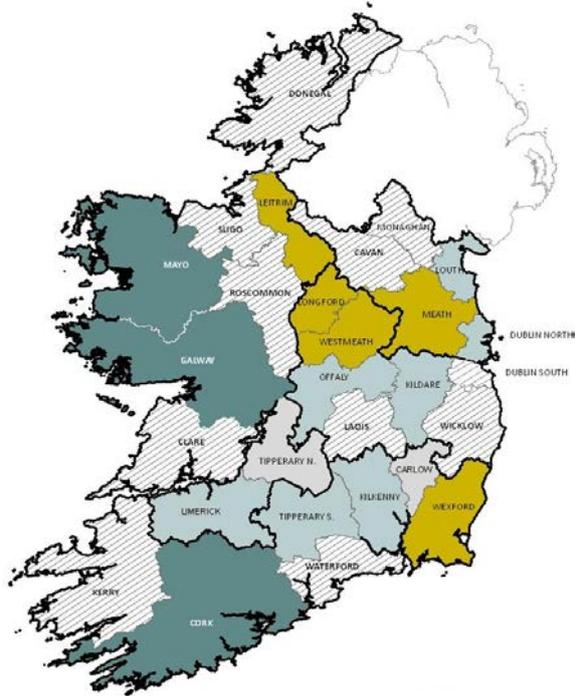


FIGURE 2.12b Day Patient Discharges (excl. *Maternity*): Proportion of Discharges Hospitalised within their HSE Area of Residence (%)

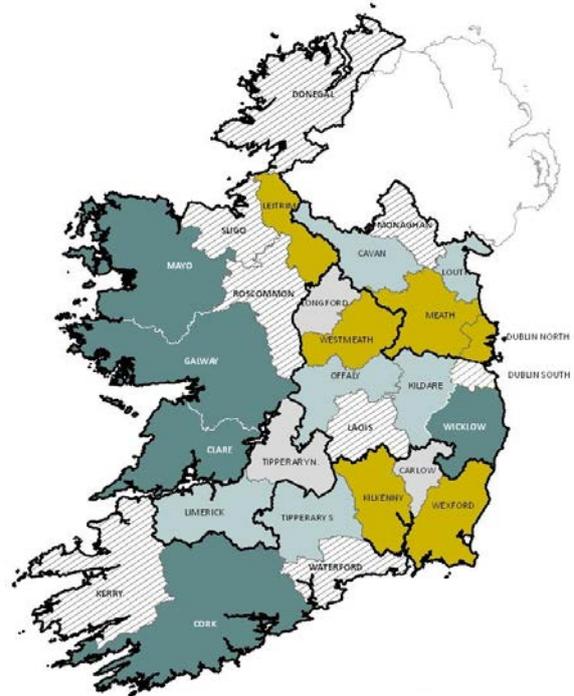


FIGURE 2.12c Elective In-Patient Discharges: Proportion of Discharges Hospitalised within their HSE Area of Residence (%)

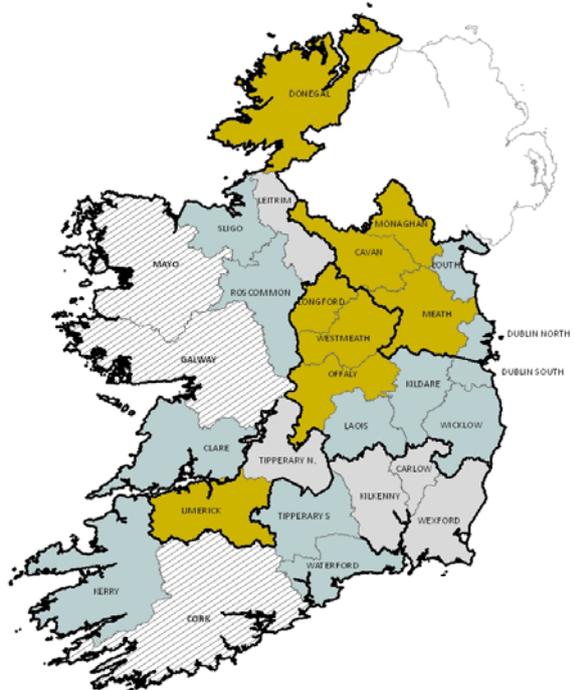
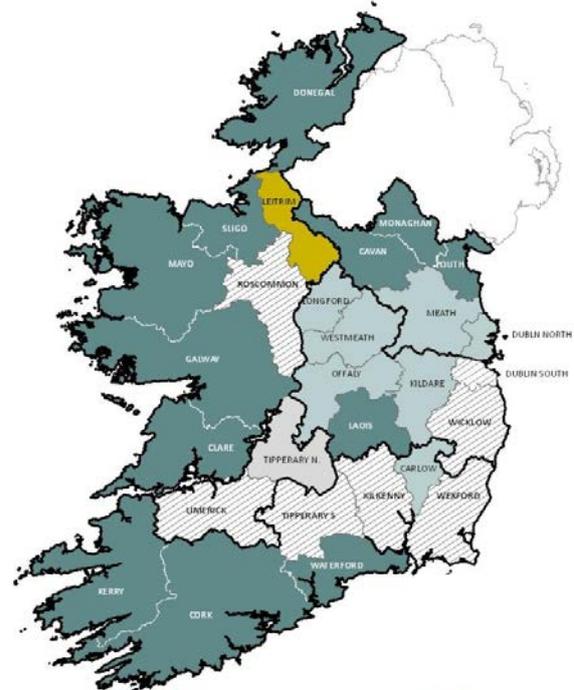


FIGURE 2.12d Emergency In-Patient Discharges^a: Proportion of Discharges Hospitalised within their HSE Area of Residence (%)



45–69.9 70–79.9 80–89.9 90–94.9 95–100

Notes: The reference table containing the data for these figures is in Appendix VII.
 The heavy black lines demarcate the four HSE regions.
 A small number of discharges have no HSE area of residence (including discharges resident outside the Republic of Ireland and those with no fixed abode). These figures exclude discharges for whom HSE area of residence was unknown or not applicable.
 a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.3.4 Hospital Type

Hospital types are broadly categorised into general hospitals and 'other' hospitals. General hospitals comprise voluntary, regional and county hospitals, and treated the largest volume of total discharges (excl. *Maternity*) (89.7 per cent), while the remainder were discharged from 'other' hospitals that specialise in the treatment of particular conditions or patient groupings.⁷

2.3.4.1 Hospital Type by Admission Type

Table 2.10 and Figure 2.13 disaggregates total discharges (excl. *Maternity*) by hospital type, patient type and admission type.

Discharges

- Within all hospital types day patient discharges comprised the largest proportion of discharges. This was highest in voluntary hospitals which treated 72.0 per cent of their discharges as day patients and lowest in county hospitals which treated only 51.9 per cent as day patients.
- County hospitals treated the highest proportion of discharges as emergency in-patients (41.7 per cent) compared to voluntary hospitals which treated 20.5 per cent of their in-patients on an emergency basis.
- 'Other' hospitals treated 67.9 per cent of their discharges as day patients and 18.1 per cent as elective in-patients.

Length of Stay

- The acute in-patient mean length of stay for elective in-patient discharges was 4.3 days in regional and county hospitals compared to 6.1 days in 'other' hospitals.
- The acute in-patient mean length of stay for emergency in-patient discharges was 4.1 days in 'other' hospitals compared to 6.2 days in voluntary hospitals.
- Voluntary hospitals recorded the highest acute in-patient mean length of stay (5.8 days) compared to county hospitals (4.4 days).
- Voluntary hospitals recorded the highest extended stay in-patient mean length of stay (74.4 days) compared to county hospitals (56.1 days).

⁷ 'Other' hospitals include Cancer; Eye, Ear, Nose and Throat; Long Stay; Orthopaedic; Paediatric and Other Care (provide a range of specialist services including infectious disease, elderly care, wound management, and care of the young disabled). See Appendix I for the list of hospitals participating in HIPE in 2010.

TABLE 2.10 Total Discharges (excl. *Maternity*): Hospital Type by Patient Type and Admission Type (N, % and In-Patient Length of Stay)

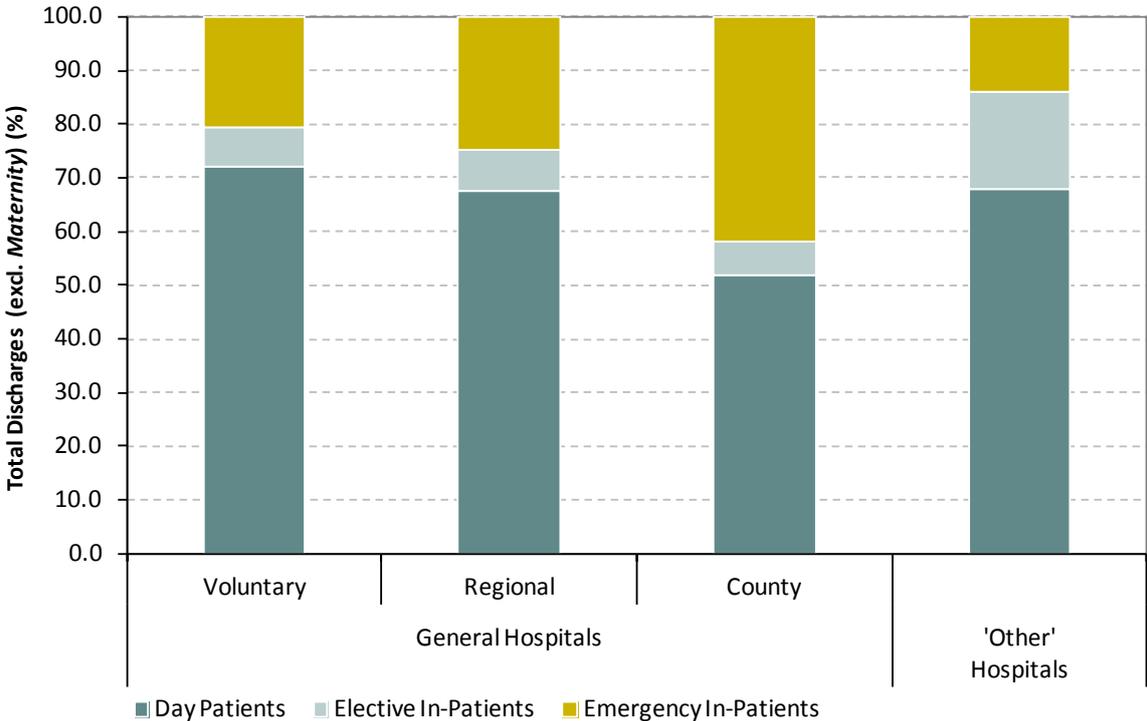
| | | | Discharges | | | | | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
|--|------------------------|----------------------|-------------------|-------------|----------------|-------------|----------------|-------------|------------------|-------------|----------------|-------------|---|-------------|
| | | | General Hospitals | | | | | | | | 'Other' | | | |
| | | | Voluntary | | Regional | | County | | Total General | | | | | |
| | | | N | % | N | % | N | % | N | % | N | % | | |
| Day Patient | | | 315,008 | 72.0 | 239,244 | 67.6 | 199,339 | 51.9 | 753,591 | 64.1 | 91,740 | 67.9 | 845,331 | 64.5 |
| In-Patients | Elective | Acute (0–30 days) | 31,792 | 7.3 | 26,645 | 7.5 | 24,041 | 6.3 | 82,478 | 7.0 | 22,572 | 16.7 | 105,050 | 8.0 |
| | | Extended (> 30 days) | 859 | 0.2 | 530 | 0.1 | 558 | 0.1 | 1,947 | 0.2 | 1,828 | 1.4 | 3,775 | 0.3 |
| | | Total | 32,651 | 7.5 | 27,175 | 7.7 | 24,599 | 6.4 | 84,425 | 7.2 | 24,400 | 18.1 | 108,825 | 8.3 |
| | Emergency ^a | Acute (0–30 days) | 83,789 | 19.2 | 85,096 | 24.0 | 157,024 | 40.9 | 325,909 | 27.7 | 18,269 | 13.5 | 344,178 | 26.3 |
| | | Extended (> 30 days) | 5,992 | 1.4 | 2,376 | 0.7 | 3,203 | 0.8 | 11,571 | 1.0 | 622 | 0.5 | 12,193 | 0.9 |
| | | Total | 89,781 | 20.5 | 87,472 | 24.7 | 160,227 | 41.7 | 337,480 | 28.7 | 18,891 | 14.0 | 356,371 | 27.2 |
| | Total | Acute (0–30 days) | 115,581 | 26.4 | 111,741 | 31.6 | 181,065 | 47.1 | 408,387 | 34.7 | 40,841 | 30.2 | 449,228 | 34.3 |
| | | Extended (> 30 days) | 6,851 | 1.6 | 2,906 | 0.8 | 3,761 | 1.0 | 13,518 | 1.1 | 2,450 | 1.8 | 15,968 | 1.2 |
| | | Total | 122,432 | 28.0 | 114,647 | 32.4 | 184,826 | 48.1 | 421,905 | 35.9 | 43,291 | 32.1 | 465,196 | 35.5 |
| Total Discharges (excl. <i>Maternity</i>) | | | 437,440 | 100 | 353,891 | 100 | 384,165 | 100 | 1,175,496 | 100 | 135,031 | 100 | 1,310,527 | 100 |

| | | | In-Patient Length of Stay | | | | | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
|------------------------|---|-------------|---------------------------|------------|----------|------------|----------|------------|---------------|------------|----------|------------|---|--|
| | | | General Hospitals | | | | | | | | 'Other' | | | |
| | | | Voluntary | | Regional | | County | | Total General | | | | | |
| | | | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median | | |
| Elective | Acute (0–30 days) | 4.7 | 3 | 4.3 | 2 | 4.3 | 2 | 4.5 | 2 | 6.1 | 4 | 4.8 | 3 | |
| | Extended (> 30 days) | 61.7 | 43 | 57.3 | 43 | 72.3 | 49 | 63.6 | 45 | 55.2 | 45 | 59.5 | 45 | |
| | Total | 6.2 | 3 | 5.4 | 2 | 5.8 | 2 | 5.8 | 2 | 9.8 | 4 | 6.7 | 3 | |
| Emergency ^a | Acute (0–30 days) | 6.2 | 4 | 4.8 | 3 | 4.4 | 2 | 4.9 | 3 | 4.1 | 2 | 4.9 | 3 | |
| | Extended (> 30 days) | 76.6 | 51 | 55.8 | 44 | 57.7 | 45 | 67.1 | 47 | 66.8 | 48 | 67.1 | 47 | |
| | Total | 10.9 | 4 | 6.1 | 3 | 5.5 | 3 | 7.1 | 3 | 6.2 | 2 | 7.0 | 3 | |
| Total | Acute (0–30 days) | 5.8 | 4 | 4.7 | 3 | 4.4 | 2 | 4.9 | 3 | 5.2 | 3 | 4.9 | 3 | |
| | Extended (> 30 days) | 74.7 | 50 | 56.1 | 44 | 59.9 | 45 | 66.6 | 47 | 58.1 | 46 | 65.3 | 47 | |
| | Total In-Patients (excl. <i>Maternity</i>) | 9.6 | 4 | 6.0 | 3 | 5.5 | 3 | 6.8 | 3 | 8.2 | 3 | 7.0 | 3 | |

Notes: Percentage columns are subject to rounding.

a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

FIGURE 2.13 Total Discharges (excl. Maternity): Patient Type and Admission Type by Hospital Type (%)



Note: HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

Figures 2.14a and 2.14b show the cumulative lengths of stay for elective and emergency discharges by hospital type.

- Cumulative distributions for elective in-patients were approximately the same across voluntary, regional and county hospital types. However, for 'other' hospitals, the proportion of elective in-patients with a length of stay of 7 days or less was 65.8 per cent compared with 81.3 per cent for regional hospitals.
- Cumulative distributions for emergency in-patients were approximately the same across regional, county and 'other' hospitals. However, for voluntary hospitals, the proportion of emergency in-patients with a length of stay of 7 days or less was 66.9 per cent compared with 81.9 per cent for 'other' hospitals.

FIGURE 2.14a Elective In-Patient Discharges: Length of Stay by Hospital Type (Cumulative Percentage)

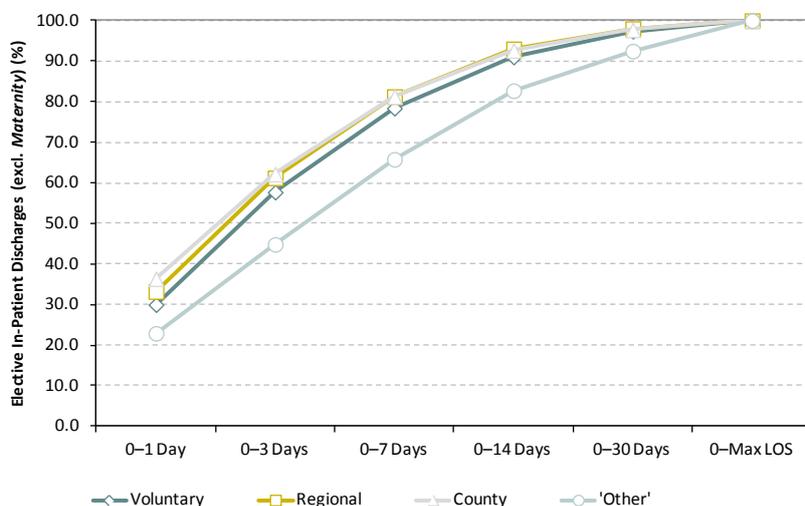
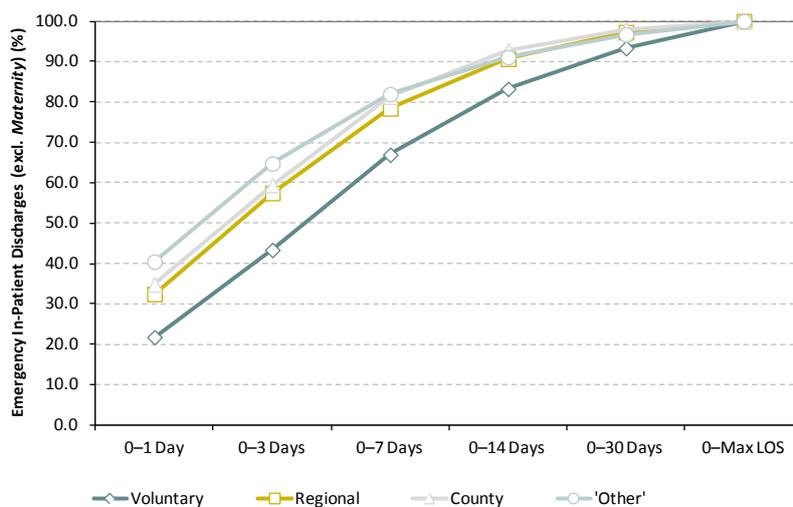


FIGURE 2.14b Emergency In-Patient Discharges^a: Length of Stay by Hospital Type (Cumulative Percentage)



Note: a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.3.4.2 Hospital Type by Public/Private Status

Table 2.11 disaggregates total discharges (excl. *Maternity*) by hospital type and public/private status.

Discharges

- Voluntary hospitals treated the highest proportion of total discharges (excl. *Maternity*) on a public basis (83.6 per cent) compared to the lowest proportion in 'other' hospitals (73.7 per cent).
- Voluntary and 'other' hospitals had the largest proportion of public in-patients as extended stay patients (1.2 per cent and 1.5 per cent, respectively) compared to regional and county hospitals (0.6 per cent and 0.9 per cent, respectively).
- In contrast to all other hospital types, county hospitals treated a similar proportion of their private patients as day patients (8.6 per cent) and in-patients (8.5 per cent).

Length of Stay

- Total mean in-patient length of stay was 7.1 days for public discharges compared to 6.3 days for private discharges.
- Voluntary hospitals recorded the highest acute mean length of stay for both public discharges (5.7 days) and private discharges (5.9 days). This was the only hospital grouping that recorded a higher acute mean length of stay for private in-patients compared to their public counterparts.
- County hospitals recorded the lowest acute mean length of stay for public discharges (4.4 days) and private discharges (4.2 days).
- Regional hospitals recorded similar in-patient lengths of stay for public and private extended stay discharges (55.9 days and 56.8 days respectively), whereas for all other hospital types the mean length of stay for public extended stay in-patients exceeded that of their private counterparts.

TABLE 2.11 Total Discharges (excl. *Maternity*): Hospital Type by Public/Private Status, Patient Type and Admission Type (N, % and In-Patient Length of Stay)

| | | Discharges | | | | | | | | | | | | |
|---|-------------|----------------------|---------|----------|---------|---------|---------|---------------|---------|---------|--------|---|---------|------|
| | | General Hospitals | | | | | | | | 'Other' | | Total Discharges (excl. <i>Maternity</i>) | | |
| | | Voluntary | | Regional | | County | | Total General | | | | | | |
| | | N | % | N | % | N | % | N | % | N | % | N | % | |
| Public | Day Patient | 272,983 | 62.4 | 195,900 | 55.4 | 166,411 | 43.3 | 635,294 | 54.0 | 68,758 | 50.9 | 704,052 | 53.7 | |
| | In-Patient | Acute (0–30 days) | 87,502 | 20.0 | 80,643 | 22.8 | 148,944 | 38.8 | 317,089 | 27.0 | 28,663 | 21.2 | 345,752 | 26.4 |
| | | Extended (> 30 days) | 5,358 | 1.2 | 2,294 | 0.6 | 3,323 | 0.9 | 10,975 | 0.9 | 2,079 | 1.5 | 13,054 | 1.0 |
| | | Total | 92,860 | 21.2 | 82,937 | 23.4 | 152,267 | 39.6 | 328,064 | 27.9 | 30,742 | 22.8 | 358,806 | 27.4 |
| Total | | 365,843 | 83.6 | 278,837 | 78.8 | 318,678 | 83.0 | 963,358 | 82.0 | 99,500 | 73.7 | 1,062,858 | 81.1 | |
| Private | Day Patient | 42,025 | 9.6 | 43,344 | 12.2 | 32,928 | 8.6 | 118,297 | 10.1 | 22,982 | 17.0 | 141,279 | 10.8 | |
| | In-Patient | Acute (0–30 days) | 28,079 | 6.4 | 31,098 | 8.8 | 32,121 | 8.4 | 91,298 | 7.8 | 12,178 | 9.0 | 103,476 | 7.9 |
| | | Extended (> 30 days) | 1,493 | 0.3 | 612 | 0.2 | 438 | 0.1 | 2,543 | 0.2 | 371 | 0.3 | 2,914 | 0.2 |
| | | Total | 29,572 | 6.8 | 31,710 | 9.0 | 32,559 | 8.5 | 93,841 | 8.0 | 12,549 | 9.3 | 106,390 | 8.1 |
| Total | | 71,597 | 16.4 | 75,054 | 21.2 | 65,487 | 17.0 | 212,138 | 18.0 | 35,531 | 26.3 | 247,669 | 18.9 | |
| Total | Day Patient | 315,008 | 72.0 | 239,244 | 67.6 | 199,339 | 51.9 | 753,591 | 64.1 | 91,740 | 67.9 | 845,331 | 64.5 | |
| | In-Patient | Acute (0–30 days) | 115,581 | 26.4 | 111,741 | 31.6 | 181,065 | 47.1 | 408,387 | 34.7 | 40,841 | 30.2 | 449,228 | 34.3 |
| | | Extended (> 30 days) | 6,851 | 1.6 | 2,906 | 0.8 | 3,761 | 1.0 | 13,518 | 1.1 | 2,450 | 1.8 | 15,968 | 1.2 |
| | | Total | 122,432 | 28.0 | 114,647 | 32.4 | 184,826 | 48.1 | 421,905 | 35.9 | 43,291 | 32.1 | 465,196 | 35.5 |
| Total Discharges (excl. <i>Maternity</i>) | | 437,440 | 100 | 353,891 | 100 | 384,165 | 100 | 1,175,496 | 100 | 135,031 | 100 | 1,310,527 | 100 | |

| | | In-Patient Length of Stay | | | | | | | | | | | |
|---------|--|---------------------------|--------|----------|--------|--------|--------|---------------|--------|---------|--------|---|--------|
| | | General Hospitals | | | | | | | | 'Other' | | Total Discharges (excl. <i>Maternity</i>) | |
| | | Voluntary | | Regional | | County | | Total General | | | | | |
| | | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median |
| Public | Acute (0–30 days) | 5.7 | 3 | 4.8 | 3 | 4.4 | 2 | 4.9 | 3 | 5.5 | 3 | 4.9 | 3 |
| | Extended (> 30 days) | 77.2 | 50 | 55.9 | 44 | 60.5 | 45 | 67.7 | 47 | 58.8 | 46 | 66.3 | 47 |
| | Total | 9.9 | 4 | 6.2 | 3 | 5.6 | 2 | 7.0 | 3 | 9.1 | 3 | 7.1 | 3 |
| Private | Acute (0–30 days) | 5.9 | 4 | 4.4 | 3 | 4.2 | 3 | 4.8 | 3 | 4.6 | 3 | 4.8 | 3 |
| | Extended (> 30 days) | 65.9 | 49 | 56.8 | 44 | 55.4 | 44 | 61.9 | 47 | 54.6 | 44 | 61.0 | 46 |
| | Total | 8.9 | 4 | 5.4 | 3 | 4.9 | 3 | 6.3 | 3 | 6.1 | 3 | 6.3 | 3 |
| Total | Acute (0–30 days) | 5.8 | 4 | 4.7 | 3 | 4.4 | 2 | 4.9 | 3 | 5.2 | 3 | 4.9 | 3 |
| | Extended (> 30 days) | 74.7 | 50 | 56.1 | 44 | 59.9 | 45 | 66.6 | 47 | 58.1 | 46 | 65.3 | 47 |
| | Total In-Patients (excl. <i>Maternity</i>) | 9.6 | 4 | 6.0 | 3 | 5.5 | 3 | 6.8 | 3 | 8.2 | 3 | 7.0 | 3 |

Note: Percentage columns are subject to rounding.

Figures 2.15a and 2.15b show the cumulative distribution of length of stay for public and private in-patient discharges by hospital type.

- 78.1 per cent and 80.8 per cent of public in-patients discharged from regional and county hospitals, respectively, spent less than 7 days in hospital. In contrast, 70.0 per cent and 70.1 per cent of public in-patients discharged from voluntary and 'other' hospitals, respectively, had a length of stay of 7 days or less.
- 69.8 per cent of private in-patients discharged from voluntary hospitals spent 7 days or less in hospital. This was a smaller cumulative proportion than for regional (81.6 per cent), county (83.5 per cent) and 'other' (79.5 per cent) hospitals.

FIGURE 2.15a Public In-Patient Discharges (excl. *Maternity*): Length of Stay by Hospital Type (Cumulative Percentage)

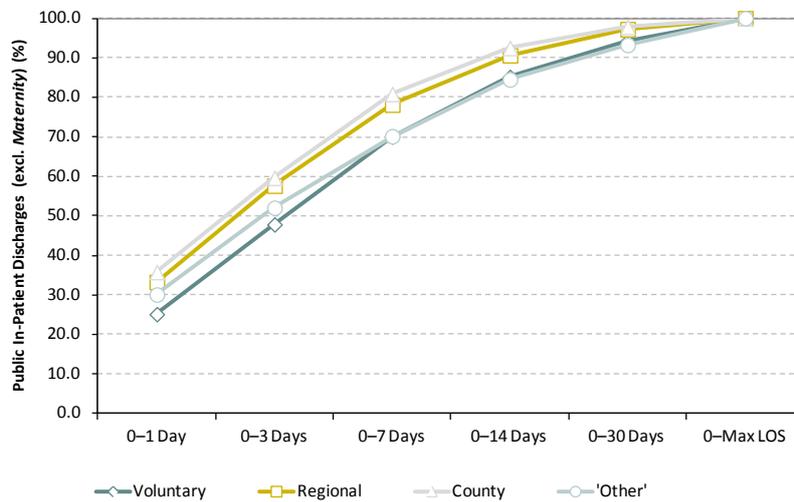
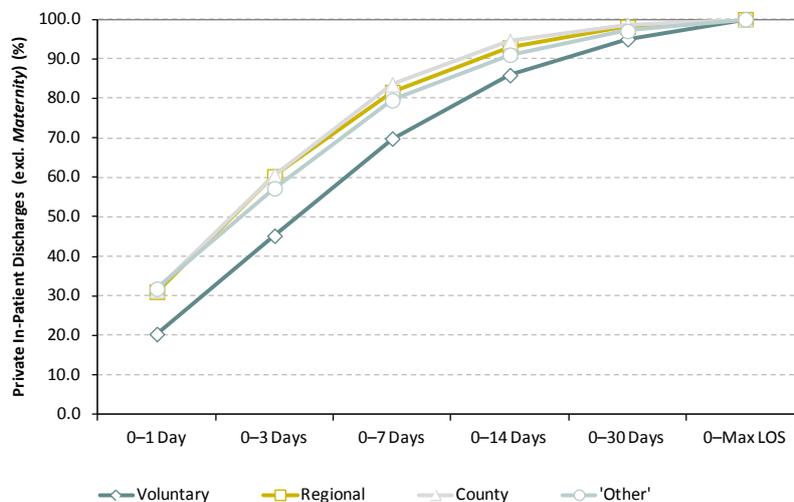


FIGURE 2.15b Private In-Patient Discharges (excl. *Maternity*): Length of Stay by Hospital Type (Cumulative Percentage)



2.3.5 Admission Source

Admission source describes where the patient was admitted from. It does not refer to where an emergency or accident occurred. Table 2.12 disaggregates total discharges (excl. *Maternity*) by HSE area of hospitalisation and admission source.

- The majority of total discharges (excl. *Maternity*) in all HSE areas were admitted from home, ranging from 95.1 per cent in the HSE Dublin North East area to 97.0 per cent in the HSE West area.
- The HSE Dublin North East area had the highest proportion of in-patient discharges who were transferred from another hospital (7.4 per cent) compared to 3.2 per cent in the HSE West area.
- The HSE South area had the highest proportion of in-patient discharges admitted from long stay accommodation (2.4 per cent) compared to only 1.3 per cent of in-patients in the HSE Dublin Mid Leinster area.

TABLE 2.12 Total Discharges (excl. *Maternity*): HSE Area of Hospitalisation by Patient Type, Admission Type and Admission Source (N, %)

| | | Discharges | | | | | | | | | | |
|--------------------------|--|------------------------------------|---------------|------------------------|---------------|----------------|---------------|----------------|---------------|------------------|---|------------|
| | | HSE Area of Hospitalisation | | | | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
| | | Dublin North East | | Dublin Mid Leinster | | South | | West | | | | |
| | | N | % | N | % | N | % | N | % | N | % | |
| Day Patients | Home | 180,173 | 98.6 | 273,633 | 99.7 | 178,146 | 99.0 | 207,294 | 99.6 | 839,246 | 99.3 | |
| | Long stay accommodation | 313 | 0.2 | 157 | 0.1 | 252 | 0.1 | 154 | 0.1 | 876 | 0.1 | |
| | Transfer from other Hospital | 2,271 | 1.2 | 660 | 0.2 | 1,567 | 0.9 | 628 | 0.3 | 5,126 | 0.6 | |
| | New Born | 0 | 0.0 | ~ | 0.0 | 0 | 0.0 | 0 | 0.0 | ~ | 0.0 | |
| | Other | 13 | 0.0 | * | 0.0 | 16 | 0.0 | 15 | 0.0 | * | 0.0 | |
| | Total Day Patients | 182,770 | 100 | 274,489 | 100 | 179,981 | 100 | 208,091 | 100 | 845,331 | 100 | |
| In-Patients | Elective | Home | 20,546 | 88.5 | 28,252 | 91.9 | 25,802 | 89.9 | 23,761 | 90.8 | 98,361 | 90.4 |
| | | Long stay accommodation | 61 | 0.3 | 87 | 0.3 | 200 | 0.7 | 126 | 0.5 | 474 | 0.4 |
| | | Transfer from other Hospital | 2,605 | 11.2 | 2,361 | 7.7 | 2,679 | 9.3 | 2,270 | 8.7 | 9,915 | 9.1 |
| | | New Born | ~ | 0.0 | 12 | 0.0 | ~ | 0.0 | ~ | 0.0 | 18 | 0.0 |
| | | Other | * | 0.0 | 15 | 0.0 | * | 0.1 | * | 0.1 | 57 | 0.1 |
| | | Total Elective In-Patients | 23,224 | 100 | 30,727 | 100 | 28,701 | 100 | 26,173 | 100 | 108,825 | 100 |
| | Emergency ^a | Home | 67,290 | 88.8 | 87,492 | 90.2 | 80,333 | 90.8 | 88,466 | 93.0 | 323,581 | 90.8 |
| | | Long stay accommodation | 1,311 | 1.7 | 1,589 | 1.6 | 2,663 | 3.0 | 2,519 | 2.6 | 8,082 | 2.3 |
| | | Transfer from other Hospital | 4,754 | 6.3 | 4,322 | 4.5 | 2,285 | 2.6 | 1,575 | 1.7 | 12,936 | 3.6 |
| | | New Born | 1,941 | 2.6 | 2,932 | 3.0 | 2,430 | 2.7 | 2,262 | 2.4 | 9,565 | 2.7 |
| | | Other | 447 | 0.6 | 674 | 0.7 | 737 | 0.8 | 349 | 0.4 | 2,207 | 0.6 |
| | | Total Emergency In-Patients | 75,743 | 100 | 97,009 | 100 | 88,448 | 100 | 95,171 | 100 | 356,371 | 100 |
| | Total | Home | 87,836 | 88.8 | 115,744 | 90.6 | 106,135 | 90.6 | 112,227 | 92.5 | 421,942 | 90.7 |
| | | Long stay accommodation | 1,372 | 1.4 | 1,676 | 1.3 | 2,863 | 2.4 | 2,645 | 2.2 | 8,556 | 1.8 |
| | | Transfer from other Hospital | 7,359 | 7.4 | 6,683 | 5.2 | 4,964 | 4.2 | 3,845 | 3.2 | 22,851 | 4.9 |
| New Born | | 1,944 | 2.0 | 2,944 | 2.3 | 2,432 | 2.1 | 2,263 | 1.9 | 9,583 | 2.1 | |
| Other | | 456 | 0.5 | 689 | 0.5 | 755 | 0.6 | 364 | 0.3 | 2,264 | 0.5 | |
| Total In-Patients | | 98,967 | 100 | 127,736 | 100 | 117,149 | 100 | 121,344 | 100 | 465,196 | 100 | |
| Total | Home | 268,009 | 95.1 | 389,377 | 96.8 | 284,281 | 95.7 | 319,521 | 97.0 | 1,261,188 | 96.2 | |
| | Long stay accommodation | 1,685 | 0.6 | 1,833 | 0.5 | 3,115 | 1.0 | 2,799 | 0.8 | 9,432 | 0.7 | |
| | Transfer from other Hospital | 9,630 | 3.4 | 7,343 | 1.8 | 6,531 | 2.2 | 4,473 | 1.4 | 27,977 | 2.1 | |
| | New Born | 1,944 | 0.7 | 2,946 | 0.7 | 2,432 | 0.8 | 2,263 | 0.7 | 9,585 | 0.7 | |
| | Other | 469 | 0.2 | 726 | 0.2 | 771 | 0.3 | 379 | 0.1 | 2,345 | 0.2 | |
| | Total Discharges (excl. <i>Maternity</i>) | 281,737 | 100 | 402,225 | 100 | 297,130 | 100 | 329,435 | 100 | 1,310,527 | 100 | |

Notes: Percentage columns are subject to rounding. ~ Denotes five or less discharges reported to HIPE.* Further suppression required to prevent disclosure of five or less discharges.

See Appendix VI for information on how the HIPE variable 'Admission Source' was grouped for this report.

- a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.3.6 Discharge Destination

Discharge destination identifies the destination of the discharge upon completion of their episode of care. Table 2.13 disaggregates total discharges (excl. *Maternity*) by HSE area of hospitalisation and discharge destination.

- The majority of in-patient discharges were discharged home, ranging from 85.7 per cent in HSE West area to 87.0 per cent in the HSE Dublin Mid Leinster area.
- The proportion of in-patient discharges discharged to long stay accommodation ranged from 3.6 per cent in the HSE Dublin Mid Leinster area to 7.1 per cent in the HSE West area.
- For emergency in-patient discharges, the proportion of discharges transferred to another hospital ranged from 4.7 per cent in the HSE West area to 6.4 per cent in the HSE South area.

TABLE 2.13 Total Discharges (excl. *Maternity*): HSE Area of Hospitalisation by Patient Type, Admission Type and Discharge Destination (N, %)

| | | Discharges | | | | | | | | | | |
|--------------------------|--|-------------------------------------|---------------|---------------------|---------------|----------------|---------------|----------------|---------------|---|----------------|------------|
| | | HSE Area of Hospitalisation | | | | | | | | Total Discharges (excl. <i>Maternity</i>) | | |
| | | Dublin North East | | Dublin Mid Leinster | | South | | West | | | | |
| | | N | % | N | % | N | % | N | % | N | % | |
| Day Patients | Home | 180,299 | 98.6 | 273,377 | 99.6 | 178,184 | 99.0 | 207,244 | 99.6 | 839,104 | 99.3 | |
| | Long stay accommodation | 374 | 0.2 | 206 | 0.1 | 272 | 0.2 | 206 | 0.1 | 1,058 | 0.1 | |
| | Transfer to other Hospital | 2,084 | 1.1 | 861 | 0.3 | 1,512 | 0.8 | 610 | 0.3 | 5,067 | 0.6 | |
| | Died ^a | - | - | - | - | - | - | - | - | - | - | |
| | Other | 13 | 0.0 | 45 | 0.0 | 13 | 0.0 | 31 | 0.0 | 102 | 0.0 | |
| | Total Day Patients | 182,770 | 100 | 274,489 | 100 | 179,981 | 100 | 208,091 | 100 | 845,331 | 100 | |
| In-Patients | Elective | Home | 21,458 | 92.4 | 28,207 | 91.8 | 26,614 | 92.7 | 24,308 | 92.9 | 100,587 | 92.4 |
| | | Long stay accommodation | 721 | 3.1 | 522 | 1.7 | 871 | 3.0 | 972 | 3.7 | 3,086 | 2.8 |
| | | Transfer to other Hospital | 688 | 3.0 | 1,297 | 4.2 | 911 | 3.2 | 635 | 2.4 | 3,531 | 3.2 |
| | | Died | 153 | 0.7 | 591 | 1.9 | 223 | 0.8 | 171 | 0.7 | 1,138 | 1.0 |
| | | Other | 204 | 0.9 | 110 | 0.4 | 82 | 0.3 | 87 | 0.3 | 483 | 0.4 |
| | | Total Elective In-patients | 23,224 | 100 | 30,727 | 100 | 28,701 | 100 | 26,173 | 100 | 108,825 | 100 |
| | Emergency ^b | Home | 64,044 | 84.6 | 82,963 | 85.5 | 74,385 | 84.1 | 79,638 | 83.7 | 301,030 | 84.5 |
| | | Transfer to long stay accommodation | 3,978 | 5.3 | 4,111 | 4.2 | 4,430 | 5.0 | 7,612 | 8.0 | 20,131 | 5.6 |
| | | Transfer to other Hospital | 4,033 | 5.3 | 5,761 | 5.9 | 5,672 | 6.4 | 4,510 | 4.7 | 19,976 | 5.6 |
| | | Died | 2,304 | 3.0 | 2,820 | 2.9 | 2,480 | 2.8 | 2,328 | 2.4 | 9,932 | 2.8 |
| | | Other | 1,384 | 1.8 | 1,354 | 1.4 | 1,481 | 1.7 | 1,083 | 1.1 | 5,302 | 1.5 |
| | | Total Emergency In-Patients | 75,743 | 100 | 97,009 | 100 | 88,448 | 100 | 95,171 | 100 | 356,371 | 100 |
| | Total | Home | 85,502 | 86.4 | 111,170 | 87.0 | 100,999 | 86.2 | 103,946 | 85.7 | 401,617 | 86.3 |
| | | Long stay accommodation | 4,699 | 4.7 | 4,633 | 3.6 | 5,301 | 4.5 | 8,584 | 7.1 | 23,217 | 5.0 |
| | | Transfer to other Hospital | 4,721 | 4.8 | 7,058 | 5.5 | 6,583 | 5.6 | 5,145 | 4.2 | 23,507 | 5.1 |
| Died | | 2,457 | 2.5 | 3,411 | 2.7 | 2,703 | 2.3 | 2,499 | 2.1 | 11,070 | 2.4 | |
| Other | | 1,588 | 1.6 | 1,464 | 1.1 | 1,563 | 1.3 | 1,170 | 1.0 | 5,785 | 1.2 | |
| Total In-Patients | | 98,967 | 100 | 127,736 | 100 | 117,149 | 100 | 121,344 | 100 | 465,196 | 100 | |
| Total | Home | 265,801 | 94.3 | 384,547 | 95.6 | 279,183 | 94.0 | 311,190 | 94.5 | 1,240,721 | 94.7 | |
| | Long stay accommodation | 5,073 | 1.8 | 4,839 | 1.2 | 5,573 | 1.9 | 8,790 | 2.7 | 24,275 | 1.9 | |
| | Transfer to other Hospital | 6,805 | 2.4 | 7,919 | 2.0 | 8,095 | 2.7 | 5,755 | 1.7 | 28,574 | 2.2 | |
| | Died | 2,457 | 0.9 | 3,411 | 0.8 | 2,703 | 0.9 | 2,499 | 0.8 | 11,070 | 0.8 | |
| | Other | 1,601 | 0.6 | 1,509 | 0.4 | 1,576 | 0.5 | 1,201 | 0.4 | 5,887 | 0.4 | |
| | Total Discharges (excl. <i>Maternity</i>) | 281,737 | 100 | 402,225 | 100 | 297,130 | 100 | 329,435 | 100 | 1,310,527 | 100 | |

Notes: Percentage columns are subject to rounding.

See Appendix VI for information on how the HIPE variable 'Discharge Destination' was grouped for this report.

a A day patient is admitted to hospital for treatment on an elective (rather than an emergency) basis and who is discharged alive, as scheduled, on the same day

b HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.3.7 Admission Source by Discharge Destination

Table 2.14 disaggregates in-patient discharges (excl. *Maternity*) by discharge destination and admission source.

- Of in-patients who were admitted from home 89.3 per cent were discharged home.
- In-patients admitted from long stay accommodation were primarily discharged back to a long stay accommodation (83.8 per cent).
- Over a quarter of in-patients (25.6 per cent) who were admitted from another hospital were transferred back to another hospital, with the almost two thirds discharged home (63.5 per cent).

TABLE 2.14 In-Patient Discharges (excl. *Maternity*): Discharge Destination by Admission Source (N, %)

| Admission Source | Discharges | | | | | | | | | | | |
|---|-----------------------|-------------|-------------------------|------------|----------------------------|------------|---------------|------------|--------------|------------|---|------------|
| | Discharge Destination | | | | | | | | | | Total In-Patient Discharges (excl. <i>Maternity</i>) | |
| | Home | | Long Stay Accommodation | | Transfer to other Hospital | | Died | | Other | | N | % |
| | N | % | N | % | N | % | N | % | N | % | N | % |
| Home | 376,801 | 89.3 | 14,698 | 3.5 | 16,546 | 3.9 | 9,012 | 2.1 | 4,885 | 1.2 | 421,942 | 100 |
| Long Stay Accommodation | 180 | 2.1 | 7,172 | 83.8 | 276 | 3.2 | 912 | 10.7 | 16 | 0.2 | 8,556 | 100 |
| Transfer from other Hospital | 14,504 | 63.5 | 1,331 | 5.8 | 5,846 | 25.6 | 1,032 | 4.5 | 138 | 0.6 | 22,851 | 100 |
| New Born | 8,741 | 91.2 | 0 | 0.0 | 714 | 7.5 | 88 | 0.9 | 40 | 0.4 | 9,583 | 100 |
| Other | 1,391 | 61.4 | 16 | 0.7 | 125 | 5.5 | 26 | 1.1 | 706 | 31.2 | 2,264 | 100 |
| Total In-Patient Discharges (excl. <i>Maternity</i>) | 401,617 | 86.3 | 23,217 | 5.0 | 23,507 | 5.1 | 11,070 | 2.4 | 5,785 | 1.2 | 465,196 | 100 |

Notes: Percentage columns are subject to rounding.
See Appendix VI for information on how the HIPE variable 'Discharge Destination' was grouped for this report.

2.4 WHEN

Section 2.4 profiles when discharges were admitted to and discharged from hospital. Activity is presented here by day of admission, day of discharge, and month of admission for total discharges (excl. *Maternity*).

2.4.1 Day of Admission

Table 2.15 disaggregates total discharges (excl. *Maternity*) by patient type, admission type and day of admission (see also Figure 2.16).

Discharges

- The proportion of in-patients admitted on an elective basis decreased throughout the week, with the over 63 per cent admitted from Monday to Wednesday, falling to 10.9 per cent at the weekend.
- Emergency in-patient admissions remained relatively constant throughout the week at approximately 15 per cent per day, but fell at weekends when no more than 12 per cent were admitted per day.
- The majority of day patients were admitted midweek, ranging from 20.0 per cent on Tuesday and Wednesday to only 1.2 per cent on Sunday.

Length of Stay

- Mean length of stay for elective in-patients ranged from 6.2 days on Monday to 10.4 days for those admitted on a Saturday.
- Mean length of stay for emergency in-patients ranged from 6.6 days on Sunday to 7.4 days for those admitted on a Friday.

TABLE 2.15 Total Discharges (excl. *Maternity*): Patient Type and Admission Type by Day of Admission (N, % and In-Patient Length of Stay)

| | Discharges | | | | | | | | | |
|--|----------------|------------|----------------|------------|------------------------|------------|----------------|------------|--|------------|
| | Day Patients | | In-Patients | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
| | | | Elective | | Emergency ^a | | Total | | | |
| | N | % | N | % | N | % | N | % | N | % |
| Monday | 156,946 | 18.6 | 25,696 | 23.6 | 55,436 | 15.6 | 81,132 | 17.4 | 238,078 | 18.2 |
| Tuesday | 169,426 | 20.0 | 22,378 | 20.6 | 58,336 | 16.4 | 80,714 | 17.4 | 250,140 | 19.1 |
| Wednesday | 169,081 | 20.0 | 21,155 | 19.4 | 55,477 | 15.6 | 76,632 | 16.5 | 245,713 | 18.7 |
| Thursday | 164,594 | 19.5 | 18,148 | 16.7 | 55,413 | 15.5 | 73,561 | 15.8 | 238,155 | 18.2 |
| Friday | 150,476 | 17.8 | 9,595 | 8.8 | 54,754 | 15.4 | 64,349 | 13.8 | 214,825 | 16.4 |
| Saturday | 24,427 | 2.9 | 2,397 | 2.2 | 39,967 | 11.2 | 42,364 | 9.1 | 66,791 | 5.1 |
| Sunday | 10,381 | 1.2 | 9,456 | 8.7 | 36,988 | 10.4 | 46,444 | 10.0 | 56,825 | 4.3 |
| Total Discharges (excl. <i>Maternity</i>) | 845,331 | 100 | 108,825 | 100 | 356,371 | 100 | 465,196 | 100 | 1,310,527 | 100 |

| | In-Patient Length of Stay | | | | | |
|---|---------------------------|----------|------------------------|----------|------------|----------|
| | Elective | | Emergency ^a | | Total | |
| | Mean | Median | Mean | Median | Mean | Median |
| Monday | 6.2 | 3 | 6.7 | 3 | 6.6 | 3 |
| Tuesday | 6.6 | 3 | 7.0 | 3 | 6.9 | 3 |
| Wednesday | 6.8 | 2 | 7.2 | 2 | 7.1 | 2 |
| Thursday | 6.4 | 2 | 7.1 | 3 | 7.0 | 3 |
| Friday | 8.2 | 3 | 7.4 | 4 | 7.5 | 3 |
| Saturday | 10.4 | 5 | 7.0 | 3 | 7.2 | 3 |
| Sunday | 6.5 | 4 | 6.6 | 3 | 6.6 | 3 |
| In-Patient Discharges (excl. <i>Maternity</i>) | 6.7 | 3 | 7.0 | 3 | 7.0 | 3 |

Notes: Percentage columns are subject to rounding.

- a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.4.2 Day of Discharge

Table 2.16 disaggregates total discharges (excl. *Maternity*) by patient type, admission type and day of discharge (see also Figure 2.17).

Discharges

- The proportion of elective in-patients discharged rose throughout the week, going from 10.6 per cent on Monday to 22.8 per cent on Friday, falling to 5.0 per cent on Sunday.
- The highest proportion of emergency in-patients were discharged on Friday (20.9 per cent), with the lowest proportion discharged on Sunday (6.6 per cent).

Length of Stay

- In-patient mean length of stay for elective discharges generally fell throughout the week, from 9.8 days for those discharged on a Monday to 4.7 days for those discharged on a Saturday.
- Emergency in-patient mean length of stay also fell throughout the week falling from 7.9 days for those discharged on Monday to 4.3 days for those discharged on a Sunday.

TABLE 2.16 Total Discharges (excl. *Maternity*): Patient Type and Admission Type by Day of Discharge (N, % and In-Patient Length of Stay)

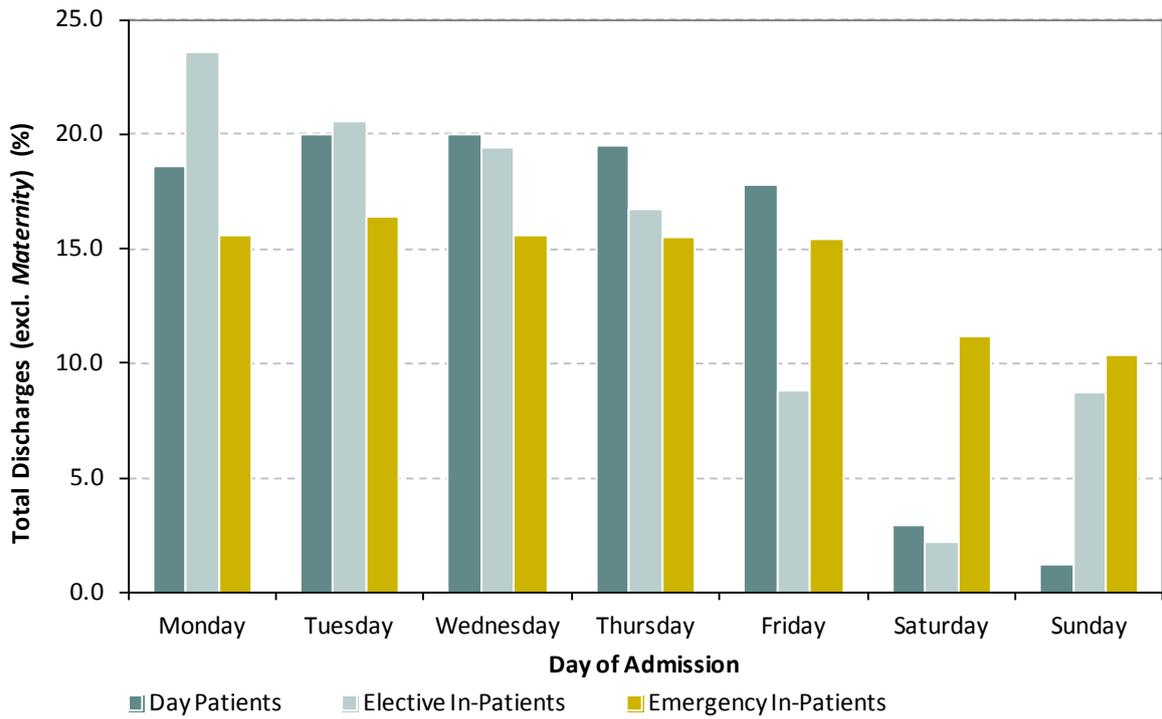
| | Discharges | | | | | | | | | |
|--|----------------|------------|----------------|------------|------------------------|------------|----------------|------------|--|------------|
| | Day Patients | | In-Patients | | | | | | Total Discharges (excl. <i>Maternity</i>) | |
| | N | % | Elective | | Emergency ^a | | Total | | N | % |
| Monday | 156,946 | 18.6 | 11,498 | 10.6 | 54,225 | 15.2 | 65,723 | 14.1 | 222,669 | 17.0 |
| Tuesday | 169,426 | 20.0 | 17,817 | 16.4 | 57,493 | 16.1 | 75,310 | 16.2 | 244,736 | 18.7 |
| Wednesday | 169,081 | 20.0 | 19,370 | 17.8 | 58,966 | 16.5 | 78,336 | 16.8 | 247,417 | 18.9 |
| Thursday | 164,594 | 19.5 | 19,653 | 18.1 | 58,370 | 16.4 | 78,023 | 16.8 | 242,617 | 18.5 |
| Friday | 150,476 | 17.8 | 24,837 | 22.8 | 74,442 | 20.9 | 99,279 | 21.3 | 249,755 | 19.1 |
| Saturday | 24,427 | 2.9 | 10,172 | 9.3 | 29,320 | 8.2 | 39,492 | 8.5 | 63,919 | 4.9 |
| Sunday | 10,381 | 1.2 | 5,478 | 5.0 | 23,555 | 6.6 | 29,033 | 6.2 | 39,414 | 3.0 |
| Total Discharges (excl. <i>Maternity</i>) | 845,331 | 100 | 108,825 | 100 | 356,371 | 100 | 465,196 | 100 | 1,310,527 | 100 |

| | In-Patient Length of Stay | | | | | |
|---|---------------------------|----------|------------------------|----------|------------|----------|
| | Elective | | Emergency ^a | | Total | |
| | Mean | Median | Mean | Median | Mean | Median |
| Monday | 9.8 | 6 | 7.9 | 4 | 8.2 | 4 |
| Tuesday | 6.6 | 2 | 7.6 | 3 | 7.3 | 3 |
| Wednesday | 6.7 | 2 | 7.5 | 3 | 7.3 | 3 |
| Thursday | 6.2 | 2 | 7.5 | 3 | 7.1 | 3 |
| Friday | 6.8 | 3 | 6.9 | 3 | 6.9 | 3 |
| Saturday | 4.7 | 2 | 5.0 | 2 | 4.9 | 2 |
| Sunday | 6.5 | 4 | 4.3 | 2 | 4.7 | 2 |
| In-Patient Discharges (excl. <i>Maternity</i>) | 6.7 | 3 | 7.0 | 3 | 7.0 | 3 |

Notes: Percentage columns are subject to rounding.

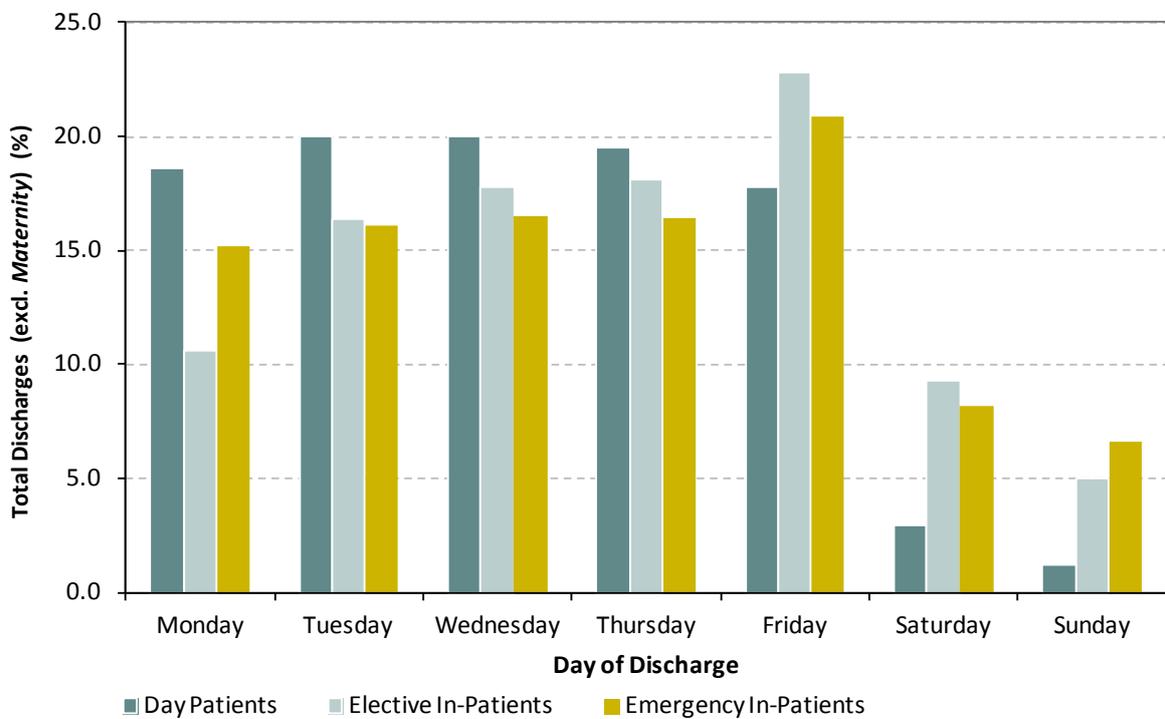
- a HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

FIGURE 2.16 Total Discharges (excl. *Maternity*): Patient Type and Admission Type by Day of Admission (%)



Note: HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

FIGURE 2.17 Total Discharges (excl. *Maternity*): Patient Type and Admission Type by Day of Discharge (%)



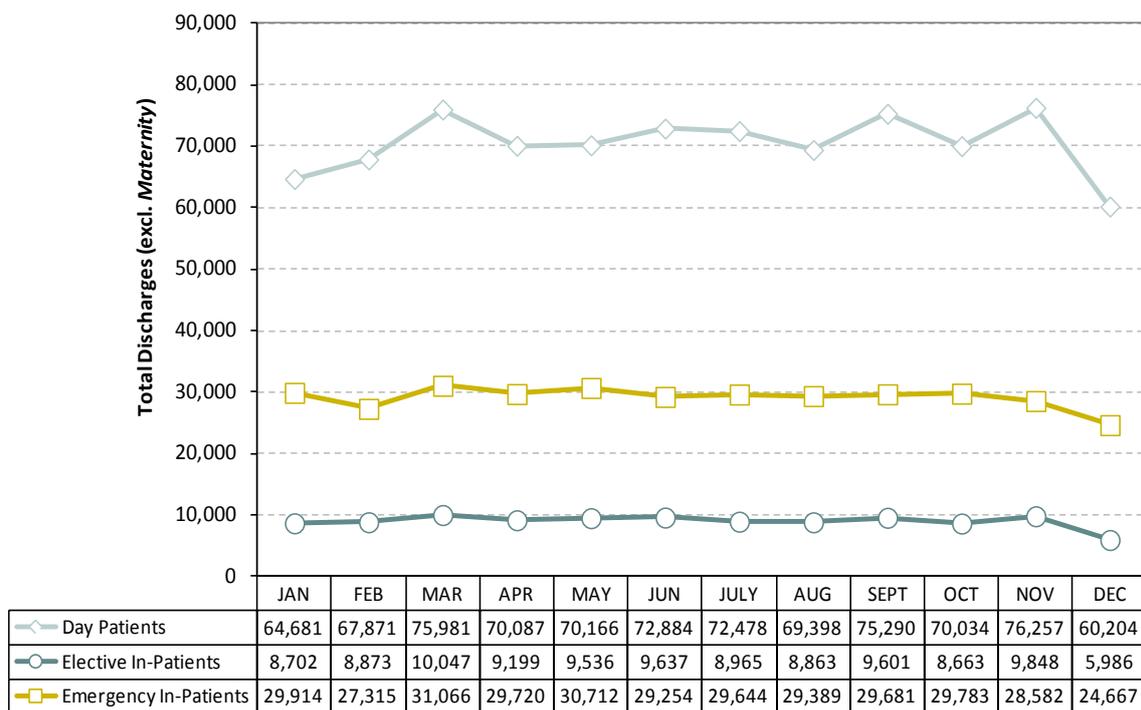
Note: HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

2.4.3 Month of Admission

Figure 2.18 shows total discharges (excl. *Maternity*) by month of admission disaggregated by patient type and admission type, the data presented here is based on discharges admitted and discharged in 2010.

- Hospital admissions peaked in March for both elective in-patients and emergency in-patients.
- The highest number of day patients was treated in November with 76,257 discharges, with December recording the lowest number of day patients (60,204 discharges).
- May recorded the highest number of emergency in-patient admissions (30,712 discharges).
- October recorded the lowest number of elective in-patient admissions with only 8,663 in-patient discharges admitted in this month (apart from December).

FIGURE 2.18 Total Discharges (excl. *Maternity*): Month of Admission by Patient Type and Admission Type (N)



Notes: This does not include 7,549 discharges that were admitted prior to 2010 but were discharged in 2010. HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

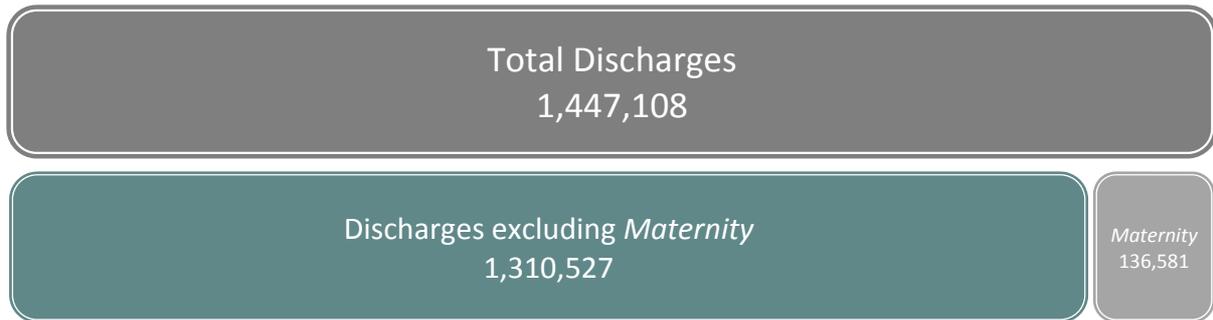
Morbidity Analysis
2010

SECTION

THREE

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3.1 INTRODUCTION

Section Three focuses on the diagnoses and procedures recorded for total discharges (excl. *Maternity*) reported to HIPE by acute public hospitals.¹ This section excludes *Maternity* discharges which are reported separately in Section Four.²

- Section 3.2 outlines the clinical coding process, the classification and definitions used in the assignment of diagnoses and procedure codes to a discharge and analysis of the mean number of diagnoses and procedures reported for discharges (excl. *Maternity*).
- Section 3.3 provides a summary of related hospital activity (excl. *Maternity*). Top 20 diagnoses and procedures, along with Top 10 Australian Refined Diagnosis Related Groups (AR-DRGs) are provided for day patient and in-patient discharges (total, elective and emergency). Demographic data, sex and age group, and administrative analyses including admission source, mode of emergency admissions (for emergency in-patients only), and discharge destination are also presented.
- Section 3.4 provides details of the diagnoses and procedures reported for total discharges (excl. *Maternity*), by sex and age group. The mean length of stay for acute in-patient discharges (with a length of stay of 30 days or less and excluding day patients) is presented for principal diagnoses and principal procedures.

¹ The National Psychiatric In-Patient Reporting System, supported by the Health Research Board, reports information on all admissions to psychiatric hospitals and units nationally.

² A small number of obstetric diagnoses and/or procedures are reported in this Section as the admission of the patient was not related to their obstetrical experience and therefore they were not allocated to Admission Type *Maternity*. See Section Four for details of *Maternity* activity reported.

3.2 CODING OF DIAGNOSES AND PROCEDURES

Coding of HIPE hospital activity is performed by the HIPE Clinical Coder who translates medical terminology into code; they perform an essential function in providing high quality, accurate, standardised medical information. The source document for coding for the HIPE system is the medical record or chart. Documentation within the medical record includes the discharge summary or letter, nursing notes, consultation reports, progress notes, operative reports, pre- and post-operative reports, and pathology reports. The coder uses the whole chart to extract the diagnoses and procedures that are critical to representing the essential features of the patient and their hospital stay in accordance with international and national coding standards. Appendix III contains the HIPE Data Entry Form for 2010, which details the information coded for each hospital discharge. No interpretation of test results may be presumed by the coder and all diagnoses recorded must be documented by a clinician in the chart.³

Discharges are coded using the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM), Australian Classification of Health interventions (ACHI), Australian Coding Standards (ACS), 6th Edition and Irish Coding Standards (ICS).^{4, 5, 6, 7} Details of the diagnosis and procedure coding scheme are provided in Tables 3.1 and 3.2. ACS are developed to provide guidance in the application of ICD-10-AM and ACHI codes. Standards are categorised by site and or body system according to the clinical specialty to which a disease or procedure relates. ICS apply to activity coded in HIPE and provide guidance and instruction on all aspects of HIPE data collection by addressing issues relevant to the Irish hospital system. ICS are developed to complement the ACS and are revised regularly to reflect changing clinical practice.

³ The Health Research and Information Division (HRID) of the ESRI is responsible for the training of coders. For further information see www.hipe.ie

⁴ For further information on the selection of ICD-10-AM as the clinical coding scheme for Ireland see Murphy, D., MM. Wiley, A. Clifton, D. McDonagh, 2004, *Updating Clinical Coding in Ireland: Options and Opportunities*. Dublin: The Economic and Social Research Institute.

⁵ National Centre of Classification in Health (NCCH), 2008: The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (6thEd): NCCH, Faculty of Health Sciences, The University of Sydney.

⁶ The spelling conventions of ICD-10-AM comply with the Macquarie Dictionary, as recommended by the Australian government style manual.

⁷ Ireland changed from ICD-10-AM 4th edition to ICD-10-AM 6th edition in 2009. For further information on changes in coding see previous reports, available at www.hipe.ie

Table 3.1 provides details of the structure of ICD-10-AM Diagnostic Codes and presents the chapter structure of ICD-10-AM diagnosis codes.

TABLE 3.1 ICD-10-AM Diagnosis Codes, Chapter and Title

| ICD-10-AM Diagnosis Codes | | | | | |
|--|---|-------------------|-------------|---|---------------|
| <p>The 'core' disease classification of ICD-10-AM is the three character code, which is the mandatory level of coding for international reporting to the World Health Organization (WHO) for general international comparisons. This core set of codes has been expanded to four and five character codes so that important specific disease entities can be identified, while also maintaining the ability to present data in broad groups to enable useful and understandable information to be obtained.</p> <p>The ICD-10-AM is a variable-axis classification. Its structure is designed principally to facilitate epidemiological analysis. Diseases are organised in the following groups: epidemic diseases; constitutional or general diseases; local disease arranged by site; developmental diseases; and injuries.</p> <p>Most of the tabular is taken up with the main disease classification composed of 22 chapters. The first character of the ICD-10-AM code is a letter, and each letter is associated with a particular chapter, except for the letter D, which spans both Chapter 2 <i>Neoplasms</i> and Chapter 3 <i>Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism</i>, and the letter H, which is used in both Chapter 7 <i>Diseases of the eye and adnexa</i> and Chapter 8 <i>Diseases of the ear and mastoid process</i>. Four chapters (Chapters 1, 2, 19 and 20) use more than one letter in the first position of their codes.</p> <p>WHO intends the codes U00–U99 to be used for provisional assignment of new diseases of uncertain aetiology and for specific research purposes. U50–U71 are used in ICD-10-AM to classify sporting activities previously classified to Y93.0 Activity, While engaged in sports.</p> | | | | | |
| Chapter and Title | Code Prefix | Chapter and Title | Code Prefix | Chapter and Title | Code Prefix |
| 1 | Certain infectious and parasitic diseases | A, B | 12 | Diseases of the skin and subcutaneous tissue | L |
| 2 | Neoplasms | C, D | 13 | Diseases of the musculoskeletal system and connective tissue | M |
| 3 | Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism | D | 14 | Diseases of the genitourinary system | N |
| 4 | Endocrine, nutritional and metabolic diseases | E | 15 | Pregnancy, childbirth and the puerperium | O |
| 5 | Mental and behavioural disorders | F | 16 | Certain conditions originating in the perinatal period | P |
| 6 | Diseases of the nervous system | G | 17 | Congenital malformations, deformations and chromosomal abnormalities | Q |
| 7 | Diseases of the eye and adnexa | H | 18 | Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified | R |
| 8 | Diseases of the ear and mastoid process | H | 19 | Injury, poisoning and certain other consequences of external causes | S, T |
| 9 | Diseases of the circulatory system | I | 20 | External causes of morbidity and mortality | U, V, W, X, Y |
| 10 | Diseases of the respiratory system | J | 21 | Factors influencing health status and contact with health services | Z |
| 11 | Diseases of the digestive system | K | 22 | Codes for special purposes | U |

Source: National Centre of Classification in Health (NCCH), 2008: The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (6thEd): Australian Coding Standards. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney, p 2.

Table 3.2 provides details of the structure of ACHI Procedure Codes and presents the chapter structure of these ACHI procedure codes.

TABLE 3.2 Australian Classification of Health Interventions (ACHI), Chapter and Title

| Australian Classification of Health Interventions (ACHI) | |
|---|--|
| The Australian Classification of Health Interventions (ACHI) was developed by the NCCH and is generally based on the Commonwealth Medicare Benefits Schedule (MBS). | |
| The main features of the classification are: | |
| 1) The procedure classification captures procedures and interventions performed in public and private hospitals, day centres and ambulatory settings. Allied health interventions, dental services and procedures performed outside the operating theatre are included. | |
| 2) The procedure classification is based on the Commonwealth Medicare Benefits Schedule (MBS) and consists of a seven character code in the format xxxx-xx. Generally, the first five characters represent the MBS item number. A two character extension number has been attached to each MBS item number to represent individual procedural concepts (e.g., 36564-00). The two character extensions are also used in anaesthetic procedure codes to indicate ASA, while in pharmacotherapy they are used to indicate drug type. Other ACHI interventions which are not represented in MBS are allocated a code number from the 90000 series. Note: 97000 codes are reserved for dental services. | |
| 3) The structure of the procedure classification is based on anatomy rather than surgical specialty. Chapters closely follow the chapter headings of the WHO ICD-10 to maintain parity with the disease classification. | |
| 4) Nonsurgical procedures are listed separately from the surgical procedures, whenever feasible. | |
| 5) A hierarchical structure with the following axes: <ul style="list-style-type: none"> • First level – anatomical site axis • Second level – procedure type axis • Third level –block axis | |
| 6) Inclusion of many more procedures which can be utilised in non-institutional settings, such as community based health and ambulatory care | |
| Chapter and Title | Chapter and Title |
| 1 Procedures on nervous system | 11 Procedures on urinary system |
| 2 Procedures on endocrine system | 12 Procedures on male genital organs |
| 3 Procedures on eye and adnexa | 13 Gynaecological procedures |
| 4 Procedures on ear and mastoid process | 14 Obstetric procedures |
| 5 Procedures on nose, mouth and pharynx | 15 Procedures on musculoskeletal system |
| 6 Dental services | 16 Dermatological and plastic procedures |
| 7 Procedures on respiratory system | 17 Procedures on breast |
| 8 Procedures on cardiovascular system | 18 Radiation oncology procedures |
| 9 Procedures on blood and blood-forming organs | 19 Non-invasive, cognitive and other interventions, not elsewhere classified |
| 10 Procedures on digestive system | 20 Imaging services |

Sources: National Centre of Classification in Health (NCCH), 2008: The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (6thEd): Australian Coding Standards. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney, p 3.

National Centre of Classification in Health (NCCH), 2008: The Australian Classification of Health Interventions (ACHI) Tabular List of Interventions. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney, p iii.

3.2.1 Definition of a Diagnosis

In 2010, HIPE collected a principal diagnosis for each discharge, together with up to nineteen additional diagnosis codes.⁸

DIAGNOSES

A **principal diagnosis** is defined as, 'the diagnosis established after study to be chiefly responsible for occasioning an episode of admitted patient care, an episode of residential care or attendance at the healthcare establishment, as represented by a code'.⁹

An **additional diagnosis** is defined as, 'a condition or complaint either coexisting with the principal diagnosis or arising during the episode of admitted patient care, episode of residential care or attendance at a health care establishment, as represented by a code' and may be used as an indication of the level of comorbidity.¹⁰

Additional diagnoses are interpreted as conditions that affect patient management in terms of requiring commencement, alteration or adjustment of therapeutic treatment, diagnostic procedures, increased clinical care and/or monitoring.

3.2.1.1 Mean Number of Diagnoses Reported

Table 3.3 outlines the mean number of diagnoses collected for day patient, in-patient and total discharges (excl. *Maternity*), by sex and age group.

- The mean number of diagnoses recorded for total discharges (excl. *Maternity*) was 2.7.
- The mean number of diagnoses recorded for in-patient discharges was 3.8 compared to 2.0 for day patients.
- The mean number of diagnoses recorded was slightly higher for male discharges compared with female discharges; 2.7 for males and 2.6 for females.

TABLE 3.3 Total Discharges (excl. *Maternity*): Mean Number of All-Listed Diagnoses by Patient Type, Sex and Age Group

| | Day Patients | In-Patients | Total Discharges (excl. <i>Maternity</i>) |
|-------------------|--------------|-------------|--|
| Total | 2.0 | 3.8 | 2.7 |
| Sex | | | |
| Male | 2.0 | 4.0 | 2.7 |
| Female | 2.0 | 3.7 | 2.6 |
| Age Group | | | |
| < 15 Years | 1.8 | 2.7 | 2.4 |
| 15–44 Years | 1.7 | 3.0 | 2.2 |
| 45–64 Years | 2.1 | 3.8 | 2.6 |
| 65 Years and Over | 2.2 | 5.0 | 3.1 |

⁸ From 1 January 2011 HIPE collects one principal diagnosis and up to 29 additional diagnoses.

⁹ National Centre of Classification in Health (NCCH), 2008: *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (6th Ed): Australian Coding Standards*. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney, p 10.

¹⁰ National Centre of Classification in Health (NCCH), op. cit., p 13.

3.2.2 Definition of a Procedure

In 2010, a principal procedure and up to nineteen additional procedure codes for each discharge could be reported to HIPE where appropriate.

PROCEDURES

The classification of procedures in ICD-10-AM uses the Australian Classification of Health Interventions (ACHI).¹¹ Procedures are coded in HIPE in accordance with the following hierarchy:

- procedure performed for treatment of the principal diagnosis
- procedure performed for treatment of an additional diagnosis
- diagnostic/exploratory procedure related to the principal diagnosis and
- diagnostic/exploratory procedure related to additional diagnoses for the episode of care.¹²

A key feature of the ACHI procedure classification is a seven-character code in the format xxxxx-xx. The structure is organised on an anatomical basis and thus does not always appear in numerical order. Procedure blocks were introduced to provide a sequential framework for both coding and reporting purposes. The blocks represent homogenous groups of procedures, while the seven-digit codes allow for greater detail.¹³ For example, procedure block 0732 represents 'direct closure of vein', containing the procedures 'direct closure of renal vein' (33833-04) and 'direct closure of vena cava' (90215-02). In this report, tables have been produced using the block framework.¹⁴

3.2.2.1 Discharges with a Procedure

Table 3.4 provides details of the number and percentage of discharges (excl. *Maternity*) that had a principal procedure recorded. Section 4 provides details of procedures reported for *Maternity* discharges.

- Of the 1,310,527 total discharges (excl. *Maternity*) principal procedures were recorded for 1,101,807 (84.1 per cent).
- Close to 94 per cent of day patient discharges had a principal procedure recorded.
- Over 66 per cent of in-patient discharges had a principal procedure recorded, with 89.5 per cent of elective in-patients and 59.1 per cent of emergency in-patients undergoing a principal procedure.

¹¹ National Centre for Classification in Health (NCCH) 2008, *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (6th Ed.): Australian Coding Standards*. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney.

¹² National Centre of Classification in Health (NCCH), 2008, *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (6th Ed.): Australian Coding Standards*. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney, p 32.

¹³ National Centre of Classification in Health (NCCH), 2008, *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (6th Ed.): Australian Classification of Health Interventions (ACHI)*. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney, p viii.

¹⁴ The move to the ACHI introduced significant changes to the collection of procedures from 2005, including the use of Australian Coding Standard (ACS) number 0042 (see Appendix VIII).

TABLE 3.4 Total Discharges (excl. *Maternity*): Number and Percentage of Discharges with a Principal Procedure by Patient Type

| | Total Discharges (excl. <i>Maternity</i>) | Total Discharges (excl. <i>Maternity</i>) with a Principal Procedure | |
|--|---|--|-------------|
| | N | N | % |
| Total Discharges (excl. <i>Maternity</i>) | 1,310,527 | 1,101,807 | 84.1 |
| Day Patients | 845,331 | 793,867 | 93.9 |
| In-Patients | 465,196 | 307,940 | 66.2 |
| Elective In-Patients | 108,825 | 97,398 | 89.5 |
| Emergency In-Patients | 356,371 | 210,542 | 59.1 |

3.2.2.2 Mean Number of Procedures Reported

Table 3.5 outlines the mean number of procedures reported for day patient, in-patient and total discharges (excl. *Maternity*), by sex and age group. The calculation of mean procedures is based on discharges with at least one procedure reported to HIPE.¹⁵

- For those discharges who underwent at least one procedure, in-patient discharges had a mean number of 2.9 procedures recorded compared to 1.4 procedures for day patients.
- While the mean number of procedures increased with age for in-patient discharges, the day patient pattern differed. For those undergoing a procedure, day patient discharges aged less than 15 years recorded a mean of 1.9 procedures, which was higher than that reported for the older age groups.

TABLE 3.5 Total Discharges (excl. *Maternity*): Mean Number of All-Listed Procedures by Patient Type, Sex and Age Group

| | Day Patients | In-Patients | Total Discharges (excl. <i>Maternity</i>) |
|---------------------------------------|--------------|-------------|---|
| Total (excl. <i>Maternity</i>) | 1.4 | 2.9 | 1.8 |
| Sex | | | |
| Male | 1.3 | 2.9 | 1.8 |
| Female | 1.4 | 2.9 | 1.8 |
| Age Group | | | |
| < 15 Years | 1.9 | 2.5 | 2.2 |
| 15–44 Years | 1.5 | 2.6 | 1.8 |
| 45–64 Years | 1.4 | 3.0 | 1.7 |
| 65 Years and Over | 1.2 | 3.2 | 1.8 |

¹⁵ Includes all anaesthesia except local, see ACS 0031 Anaesthesia in National Centre of Classification in Health (NCCH), 2008, *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (6th Ed.): Australian Coding Standards*. Sydney: NCCH, Faculty of Health Sciences, The University of Sydney, p 48.

3.3 MORBIDITY ANALYSIS: SUMMARY OF DAY PATIENT AND IN-PATIENT ACTIVITY

Section 3.3 provides a summary of the day patient and in-patient hospital activity reported to HIPE.¹⁶ This analysis reports on the most commonly recorded diagnoses, procedures and diagnosis related groups as well as providing demographic and administrative information for these discharges.

3.3.1 Day Patient Activity (excl. *Maternity*)

A day patient is admitted to hospital for treatment on an elective (rather than an emergency) basis and is discharged alive, as scheduled, on the same day (Department of Health and Children, 2001). Deliveries are not included. Table 3.6 presents a summary of day patient activity reported to HIPE.

Day Patients – Profile

- Day patient discharges accounted for 64.5 per cent of total discharges (excl. *Maternity*).
- Day patients aged 65–74 years accounted for 20.4 per cent of day patient discharges.

Day Patients – Top 20 Principal Diagnoses

- Day patients with a principal diagnosis of *other medical care* (includes *chemotherapy* and *radiotherapy* encounters) accounted for 21.0 per cent of day patient discharges.
- *Care involving dialysis* accounted for 19.9 per cent of day patient discharges.

Day Patients – Top 20 Principal Procedures

- A principal procedure was recorded for 93.9 per cent of day patient discharges (see Table 3.4).
- *Haemodialysis* was reported as a principal procedure for 21.2 per cent of day patients with at least one procedure.

Day Patients – Top 10 AR-DRGs

- The top 3 AR-DRGs accounted for over 40 per cent of day patient discharges reported to HIPE when analysed by diagnosis related group.¹⁷
- *Haemodialysis* accounted for 19.9 per cent, *radiotherapy* accounted for 11.0 per cent and *chemotherapy* accounting for 9.5 per cent of day patient discharges.

¹⁶ See Section Four for details of *Maternity* activity reported.

¹⁷ See Section Five for details of the case mix classification.

TABLE 3.6 Day Patient Activity (excl. *Maternity*) (N, %)

| Principal Diagnosis – Top 20 ^a | | | Day Patients | | | Principal Procedure – Top 20 ^b | | | | | | | | | |
|---|---|---------|--------------|-------------|------------------|---|--------|--|-------------------------------|------------------------|------|---|---|--------|-----|
| | N | % | 845,331 | | | | N | % | | | | | | | |
| Z51 | Other medical care | 177,790 | 21.0 | | | | 1060 | Haemodialysis | 167,969 | 21.2 | | | | | |
| Z49 | Care involving dialysis | 168,098 | 19.9 | | | | 1920 | Administration of pharmacotherapy | 106,190 | 13.4 | | | | | |
| E83 | Disorders of mineral metabolism | 22,831 | 2.7 | | | | 1788 | Megavoltage radiation treatment | 86,810 | 10.9 | | | | | |
| L40 | Psoriasis | 17,534 | 2.1 | | | | 1008 | Panendoscopy with excision | 37,729 | 4.8 | | | | | |
| K29 | Gastritis and duodenitis | 12,106 | 1.4 | | | | 1620 | Excision of lesion(s) of skin and subcutaneous tissue | 30,394 | 3.8 | | | | | |
| M54 | Dorsalgia | 9,514 | 1.1 | | | | 0905 | Fibreoptic colonoscopy | 24,750 | 3.1 | | | | | |
| I84 | Haemorrhoids | 7,512 | 0.9 | | | | 0725 | Other incision procedures on veins | 22,952 | 2.9 | | | | | |
| C44 | Other malignant neoplasms of skin | 7,485 | 0.9 | | | | 0911 | Fibreoptic colonoscopy with excision | 20,971 | 2.6 | | | | | |
| M25 | Other joint disorders, not elsewhere classified | 7,242 | 0.9 | | | | 1610 | Ultraviolet B [UVB] light therapy of skin | 15,637 | 2.0 | | | | | |
| R10 | Abdominal and pelvic pain | 7,125 | 0.8 | | | | 1893 | Administration of blood and blood products | 13,089 | 1.6 | | | | | |
| K57 | Diverticular disease of intestine | 6,988 | 0.8 | | | | 1552 | Administration of agent into other musculoskeletal sites | 12,546 | 1.6 | | | | | |
| Z08 | Follow-up examination after treatment for malignant neoplasms | 6,524 | 0.8 | | | | 1089 | Examination procedures on bladder | 11,490 | 1.4 | | | | | |
| Z09 | Follow-up examination after treatment for conditions other than malignant neoplasms | 6,359 | 0.8 | | | | 0668 | Coronary angiography | 8,833 | 1.1 | | | | | |
| K44 | Diaphragmatic hernia | 6,151 | 0.7 | | | | 1005 | Panendoscopy | 8,774 | 1.1 | | | | | |
| Z13 | Special screening examination for other diseases and disorders | 5,981 | 0.7 | | | | 0197 | Extracapsular crystalline lens extraction by phacoemulsification | 6,912 | 0.9 | | | | | |
| H26 | Other cataract | 5,912 | 0.7 | | | | 0209 | Application, insertion or removal procedures on retina, choroid or posterior chamber | 5,751 | 0.7 | | | | | |
| H35 | Other retinal disorders | 5,843 | 0.7 | | | | 1612 | Destruction of lesion of skin or cartilage | 5,220 | 0.7 | | | | | |
| K21 | Gastro-oesophageal reflux disease | 5,833 | 0.7 | | | | 0457 | Nonsurgical removal of tooth | 4,211 | 0.5 | | | | | |
| Z45 | Adjustment and management of implanted device | 5,590 | 0.7 | | | | 0544 | Bronchoscopy with biopsy or removal of foreign body | 4,192 | 0.5 | | | | | |
| I25 | Chronic ischaemic heart disease | 5,103 | 0.6 | | | | 0309 | Myringotomy | 4,047 | 0.5 | | | | | |
| Admission Source | | | N | % | Age Group | | | N | % | AR-DRG – Top 10 | | | | | |
| Home | | 839,246 | 99.3 | < 1 Years | 4,404 | 0.5 | L61Z | Haemodialysis | 167,954 | 19.9 | R64Z | Radiotherapy | 92,924 | 11.0 | |
| Long stay accommodation | | 876 | 0.1 | 1–14 Years | 41,884 | 5.0 | R63Z | Chemotherapy | 80,217 | 9.5 | J11Z | Other skin, subcutaneous tissue and breast procedures | 35,281 | 4.2 | |
| Transfer from other hospital | | 5,126 | 0.6 | 15–24 Years | 31,708 | 3.8 | G48C | Colonoscopy, sameday | 35,274 | 4.2 | G47C | Other gastroscopy, sameday | 34,633 | 4.1 | |
| Other (includes new born) | | 83 | 0.0 | 25–34 Years | 66,612 | 7.9 | Q61B | Red blood cell disorders w/o catastrophic or severe cc | 29,811 | 3.5 | Z64B | Other factors influencing health status, sameday | 24,585 | 2.9 | |
| Discharge Destination | | | N | % | 35–44 Years | 94,872 | 11.2 | J68C | Major skin disorders, sameday | 20,934 | 2.5 | R61C | Lymphoma and non-acute leukaemia, sameday | 15,935 | 1.9 |
| Home | | 839,104 | 99.3 | 45–54 Years | 126,730 | 15.0 | | | | | | | | | |
| Long stay accommodation | | 1,058 | 0.1 | 55–64 Years | 168,640 | 19.9 | | | | | | | | | |
| Transfer to other hospital | | 5,067 | 0.6 | 65–74 Years | 172,300 | 20.4 | | | | | | | | | |
| Other | | 102 | 0.0 | 75–84 Years | 114,995 | 13.6 | | | | | | | | | |
| | | | | | | 85 Years and Over | 23,186 | 2.7 | | | | | | | |

Notes: Percentage columns are subject to rounding.
a ICD-10-AM diagnosis codes are analysed at three-digit level.
b ACHI Procedure codes are analysed at block level. % is based on day patients with principal procedure reported.

3.3.2 In-Patient Activity (excl. *Maternity*)

An in-patient is admitted to hospital for treatment or investigation on an elective or emergency basis (Department of Health and Children, 2001). While an elective in-patient would stay for at least one night, in the case of emergency admissions the date of admission and discharge may be the same. Table 3.7 presents a summary of in-patient activity reported to HIPE.

In-Patients – Profile

- In-patient discharges accounted for 35.5 per cent of total discharges (excl. *Maternity*).
- Over 96 per cent (449,228) were acute in-patient discharges (those with a length of stay of 30 days or less). They used 67.8 per cent of in-patient bed days (excl. *Maternity*) while extended stay in-patients accounted for 3.4 per cent of in-patient discharges and 32.2 per cent of in-patient bed days.

In-Patients – Top 20 Principal Diagnoses

- In-patient discharges with a principal diagnosis of *pain in throat and chest* accounted for 3.4 per cent of in-patient discharges.
- In-patient discharges with a principal diagnosis of *other chronic obstructive pulmonary disease* accounted for 2.3 per cent of in-patients.

In-Patients – Top 20 Principal Procedures

- A principal procedure was recorded for 66.2 per cent of in-patient discharges (Table 3.4).
- *Generalised allied health interventions* were reported as a principal procedure for 13.9 per cent of in-patient discharges with at least one procedure reported. This category includes interventions such as physiotherapy, dietetics, pharmacy, social work, and occupational therapy. Together, these five interventions accounted for 90.0 per cent of cases within this procedure block.
- *Computerised tomography of brain* accounted for 8.4 per cent of in-patient discharges with a principal procedure reported.

In-Patients – Top 10 AR-DRGs

- The top 3 AR-DRGs accounted for 7.2 per cent of in-patient discharges when analysed by diagnosis related group.¹⁸
- *Chest pain* accounted for 3.2 per cent, *abdominal pain or mesenteric adenitis* accounted for 2.0 per cent and *oesophagitis and gastroenteritis w/o cat/sev cc* accounted for 2.0 per cent of in-patient discharges.

¹⁸ See Section Five for details of the case mix classification

TABLE 3.7 In-Patient Activity (excl. *Maternity*) (N, %, and Length of Stay)

| Principal Diagnosis – Top 20 ^a | | N | % | Total Mean LOS ^c | Acute Mean LOS ^d |
|---|--|--------|-----|-----------------------------|-----------------------------|
| R07 | Pain in throat and chest | 15,743 | 3.4 | 2.3 | 2.3 |
| J44 | Other chronic obstructive pulmonary disease | 10,862 | 2.3 | 9.5 | 7.3 |
| R10 | Abdominal and pelvic pain | 10,749 | 2.3 | 2.5 | 2.5 |
| J22 | Unspecified acute lower respiratory infection | 9,361 | 2.0 | 7.1 | 5.6 |
| J18 | Pneumonia, organism unspecified | 8,512 | 1.8 | 11.2 | 7.6 |
| N39 | Other disorders of urinary system | 8,166 | 1.8 | 8.0 | 5.4 |
| R55 | Syncope and collapse | 6,572 | 1.4 | 5.8 | 4.3 |
| S52 | Fracture of forearm | 6,197 | 1.3 | 2.2 | 1.9 |
| K80 | Cholelithiasis | 6,166 | 1.3 | 5.0 | 4.6 |
| K35 | Acute appendicitis | 6,061 | 1.3 | 3.6 | 3.6 |
| I48 | Atrial fibrillation and flutter | 6,039 | 1.3 | 5.4 | 4.5 |
| A09 | Other gastroenteritis and colitis of infectious and unspecified origin | 5,854 | 1.3 | 3.3 | 2.9 |
| I21 | Acute myocardial infarction | 5,845 | 1.3 | 8.1 | 6.1 |
| I50 | Heart failure | 5,696 | 1.2 | 12.4 | 8.7 |
| I25 | Chronic ischaemic heart disease | 5,020 | 1.1 | 5.5 | 4.7 |
| I20 | Angina pectoris | 4,855 | 1.0 | 5.1 | 4.8 |
| S82 | Fracture of lower leg, including ankle | 4,759 | 1.0 | 5.2 | 3.9 |
| L03 | Cellulitis | 4,662 | 1.0 | 6.9 | 5.9 |
| R51 | Headache | 4,392 | 0.9 | 2.5 | 2.4 |
| I63 | Cerebral infarction | 4,317 | 0.9 | 23.8 | 10.3 |

| Admission Source | | |
|------------------------------|---------|------|
| Home | 421,942 | 90.7 |
| Long stay accommodation | 8,556 | 1.8 |
| Transfer from other hospital | 22,851 | 4.9 |
| New born | 9,583 | 2.1 |
| Other | 2,264 | 0.5 |

| Discharge Destination | | |
|----------------------------|---------|------|
| Home | 401,617 | 86.3 |
| Long stay accommodation | 23,217 | 5.0 |
| Transfer to other hospital | 23,507 | 5.1 |
| Died | 11,070 | 2.4 |
| Other | 5,785 | 1.2 |

| In-Patients | | |
|-------------------|------------------|--------------|
| 465,196 | | |
| Discharges | N | % |
| Total | 465,196 | 100.0 |
| Acute | 449,228 | 96.6 |
| Extended | 15,968 | 3.4 |
| Bed Days | N | % |
| Total | 3,236,516 | 100.0 |
| Acute | 2,193,996 | 67.8 |
| Extended | 1,042,520 | 32.2 |
| Length of Stay | Mean | |
| Total | 7.0 | |
| Acute | 4.9 | |
| Extended | 65.3 | |
| Sex | N | % |
| Male | 239,057 | 51.4 |
| Female | 226,139 | 48.6 |
| Age Group | N | % |
| < 1 Years | 27,819 | 6.0 |
| 1–14 Years | 54,414 | 11.7 |
| 15–24 Years | 32,221 | 6.9 |
| 25–34 Years | 36,313 | 7.8 |
| 35–44 Years | 41,380 | 8.9 |
| 45–54 Years | 49,367 | 10.6 |
| 55–64 Years | 60,936 | 13.1 |
| 65–74 Years | 67,250 | 14.5 |
| 75–84 Years | 65,842 | 14.2 |
| 85 Years and Over | 29,654 | 6.4 |

| Principal Procedure – Top 20 ^b | | N | % | Total Mean LOS ^c | Acute Mean LOS ^d |
|---|---|--------|------|-----------------------------|-----------------------------|
| 1916 | Generalised allied health interventions | 42,719 | 13.9 | 11.7 | 8.0 |
| 1952 | Computerised tomography of brain | 25,999 | 8.4 | 10.4 | 5.8 |
| 1920 | Administration of pharmacotherapy | 10,522 | 3.4 | 7.0 | 5.4 |
| 1008 | Panendoscopy with excision | 8,513 | 2.8 | 10.1 | 6.9 |
| 2015 | Magnetic resonance imaging | 7,228 | 2.3 | 11.7 | 7.3 |
| 0926 | Appendicectomy | 6,644 | 2.2 | 3.5 | 3.5 |
| 1893 | Administration of blood and blood products | 6,544 | 2.1 | 8.3 | 6.2 |
| 1963 | Computerised tomography of abdomen and pelvis | 5,388 | 1.7 | 6.6 | 5.7 |
| 1966 | Other computerised tomography | 4,930 | 1.6 | 8.7 | 6.6 |
| 1489 | Arthroplasty of hip | 4,911 | 1.6 | 13.7 | 9.9 |
| 0668 | Coronary angiography | 4,865 | 1.6 | 6.5 | 5.6 |
| 0412 | Tonsillectomy or adenoidectomy | 4,081 | 1.3 | 1.6 | 1.5 |
| 0965 | Cholecystectomy | 3,972 | 1.3 | 4.4 | 3.9 |
| 0569 | Ventilatory support | 3,527 | 1.1 | 22.3 | 8.6 |
| 1427 | Closed reduction of fracture of radius | 3,505 | 1.1 | 1.8 | 1.6 |
| 0671 | Transluminal coronary angioplasty with stenting | 3,416 | 1.1 | 4.3 | 3.8 |
| 0570 | Non-invasive ventilatory support | 3,400 | 1.1 | 15.3 | 9.2 |
| 1962 | Computerised tomography of abdomen | 3,337 | 1.1 | 6.9 | 5.6 |
| 0911 | Fibreoptic colonoscopy with excision | 3,132 | 1.0 | 10.1 | 7.4 |
| 1005 | Panendoscopy | 2,972 | 1.0 | 10.1 | 6.9 |

| AR-DRG – Top 10 | | N | % | Total Mean LOS ^c | Acute Mean LOS ^d |
|-----------------|--|--------|-----|-----------------------------|-----------------------------|
| F74Z | Chest pain | 14,735 | 3.2 | 2.2 | 2.2 |
| G66Z | Abdominal pain or mesenteric adenitis | 9,484 | 2.0 | 2.3 | 2.2 |
| G67B | Oesophagitis and gastroenteritis w/o cat/sev cc | 9,448 | 2.0 | 2.3 | 2.3 |
| E65B | Chronic obstructive airways disease w/o cat cc | 8,214 | 1.8 | 7.2 | 6.3 |
| G70B | Other digestive system diagnoses w/o cat/sev cc | 8,108 | 1.7 | 3.3 | 3.2 |
| D63Z | Otitis media and uri | 7,469 | 1.6 | 2.2 | 2.1 |
| B77Z | Headache | 6,371 | 1.4 | 2.5 | 2.4 |
| F76B | Arrhythmia, cardiac arrest and conduction disorders w/o cat/sev cc | 6,039 | 1.3 | 3.8 | 3.6 |
| L63B | Kidney and urinary tract infections w/o cat/sev cc | 5,860 | 1.3 | 5.2 | 4.5 |
| G47B | Other gastroscopy w/o cat cc | 5,833 | 1.3 | 5.1 | 4.7 |

Notes: Percentage columns are subject to rounding. c
 a ICD-10-AM diagnosis codes are analysed at three-digit level. d
 b ACHI Procedure codes are analysed at block level. % is based on in-patients with principal procedure reported. c
 Includes mean length of stay for acute in-patients (length of stay of 30 days or less) and extended stay in-patients (length of stay greater than 30 days). d
 Includes mean length of stay for acute in-patients only.

3.3.2.1 Elective In-Patient Activity

An elective in-patient is an admission that has been arranged in advance (Department of Health and Children, 2001). Table 3.8 presents a summary of elective in-patient activity reported to HIPE.

Elective In-Patients – Profile

- Elective in-patient discharges accounted for 8.3 per cent of total discharges (excl. *Maternity*) and 23.4 per cent of in-patients.
- Elective in-patient discharges accounted for 732,501 bed days, 22.6 per cent of in-patient bed days (see Table 3.8).
- Over 90 per cent of elective in-patient discharges were admitted from home with a further 9.1 per cent admitted by transfer from another hospital.
- Over 92 per cent of elective in-patient discharges were discharged home.

Elective In-Patients – Top 20 Principal Diagnoses

- Elective in-patients with a principal diagnosis of *chronic diseases of tonsils and adenoids* accounted for 3.7 per cent of elective in-patient discharges.
- *Care involving use of rehabilitation procedures* reported the longest length of stay of the top 20 principal diagnoses for elective in-patient discharges, at 26.7 days.

Elective In-Patients – Top 20 Principal Procedures

- A principal procedure was recorded for 89.5 per cent of elective in-patient discharges (see Table 3.4).
- *Generalised allied health interventions* were reported for 8.7 per cent of elective in-patients who had a principal procedure reported.
- Over 4 per cent of elective in-patient discharges had a principal procedure of *tonsillectomy or adenoidectomy* reported, with a mean length of stay of 1.5 days.

Elective In-Patients – Top 10 AR-DRGs

- The top 3 AR-DRGs accounted for 9.5 per cent of elective in-patient discharges reported to HIPE when analysed by case mix.¹⁹
- *Tonsillectomy and/or adenoidectomy* accounted for 3.7 per cent, *rehabilitation w/o catastrophic cc* accounted for 3.0 per cent and *hip replacement w/o catastrophic cc* accounted for 2.8 per cent of elective in-patient discharges.

¹⁹ See Section Five for details of the case mix classification.

TABLE 3.8 Elective In-Patient Activity (N, %, and Length of Stay)

| Principal Diagnosis – Top 20 ^a | | N | % | Total Mean LOS ^c | Acute Mean LOS ^d |
|---|---|-------|-----|-----------------------------|-----------------------------|
| J35 | Chronic diseases of tonsils and adenoids | 4,012 | 3.7 | 1.5 | 1.5 |
| Z50 | Care involving use of rehabilitation procedures | 3,787 | 3.5 | 26.7 | 13.5 |
| M16 | Coxarthrosis [arthrosis of hip] | 3,089 | 2.8 | 8.3 | 8.1 |
| K80 | Cholelithiasis | 2,718 | 2.5 | 2.8 | 2.7 |
| I25 | Chronic ischaemic heart disease | 2,413 | 2.2 | 4.1 | 3.5 |
| C50 | Malignant neoplasm of breast | 2,307 | 2.1 | 7.1 | 5.2 |
| G47 | Sleep disorders | 2,243 | 2.1 | 1.3 | 1.3 |
| M17 | Gonarthrosis [arthrosis of knee] | 2,101 | 1.9 | 7.8 | 7.6 |
| K40 | Inguinal hernia | 1,828 | 1.7 | 2.3 | 2.1 |
| Z48 | Other surgical follow-up care | 1,777 | 1.6 | 8.6 | 5.6 |
| N81 | Female genital prolapse | 1,510 | 1.4 | 4.5 | 4.5 |
| C34 | Malignant neoplasm of bronchus and lung | 1,478 | 1.4 | 11.1 | 7.3 |
| Z47 | Other orthopaedic follow-up care | 1,380 | 1.3 | 9.9 | 6.8 |
| C18 | Malignant neoplasm of colon | 1,007 | 0.9 | 10.2 | 8.8 |
| N92 | Excessive, frequent and irregular menstruation | 1,001 | 0.9 | 2.7 | 2.7 |
| C61 | Malignant neoplasm of prostate | 911 | 0.8 | 13.4 | 7.1 |
| C67 | Malignant neoplasm of bladder | 902 | 0.8 | 6.6 | 5.2 |
| I48 | Atrial fibrillation and flutter | 835 | 0.8 | 2.7 | 2.6 |
| N39 | Other disorders of urinary system | 829 | 0.8 | 3.1 | 2.9 |
| E11 | Type 2 diabetes mellitus | 825 | 0.8 | 7.6 | 4.2 |

| Admission Source | | | N | % |
|------------------------------|--|--|--------|------|
| Home | | | 98,361 | 90.4 |
| Long stay accommodation | | | 474 | 0.4 |
| Transfer from other hospital | | | 9,915 | 9.1 |
| New born | | | 18 | 0.0 |
| Other | | | 57 | 0.1 |

| Discharge Destination | | | N | % |
|----------------------------|--|--|---------|------|
| Home | | | 100,587 | 92.4 |
| Long stay accommodation | | | 3,086 | 2.8 |
| Transfer to other hospital | | | 3,531 | 3.2 |
| Died | | | 1,138 | 1.0 |
| Other | | | 483 | 0.4 |

| Elective In-Patients | | |
|----------------------|----------------|------------|
| 108,825 | | |
| Discharges | N | % |
| Total | 108,825 | 100 |
| Acute | 105,050 | 96.5 |
| Extended | 3,775 | 3.5 |
| Bed Days | N | % |
| Total | 732,501 | 100 |
| Acute | 507,874 | 69.3 |
| Extended | 224,627 | 30.7 |
| Length of Stay | Mean | |
| Total | 6.7 | |
| Acute | 4.8 | |
| Extended | 59.5 | |
| Sex | N | % |
| Male | 53,051 | 48.7 |
| Female | 55,774 | 51.3 |
| Age Group | N | % |
| < 1 Years | 1,808 | 1.7 |
| 1–14 Years | 10,545 | 9.7 |
| 15–24 Years | 5,526 | 5.1 |
| 25–34 Years | 7,528 | 6.9 |
| 35–44 Years | 10,823 | 9.9 |
| 45–54 Years | 14,687 | 13.5 |
| 55–64 Years | 19,438 | 17.9 |
| 65–74 Years | 20,244 | 18.6 |
| 75–84 Years | 14,444 | 13.3 |
| 85 Years and Over | 3,782 | 3.5 |

| Principal Procedure – Top 20 ^b | | N | % | Total Mean LOS ^c | Acute Mean LOS ^d |
|---|---|-------|-----|-----------------------------|-----------------------------|
| 1916 | Generalised allied health interventions | 8,456 | 8.7 | 17.7 | 10.7 |
| 0412 | Tonsillectomy or adenoidectomy | 4,044 | 4.2 | 1.5 | 1.5 |
| 1920 | Administration of pharmacotherapy | 3,760 | 3.9 | 6.4 | 5.2 |
| 1489 | Arthroplasty of hip | 3,108 | 3.2 | 8.8 | 8.4 |
| 0965 | Cholecystectomy | 3,063 | 3.1 | 2.9 | 2.8 |
| 1828 | Sleep study | 1,965 | 2.0 | 1.1 | 1.1 |
| 1518 | Arthroplasty of knee | 1,842 | 1.9 | 8.7 | 8.5 |
| 0990 | Repair of inguinal hernia | 1,743 | 1.8 | 2.2 | 2.1 |
| 1893 | Administration of blood and blood products | 1,644 | 1.7 | 5.2 | 3.8 |
| 1268 | Abdominal hysterectomy | 1,625 | 1.7 | 6.6 | 6.4 |
| 1788 | Megavoltage radiation treatment | 1,410 | 1.4 | 27.0 | 13.7 |
| 0671 | Transluminal coronary angioplasty with stenting | 1,352 | 1.4 | 1.8 | 1.8 |
| 1008 | Panendoscopy with excision | 1,133 | 1.2 | 6.3 | 4.9 |
| 1620 | Excision of lesion(s) of skin and subcutaneous tissue | 1,113 | 1.1 | 3.3 | 3.0 |
| 1744 | Excision of lesion of breast | 1,061 | 1.1 | 2.3 | 2.3 |
| 1269 | Vaginal hysterectomy | 959 | 1.0 | 5.0 | 4.9 |
| 0911 | Fibreoptic colonoscopy with excision | 956 | 1.0 | 5.6 | 4.4 |
| 0668 | Coronary angiography | 927 | 1.0 | 4.0 | 3.4 |
| 2015 | Magnetic resonance imaging | 902 | 0.9 | 8.4 | 6.0 |
| 0905 | Fibreoptic colonoscopy | 864 | 0.9 | 3.8 | 3.1 |

| AR-DRG – Top 10 | | N | % | Total Mean LOS ^c | Acute Mean LOS ^d |
|-----------------|--|-------|-----|-----------------------------|-----------------------------|
| D11Z | Tonsillectomy and/or Adenoidectomy | 4,077 | 3.7 | 1.5 | 1.5 |
| Z60B | Rehabilitation w/o Catastrophic CC | 3,284 | 3.0 | 22.8 | 13.3 |
| I03B | Hip Replacement w/o Catastrophic CC | 2,999 | 2.8 | 8.4 | 8.3 |
| H08B | Laparoscopic Cholecystectomy w/o Closed CDE w/o Cat or Sev CC | 2,646 | 2.4 | 2.3 | 2.3 |
| Z63B | Other Surgical Follow Up and Medical Care w/o Catastrophic CC | 2,330 | 2.1 | 8.1 | 6.5 |
| G10B | Hernia Procedures w/o CC | 2,274 | 2.1 | 2.2 | 2.2 |
| E63Z | Sleep Apnoea | 2,124 | 2.0 | 1.3 | 1.3 |
| J06Z | Major Procedures for Breast Conditions | 2,024 | 1.9 | 3.9 | 3.9 |
| N04B | Hysterectomy for Non- Malignancy w/o Catastrophic or Severe CC | 1,920 | 1.8 | 5.2 | 5.2 |
| I04B | Knee Replacement w/o Catastrophic or Severe CC | 1,634 | 1.5 | 8.2 | 8.1 |

Notes: Percentage columns are subject to rounding.

a ICD-10-AM diagnosis codes are analysed at three-digit level.

b ACHI Procedure codes are analysed at block level. % is based on in- patients with principal procedure reported.

c Includes mean length of stay for acute in-patients (length of stay of 30 days or less) and extended stay in-patients (length of stay greater than 30 days).

d Includes mean length of stay for acute in-patients only.

3.3.2.2 Emergency In-Patient Activity

An emergency in-patient admission is unforeseen and requires urgent care (Department of Health and Children, 2001).²⁰ Table 3.9 presents a summary of emergency in-patient activity reported to HIPE.

Emergency In-Patients – Profile

- Emergency in-patient discharges accounted for 27.2 per cent of total discharges (excl. *Maternity*) and 76.6 per cent of in-patients.
- Emergency in-patient discharges accounted for 77.4 per cent of in-patient bed days.
- Over 80 per cent of emergency in-patient discharges were admitted from an Emergency Department.

Emergency In-Patients – Top 20 Principal Diagnoses

- Emergency in-patient discharges with a principal diagnoses *pain in throat and chest* accounted for 4.3 per cent of emergency in-patients.
- Emergency in-patient discharges with a principal diagnosis of *abdominal and pelvic pain* and *other chronic obstructive pulmonary disease* both accounted for 2.9 per cent of emergency in-patients.

Emergency In-Patients – Top 20 Principal Procedures

- A principal procedure was recorded for 59.1 per cent of emergency in-patient discharges (see Table 3.4).
- *Generalised allied health interventions* were reported for 16.3 per cent of emergency in-patient discharges with a procedure recorded.
- *Computerised tomography of brain* was reported for 12.1 per cent of emergency in-patient discharges with a principal procedure recorded.

Emergency In-Patient – Top 10 AR-DRGs

- The top 3 AR-DRGs accounted for 9.3 per cent of emergency in-patient discharges reported to HIPE when analysed by case mix.²¹
- *Chest Pain* accounted for 4.1 per cent, *oesophagitis and gastroenteritis w/o cat/sev cc* accounted for 2.6 per cent and *abdominal pain or mesenteric adenitis* accounted for 2.6 per cent of emergency in-patient discharges.

²⁰ HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

²¹ See Section Five for details of the case mix classification.

TABLE 3.9 Emergency In-Patient Activity (N, %, and Length of Stay)

| Principal Diagnosis – Top 20 ^a | | N | % | Total ALOS ^c | Acute ALOS ^d |
|---|--|--------|-----|-------------------------|-------------------------|
| R07 | Pain in throat and chest | 15,343 | 4.3 | 2.3 | 2.3 |
| R10 | Abdominal and pelvic pain | 10,206 | 2.9 | 2.5 | 2.5 |
| J44 | Other chronic obstructive pulmonary disease | 10,172 | 2.9 | 9.3 | 7.2 |
| J22 | Unspecified acute lower respiratory infection | 9,108 | 2.6 | 7.1 | 5.6 |
| J18 | Pneumonia, organism unspecified | 8,346 | 2.3 | 11.2 | 7.5 |
| N39 | Other disorders of urinary system | 7,337 | 2.1 | 8.6 | 5.7 |
| R55 | Syncope and collapse | 6,443 | 1.8 | 5.8 | 4.3 |
| K35 | Acute appendicitis | 6,018 | 1.7 | 3.6 | 3.6 |
| S52 | Fracture of forearm | 5,948 | 1.7 | 2.2 | 1.9 |
| A09 | Other gastroenteritis and colitis of infectious and unspecified origin | 5,688 | 1.6 | 3.3 | 2.9 |
| I21 | Acute myocardial infarction | 5,463 | 1.5 | 8.3 | 6.3 |
| I50 | Heart failure | 5,389 | 1.5 | 12.3 | 8.7 |
| I48 | Atrial fibrillation and flutter | 5,204 | 1.5 | 5.8 | 4.8 |
| S82 | Fracture of lower leg, including ankle | 4,592 | 1.3 | 5.3 | 4.0 |
| L03 | Cellulitis | 4,514 | 1.3 | 6.9 | 5.8 |
| S72 | Fracture of femur | 4,259 | 1.2 | 18.2 | 11.2 |
| R51 | Headache | 4,254 | 1.2 | 2.5 | 2.4 |
| I63 | Cerebral infarction | 4,249 | 1.2 | 23.6 | 10.3 |
| I20 | Angina pectoris | 4,084 | 1.1 | 5.3 | 5.0 |
| R56 | Convulsions, not elsewhere classified | 3,572 | 1.0 | 3.8 | 3.1 |

| Emergency In-Patients | | |
|-----------------------|------------------|------------|
| 356,371 | | |
| Discharges | | |
| Total | 356,371 | 100 |
| Acute | 344,178 | 96.6 |
| Extended | 12,193 | 3.4 |
| Bed Days | | |
| Total | 2,504,015 | 100 |
| Acute | 1,686,122 | 67.3 |
| Extended | 817,893 | 32.7 |
| Length of Stay | | |
| Total | | 7.0 |
| Acute | | 4.9 |
| Extended | | 67.1 |

| Sex | | |
|--------|---------|------|
| Male | 186,006 | 52.2 |
| Female | 170,365 | 47.8 |

| Age Group | | |
|-------------------|--------|------|
| < 1 Years | 26,011 | 7.3 |
| 1–14 Years | 43,869 | 12.3 |
| 15–24 Years | 26,695 | 7.5 |
| 25–34 Years | 28,785 | 8.1 |
| 35–44 Years | 30,557 | 8.6 |
| 45–54 Years | 34,680 | 9.7 |
| 55–64 Years | 41,498 | 11.6 |
| 65–74 Years | 47,006 | 13.2 |
| 75–84 Years | 51,398 | 14.4 |
| 85 Years and Over | 25,872 | 7.3 |

| Admission Source | | N | % |
|------------------------------|--|---------|------|
| Home | | 323,581 | 90.8 |
| Long stay accommodation | | 8,082 | 2.3 |
| Transfer from other hospital | | 12,936 | 3.6 |
| New born | | 9,565 | 2.7 |
| Other | | 2,207 | 0.6 |

| Discharge Destination | | N | % |
|----------------------------|--|---------|------|
| Home | | 301,030 | 84.5 |
| Long stay accommodation | | 20,131 | 5.6 |
| Transfer to other hospital | | 19,976 | 5.6 |
| Died | | 9,932 | 2.8 |
| Other | | 5,302 | 1.5 |

| Mode of Emergency Admission | | N | % |
|-------------------------------------|--|---------|------|
| Emergency Department | | 285,668 | 80.2 |
| Medical assessment unit in-patient | | 10,625 | 3.0 |
| Medical assessment unit day Patient | | 11,758 | 3.3 |
| Other | | 47,899 | 13.4 |
| Unknown | | 421 | 0.1 |

| Principal Procedure – Top 20 ^b | | N | % | Total ALOS ^c | Acute ALOS ^d |
|---|--|--------|------|-------------------------|-------------------------|
| 1916 | Generalised allied health interventions | 34,263 | 16.3 | 10.2 | 7.4 |
| 1952 | Computerised tomography of brain | 25,389 | 12.1 | 10.4 | 5.8 |
| 1008 | Panendoscopy with excision | 7,380 | 3.5 | 10.7 | 7.3 |
| 1920 | Administration of pharmacotherapy | 6,762 | 3.2 | 7.4 | 5.6 |
| 0926 | Appendicectomy | 6,511 | 3.1 | 3.5 | 3.5 |
| 2015 | Magnetic resonance imaging | 6,326 | 3.0 | 12.1 | 7.4 |
| 1963 | Computerised tomography of abdomen and pelvis | 5,182 | 2.5 | 6.4 | 5.6 |
| 1893 | Administration of blood and blood products | 4,900 | 2.3 | 9.4 | 7.0 |
| 1966 | Other computerised tomography | 4,699 | 2.2 | 8.8 | 6.7 |
| 0668 | Coronary angiography | 3,938 | 1.9 | 7.0 | 6.1 |
| 0569 | Ventilatory support | 3,407 | 1.6 | 21.7 | 8.6 |
| 1427 | Closed reduction of fracture of radius | 3,344 | 1.6 | 1.8 | 1.6 |
| 1962 | Computerised tomography of abdomen | 3,184 | 1.5 | 6.8 | 5.5 |
| 0570 | Noninvasive ventilatory support | 2,981 | 1.4 | 16.3 | 10.0 |
| 0030 | Lumbar puncture | 2,679 | 1.3 | 7.6 | 5.5 |
| 1960 | Computerised tomography of chest | 2,610 | 1.2 | 10.0 | 7.6 |
| 1005 | Panendoscopy | 2,560 | 1.2 | 10.7 | 7.3 |
| 1539 | Open reduction of fracture of ankle or toe | 2,276 | 1.1 | 4.5 | 3.7 |
| 0911 | Fibreoptic colonoscopy with excision | 2,176 | 1.0 | 12.1 | 8.8 |
| 1961 | Computerised tomography of chest, abdomen and pelvis | 2,099 | 1.0 | 11.0 | 8.4 |

| AR-DRG – Top 10 | | N | % | Total ALOS ^c | Acute ALOS ^d |
|-----------------|---|--------|-----|-------------------------|-------------------------|
| F74Z | Chest Pain | 14,439 | 4.1 | 2.2 | 2.2 |
| G67B | Oesophagitis and Gastroenteritis W/O Cat/Sev CC | 9,228 | 2.6 | 2.3 | 2.2 |
| G66Z | Abdominal Pain or Mesenteric Adenitis | 9,225 | 2.6 | 2.2 | 2.2 |
| E65B | Chronic Obstructive Airways Disease W/O Catastrophic CC | 7,587 | 2.1 | 6.9 | 6.2 |
| G70B | Other Digestive System Diagnoses W/O Catastrophic or Severe CC | 7,371 | 2.1 | 3.4 | 3.2 |
| D63Z | Otitis Media and URI | 7,239 | 2.0 | 2.1 | 2.1 |
| B77Z | Headache | 6,211 | 1.7 | 2.5 | 2.4 |
| L63B | Kidney and Urinary Tract Infections W/O Catastrophic or Severe CC | 5,674 | 1.6 | 5.2 | 4.5 |
| F73B | Syncope and Collapse W/O Catastrophic or Severe CC | 5,333 | 1.5 | 3.6 | 3.3 |
| G07B | Appendicectomy W/O Malignancy or Peritonitis W/O Cat or Sev CC | 5,272 | 1.5 | 3.1 | 3.1 |

Notes: Percentage columns are subject to rounding. a ICD-10-AM diagnosis codes are analysed at three-digit level. b ACHI Procedure codes are analysed at block level. % is based on in-patients with principal procedure reported. c Includes mean length of stay for acute in-patients (length of stay of 30 days or less) and extended stay in-patients (length of stay greater than 30 days). d Includes mean length of stay for acute in-patients only.

3.4 MORBIDITY ANALYSIS: TOTAL DISCHARGE ACTIVITY (EXCL. MATERNITY)

The analysis presented in Section 3.4 is based on total discharges (excl. *Maternity*).²² Morbidity data are presented by chapter within the ICD-10-AM diagnosis coding scheme, with certain specific conditions within these chapters reported separately. Procedures are reported by block at chapter level with specific procedures reported separately. Discussion of morbidity analysis will be limited to chapter level. Diagnosis and Procedure tables are cross tabulated by sex and age group.

3.4.1 Total Discharges (excl. *Maternity*) Principal Diagnosis by Age and Sex

Table 3.10 presents the distribution of total discharges (excl. *Maternity*) by sex, age group and principal diagnosis.

- Over 31 per cent of total discharges (excl. *Maternity*) had a principal diagnosis of *factors influencing health status and contact with health services*; this includes persons encountering health services for examination and investigation or for specific procedures and health care (e.g., *chemotherapy, radiotherapy and dialysis*).
- The chapter *diseases of the digestive system* had the second highest number of principal diagnoses with over 9.9 per cent of total discharges (excl. *Maternity*).
- For discharges aged less than 15 years the most common principal diagnosis came from the chapter *diseases of the respiratory system* which accounted for 12.1 per cent of discharges within this age category.
- *Factors influencing health status and contact with health services* were the most common principal diagnosis for the remaining age categories.

3.4.2 Acute In-Patient Mean Length of Stay by Principal Diagnosis by Age Group and Sex

Table 3.11 presents the acute in-patient mean length of stay for principal diagnosis by sex and age group. The analysis presented here is limited to the mean length of stay for acute in-patient discharges, (excl. *Maternity*) with a length of stay of 30 days or less, and excluding day patients. It should also be noted that this analysis by mean length of stay does not take into account the status of the patient on discharge. For example, a patient with a length of stay of one day for a diagnosis of chronic ischaemic heart disease may in fact be transferred to another facility on discharge. Care must be taken, therefore, in interpreting the data on mean length of stay presented in Table 3.11, in the absence of information on discharge destination.²³

²² See Section Four for details of the diagnoses and procedures reported for *Maternity* discharges.

²³ See Section Two for details of discharge destination.

Discussion of acute in-patient mean length of stay is limited to ICD-10-AM chapter level.

- The longest acute in-patient mean length of stay (7.4 days) was recorded for acute in-patient discharges with principal diagnosis of *neoplasms*. When analysed by sex, male discharges reported 7.8 days and females 7.0 days.
- For discharges aged less than 15 years, those with a principal diagnosis of *certain conditions originating in the perinatal period* recorded an acute in-patient mean length of stay of 5.8 days.
- The longest acute in-patient mean length of stay for discharges aged 15–44 years and 45–64 years was reported for those with a principal diagnosis of *neoplasms*; 5.9 and 7.0 days respectively.
- The shortest acute in-patient mean length of stay (2.7 days) was recorded for acute in-patient discharges with a principal diagnoses from the chapter *diseases of the ear and mastoid process*. When analysed by sex, male discharges reported 2.5 days and female discharges 2.8 days.

3.4.3 All-Listed Diagnoses by Sex and Age Group

Table 3.12 provides details of all-listed diagnoses reported by sex and age group. Almost 3.5 million diagnoses were recorded for total discharges (excl. *Maternity*) reported to HIPE. As one principal diagnosis and up to nineteen secondary diagnoses may be collected per discharge, the number of diagnoses will not equal the number of discharges.

- The chapter *factors influencing health status and contact with health services* was the most frequently reported diagnosis across both sexes and all age groups for total discharges (excl. *Maternity*). It accounted for 780,457 diagnoses, or 22 per cent of all-listed diagnoses (excl. *Maternity*) reported.
- *Neoplasms* accounted for 467,262 diagnoses or 13.4 per cent of all-listed diagnoses reported for total discharges (excl. *Maternity*).
- For total discharges (excl. *Maternity*) aged less than 15 years and those aged 15–44 years, *external causes of morbidity and mortality* were recorded for 13.2 per cent 11.7 per cent of all-listed diagnoses reported, respectively.²⁴

²⁴ "The codes in this chapter allow the classification of environmental events and circumstances as the cause of injury, poisoning and other adverse effects. Where a code from this section is applicable, it is intended that it shall be used in addition to a code from another chapter of the Classification indicating the nature of the condition." Extracted from NCCH eBook, July 2008, External Causes.

TABLE 3.10 Total Discharges (excl. *Maternity*): Principal Diagnosis by Sex and Age Group (N)

| Principal Diagnosis | ICD-10-AM Code | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|----------------|---------------|----------------|----------------|----------------|----------------|----------------------------------|----------------|----------------|----------------|----------------|--|----------------|----------------|----------------|------------------|
| | | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total |
| Total Discharges (excl. <i>Maternity</i>) | – | 72,583 | 142,467 | 204,979 | 254,949 | 674,978 | 55,938 | 160,639 | 200,694 | 218,278 | 635,549 | 128,521 | 303,106 | 405,673 | 473,227 | 1,310,527 |
| Certain infectious and parasitic diseases | A00–B99 | 5,636 | 2,829 | 1,386 | 1,573 | 11,424 | 5,223 | 2,765 | 1,491 | 2,041 | 11,520 | 10,859 | 5,594 | 2,877 | 3,614 | 22,944 |
| Intestinal infectious diseases including diarrhoea | A00–A09 | 3,443 | 676 | 517 | 672 | 5,308 | 3,295 | 921 | 664 | 1,090 | 5,970 | 6,738 | 1,597 | 1,181 | 1,762 | 11,278 |
| Tuberculosis | A15–A19 | 9 | 167 | 49 | 45 | 270 | ~ | 94 | 38 | 36 | 172 | 13 | 261 | 87 | 81 | 442 |
| Septicaemia | A40–A41 | 93 | 88 | 185 | 511 | 877 | 48 | 65 | 185 | 479 | 777 | 141 | 153 | 370 | 990 | 1,654 |
| Human immunodeficiency virus [HIV] disease | B20–B24 | ~ | 96 | 31 | 0 | 132 | ~ | 73 | 8 | 0 | 84 | 8 | 169 | 39 | 0 | 216 |
| Neoplasms | C00–D48 | 2,938 | 7,853 | 18,497 | 26,861 | 56,149 | 2,492 | 14,341 | 20,268 | 21,403 | 58,504 | 5,430 | 22,194 | 38,765 | 48,264 | 114,653 |
| Malignant neoplasms | C00–C96 | 2,157 | 4,485 | 14,404 | 20,789 | 41,835 | 1,785 | 5,101 | 14,147 | 16,579 | 37,612 | 3,942 | 9,586 | 28,551 | 37,368 | 79,447 |
| Malignant neoplasm of colon, rectum and anus (primary) | C18–C21 | ~ | 195 | 1,957 | 2,738 | 4,894 | ~ | 239 | 1,078 | 1,651 | 2,969 | ~ | 434 | 3,035 | 4,389 | 7,863 |
| Malignant neoplasm of trachea, bronchus and lung (primary) | C33–C34 | 0 | 111 | 1,339 | 1,877 | 3,327 | 0 | 126 | 973 | 1,416 | 2,515 | 0 | 237 | 2,312 | 3,293 | 5,842 |
| Malignant neoplasm of skin (primary) | C43–C44 | ~ | 359 | 1,315 | 3,741 | 5,420 | ~ | 362 | 1,024 | 2,688 | 4,077 | 8 | 721 | 2,339 | 6,429 | 9,497 |
| Malignant neoplasm of breast (primary) | C50 | 0 | ~ | 11 | 26 | 40 | 0 | 1,100 | 4,134 | 2,234 | 7,468 | 0 | 1,103 | 4,145 | 2,260 | 7,508 |
| Malignant neoplasms of female genital organs (primary) | C51–C58 | 0 | 0 | 0 | 0 | 0 | 15 | 649 | 1,539 | 1,380 | 3,583 | 15 | 649 | 1,539 | 1,380 | 3,583 |
| Malignant neoplasm of prostate (primary) | C61 | 0 | 22 | 1,293 | 2,338 | 3,653 | 0 | 0 | 0 | 0 | 0 | 0 | 22 | 1,293 | 2,338 | 3,653 |
| Malignant neoplasm of bladder (primary) | C67 | 0 | 68 | 353 | 1,113 | 1,534 | 0 | 25 | 166 | 552 | 743 | 0 | 93 | 519 | 1,665 | 2,277 |
| Malignant neoplasms of lymphoid, haematopoietic and related tissue | C81–C96 | 1,216 | 2,132 | 4,041 | 4,223 | 11,612 | 1,100 | 1,477 | 2,454 | 3,354 | 8,385 | 2,316 | 3,609 | 6,495 | 7,577 | 19,997 |
| Benign neoplasms and neoplasms of uncertain or unknown behaviour | D10–D48 | 781 | 3,338 | 3,876 | 5,462 | 13,457 | 705 | 7,471 | 5,365 | 3,724 | 17,265 | 1,486 | 10,809 | 9,241 | 9,186 | 30,722 |
| Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism | D50–D89 | 1,969 | 1,857 | 1,897 | 3,040 | 8,763 | 1,384 | 2,513 | 2,590 | 3,531 | 10,018 | 3,353 | 4,370 | 4,487 | 6,571 | 18,781 |
| Endocrine, nutritional and metabolic diseases | E00–E89 | 1,692 | 7,333 | 12,002 | 6,805 | 27,832 | 1,191 | 3,444 | 5,382 | 4,900 | 14,917 | 2,883 | 10,777 | 17,384 | 11,705 | 42,749 |
| Diabetes mellitus | E10–E14 | 299 | 1,227 | 2,268 | 2,694 | 6,488 | 295 | 837 | 1,081 | 2,097 | 4,310 | 594 | 2,064 | 3,349 | 4,791 | 10,798 |
| Cystic fibrosis | E84 | 369 | 623 | 7 | 0 | 999 | 320 | 501 | 15 | 0 | 836 | 689 | 1,124 | 22 | 0 | 1,835 |
| Mental and behavioural disorders | F00–F99 | 412 | 1,404 | 1,203 | 584 | 3,603 | 245 | 879 | 647 | 699 | 2,470 | 657 | 2,283 | 1,850 | 1,283 | 6,073 |
| Mental and behavioural disorders due to alcohol | F10 | 39 | 792 | 924 | 187 | 1,942 | 51 | 280 | 309 | 76 | 716 | 90 | 1,072 | 1,233 | 263 | 2,658 |
| Mental and behavioural disorders due to use of other psychoactive substance | F11–F19 | ~ | 179 | 18 | ~ | 204 | ~ | 82 | 17 | 7 | 108 | ~ | 261 | 35 | 12 | 312 |
| Diseases of nervous system | G00–G99 | 1,447 | 3,600 | 4,208 | 3,335 | 12,590 | 1,152 | 5,813 | 4,281 | 3,536 | 14,782 | 2,599 | 9,413 | 8,489 | 6,871 | 27,372 |
| Multiple sclerosis | G35 | ~ | 915 | 515 | 34 | 1,465 | 0 | 2,421 | 978 | 44 | 3,443 | ~ | 3,336 | 1,493 | 78 | 4,908 |
| Epilepsy | G40, G41 | 620 | 732 | 442 | 277 | 2,071 | 563 | 664 | 297 | 302 | 1,826 | 1,183 | 1,396 | 739 | 579 | 3,897 |
| Transient cerebral ischaemic attacks and related syndromes | G45 | 0 | 68 | 455 | 965 | 1,488 | ~ | 73 | 327 | 1,188 | 1,592 | ~ | 141 | 782 | 2,153 | 3,080 |
| Diseases of the eye and adnexa | H00–H59 | 759 | 1,457 | 2,922 | 7,298 | 12,436 | 708 | 1,502 | 2,918 | 10,637 | 15,765 | 1,467 | 2,959 | 5,840 | 17,935 | 28,201 |
| Diseases of the ear and mastoid process | H60–H95 | 2,455 | 1,310 | 975 | 699 | 5,439 | 1,696 | 1,392 | 991 | 664 | 4,743 | 4,151 | 2,702 | 1,966 | 1,363 | 10,182 |
| Diseases of the circulatory system | I00–I99 | 583 | 5,533 | 16,346 | 21,378 | 43,840 | 450 | 4,811 | 8,301 | 17,354 | 30,916 | 1,033 | 10,344 | 24,647 | 38,732 | 74,756 |
| Hypertensive diseases | I10–I15 | 33 | 272 | 447 | 309 | 1,061 | 19 | 235 | 404 | 536 | 1,194 | 52 | 507 | 851 | 845 | 2,255 |
| Angina pectoris | I20 | 0 | 170 | 1,707 | 1,907 | 3,784 | 0 | 67 | 627 | 1,194 | 1,888 | 0 | 237 | 2,334 | 3,101 | 5,672 |
| Acute myocardial infarction | I21–I22 | 0 | 262 | 1,909 | 2,126 | 4,297 | 0 | 64 | 417 | 1,349 | 1,830 | 0 | 326 | 2,326 | 3,475 | 6,127 |
| Other ischaemic heart disease | I23–I25 | 0 | 310 | 3,425 | 3,525 | 7,260 | ~ | 77 | 1,059 | 1,827 | 2,964 | ~ | 387 | 4,484 | 5,352 | 10,224 |
| Pulmonary heart disease and diseases of pulmonary circulation | I26–I28 | ~ | 169 | 277 | 378 | 829 | 12 | 170 | 195 | 558 | 935 | 17 | 339 | 472 | 936 | 1,764 |
| Conduction disorders and cardiac arrhythmias | I44–I49 | 97 | 700 | 2,494 | 3,444 | 6,735 | 60 | 344 | 935 | 3,003 | 4,342 | 157 | 1,044 | 3,429 | 6,447 | 11,077 |
| Heart failure | I50 | 6 | 45 | 423 | 2,767 | 3,241 | 7 | 18 | 211 | 2,327 | 2,563 | 13 | 63 | 634 | 5,094 | 5,804 |
| Cerebrovascular disease | I60–I69 | 24 | 249 | 1,143 | 2,466 | 3,882 | 34 | 235 | 760 | 2,539 | 3,568 | 58 | 484 | 1,903 | 5,005 | 7,450 |
| Atherosclerosis (non-coronary) | I70 | 0 | 18 | 306 | 637 | 961 | ~ | 27 | 95 | 466 | 589 | ~ | 45 | 401 | 1,103 | 1,550 |
| Diseases of the respiratory system | J00–J99 | 8,803 | 5,464 | 6,075 | 12,899 | 33,241 | 6,741 | 6,026 | 6,049 | 12,190 | 31,006 | 15,544 | 11,490 | 12,124 | 25,089 | 64,247 |
| Acute upper respiratory infections and influenza | J00–J11 | 2,790 | 772 | 150 | 97 | 3,809 | 2,093 | 1,098 | 174 | 102 | 3,467 | 4,883 | 1,870 | 324 | 199 | 7,276 |
| Pneumonia | J12–J18 | 656 | 541 | 806 | 2,785 | 4,788 | 608 | 453 | 679 | 2,730 | 4,470 | 1,264 | 994 | 1,485 | 5,515 | 9,258 |
| Chronic diseases of tonsils and adenoids | J35 | 1,532 | 492 | 25 | 12 | 2,061 | 1,505 | 994 | 47 | 9 | 2,555 | 3,037 | 1,486 | 72 | 21 | 4,616 |

TABLE 3.10 Total Discharges (excl. *Maternity*): Principal Diagnosis by Sex and Age Group (N) (contd.)

| Principal Diagnosis | ICD-10-AM Code | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|-------------------------|--------------|---------------|---------------|----------------|----------------|----------------------------------|---------------|---------------|---------------|----------------|--|---------------|----------------|----------------|----------------|
| | | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total |
| Chronic obstructive pulmonary disease and bronchiectasis | J40–J44, J47 | 43 | 330 | 1,608 | 4,935 | 6,916 | 27 | 388 | 1,936 | 4,322 | 6,673 | 70 | 718 | 3,544 | 9,257 | 13,589 |
| Asthma | J45–J46 | 1,151 | 516 | 657 | 191 | 2,515 | 671 | 862 | 864 | 318 | 2,715 | 1,822 | 1,378 | 1,521 | 509 | 5,230 |
| Diseases of the digestive system | K00–K93 | 6,400 | 20,329 | 20,856 | 16,881 | 64,466 | 4,929 | 21,988 | 20,802 | 17,704 | 65,423 | 11,329 | 42,317 | 41,658 | 34,585 | 129,889 |
| Diseases of oesophagus, stomach and duodenum | K20–K31 | 719 | 5,887 | 6,837 | 4,932 | 18,375 | 591 | 5,634 | 6,904 | 5,257 | 18,386 | 1,310 | 11,521 | 13,741 | 10,189 | 36,761 |
| Diseases of appendix | K35–K38 | 1,099 | 2,069 | 309 | 102 | 3,579 | 891 | 1,856 | 279 | 87 | 3,113 | 1,990 | 3,925 | 588 | 189 | 6,692 |
| Inguinal hernia | K40 | 486 | 822 | 1,129 | 1,128 | 3,565 | 100 | 40 | 66 | 96 | 302 | 586 | 862 | 1,195 | 1,224 | 3,867 |
| Noninfective enteritis and colitis | K50–K52 | 221 | 3,229 | 1,542 | 725 | 5,717 | 205 | 3,327 | 1,652 | 932 | 6,116 | 426 | 6,556 | 3,194 | 1,657 | 11,833 |
| Alcoholic liver disease | K70 | 0 | 210 | 460 | 133 | 803 | 0 | 95 | 226 | 43 | 364 | 0 | 305 | 686 | 176 | 1,167 |
| Cholelithiasis | K80 | ~ | 431 | 847 | 1,132 | 2,412 | 21 | 2,331 | 1,543 | 1,420 | 5,315 | 23 | 2,762 | 2,390 | 2,552 | 7,727 |
| Diseases of the skin and subcutaneous tissue | L00–L99 | 1,390 | 13,010 | 8,255 | 6,155 | 28,810 | 1,178 | 11,233 | 7,178 | 6,441 | 26,030 | 2,568 | 24,243 | 15,433 | 12,596 | 54,840 |
| Cutaneous abscess, furuncle and carbuncle and cellulitis | L02–L03 | 355 | 1,131 | 968 | 936 | 3,390 | 280 | 631 | 601 | 1,136 | 2,648 | 635 | 1,762 | 1,569 | 2,072 | 6,038 |
| Diseases of the musculoskeletal system and connective tissue | M00–M99 | 1,469 | 8,005 | 9,740 | 6,986 | 26,200 | 1,473 | 7,644 | 12,940 | 11,477 | 33,534 | 2,942 | 15,649 | 22,680 | 18,463 | 59,734 |
| Rheumatoid arthritis | M05–M06 | ~ | 324 | 704 | 463 | 1,492 | ~ | 718 | 1,576 | 839 | 3,134 | ~ | 1,042 | 2,280 | 1,302 | 4,626 |
| Coxarthrosis and Gonarthrosis | M16–M17 | ~ | 276 | 1,380 | 1,923 | 3,581 | 0 | 198 | 1,615 | 2,711 | 4,524 | ~ | 474 | 2,995 | 4,634 | 8,105 |
| Intervertebral disc disorders | M50–M51 | ~ | 547 | 518 | 208 | 1,275 | ~ | 578 | 582 | 308 | 1,472 | 6 | 1,125 | 1,100 | 516 | 2,747 |
| Dorsalgia (back pain) | M54 | 55 | 1,448 | 1,821 | 937 | 4,261 | 53 | 2,055 | 2,756 | 1,993 | 6,857 | 108 | 3,503 | 4,577 | 2,930 | 11,118 |
| Diseases of the genitourinary system | N00–N99 | 4,444 | 4,766 | 5,732 | 7,953 | 22,895 | 2,646 | 18,315 | 13,274 | 7,441 | 41,676 | 7,090 | 23,081 | 19,006 | 15,394 | 64,571 |
| Chronic kidney disease | N18 | 201 | 345 | 366 | 577 | 1,489 | 148 | 202 | 246 | 365 | 961 | 349 | 547 | 612 | 942 | 2,450 |
| Urolithiasis | N20–N23 | 63 | 1,508 | 1,353 | 475 | 3,399 | 35 | 693 | 680 | 185 | 1,593 | 98 | 2,201 | 2,033 | 660 | 4,992 |
| Hyperplasia of prostate | N40 | 0 | 82 | 1,279 | 2,589 | 3,950 | 0 | 0 | 0 | 0 | 0 | 0 | 82 | 1,279 | 2,589 | 3,950 |
| Disorders of breast | N60–N64 | 8 | 104 | 45 | 35 | 192 | 10 | 1,116 | 914 | 219 | 2,259 | 18 | 1,220 | 959 | 254 | 2,451 |
| Inflammatory diseases of female pelvic organs | N70–N77 | 0 | 0 | 0 | 0 | 0 | 28 | 1,026 | 313 | 65 | 1,432 | 28 | 1,026 | 313 | 65 | 1,432 |
| Noninflammatory disorders of female genital tract | N80–N98 | 0 | 0 | 0 | 0 | 0 | 182 | 12,486 | 8,142 | 1,777 | 22,587 | 182 | 12,486 | 8,142 | 1,777 | 22,587 |
| Pregnancy, childbirth and the puerperium^a | O00–O99 | 0 | 0 | 0 | 0 | 0 | ~ | 229 | ~ | 0 | 231 | ~ | 229 | ~ | 0 | 231 |
| Pregnancy with abortive outcome | O00–O08 | 0 | 0 | 0 | 0 | 0 | 0 | 16 | 0 | 0 | 16 | 0 | 16 | 0 | 0 | 16 |
| Certain conditions originating in the perinatal period | P00–P96 | 5,576 | 0 | 0 | 0 | 5,576 | 4,167 | 0 | ~ | 0 | 4,168 | 9,743 | 0 | ~ | 0 | 9,744 |
| Congenital malformations, deformations and chromosomal abnormalities | Q00–Q99 | 5,415 | 513 | 162 | 86 | 6,176 | 3,697 | 753 | 219 | 93 | 4,762 | 9,112 | 1,266 | 381 | 179 | 10,938 |
| Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified | R00–R99 | 5,458 | 12,663 | 14,803 | 14,529 | 47,453 | 4,906 | 18,199 | 15,569 | 14,638 | 53,312 | 10,364 | 30,862 | 30,372 | 29,167 | 100,765 |
| Abdominal and pelvic pain | R10 | 988 | 2,428 | 1,694 | 960 | 6,070 | 1,195 | 6,486 | 2,745 | 1,378 | 11,804 | 2,183 | 8,914 | 4,439 | 2,338 | 17,874 |
| Injury, poisoning and certain other consequences of external causes | S00–T98 | 7,488 | 15,377 | 6,271 | 5,558 | 34,694 | 4,941 | 6,793 | 5,409 | 8,213 | 25,356 | 12,429 | 22,170 | 11,680 | 13,771 | 60,050 |
| Intracranial injury | S06 | 202 | 799 | 359 | 390 | 1,750 | 109 | 240 | 158 | 275 | 782 | 311 | 1,039 | 517 | 665 | 2,532 |
| Other injuries to the head (including skull fracture) | S00–S05, S07–S09 | 2,289 | 3,102 | 611 | 560 | 6,562 | 1,467 | 689 | 324 | 580 | 3,060 | 3,756 | 3,791 | 935 | 1,140 | 9,622 |
| Fracture of femur | S72 | 136 | 119 | 254 | 982 | 1,491 | 59 | 50 | 255 | 2,453 | 2,817 | 195 | 169 | 509 | 3,435 | 4,308 |
| Poisonings by drugs, medicaments and biological substances and toxic effects of substances chiefly nonmedicinal as to source | T36–T65 | 225 | 1,290 | 387 | 117 | 2,019 | 258 | 1,397 | 509 | 120 | 2,284 | 483 | 2,687 | 896 | 237 | 4,303 |
| Factors influencing health status and contact with health services^b | U00–U49, Z00–Z99 | 8,249 | 29,164 | 73,649 | 112,329 | 223,391 | 6,718 | 31,999 | 72,383 | 75,316 | 186,416 | 14,967 | 61,163 | 146,032 | 187,645 | 409,807 |
| Other medical care (including radiotherapy and chemotherapy sessions) | Z51 | 3,153 | 5,700 | 31,970 | 46,469 | 87,292 | 2,628 | 13,839 | 45,114 | 29,289 | 90,870 | 5,781 | 19,539 | 77,084 | 75,758 | 178,162 |

Notes: ~ Denotes five or less discharges reported to HIPE.

a Discharges reported within this chapter were not assigned admission type of *Maternity*. Their admission was for reasons other than their obstetric condition, but they received obstetric care during this episode of care. See Section Four for details of morbidity analysis for *Maternity* discharges.

b This category includes discharges in the code range U00–U49 'codes for special purposes'.

TABLE 3.11 Acute In-Patient Discharges (excl. *Maternity*): Mean Length of Stay (Days) by Principal Diagnosis, Sex and Age Group^a

| Principal Diagnosis | ICD-10-AM Code | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|----------------|------------|------------|------------|------------|------------|----------------------------------|------------|------------|------------|------------|--|------------|------------|------------|------------|
| | | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total |
| Acute In-Patient Discharges | - | 2.8 | 3.4 | 4.9 | 7.0 | 4.8 | 2.9 | 3.3 | 4.8 | 7.3 | 5.0 | 2.8 | 3.3 | 4.8 | 7.1 | 4.9 |
| Certain infectious and parasitic diseases | A00-B99 | 2.0 | 4.9 | 6.3 | 8.1 | 3.7 | 2.0 | 4.3 | 5.9 | 8.0 | 3.8 | 2.0 | 4.6 | 6.1 | 8.1 | 3.8 |
| Intestinal infectious diseases including diarrhoea | A00-A09 | 1.8 | 3.5 | 4.4 | 6.4 | 2.6 | 1.8 | 3.2 | 5.1 | 7.0 | 3.1 | 1.8 | 3.4 | 4.8 | 6.8 | 2.9 |
| Tuberculosis | A15-A19 | 10.0 | 9.8 | 11.4 | 13.5 | 10.7 | ~ | 10.7 | 10.9 | 13.5 | 11.0 | 7.5 | 10.1 | 11.2 | 13.5 | 10.8 |
| Septicaemia | A40-A41 | 5.7 | 9.3 | 9.1 | 10.0 | 9.4 | 4.5 | 7.8 | 8.7 | 10.0 | 9.1 | 5.2 | 8.7 | 8.9 | 10.0 | 9.3 |
| Human immunodeficiency virus [HIV] disease | B20-B24 | ~ | 10.7 | 13.8 | - | 11.5 | ~ | 12.8 | ~ | - | 12.3 | ~ | 11.5 | 12.9 | - | 11.8 |
| Neoplasms | C00-D48 | 3.6 | 6.7 | 7.6 | 8.6 | 7.8 | 3.8 | 5.5 | 6.6 | 8.5 | 7.0 | 3.7 | 5.9 | 7.0 | 8.5 | 7.4 |
| Malignant neoplasms | C00-C96 | 3.7 | 7.1 | 7.8 | 8.9 | 8.1 | 3.9 | 6.5 | 7.0 | 8.8 | 7.6 | 3.8 | 6.7 | 7.4 | 8.9 | 7.9 |
| Malignant neoplasm of colon, rectum and anus (primary) | C18-C21 | ~ | 8.4 | 8.9 | 10.6 | 9.9 | ~ | 7.0 | 8.5 | 11.1 | 10.0 | ~ | 7.7 | 8.8 | 10.8 | 9.9 |
| Malignant neoplasm of trachea, bronchus and lung (primary) | C33-C34 | - | 7.2 | 7.3 | 9.5 | 8.6 | - | 7.2 | 7.6 | 9.3 | 8.6 | - | 7.2 | 7.4 | 9.4 | 8.6 |
| Malignant neoplasm of skin (primary) | C43-C44 | ~ | 5.2 | 5.3 | 4.7 | 4.9 | - | 4.0 | 4.0 | 5.6 | 5.1 | ~ | 4.7 | 4.7 | 5.1 | 5.0 |
| Malignant neoplasm of breast (primary) | C50 | - | - | 3.7 | 5.5 | 5.0 | - | 5.0 | 5.2 | 6.5 | 5.6 | - | 5.0 | 5.2 | 6.5 | 5.6 |
| Malignant neoplasms of female genital organs (primary) | C51-C58 | - | - | - | - | - | ~ | 6.1 | 6.8 | 8.4 | 7.3 | ~ | 6.1 | 6.8 | 8.4 | 7.3 |
| Malignant neoplasm of prostate (primary) | C61 | - | 8.8 | 7.1 | 8.2 | 7.8 | - | - | - | - | - | - | 8.8 | 7.1 | 8.2 | 7.8 |
| Malignant neoplasm of bladder (primary) | C67 | - | 4.8 | 5.9 | 6.4 | 6.2 | - | 9.1 | 6.2 | 6.7 | 6.7 | - | 5.7 | 6.0 | 6.5 | 6.4 |
| Malignant neoplasms of lymphoid, haematopoietic and related tissue | C81-C96 | 3.7 | 8.8 | 9.1 | 9.1 | 8.2 | 4.0 | 9.1 | 8.5 | 8.7 | 7.9 | 3.8 | 8.9 | 8.8 | 8.9 | 8.0 |
| Benign neoplasms and neoplasms of uncertain or unknown behaviour | D10-D48 | 3.3 | 4.6 | 5.4 | 5.8 | 5.2 | 3.4 | 4.0 | 5.2 | 6.0 | 4.9 | 3.3 | 4.1 | 5.2 | 5.9 | 5.0 |
| Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism | D50-D89 | 3.1 | 4.6 | 5.3 | 6.0 | 4.9 | 2.8 | 4.4 | 5.3 | 5.9 | 5.0 | 3.0 | 4.5 | 5.3 | 5.9 | 4.9 |
| Endocrine, nutritional and metabolic diseases | E00-E89 | 4.2 | 5.7 | 5.6 | 6.9 | 5.9 | 4.2 | 5.0 | 4.9 | 6.9 | 5.6 | 4.2 | 5.4 | 5.3 | 6.9 | 5.7 |
| Diabetes mellitus | E10-E14 | 3.9 | 3.4 | 5.8 | 7.3 | 5.6 | 3.5 | 3.8 | 5.6 | 7.1 | 5.5 | 3.7 | 3.6 | 5.8 | 7.2 | 5.6 |
| Cystic fibrosis | E84 | 7.4 | 12.1 | ~ | - | 10.8 | 7.8 | 11.8 | 12.2 | - | 10.3 | 7.6 | 12.0 | 13.0 | - | 10.6 |
| Mental and behavioural disorders | F00-F99 | 2.1 | 3.8 | 4.2 | 8.2 | 4.5 | 2.5 | 4.5 | 4.6 | 8.9 | 5.3 | 2.3 | 4.1 | 4.4 | 8.5 | 4.8 |
| Mental and behavioural disorders due to alcohol | F10 | 1.1 | 2.9 | 4.0 | 6.4 | 3.7 | 1.1 | 2.7 | 4.2 | 6.2 | 3.6 | 1.1 | 2.8 | 4.1 | 6.4 | 3.7 |
| Mental and behavioural disorders due to use of other psychoactive substance | F11-F19 | ~ | 8.0 | 8.7 | ~ | 7.9 | ~ | 9.6 | 10.8 | 11.0 | 9.8 | ~ | 8.5 | 9.7 | 7.9 | 8.5 |
| Diseases of nervous system | G00-G99 | 3.2 | 3.3 | 3.9 | 6.2 | 4.3 | 3.3 | 3.7 | 4.4 | 6.4 | 4.7 | 3.2 | 3.5 | 4.1 | 6.3 | 4.5 |
| Multiple sclerosis | G35 | ~ | 4.8 | 6.0 | 11.0 | 5.7 | - | 5.1 | 6.9 | 8.4 | 5.8 | ~ | 5.0 | 6.5 | 9.5 | 5.8 |
| Epilepsy | G40, G41 | 3.4 | 3.3 | 4.4 | 6.2 | 4.0 | 3.1 | 3.7 | 5.0 | 6.6 | 4.3 | 3.2 | 3.5 | 4.6 | 6.4 | 4.1 |
| Transient cerebral ischaemic attacks and related syndromes | G45 | - | 3.9 | 4.2 | 5.4 | 5.0 | ~ | 3.7 | 4.1 | 5.5 | 5.1 | ~ | 3.8 | 4.2 | 5.5 | 5.1 |
| Diseases of the eye and adnexa | H00-H59 | 2.3 | 3.0 | 3.5 | 3.6 | 3.3 | 2.0 | 3.0 | 3.4 | 3.4 | 3.1 | 2.2 | 3.0 | 3.4 | 3.5 | 3.2 |
| Diseases of the ear and mastoid process | H60-H95 | 1.9 | 2.4 | 3.1 | 4.5 | 2.5 | 2.0 | 2.7 | 3.3 | 3.6 | 2.8 | 1.9 | 2.6 | 3.2 | 4.0 | 2.7 |
| Diseases of the circulatory system | I00-I99 | 3.1 | 4.4 | 5.1 | 6.9 | 6.0 | 3.3 | 4.2 | 5.3 | 7.4 | 6.6 | 3.2 | 4.3 | 5.1 | 7.2 | 6.2 |
| Hypertensive diseases | I10-I15 | 3.3 | 3.2 | 3.3 | 4.8 | 3.7 | 3.9 | 2.7 | 3.1 | 3.9 | 3.4 | 3.5 | 3.0 | 3.2 | 4.2 | 3.5 |
| Angina pectoris | I20 | - | 3.1 | 4.2 | 5.4 | 4.8 | - | 2.9 | 4.0 | 5.3 | 4.8 | - | 3.1 | 4.1 | 5.4 | 4.8 |
| Acute myocardial infarction | I21-I22 | - | 4.0 | 4.8 | 6.8 | 5.8 | - | 4.5 | 5.1 | 7.6 | 6.9 | - | 4.1 | 4.9 | 7.1 | 6.1 |
| Other ischaemic heart disease | I23-I25 | - | 3.3 | 4.0 | 5.2 | 4.6 | ~ | 4.3 | 4.6 | 5.1 | 4.9 | ~ | 3.5 | 4.1 | 5.2 | 4.7 |
| Pulmonary heart disease and diseases of pulmonary circulation | I26-I28 | ~ | 7.0 | 7.2 | 9.1 | 8.0 | 6.0 | 6.2 | 7.9 | 10.1 | 8.9 | 5.3 | 6.6 | 7.5 | 9.7 | 8.5 |
| Conduction disorders and cardiac arrhythmias | I44-I49 | 2.9 | 2.9 | 3.9 | 4.9 | 4.3 | 2.8 | 2.7 | 4.0 | 5.6 | 5.0 | 2.9 | 2.8 | 3.9 | 5.2 | 4.6 |
| Heart failure | I50 | ~ | 7.4 | 7.7 | 8.8 | 8.7 | 7.0 | 4.4 | 7.1 | 9.0 | 8.8 | 8.1 | 6.6 | 7.5 | 8.9 | 8.7 |
| Cerebrovascular disease | I60-I69 | 8.2 | 7.6 | 8.6 | 9.5 | 9.1 | 8.9 | 7.1 | 8.6 | 10.2 | 9.6 | 8.6 | 7.4 | 8.6 | 9.8 | 9.3 |
| Atherosclerosis (non-coronary) | I70 | - | 9.9 | 6.9 | 8.7 | 8.1 | - | 8.0 | 6.8 | 9.3 | 8.9 | - | 9.2 | 6.9 | 8.9 | 8.4 |
| Diseases of the respiratory system | J00-J99 | 2.3 | 3.6 | 5.8 | 7.9 | 5.3 | 2.4 | 3.1 | 5.7 | 8.0 | 5.3 | 2.3 | 3.3 | 5.8 | 7.9 | 5.3 |
| Acute upper respiratory infections and influenza | J00-J11 | 1.8 | 2.4 | 3.3 | 4.1 | 2.0 | 1.8 | 2.3 | 2.8 | 5.7 | 2.1 | 1.8 | 2.4 | 3.1 | 5.0 | 2.1 |
| Pneumonia | J12-J18 | 4.1 | 5.9 | 7.2 | 9.0 | 7.6 | 4.2 | 5.6 | 7.3 | 9.0 | 7.7 | 4.1 | 5.8 | 7.3 | 9.0 | 7.7 |
| Chronic diseases of tonsils and adenoids | J35 | 1.4 | 1.7 | 2.1 | 1.6 | 1.5 | 1.4 | 1.7 | 1.6 | ~ | 1.5 | 1.4 | 1.7 | 1.8 | 2.9 | 1.5 |
| Chronic obstructive pulmonary disease and bronchiectasis | J40-J44, J47 | 3.9 | 4.9 | 6.0 | 7.5 | 7.1 | 2.9 | 4.2 | 6.3 | 7.9 | 7.3 | 3.6 | 4.5 | 6.2 | 7.7 | 7.2 |
| Asthma | J45-J46 | 1.9 | 3.2 | 3.9 | 5.6 | 2.5 | 2.0 | 3.6 | 4.5 | 5.2 | 3.4 | 1.9 | 3.4 | 4.3 | 5.3 | 3.0 |
| Diseases of the digestive system | K00-K93 | 2.9 | 4.0 | 5.1 | 6.2 | 4.8 | 3.0 | 3.9 | 5.2 | 6.7 | 5.0 | 3.0 | 3.9 | 5.1 | 6.5 | 4.9 |
| Diseases of oesophagus, stomach and duodenum | K20-K31 | 2.6 | 3.0 | 4.3 | 5.7 | 4.2 | 2.3 | 3.0 | 4.5 | 6.2 | 4.5 | 2.4 | 3.0 | 4.4 | 6.0 | 4.3 |
| Diseases of appendix | K35-K38 | 3.4 | 3.2 | 4.6 | 7.9 | 3.5 | 3.5 | 3.2 | 5.6 | 7.2 | 3.6 | 3.5 | 3.2 | 5.1 | 7.6 | 3.6 |

TABLE 3.11 Acute In-Patient Discharges (excl. *Maternity*): Mean Length of Stay (Days) by Principal Diagnosis, Sex and Age Group^a (contd.)

| Principal Diagnosis | ICD-10-AM Code | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|-------------------------|------------|------------|------------|------------|------------|----------------------------------|------------|------------|-------------|------------|--|------------|------------|------------|------------|
| | | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total |
| Inguinal hernia | K40 | 2.0 | 1.7 | 2.0 | 3.0 | 2.4 | 2.0 | 2.4 | 3.7 | 3.7 | 3.3 | 2.0 | 1.7 | 2.1 | 3.1 | 2.5 |
| Noninfective enteritis and colitis | K50-K52 | 3.2 | 7.0 | 7.1 | 7.2 | 6.7 | 3.9 | 6.3 | 6.4 | 7.8 | 6.5 | 3.6 | 6.6 | 6.7 | 7.6 | 6.6 |
| Alcoholic liver disease | K70 | - | 8.1 | 8.9 | 9.1 | 8.7 | - | 9.7 | 10.7 | 10.9 | 10.4 | - | 8.6 | 9.5 | 9.6 | 9.2 |
| Cholelithiasis | K80 | ~ | 4.0 | 4.6 | 6.5 | 5.3 | 5.4 | 3.2 | 3.8 | 6.4 | 4.2 | 5.1 | 3.3 | 4.1 | 6.5 | 4.6 |
| Diseases of the skin and subcutaneous tissue | L00-L99 | 2.9 | 3.4 | 5.6 | 7.4 | 4.8 | 2.9 | 3.4 | 5.4 | 7.7 | 5.2 | 2.9 | 3.4 | 5.5 | 7.5 | 5.0 |
| Cutaneous abscess, furuncle and carbuncle and cellulitis | L02-L03 | 3.1 | 4.0 | 5.7 | 7.4 | 5.3 | 3.0 | 3.8 | 5.5 | 7.7 | 5.8 | 3.0 | 3.9 | 5.6 | 7.5 | 5.5 |
| Diseases of the musculoskeletal system and connective tissue | M00-M99 | 2.9 | 3.0 | 4.7 | 7.0 | 4.9 | 3.6 | 3.3 | 4.6 | 7.1 | 5.4 | 3.2 | 3.2 | 4.7 | 7.0 | 5.1 |
| Rheumatoid arthritis | M05-M06 | - | 8.3 | 5.1 | 7.6 | 6.6 | - | 3.0 | 4.2 | 6.4 | 4.9 | - | 4.7 | 4.5 | 6.8 | 5.5 |
| Coxarthrosis and Gonarthrosis | M16-M17 | ~ | 5.8 | 6.7 | 8.4 | 7.7 | - | 5.3 | 7.1 | 8.7 | 8.1 | ~ | 5.6 | 6.9 | 8.6 | 7.9 |
| Intervertebral disc disorders | M50-M51 | ~ | 3.5 | 4.3 | 6.8 | 4.3 | ~ | 3.7 | 4.8 | 7.1 | 4.7 | ~ | 3.6 | 4.5 | 7.0 | 4.5 |
| Dorsalgia (back pain) | M54 | 1.9 | 2.9 | 4.2 | 5.5 | 3.9 | 2.4 | 3.4 | 3.8 | 6.1 | 4.3 | 2.1 | 3.2 | 3.9 | 5.9 | 4.1 |
| Diseases of the genitourinary system | N00-N99 | 2.5 | 3.1 | 4.5 | 6.7 | 4.7 | 2.9 | 2.9 | 4.0 | 6.8 | 4.2 | 2.7 | 2.9 | 4.1 | 6.8 | 4.4 |
| Chronic kidney disease | N18 | 3.3 | 5.7 | 7.2 | 6.6 | 6.1 | 3.6 | 6.6 | 6.2 | 7.6 | 6.5 | 3.4 | 6.1 | 6.8 | 7.0 | 6.3 |
| Urolithiasis | N20-N23 | 2.9 | 2.5 | 2.8 | 4.2 | 2.9 | 3.3 | 2.9 | 3.8 | 5.7 | 3.5 | 3.1 | 2.6 | 3.1 | 4.6 | 3.1 |
| Hyperplasia of prostate | N40 | - | - | 4.9 | 5.6 | 5.4 | - | - | - | - | - | - | - | 4.9 | 5.6 | 5.4 |
| Disorders of breast | N60-N64 | ~ | 2.1 | 3.7 | ~ | 2.4 | 2.9 | 2.6 | 2.8 | 5.8 | 3.0 | 2.8 | 2.6 | 2.9 | 5.4 | 3.0 |
| Inflammatory diseases of female pelvic organs | N70-N77 | - | - | - | - | - | 3.0 | 2.7 | 3.7 | 4.7 | 3.0 | 3.0 | 2.7 | 3.7 | 4.7 | 3.0 |
| Noninflammatory disorders of female genital tract | N80-N98 | - | - | - | - | - | 2.1 | 2.5 | 3.4 | 4.2 | 3.1 | 2.1 | 2.5 | 3.4 | 4.2 | 3.1 |
| Pregnancy, childbirth and the puerperium^b | O00-O99 | - | - | - | - | - | ~ | 3.0 | ~ | - | 3.0 | ~ | 3.0 | ~ | - | 3.0 |
| Pregnancy with abortive outcome | O00-O08 | - | - | - | - | - | - | 3.4 | - | - | 3.4 | - | 3.4 | - | - | 3.4 |
| Certain conditions originating in the perinatal period | P00-P96 | 5.7 | - | - | - | 5.7 | 6.0 | - | ~ | - | 6.0 | 5.8 | - | ~ | - | 5.8 |
| Congenital malformations, deformations and chromosomal abnormalities | Q00-Q99 | 4.4 | 3.8 | 5.1 | 7.1 | 4.4 | 4.7 | 4.2 | 5.1 | 6.7 | 4.7 | 4.5 | 4.0 | 5.1 | 6.9 | 4.5 |
| Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified | R00-R99 | 1.9 | 2.2 | 2.9 | 4.8 | 3.1 | 2.2 | 2.3 | 3.0 | 4.9 | 3.2 | 2.0 | 2.2 | 2.9 | 4.8 | 3.2 |
| Abdominal and pelvic pain | R10 | 1.6 | 2.3 | 2.8 | 4.0 | 2.5 | 1.8 | 2.2 | 3.0 | 4.2 | 2.5 | 1.7 | 2.2 | 2.9 | 4.1 | 2.5 |
| Injury, poisoning and certain other consequences of external causes | S00-T98 | 1.6 | 2.6 | 4.3 | 7.5 | 3.5 | 1.7 | 2.7 | 3.9 | 8.1 | 4.5 | 1.6 | 2.6 | 4.1 | 7.9 | 3.9 |
| Intracranial injury | S06 | 1.8 | 3.4 | 5.2 | 7.4 | 4.4 | 1.9 | 3.3 | 4.3 | 8.0 | 4.8 | 1.8 | 3.4 | 4.9 | 7.6 | 4.6 |
| Other injuries to the head (including skull fracture) | S00-S05, S07-S09 | 1.2 | 2.0 | 2.7 | 4.5 | 2.0 | 1.3 | 1.7 | 2.4 | 5.5 | 2.3 | 1.2 | 2.0 | 2.6 | 5.0 | 2.1 |
| Fracture of femur | S72 | 5.1 | 6.4 | 8.6 | 12.4 | 10.5 | 5.8 | 7.9 | 8.8 | 12.2 | 11.6 | 5.3 | 6.8 | 8.7 | 12.3 | 11.2 |
| Poisonings by drugs, medicaments and biological substances and toxic effects of substances chiefly nonmedicinal as to source | T36-T65 | 1.3 | 2.1 | 3.0 | 5.0 | 2.4 | 1.5 | 2.0 | 2.9 | 5.8 | 2.4 | 1.4 | 2.1 | 2.9 | 5.4 | 2.4 |
| Factors influencing health status and contact with health services^c | U00-U49, Z00-Z99 | 2.0 | 4.8 | 5.9 | 8.2 | 5.5 | 2.2 | 3.8 | 7.0 | 11.0 | 7.0 | 2.1 | 4.2 | 6.4 | 9.7 | 6.3 |
| Other medical care (including radiotherapy and chemotherapy sessions) | Z51 | 5.6 | 3.1 | 2.9 | 3.7 | 3.5 | 5.4 | 2.4 | 2.5 | 3.8 | 3.6 | 5.5 | 2.8 | 2.7 | 3.7 | 3.6 |

Notes: ~ Denotes five or less discharges reported to HIPE.

- Mean length of stay cannot be calculated as no acute in-patients (length of stay of 30 days or less) reported.

a Includes mean length of stay for acute in-patients (length of stay of 30 days or less) only. Excludes extended stay in-patients and day patients.

b Discharges reported within this chapter were not assigned admission type of *Maternity*. Their admission was for reasons other than their obstetric condition, but they received obstetric care during this episode of care. See Section Four for details of morbidity analysis for *Maternity* discharges.

c This category includes discharges in the code range U00-U49 'codes for special purposes'.

TABLE 3.12 Total Discharges (excl. *Maternity*): All-Listed Diagnoses by Sex and Age Group (N)

| Diagnosis | ICD-10-AM Code | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|----------------|---------------|----------------|----------------|----------------|----------------|----------------------------------|----------------|----------------|----------------|----------------|--|----------------|----------------|----------------|------------------|
| | | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total |
| Total Discharges (excl. <i>Maternity</i>) | | 72,583 | 142,467 | 204,979 | 254,949 | 674,978 | 55,938 | 160,639 | 200,694 | 218,278 | 635,549 | 128,521 | 303,106 | 405,673 | 473,227 | 1,310,527 |
| All Conditions | - | 171,902 | 331,921 | 534,781 | 783,920 | 1,822,524 | 132,611 | 331,684 | 500,368 | 694,694 | 1,659,357 | 304,513 | 663,605 | 1,035,149 | 1,478,614 | 3,481,881 |
| Certain infectious and parasitic diseases | A00-B99 | 8,948 | 8,357 | 7,495 | 10,767 | 35,567 | 8,258 | 7,929 | 6,689 | 13,633 | 36,509 | 17,206 | 16,286 | 14,184 | 24,400 | 72,076 |
| Intestinal infectious diseases including diarrhoea | A00-A09 | 4,084 | 1,185 | 1,192 | 1,977 | 8,438 | 3,816 | 1,557 | 1,335 | 2,913 | 9,621 | 7,900 | 2,742 | 2,527 | 4,890 | 18,059 |
| Tuberculosis | A15-A19 | 12 | 219 | 84 | 85 | 400 | ~ | 125 | 61 | 66 | 257 | 17 | 344 | 145 | 151 | 657 |
| Septicaemia | A40-A41 | 187 | 434 | 945 | 2,277 | 3,843 | 119 | 344 | 742 | 1,980 | 3,185 | 306 | 778 | 1,687 | 4,257 | 7,028 |
| Human immunodeficiency virus [HIV] disease | B20-B24 | 20 | 320 | 135 | 8 | 483 | 0 | ~ | 207 | 34 | 244 | 20 | 323 | 342 | 42 | 727 |
| Neoplasms | C00-D48 | 7,365 | 18,747 | 78,592 | 111,903 | 216,607 | 6,036 | 43,027 | 114,265 | 87,327 | 250,655 | 13,401 | 61,774 | 192,857 | 199,230 | 467,262 |
| Malignant neoplasms | C00-C96 | 6,349 | 14,445 | 72,912 | 102,354 | 196,060 | 5,060 | 31,162 | 102,928 | 79,556 | 218,706 | 11,409 | 45,607 | 175,840 | 181,910 | 414,766 |
| Malignant neoplasm of colon, rectum and anus (primary) | C18-C21 | ~ | 875 | 9,425 | 12,155 | 22,459 | ~ | 1,143 | 5,117 | 5,937 | 12,199 | 6 | 2,018 | 14,542 | 18,092 | 34,658 |
| Malignant neoplasm of trachea, bronchus and lung (primary) | C33-C34 | 0 | 274 | 4,667 | 5,843 | 10,784 | 0 | 364 | 3,619 | 4,732 | 8,715 | 0 | 638 | 8,286 | 10,575 | 19,499 |
| Malignant neoplasm of skin (primary) | C43-C44 | ~ | 649 | 2,200 | 6,035 | 8,889 | ~ | 498 | 1,484 | 3,693 | 5,678 | 8 | 1,147 | 3,684 | 9,728 | 14,567 |
| Malignant neoplasm of breast (primary) | C50 | 0 | 11 | 116 | 206 | 333 | 0 | 9,780 | 33,241 | 15,755 | 58,776 | 0 | 9,791 | 33,357 | 15,961 | 59,109 |
| Malignant neoplasms of female genital organs (primary) | C51-C58 | 0 | 0 | 0 | 0 | 0 | 52 | 2,588 | 7,057 | 5,273 | 14,970 | 52 | 2,588 | 7,057 | 5,273 | 14,970 |
| Malignant neoplasm of prostate (primary) | C61 | 0 | 179 | 12,843 | 28,089 | 41,111 | 0 | 0 | 0 | 0 | 0 | 0 | 179 | 12,843 | 28,089 | 41,111 |
| Malignant neoplasm of bladder (primary) | C67 | ~ | 140 | 776 | 2,422 | 3,339 | 0 | 46 | 386 | 1,045 | 1,477 | ~ | 186 | 1,162 | 3,467 | 4,816 |
| Malignant neoplasms of lymphoid, haematopoietic and related tissue | C81-C96 | 3,498 | 4,309 | 9,071 | 10,306 | 27,184 | 2,593 | 3,099 | 5,337 | 7,968 | 18,997 | 6,091 | 7,408 | 14,408 | 18,274 | 46,181 |
| Benign neoplasms and neoplasms of uncertain or unknown behaviour | D10-D48 | 1,016 | 4,252 | 5,380 | 8,646 | 19,294 | 974 | 9,164 | 7,441 | 5,608 | 23,187 | 1,990 | 13,416 | 12,821 | 14,254 | 42,481 |
| Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism | D50-D89 | 3,724 | 4,679 | 7,878 | 15,266 | 31,547 | 2,963 | 5,904 | 7,564 | 15,324 | 31,755 | 6,687 | 10,583 | 15,442 | 30,590 | 63,302 |
| Endocrine, nutritional and metabolic diseases | E00-E89 | 5,259 | 14,818 | 39,923 | 54,514 | 114,514 | 4,679 | 8,771 | 24,433 | 50,384 | 88,267 | 9,938 | 23,589 | 64,356 | 104,898 | 202,781 |
| Diabetes mellitus | E10-E14 | 435 | 4,260 | 18,269 | 31,590 | 54,554 | 479 | 2,342 | 10,780 | 24,930 | 38,531 | 914 | 6,602 | 29,049 | 56,520 | 93,085 |
| Cystic fibrosis | E84 | ~ | 480 | 1,026 | 27 | 1,533 | 433 | 717 | 23 | ~ | 1,174 | 433 | 1,197 | 1,049 | 28 | 2,707 |
| Mental and behavioural disorders | F00-F99 | 1,778 | 9,032 | 9,193 | 8,305 | 28,308 | 981 | 5,434 | 5,458 | 10,229 | 22,102 | 2,759 | 14,466 | 14,651 | 18,534 | 50,410 |
| Mental and behavioural disorders due to alcohol | F10 | 51 | 4,134 | 5,267 | 2,103 | 11,555 | 65 | 1,352 | 1,769 | 711 | 3,897 | 116 | 5,486 | 7,036 | 2,814 | 15,452 |
| Mental and behavioural disorders due to use of other psychoactive substance | F11-F19 | 10 | 2,072 | 333 | 54 | 2,469 | 9 | 852 | 156 | 63 | 1,080 | 19 | 2,924 | 489 | 117 | 3,549 |
| Diseases of nervous system | G00-G99 | 3,665 | 6,785 | 8,589 | 11,292 | 30,331 | 3,170 | 8,537 | 8,055 | 11,350 | 31,112 | 6,835 | 15,322 | 16,644 | 22,642 | 61,443 |
| Multiple sclerosis | G35 | ~ | 1,008 | 817 | 198 | 2,024 | ~ | 2,588 | 1,563 | 277 | 4,428 | ~ | 3,596 | 2,380 | 475 | 6,452 |
| Epilepsy | G40, G41 | 1,154 | 1,531 | 1,061 | 873 | 4,619 | 1,041 | 1,227 | 803 | 873 | 3,944 | 2,195 | 2,758 | 1,864 | 1,746 | 8,563 |
| Transient cerebral ischaemic attacks and related syndromes | G45 | 8 | 77 | 522 | 1,137 | 1,744 | ~ | 90 | 392 | 1,403 | 1,890 | 13 | 167 | 914 | 2,540 | 3,634 |
| Diseases of the eye and adnexa | H00-H59 | 1,597 | 2,627 | 5,145 | 11,287 | 20,656 | 1,482 | 2,674 | 4,558 | 15,300 | 24,014 | 3,079 | 5,301 | 9,703 | 26,587 | 44,670 |
| Diseases of the ear and mastoid process | H60-H95 | 3,736 | 2,011 | 1,448 | 1,422 | 8,617 | 2,609 | 1,991 | 1,446 | 1,415 | 7,461 | 6,345 | 4,002 | 2,894 | 2,837 | 16,078 |
| Diseases of the circulatory system | I00-I99 | 1,659 | 12,942 | 52,924 | 105,113 | 172,638 | 1,588 | 9,513 | 26,697 | 90,194 | 127,992 | 3,247 | 22,455 | 79,621 | 195,307 | 300,630 |
| Hypertensive diseases | I10-I15 | 357 | 3,684 | 17,040 | 30,487 | 51,568 | 378 | 2,068 | 9,958 | 31,031 | 43,435 | 735 | 5,752 | 26,998 | 61,518 | 95,003 |
| Angina pectoris | I20 | 0 | 193 | 2,184 | 2,965 | 5,342 | 0 | 77 | 832 | 2,087 | 2,996 | 0 | 270 | 3,016 | 5,052 | 8,338 |
| Acute myocardial infarction | I21-I22 | ~ | 307 | 2,392 | 3,049 | 5,749 | 0 | 85 | 555 | 2,015 | 2,655 | ~ | 392 | 2,947 | 5,064 | 8,404 |
| Other ischaemic heart disease | I23-I25 | ~ | 817 | 10,299 | 16,740 | 27,860 | ~ | 231 | 2,902 | 9,412 | 12,548 | 7 | 1,048 | 13,201 | 26,152 | 40,408 |
| Pulmonary heart disease and diseases of pulmonary circulation | I26-I28 | 110 | 292 | 616 | 1,133 | 2,151 | 114 | 283 | 489 | 1,362 | 2,248 | 224 | 575 | 1,105 | 2,495 | 4,399 |
| Conduction disorders and cardiac arrhythmias | I44-I49 | 238 | 1,314 | 6,208 | 19,955 | 27,715 | 155 | 674 | 2,405 | 16,263 | 19,497 | 393 | 1,988 | 8,613 | 36,218 | 47,212 |
| Heart failure | I50 | 61 | 126 | 1,302 | 8,795 | 10,284 | 85 | 65 | 750 | 7,851 | 8,751 | 146 | 191 | 2,052 | 16,646 | 19,035 |
| Cerebrovascular disease | I60-I69 | 90 | 489 | 2,161 | 5,532 | 8,272 | 130 | 448 | 1,472 | 5,547 | 7,597 | 220 | 937 | 3,633 | 11,079 | 15,869 |
| Atherosclerosis (non-coronary) | I70 | ~ | 59 | 937 | 2,373 | 3,369 | ~ | 40 | 259 | 1,378 | 1,678 | ~ | 99 | 1,196 | 3,751 | 5,047 |
| Diseases of the respiratory system | J00-J99 | 12,495 | 10,076 | 14,983 | 34,586 | 72,140 | 9,445 | 10,083 | 13,299 | 31,577 | 64,404 | 21,940 | 20,159 | 28,282 | 66,163 | 136,544 |
| Acute upper respiratory infections and influenza | J00-J11 | 3,819 | 1,004 | 267 | 225 | 5,315 | 2,850 | 1,432 | 347 | 229 | 4,858 | 6,669 | 2,436 | 614 | 454 | 10,173 |
| Pneumonia | J12-J18 | 873 | 1,212 | 1,702 | 5,641 | 9,428 | 797 | 887 | 1,294 | 5,048 | 8,026 | 1,670 | 2,099 | 2,996 | 10,689 | 17,454 |
| Chronic diseases of tonsils and adenoids | J35 | 1,906 | 537 | 34 | 15 | 2,492 | 1,763 | 1,031 | 60 | 17 | 2,871 | 3,669 | 1,568 | 94 | 32 | 5,363 |

TABLE 3.12 Total Discharges (excl. *Maternity*): All-Listed Diagnoses by Sex and Age Group (N) (contd.)

| Diagnosis | ICD-10-AM Code | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|-------------------------|---------------|---------------|----------------|----------------|----------------|----------------------------------|---------------|----------------|----------------|----------------|--|----------------|----------------|----------------|----------------|
| | | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total |
| Chronic obstructive pulmonary disease and bronchiectasis | J40-J44, J47 | 84 | 609 | 3,839 | 11,781 | 16,313 | 62 | 658 | 3,665 | 9,523 | 13,908 | 146 | 1,267 | 7,504 | 21,304 | 30,221 |
| Asthma | J45-J46 | 1,869 | 1,332 | 1,525 | 946 | 5,672 | 1,120 | 1,985 | 1,985 | 1,694 | 6,784 | 2,989 | 3,317 | 3,510 | 2,640 | 12,456 |
| Diseases of the digestive system | K00-K93 | 8,697 | 33,358 | 41,898 | 40,283 | 124,236 | 6,610 | 34,973 | 40,086 | 42,442 | 124,111 | 15,307 | 68,331 | 81,984 | 82,725 | 248,347 |
| Diseases of oesophagus, stomach and duodenum | K20-K31 | 1,492 | 11,506 | 15,378 | 12,782 | 41,158 | 1,027 | 10,360 | 14,367 | 13,160 | 38,914 | 2,519 | 21,866 | 29,745 | 25,942 | 80,072 |
| Diseases of appendix | K35-K38 | 1,123 | 2,121 | 336 | 120 | 3,700 | 910 | 1,929 | 304 | 101 | 3,244 | 2,033 | 4,050 | 640 | 221 | 6,944 |
| Inguinal hernia | K40 | 611 | 857 | 1,180 | 1,372 | 4,020 | 113 | 43 | 73 | 127 | 356 | 724 | 900 | 1,253 | 1,499 | 4,376 |
| Noninfective enteritis and colitis | K50-K52 | 295 | 4,233 | 2,436 | 1,679 | 8,643 | 270 | 4,536 | 2,662 | 2,187 | 9,655 | 565 | 8,769 | 5,098 | 3,866 | 18,298 |
| Alcoholic liver disease | K70 | 0 | 553 | 1,363 | 484 | 2,400 | 0 | 270 | 612 | 130 | 1,012 | 0 | 823 | 1,975 | 614 | 3,412 |
| Cholelithiasis | K80 | 15 | 536 | 1,116 | 1,842 | 3,509 | 32 | 2,686 | 1,886 | 2,316 | 6,920 | 47 | 3,222 | 3,002 | 4,158 | 10,429 |
| Diseases of the skin and subcutaneous tissue | L00-L99 | 2,302 | 14,477 | 10,726 | 10,756 | 38,261 | 1,829 | 12,573 | 9,215 | 11,226 | 34,843 | 4,131 | 27,050 | 19,941 | 21,982 | 73,104 |
| Cutaneous abscess, furuncle and carbuncle and cellulitis | L02-L03 | 496 | 1,683 | 1,751 | 2,388 | 6,318 | 397 | 886 | 1,114 | 2,626 | 5,023 | 893 | 2,569 | 2,865 | 5,014 | 11,341 |
| Diseases of the musculoskeletal system and connective tissue | M00-M99 | 2,409 | 10,717 | 15,469 | 15,967 | 44,562 | 2,359 | 10,937 | 19,039 | 25,188 | 57,523 | 4,768 | 21,654 | 34,508 | 41,155 | 102,085 |
| Rheumatoid arthritis | M05-M06 | ~ | 365 | 962 | 895 | 2,223 | ~ | 864 | 2,081 | 1,920 | 4,868 | ~ | 1,229 | 3,043 | 2,815 | 7,091 |
| Coxarthrosis and Gonarthrosis | M16-M17 | ~ | 348 | 1,660 | 2,773 | 4,783 | 0 | 231 | 1,899 | 3,864 | 5,994 | ~ | 579 | 3,559 | 6,637 | 10,777 |
| Intervertebral disc disorders | M50-M51 | 60 | 657 | 776 | 538 | 2,031 | ~ | 712 | 853 | 726 | 2,296 | 65 | 1,369 | 1,629 | 1,264 | 4,327 |
| Dorsalgia (back pain) | M54 | 91 | 1,755 | 2,264 | 1,490 | 5,600 | 95 | 2,558 | 3,421 | 2,802 | 8,876 | 186 | 4,313 | 5,685 | 4,292 | 14,476 |
| Diseases of the genitourinary system | N00-N99 | 7,135 | 18,056 | 33,159 | 69,775 | 128,125 | 3,826 | 35,271 | 34,157 | 50,394 | 123,648 | 10,961 | 53,327 | 67,316 | 120,169 | 251,773 |
| Chronic kidney disease | N18 | 876 | 10,258 | 21,203 | 43,786 | 76,123 | 370 | 6,106 | 11,607 | 28,877 | 46,960 | 1,246 | 16,364 | 32,810 | 72,663 | 123,083 |
| Urolithiasis | N20-N23 | 156 | 1,671 | 1,594 | 717 | 4,138 | 60 | 794 | 812 | 329 | 1,995 | 216 | 2,465 | 2,406 | 1,046 | 6,133 |
| Hyperplasia of prostate | N40 | 0 | 106 | 2,019 | 5,592 | 7,717 | 0 | 0 | 0 | 0 | 0 | 0 | 106 | 2,019 | 5,592 | 7,717 |
| Disorders of breast | N60-N64 | 19 | 115 | 65 | 60 | 259 | 13 | 1,304 | 1,165 | 400 | 2,882 | 32 | 1,419 | 1,230 | 460 | 3,141 |
| Inflammatory diseases of female pelvic organs | N70-N77 | 0 | 0 | 0 | 0 | 0 | 58 | 2,139 | 746 | 283 | 3,226 | 58 | 2,139 | 746 | 283 | 3,226 |
| Noninflammatory disorders of female genital tract | N80-N98 | 0 | 0 | 0 | 0 | 0 | 266 | 17,338 | 12,323 | 3,308 | 33,235 | 266 | 17,338 | 12,323 | 3,308 | 33,235 |
| Pregnancy, childbirth and the puerperium^a | O00-O99 | 0 | 0 | 0 | 0 | 0 | ~ | 506 | 7 | 0 | 515 | ~ | 506 | 7 | 0 | 515 |
| Pregnancy with abortive outcome | O00-O08 | 0 | 0 | 0 | 0 | 0 | 0 | 19 | 0 | 0 | 19 | 0 | 19 | 0 | 0 | 19 |
| Certain conditions originating in the perinatal period | P00-P96 | 16,276 | ~ | ~ | 0 | 16,281 | 12,172 | ~ | ~ | 0 | 12,176 | 28,448 | 6 | ~ | 0 | 28,457 |
| Congenital malformations, deformations and chromosomal abnormalities | Q00-Q99 | 14,354 | 2,388 | 2,194 | 1,244 | 20,180 | 11,148 | 2,551 | 1,792 | 1,140 | 16,631 | 25,502 | 4,939 | 3,986 | 2,384 | 36,811 |
| Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified | R00-R99 | 12,193 | 23,472 | 29,593 | 40,784 | 106,042 | 10,971 | 30,487 | 28,836 | 41,488 | 111,782 | 23,164 | 53,959 | 58,429 | 82,272 | 217,824 |
| Abdominal and pelvic pain | R10 | 1,210 | 3,157 | 2,341 | 1,554 | 8,262 | 1,431 | 7,986 | 3,698 | 2,193 | 15,308 | 2,641 | 11,143 | 6,039 | 3,747 | 23,570 |
| Injury, poisoning and certain other consequences of external causes | S00-T98 | 9,445 | 26,277 | 11,804 | 11,154 | 58,680 | 6,389 | 11,154 | 8,894 | 14,614 | 41,051 | 15,834 | 37,431 | 20,698 | 25,768 | 99,731 |
| Intracranial injury | S06 | 340 | 1,600 | 671 | 735 | 3,346 | 189 | 427 | 299 | 512 | 1,427 | 529 | 2,027 | 970 | 1,247 | 4,773 |
| Other injuries to the head (including skull fracture) | S00-S05, S07-S09 | 2,691 | 5,056 | 1,254 | 1,362 | 10,363 | 1,728 | 1,120 | 619 | 1,370 | 4,837 | 4,419 | 6,176 | 1,873 | 2,732 | 15,200 |
| Fracture of femur | S72 | 150 | 174 | 338 | 1,325 | 1,987 | 73 | 74 | 348 | 3,271 | 3,766 | 223 | 248 | 686 | 4,596 | 5,753 |
| Poisonings by drugs, medicaments and biological substances and toxic effects of substances chiefly nonmedicinal as to source | T36-T65 | 258 | 2,417 | 715 | 201 | 3,591 | 337 | 2,522 | 937 | 222 | 4,018 | 595 | 4,939 | 1,652 | 423 | 7,609 |
| External causes of morbidity and mortality | U50-Y98 | 24,060 | 53,127 | 25,251 | 27,066 | 129,504 | 15,974 | 24,410 | 21,037 | 36,654 | 98,075 | 40,034 | 77,537 | 46,288 | 63,720 | 227,579 |
| Transport accidents | V01-V99 | 743 | 2,237 | 620 | 256 | 3,856 | 466 | 880 | 360 | 225 | 1,931 | 1,209 | 3,117 | 980 | 481 | 5,787 |
| Factors influencing health status and contact with health services^b | U00-U49, Z00-Z99 | 24,805 | 59,971 | 138,516 | 202,436 | 425,728 | 20,120 | 64,957 | 124,839 | 144,815 | 354,731 | 44,925 | 124,928 | 263,355 | 347,251 | 780,459 |
| Other medical care (including radiotherapy and chemotherapy sessions) | Z51 | 3,308 | 5,889 | 33,299 | 49,377 | 91,873 | 2,715 | 14,273 | 46,516 | 31,976 | 95,480 | 6,023 | 20,162 | 79,815 | 81,353 | 187,353 |

Notes: ~ Denotes five or less discharges reported to HIPE.

a Discharges reported within this chapter were not assigned admission type of *Maternity*. Their admission was for reasons other than their obstetric condition, but they received obstetric care during this episode of care. See Section Four for details of morbidity analysis for *Maternity* discharges.

b This category includes discharges in the code range U00-U49 'codes for special purposes'.

3.4.4 Total Discharges (excl. *Maternity*) by Principal Procedure, Sex and Age Group

Over 84 per cent of total discharges (excl. *Maternity*) had a principal procedure recorded (see Table 3.4). Discussion of procedures is confined to ACHI chapter level.

Table 3.13 provides a breakdown of principal procedure by sex and age group.

- The most common principal procedure was *non-invasive, cognitive and other interventions, not elsewhere classified*. This accounted for 20.7 per cent of total discharges (excl. *Maternity*) with a principal procedure reported. Over 32 per cent of discharges aged under 15 years, 20.7 per cent aged between 45–64 years and 20.7 per cent aged 65 years and older had this recorded as a principal procedure. For the 15–44 year age group the most common principal procedure was *procedures on digestive system* at 18.8 per cent.
- The most common principal procedure for male discharges with a procedure reported was *procedures on urinary system*, which accounted for 21.4 per cent of all principal procedures for male discharges.
- The most common principal procedure for female discharges (excl. *Maternity*) with a procedure reported was *non-invasive, cognitive and other interventions, not elsewhere classified*. This accounted for 22.6 per cent of all principal procedures for female discharges.
- Over 66 per cent of principal *procedures on cardiovascular system* were reported for male discharges with a principal procedure reported.
- Over 77 per cent of principal *procedures on endocrine system* were reported for female discharges (excl. *Maternity*) with a principal procedure reported.
- Of total discharges (excl. *Maternity*) with *procedures on eye and adnexa* recorded as a principal procedure 62.8 per cent were aged 65 years and over.

3.4.5 Acute In-Patient Mean Length of Stay by Principal Procedure by Age and Sex

Table 3.14 presents the acute in-patient mean length of stay for principal procedure by sex and age group. The analysis presented here is limited to the mean length of stay for acute in-patient discharges (excl. *Maternity*), with a length of stay of 30 days or less and excluding day patients. This measure includes pre-operative and post-operative length of stay. It should also be noted that this analysis by mean length of stay does not take into account the status of the patient on discharge. For example, a patient may be transferred to another facility on discharge. Care must be taken, therefore, in interpreting the data on mean length of stay presented in Table 3.14, in the absence of information on discharge destination.²⁵

²⁵ See Section Two for details of discharge destination.

- At chapter level the longest acute in-patient mean length of stay was reported for *radiation oncology procedures* at 11.6 days, with male and female discharges reporting at 12.1 and 11.1 days respectively for this chapter. It should be noted that the majority of discharges with *radiation oncology* recorded as a principal procedure were day patients.
- The longest acute in-patient mean length of stay for those less than 15 years was reported for *procedures on respiratory system* at 8.8 days.
- The shortest acute in-patient mean length of stay was reported for *procedures on ear and mastoid process* at 2.3 days for total discharges (excl. *Maternity*); across the age groups this ranged from 1.7 days for discharges aged less than 15 years to 4.5 days for those aged 65 years and over.

3.4.6 All-Listed Procedures by Age and Sex

Table 3.15 provides details of all-listed procedures reported by sex and age group for total discharges (excl. *Maternity*). As one principal procedure and up to nineteen secondary procedures may be collected as applicable per discharge, the total number of procedures will not equal the number of total discharges (excl. *Maternity*).

- Over 1.9 million procedures were reported for total discharges (excl. *Maternity*).
- Procedures within the chapter *non-invasive, cognitive and other interventions, not elsewhere classified* accounted for 821,719 of all-listed procedures or 41.5 per cent of all procedures reported for total discharges (excl. *Maternity*). This pattern was consistent across both sexes and all age groups.
- Over 61 per cent of *procedures on eye and adnexa* were reported for total discharges (excl. *Maternity*) aged 65 years and over.
- Over 33 per cent of *procedures on nose, mouth and pharynx* were reported for total discharges (excl. *Maternity*) aged 15 years.

TABLE 3.13 Total Discharges (excl. *Maternity*): Principal Procedure by Sex and Age Group (N)

| Principal Procedure | Procedure Block | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|------------------------------|---------------|----------------|----------------|----------------|----------------|----------------------------------|----------------|----------------|----------------|----------------|--|----------------|----------------|----------------|------------------|
| | | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total |
| Total Discharges (excl. <i>Maternity</i>) | - | 72,583 | 142,467 | 204,979 | 254,949 | 674,978 | 55,938 | 160,639 | 200,694 | 218,278 | 635,549 | 128,521 | 303,106 | 405,673 | 473,227 | 1,310,527 |
| All Principal Procedures | 0001–2016 | 44,639 | 119,652 | 179,129 | 224,219 | 567,639 | 32,890 | 134,538 | 178,420 | 188,320 | 534,168 | 77,529 | 254,190 | 357,549 | 412,539 | 1,101,807 |
| Procedures on nervous system | 0001–0086 | 816 | 3,289 | 3,378 | 1,942 | 9,425 | 649 | 3,950 | 4,758 | 3,157 | 12,514 | 1,465 | 7,239 | 8,136 | 5,099 | 21,939 |
| Lumbar puncture | 0030 | 575 | 551 | 226 | 170 | 1,522 | 444 | 871 | 368 | 172 | 1,855 | 1,019 | 1,422 | 594 | 342 | 3,377 |
| Procedures on endocrine system | 0110–0129 | 31 | 93 | 139 | 100 | 363 | 27 | 466 | 479 | 244 | 1,216 | 58 | 559 | 618 | 344 | 1,579 |
| Procedures on eye and adnexa | 0160–0256 | 803 | 1,396 | 3,170 | 6,959 | 12,328 | 713 | 1,184 | 2,608 | 9,696 | 14,201 | 1,516 | 2,580 | 5,778 | 16,655 | 26,529 |
| Lens extraction | 0195–0202 | 36 | 158 | 725 | 2,752 | 3,671 | 38 | 93 | 681 | 4,148 | 4,960 | 74 | 251 | 1,406 | 6,900 | 8,631 |
| Procedures on ear and mastoid process | 0300–0333 | 2,260 | 1,213 | 789 | 549 | 4,811 | 1,566 | 1,239 | 776 | 481 | 4,062 | 3,826 | 2,452 | 1,565 | 1,030 | 8,873 |
| Myringotomy | 0309 | 1,640 | 330 | 259 | 205 | 2,434 | 1,121 | 345 | 258 | 176 | 1,900 | 2,761 | 675 | 517 | 381 | 4,334 |
| Procedures on nose, mouth and pharynx | 0370–0422 | 2,446 | 2,684 | 2,071 | 1,359 | 8,560 | 1,999 | 2,836 | 1,739 | 1,192 | 7,766 | 4,445 | 5,520 | 3,810 | 2,551 | 16,326 |
| Tonsillectomy or adenoidectomy | 0412 | 1,478 | 429 | 26 | 8 | 1,941 | 1,451 | 919 | 27 | ~ | 2,402 | 2,929 | 1,348 | 53 | 13 | 4,343 |
| Dental services | 0450–0490 | 2,386 | 929 | 363 | 193 | 3,871 | 1,978 | 1,083 | 271 | 111 | 3,443 | 4,364 | 2,012 | 634 | 304 | 7,314 |
| Procedures on respiratory system | 0520–0570 | 1,975 | 2,138 | 3,474 | 4,451 | 12,038 | 1,367 | 1,429 | 2,880 | 3,420 | 9,096 | 3,342 | 3,567 | 6,354 | 7,871 | 21,134 |
| Bronchoscopy with/without biopsy | 0543–0544, 41892-01[0545] | 181 | 802 | 1,432 | 1,741 | 4,156 | 137 | 576 | 1,314 | 1,320 | 3,347 | 318 | 1,378 | 2,746 | 3,061 | 7,503 |
| Procedures on cardiovascular system | 0600–0777 | 744 | 7,274 | 17,744 | 12,572 | 38,334 | 621 | 3,458 | 8,253 | 7,329 | 19,661 | 1,365 | 10,732 | 25,997 | 19,901 | 57,995 |
| Coronary angiography | 0668 | 55 | 682 | 4,063 | 3,619 | 8,419 | 47 | 310 | 2,312 | 2,610 | 5,279 | 102 | 992 | 6,375 | 6,229 | 13,698 |
| Transluminal coronary angioplasty with/without stenting | 0670–0671 | 9 | 190 | 1,748 | 1,431 | 3,378 | ~ | 37 | 366 | 607 | 1,011 | 10 | 227 | 2,114 | 2,038 | 4,389 |
| CABG | 0672–0679 | 0 | 16 | 302 | 349 | 667 | 0 | ~ | 52 | 102 | 157 | 0 | 19 | 354 | 451 | 824 |
| Leg varicose vein ligation | 0727–0728 | ~ | 299 | 387 | 115 | 802 | 0 | 767 | 649 | 174 | 1,590 | ~ | 1,066 | 1,036 | 289 | 2,392 |
| Procedures on blood and blood-forming organs | 0800–0817 | 153 | 506 | 770 | 957 | 2,386 | 109 | 571 | 958 | 817 | 2,455 | 262 | 1,077 | 1,728 | 1,774 | 4,841 |
| Procedures on digestive system | 0850–1011 | 2,834 | 21,370 | 27,567 | 23,411 | 75,182 | 2,056 | 26,390 | 27,294 | 23,111 | 78,851 | 4,890 | 47,760 | 54,861 | 46,522 | 154,033 |
| Fibreoptic colonoscopy with/without excision | 0905, 0911 | 82 | 6,184 | 10,138 | 8,507 | 24,911 | 67 | 7,417 | 10,556 | 8,443 | 26,483 | 149 | 13,601 | 20,694 | 16,950 | 51,394 |
| Appendectomy | 0926 | 1,095 | 2,011 | 284 | 85 | 3,475 | 918 | 1,943 | 258 | 73 | 3,192 | 2,013 | 3,954 | 542 | 158 | 6,667 |
| Procedures for haemorrhoids | 0941 | 0 | 788 | 849 | 263 | 1,900 | 0 | 684 | 621 | 275 | 1,580 | 0 | 1,472 | 1,470 | 538 | 3,480 |
| Cholecystectomy | 0965 | ~ | 329 | 483 | 372 | 1,185 | 14 | 1,729 | 1,136 | 488 | 3,367 | 15 | 2,058 | 1,619 | 860 | 4,552 |
| Division of abdominal adhesions | 0986 | 6 | 34 | 49 | 46 | 135 | 8 | 454 | 154 | 90 | 706 | 14 | 488 | 203 | 136 | 841 |
| Repair of inguinal and obstructed hernia | 0990, 0997 | 468 | 790 | 1,111 | 1,064 | 3,433 | 93 | 49 | 88 | 140 | 370 | 561 | 839 | 1,199 | 1,204 | 3,803 |
| Panendoscopy with/without excision | 1005–1008 | 219 | 8,123 | 10,395 | 8,831 | 27,568 | 221 | 9,578 | 11,266 | 9,667 | 30,732 | 440 | 17,701 | 21,661 | 18,498 | 58,300 |
| Procedures on urinary system | 1040–1129 | 1,131 | 18,297 | 37,390 | 64,622 | 121,440 | 758 | 11,622 | 21,470 | 40,458 | 74,308 | 1,889 | 29,919 | 58,860 | 105,080 | 195,748 |
| Examination procedures on bladder (includes cystoscopy) | 1089 | 90 | 975 | 2,457 | 4,483 | 8,005 | 117 | 1,108 | 1,564 | 1,871 | 4,660 | 207 | 2,083 | 4,021 | 6,354 | 12,665 |
| Procedures on male genital organs | 1160–1203 | 3,514 | 1,622 | 2,565 | 2,842 | 10,543 | 0 | ~ | 0 | 0 | ~ | 3,514 | 1,623 | 2,565 | 2,842 | 10,544 |
| Prostatectomy | 1165–1167 | 0 | 9 | 535 | 900 | 1,444 | 0 | 0 | 0 | 0 | 0 | 0 | 9 | 535 | 900 | 1,444 |
| Circumcision | 30653-00[1196] | 1,957 | 492 | 195 | 81 | 2,725 | 0 | 0 | 0 | 0 | 0 | 1,957 | 492 | 195 | 81 | 2,725 |
| Gynaecological procedures | 1240–1299 | 0 | 0 | 0 | 0 | 0 | 99 | 15,440 | 10,313 | 2,170 | 28,022 | 99 | 15,440 | 10,313 | 2,170 | 28,022 |
| Oophorectomy and salpingo-oophorectomy | 1243, 1252 | 0 | 0 | 0 | 0 | 0 | 9 | 357 | 317 | 82 | 765 | 9 | 357 | 317 | 82 | 765 |
| Salpingectomy | 1251 | 0 | 0 | 0 | 0 | 0 | ~ | 76 | 19 | ~ | 99 | ~ | 76 | 19 | ~ | 99 |
| Examination procedures on uterus | 1259 | 0 | 0 | 0 | 0 | 0 | ~ | 1,686 | 2,151 | 368 | 4,209 | ~ | 1,686 | 2,151 | 368 | 4,209 |
| Curettag and evacuation of uterus | 1265 | 0 | 0 | 0 | 0 | 0 | ~ | 1,754 | 2,595 | 427 | 4,777 | ~ | 1,754 | 2,595 | 427 | 4,777 |
| Hysterectomy | 1268–1269 | 0 | 0 | 0 | 0 | 0 | 0 | 647 | 1,571 | 540 | 2,758 | 0 | 647 | 1,571 | 540 | 2,758 |
| Repair of prolapse of uterus, pelvic floor or enterocele | 1283 | 0 | 0 | 0 | 0 | 0 | ~ | 77 | 377 | 255 | 711 | ~ | 77 | 377 | 255 | 711 |
| Obstetric procedures^a | 1330–1347 | 0 | 0 | 0 | 0 | 0 | 0 | 24 | ~ | 0 | 25 | 0 | 24 | ~ | 0 | 25 |
| Induction and augmentation of labour | 1334, 1335 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | ~ | 0 | ~ | 0 | 0 | ~ | 0 | ~ |
| Vacuum extraction | 1338 | 0 | 0 | 0 | 0 | 0 | 0 | ~ | 0 | 0 | ~ | 0 | ~ | 0 | 0 | ~ |
| Caesarean section | 1340 | 0 | 0 | 0 | 0 | 0 | 0 | 8 | 0 | 0 | 8 | 0 | 8 | 0 | 0 | 8 |
| Episiotomy associated with delivery | 90472-00[1343] | | | | | | | | | | | | | | | |
| Postpartum suture | 1344 | 0 | 0 | 0 | 0 | 0 | 0 | 10 | 0 | 0 | 10 | 0 | 10 | 0 | 0 | 10 |
| Procedures on musculoskeletal system | 1360–1579 | 3,967 | 12,695 | 8,224 | 6,290 | 31,176 | 2,925 | 6,119 | 9,791 | 11,075 | 29,910 | 6,892 | 18,814 | 18,015 | 17,365 | 61,086 |
| Arthroplasty of hip | 1489 | ~ | 107 | 636 | 1,446 | 2,190 | ~ | 67 | 550 | 2,104 | 2,722 | ~ | 174 | 1,186 | 3,550 | 4,912 |

TABLE 3.13 Total Discharges (excl. *Maternity*): Principal Procedure by Sex and Age Group (N) (contd.)

| Principal Procedure | Procedure Block | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|------------------|---------------|---------------|---------------|---------------|----------------|----------------------------------|---------------|---------------|---------------|----------------|--|---------------|---------------|---------------|----------------|
| | | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total |
| Arthroplasty of knee | 1518-1519 | 0 | 21 | 273 | 428 | 722 | 0 | 13 | 359 | 767 | 1,139 | 0 | 34 | 632 | 1,195 | 1,861 |
| Dermatological and plastic procedures | 1600-1718 | 3,438 | 16,608 | 10,580 | 10,368 | 40,994 | 2,825 | 16,110 | 10,024 | 10,154 | 39,113 | 6,263 | 32,718 | 20,604 | 20,522 | 80,107 |
| Excision of lesion(s) of skin and subcutaneous tissue | 1620 | 538 | 4,746 | 4,335 | 5,399 | 15,018 | 552 | 6,251 | 4,777 | 5,124 | 16,704 | 1,090 | 10,997 | 9,112 | 10,523 | 31,722 |
| Other debridement of skin and subcutaneous tissue | 1628 | 178 | 622 | 347 | 274 | 1,421 | 84 | 149 | 146 | 190 | 569 | 262 | 771 | 493 | 464 | 1,990 |
| Skin graft | 1640-1650 | 23 | 92 | 59 | 60 | 234 | 28 | 36 | 25 | 79 | 168 | 51 | 128 | 84 | 139 | 402 |
| Procedures on breast | 1740-1759 | ~ | 105 | 49 | 56 | 214 | 7 | 3,344 | 3,598 | 1,478 | 8,427 | 11 | 3,449 | 3,647 | 1,534 | 8,641 |
| Breast biopsy | 1743-1744 | 0 | 43 | 35 | 29 | 107 | ~ | 2,133 | 2,245 | 941 | 5,324 | ~ | 2,176 | 2,280 | 970 | 5,431 |
| Mastectomy | 1747-1748 | ~ | 30 | ~ | 10 | 46 | 0 | 189 | 413 | 270 | 872 | ~ | 219 | 417 | 280 | 918 |
| Radiation oncology procedures | 1786-1799 | 528 | 2,304 | 18,708 | 30,642 | 52,182 | 280 | 6,717 | 22,909 | 13,732 | 43,638 | 808 | 9,021 | 41,617 | 44,374 | 95,820 |
| Non-invasive, cognitive and other interventions, not elsewhere classified | 1820-1922 | 13,564 | 19,142 | 32,548 | 42,185 | 107,439 | 11,255 | 24,534 | 41,568 | 43,169 | 120,526 | 24,819 | 43,676 | 74,116 | 85,354 | 227,965 |
| Administration of blood and blood products | 1893 | 1,620 | 1,093 | 2,357 | 5,459 | 10,529 | 1,163 | 1,200 | 2,252 | 4,489 | 9,104 | 2,783 | 2,293 | 4,609 | 9,948 | 19,633 |
| Conduction anaesthesia | 1909 | 0 | 12 | 10 | 9 | 31 | 0 | 13 | 20 | 10 | 43 | 0 | 25 | 30 | 19 | 74 |
| Cerebral anaesthesia | 1910 | 8 | 19 | 9 | 11 | 47 | 11 | 15 | 16 | 9 | 51 | 19 | 34 | 25 | 20 | 98 |
| Imaging services | 1940-2016 | 4,045 | 7,987 | 9,600 | 14,721 | 36,353 | 3,656 | 8,021 | 8,730 | 16,526 | 36,933 | 7,701 | 16,008 | 18,330 | 31,247 | 73,286 |
| Computerised tomography scan | 1952-1966 | 1,064 | 6,160 | 6,952 | 11,432 | 25,608 | 776 | 5,498 | 6,285 | 13,001 | 25,560 | 1,840 | 11,658 | 13,237 | 24,433 | 51,168 |
| Magnetic resonance imaging | 2015 | 1,478 | 991 | 1,129 | 1,185 | 4,783 | 1,272 | 1,426 | 1,167 | 1,261 | 5,126 | 2,750 | 2,417 | 2,296 | 2,446 | 9,909 |

Notes: ~ Denotes five or less discharges reported to HIPE.

a Discharges reported within this chapter were not assigned admission type of *Maternity*. Their admission was for reasons other than their obstetric condition, but they received obstetric care during this episode of care. See Section Four for details of morbidity analysis for *Maternity* discharges.

TABLE 3.14 Acute In-Patient Discharges (excl. *Maternity*): Mean Length of Stay (Days) by Principal Procedure, Sex and Age Group^a

| Principal Procedure | Procedure Block | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|--------------------------|------------|------------|------------|------------|------------|----------------------------------|------------|------------|-------------|------------|--|------------|------------|------------|------------|
| | | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total |
| Acute In-Patient Discharges | - | 2.8 | 3.4 | 4.9 | 7.0 | 4.8 | 2.9 | 3.3 | 4.8 | 7.3 | 5.0 | 2.8 | 3.3 | 4.8 | 7.1 | 4.9 |
| All Principal Procedures | 0001–2016 | 3.7 | 4.0 | 5.8 | 8.0 | 5.9 | 4.0 | 4.0 | 5.6 | 8.5 | 6.1 | 3.8 | 4.0 | 5.7 | 8.3 | 6.0 |
| Procedures on nervous system | 0001–0086 | 5.2 | 4.8 | 6.8 | 7.9 | 5.9 | 5.7 | 4.9 | 6.6 | 8.1 | 6.1 | 5.4 | 4.9 | 6.7 | 8.0 | 6.0 |
| Lumbar puncture | 0030 | 4.8 | 4.8 | 8.0 | 9.7 | 5.6 | 4.6 | 4.4 | 6.5 | 11.1 | 5.4 | 4.7 | 4.5 | 7.1 | 10.4 | 5.5 |
| Procedures on endocrine system | 0110–0129 | 3.3 | 5.4 | 4.7 | 7.9 | 5.6 | 4.5 | 4.0 | 4.1 | 5.6 | 4.4 | 3.9 | 4.3 | 4.3 | 6.3 | 4.7 |
| Procedures on eye and adnexa | 0160–0256 | 2.1 | 2.9 | 3.4 | 3.3 | 3.1 | 1.8 | 2.9 | 3.2 | 3.3 | 3.0 | 1.9 | 2.9 | 3.3 | 3.1 | |
| Lens extraction | 0195–0202 | 2.9 | 2.5 | 2.1 | 2.3 | 2.3 | 2.7 | 2.5 | 1.7 | 2.1 | 2.0 | 2.8 | 2.5 | 1.9 | 2.1 | 2.2 |
| Procedures on ear and mastoid process | 0300–0333 | 1.6 | 2.3 | 2.7 | 4.3 | 2.1 | 1.8 | 2.7 | 2.9 | 4.8 | 2.5 | 1.7 | 2.5 | 2.8 | 4.5 | 2.3 |
| Myringotomy | 0309 | 1.3 | 1.9 | ~ | ~ | 1.4 | 1.2 | 4.4 | 2.1 | ~ | 1.7 | 1.3 | 3.1 | 1.9 | 1.2 | 1.5 |
| Procedures on nose, mouth and pharynx | 0370–0422 | 1.5 | 2.3 | 3.9 | 4.8 | 2.5 | 1.5 | 2.1 | 3.6 | 5.3 | 2.3 | 1.5 | 2.2 | 3.7 | 5.0 | 2.4 |
| Tonsillectomy or adenoidectomy | 0412 | 1.4 | 1.7 | 3.3 | 2.3 | 1.5 | 1.4 | 1.7 | 2.4 | ~ | 1.6 | 1.4 | 1.7 | 2.9 | 5.2 | 1.5 |
| Dental services | 0450–0490 | 1.9 | 2.2 | 2.2 | 3.8 | 2.4 | 2.0 | 1.9 | 2.3 | 4.2 | 2.3 | 1.9 | 2.1 | 2.2 | 3.9 | 2.4 |
| Procedures on respiratory system | 0520–0570 | 8.5 | 7.4 | 8.4 | 9.8 | 8.8 | 9.1 | 7.3 | 8.5 | 10.0 | 9.1 | 8.8 | 7.4 | 8.4 | 9.9 | 8.9 |
| Bronchoscopy with/without biopsy | 0543–0544, 41892–1[0545] | 4.6 | 9.0 | 10.0 | 11.4 | 10.0 | 4.8 | 8.8 | 9.6 | 11.1 | 9.8 | 4.7 | 8.9 | 9.8 | 11.3 | 9.9 |
| Procedures on cardiovascular system | 0600–0777 | 8.3 | 5.8 | 5.5 | 7.2 | 6.4 | 8.5 | 5.5 | 5.5 | 7.2 | 6.5 | 8.4 | 5.7 | 5.5 | 7.2 | 6.4 |
| Coronary angiography | 0668 | 2.6 | 4.7 | 5.0 | 6.7 | 5.7 | 3.1 | 5.3 | 4.7 | 6.2 | 5.5 | 2.8 | 4.9 | 4.9 | 6.5 | 5.6 |
| Transluminal coronary angioplasty with/without stenting | 0670–0671 | 2.8 | 3.3 | 3.3 | 4.2 | 3.7 | ~ | 3.6 | 3.5 | 4.6 | 4.2 | 2.7 | 3.3 | 3.3 | 4.3 | 3.8 |
| CABG | 0672–0679 | - | 10.8 | 11.5 | 13.3 | 12.4 | - | ~ | 13.3 | 14.9 | 14.2 | - | 10.8 | 11.8 | 13.6 | 12.8 |
| Leg varicose vein ligation | 0727–0728 | - | 1.1 | 1.6 | 2.1 | 1.6 | - | 1.3 | 1.5 | 1.8 | 1.5 | - | 1.2 | 1.5 | 1.9 | 1.5 |
| Procedures on blood and blood-forming organs | 0800–0817 | 6.9 | 8.4 | 9.1 | 9.5 | 8.9 | 7.1 | 6.8 | 6.9 | 9.5 | 7.7 | 7.0 | 7.6 | 7.8 | 9.5 | 8.3 |
| Procedures on digestive system | 0850–1011 | 4.0 | 4.4 | 6.3 | 8.4 | 6.4 | 4.3 | 4.0 | 6.2 | 8.8 | 6.2 | 4.1 | 4.2 | 6.3 | 8.6 | 6.3 |
| Fibreoptic colonoscopy with/without excision | 0905, 0911 | 4.2 | 6.8 | 6.1 | 7.3 | 6.9 | 4.5 | 6.0 | 6.1 | 7.8 | 7.0 | 4.4 | 6.4 | 6.1 | 7.5 | 6.9 |
| Appendectomy | 0926 | 3.4 | 3.1 | 4.5 | 8.2 | 3.5 | 3.4 | 3.2 | 5.0 | 6.4 | 3.5 | 3.4 | 3.2 | 4.7 | 7.4 | 3.5 |
| Procedures for haemorrhoids | 0941 | - | 2.6 | 2.7 | 5.2 | 3.1 | - | 2.0 | 2.4 | 3.0 | 2.4 | - | 2.3 | 2.6 | 4.0 | 2.8 |
| Cholecystectomy | 0965 | - | 4.0 | 4.4 | 6.6 | 5.0 | 3.9 | 3.1 | 3.4 | 5.2 | 3.5 | 3.9 | 3.3 | 3.7 | 5.8 | 3.9 |
| Division of abdominal adhesions | 0986 | 8.7 | 7.2 | 9.7 | 10.4 | 9.2 | 10.8 | 3.4 | 6.6 | 12.2 | 5.8 | 9.9 | 3.8 | 7.3 | 11.6 | 6.5 |
| Repair of inguinal and obstructed hernia | 0990, 0997 | 2.5 | 1.8 | 2.1 | 3.2 | 2.6 | 2.7 | 2.5 | 4.5 | 5.3 | 4.5 | 2.5 | 1.9 | 2.4 | 3.5 | 2.8 |
| Panendoscopy with/without excision | 1005–1008 | 2.5 | 4.3 | 6.2 | 8.5 | 6.9 | 3.1 | 4.5 | 6.3 | 8.7 | 7.0 | 2.8 | 4.4 | 6.2 | 8.6 | 6.9 |
| Procedures on urinary system | 1040–1129 | 5.1 | 4.4 | 5.4 | 6.9 | 6.0 | 5.0 | 4.4 | 5.2 | 7.2 | 5.7 | 5.1 | 4.4 | 5.3 | 7.0 | 5.9 |
| Examination procedures on bladder (includes cystoscopy) | 1089 | 3.0 | 4.0 | 4.3 | 6.0 | 5.4 | 3.5 | 4.1 | 4.5 | 5.8 | 4.9 | 3.3 | 4.1 | 4.4 | 5.9 | 5.2 |
| Procedures on male genital organs | 1160–1203 | 1.6 | 2.4 | 5.1 | 6.3 | 4.3 | - | ~ | - | - | ~ | 1.6 | 2.4 | 5.1 | 6.3 | 4.3 |
| Prostatectomy | 1165–1167 | - | 5.5 | 6.2 | 6.7 | 6.5 | - | - | - | - | - | - | 5.5 | 6.2 | 6.7 | 6.5 |
| Circumcision | 30653-00[1196] | 1.2 | 1.3 | 1.5 | 3.5 | 1.5 | - | - | - | - | - | 1.2 | 1.3 | 1.5 | 3.5 | 1.5 |
| Gynaecological procedures | 1240–1299 | - | - | - | - | - | 3.6 | 3.3 | 4.3 | 5.4 | 4.1 | 3.6 | 3.3 | 4.3 | 5.4 | 4.1 |
| Oophorectomy and salpingo-oophorectomy | 1243, 1252 | - | - | - | - | - | 4.9 | 4.5 | 4.8 | 8.1 | 5.0 | 4.9 | 4.5 | 4.8 | 8.1 | 5.0 |
| Salpingectomy | 1251 | - | - | - | - | - | ~ | 3.4 | 3.5 | ~ | 3.5 | ~ | 3.4 | 3.5 | ~ | 3.5 |
| Examination procedures on uterus | 1259 | - | - | - | - | - | - | 1.7 | 1.8 | 2.9 | 2.0 | - | 1.7 | 1.8 | 2.9 | 2.0 |
| Curettag and evacuation of uterus | 1265 | - | - | - | - | - | - | 1.5 | 1.6 | 2.9 | 1.9 | - | 1.5 | 1.6 | 2.9 | 1.9 |
| Hysterectomy | 1268–1269 | - | - | - | - | - | - | 5.7 | 5.9 | 7.2 | 6.1 | - | 5.7 | 5.9 | 7.2 | 6.1 |
| Repair of prolapse of uterus, pelvic floor or enterocele | 1283 | - | - | - | - | - | ~ | 3.5 | 4.2 | 4.6 | 4.3 | ~ | 3.5 | 4.2 | 4.6 | 4.3 |
| Obstetric procedures^b | 1330–1347 | - | - | - | - | - | - | 3.8 | ~ | - | 3.8 | - | 3.8 | ~ | - | 3.8 |
| Induction and augmentation of labour | 1334, 1335 | - | - | - | - | - | - | - | ~ | - | ~ | - | - | 3.0 | - | 3.0 |
| Vacuum extraction | 1338 | - | - | - | - | - | - | ~ | - | ~ | ~ | - | ~ | - | ~ | ~ |
| Caesarean section | 1340 | - | - | - | - | - | - | 6.3 | - | - | 6.3 | - | 6.3 | - | - | 6.3 |

TABLE 3.14 Acute In-Patient Discharges (excl. *Maternity*): Mean Length of Stay (Days) by Principal Procedure, Sex and Age Group^a (contd.)

| Principal Procedure | Procedure Block | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|------------------|------------|-------------|-------------|-------------|-------------|----------------------------------|------------|-------------|-------------|-------------|--|------------|-------------|-------------|-------------|
| | | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total |
| Episiotomy associated with delivery | 90472-00[1343] | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Postpartum suture | 1344 | - | - | - | - | - | - | ~ | - | - | - | ~ | - | ~ | - | ~ |
| Procedures on musculoskeletal system | 1360–1579 | 1.8 | 2.7 | 5.1 | 8.7 | 4.4 | 2.3 | 2.9 | 4.6 | 8.7 | 5.7 | 2.0 | 2.7 | 4.9 | 8.7 | 5.0 |
| Arthroplasty of hip | 1489 | ~ | 6.6 | 7.5 | 10.3 | 9.3 | ~ | 7.1 | 8.1 | 11.1 | 10.3 | ~ | 6.8 | 7.8 | 10.8 | 9.9 |
| Arthroplasty of knee | 1518–1519 | - | 7.3 | 7.4 | 8.7 | 8.2 | - | 6.6 | 8.0 | 9.2 | 8.8 | - | 7.1 | 7.7 | 9.0 | 8.5 |
| Dermatological and plastic procedures | 1600–1718 | 2.7 | 3.1 | 4.9 | 5.8 | 3.6 | 3.1 | 3.2 | 4.8 | 7.2 | 4.2 | 2.9 | 3.1 | 4.8 | 6.5 | 3.9 |
| Excision of lesion(s) of skin and subcutaneous tissue | 1620 | 2.1 | 2.4 | 2.6 | 3.7 | 3.2 | 2.6 | 2.3 | 3.0 | 4.8 | 3.8 | 2.3 | 2.3 | 2.8 | 4.2 | 3.5 |
| Other debridement of skin and subcutaneous tissue | 1628 | 2.1 | 3.6 | 6.3 | 8.2 | 4.6 | 1.7 | 5.7 | 8.0 | 10.6 | 7.1 | 2.0 | 3.9 | 6.8 | 9.3 | 5.3 |
| Skin graft | 1640–1650 | 6.2 | 7.2 | 6.7 | 9.2 | 7.4 | 10.2 | 6.7 | 8.1 | 10.8 | 9.4 | 8.4 | 7.1 | 7.0 | 10.2 | 8.2 |
| Procedures on breast | 1740–1759 | ~ | 2.1 | ~ | 4.3 | 3.0 | ~ | 3.7 | 3.7 | 5.0 | 4.0 | ~ | 3.6 | 3.7 | 5.0 | 4.0 |
| Breast biopsy | 1743–1744 | - | ~ | ~ | ~ | 2.0 | ~ | 2.3 | 2.3 | 3.7 | 2.7 | ~ | 2.2 | 2.3 | 3.7 | 2.7 |
| Mastectomy | 1747–1748 | ~ | ~ | ~ | 4.7 | 4.0 | - | 6.1 | 6.0 | 6.7 | 6.2 | ~ | 6.0 | 6.0 | 6.7 | 6.2 |
| Radiation oncology procedures | 1786–1799 | . | 11.4 | 12.2 | 12.2 | 12.1 | ~ | 6.7 | 10.9 | 13.0 | 11.1 | ~ | 8.0 | 11.4 | 12.6 | 11.6 |
| Non-invasive, cognitive and other interventions, not elsewhere classified | 1820–1922 | 4.1 | 5.0 | 5.8 | 8.4 | 6.5 | 4.3 | 5.0 | 6.4 | 9.1 | 7.2 | 4.2 | 5.0 | 6.0 | 8.8 | 6.8 |
| Administration of blood and blood products | 1893 | 3.2 | 5.0 | 6.0 | 7.2 | 6.2 | 3.4 | 4.3 | 5.6 | 7.1 | 6.1 | 3.3 | 4.6 | 5.7 | 7.2 | 6.2 |
| Conduction anaesthesia | 1909 | - | 6.6 | ~ | ~ | 8.7 | - | ~ | 6.2 | 13.2 | 9.5 | - | 7.8 | 7.7 | 12.4 | 9.1 |
| Cerebral anaesthesia | 1910 | ~ | 4.8 | ~ | ~ | 5.2 | ~ | ~ | 3.1 | 6.5 | 5.3 | ~ | 4.5 | 3.0 | 7.7 | 5.3 |
| Imaging services | 1940–2016 | 3.6 | 3.9 | 5.6 | 8.0 | 6.1 | 3.9 | 4.1 | 5.6 | 8.4 | 6.4 | 3.7 | 4.0 | 5.6 | 8.2 | 6.2 |
| Computerised tomography scan | 1952-1966 | 2.4 | 3.6 | 5.2 | 7.9 | 5.8 | 2.6 | 3.7 | 5.2 | 8.2 | 6.3 | 2.5 | 3.6 | 5.2 | 8.0 | 6.1 |
| Magnetic resonance imaging | 2015 | 4.8 | 5.8 | 7.5 | 9.6 | 7.4 | 4.4 | 5.3 | 7.3 | 10.5 | 7.2 | 4.6 | 5.5 | 7.4 | 10.1 | 7.3 |

Notes: ~ Denotes five or less discharges reported to HIPE.

- Mean length of stay cannot be calculated as no acute in-patients (length of stay of 30 days or less) reported.

a Includes mean length of stay for acute in-patients (length of stay of 30 days or less) only. Excludes extended stay in-patients and day patients.

b Discharges reported within this chapter were not assigned admission type of *Maternity*. Their admission was for reasons other than their obstetric condition, but they received obstetric care during this episode of care. See Section Four for details of morbidity analysis for *Maternity* discharges.

TABLE 3.15 Total Discharges (excl. Maternity): All-Listed Procedures by Sex and Age Group (N)

| All Procedures | Procedure Block | Male | | | | | Female (excl. Maternity) | | | | | Total Discharges (excl. Maternity) | | | | |
|--|------------------------------|---------------|----------------|----------------|----------------|------------------|--------------------------|----------------|----------------|----------------|----------------|------------------------------------|----------------|----------------|----------------|------------------|
| | | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total | < 15 | 15-44 | 45-64 | ≥65 | Total |
| Total Discharges (excl. Maternity) | - | 72,583 | 142,467 | 204,979 | 254,949 | 674,978 | 55,938 | 160,639 | 200,694 | 218,278 | 635,549 | 128,521 | 303,106 | 405,673 | 473,227 | 1,310,527 |
| All Procedures | 0001-2016 | 97,987 | 213,167 | 306,707 | 388,932 | 1,006,793 | 71,870 | 240,190 | 308,716 | 352,878 | 973,654 | 169,857 | 453,357 | 615,423 | 741,810 | 1,980,447 |
| Procedures on nervous system | 0001-0086 | 1,893 | 4,381 | 4,356 | 2,558 | 13,188 | 1,561 | 5,117 | 5,932 | 3,983 | 16,593 | 3,454 | 9,498 | 10,288 | 6,541 | 29,781 |
| Lumbar puncture | 0030 | 1,433 | 1,037 | 554 | 396 | 3,420 | 1,132 | 1,465 | 720 | 410 | 3,727 | 2,565 | 2,502 | 1,274 | 806 | 7,147 |
| Procedures on endocrine system | 0110-0129 | 38 | 110 | 166 | 130 | 444 | 28 | 476 | 516 | 283 | 1,303 | 66 | 586 | 682 | 413 | 1,747 |
| Procedures on eye and adnexa | 0160-0256 | 1,026 | 1,801 | 3,859 | 8,127 | 14,813 | 880 | 1,451 | 3,126 | 11,130 | 16,587 | 1,906 | 3,252 | 6,985 | 19,257 | 31,400 |
| Lens extraction | 0195-0202 | 40 | 172 | 748 | 2,808 | 3,768 | 42 | 99 | 696 | 4,211 | 5,048 | 82 | 271 | 1,444 | 7,019 | 8,816 |
| Procedures on ear and mastoid process | 0300-0333 | 3,073 | 1,407 | 907 | 614 | 6,001 | 2,193 | 1,394 | 884 | 543 | 5,014 | 5,266 | 2,801 | 1,791 | 1,157 | 11,015 |
| Myringotomy | 0309 | 2,072 | 367 | 282 | 208 | 2,929 | 1,480 | 370 | 274 | 184 | 2,308 | 3,552 | 737 | 556 | 392 | 5,237 |
| Procedures on nose, mouth and pharynx | 0370-0422 | 2,935 | 3,434 | 2,796 | 1,725 | 10,890 | 2,342 | 3,355 | 2,164 | 1,469 | 9,330 | 5,277 | 6,789 | 4,960 | 3,194 | 20,220 |
| Tonsillectomy or adenoidectomy | 0412 | 1,600 | 441 | 33 | 10 | 2,084 | 1,520 | 931 | 31 | 6 | 2,488 | 3,120 | 1,372 | 64 | 16 | 4,572 |
| Dental services | 0450-0490 | 4,466 | 1,448 | 464 | 249 | 6,627 | 3,600 | 1,511 | 341 | 141 | 5,593 | 8,066 | 2,959 | 805 | 390 | 12,220 |
| Procedures on respiratory system | 0520-0570 | 3,639 | 3,186 | 5,703 | 7,478 | 20,006 | 2,539 | 2,106 | 4,126 | 5,516 | 14,287 | 6,178 | 5,292 | 9,829 | 12,994 | 34,293 |
| Bronchoscopy with/without biopsy | 0543-0544, 41892-01[0545] | 289 | 912 | 1,670 | 2,057 | 4,928 | 212 | 642 | 1,438 | 1,536 | 3,828 | 501 | 1,554 | 3,108 | 3,593 | 8,756 |
| Procedures on cardiovascular system | 0600-0777 | 2,391 | 9,241 | 25,469 | 21,244 | 58,345 | 1,736 | 4,629 | 11,654 | 12,363 | 30,382 | 4,127 | 13,870 | 37,123 | 33,607 | 88,727 |
| Coronary angiography | 0668 | 153 | 907 | 5,846 | 5,214 | 12,120 | 119 | 361 | 2,755 | 3,307 | 6,542 | 272 | 1,268 | 8,601 | 8,521 | 18,662 |
| Transluminal coronary angioplasty with/without stenting | 0670-0671 | 12 | 209 | 1,992 | 1,685 | 3,898 | ~ | 40 | 419 | 725 | 1,185 | 13 | 249 | 2,411 | 2,410 | 5,083 |
| CABG | 0672-0679 | 0 | 36 | 669 | 812 | 1,517 | ~ | 6 | 111 | 248 | 366 | ~ | 42 | 780 | 1,060 | 1,883 |
| Leg varicose vein ligation | 0727-0728 | ~ | 303 | 391 | 118 | 813 | 0 | 778 | 656 | 181 | 1,615 | ~ | 1,081 | 1,047 | 299 | 2,428 |
| Procedures on blood and blood-forming organs | 0800-0817 | 413 | 752 | 1,218 | 1,502 | 3,885 | 301 | 1,203 | 2,566 | 1,888 | 5,958 | 714 | 1,955 | 3,784 | 3,390 | 9,843 |
| Procedures on digestive system | 0850-1011 | 3,323 | 26,276 | 35,513 | 32,003 | 97,115 | 2,474 | 32,930 | 35,121 | 31,226 | 101,751 | 5,797 | 59,206 | 70,634 | 63,229 | 198,866 |
| Fibreoptic colonoscopy with/without excision | 0905, 0911 | 161 | 7,939 | 12,913 | 11,416 | 32,429 | 136 | 9,678 | 13,632 | 11,447 | 34,893 | 297 | 17,617 | 26,545 | 22,863 | 67,322 |
| Appendectomy | 0926 | 1,113 | 2,052 | 313 | 119 | 3,597 | 943 | 2,052 | 382 | 140 | 3,517 | 2,056 | 4,104 | 695 | 259 | 7,114 |
| Procedures for haemorrhoids | 0941 | ~ | 1,616 | 1,776 | 577 | 3,971 | 0 | 1,389 | 1,301 | 607 | 3,297 | ~ | 3,005 | 3,077 | 1,184 | 7,268 |
| Cholecystectomy | 0965 | ~ | 344 | 538 | 420 | 1,303 | 15 | 1,756 | 1,169 | 528 | 3,468 | 16 | 2,100 | 1,707 | 948 | 4,771 |
| Division of abdominal adhesions | 0986 | 28 | 196 | 235 | 265 | 724 | 25 | 1,030 | 530 | 308 | 1,893 | 53 | 1,226 | 765 | 573 | 2,617 |
| Repair of inguinal and obstructed hernia | 0990, 0997 | 497 | 800 | 1,126 | 1,110 | 3,533 | 95 | 52 | 90 | 151 | 388 | 592 | 852 | 1,216 | 1,261 | 3,921 |
| Panendoscopy with/without excision | 1005-1008 | 255 | 8,876 | 11,876 | 10,934 | 31,941 | 257 | 10,477 | 12,642 | 11,567 | 34,943 | 512 | 19,353 | 24,518 | 22,501 | 66,884 |
| Procedures on urinary system | 1040-1129 | 1,435 | 19,323 | 39,493 | 68,895 | 129,146 | 926 | 12,400 | 22,747 | 42,059 | 78,132 | 2,361 | 31,723 | 62,240 | 110,954 | 207,278 |
| Examination procedures on bladder (includes cystoscopy) | 1089 | 108 | 1,042 | 2,616 | 4,886 | 8,652 | 129 | 1,254 | 1,823 | 2,073 | 5,279 | 237 | 2,296 | 4,439 | 6,959 | 13,931 |
| Procedures on male genital organs | 1160-1203 | 3,892 | 1,766 | 2,740 | 3,091 | 11,489 | 0 | ~ | 0 | 0 | ~ | 3,892 | 1,767 | 2,740 | 3,091 | 11,490 |
| Prostatectomy | 1165-1167 | 0 | 10 | 566 | 980 | 1,556 | 0 | 0 | 0 | 0 | 0 | 0 | 10 | 566 | 980 | 1,556 |
| Circumcision | 30653-00[1196] | 2,040 | 501 | 205 | 93 | 2,839 | 0 | 0 | 0 | 0 | 0 | 2,040 | 501 | 205 | 93 | 2,839 |
| Gynaecological procedures | 1240-1299 | 0 | 0 | 0 | ~ | ~ | 152 | 26,520 | 18,413 | 3,394 | 48,479 | 152 | 26,520 | 18,413 | 3,395 | 48,480 |
| Oophorectomy and salpingo-oophorectomy | 1243, 1252 | 0 | 0 | 0 | 0 | 0 | 10 | 422 | 392 | 116 | 940 | 10 | 422 | 392 | 116 | 940 |
| Salpingectomy | 1251 | 0 | 0 | 0 | 0 | 0 | 7 | 118 | 33 | 7 | 165 | 7 | 118 | 33 | 7 | 165 |
| Examination procedures on uterus | 1259 | 0 | 0 | 0 | 0 | 0 | ~ | 3,455 | 4,078 | 644 | 8,182 | ~ | 3,455 | 4,078 | 644 | 8,182 |
| Curettage and evacuation of uterus | 1265 | 0 | 0 | 0 | 0 | 0 | ~ | 3,554 | 4,762 | 745 | 9,063 | ~ | 3,554 | 4,762 | 745 | 9,063 |
| Hysterectomy | 1268-1269 | 0 | 0 | 0 | 0 | 0 | 0 | 664 | 1,610 | 574 | 2,848 | 0 | 664 | 1,610 | 574 | 2,848 |
| Repair of prolapse of uterus, pelvic floor or enterocele | 1283 | 0 | 0 | 0 | 0 | 0 | ~ | 124 | 837 | 509 | 1,472 | ~ | 124 | 837 | 509 | 1,472 |
| Obstetric procedures^a | 1330-1347 | 0 | 0 | 0 | 0 | 0 | 0 | 44 | ~ | 0 | 47 | 0 | 44 | ~ | 0 | 47 |
| Induction and augmentation of labour | 1334, 1335 | 0 | 0 | 0 | 0 | 0 | 0 | ~ | ~ | 0 | ~ | 0 | ~ | ~ | 0 | ~ |
| Vacuum extraction | 1338 | 0 | 0 | 0 | 0 | 0 | 0 | ~ | 0 | 0 | ~ | 0 | ~ | 0 | 0 | ~ |
| Caesarean section | 1340 | 0 | 0 | 0 | 0 | 0 | 0 | 8 | 0 | 0 | 8 | 0 | 8 | 0 | 0 | 8 |
| Episiotomy associated with delivery | 90472-00[1343] | 0 | 0 | 0 | 0 | 0 | 0 | ~ | 0 | 0 | ~ | 0 | ~ | 0 | 0 | ~ |
| Postpartum suture | 1344 | 0 | 0 | 0 | 0 | 0 | 0 | 12 | 0 | 0 | 12 | 0 | 12 | 0 | 0 | 12 |
| Procedures on musculoskeletal system | 1360-1579 | 5,013 | 15,702 | 10,380 | 7,660 | 38,755 | 3,908 | 7,551 | 11,757 | 13,059 | 36,275 | 8,921 | 23,253 | 22,137 | 20,719 | 75,030 |
| Arthroplasty of hip | 1489 | ~ | 108 | 644 | 1,462 | 2,215 | ~ | 68 | 561 | 2,137 | 2,768 | ~ | 176 | 1,205 | 3,599 | 4,983 |

TABLE 3.15 Total Discharges (excl. *Maternity*): All-Listed Procedures by Sex and Age Group (N) (contd.)

| All Procedures | Procedure Block | Male | | | | | Female (excl. <i>Maternity</i>) | | | | | Total Discharges (excl. <i>Maternity</i>) | | | | |
|--|------------------|---------------|---------------|----------------|----------------|----------------|----------------------------------|---------------|----------------|----------------|----------------|--|----------------|----------------|----------------|----------------|
| | | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total | < 15 | 15–44 | 45–64 | ≥65 | Total |
| Arthroplasty of knee | 1518–1519 | 0 | 21 | 277 | 430 | 728 | 0 | 13 | 360 | 772 | 1,145 | 0 | 34 | 637 | 1,202 | 1,873 |
| Dermatological and plastic procedures | 1600–1718 | 5,262 | 20,534 | 13,406 | 13,577 | 52,779 | 4,167 | 18,422 | 12,031 | 12,769 | 47,389 | 9,429 | 38,956 | 25,437 | 26,346 | 100,168 |
| Excision of lesion(s) of skin and subcutaneous tissue | 1620 | 590 | 5,392 | 5,071 | 6,422 | 17,475 | 603 | 7,272 | 5,571 | 5,908 | 19,354 | 1,193 | 12,664 | 10,642 | 12,330 | 36,829 |
| Other debridement of skin and subcutaneous tissue | 1628 | 569 | 2,170 | 1,185 | 755 | 4,679 | 328 | 565 | 466 | 602 | 1,961 | 897 | 2,735 | 1,651 | 1,357 | 6,640 |
| Skin graft | 1640–1650 | 73 | 286 | 310 | 534 | 1,203 | 69 | 104 | 161 | 527 | 861 | 142 | 390 | 471 | 1,061 | 2,064 |
| Procedures on breast | 1740–1759 | ~ | 110 | 50 | 60 | 224 | 9 | 4,018 | 4,773 | 1,800 | 10,600 | 13 | 4,128 | 4,823 | 1,860 | 10,824 |
| Breast biopsy | 1743–1744 | 0 | 46 | 35 | 33 | 114 | 6 | 2,379 | 2,493 | 1,053 | 5,931 | 6 | 2,425 | 2,528 | 1,086 | 6,045 |
| Mastectomy | 1747–1748 | ~ | 31 | ~ | 10 | 47 | 0 | 190 | 418 | 272 | 880 | ~ | 221 | 422 | 282 | 927 |
| Radiation oncology procedures | 1786–1799 | 567 | 2,526 | 19,642 | 31,600 | 54,335 | 311 | 7,452 | 25,288 | 14,914 | 47,965 | 878 | 9,978 | 44,930 | 46,514 | 102,300 |
| Non-invasive, cognitive and other interventions, not elsewhere classified | 1820–1922 | 51,612 | 84,135 | 115,755 | 152,571 | 404,073 | 38,744 | 92,521 | 125,754 | 160,627 | 417,646 | 90,356 | 176,656 | 241,509 | 313,198 | 821,719 |
| Administration of blood and blood products | 1893 | 2,960 | 2,296 | 5,193 | 10,839 | 21,288 | 2,165 | 2,284 | 4,499 | 9,286 | 18,234 | 5,125 | 4,580 | 9,692 | 20,125 | 39,522 |
| Conduction anaesthesia | 1909 | 122 | 1,457 | 2,800 | 4,635 | 9,014 | 103 | 1,091 | 2,985 | 5,755 | 9,934 | 225 | 2,548 | 5,785 | 10,390 | 18,948 |
| Cerebral anaesthesia | 1910 | 24,240 | 43,366 | 46,854 | 41,947 | 156,407 | 16,666 | 50,126 | 52,998 | 40,902 | 160,692 | 40,906 | 93,492 | 99,852 | 82,849 | 317,099 |
| Imaging services | 1940–2016 | 7,005 | 17,035 | 24,790 | 35,847 | 84,677 | 5,999 | 17,089 | 21,520 | 35,714 | 80,322 | 13,004 | 34,124 | 46,310 | 71,561 | 164,999 |
| Computerised tomography scan | 1952–1966 | 1,577 | 11,746 | 15,159 | 24,634 | 53,116 | 1,154 | 9,666 | 12,828 | 25,540 | 49,188 | 2,731 | 21,412 | 27,987 | 50,174 | 102,304 |
| Magnetic resonance imaging | 2015 | 1,956 | 2,228 | 2,921 | 3,210 | 10,315 | 1,718 | 3,005 | 2,771 | 3,160 | 10,654 | 3,674 | 5,233 | 5,692 | 6,370 | 20,969 |

Notes: ~ Denotes five or less discharges reported to HIPE.

a Discharges reported within this chapter were not assigned admission type of *Maternity*. Their admission was for reasons other than their obstetric condition, but they received obstetric care during this episode of care. See Section Four for details of morbidity analysis for *Maternity* discharges.

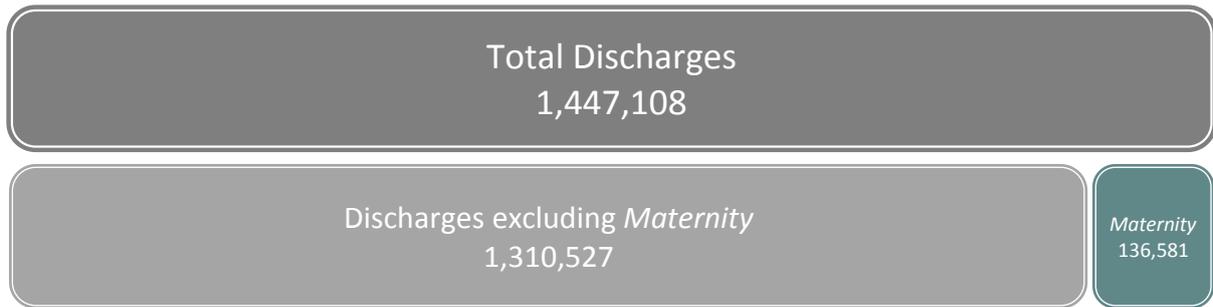
Maternity Discharges
2010

SECTION

FOUR

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4.1 INTRODUCTION

Section Four examines *Maternity* discharges only.¹ In 2010, 9.4 per cent of total discharges were categorised as *Maternity* discharges. *Maternity* discharges in HIPE are those who were *admitted* in relation to their obstetrical experience (from conception to 6 weeks post delivery); that is, they were allocated to Admission Type code *Maternity*.²

The Health Research and Information Division at the ESRI also publish the annual series *Perinatal Statistics Reports* using data from the National Perinatal Reporting System (NPRS) which presents national statistics on perinatal events in Ireland.³ The analysis of *Deliveries* here is intended to complement these publications by reporting on variables which are currently not available in the NPRS. These variables include public/private status and detailed data on maternal diagnoses and procedures, including the elective or emergency nature of Caesarean section. It must be emphasised that the *Delivery* section here reports on women with a diagnosis of outcome of delivery (ICD-10-AM - Z37) in acute public hospitals with an allocated admission type of *Maternity* only.⁴ There are a number of key differences between the number of deliveries reported here and the number of maternities published by the NPRS which means, on balance, that the number of deliveries reported by NPRS will be more comprehensive due to a number of factors including:

- * The NPRS includes all deliveries in Ireland including those in public and private hospitals and domiciliary births. HIPE does not currently incorporate data from private hospitals or domiciliary births.
- * Delivery data in the NPRS is reported based on date of delivery, HIPE is reported on the date of discharge of the mother. For example, a delivery that occurs on 27 December 2009 and the mother is discharged on 1 January 2010 will be recorded as a 2009 delivery in NPRS and a 2010 delivery in HIPE.
- * In accordance with the World Health Organization (WHO) guidelines the NPRS does not include births weighing less than 500 grams; these deliveries would be reported by HIPE.

¹ See Section 1.4 *Changes to Annual Report 2010*.

² Hospital In-Patient Enquiry Scheme (HIPE) Data Dictionary 2010 Version 2.0

³ See www.nprs.ie

⁴ There were a small number of women who were admitted for reasons other than their obstetric condition, but received obstetric care and, in some cases (n=12), delivered during this episode. These women are not included here.

- Section 4.2 provides an overview of *Maternity* discharges, disaggregated according to whether they delivered during this episode of care.
- Section 4.3 examines *Delivery* discharges. Method of delivery is analysed by selected demographic and administrative variables. Top 20 diagnoses and Top 10 procedures are provided, along with further details on Caesarean section deliveries.
- Section 4.4 provides a summary of *Non-Delivery* discharges and reports on age, marital status and public/private status for day patients and in-patients. Top 10 principal diagnosis and procedures are also presented.

4.2 MATERNITY DISCHARGES – TOTAL

This section provides an overview of the 136,581 *Maternity* discharges reported to HIPE. Of those discharges registered as *Maternity*, there were 72,675 (53.2 per cent) *Delivery* discharges and 63,906 (46.8 per cent) *Non-Delivery* discharges.

4.2.1 *Maternity* Discharges: Profile

Table 4.1 disaggregates *Maternity* discharges and bed days by patient type and delivery status.^{5,6} Mean and median lengths of stay for in-patient discharges are also presented.⁷

Discharges

- Day patients accounted for 10,287 (7.5 per cent) of *Maternity* discharges. The remaining 126,294 (92.5 per cent) of *Maternity* discharges were in-patients.
- 57.6 per cent of *Maternity* discharges were aged 25–34 years (see Figure 4.1).
- Single women accounted for 37.0 per cent of *Maternity* discharges while married women accounted for 60.3 per cent (see Figure 4.2).
- Almost 21 per cent of *Maternity* discharges were discharged on a private basis and 79.2 per cent on a public basis (see Figure 4.3).

Length of Stay

- The cumulative proportion of discharges and bed days differ for *Delivery* and *Non-Delivery* discharges (see Figures 4.4a–4.4c). For example, for discharges staying 3 days or less, 62.9 per cent of *Delivery* in-patient discharges used 39.6 per cent of bed days, while *Non-Delivery* discharges accounted for over 93 per cent of discharges using 73.5 per cent of bed days.

⁵ See Glossary for definition of patient type.

⁶ *Non-Delivery* discharges are *Maternity* discharges where admission was related to their obstetrical experience but who did not deliver during that episode of care.

⁷ By definition *Maternity* discharges with a diagnosis of delivery are in-patients.

TABLE 4.1 Maternity Discharges: Patient Type by Delivery Status (N, %, Bed Days, %, and In-Patient Length of Stay)

| | Discharges and Bed Days | | | | | | | | | | | | | | | | | |
|-------------------------|-------------------------|------------|----------------|------------|----------------|------------|--------------|------------|---------------|------------|----------------------------|------------|----------------|------------|----------------------------|------------|----------------|------------|
| | Day Patients | | In-Patients | | | | | | | | | | | | Total Maternity Discharges | | | |
| | | | <=7 Days | | | | > 7 Days | | | | Total Maternity In-Patient | | | | | | | |
| | N | % | N | % | Bed Days | % | N | % | Bed Days | % | N | % | Bed Days | % | N | % | Bed Days | % |
| Delivery ^{a,b} | - | - | 70,155 | 57.0 | 212,546 | 73.0 | 2,520 | 78.8 | 34,549 | 79.5 | 72,675 | 57.5 | 247,095 | 73.9 | 72,675 | 53.2 | 247,095 | 71.7 |
| Non-Delivery | 10,287 | 100 | 52,940 | 43.0 | 78,434 | 27.0 | 679 | 21.2 | 8,911 | 20.5 | 53,619 | 42.5 | 87,345 | 26.1 | 63,906 | 46.8 | 97,632 | 28.3 |
| Total Maternity | 10,287 | 100 | 123,095 | 100 | 290,980 | 100 | 3,199 | 100 | 43,460 | 100 | 126,294 | 100 | 334,440 | 100 | 136,581 | 100 | 344,727 | 100 |

| | In-Patient Length of Stay | | | | | | | |
|------------------------|---------------------------|----------|-------------|-----------|----------------------------|----------|------|--------|
| | <=7 Days | | > 7 Days | | Total Maternity In-Patient | | | |
| | Mean | Median | Mean | Median | Mean | Median | Mean | Median |
| | Delivery | 3.0 | 3 | 13.7 | 10 | 3.4 | 3 | |
| Non-Delivery | 1.5 | 1 | 13.1 | 10 | 1.6 | 1 | | |
| Total Maternity | 2.4 | 2 | 13.6 | 10 | 2.6 | 2 | | |

Notes: Percentage columns are subject to rounding.

a Delivery discharges are all in-patients.

b Data represent Delivery discharges in acute public hospitals reporting to HIPE which have been allocated an admission type Maternity. For national statistics on perinatal events in Ireland see the National Perinatal Reporting System (www.nprs.ie).

FIGURE 4.1 Maternity Discharges: Age (N, %)

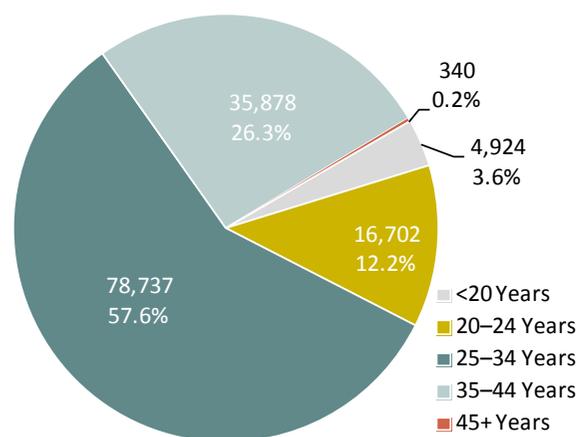


FIGURE 4.2 Maternity Discharges: Marital Status (N, %)

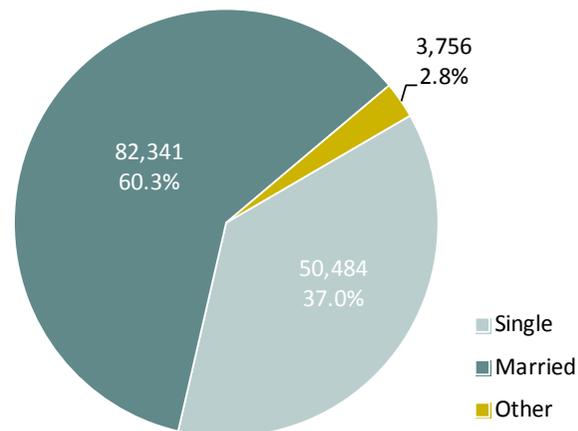
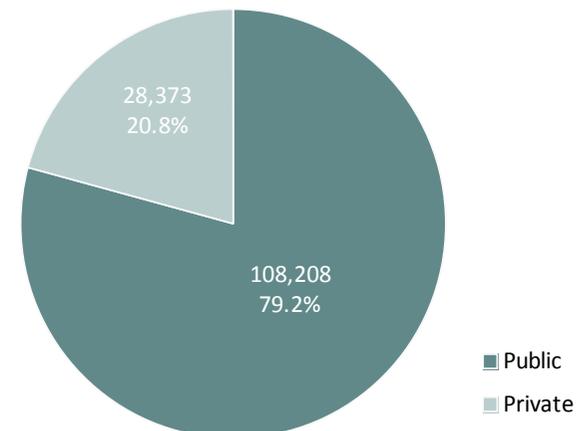


FIGURE 4.3 Maternity Discharges: Public/Private Status (N, %)



Notes: Data represent Delivery discharges in acute public hospitals reporting to HIPE which have been allocated an admission type Maternity. For national statistics on perinatal events in Ireland see the National Perinatal Reporting System (www.nprs.ie).

FIGURE 4.4a *Delivery Discharges: In-Patient Length of Stay by Discharges and Bed Days (Cumulative Percentage)^{a,b}*

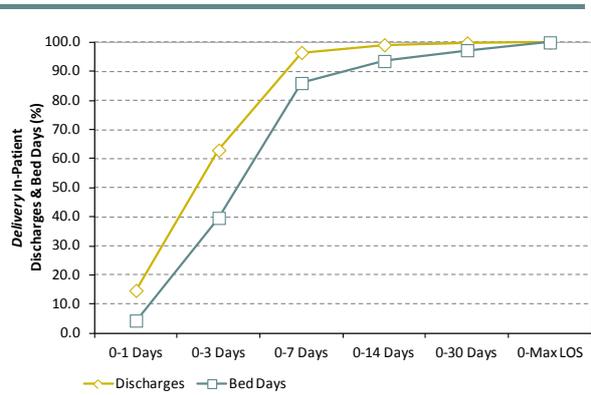


FIGURE 4.4b *Non-Delivery Discharges: In-Patient Length of Stay by Discharges and Bed Days (Cumulative Percentage)*

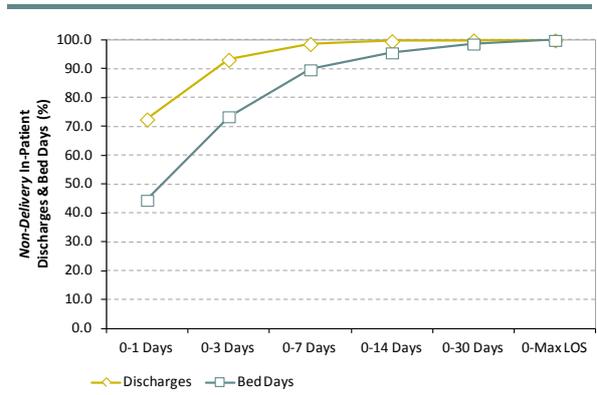
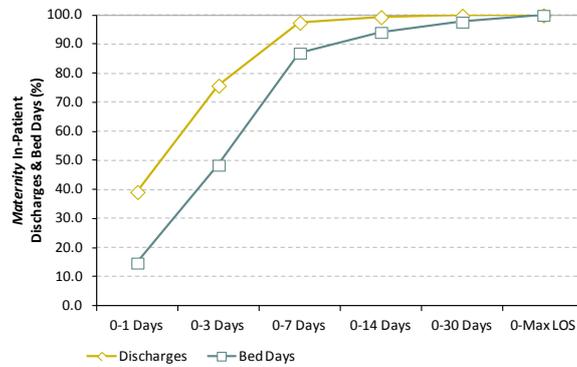


FIGURE 4.4c *Maternity Discharges: In-Patient Length of Stay by Discharges and Bed Days (Cumulative Percentage)*



Notes: a Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).
 b *Delivery* discharges are all in-patients.

4.3 MATERNITY DISCHARGES – DELIVERY

There were 72,675 *Maternity* discharges with a diagnosis of delivery reported to HIPE (53.2 per cent of *Maternity* discharges and 5.0 per cent of total HIPE discharges).^{8,9}

4.3.1 Delivery Discharges: Outcome of Delivery

Table 4.2 disaggregates *Delivery* discharges by outcome of delivery.¹⁰

- Single deliveries accounted for 98.3 per cent of total *Delivery* discharges while multiple deliveries accounted for 1.7 per cent.
- The in-patient mean length of stay for a single delivery was 3.3 days compared to 6.7 days for a multiple delivery.

TABLE 4.2 *Delivery Discharges: Outcome of Delivery (N, % and Length of Stay)*

| | | <i>Delivery Discharges</i> ^a | | <i>In-Patient Length of Stay</i> ^b | |
|---|---------------------|---|------------|---|----------|
| | | N | % | Mean | Median |
| Z37.0–Z37.1 | Single Deliveries | 71,416 | 98.3 | 3.3 | 3 |
| Z37.2–Z37.7 | Multiple Deliveries | 1,248 | 1.7 | 6.7 | 5 |
| Z37.9 | Unspecified | 11 | 0.0 | 6.5 | 5 |
| Total <i>Delivery Discharges</i> | | 72,675 | 100 | 3.4 | 3 |

Notes: Percentage columns are subject to rounding.

Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

a ICD-10-AM (any) diagnosis codes analysed at four-digit level and include live births and stillbirths.

b *Delivery* discharges are all in-patients.

⁸ See Section Three for details of clinical coding and classification.

⁹ ICD-10-AM Diagnosis Code Z37. (Extracted from NCCH eBook, July 2008, Factors Affecting Health Status.)

¹⁰ As a delivery can result in either single or multiple outcomes, the number of deliveries will not equal the number of births. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

4.3.2 Delivery Discharges: Method of Delivery

Method of delivery is derived from delivery procedure codes and, for the purposes of this report are grouped into non-instrumental, instrumental and elective or emergency Caesarean section.^{11,12,13,14,15} Table 4.3 disaggregates *Delivery* discharges by method of delivery and outcome of delivery. Figure 4.5 shows the proportion of *Delivery* discharges by method of delivery and in-patient length of stay.

Discharges

- Non-instrumental deliveries accounted for 57.9 per cent of single deliveries and 23.7 per cent of multiple deliveries.
- Caesarean section accounted for 25.7 per cent of single deliveries and 64.3 per cent of multiple deliveries.
- The proportion of elective and emergency Caesarean sections were similar for both the single and multiple deliveries.

Length of Stay

- The in-patient mean length of stay was 2.5 days for non-instrumental, 3.3 days for instrumental and 5.4 days for Caesarean section deliveries.
- In-patient mean length of stay was shorter for single deliveries compared to multiple deliveries for all methods of delivery.
- For single Caesarean section deliveries, in-patient mean length of stay was shorter for elective deliveries (4.9 days) than emergency deliveries (5.6 days). In contrast, for multiple Caesarean section deliveries the in-patient mean length of stay was shorter for emergency deliveries (7.6 days) than elective deliveries (7.9 days).
- Only 3.5 per cent of total *Delivery* discharges had an in-patient mean length of stay of more than 7 days (see Figure 4.5).

¹¹ The method of delivery categories reported here are not directly comparable with those published in the *Perinatal Statistics Reports*.

¹² Non-instrumental deliveries *exclude* forceps delivery, vacuum extraction with delivery, breech with forceps to after-coming head or Caesarean section.

¹³ Instrumental deliveries include deliveries *with* one or a combination of forceps (ACHI Procedure Block 1337 – excluding failed forceps) or vacuum extraction (ACHI Procedure Block 1338 – excluding failed vacuum extraction), and breech with forceps to after-coming head (ACHI Procedure Codes 90470-02, 90470-04) [Extracted from NCCH eBook, July 2008, Obstetric Procedures].

¹⁴ The term 'elective' is not an indication of maternal choice.

¹⁵ An **elective** Caesarean (ACHI Procedure Codes 16520-00, 16520-02) is defined as a Caesarean section carried out as a planned procedure before the onset of labour or following the onset of labour, when the decision was made before labour.

An **emergency** Caesarean (ACHI Procedure Codes 16520-01, 16520-03) is defined as a Caesarean required because of an emergency situation (e.g. obstructed labour, fetal distress). It is best described as 'when the Caesarean section is performed having not been considered necessary previously'. Caesarean section after failed trial of scar would be an emergency Caesarean section.

Australian Coding Standard 1541 [Extracted from NCCH eBook, July 2008, Pregnancy, Childbirth and the Puerperium.]

TABLE 4.3 *Delivery Discharges: Method of Delivery by Outcome of Delivery (N, % and Length of Stay)*

| | | Delivery Discharges | | | | | | | | | | | |
|--------------------|----------------------------------|---------------------|-------------|---------------|-------------|-------------------|-------------|--------------|-------------|---------------|-------------|--|------------|
| | | Non-Instrumental | | Instrumental | | Caesarean Section | | | | | | Total Delivery Discharges ^a | |
| | | | | | | Elective CS | | Emergency CS | | Total CS | | | |
| | | N | % | N | % | N | % | N | % | N | % | N | % |
| Single | <=7 Days | 40,825 | 59.0 | 11,451 | 16.6 | 8,377 | 12.1 | 8,490 | 12.3 | 16,867 | 24.4 | 69,143 | 100 |
| | > 7 Days | 521 | 22.9 | 240 | 10.6 | 569 | 25.0 | 943 | 41.5 | 1512 | 66.5 | 2273 | 100 |
| | Total Single | 41,346 | 57.9 | 11,691 | 16.4 | 8,946 | 12.5 | 9,433 | 13.2 | 18,379 | 25.7 | 71,416 | 100 |
| Multiple | <=7 Days | 270 | 26.9 | 124 | 12.4 | 324 | 32.3 | 285 | 28.4 | 609 | 60.7 | 1,003 | 100 |
| | > 7 Days | 26 | 10.6 | 26 | 10.6 | 97 | 39.6 | 96 | 39.2 | 193 | 78.8 | 245 | 100 |
| | Total Multiple | 296 | 23.7 | 150 | 12.0 | 421 | 33.7 | 381 | 30.5 | 802 | 64.3 | 1,248 | 100 |
| Total ^a | <=7 Days | 41,095 | 58.6 | 11,575 | 16.5 | 8,701 | 12.4 | 8,775 | 12.5 | 17,476 | 24.9 | 70,146 | 100 |
| | > 7 Days | 547 | 21.7 | 266 | 10.6 | 666 | 26.4 | 1039 | 41.3 | 1705 | 67.7 | 2518 | 100 |
| | Total Delivery Discharges | 41,642 | 57.3 | 11,841 | 16.3 | 9,367 | 12.9 | 9,814 | 13.5 | 19,181 | 26.4 | 72,664 | 100 |

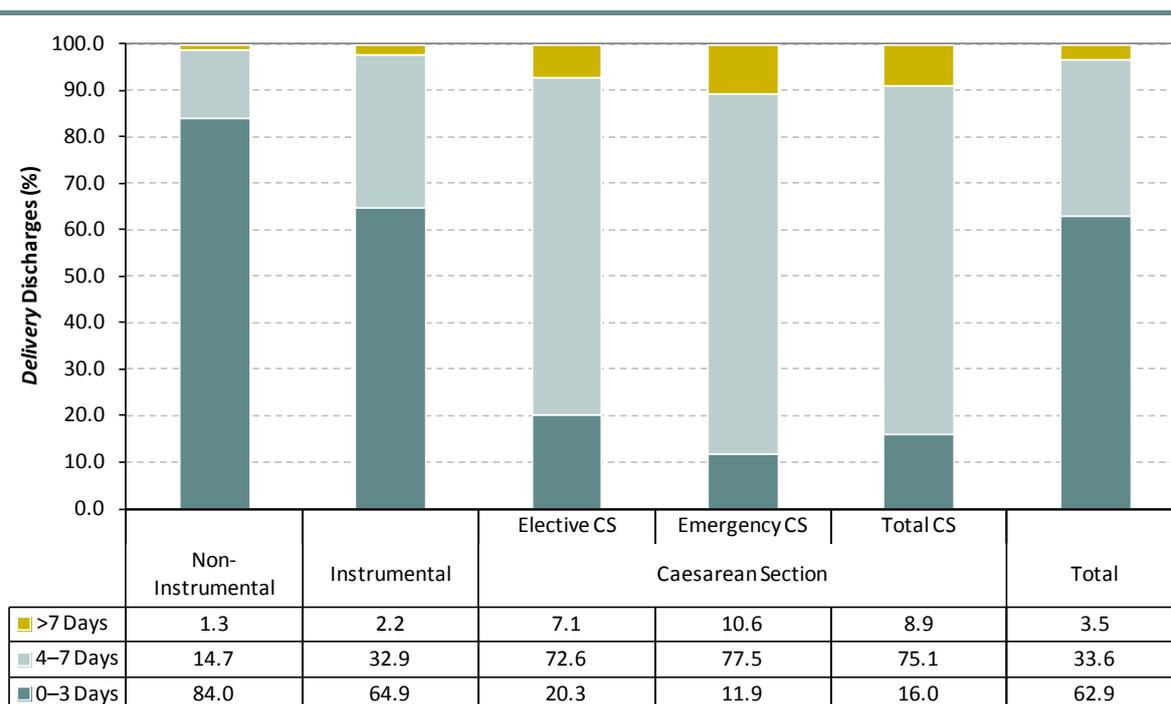
| | | Delivery In-Patient Length of Stay ^b | | | | | | | | | | | |
|--------------------|----------------------------------|---|----------|--------------|----------|-------------------|----------|--------------|----------|------------|----------|---------------------------|----------|
| | | Non-Instrumental | | Instrumental | | Caesarean Section | | | | | | Total Delivery Discharges | |
| | | | | | | Elective CS | | Emergency CS | | Total CS | | | |
| | | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median |
| Single | <=7 Days | 2.4 | 2 | 3.1 | 3 | 4.2 | 4 | 4.7 | 5 | 4.5 | 4 | 3.0 | 3 |
| | > 7 Days | 12.4 | 10 | 10.6 | 9 | 15.5 | 12 | 13.4 | 10 | 14.2 | 11 | 13.4 | 10 |
| | Total Single | 2.5 | 2 | 3.3 | 3 | 4.9 | 4 | 5.6 | 5 | 5.3 | 4 | 3.3 | 3 |
| Multiple | <=7 Days | 3.3 | 3 | 4.0 | 4 | 4.8 | 5 | 5.1 | 5 | 4.9 | 5 | 4.4 | 4 |
| | > 7 Days | 13.8 | 10 | 14.4 | 10 | 18.3 | 13 | 15.2 | 11 | 16.8 | 12 | 16.2 | 12 |
| | Total Multiple | 4.3 | 3 | 5.8 | 4 | 7.9 | 5 | 7.6 | 6 | 7.8 | 5 | 6.7 | 5 |
| Total ^a | <=7 Days | 2.4 | 2 | 3.1 | 3 | 4.2 | 4 | 4.7 | 5 | 4.5 | 4 | 3.0 | 3 |
| | > 7 Days | 12.5 | 10 | 11.0 | 9 | 15.9 | 12 | 13.6 | 10 | 14.5 | 11 | 13.7 | 10 |
| | Total Delivery Discharges | 2.5 | 2 | 3.3 | 3 | 5.1 | 4 | 5.6 | 5 | 5.4 | 5 | 3.4 | 3 |

Notes: Percentage columns are subject to rounding.

Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

a Outcome of Delivery is 'unspecified' for 11 discharges; these are not included here due to the small numbers.

b *Delivery* discharges are all in-patients.

FIGURE 4.5 *Delivery Discharges: Method of Delivery by In-Patient Length of Stay (%)*

Notes: Percentage columns are subject to rounding.

Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

4.3.3 *Delivery Discharges: Age*

Table 4.4 and Figure 4.6 disaggregate *Delivery* discharges by method of delivery and mother's age.

Discharges

- For all ages up to 44 years the majority of deliveries were non-instrumental.
- A higher proportion of older women delivered by elective Caesarean section (20.5 per cent for women aged 35–44 compared to 11.3 per cent for women aged 25–34).
- For women aged 45 years and over, 55.5 per cent delivered by Caesarean section and 34.2 per cent had non-instrumental deliveries.

Length of Stay

- In-patient mean length of stay were shortest for non-instrumental deliveries for all age groups, this ranged from 2.5 days to 2.8 days across all age groups.
- The in-patient mean length of stay for Caesarean section deliveries was highest for women aged 45 years and over (7.6 days).
- In-patient mean length of stay varied from 3.1 days for mothers aged 20–24 years to 5.6 days for mothers aged 45 years and over for total *Delivery* discharges.

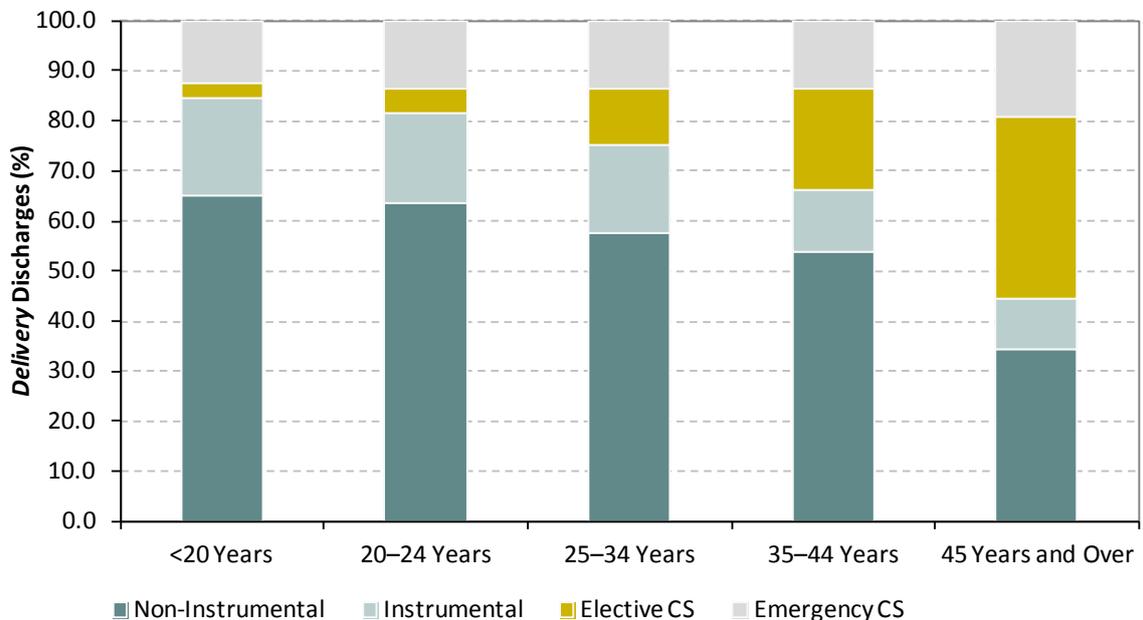
TABLE 4.4 Delivery Discharges: Method of Delivery by Mother’s Age (N, % and Length of Stay)

| | Delivery Discharges | | | | | | | | | | | |
|----------------------------------|---------------------|-------------|---------------|-------------|-------------------|-------------|--------------|-------------|---------------|-------------|---------------------------|------------|
| | Non-Instrumental | | Instrumental | | Caesarean Section | | | | | | Total Delivery Discharges | |
| | | | | | Elective CS | | Emergency CS | | Total CS | | | |
| | N | % | N | % | N | % | N | % | N | % | N | % |
| <20 Years | 1,327 | 65.0 | 400 | 19.6 | 57 | 2.8 | 257 | 12.6 | 314 | 15.4 | 2,041 | 100 |
| 20–24 Years | 5,074 | 63.4 | 1,457 | 18.2 | 395 | 4.9 | 1,079 | 13.5 | 1,474 | 18.4 | 8,005 | 100 |
| 25–34 Years | 24,556 | 57.5 | 7,531 | 17.6 | 4,806 | 11.3 | 5,779 | 13.5 | 10,585 | 24.8 | 42,672 | 100 |
| 35–44 Years | 10,637 | 53.7 | 2,438 | 12.3 | 4,062 | 20.5 | 2,674 | 13.5 | 6,736 | 34.0 | 19,811 | 100 |
| 45 Years and Over | 50 | 34.2 | 15 | 10.3 | 53 | 36.3 | 28 | 19.2 | 81 | 55.5 | 146 | 100 |
| Total Delivery Discharges | 41,644 | 57.3 | 11,841 | 16.3 | 9,373 | 12.9 | 9,817 | 13.5 | 19,190 | 26.4 | 72,675 | 100 |

| | Delivery In-Patient Length of Stay ^a | | | | | | | | | | | |
|----------------------------------|---|----------|--------------|----------|-------------------|----------|--------------|----------|------------|----------|---------------------------|----------|
| | Non-Instrumental | | Instrumental | | Caesarean Section | | | | | | Total Delivery Discharges | |
| | | | | | Elective CS | | Emergency CS | | Total CS | | | |
| | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median | Mean | Median |
| <20 Years | 2.7 | 3 | 3.2 | 3 | 5.7 | 5 | 5.5 | 5 | 5.6 | 5 | 3.3 | 3 |
| 20–24 Years | 2.5 | 2 | 3.2 | 3 | 5.0 | 4 | 5.2 | 5 | 5.2 | 4 | 3.1 | 3 |
| 25–34 Years | 2.5 | 2 | 3.3 | 3 | 4.9 | 4 | 5.5 | 5 | 5.3 | 4 | 3.3 | 3 |
| 35–44 Years | 2.6 | 2 | 3.4 | 3 | 5.2 | 4 | 6.0 | 5 | 5.5 | 5 | 3.7 | 3 |
| 45 Years and Over | 2.8 | 3 | 4.1 | 3 | 8.0 | 5 | 6.9 | 5 | 7.6 | 5 | 5.6 | 4 |
| Total Delivery Discharges | 2.5 | 2 | 3.3 | 3 | 5.1 | 4 | 5.6 | 5 | 5.4 | 5 | 3.4 | 3 |

Notes: Percentage columns are subject to rounding.
 Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).
 a *Delivery* discharges are all in-patients.

FIGURE 4.6 Delivery Discharges: Method of Delivery by Mother’s Age (%)

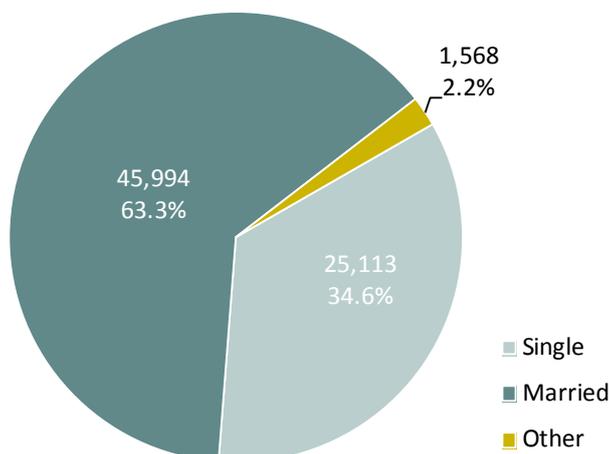


Notes: Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

4.3.4 Delivery Discharges: Marital Status

Marital status for *Delivery* discharges is presented in Figure 4.7 and shows that 63.3 per cent of *Delivery* discharges were married women while 34.6 per cent were single.

FIGURE 4.7 *Delivery Discharges: Marital Status (N, %)*



Notes: Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

4.3.5 Delivery Discharges: Public/Private Status¹⁶

Table 4.5 and Figure 4.8 disaggregate *Delivery* discharges by method of delivery and public/private status.

Discharges

- Over 75 per cent of *Delivery* discharges were treated on a public basis (see Figure 4.8).
- Of *Delivery* discharges treated on a private basis, 48.0 per cent had a non-instrumental delivery, 17.3 per cent had an instrumental delivery, while the remaining 34.7 per cent were delivered by Caesarean Section.
- Of *Delivery* discharges treated on a public basis, 60.3 per cent had a non-instrumental delivery, 16.0 per cent had an instrumental delivery, while the remaining 23.8 per cent were delivered by Caesarean Section.
- Almost 21 per cent of *Delivery* discharges treated on a private basis had an elective Caesarean section compared to 10.3 per cent of discharges who were treated publicly.

Length of Stay

- *Delivery discharges* treated on a private basis had a longer in-patient mean length of stay than those treated on a public basis for both non-instrumental

¹⁶ See Section 2.2.3 for definition of public/private status.

(2.8 days compared to 2.5 days) and instrumental deliveries (3.4 days compared to 3.3 days).

- A higher in-patient mean length of stay was recorded for emergency Caesarean section deliveries treated on a private basis compared to those treated on a public basis (5.9 days compared to 5.6 days).

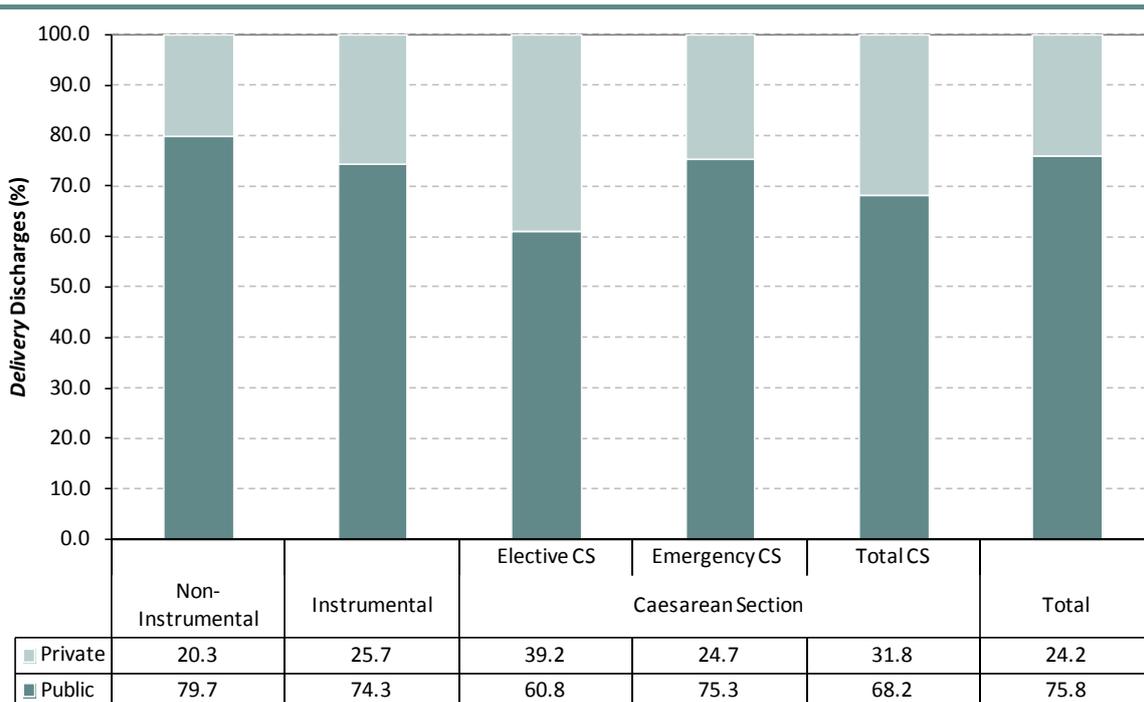
TABLE 4.5 Delivery Discharges: Method of Delivery by Public/Private Status (N, % and Length of Stay)

| | Delivery Discharges | | | | | | | | | | | |
|----------------------------------|---------------------|-------------|---------------|-------------|-------------------|-------------|--------------|-------------|---------------|-------------|---------------------------|------------|
| | Non-Instrumental | | Instrumental | | Caesarean Section | | | | | | Total Delivery Discharges | |
| | N | % | N | % | Elective CS | | Emergency CS | | Total CS | | N | % |
| Public | 33,197 | 60.3 | 8,803 | 16.0 | 5,696 | 10.3 | 7,390 | 13.4 | 13,086 | 23.8 | 55,086 | 100 |
| Private | 8,447 | 48.0 | 3,038 | 17.3 | 3,677 | 20.9 | 2,427 | 13.8 | 6,104 | 34.7 | 17,589 | 100 |
| Total Delivery Discharges | 41,644 | 57.3 | 11,841 | 16.3 | 9,373 | 12.9 | 9,817 | 13.5 | 19,190 | 26.4 | 72,675 | 100 |

| | Delivery In-Patient Length of Stay ^a | | | | | | | | | | | |
|----------------------------------|---|----------|--------------|----------|-------------------|----------|--------------|----------|------------|----------|---------------------------|----------|
| | Non-Instrumental | | Instrumental | | Caesarean Section | | | | | | Total Delivery Discharges | |
| | Mean | Median | Mean | Median | Elective CS | | Emergency CS | | Total CS | | Mean | Median |
| Public | 2.5 | 2 | 3.3 | 3 | 5.1 | 4 | 5.6 | 5 | 5.4 | 4 | 3.3 | 3 |
| Private | 2.8 | 3 | 3.4 | 3 | 5.0 | 4 | 5.9 | 5 | 5.4 | 5 | 3.8 | 3 |
| Total Delivery Discharges | 2.5 | 2 | 3.3 | 3 | 5.1 | 4 | 5.6 | 5 | 5.4 | 5 | 3.4 | 3 |

Notes: Percentage columns are subject to rounding.
 Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).
 a *Delivery* discharges are all in-patients.

FIGURE 4.8 Delivery Discharges: Method of Delivery by Public/Private Status (%)



Note: Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

4.3.6 Delivery Discharges: Day of Admission

Table 4.6 disaggregates *Delivery* discharges by method of delivery and day of admission.

- Admissions were most frequent midweek with 16.2 per cent of *Delivery* discharges admitted on both Tuesday and Wednesday.
- Caesarean section admissions were most frequent on Mondays (18.7 per cent). At the weekend, 9.1 per cent of elective Caesarean sections were admitted compared to 21.7 per cent of emergency Caesarean sections.

TABLE 4.6 *Delivery* Discharges: Method of Delivery by Day of Admission (N, %)

| | Non-Instrumental | | Instrumental | | Caesarean Section | | | | | | Total <i>Delivery</i> Discharges | |
|---|------------------|------------|---------------|------------|-------------------|------------|--------------|------------|---------------|------------|----------------------------------|------------|
| | N | % | N | % | Elective CS | | Emergency CS | | Total CS | | N | % |
| | | | | | N | % | N | % | N | % | | |
| Monday | 6,264 | 15.0 | 1,877 | 15.9 | 1,866 | 19.9 | 1,728 | 17.6 | 3,594 | 18.7 | 11,735 | 16.1 |
| Tuesday | 6,510 | 15.6 | 1,863 | 15.7 | 1,776 | 18.9 | 1,591 | 16.2 | 3,367 | 17.5 | 11,740 | 16.2 |
| Wednesday | 6,482 | 15.6 | 1,850 | 15.6 | 1,908 | 20.4 | 1,538 | 15.7 | 3,446 | 18.0 | 11,778 | 16.2 |
| Thursday | 6,597 | 15.8 | 1,832 | 15.5 | 1,721 | 18.4 | 1,549 | 15.8 | 3,270 | 17.0 | 11,699 | 16.1 |
| Friday | 5,877 | 14.1 | 1,606 | 13.6 | 1,255 | 13.4 | 1,286 | 13.1 | 2,541 | 13.2 | 10,024 | 13.8 |
| Saturday | 4,701 | 11.3 | 1,282 | 10.8 | 232 | 2.5 | 921 | 9.4 | 1,153 | 6.0 | 7,136 | 9.8 |
| Sunday | 5,213 | 12.5 | 1,531 | 12.9 | 615 | 6.6 | 1,204 | 12.3 | 1,819 | 9.5 | 8,563 | 11.8 |
| Total <i>Delivery</i> Discharges | 41,644 | 100 | 11,841 | 100 | 9,373 | 100 | 9,817 | 100 | 19,190 | 100 | 72,675 | 100 |

Notes: Percentage columns are subject to rounding.
Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

4.3.7 Delivery Discharges: Morbidity Analysis

Section 4.3.7 focuses on the diagnoses and procedures recorded for *Delivery* discharges reported to HIPE by acute public hospitals.

4.3.7.1 Top 20 Principal Diagnoses

The mean number of all diagnoses recorded for total *Delivery* discharges was 3.3. Table 4.7 outlines the top 20 principal diagnoses recorded for *Delivery* discharges. Almost 54 per cent of discharges record one of the top three principal diagnoses. Over 93 per cent record one of the top 20 principal diagnoses.¹⁷

- A principal diagnosis of *perineal laceration during delivery* was recorded for 23.3 per cent of total *Delivery* discharges. This was followed by *Single spontaneous delivery* (15.5 per cent) and *Labour and delivery complicated by fetal stress [distress]* (15.1 per cent).

TABLE 4.7 *Delivery* Discharges: Top 20 Principal Diagnoses (N, % and Length of Stay)

| Principal Diagnoses – Top 20 | | N | % of Top 20 Principal Diagnoses For Deliveries | % of Total Deliveries | In-Patient Mean LOS ^a (≤ 7 Days) |
|--|--|---------------|--|-----------------------|---|
| O70 | Perineal laceration during delivery | 16,899 | 24.9 | 23.3 | 2.4 |
| O80 | Single spontaneous delivery ^b | 11,231 | 16.5 | 15.5 | 2.0 |
| O68 | Labour and delivery complicated by fetal stress [distress] | 10,966 | 16.2 | 15.1 | 3.3 |
| O34 | Maternal care for known or suspected abnormality of pelvic organs (includes scar from previous Caesarean sections) | 5,919 | 8.7 | 8.1 | 4.1 |
| O48 | Prolonged pregnancy (≥42 weeks) | 3,333 | 4.9 | 4.6 | 3.2 |
| O63 | Long labour (>18 hours) | 2,928 | 4.3 | 4 | 3.8 |
| O62 | Abnormalities of forces of labour | 2,575 | 3.8 | 3.5 | 3.6 |
| O32 | Maternal care for known or suspected malpresentation of fetus | 2,114 | 3.1 | 2.9 | 4.2 |
| O36 | Maternal care for other known or suspected fetal problems | 2,013 | 3.0 | 2.8 | 3.4 |
| O42 | Premature rupture of membranes | 1,767 | 2.6 | 2.4 | 3.7 |
| O13 | Gestational [pregnancy-induced] hypertension without significant proteinuria | 1,089 | 1.6 | 1.5 | 4.2 |
| O65 | Labour and delivery affected by maternal pelvic abnormality | 1,053 | 1.6 | 1.4 | 2.8 |
| O64 | Labour and delivery affected by malposition and malpresentation of fetus | 1,046 | 1.5 | 1.4 | 3.9 |
| O99 | Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium | 950 | 1.4 | 1.3 | 3.4 |
| O60 | Preterm labour and delivery | 850 | 1.3 | 1.2 | 3.6 |
| O75 | Other complications of labour and delivery, not elsewhere classified | 809 | 1.2 | 1.1 | 3.1 |
| O14 | Gestational [pregnancy-induced] hypertension with significant proteinuria | 765 | 1.1 | 1.1 | 4.6 |
| O24 | Diabetes mellitus in pregnancy | 555 | 0.8 | 0.8 | 3.3 |
| O41 | Other disorders of amniotic fluid and membranes | 532 | 0.8 | 0.7 | 3.6 |
| O72 | Postpartum haemorrhage | 502 | 0.7 | 0.7 | 2.9 |
| Top 20 Principal Diagnoses for <i>Delivery</i> Discharges | | 67,896 | 100 | 93.4 | 3.0 |
| <i>Delivery</i> Discharges – Total | | 72,675 | - | - | 3.0 |

Notes: Percentage columns are subject to rounding.

Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

a *Delivery* discharges are all in-patients.

b O80 *Single spontaneous delivery* is intended for single spontaneous vaginal deliveries: without abnormality/complication classifiable elsewhere in Chapter 15 *Pregnancy, childbirth and the puerperium* and without manipulation or instrumentation. [Extracted from NCCH eBook, July 2008, *Pregnancy, Childbirth and the Puerperium*].

¹⁷ See Section Three for details of clinical coding and classification.

4.3.7.2 Top 10 Principal Procedures

In 2010, 93.1 per cent of *Delivery* discharges had a principal procedure reported. The mean number of all procedures recorded for total *Delivery* discharges was 2.7. Almost all (98.0 per cent) of these deliveries were accounted for in the top ten principal procedures (see Table 4.8).¹⁸

- The top principal procedure was *Caesarean section*, which was recorded in 28.2 per cent of *Delivery* discharges with a principal procedure (see Section 4.3.8 for more information on Caesarean Section deliveries) This was followed by *postpartum suture* (26.9 per cent) and *vacuum extraction* (10.6 per cent).

TABLE 4.8 *Delivery* Discharges: Top 10 Principal Procedure Blocks (N, % and Length of Stay)

| Principal Procedure – Top 10 | | N | % of Top 10 Procedures for Deliveries | % of Deliveries with a Principal Procedure | In-Patient Mean LOS ^a (≤ 7 Days) |
|---|--|---------------|---------------------------------------|--|---|
| 1340 | Caesarean section ^b | 19,097 | 28.8 | 28.2 | 4.5 |
| 1344 | Postpartum suture | 18,163 | 27.4 | 26.9 | 2.5 |
| 1338 | Vacuum extraction | 7,163 | 10.8 | 10.6 | 3.0 |
| 1343 | Other procedures associated with delivery ^c | 5,384 | 8.1 | 8 | 2.9 |
| 1335 | Medical or surgical augmentation of labour | 4,398 | 6.6 | 6.5 | 2.1 |
| 1334 | Medical or surgical induction of labour | 4,197 | 6.3 | 6.2 | 2.9 |
| 1333 | Analgesia and anaesthesia during labour and delivery procedure | 3,802 | 5.7 | 5.6 | 2.4 |
| 1337 | Forceps delivery | 2,408 | 3.6 | 3.6 | 3.3 |
| 1336 | Spontaneous vertex delivery ^d | 1,061 | 1.6 | 1.6 | 1.9 |
| 1345 | Postpartum evacuation of uterus | 559 | 0.8 | 0.8 | 2.9 |
| Top 20 Principal Procedure Blocks for Deliveries | | 66,232 | 100 | 98.0 | 3.1 |
| Delivery Discharges with a Principal Procedure – Total | | 67,646 | - | - | 3.1 |
| Delivery Discharges – Total (including those with and without a Principal Procedure) | | 72,675 | - | - | 3.0 |

Notes: Percentage columns are subject to rounding.
 Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).
 a *Delivery* discharges are all in-patients.
 b As one principal procedure and up to nineteen secondary procedures may be collected as applicable for each discharge, the number of principal procedure Caesarean sections may not equal the number of total Caesarean sections.
 c Includes episiotomy.
 d This code is not required for all spontaneous vertex deliveries as the delivery can be assumed to be normal when there is an absence of procedure codes for interventions such as Caesarean, forceps delivery, etc.[Coding Matters Newsletter, NCCH, Volume 5 Number 3, January 1999]

¹⁸ See Section Three for details of clinical coding and classification.

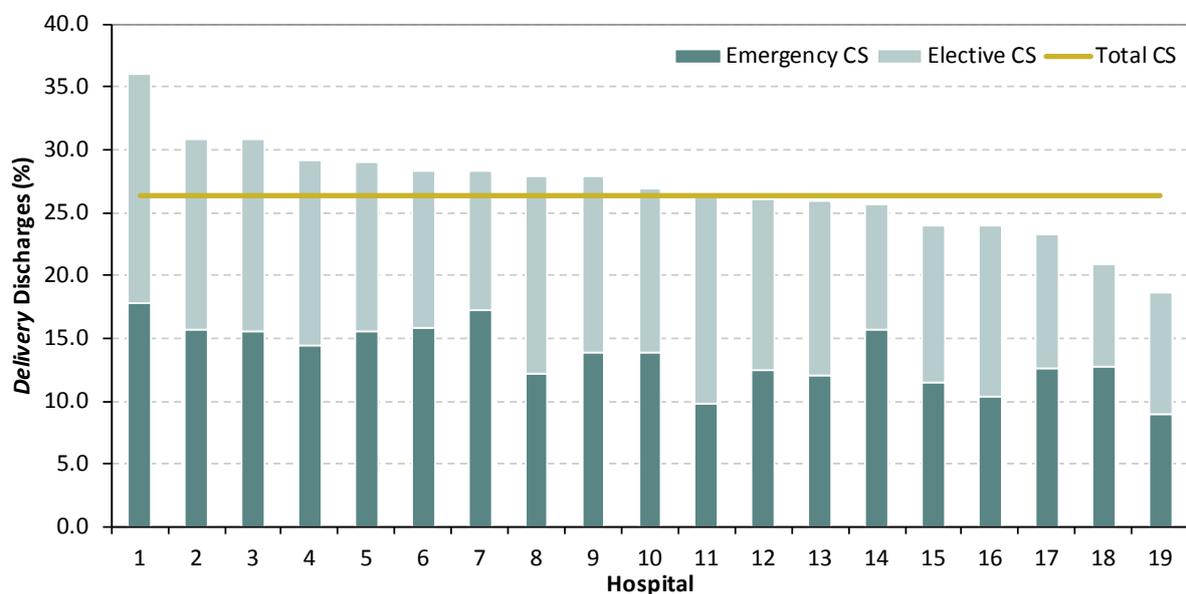
4.3.8 Delivery Discharges: Caesarean Section Deliveries

A Caesarean section was reported for 19,190 (26.4 per cent) *Delivery* discharges. Section 4.3.8 presents additional information on discharges who underwent a Caesarean section procedure.

4.3.8.1 Caesarean Section by Hospital¹⁹

Figure 4.9 presents the proportion of *Delivery* discharges with an emergency/elective Caesarean section procedure by (anonymised) hospital. It shows that the proportion ranged from 18.6 per cent to 36.1 per cent.

FIGURE 4.9 *Delivery* Discharges: Caesarean Section by Hospital (%)^a



- Notes: Percentage columns are subject to rounding.
 Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie). Three hospitals had <10 deliveries and were excluded from this presentation.
- a The previously published version of this figure (December 2011) was mislabelled. The amended version is now presented (October 2013).

¹⁹ The national Caesarean section rate, which is based on total number of maternities or births occurring in Ireland, is reported in the *Perinatal Statistics Reports*. See www.nprs.ie.

4.3.8.2 Previous Caesarean Section by Method of Delivery

Table 4.9 disaggregates *Delivery* discharges into two categories according to their Caesarean section history.²⁰ *Previous Caesarean* refers to women with a diagnosis of delivery this episode where evidence of a previous Caesarean section has been coded.

- Almost 12 per cent of *Delivery* discharges had a previous Caesarean section.
- Of those women who had a previous Caesarean section 85.7 per cent had a Caesarean section procedure (70.8 per cent by elective Caesarean section) this episode, 9.5 per cent had a non-instrumental delivery and 4.7 per cent had an instrumental delivery.
- Over 88 per cent of deliveries were to previous non-Caesarean or first time mothers; 18.6 per cent delivered by Caesarean section this episode, 63.6 per cent had a non-instrumental delivery and 17.8 per cent had an instrumental delivery.

TABLE 4.9 *Delivery* Discharges: Previous Caesarean Section by Method of Delivery (N, %)

| | Previous Caesarean Delivery ^a | | Previous Non-Caesarean or First Time Mother ^b | | Total <i>Delivery</i> Discharges | |
|---|--|------------|--|------------|----------------------------------|------------|
| | N | % | N | % | N | % |
| Non-Instrumental | 801 | 9.5 | 40,843 | 63.6 | 41,644 | 57.3 |
| Instrumental | 399 | 4.7 | 11,442 | 17.8 | 11,841 | 16.3 |
| Caesarean Section | 7,209 | 85.7 | 11,981 | 18.6 | 19,190 | 26.4 |
| Elective | 5,951 | 70.8 | 3,422 | 5.3 | 9,373 | 12.9 |
| Emergency | 1,258 | 15.0 | 8,559 | 13.3 | 9,817 | 13.5 |
| Total <i>Delivery</i> Discharges | 8,409 | 100 | 64,266 | 100 | 72,675 | 100 |

Notes: Percentage columns are subject to rounding.

Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

a Includes *Maternal care due to uterine scar from previous surgery* (O34.2) and *Vaginal delivery following previous Caesarean section* (O75.7), which should be assigned for all cases where a trial of Caesarean scar proceeds to a vaginal delivery.

b These are mothers who have never had a Caesarean section. This category includes mothers that have previous delivered vaginally and first time mothers.

²⁰ Parity was not available in HIPE in 2010 but its introduction to the HIPE system in 2011 will allow more in-depth analysis of this in future years.

4.3.8.3 Caesarean Section Deliveries: Top 10 Principal Diagnoses

Table 4.10 presents the top ten principal diagnoses for *Delivery* discharges with a Caesarean section procedure. The top three principal diagnoses accounted for over 56 per cent of all principal diagnoses within this category:

- Over 30 per cent of Caesarean section *Delivery* discharges had a principal diagnosis of *Maternal care for known or suspected abnormality of pelvic organs*. Of these, almost 94 per cent were elective Caesarean sections.
- Exactly 16 per cent of Caesarean section *Delivery* discharges had a principal diagnosis of *Labour and delivery complicated by fetal stress [distress]*. Of these, over 97 per cent were emergency Caesarean sections.

TABLE 4.10 *Delivery* Discharges: Top 10 Principal Diagnoses for Discharges with a Caesarean Section Procedure (N, Col % and Row %)

| | | Caesarean Section | | | | | | | | |
|-----|---|-------------------|------------|-------------|--------------|------------|-------------|---|------------|------------|
| | | Elective CS | | | Emergency CS | | | Total Caesarean Section <i>Delivery</i> Discharges | | |
| | | N | Col % | Row % | N | Col % | Row % | N | Col % | Row % |
| O34 | Maternal care for known or suspected abnormality of pelvic organs | 5,410 | 57.7 | 93.6 | 368 | 3.7 | 6.4 | 5,778 | 30.1 | 100 |
| O68 | Labour and delivery complicated by fetal stress [distress] | 77 | 0.8 | 2.5 | 2,988 | 30.4 | 97.5 | 3,065 | 16.0 | 100 |
| O32 | Maternal care for known or suspected malpresentation of fetus | 1,638 | 17.5 | 84.7 | 295 | 3.0 | 15.3 | 1,933 | 10.1 | 100 |
| O62 | Abnormalities of forces of labour | 25 | 0.3 | 2.6 | 941 | 9.6 | 97.4 | 966 | 5.0 | 100 |
| O63 | Long labour (>18 hours) | 21 | 0.2 | 2.3 | 898 | 9.1 | 97.7 | 919 | 4.8 | 100 |
| O64 | Labour and delivery affected by malposition and malpresentation of fetus | 203 | 2.2 | 25.3 | 598 | 6.1 | 74.7 | 801 | 4.2 | 100 |
| O36 | Maternal care for other known or suspected fetal problems | 330 | 3.5 | 46.7 | 377 | 3.8 | 53.3 | 707 | 3.7 | 100 |
| O48 | Prolonged pregnancy (≥42 weeks) | 36 | 0.4 | 6.3 | 539 | 5.5 | 93.7 | 575 | 3.0 | 100 |
| O61 | Failed induction of labour | 23 | 0.2 | 4.9 | 448 | 4.6 | 95.1 | 471 | 2.5 | 100 |
| O14 | Gestational [pregnancy-induced] hypertension with significant proteinuria | 133 | 1.4 | 30.2 | 307 | 3.1 | 69.8 | 440 | 2.3 | 100 |
| | All Other Diagnoses | 1,477 | 15.8 | 41.8 | 2,058 | 21.0 | 58.2 | 3,535 | 18.4 | 100 |
| | Total Caesarean Section <i>Delivery</i> Discharges | 9,373 | 100 | 48.8 | 9,817 | 100 | 51.2 | 19,190 | 100 | 100 |

Notes: Percentage columns are subject to rounding.

Data represent *Delivery* discharges in acute public hospitals reporting to HIPE which have been allocated an admission type *Maternity*. For national statistics on perinatal events in Ireland see the *National Perinatal Reporting System* (www.nprs.ie).

4.4 MATERNITY DISCHARGES – NON-DELIVERIES

Non-Delivery discharges are *Maternity* discharges where admission was related to their obstetrical experience but they did not deliver during that episode of care. In 2010 there were 63,906 *Non-Delivery* discharges reported to HIPE (46.8 per cent of total *Maternity* discharges and 4.4 per cent of total HIPE discharges). *Non-Delivery* discharges are examined by day patient activity in Tables 4.11–4.12 and Figures 4.10–4.12 and in-patient activity in Tables 4.13–4.14 and Figures 4.13–4.15.

4.4.1 *Non-Delivery* Discharges: Day Patient Activity

Day patients accounted for 16.1 per cent (10,287) of *Non-Delivery* discharges.

- The top two principal diagnoses for *Non-Delivery* day patient discharges were; *special screening examination for other diseases and disorders* (17.4 per cent), followed by *other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium* (13.2 per cent).
- *Non-Delivery* day patient discharges recorded a principal procedure for 29.7 per cent of discharges. Of these the top two principal procedures were; *curettage and evacuation of uterus* (54.3 per cent), and *other cardiovascular diagnostic tests, measures or investigations* (19.6 per cent).

4.4.2 *Non-Delivery* Discharges: In-Patient Activity

In-patients accounted for 83.9 per cent (53,619) of *Non-Delivery* discharges.

- The top two principal diagnoses for *Non-Delivery* in-patient discharges were; *other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium* (23.8 per cent), followed by *false labour* (14.4 per cent).
- *Non-Delivery* in-patient discharges recorded a principal procedure for 19.0 per cent of discharges. Of these the top two principal procedures were; *curettage and evacuation of uterus* (34.1 per cent), and *administration of pharmacotherapy* (18.1 per cent).
- At 2.0 days, the longest mean length of stay for *Non-Delivery* in-patient discharges staying seven days or less in the top 10 principal diagnoses was recorded for *excessive vomiting in pregnancy*.
- In the top 10 principal procedures for *Non-Delivery* in-patient discharges staying seven days or less, mean length of stay ranged from 1.3 days for *curettage and evacuation of uterus* to 2.4 days for *generalised allied health interventions*.

TABLE 4.11 *Non-Delivery Discharges: Day Patient Top 10 Principal Diagnosis (N, %)*

| | | N | % of Top 10 Principal Diagnoses For Day Patients | % of Total Day Patients |
|--|--|---------------|--|-------------------------|
| Z13 | Special screening examination for other diseases and disorders | 1,793 | 19.2 | 17.4 |
| O99 | Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium | 1,362 | 14.6 | 13.2 |
| O02 | Other abnormal products of conception | 1,338 | 14.4 | 13.0 |
| Z36 | Antenatal screening | 1,320 | 14.2 | 12.8 |
| O03 | Spontaneous abortion (miscarriage) | 1,230 | 13.2 | 12.0 |
| O20 | Haemorrhage in early pregnancy | 1,048 | 11.2 | 10.2 |
| Z34 | Supervision of normal pregnancy | 481 | 5.2 | 4.7 |
| O13 | Gestational [pregnancy-induced] hypertension without significant proteinuria | 352 | 3.8 | 3.4 |
| O14 | Gestational [pregnancy-induced] hypertension with significant proteinuria | 205 | 2.2 | 2.0 |
| O24 | Diabetes mellitus in pregnancy | 187 | 2.0 | 1.8 |
| Top 10 Principal Diagnoses for Day Patients – Total | | 9,316 | 100 | 90.6 |
| Day Patients – Total | | 10,287 | - | - |

TABLE 4.12 *Non-Delivery Discharges: Day Patient Top 10 Principal Procedures (N, %)*

| | | N | % of Top 10 Principal Procedures For Day Patients | % of Total Day Patients with a Principal Procedure |
|--|---|---------------|---|--|
| 1265 | Curettage and evacuation of uterus | 1,660 | 56.1 | 54.3 |
| 1857 | Other cardiovascular diagnostic tests, measures or investigations | 599 | 20.2 | 19.6 |
| 1920 | Administration of pharmacotherapy | 388 | 13.1 | 12.7 |
| 1916 | Generalised allied health interventions | 72 | 2.4 | 2.4 |
| 0063 | Administration of anaesthetic agent around other peripheral nerve | 60 | 2.0 | 2.0 |
| 1893 | Administration of blood and blood products | 51 | 1.7 | 1.7 |
| 1274 | Application, insertion or removal procedures on cervix | 42 | 1.4 | 1.4 |
| 1884 | Immunisation | 40 | 1.4 | 1.3 |
| 1256 | Procedures for management of ectopic pregnancy | 29 | 1.0 | 0.9 |
| 1330 | Antepartum application, insertion or removal procedures | 19 | 0.6 | 0.6 |
| Top 10 Principal Procedures for Day Patients – Total | | 2,960 | 100 | 96.9 |
| Day Patients with a Principal Procedure – Total | | 3,055 | - | 100 |
| Day Patients – Total (including those with and without a procedure) | | 10,287 | - | - |

FIGURE 4.10 *Non-Delivery Discharges: Day Patient Age (N, %)*

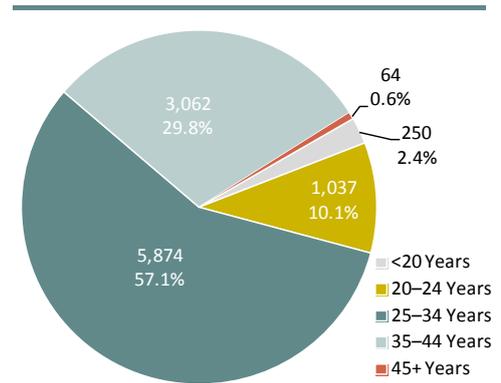


FIGURE 4.11 *Non-Delivery Discharges: Day Patient Marital Status (N, %)*

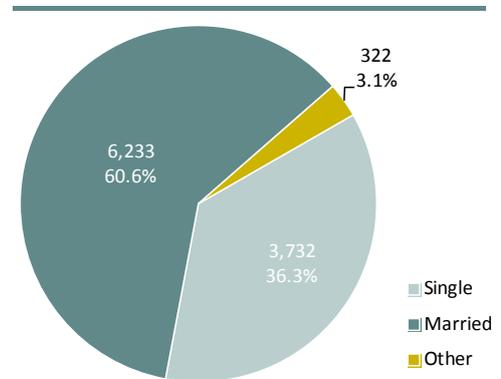


FIGURE 4.12 *Non-Delivery Discharges: Day Patient Public/Private Status (N, %)*

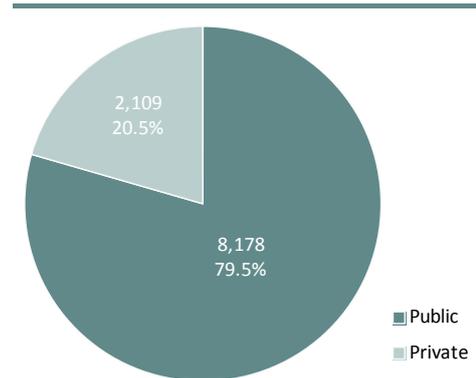


TABLE 4.13 *Non-Delivery Discharges: In-Patient Top 10 Principal Diagnosis (N, %, and Length of Stay)*

| | | N | % of Top 10 Principal Diagnoses for In-Patients | % of Total In-Patients | Mean LOS (≤7 Days) |
|---|--|---------------|---|------------------------|--------------------|
| 099 | Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium | 12,772 | 30.5 | 23.8 | 1.5 |
| O47 | False labour | 7,726 | 18.5 | 14.4 | 1.2 |
| O03 | Spontaneous abortion (miscarriage) | 3,837 | 9.2 | 7.2 | 1.3 |
| O21 | Excessive vomiting in pregnancy | 3,424 | 8.2 | 6.4 | 2.0 |
| O02 | Other abnormal products of conception | 2,708 | 6.5 | 5.1 | 1.2 |
| O13 | Gestational [pregnancy-induced] hypertension without significant proteinuria | 2,563 | 6.1 | 4.8 | 1.6 |
| O46 | Antepartum haemorrhage, not elsewhere classified | 2,545 | 6.1 | 4.7 | 1.5 |
| O20 | Haemorrhage in early pregnancy | 2,315 | 5.5 | 4.3 | 1.2 |
| Z36 | Antenatal screening | 2,184 | 5.2 | 4.1 | 1.1 |
| O23 | Infections of genitourinary tract in pregnancy | 1,750 | 4.2 | 3.3 | 1.9 |
| Top 10 Principal Diagnoses for In-Patients – Total | | 41,824 | 100 | 78.0 | 1.4 |
| In-Patients – Total | | 53,619 | - | - | 1.5 |

TABLE 4.14 *Non-Delivery Discharges: In-Patient Top 10 Principal Procedures (N, %, and Length of Stay)*

| | | N | % of Top 10 Principal Procedures for In-Patients | % of Total In-Patients with a Principal Procedure | Mean LOS (≤7 Days) |
|---|---|---------------|--|---|--------------------|
| 1265 | Curettage and evacuation of uterus | 3,487 | 38.7 | 34.1 | 1.3 |
| 1920 | Administration of pharmacotherapy | 1,846 | 20.5 | 18.1 | 1.8 |
| 1916 | Generalised allied health interventions | 1,193 | 13.3 | 11.7 | 2.4 |
| 1884 | Immunisation | 770 | 8.6 | 7.5 | 1.4 |
| 1256 | Procedures for management of ectopic pregnancy | 688 | 7.6 | 6.7 | 2.3 |
| 1330 | Antepartum application, insertion or removal procedures | 327 | 3.6 | 3.2 | 1.5 |
| 1344 | Postpartum suture | 198 | 2.2 | 1.9 | 2.3 |
| 1274 | Application, insertion or removal procedures on cervix | 192 | 2.1 | 1.9 | 1.5 |
| 1345 | Postpartum evacuation of uterus | 167 | 1.9 | 1.6 | 2.3 |
| 1334 | Medical or surgical induction of labour | 131 | 1.5 | 1.3 | 1.9 |
| Top 10 Principal Procedures for In-Patients – Total | | 8,999 | 100 | 88.1 | 1.7 |
| In-Patients with a Principal Procedure – Total | | 10,212 | - | - | 1.8 |
| In-Patients – Total (including those with and without a procedure) | | 53,619 | - | - | 1.5 |

FIGURE 4.13 *Non-Delivery Discharges: In-Patient Age (N, %)*

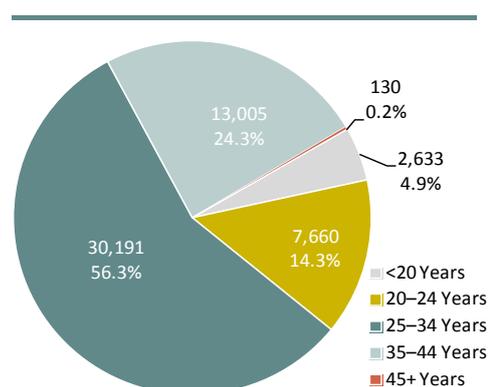


FIGURE 4.14 *Non-Delivery Discharges: In-Patient Marital Status (N, %)*

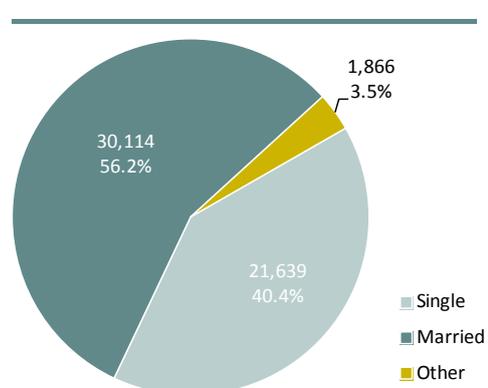
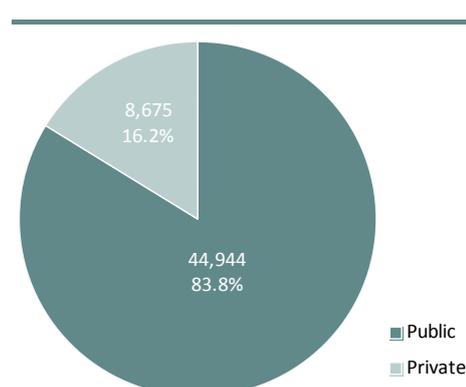


FIGURE 4.15 *Non-Delivery Discharges: In-Patient Public/Private Status (N, %)*



Case Mix Analysis SECTION

2010

FIVE

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Total Discharges 1,447,108

5.1 INTRODUCTION

The analysis in this Section focuses on the case mix classification for all discharges reported to the Hospital In-Patient Enquiry (HIPE) scheme in 2010. Hospital case mix may be defined as 'the proportion of cases of each disease and health problem treated in the hospital'.¹

- Section 5.1 presents a background to the case mix classification applied and details of the assignment of discharges to Major Diagnostic Categories (MDC) and Australian Refined Diagnosis Groups (AR-DRG).
- Section 5.2 presents analysis of HIPE data by case mix for day patient, in-patient and total discharges.

5.1.1 Case Mix Classification

- The DRG scheme enables the disaggregation of patients into homogeneous groups, which undergo similar treatment processes and incur similar levels of resource use.
- The data required for DRG assignment include principal and secondary diagnoses, procedures performed, age, sex and patient destination on discharge from hospital.
- Since the inception of the national case mix programme, the Diagnosis Related Group (DRG) classification scheme has been adopted as the national standard for Ireland.²
- One of the key features of this methodology is the classification of cases into different levels of complexity within AR-DRGs. ICD-10-AM/ACHI/ACS was the coding system used for AR-DRG grouping in 2010.³ As all of the data required for AR-DRG classification are available on the HIPE system, and since diagnoses and procedures are coded with ICD-10-AM/ACHI/ACS, discharges are directly assigned to the AR-DRG system from this database. AR-DRG version 6.0 has been in use in Ireland since 2009 onwards.⁴

¹ Hornbrook, M.C., 1985. Techniques for Assessing Hospital Case Mix', *Annual Review of Public Health*, Vol. 6. p 295–324.

² Wiley, M.M., 2005. 'Diagnosis Related Groups (DRGs): Measuring Hospital Case Mix', in P. Armitage and T. Colton (eds.) *Encyclopaedia of Biostatistics*. Chichester: Wiley and Sons. See also Department of Health and Children, 2004, *The Modernisation of the National Case Mix Programme in Ireland*. Dublin: Department of Health and Children, for information on development of case mix in Ireland.

³ See Section Three for further details on ICD-10-AM/ACHI/ACS.

⁴ For a more detailed description of case mix and its application in Ireland see O'Reilly J., McCarthy B., Wiley, M. M., 2011, 'Ireland: A Review of Casemix applications within the acute public hospital system' in R. Busse, A. Geissler, W. Quentin & M. M. Wiley (eds), *Diagnosis-Related Groups in Europe: Moving Towards Transparency, Efficiency and Quality in Hospitals*. Maidenhead: Open University Press and WHO Regional Office for Europe.

5.1.2 Assignment of Discharges to MDC and AR-DRG

Figure 5.1 shows the steps in AR-DRG assignment;

- The first step in assignment is the classification of discharges by Major Diagnostic Category (MDC). There are 23 MDCs which are essentially primary diagnostic groupings based on the systems of the body, for example nervous system (MDC 1), eye (MDC 2), circulatory system (MDC 5), etc. As not all discharges can be assigned directly to a MDC, there is a category entitled 'unassignable to MDC'.
- To deal with certain categories of high cost discharges, the second step involves a Pre-MDC analysis which can override the initial MDC assignment. Examples of discharges affected include transplants, human immunodeficiency virus (HIV) disease, and multiple significant trauma.⁵
- After assignment to the appropriate MDCs, discharges are assigned to the AR-DRG level. In total, there are 698 AR-DRGs in version 6.0.

FIGURE 5.1 Steps in AR-DRG Assignment



An AR-DRG consists of four alphanumeric characters in the form of 'ADD5'

- 'A' is either a letter (indicating the broad group of the DRG) or an '8' or a '9' (indicating an unrelated operating room procedure DRG or an error DRG, respectively).⁶
- 'DD' identifies the partition to which the adjacent DRG belongs.⁷ Both characters are numbers whose values indicate whether the code is surgical, medical or other. Discharges with a surgical procedure performed are assigned to the surgical AR-DRGs where classification is based on the most resource intensive procedure performed. Medical discharges are assigned to an AR-DRG on the basis of principal diagnosis.

⁵ 'Some episodes involving procedures that are particularly resource-intensive may be assigned to the *Pre-MDC* category (AR-DRGs A01Z–A41B), irrespective of the MDC that would have been assigned on the basis of the principal diagnosis.' Australian Institute of Health and Welfare (2009) *Australian hospital statistics 2007–08*. Canberra: Australian Institute of Health and Welfare. p 276.

⁶ 'Episodes that contain clinically atypical or invalid information are assigned Error DRGs.' Australian Institute of Health and Welfare (2009) *Australian hospital statistics 2007–08*. Canberra: Australian Institute of Health and Welfare. p 276.

⁷ 'An adjacent DRG (ADRG) consists of one or more DRGs generally defined by the same diagnosis or procedure code list. DRGs within an ADRG have differing levels of resource consumption, and are partitioned on the basis of several factors, including complicating diagnoses/procedures, age, and level of comorbid disease and/or clinical complication.' Commonwealth of Australia (Department of Health and Ageing) 2008, *Australian Refined Diagnosis Related Groups, Version 6.0, Definitions Manual*, Volume 1. Canberra: Commonwealth Department of Health and Ageing. p 9.

- 'S' is a complexity split indicator that ranks DRGs within adjacent DRGs on the basis of their level of complexity/resource use, it is either 'A', 'B', 'C', 'D' or 'Z' with, 'A' being the most complex or 'Z' indicating that there is no complexity split.^{8,9} The complexity of the case is determined by particular variables, such as the presence of complications and/or comorbidities (cc), age, or discharge status, which influence the treatment process and/or the pattern of resource utilisation.¹⁰

5.1.2.1 AR-DRG Complexity Split

The AR-DRG complexity split for total discharges is presented in Table 5.1, close to half of total discharges had no complexity split. Over 53 per cent of extended stay in-patients had the highest resource use, these discharges accounted for 10.5 per cent of total discharges within this AR-DRG complexity split indicator.

TABLE 5.1 Total Discharges: AR-DRG Complexity Split (N, %)

| | | Discharges | | | | | | | | | |
|-------------------|--|----------------|------------|----------------|------------|---------------|------------|----------------|------------|------------------|------------|
| | | Day Patients | | In-Patients | | | | | | Total Discharges | |
| | | N | % | Acute | | Extended | | Total | | N | % |
| N | % | | | N | % | N | % | | | | |
| AR-DRG Complexity | A Highest consumption of resources | 6,415 | 0.7 | 67,897 | 11.8 | 8,696 | 53.9 | 76,593 | 12.9 | 83,008 | 5.7 |
| | B Second highest consumption of resources | 188,909 | 22.1 | 264,745 | 46.0 | 5,159 | 32.0 | 269,904 | 45.6 | 458,813 | 31.7 |
| | C Third highest consumption of resources | 152,345 | 17.8 | 28,481 | 5.0 | 546 | 3.4 | 29,027 | 4.9 | 181,372 | 12.5 |
| | D Fourth highest consumption of resources | 355 | 0.0 | 5,494 | 1.0 | 51 | 0.3 | 5,545 | 0.9 | 5,900 | 0.4 |
| | Z No complexity split | 507,594 | 59.3 | 208,736 | 36.3 | 1,685 | 10.4 | 210,421 | 35.6 | 718,015 | 49.6 |
| | Total Discharges | 855,618 | 100 | 575,353 | 100 | 16,137 | 100 | 591,490 | 100 | 1,447,108 | 100 |

Note: Percentage columns are subject to rounding.

⁸ For a more detailed description of how AR-DRGs are numbered see Commonwealth Department of Health and Aged Care, 2008. *Australian Refined Diagnosis Related Groups Version 6.0 Definitions Manual*. Canberra: Commonwealth Department of Health and Ageing. p 4–15.

⁹ Aisbett, C., Wiley, M.M., McCarthy, B., and Mulligan, A., 2007. *Measuring Hospital Case Mix: Evaluation of Alternative Approaches for the Irish Hospital System, Working Paper No. 192*, Dublin: The Economic and Social Research Institute. p 9–10.

¹⁰ Complications may arise during the hospital stay, while comorbidities are assumed to be prior existing conditions which were present at the time of admission.

5.2 ANALYSIS OF HIPE DATA BY CASE MIX

This section includes all discharges reported to HIPE (including *Maternity*). Analysis of 2010 HIPE data by MDC is presented in Table 5.2 and Figures 5.2 and 5.3.

Tables 5.3 to 5.27 represent each MDC (including unassignable to MDC and pre-MDC) and their associated AR-DRGs.

The following analysis is provided for tables 5.3 to 5.15 and 5.17 to 5.27 for each MDC and its associated AR-DRGs.

| Total Day Patients | | |
|-----------------------|---------------------|-------------------------------------|
| In-Patients | Discharges | Elective In-Patients |
| | | Emergency In-Patients ¹¹ |
| | | Total In-Patients |
| | Mean Length of Stay | Elective In-Patients |
| Emergency In-Patients | | |
| Total In-Patients | | |
| Total Discharges | | |

In-patient discharges are made up of elective, emergency and *Maternity* in-patients. The analysis of in-patients presented in this section is based on admission type, indicating the priority of admission, elective or emergency. While the majority of *Maternity* in-patients (97.5 per cent) are assigned to MDC 14, *Pregnancy, Childbirth and the Puerperium* and its associated AR-DRGs (see Tables 5.2 and 5.16), some *Maternity* in-patients may be assigned to other MDCs and their associated AR-DRGs. For these MDCs and AR-DRGs *Maternity* in-patients are not presented separately but are included in overall figure for total in-patients, therefore the sum of elective in-patients and emergency in-patients will not equal total in-patients.¹²

¹¹ HIPE includes patients who attended the Emergency Department and were subsequently admitted to hospital. As just a proportion of those attending the emergency department will subsequently be admitted to hospital, it would not be possible to use emergency admissions reported to HIPE to draw conclusions about the total volume of activity in Emergency Departments.

¹² As DRG assignment is the result of a multivariate process, the confidentiality of individual discharges is ensured. In this context cells in this section with small numbers have not been suppressed.

5.2.1 Analysis of Total Discharges by MDC and AR-DRG

- The MDC with the highest volume of total discharges, 210,413 or 14.5 per cent assigned was *Diseases and Disorders of the Kidney and Urinary tract*, MDC 11 (see Tables 5.2 and 5.13 and Figure 5.2). Day patients make up over 89 per cent of activity within this MDC (see Figure 5.3).
 - * *Haemodialysis* (AR-DRG L61Z) accounted for 167,963 discharges or 11.6 per cent total discharges. *Haemodialysis* was the highest ranked AR-DRG for day patients accounting for 19.6 per cent of total day patients.
- The second highest volume of discharges by MDC was *Neoplastic Disorders (Haematological and Solid Neoplasms)* (MDC 17) which accounted for 201,858 discharges or close to 14 per cent of total discharges (see Tables 5.2 and 5.19 and Figure 5.2).
 - * *Radiotherapy* (AR-DRG R64Z) and *Chemotherapy* (AR-DRG R63Z), together accounted for 12.0 per cent total discharges.

5.2.2 Analysis of Day Patients by MDC and AR-DRG

- The MDC with the largest number of day patients reported was *Neoplastic Disorders (Haematological and Solid Neoplasms)* (MDC 17), with 196,336 discharges which accounted for 22.9 per cent of day patients (see Tables 5.2 and 5.19 and Figure 5.3).
 - * *Radiotherapy* (AR-DRG R64Z), accounted for 47.3 per cent of day patients within this MDC and 10.9 per cent total day patients.
 - * *Chemotherapy* (AR-DRG R63Z), accounted for 40.9 per cent of day patients within this MDC and 9.4 per cent of total day patients.
- *Diseases and Disorders of the Kidney and Urinary Tract* (MDC 11), accounted for 187,792 discharges or 21.9 per cent of day patients (see Tables 5.2 and 5.13 and Figure 5.3).
 - * *Haemodialysis* (AR-DRG L61Z), accounted for 89.4 per cent of day patients within this MDC and 19.6 per cent of total day patients.

5.2.3 Analysis of In-Patients by MDC and AR-DRG

- The MDC with the largest proportion of in-patient discharges was *Pregnancy, Childbirth and the Puerperium* (MDC 14), with 125,068 discharges which accounted for 21.1 per cent of in-patients (see Tables 5.2 and 5.16 and Figure 5.2).
 - * *Vaginal Delivery* (AR-DRG O60Z), accounted for 41.9 per cent of in-patients within this MDC and 8.9 per cent of total in-patient discharges.
 - * *Antenatal and Other Obstetric Admission* (AR-DRG O66Z), accounted for 27.8 per cent of in-patients within this MDC and 5.9 per cent of total in-patients.
 - * *Caesarean Delivery without Catastrophic or Severe Complication and/or Comorbidity* (AR-DRG O01B), accounted for 12.8 per cent of in-patients within this MDC and at 2.7 per cent of total in-patients.
- *Diseases and Disorders of the Musculoskeletal System and Connective Tissue* (MDC 8), accounted for 16,450 elective in-patients, just over 15 per cent of total elective in-patients (see Table 5.2). Within this MDC the AR-DRG *Hip Replacement without Catastrophic Complication and/or Comorbidity* (AR-DRG I03B), accounted for 4,381 in-patients of which 2,999 or 68.5 per cent were elective in-patient discharges (see Table 5.10).
- The highest proportion of emergency in-patients was accounted for by *Diseases and Disorders of the Circulatory System* (MDC 5) at 57,821 discharges or 16.2 per cent (see Table 5.2). Within this MDC *Chest Pain* (AR-DRG F74Z) accounted for 14,439 emergency in-patients, with an emergency in-patient mean length of stay of 2.2 days (see Table 5.7).

TABLE 5.2 Total Discharges: MDC by Patient Type and Admission Type (N, %)

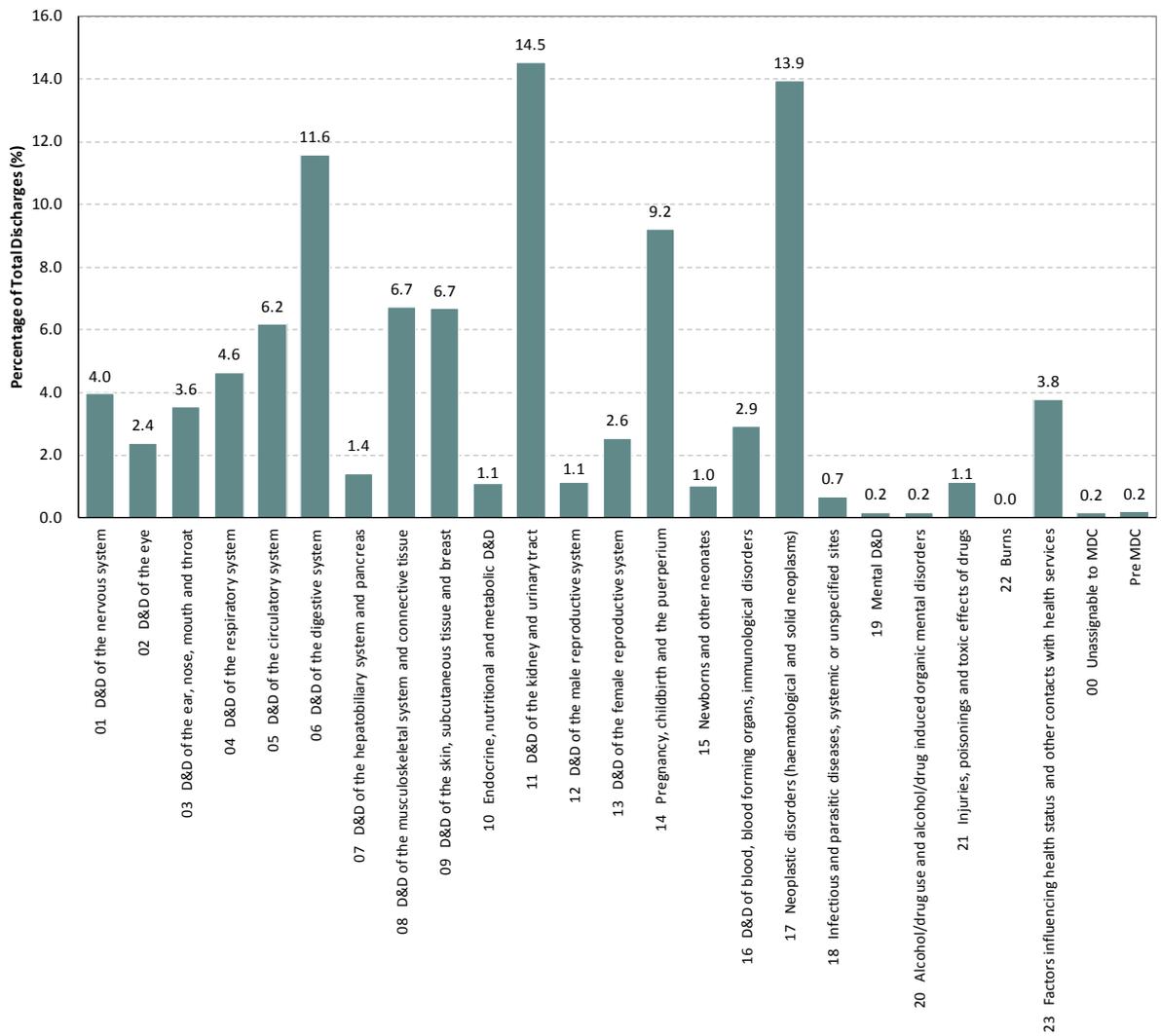
| Major Diagnostic Category | Day Patients ^a | | In-Patients | | | | | | | | Total Discharges ^b | |
|---|---------------------------|------------|----------------|------------|----------------|------------|----------------|------------|----------------|------------|-------------------------------|------------|
| | | | Elective | | Emergency | | Maternity | | Total | | | |
| | N | % | N | % | N | % | N | % | N | % | N | % |
| 01 Diseases and disorders of the nervous system | 15,929 | 1.9 | 3,935 | 3.6 | 37,441 | 10.5 | 5 | 0.0 | 41,381 | 7.0 | 57,310 | 4.0 |
| 02 Diseases and disorders of the eye | 29,573 | 3.5 | 2,523 | 2.3 | 2,488 | 0.7 | 0 | 0.0 | 5,011 | 0.8 | 34,584 | 2.4 |
| 03 Diseases and disorders of the ear, nose, mouth and throat | 26,252 | 3.1 | 9,480 | 8.7 | 15,673 | 4.4 | 4 | 0.0 | 25,157 | 4.3 | 51,409 | 3.6 |
| 04 Diseases and disorders of the respiratory system | 13,093 | 1.5 | 6,951 | 6.4 | 47,239 | 13.3 | 6 | 0.0 | 54,196 | 9.2 | 67,289 | 4.6 |
| 05 Diseases and disorders of the circulatory system | 21,493 | 2.5 | 10,020 | 9.2 | 57,821 | 16.2 | 11 | 0.0 | 67,852 | 11.5 | 89,345 | 6.2 |
| 06 Diseases and disorders of the digestive system | 101,137 | 11.8 | 12,276 | 11.3 | 54,489 | 15.3 | 28 | 0.0 | 66,793 | 11.3 | 167,930 | 11.6 |
| 07 Diseases and disorders of the hepatobiliary system and pancreas | 5,382 | 0.6 | 5,216 | 4.8 | 9,788 | 2.7 | 2 | 0.0 | 15,006 | 2.5 | 20,388 | 1.4 |
| 08 Diseases and disorders of the musculoskeletal system and connective tissue | 47,995 | 5.6 | 16,450 | 15.1 | 32,967 | 9.3 | 7 | 0.0 | 49,424 | 8.4 | 97,419 | 6.7 |
| 09 Diseases and disorders of the skin, subcutaneous tissue and breast | 79,260 | 9.3 | 6,000 | 5.5 | 11,428 | 3.2 | 9 | 0.0 | 17,437 | 2.9 | 96,697 | 6.7 |
| 10 Endocrine, nutritional and metabolic diseases and disorders | 5,332 | 0.6 | 2,943 | 2.7 | 7,433 | 2.1 | 2 | 0.0 | 10,378 | 1.8 | 15,710 | 1.1 |
| 11 Diseases and disorders of the kidney and urinary tract | 187,792 | 21.9 | 5,095 | 4.7 | 17,519 | 4.9 | 7 | 0.0 | 22,621 | 3.8 | 210,413 | 14.5 |
| 12 Diseases and disorders of the male reproductive system | 11,372 | 1.3 | 2,829 | 2.6 | 2,436 | 0.7 | 0 | 0.0 | 5,265 | 0.9 | 16,637 | 1.1 |
| 13 Diseases and disorders of the female reproductive system | 22,807 | 2.7 | 9,443 | 8.7 | 4,681 | 1.3 | 22 | 0.0 | 14,146 | 2.4 | 36,953 | 2.6 |
| 14 Pregnancy, childbirth and the puerperium | 8,510 | 1.0 | 21 | 0.0 | 137 | 0.0 | 124,910 | 98.9 | 125,068 | 21.1 | 133,578 | 9.2 |
| 15 Newborns and other neonates | 498 | 0.1 | 386 | 0.4 | 14,153 | 4.0 | 0 | 0.0 | 14,539 | 2.5 | 15,037 | 1.0 |
| 16 Diseases and disorders of blood, blood forming organs, immunological disorders | 36,168 | 4.2 | 1,419 | 1.3 | 4,598 | 1.3 | 3 | 0.0 | 6,020 | 1.0 | 42,188 | 2.9 |
| 17 Neoplastic disorders (haematological and solid neoplasms) | 196,336 | 22.9 | 2,847 | 2.6 | 2,674 | 0.8 | 1 | 0.0 | 5,522 | 0.9 | 201,858 | 13.9 |
| 18 Infectious and parasitic diseases, systemic or unspecified sites | 1,548 | 0.2 | 524 | 0.5 | 7,786 | 2.2 | 6 | 0.0 | 8,316 | 1.4 | 9,864 | 0.7 |
| 19 Mental diseases and disorders | 607 | 0.1 | 272 | 0.2 | 1,790 | 0.5 | 3 | 0.0 | 2,065 | 0.3 | 2,672 | 0.2 |
| 20 Alcohol/drug use and alcohol/drug induced organic mental disorders | 8 | 0.0 | 158 | 0.1 | 2,490 | 0.7 | 0 | 0.0 | 2,648 | 0.4 | 2,656 | 0.2 |
| 21 Injuries, poisonings and toxic effects of drugs | 970 | 0.1 | 327 | 0.3 | 14,769 | 4.1 | 240 | 0.2 | 15,336 | 2.6 | 16,306 | 1.1 |
| 22 Burns | 41 | 0.0 | 58 | 0.1 | 615 | 0.2 | 0 | 0.0 | 673 | 0.1 | 714 | 0.0 |
| 23 Factors influencing health status and other contacts with health services | 42,772 | 5.0 | 8,340 | 7.7 | 2,526 | 0.7 | 1,018 | 0.8 | 11,884 | 2.0 | 54,656 | 3.8 |
| 00 Unassignable to MDC | 595 | 0.1 | 632 | 0.6 | 1,247 | 0.3 | 5 | 0.0 | 1,884 | 0.3 | 2,479 | 0.2 |
| Pre-MDC | 148 | 0.0 | 680 | 0.6 | 2,183 | 0.6 | 5 | 0.0 | 2,868 | 0.5 | 3,016 | 0.2 |
| Total Discharges | 855,618 | 100 | 108,825 | 100 | 356,371 | 100 | 126,294 | 100 | 591,490 | 100 | 1,447,108 | 100 |

Notes: Percentage columns are subject to rounding.

a Includes *Maternity* day patients.

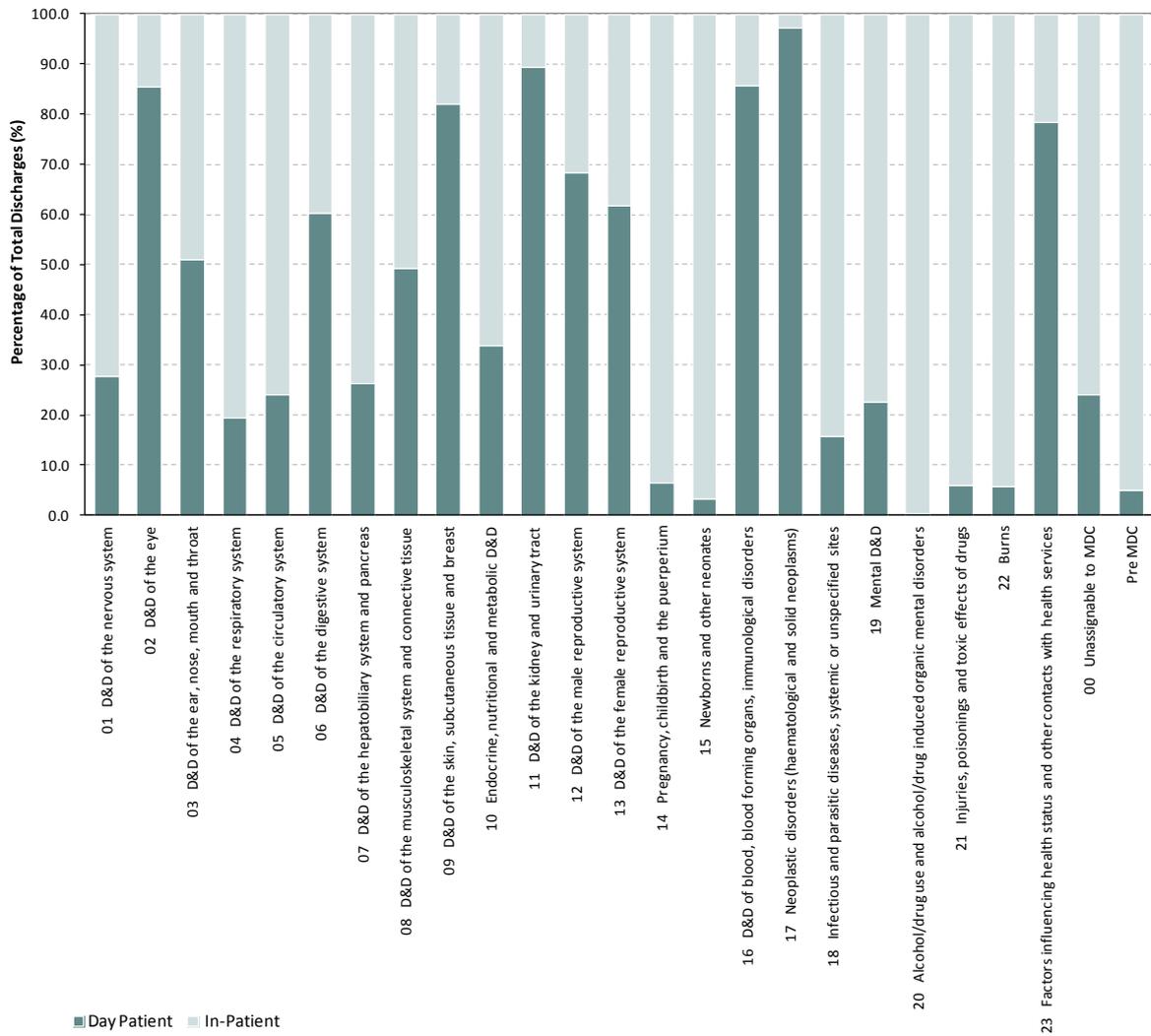
b Includes day patients and in-patients.

FIGURE 5.2 Total Discharges: Major Diagnostic Category (MDC) (%)



Note: D&D = Diseases and disorders

FIGURE 5.3 Total Discharges: Major Diagnostic Category by Day Patient and In-Patient Discharges (%)



Note: D&D = Diseases and disorders

TABLE 5.3 Total Discharges: MDC 1 Diseases and Disorders of the Nervous System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 1 Diseases and Disorders of the Nervous System | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|--------------------|----------|-----------------------------|-----------|--------|--------------------|--------|----|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N | |
| | N | N | N | Mean | Median | Mean | Median | Mean | Median | | |
| B01A Ventricular Shunt Revision W Cat or Sev CC | 0 | 2 | 49 | 51 | 7.5 | 8 | 5.6 | 3 | 5.7 | 3 | 51 |
| B01B Ventricular Shunt Revision W/O Cat or Sev CC | 1 | 15 | 46 | 61 | 6.1 | 4 | 4.3 | 3 | 4.8 | 3 | 62 |
| B02A Cranial Procedures W Cat CC | 0 | 37 | 154 | 191 | 44.2 | 21 | 23 | 15 | 27.1 | 15 | 191 |
| B02B Cranial Procedures W Sev CC | 0 | 86 | 219 | 305 | 11.1 | 9 | 14.2 | 10 | 13.3 | 9 | 305 |
| B02C Cranial Procedures W/O Cat or Sev CC | 3 | 459 | 616 | 1,075 | 6.8 | 5 | 10.3 | 7 | 8.8 | 7 | 1,078 |
| B03A Spinal Procedures W Cat or Sev CC | 2 | 14 | 30 | 44 | 10.3 | 9 | 24.9 | 14 | 20.2 | 11 | 46 |
| B03B Spinal Procedures W/O Cat or Sev CC | 79 | 137 | 55 | 192 | 5.2 | 3 | 9.3 | 5 | 6.3 | 4 | 271 |
| B04A Extracranial Vascular Procedures W Cat CC | 0 | 25 | 45 | 70 | 19.8 | 11 | 34.8 | 17 | 29.4 | 15 | 70 |
| B04B Extracranial Vascular Procedures W/O Cat CC | 0 | 204 | 117 | 321 | 6.3 | 5 | 13 | 9 | 8.7 | 6 | 321 |
| B05Z Carpal Tunnel Release | 1,486 | 114 | 15 | 129 | 1.4 | 1 | 3.6 | 3 | 1.6 | 1 | 1,615 |
| B06A Procs for Cerebral Palsy, Muscular Dystrophy, Neuropathy W CC | 9 | 24 | 51 | 75 | 8.1 | 6 | 46 | 17 | 33.9 | 13 | 84 |
| B06B Procs for Cerebral Palsy, Muscular Dystrophy, Neuropathy W/O CC | 188 | 103 | 13 | 116 | 2.7 | 2 | 11.7 | 10 | 3.7 | 2 | 304 |
| B07A Peripheral and Cranial Nerve and Other Nervous System Procedures W CC | 3 | 9 | 59 | 68 | 14.9 | 8 | 33.5 | 11 | 31 | 11 | 71 |
| B07B Peripheral and Cranial Nerve and Other Nervous System Procedures W/O CC | 73 | 39 | 396 | 435 | 3.4 | 2 | 2 | 1 | 2.1 | 2 | 508 |
| B40Z Plasmapheresis W Neurological Disease, Sameday | 31 | 0 | 0 | 0 | - | - | - | - | - | - | 31 |
| B41Z Telemetric EEG Monitoring | 21 | 144 | 135 | 279 | 5.3 | 4 | 9.5 | 5 | 7.4 | 4 | 300 |
| B42A Nervous System Diagnosis W Ventilator Support W Cat CC | 0 | 0 | 57 | 57 | - | - | 19.1 | 9 | 19.1 | 9 | 57 |
| B42B Nervous System Diagnosis W Ventilator Support W/O Cat CC | 0 | 1 | 140 | 141 | 2 | 2 | 8.1 | 3 | 8.1 | 3 | 141 |
| B60A Acute Paraplegia/Quadriplegia W or W/O OR Procs W Cat CC | 1 | 9 | 13 | 22 | 52.4 | 35 | 56.5 | 37 | 54.8 | 36 | 23 |
| B60B Acute Paraplegia/Quadriplegia W or W/O OR Procs W/O Cat CC | 142 | 37 | 37 | 74 | 46 | 26 | 13.2 | 6 | 29.6 | 11 | 216 |
| B61A Spinal Cord Conditions W or W/O OR Procedures W Cat or Sev CC | 0 | 6 | 42 | 48 | 30.3 | 13 | 26.1 | 19 | 26.6 | 18 | 48 |
| B61B Spinal Cord Conditions W or W/O OR Procedures W/O Cat or Sev CC | 9 | 22 | 106 | 128 | 5.9 | 5 | 7.8 | 4 | 7.4 | 5 | 137 |
| B62Z Apheresis | 81 | 8 | 2 | 10 | 3.1 | 3 | 4 | 4 | 3.3 | 4 | 91 |
| B63Z Dementia and Other Chronic Disturbances of Cerebral Function | 143 | 41 | 567 | 608 | 30.5 | 10 | 40.7 | 18 | 40 | 17 | 751 |
| B64A Delirium W Cat CC | 0 | 3 | 142 | 145 | 13.3 | 4 | 29.6 | 13 | 29.3 | 13 | 145 |
| B64B Delirium W/O Cat CC | 54 | 42 | 1,401 | 1,443 | 9.5 | 6 | 9.2 | 5 | 9.3 | 5 | 1,497 |
| B65Z Cerebral Palsy | 261 | 20 | 22 | 42 | 4.7 | 3 | 7.8 | 3 | 6.3 | 3 | 303 |
| B66A Nervous System Neoplasm W Cat or Sev CC | 61 | 100 | 276 | 376 | 16.5 | 9 | 15.9 | 9 | 16.1 | 9 | 437 |
| B66B Nervous System Neoplasm W/O Cat or Sev CC | 792 | 245 | 452 | 697 | 15.7 | 7 | 8.6 | 4 | 11.1 | 5 | 1,489 |
| B67A Degenerative Nervous System Disorders W Cat or Sev CC | 6 | 56 | 399 | 455 | 43.8 | 20 | 30.4 | 14 | 32.1 | 14 | 461 |
| B67B Degenerative Nervous System Disorders W Moderate CC | 28 | 68 | 255 | 323 | 10.1 | 5 | 12.3 | 7 | 11.8 | 6 | 351 |
| B67C Degenerative Nervous System Disorders W/O CC | 621 | 241 | 481 | 722 | 10.1 | 6 | 9.5 | 5 | 9.7 | 6 | 1,343 |
| B68A Multiple Sclerosis and Cerebellar Ataxia W CC | 32 | 33 | 138 | 171 | 13.5 | 4 | 18.4 | 8 | 17.4 | 8 | 203 |
| B68B Multiple Sclerosis and Cerebellar Ataxia W/O CC | 4,319 | 155 | 425 | 580 | 4.8 | 4 | 5.8 | 4 | 5.6 | 4 | 4,899 |
| B69A TIA and Precerebral Occlusion W Cat or Sev CC | 5 | 16 | 649 | 665 | 11.2 | 9 | 11 | 6 | 11 | 6 | 670 |
| B69B TIA and Precerebral Occlusion W/O Cat or Sev CC | 56 | 73 | 2,237 | 2,310 | 4.2 | 3 | 4.8 | 4 | 4.8 | 4 | 2,366 |

TABLE 5.3 Total Discharges: MDC 1 Diseases and Disorders of the Nervous System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 1 Diseases and Disorders of the Nervous System | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|--------------|---------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | N | |
| B70A Stroke and Other Cerebrovascular Disorders W Cat CC | 0 | 23 | 1,033 | 1,056 | 76.2 | 27 | 49.2 | 27 | 49.8 | 27 | 1,056 |
| B70B Stroke and Other Cerebrovascular Disorders W Sev CC | 2 | 32 | 1,478 | 1,510 | 30.6 | 23 | 22.1 | 12 | 22.3 | 12 | 1,512 |
| B70C Stroke and Other Cerebrovascular Disorders W/O Cat or Sev CC | 26 | 83 | 2,600 | 2,683 | 13.1 | 8 | 13.0 | 8 | 13.0 | 8 | 2,709 |
| B70D Stroke and Other Cerebrovascular Disorders, Died or Transferred <5 Days | 4 | 4 | 545 | 549 | 2.3 | 2 | 1.8 | 1 | 1.8 | 1 | 553 |
| B71A Cranial and Peripheral Nerve Disorders W CC | 103 | 74 | 257 | 331 | 6.1 | 4 | 14.2 | 7 | 12.4 | 6 | 434 |
| B71B Cranial and Peripheral Nerve Disorders W/O CC | 2,488 | 134 | 633 | 767 | 4.8 | 4 | 4.5 | 2 | 4.5 | 2 | 3,255 |
| B72A Nervous System Infection Except Viral Meningitis W Cat or Sev CC | 4 | 7 | 98 | 105 | 11.9 | 11 | 26.9 | 15 | 25.9 | 14 | 109 |
| B72B Nervous System Infection Except Viral Meningitis W/O Cat or Sev CC | 136 | 16 | 268 | 284 | 4.9 | 4 | 10.2 | 8 | 9.9 | 8 | 420 |
| B73Z Viral Meningitis | 7 | 4 | 248 | 252 | 7.8 | 8 | 5.5 | 5 | 5.5 | 5 | 259 |
| B74A Nontraumatic Stupor and Coma W CC | 4 | 3 | 105 | 108 | 29.0 | 9 | 7.2 | 3 | 7.8 | 3 | 112 |
| B74B Nontraumatic Stupor and Coma W/O CC | 19 | 6 | 59 | 65 | 1.2 | 1 | 3.2 | 1 | 3.0 | 1 | 84 |
| B75Z Febrile Convulsions | 23 | 4 | 776 | 780 | 2.8 | 2 | 1.8 | 1 | 1.8 | 1 | 803 |
| B76A Seizure W Cat or Sev CC | 12 | 25 | 957 | 982 | 16.8 | 7 | 10.7 | 5 | 10.9 | 5 | 994 |
| B76B Seizure W/O Cat or Sev CC | 1,099 | 207 | 4,735 | 4,943 | 4.8 | 3 | 3.2 | 2 | 3.3 | 2 | 6,042 |
| B77Z Headache | 863 | 160 | 6,211 | 6,374 | 2.6 | 1 | 2.5 | 1 | 2.5 | 1 | 7,237 |
| B78A Intracranial Injury W Cat or Sev CC | 0 | 7 | 187 | 194 | 78.3 | 49 | 30.4 | 13 | 32.1 | 14 | 194 |
| B78B Intracranial Injury W/O Cat or Sev CC | 0 | 18 | 608 | 626 | 39.2 | 14 | 7.2 | 3 | 8.1 | 3 | 626 |
| B79A Skull Fractures W Cat or Sev CC | 0 | 0 | 39 | 39 | - | - | 14.6 | 7 | 14.6 | 7 | 39 |
| B79B Skull Fractures W/O Cat or Sev CC | 4 | 2 | 359 | 361 | 6.0 | 6 | 3.7 | 2 | 3.7 | 2 | 365 |
| B80Z Other Head Injury | 10 | 4 | 3,461 | 3,466 | 5.0 | 4 | 2.0 | 1 | 2.0 | 1 | 3,476 |
| B81A Other Disorders of the Nervous System W Cat or Sev CC | 25 | 43 | 547 | 590 | 13.1 | 10 | 22.3 | 10 | 21.6 | 10 | 615 |
| B81B Other Disorders of the Nervous System W/O Cat or Sev CC | 2,340 | 276 | 2,027 | 2,303 | 5.5 | 3 | 7.2 | 3 | 7.0 | 3 | 4,643 |
| B82A Chronic and Unspecified Paraplegia/Quadriplegia W or W/O OR Procs W Cat CC | 2 | 32 | 75 | 107 | 79.3 | 46 | 51.2 | 28 | 59.6 | 32 | 109 |
| B82B Chronic and Unspecified Paraplegia/Quadriplegia W or W/O OR Procs W Sev CC | 8 | 57 | 94 | 151 | 38.4 | 27 | 12.4 | 8 | 22.2 | 10 | 159 |
| B82C Chronic and Unspecified Paraplegia/Quadriplegia W or W/O OR Pr W/O Cat/Sev CC | 243 | 126 | 200 | 326 | 35.9 | 11 | 9.6 | 6 | 19.8 | 7 | 569 |
| Total Discharges | 15,929 | 3,935 | 37,441 | 41,381 | 11.9 | 5 | 9.3 | 3 | 9.6 | 3 | 57,310 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.
a Includes *Maternity* day patients.
b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.
d Total in-patients include *Maternity* in-patients.
e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.4 Total Discharges: MDC 2 Diseases and Disorders of the Eye: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 2 Diseases and Disorders of the Eye | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|--------------|--------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median |
| C01Z Procedures for Penetrating Eye Injury | 2 | 3 | 113 | 116 | 1.7 | 2 | 4.1 | 4 | 4.1 | 4 | 118 |
| C02Z Enucleations and Orbital Procedures | 50 | 90 | 29 | 119 | 2.7 | 2 | 4.5 | 4 | 3.1 | 2 | 169 |
| C03Z Retinal Procedures | 9,129 | 885 | 428 | 1,313 | 2.8 | 2 | 4.8 | 4 | 3.5 | 3 | 10,442 |
| C04Z Major Corneal, Scleral and Conjunctival Procedures | 7 | 116 | 21 | 137 | 3.7 | 3 | 13.7 | 8 | 5.2 | 4 | 144 |
| C05Z Dacryocystorhinostomy | 81 | 82 | 5 | 87 | 1.3 | 1 | 2.0 | 1 | 1.4 | 1 | 168 |
| C10Z Strabismus Procedures | 464 | 217 | 1 | 218 | 1.2 | 1 | 1.0 | 1 | 1.2 | 1 | 682 |
| C11Z Eyelid Procedures | 603 | 54 | 96 | 150 | 1.5 | 1 | 1.9 | 1 | 1.7 | 1 | 753 |
| C12Z Other Corneal, Scleral and Conjunctival Procedures | 141 | 29 | 52 | 81 | 2.4 | 1 | 6.1 | 5 | 4.8 | 3 | 222 |
| C13Z Lacrimal Procedures | 685 | 12 | 6 | 18 | 1.3 | 1 | 3.2 | 4 | 1.9 | 2 | 703 |
| C14Z Other Eye Procedures | 1,769 | 66 | 112 | 178 | 2.6 | 2 | 5.3 | 4 | 4.3 | 3 | 1,947 |
| C15A Glaucoma and Complex Cataract Procedures | 0 | 223 | 68 | 291 | 2.5 | 2 | 4.3 | 3 | 2.9 | 2 | 291 |
| C15B Glaucoma and Complex Cataract Procedures, Sameday | 580 | 0 | 5 | 5 | - | - | 1.0 | 1 | 1.0 | 1 | 585 |
| C16Z Lens Procedures | 6,239 | 517 | 27 | 544 | 2.0 | 2 | 3.1 | 2 | 2.1 | 2 | 6,783 |
| C60A Acute and Major Eye Infections W CC | 4 | 4 | 41 | 45 | 33.3 | 5 | 10.5 | 8 | 12.5 | 7 | 49 |
| C60B Acute and Major Eye Infections W/O CC | 38 | 7 | 118 | 125 | 4.1 | 2 | 5.3 | 5 | 5.2 | 5 | 163 |
| C61A Neurological and Vascular Disorders of the Eye W CC | 31 | 12 | 115 | 127 | 4.7 | 3 | 6.6 | 5 | 6.4 | 5 | 158 |
| C61B Neurological and Vascular Disorders of the Eye W/O CC | 537 | 27 | 225 | 252 | 2.2 | 1 | 4.0 | 3 | 3.8 | 3 | 789 |
| C62Z Hyphema and Medically Managed Trauma to the Eye | 95 | 12 | 430 | 442 | 2.4 | 1 | 2.9 | 1 | 2.9 | 1 | 537 |
| C63Z Other Disorders of the Eye | 9,118 | 167 | 596 | 763 | 2.7 | 1 | 3.2 | 2 | 3.1 | 2 | 9,881 |
| Total Discharges | 29,573 | 2,523 | 2,488 | 5,011 | 2.5 | 2 | 4.1 | 3 | 3.3 | 2 | 34,584 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.5 Total Discharges: MDC 3 Diseases and Disorders of the Ear, Nose, Mouth and Throat: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 3 Diseases and Disorders of the Ear, Nose, Mouth and Throat | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b | | | |
|---|---------------------------|--------------|---------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|-------------------------------|------|--------|---|
| | | Discharges | | | Length of Stay ^c | | | | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median | Mean | Median | N |
| D01Z Cochlear Implant | 0 | 70 | 1 | 71 | 5.4 | 5 | 6.0 | 6 | 5.4 | 5 | 71 | | | |
| D02A Head and Neck Procedures W Cat or Sev CC | 1 | 52 | 33 | 85 | 18.5 | 11 | 34.8 | 28 | 24.8 | 15 | 86 | | | |
| D02B Head and Neck Procedures W Malignancy or Moderate CC | 2 | 59 | 32 | 91 | 10.9 | 9 | 12.3 | 12 | 11.4 | 9 | 93 | | | |
| D02C Head and Neck Procedures W/O Malignancy W/O CC | 18 | 90 | 8 | 98 | 3.3 | 3 | 9.5 | 9 | 3.8 | 3 | 116 | | | |
| D03Z Surgical Repair for Cleft Lip or Palate Diagnosis | 5 | 164 | 1 | 165 | 3.7 | 3 | 2.0 | 2 | 3.7 | 3 | 170 | | | |
| D04A Maxillo Surgery W CC | 3 | 22 | 98 | 120 | 3.9 | 3 | 3.4 | 3 | 3.5 | 3 | 123 | | | |
| D04B Maxillo Surgery W/O CC | 62 | 218 | 531 | 749 | 2.9 | 3 | 2.4 | 2 | 2.5 | 2 | 811 | | | |
| D05Z Parotid Gland Procedures | 2 | 159 | 13 | 172 | 4.6 | 4 | 5.9 | 5 | 4.7 | 4 | 174 | | | |
| D06Z Sinus and Complex Middle Ear Procedures | 69 | 330 | 19 | 349 | 2.0 | 2 | 6.1 | 4 | 2.2 | 2 | 418 | | | |
| D10Z Nasal Procedures | 377 | 602 | 38 | 640 | 1.6 | 1 | 4.0 | 3 | 1.7 | 1 | 1,017 | | | |
| D11Z Tonsillectomy and/or Adenoidectomy | 360 | 4,077 | 432 | 4,509 | 1.5 | 1 | 3.2 | 3 | 1.7 | 1 | 4,869 | | | |
| D12Z Other Ear, Nose, Mouth and Throat Procedures | 1,086 | 673 | 311 | 984 | 2.5 | 2 | 4.3 | 2 | 3.1 | 2 | 2,070 | | | |
| D13Z Myringotomy W Tube Insertion | 2,578 | 149 | 22 | 171 | 1.2 | 1 | 4.3 | 3 | 1.6 | 1 | 2,749 | | | |
| D14Z Mouth and Salivary Gland Procedures | 765 | 249 | 167 | 416 | 3.0 | 2 | 5.6 | 3 | 4.1 | 2 | 1,181 | | | |
| D15Z Mastoid Procedures | 19 | 276 | 23 | 299 | 2.5 | 2 | 10.5 | 8 | 3.1 | 2 | 318 | | | |
| D40Z Dental Extractions and Restorations | 6,166 | 144 | 113 | 257 | 1.5 | 1 | 2.4 | 2 | 1.9 | 1 | 6,423 | | | |
| D60A Ear, Nose, Mouth and Throat Malignancy W Cat or Sev CC | 44 | 158 | 121 | 279 | 27.3 | 17 | 23.9 | 14 | 25.8 | 14 | 323 | | | |
| D60B Ear, Nose, Mouth and Throat Malignancy W/O Cat or Sev CC | 519 | 430 | 199 | 629 | 11.3 | 5 | 9.0 | 5 | 10.5 | 5 | 1,148 | | | |
| D61Z Dysequilibrium | 616 | 64 | 1,905 | 1,972 | 3.6 | 3 | 3.3 | 2 | 3.3 | 2 | 2,588 | | | |
| D62Z Epistaxis | 419 | 13 | 962 | 975 | 2.0 | 1 | 3.9 | 3 | 3.9 | 3 | 1,394 | | | |
| D63Z Otitis Media and URI | 2,369 | 230 | 7,239 | 7,470 | 2.9 | 1 | 2.1 | 2 | 2.2 | 2 | 9,839 | | | |
| D64Z Laryngotracheitis and Epiglottitis | 7 | 7 | 534 | 541 | 1.3 | 1 | 1.4 | 1 | 1.4 | 1 | 548 | | | |
| D65Z Nasal Trauma and Deformity | 884 | 54 | 518 | 572 | 1.5 | 1 | 2.8 | 1 | 2.7 | 1 | 1,456 | | | |
| D66A Other Ear, Nose, Mouth and Throat Diagnoses W CC | 248 | 194 | 170 | 364 | 3.1 | 2 | 6.9 | 4 | 4.9 | 3 | 612 | | | |
| D66B Other Ear, Nose, Mouth and Throat Diagnoses W/O CC | 8,384 | 900 | 817 | 1,717 | 1.5 | 1 | 2.7 | 1 | 2.0 | 1 | 10,101 | | | |
| D67A Oral and Dental Disorders Except Extractions and Restorations | 0 | 68 | 960 | 1,028 | 3.1 | 1 | 2.9 | 2 | 2.9 | 2 | 1,028 | | | |
| D67B Oral and Dental Disorders Except Extractions and Restorations, Sameday | 1,249 | 28 | 406 | 434 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 1,683 | | | |
| Total Discharges | 26,252 | 9,480 | 15,673 | 25,157 | 2.9 | 1 | 3.0 | 2 | 3.0 | 2 | 51,409 | | | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.6 Total Discharges: MDC 4 Diseases and Disorders of the Respiratory System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 4 Diseases and Disorders of the Respiratory System | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b | | |
|---|---------------------------|-------------|-----------|--------------------|-----------------------------|-----------|--------------------|------|--------|------|-------------------------------|------|--------|
| | | Discharges | | | Length of Stay ^c | | | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median | Mean | Median |
| E01A Major Chest Procedures W Cat CC | 1 | 193 | 147 | 340 | 15.9 | 12 | 25.7 | 17 | 20.1 | 14 | 341 | | |
| E01B Major Chest Procedures W/O Cat CC | 19 | 303 | 173 | 476 | 9.3 | 8 | 13.0 | 11 | 10.6 | 9 | 495 | | |
| E02A Other Respiratory System OR Procedures W Cat CC | 4 | 55 | 142 | 197 | 24.5 | 14 | 28.8 | 22 | 27.6 | 19 | 201 | | |
| E02B Other Respiratory System OR Procedures W Sev or Moderate CC | 16 | 68 | 83 | 151 | 6.6 | 4 | 12.9 | 9 | 10.0 | 7 | 167 | | |
| E02C Other Respiratory System OR Procedures W/O CC | 19 | 120 | 51 | 171 | 3.9 | 2 | 7.9 | 6 | 5.1 | 3 | 190 | | |
| E40A Respiratory System Diagnosis W Ventilator Support W Cat CC | 0 | 6 | 133 | 139 | 39.0 | 26 | 17.7 | 11 | 18.6 | 11 | 139 | | |
| E40B Respiratory System Diagnosis W Ventilator Support W/O Cat CC | 0 | 4 | 88 | 92 | 13.8 | 5 | 8.8 | 6 | 9.0 | 6 | 92 | | |
| E41Z Respiratory System Diagnosis W Non-Invasive Ventilation | 1 | 64 | 1,066 | 1,130 | 19.9 | 11 | 17.5 | 11 | 17.7 | 11 | 1,131 | | |
| E42A Bronchoscopy W Cat CC | 0 | 35 | 329 | 364 | 15.3 | 14 | 27.8 | 21 | 26.6 | 19 | 364 | | |
| E42B Bronchoscopy W/O Cat CC | 0 | 378 | 936 | 1,314 | 6.1 | 3 | 13.1 | 9 | 11.1 | 8 | 1,314 | | |
| E42C Bronchoscopy, Sameday | 4,731 | 15 | 27 | 42 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 4,773 | | |
| E60A Cystic Fibrosis W Cat or Sev CC | 19 | 120 | 286 | 410 | 15.3 | 14 | 15.6 | 14 | 15.4 | 14 | 429 | | |
| E60B Cystic Fibrosis W/O Cat or Sev CC | 799 | 313 | 328 | 641 | 9.1 | 9 | 9.1 | 9 | 9.1 | 9 | 1,440 | | |
| E61A Pulmonary Embolism W Cat CC | 0 | 7 | 178 | 185 | 21.0 | 9 | 14.7 | 11 | 14.9 | 11 | 185 | | |
| E61B Pulmonary Embolism W/O Cat CC | 72 | 28 | 1,217 | 1,245 | 8.9 | 8 | 8.3 | 7 | 8.3 | 7 | 1,317 | | |
| E62A Respiratory Infections/Inflammations W Cat CC | 1 | 54 | 2,673 | 2,727 | 21.9 | 15 | 18.6 | 10 | 18.7 | 10 | 2,728 | | |
| E62B Respiratory Infections/Inflammations W Sev or Moderate CC | 7 | 60 | 3,678 | 3,738 | 10.6 | 7 | 9.9 | 7 | 9.9 | 7 | 3,745 | | |
| E62C Respiratory Infections/Inflammations W/O CC | 66 | 55 | 2,990 | 3,045 | 6.5 | 5 | 4.7 | 3 | 4.7 | 3 | 3,111 | | |
| E63Z Sleep Apnoea | 87 | 2,124 | 80 | 2,204 | 1.3 | 1 | 4.7 | 3 | 1.5 | 1 | 2,291 | | |
| E64A Pulmonary Oedema and Respiratory Failure W Cat CC | 0 | 6 | 271 | 277 | 6.2 | 7 | 15.1 | 9 | 14.9 | 9 | 277 | | |
| E64B Pulmonary Oedema and Respiratory Failure W/O Cat CC | 8 | 12 | 497 | 509 | 13.2 | 8 | 7.2 | 5 | 7.3 | 5 | 517 | | |
| E65A Chronic Obstructive Airways Disease W Cat CC | 14 | 84 | 2,028 | 2,112 | 12.2 | 8 | 14.1 | 8 | 14.0 | 8 | 2,126 | | |
| E65B Chronic Obstructive Airways Disease W/O Cat CC | 1,442 | 627 | 7,587 | 8,214 | 11.0 | 7 | 6.9 | 5 | 7.2 | 5 | 9,656 | | |
| E66A Major Chest Trauma W Cat CC | 0 | 0 | 35 | 35 | - | - | 13.7 | 10 | 13.7 | 10 | 35 | | |
| E66B Major Chest Trauma W Sev or Moderate CC | 0 | 0 | 170 | 170 | - | - | 8.3 | 5 | 8.3 | 5 | 170 | | |
| E66C Major Chest Trauma W/O CC | 0 | 0 | 225 | 225 | - | - | 3.3 | 2 | 3.3 | 2 | 225 | | |
| E67A Respiratory Signs and Symptoms W Cat or Sev CC | 74 | 58 | 521 | 579 | 4.1 | 2 | 7.7 | 5 | 7.4 | 4 | 653 | | |
| E67B Respiratory Signs and Symptoms W/O Cat or Sev CC | 958 | 283 | 2,553 | 2,836 | 2.5 | 1 | 2.3 | 1 | 2.3 | 1 | 3,794 | | |
| E68A Pneumothorax W CC | 0 | 8 | 250 | 258 | 12.1 | 10 | 7.7 | 6 | 7.9 | 6 | 258 | | |
| E68B Pneumothorax W/O CC | 3 | 10 | 440 | 450 | 2.8 | 2 | 4.3 | 4 | 4.3 | 4 | 453 | | |
| E69A Bronchitis and Asthma W CC | 17 | 26 | 490 | 516 | 6.4 | 2 | 5.8 | 3 | 5.8 | 3 | 533 | | |
| E69B Bronchitis and Asthma W/O CC | 1,686 | 128 | 2,875 | 3,003 | 2.5 | 1 | 2.5 | 2 | 2.5 | 2 | 4,689 | | |
| E70A Whooping Cough and Acute Bronchiolitis W CC | 1 | 5 | 151 | 156 | 12.8 | 7 | 5.9 | 4 | 6.1 | 4 | 157 | | |
| E70B Whooping Cough and Acute Bronchiolitis W/O CC | 9 | 16 | 1,584 | 1,600 | 3.4 | 3 | 2.9 | 2 | 2.9 | 2 | 1,609 | | |
| E71A Respiratory Neoplasms W Cat CC | 144 | 152 | 446 | 598 | 12.5 | 8 | 15.1 | 11 | 14.4 | 10 | 742 | | |
| E71B Respiratory Neoplasms W/O Cat CC | 2,264 | 952 | 1,050 | 2,002 | 8.9 | 3 | 8.8 | 6 | 8.9 | 5 | 4,266 | | |
| E72Z Respiratory Problems Arising from Neonatal Period | 14 | 20 | 74 | 94 | 9.5 | 3 | 3.1 | 2 | 4.5 | 2 | 108 | | |
| E73A Pleural Effusion W Cat CC | 3 | 17 | 152 | 169 | 19.1 | 10 | 14.1 | 11 | 14.6 | 10 | 172 | | |
| E73B Pleural Effusion W Sev or Moderate CC | 38 | 43 | 354 | 397 | 8.9 | 7 | 8.2 | 6 | 8.3 | 6 | 435 | | |

TABLE 5.6 Total Discharges: MDC 4 Diseases and Disorders of the Respiratory System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 4 Diseases and Disorders of the Respiratory System | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|--------------|---------------|--------------------|-----------------------------|----------|------------|----------|--------------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N |
| | N | N | N | N | Mean | Median | Mean | Median | Mean | Median | |
| E73C Pleural Effusion W/O CC | 37 | 35 | 186 | 221 | 5.0 | 2 | 6.4 | 4 | 6.2 | 4 | 258 |
| E74A Interstitial Lung Disease W Cat CC | 2 | 13 | 98 | 111 | 11.0 | 9 | 15.6 | 13 | 15.0 | 11 | 113 |
| E74B Interstitial Lung Disease W Sev or Moderate CC | 32 | 67 | 174 | 241 | 8.2 | 5 | 9.3 | 8 | 9.0 | 7 | 273 |
| E74C Interstitial Lung Disease W/O CC | 123 | 63 | 213 | 276 | 6.0 | 4 | 5.4 | 4 | 5.6 | 4 | 399 |
| E75A Other Respiratory System Diagnosis W Cat CC | 1 | 33 | 1,151 | 1,184 | 13.6 | 10 | 16.1 | 9 | 16 | 9 | 1,185 |
| E75B Other Respiratory System Diagnosis W Sev or Moderate CC | 58 | 136 | 3,971 | 4,108 | 7.6 | 6 | 7.4 | 5 | 7.4 | 5 | 4,166 |
| E75C Other Respiratory System Diagnosis W/O CC | 293 | 133 | 4,943 | 5,077 | 3.4 | 2 | 3.5 | 2 | 3.5 | 2 | 5,370 |
| E76Z Respiratory Tuberculosis | 30 | 22 | 145 | 167 | 16.5 | 6.5 | 15.1 | 8 | 15.3 | 8 | 197 |
| Total Discharges | 13,093 | 6,951 | 47,239 | 54,196 | 6.8 | 2 | 8.3 | 5 | 8.1 | 5 | 67,289 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.7 Total Discharges: MDC 5 Diseases and Disorders of the Circulatory System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 5 Diseases and Disorders of the Circulatory System | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|--------------------|----------|-----------------------------|-----------|--------|--------------------|--------|----|-------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N | | |
| | N | N | N | Mean | Median | Mean | Median | Mean | Median | | | |
| F01A Implantation or Replacement of AICD, Total System W Cat CC | 0 | 37 | 64 | 101 | 5.3 | 2 | 24.3 | 17 | 17.3 | 12 | 101 | |
| F01B Implantation or Replacement of AICD, Total System W/O Cat CC | 77 | 221 | 95 | 316 | 2.5 | 2 | 8.7 | 7 | 4.4 | 2 | 393 | |
| F02Z Other AICD Procedures | 15 | 20 | 24 | 44 | 2.3 | 1 | 15.4 | 7 | 9.5 | 3 | 59 | |
| F03A Cardiac Valve Proc W CPB Pump W Invasive Cardiac Investigation W Cat CC | 0 | 10 | 30 | 40 | 43.0 | 31 | 28.4 | 26 | 32.0 | 26 | 40 | |
| F03B Cardiac Valve Proc W CPB Pump W Invasive Cardiac Investigation W/O Cat CC | 1 | 8 | 7 | 15 | 18.4 | 17 | 19.7 | 20 | 19.0 | 20 | 16 | |
| F04A Cardiac Valve Proc W CPB Pump W/O Invasive Cardiac Inves W Cat CC | 0 | 153 | 80 | 233 | 19.2 | 14 | 24.6 | 18 | 21.1 | 15 | 233 | |
| F04B Cardiac Valve Proc W CPB Pump W/O Invasive Cardiac Inves W/O Cat CC | 0 | 176 | 26 | 202 | 12.0 | 11 | 12.9 | 11 | 12.1 | 11 | 202 | |
| F05A Coronary Bypass W Invasive Cardiac Investigation W Reoperation or W Cat CC | 0 | 29 | 46 | 75 | 21.1 | 17 | 29.7 | 24 | 26.4 | 21 | 75 | |
| F05B Coronary Bypass W Invasive Cardiac Investigation W/O Reoperation W/O Cat CC | 1 | 35 | 38 | 73 | 18.7 | 15 | 20.9 | 20 | 19.8 | 18 | 74 | |
| F06A Coronary Bypass W/O Invasive Cardiac Inves W Reoperation or W Cat or Sev CC | 0 | 257 | 191 | 448 | 13.4 | 11 | 15.7 | 13 | 14.4 | 12 | 448 | |
| F06B Coronary Bypass W/O Invasive Cardiac Inves W/O Reoperation W/O Cat or Sev CC | 0 | 149 | 58 | 207 | 9.7 | 9 | 10.2 | 9 | 9.8 | 9 | 207 | |
| F07A Other Cardiothoracic/Vascular Procedures W CPB Pump W Cat CC | 0 | 42 | 18 | 60 | 18.0 | 16 | 23.0 | 23 | 19.5 | 17 | 60 | |
| F07B Other Cardiothoracic/Vascular Procedures W CPB Pump W Sev or Moderate CC | 0 | 54 | 7 | 61 | 14.7 | 13 | 20.9 | 19 | 15.4 | 13 | 61 | |
| F07C Other Cardiothoracic/Vascular Procedures W CPB Pump W/O CC | 0 | 52 | 6 | 58 | 9.5 | 9 | 25.2 | 16 | 11.2 | 9 | 58 | |
| F08A Major Reconstruct Vascular Procedures W/O CPB Pump W Cat CC | 0 | 102 | 141 | 243 | 19.9 | 14 | 27.6 | 21 | 24.3 | 19 | 243 | |
| F08B Major Reconstruct Vascular Procedures W/O CPB Pump W/O Cat CC | 6 | 366 | 215 | 581 | 8.8 | 8 | 12.3 | 10 | 10.1 | 8 | 587 | |
| F09A Other Cardiothoracic Procedures W/O CPB Pump W Cat CC | 0 | 23 | 57 | 80 | 10.7 | 8 | 12.6 | 10 | 12.1 | 9 | 80 | |
| F09B Other Cardiothoracic Procedures W/O CPB Pump W Sev or Moderate CC | 4 | 31 | 51 | 82 | 5.8 | 3 | 8.1 | 7 | 7.2 | 6 | 86 | |
| F09C Other Cardiothoracic Procedures W/O CPB Pump W/O CC | 22 | 35 | 36 | 71 | 3.8 | 2 | 5.8 | 5 | 4.8 | 4 | 93 | |
| F10A Interventional Coronary Procedures W AMI W Cat CC | 1 | 11 | 126 | 137 | 5.4 | 4 | 15.4 | 11 | 14.6 | 10 | 138 | |
| F10B Interventional Coronary Procedures W AMI W/O Cat CC | 143 | 108 | 1,105 | 1,213 | 2.5 | 1 | 4.6 | 4 | 4.5 | 4 | 1,356 | |
| F11A Amputation for Circ System Except Upper Limb and Toe W Cat CC | 0 | 25 | 58 | 83 | 34.8 | 33 | 55.9 | 36 | 49.5 | 35 | 83 | |
| F11B Amputation for Circ System Except Upper Limb and Toe W/O Cat CC | 0 | 29 | 66 | 95 | 22.5 | 15 | 25.6 | 19 | 24.6 | 17 | 95 | |
| F12A Implantation or Replacement of Pacemaker, Total System W Cat CC | 2 | 16 | 90 | 106 | 10.6 | 6 | 27.4 | 13 | 24.9 | 12 | 108 | |
| F12B Implantation or Replacement of Pacemaker, Total System W/O Cat CC | 301 | 280 | 409 | 689 | 2.5 | 2 | 6.6 | 5 | 4.9 | 3 | 990 | |
| F13A Upper Limb and Toe Amputation for Circulatory Sys Disorders W Cat or Sev CC | 1 | 15 | 46 | 61 | 19.8 | 11 | 22.2 | 20 | 21.6 | 17 | 62 | |
| F13B Upper Limb and Toe Amputation for Circulatory Sys Disorders W/O Cat or Sev CC | 1 | 19 | 31 | 50 | 8.5 | 5 | 15.5 | 8 | 12.9 | 7 | 51 | |

TABLE 5.7 Total Discharges: MDC 5 Diseases and Disorders of the Circulatory System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 5 Diseases and Disorders of the Circulatory System | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|-----------|--------------------|-----------------------------|--------|-----------|--------|--------------------|--------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N |
| | | N | N | N | Mean | Median | Mean | Median | Mean | Median | |
| F14A Vascular Procs Except Major Reconstruction W/O CPB Pump W Cat CC | 5 | 67 | 191 | 258 | 14.6 | 7 | 20.6 | 15 | 19.1 | 14 | 263 |
| F14B Vascular Procs Except Major Reconstruction W/O CPB Pump W Sev or Mod CC | 17 | 136 | 155 | 291 | 4.8 | 3 | 11.5 | 9 | 8.4 | 6 | 308 |
| F14C Vascular Procs Except Major Reconstruction W/O CPB Pump W/O CC | 126 | 387 | 147 | 534 | 3.0 | 2 | 8.0 | 6 | 4.4 | 2 | 660 |
| F15A Interventional Coronary Procs W/O AMI W Stent Implantation W Cat or Sev CC | 52 | 267 | 316 | 583 | 2.4 | | 7.8 | 5 | 5.3 | 3 | 635 |
| F15B Interventional Coronary Procs W/O AMI W Stent Implantation W/O Cat or Sev CC | 712 | 996 | 690 | 1,686 | 1.4 | 1 | 4.3 | 3 | 2.6 | 1 | 2,398 |
| F16A Interventional Coronary Procedures W/O AMI W/O Stent Implantation W CC | 6 | 24 | 23 | 47 | 3.3 | 1 | 9.4 | 8 | 6.3 | 3 | 53 |
| F16B Interventional Coronary Procedures W/O AMI W/O Stent Implantation W/O CC | 23 | 35 | 33 | 68 | 1.6 | 1 | 4.0 | 3 | 2.8 | 2 | 91 |
| F17A Insertion or Replacement of Pacemaker Generator W Cat or Sev CC | 2 | 18 | 20 | 38 | 5.7 | 3 | 19.2 | 10 | 12.8 | 8 | 40 |
| F17B Insertion or Replacement of Pacemaker Generator W/O Cat or Sev CC | 79 | 124 | 39 | 163 | 2.0 | 2 | 6.1 | 5 | 3.0 | 2 | 242 |
| F18A Other Pacemaker Procedures W CC | 1 | 7 | 25 | 32 | 5.7 | 6 | 8.8 | 5 | 8.1 | 6 | 33 |
| F18B Other Pacemaker Procedures W/O CC | 8 | 14 | 17 | 31 | 1.4 | 1 | 6.5 | 4 | 4.2 | 2 | 39 |
| F19Z Trans-Vascular Percutaneous Cardiac Intervention | 30 | 124 | 27 | 151 | 2.1 | 2 | 17.4 | 12 | 4.9 | 2 | 181 |
| F20Z Vein Ligation and Stripping | 2,254 | 756 | 29 | 785 | 1.5 | 1 | 8.9 | 2 | 1.8 | 1 | 3,039 |
| F21A Other Circulatory System OR Procedures W Cat CC | 1 | 11 | 45 | 56 | 19.8 | 13 | 24.7 | 19 | 23.7 | 17 | 57 |
| F21B Other Circulatory System OR Procedures W/O Cat CC | 16 | 18 | 57 | 75 | 14.4 | 4 | 13.8 | 8 | 14.0 | 7 | 91 |
| F40A Circulatory System Diagnosis W Ventilator Support W Cat CC | 0 | 2 | 53 | 55 | 5.0 | 5 | 13.8 | 8 | 13.4 | 8 | 55 |
| F40B Circulatory System Diagnosis W Ventilator Support W/O Cat CC | 0 | 3 | 62 | 65 | 15.7 | 15 | 8.0 | 4 | 8.4 | 4 | 65 |
| F41A Circulatory Disorders W AMI W Invasive Cardiac Inves Proc W Cat or Sev CC | 8 | 5 | 168 | 173 | 7.2 | 6 | 11.6 | 8 | 11.5 | 8 | 181 |
| F41B Circulatory Disorders W AMI W Invasive Cardiac Inves Proc W/O Cat or Sev CC | 117 | 20 | 449 | 469 | 5.7 | 2 | 6.2 | 5 | 6.1 | 5 | 586 |
| F42A Circulatory Disorders W/O AMI W Invasive Cardiac Inves Proc W Cat or Sev CC | 0 | 113 | 540 | 654 | 7.4 | 3 | 11.4 | 8 | 10.7 | 7 | 654 |
| F42B Circulatory Disorders W/O AMI W Invasive Cardiac Inves Proc W/O Cat or Sev CC | 0 | 631 | 2,108 | 2,739 | 2.8 | 1 | 5.1 | 4 | 4.6 | 3 | 2,739 |
| F42C Circulatory Disorders W/O AMI W Invasive Cardiac Inves Proc, Sameday | 8,262 | 92 | 237 | 329 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 8,591 |
| F43Z Circulatory System Diagnosis W Non-Invasive Ventilation | 0 | 5 | 158 | 163 | 19.0 | 21 | 21.5 | 13 | 21.4 | 13 | 163 |
| F60A Circulatory Disorders W AMI W/O Invasive Cardiac Inves Proc W Cat CC | 0 | 9 | 449 | 458 | 13.3 | 13 | 19.5 | 10 | 19.4 | 10 | 458 |
| F60B Circulatory Disorders W AMI W/O Invasive Cardiac Inves Pr W/O Cat CC | 8 | 189 | 2,825 | 3,014 | 3.7 | 2 | 6.3 | 4 | 6.1 | 4 | 3,022 |

TABLE 5.7 Total Discharges: MDC 5 Diseases and Disorders of the Circulatory System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 5 Diseases and Disorders of the Circulatory System | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|--|---------------------------|---------------|---------------|--------------------|-----------------------------|----------|------------|----------|--------------------|----------|---------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N | |
| | | N | N | N | Mean | Median | Mean | Median | Mean | Median | | |
| F61A Infective Endocarditis W Cat CC | 0 | 3 | 36 | 39 | 31.0 | 35 | 35.9 | 28 | 35.5 | 28 | 39 | |
| F61B Infective Endocarditis W/O Cat CC | 81 | 10 | 51 | 61 | 17.7 | 10 | 23.8 | 22 | 22.8 | 19 | 142 | |
| F62A Heart Failure and Shock W Cat CC | 3 | 56 | 1,254 | 1,310 | 22.8 | 13 | 21.2 | 12 | 21.2 | 12 | 1,313 | |
| F62B Heart Failure and Shock W/O Cat CC | 78 | 204 | 3,821 | 4,028 | 9.8 | 7 | 8.6 | 6 | 8.7 | 6 | 4,106 | |
| F63A Venous Thrombosis W Cat or Sev CC | 6 | 14 | 356 | 370 | 10.8 | 10 | 11.1 | 7 | 11.1 | 7 | 376 | |
| F63B Venous Thrombosis W/O Cat or Sev CC | 172 | 47 | 1,243 | 1,291 | 4.3 | 2 | 4.9 | 4 | 4.9 | 4 | 1,463 | |
| F64A Skin Ulcers in Circulatory Disorders W Cat or Sev CC | 0 | 15 | 120 | 135 | 21.0 | 16 | 23.5 | 15 | 23.3 | 15 | 135 | |
| F64B Skin Ulcers in Circulatory Disorders W/O Cat or Sev CC | 88 | 38 | 151 | 189 | 9.5 | 7 | 10.2 | 7 | 10.1 | 7 | 277 | |
| F65A Peripheral Vascular Disorders W Cat or Sev CC | 28 | 85 | 307 | 392 | 10.4 | 5 | 18.4 | 8 | 16.6 | 7 | 420 | |
| F65B Peripheral Vascular Disorders W/O Cat or Sev CC | 724 | 316 | 615 | 931 | 3.9 | 3 | 6.3 | 4 | 5.5 | 3 | 1,655 | |
| F66A Coronary Atherosclerosis W Cat or Sev CC | 13 | 94 | 373 | 467 | 6.3 | 4 | 9.8 | 6 | 9.1 | 5 | 480 | |
| F66B Coronary Atherosclerosis W/O Cat or Sev CC | 253 | 515 | 1,700 | 2,215 | 3.0 | 2 | 4.7 | 3 | 4.3 | 3 | 2,468 | |
| F67A Hypertension W Cat or Sev CC | 7 | 8 | 152 | 160 | 6.5 | 3 | 7.3 | 5 | 7.3 | 5 | 167 | |
| F67B Hypertension W/O Cat or Sev CC | 331 | 72 | 1,306 | 1,378 | 3.0 | 2 | 3.1 | 1 | 3.1 | 1 | 1,709 | |
| F68A Congenital Heart Disease W CC | 97 | 24 | 31 | 55 | 4.0 | 3 | 18.7 | 6 | 12.3 | 4 | 152 | |
| F68B Congenital Heart Disease W/O CC | 452 | 71 | 91 | 162 | 2.2 | 1 | 3.6 | 2 | 3.0 | 2 | 614 | |
| F69A Valvular Disorders W Cat or Sev CC | 36 | 28 | 256 | 284 | 13.4 | 10 | 11.6 | 7 | 11.8 | 7 | 320 | |
| F69B Valvular Disorders W/O Cat or Sev CC | 639 | 141 | 1,803 | 1,945 | 3.3 | 2 | 2.6 | 1 | 2.6 | 1 | 2,584 | |
| F72A Unstable Angina W Cat or Sev CC | 4 | 18 | 340 | 358 | 7.6 | 5 | 8.1 | 6 | 8.0 | 6 | 362 | |
| F72B Unstable Angina W/O Cat or Sev CC | 35 | 307 | 1,873 | 2,180 | 2.1 | 1 | 4.3 | 3 | 4.0 | 3 | 2,215 | |
| F73A Syncope and Collapse W Cat or Sev CC | 18 | 30 | 1,695 | 1,725 | 8.4 | 8 | 12.1 | 6 | 12.1 | 6 | 1,743 | |
| F73B Syncope and Collapse W/O Cat or Sev CC | 2,535 | 100 | 5,333 | 5,435 | 4.1 | 3 | 3.6 | 2 | 3.6 | 2 | 7,970 | |
| F74Z Chest Pain | 1,303 | 296 | 14,439 | 14,736 | 2.7 | 1 | 2.2 | 1 | 2.2 | 1 | 16,039 | |
| F75A Other Circulatory System Diagnoses W Cat CC | 1 | 18 | 189 | 207 | 18.8 | 17 | 12.5 | 9 | 13.0 | 9 | 208 | |
| F75B Other Circulatory System Diagnoses W Sev or Moderate CC | 149 | 180 | 887 | 1,068 | 5.7 | 5 | 6.8 | 5 | 6.6 | 5 | 1,217 | |
| F75C Other Circulatory System Diagnoses W/O CC | 295 | 121 | 719 | 841 | 3.4 | 2 | 3.6 | 2 | 3.6 | 2 | 1,136 | |
| F76A Arrhythmia, Cardiac Arrest and Conduction Disorders W Cat or Sev CC | 42 | 75 | 1,435 | 1,510 | 5.6 | 3 | 10.5 | 6 | 10.2 | 6 | 1,552 | |
| F76B Arrhythmia, Cardiac Arrest and Conduction Disorders W/O Cat or Sev CC | 1,801 | 778 | 5,261 | 6,039 | 2.6 | 1 | 4.0 | 3 | 3.8 | 2 | 7,840 | |
| Total Discharges | 21,493 | 10,020 | 57,821 | 67,852 | 5.1 | 2 | 6.0 | 3 | 5.9 | 3 | 89,345 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.8 Total Discharges: MDC 6 Diseases and Disorders of the Digestive System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 6 Diseases and Disorders of the Digestive System | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|-----------|--------------------|-----------------------------|--------|-----------|--------|--------------------|--------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N |
| | | N | N | N | Mean | Median | Mean | Median | Mean | Median | |
| G01A Rectal Resection W Cat CC | 0 | 152 | 115 | 267 | 27.9 | 17 | 30.0 | 22 | 28.8 | 20 | 267 |
| G01B Rectal Resection W/O Cat CC | 2 | 493 | 123 | 616 | 11.8 | 10 | 18.2 | 16 | 13.1 | 11 | 618 |
| G02A Major Small and Large Bowel Procedures W Cat CC | 0 | 280 | 597 | 877 | 22.8 | 17 | 29.8 | 21 | 27.5 | 20 | 877 |
| G02B Major Small and Large Bowel Procedures W/O Cat CC | 72 | 921 | 715 | 1,636 | 10.5 | 9 | 15.1 | 12 | 12.5 | 10 | 1,708 |
| G03A Stomach, Oesophageal and Duodenal Procedure W Malignancy or W Cat CC | 2 | 242 | 144 | 386 | 19.5 | 16 | 28.3 | 20 | 22.8 | 17 | 388 |
| G03B Stomach, Oesophageal and Duodenal Procedures W/O Malignancy W Sev or Mod CC | 1 | 45 | 84 | 129 | 8.8 | 6 | 11.2 | 8 | 10.3 | 7 | 130 |
| G03C Stomach, Oesophageal and Duodenal Procedures W/O Malignancy W/O CC | 57 | 152 | 142 | 294 | 4.4 | 3 | 8.5 | 6 | 6.4 | 5 | 351 |
| G04A Peritoneal Adhesiolysis W Cat CC | 0 | 18 | 64 | 82 | 12.8 | 13 | 24.9 | 21 | 22.2 | 17 | 82 |
| G04B Peritoneal Adhesiolysis W Sev or Moderate CC | 2 | 48 | 81 | 129 | 10.8 | 7 | 13.3 | 11 | 12.4 | 9 | 131 |
| G04C Peritoneal Adhesiolysis W/O CC | 62 | 216 | 335 | 551 | 4.7 | 3 | 6.4 | 5 | 5.7 | 4 | 613 |
| G05A Minor Small and Large Bowel Procedures W Cat CC | 0 | 36 | 19 | 55 | 15.3 | 9 | 35.5 | 25 | 22.3 | 14 | 55 |
| G05B Minor Small and Large Bowel Procedures W Sev or Moderate CC | 0 | 70 | 22 | 92 | 9.3 | 8 | 14.9 | 15 | 10.6 | 8 | 92 |
| G05C Minor Small and Large Bowel Procedures W/O CC | 16 | 192 | 28 | 220 | 7.3 | 7 | 12.3 | 10 | 7.9 | 7 | 236 |
| G06Z Pyloromyotomy Procedure | 0 | 4 | 101 | 105 | 2.8 | 3 | 4.0 | 4 | 4.0 | 4 | 105 |
| G07A Appendectomy W Malignancy or Peritonitis or W Cat or Sev CC | 3 | 21 | 1,035 | 1,056 | 3.7 | 3 | 5.4 | 4 | 5.4 | 4 | 1,059 |
| G07B Appendectomy W/O Malignancy or Peritonitis W/O Cat or Sev CC | 14 | 93 | 5,272 | 5,365 | 2.5 | 2 | 3.1 | 3 | 3.1 | 3 | 5,379 |
| G10A Hernia Procedures W CC | 18 | 290 | 187 | 477 | 5.1 | 3 | 10.0 | 7 | 7.0 | 5 | 495 |
| G10B Hernia Procedures W/O CC | 2,099 | 2,274 | 559 | 2,833 | 2.2 | 2 | 3.9 | 3 | 2.5 | 2 | 4,932 |
| G11Z Anal and Stomal Procedures | 3,410 | 658 | 956 | 1,614 | 3.2 | 2 | 3.8 | 2 | 3.5 | 2 | 5,024 |
| G12A Other Digestive System OR Procedures W Cat CC | 8 | 45 | 124 | 169 | 20.0 | 10 | 26.9 | 21 | 25.1 | 17 | 177 |
| G12B Other Digestive System OR Procedures W Sev or Moderate CC | 56 | 108 | 160 | 268 | 6.7 | 5 | 13.3 | 9 | 10.7 | 7 | 324 |
| G12C Other Digestive System OR Procedures W/O CC | 239 | 158 | 440 | 600 | 3.9 | 2 | 6.4 | 5 | 5.7 | 4 | 839 |
| G46A Complex Gastroscopy W Cat CC | 0 | 36 | 233 | 269 | 40.2 | 25 | 24.3 | 17 | 26.5 | 17 | 269 |
| G46B Complex Gastroscopy W/O Cat CC | 0 | 650 | 1,634 | 2,284 | 4.7 | 2 | 9.4 | 7 | 8.0 | 6 | 2,284 |
| G46C Complex Gastroscopy, Sameday | 10,613 | 6 | 16 | 22 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 10,635 |
| G47A Other Gastroscopy W Cat CC | 0 | 32 | 376 | 408 | 12.2 | 11 | 19.9 | 12 | 19.3 | 12 | 408 |
| G47B Other Gastroscopy W/O Cat CC | 0 | 767 | 5,066 | 5,834 | 3.9 | 2 | 5.3 | 4 | 5.1 | 3 | 5,834 |
| G47C Other Gastroscopy, Sameday | 34,633 | 22 | 279 | 302 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 34,935 |
| G48A Colonoscopy W Cat or Sev CC | 0 | 128 | 475 | 603 | 8.4 | 5 | 16.4 | 10 | 14.7 | 9 | 603 |
| G48B Colonoscopy W/O Cat or Sev CC | 0 | 1,150 | 2,004 | 3,154 | 3.1 | 2 | 6.8 | 5 | 5.5 | 4 | 3,154 |
| G48C Colonoscopy, Sameday | 35,274 | 23 | 32 | 55 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 35,329 |
| G60A Digestive Malignancy W Cat CC | 60 | 98 | 288 | 386 | 17.1 | 11 | 15.4 | 11 | 15.8 | 11 | 446 |
| G60B Digestive Malignancy W/O Cat CC | 4,608 | 1,150 | 792 | 1,942 | 8.9 | 3 | 7.0 | 4 | 8.1 | 4 | 6,550 |
| G61A GI Haemorrhage W Cat or Sev CC | 10 | 16 | 307 | 323 | 26.9 | 9 | 8.2 | 4 | 9.2 | 5 | 333 |
| G61B GI Haemorrhage W/O Cat or Sev CC | 242 | 50 | 1,014 | 1,064 | 3.1 | 2 | 3.6 | 2 | 3.6 | 2 | 1,306 |
| G62Z Complicated Peptic Ulcer | 65 | 7 | 73 | 80 | 6.7 | 3 | 10.0 | 7 | 9.7 | 7 | 145 |
| G63Z Uncomplicated Peptic Ulcer | 18 | 6 | 53 | 59 | 3.8 | 3 | 4.0 | 2 | 4.0 | 2 | 77 |

TABLE 5.8 Total Discharges: MDC 6 Diseases and Disorders of the Digestive System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 6 Diseases and Disorders of the Digestive System | Day Patients ^a | Discharges | | | In-Patients | | | | | | Total Discharges ^b |
|---|---------------------------|---------------|---------------|--------------------|-------------|----------|------------|----------|--------------------|----------|-------------------------------|
| | | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | |
| | N | N | N | N | Mean | Median | Mean | Median | Mean | Median | N |
| | | | | | | | | | | | |
| G64A Inflammatory Bowel Disease W CC | 78 | 27 | 173 | 200 | 6.8 | 5 | 7.1 | 6 | 7.0 | 6 | 278 |
| G64B Inflammatory Bowel Disease W/O CC | 3,667 | 127 | 593 | 721 | 4.9 | 4 | 5.2 | 4 | 5.1 | 4 | 4,388 |
| G65A GI Obstruction W Cat or Sev CC | 0 | 7 | 323 | 330 | 22.6 | 22 | 12.0 | 8 | 12.2 | 8 | 330 |
| G65B GI Obstruction W/O Cat or Sev CC | 14 | 16 | 798 | 814 | 3.7 | 3 | 4.8 | 4 | 4.8 | 4 | 828 |
| G66Z Abdominal Pain or Mesenteric Adenitis | 767 | 259 | 9,225 | 9,495 | 2.9 | 2 | 2.2 | 1 | 2.3 | 1 | 10,262 |
| G67A Oesophagitis and Gastroenteritis W Cat/Sev CC | 38 | 50 | 1,257 | 1,307 | 11.7 | 5 | 8.2 | 5 | 8.3 | 5 | 1,345 |
| G67B Oesophagitis and Gastroenteritis W/O Cat/Sev CC | 1,020 | 220 | 9,228 | 9,457 | 3.1 | 2 | 2.3 | 1 | 2.3 | 1 | 10,477 |
| G70A Other Digestive System Diagnoses W Cat or Sev CC | 111 | 176 | 1,576 | 1,752 | 10.8 | 4 | 8.4 | 5 | 8.6 | 5 | 1,863 |
| G70B Other Digestive System Diagnoses W/O Cat or Sev CC | 3,858 | 737 | 7,371 | 8,111 | 3.3 | 2 | 3.4 | 2 | 3.3 | 2 | 11,969 |
| Total Discharges | 101,137 | 12,276 | 54,489 | 66,793 | 6.5 | 3 | 5.2 | 3 | 5.4 | 3 | 167,930 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.9 Total Discharges: MDC 7 Diseases and Disorders of the Hepatobiliary System and Pancreas: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 7 Diseases and Disorders of the Hepatobiliary System and Pancreas | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|--|---------------------------|--------------|--------------------|---------------|-----------------------------|-----------|------------|--------------------|------------|----------|---------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N | | |
| | N | N | N | Mean | Median | Mean | Median | Mean | Median | | | |
| H01A Pancreas, Liver and Shunt Procedures W Cat CC | 1 | 72 | 47 | 119 | 22.3 | 18 | 33.2 | 28 | 26.6 | 21 | 120 | |
| H01B Pancreas, Liver and Shunt Procedures W/O Cat CC | 9 | 112 | 36 | 148 | 9.2 | 9 | 17.7 | 15 | 11.3 | 9 | 157 | |
| H02A Major Biliary Tract Procedures W Cat CC | 0 | 20 | 61 | 81 | 17.0 | 14 | 27.3 | 24 | 24.8 | 20 | 81 | |
| H02B Major Biliary Tract Procedures W Sev CC | 11 | 26 | 48 | 74 | 13.2 | 11 | 18.5 | 16 | 16.6 | 13 | 85 | |
| H02C Major Biliary Tract Procedures W/O Cat or Sev CC | 48 | 67 | 65 | 132 | 9.1 | 8 | 14.8 | 11 | 11.9 | 9 | 180 | |
| H05A Hepatobiliary Diagnostic Procedures W Cat CC | 2 | 15 | 21 | 36 | 10.3 | 12 | 24.2 | 21 | 18.4 | 15 | 38 | |
| H05B Hepatobiliary Diagnostic Procedures W/O Cat CC | 19 | 47 | 41 | 88 | 4.5 | 3 | 12.6 | 12 | 8.2 | 6 | 107 | |
| H06A Other Hepatobiliary and Pancreas OR Procedures W Cat CC | 0 | 24 | 49 | 73 | 11.6 | 4 | 34.5 | 23 | 27.0 | 16 | 73 | |
| H06B Other Hepatobiliary and Pancreas OR Procedures W/O Cat CC | 22 | 70 | 41 | 111 | 4.7 | 3 | 18.3 | 16 | 9.7 | 5 | 133 | |
| H07A Open Cholecystectomy W Closed CDE or W Cat CC | 0 | 18 | 31 | 49 | 15.2 | 16 | 35.7 | 16 | 28.2 | 16 | 49 | |
| H07B Open Cholecystectomy W/O Closed CDE W/O Cat CC | 5 | 158 | 88 | 246 | 6.0 | 5 | 12.5 | 11 | 8.3 | 7 | 251 | |
| H08A Laparoscopic Cholecystectomy W Closed CDE or W (Cat or Sev CC) | 8 | 179 | 149 | 329 | 5.8 | 3 | 11.3 | 10 | 8.3 | 7 | 337 | |
| H08B Laparoscopic Cholecystectomy W/O Closed CDE W/O Cat or Sev CC | 559 | 2,646 | 609 | 3,255 | 2.3 | 2 | 6.2 | 5 | 3.0 | 2 | 3,814 | |
| H40A Endoscopic Procedures for Bleeding Oesophageal Varices W Cat CC | 0 | 2 | 28 | 30 | 13.5 | 14 | 24.4 | 14 | 23.6 | 14 | 30 | |
| H40B Endoscopic Procedures for Bleeding Oesophageal Varices W/O Cat CC | 5 | 11 | 49 | 60 | 4.8 | 2 | 10.4 | 8 | 9.4 | 7 | 65 | |
| H43A ERCP Procedures W Cat or Sev CC | 17 | 56 | 258 | 314 | 8.1 | 7 | 17.9 | 12 | 16.1 | 11 | 331 | |
| H43B ERCP Procedures W/O Cat or Sev CC | 1,230 | 275 | 621 | 896 | 3.1 | 1 | 7.6 | 6 | 6.2 | 5 | 2,126 | |
| H60A Cirrhosis and Alcoholic Hepatitis W Cat CC | 5 | 28 | 274 | 302 | 17.8 | 9 | 18.7 | 14 | 18.6 | 13 | 307 | |
| H60B Cirrhosis and Alcoholic Hepatitis W Sev or Moderate CC | 80 | 85 | 512 | 597 | 4.7 | 2 | 11.9 | 7 | 10.9 | 7 | 677 | |
| H60C Cirrhosis and Alcoholic Hepatitis W/O CC | 186 | 49 | 107 | 156 | 2.9 | 1 | 6.5 | 5 | 5.4 | 3 | 342 | |
| H61A Malignancy of Hepatobiliary System, Pancreas W Cat CC | 29 | 39 | 223 | 262 | 12.3 | 8 | 15.8 | 10 | 15.3 | 10 | 291 | |
| H61B Malignancy of Hepatobiliary System, Pancreas W/O Cat CC | 1,032 | 353 | 523 | 876 | 9.1 | 4 | 10.3 | 8 | 9.8 | 6 | 1,908 | |
| H62A Disorders of Pancreas Except for Malignancy W Cat or Sev CC | 4 | 20 | 309 | 329 | 16.0 | 7 | 12.9 | 10 | 13.1 | 10 | 333 | |
| H62B Disorders of Pancreas Except for Malignancy W/O Cat or Sev CC | 300 | 45 | 1,144 | 1,189 | 3.7 | 2 | 6.1 | 5 | 6.0 | 5 | 1,489 | |
| H63A Disorders of Liver Except Malig, Cirrhosis, Alcoholic Hepatitis W Cat/Sev CC | 35 | 67 | 316 | 383 | 11.1 | 4 | 14.0 | 10 | 13.5 | 9 | 418 | |
| H63B Disorders of Liver Excep Malig, Cirrhosis, Alcoholic Hepatitis W/O Cat/Sev CC | 1,305 | 344 | 649 | 993 | 1.9 | 1 | 5.1 | 4 | 4.0 | 2 | 2,298 | |
| H64A Disorders of the Biliary Tract W CC | 49 | 101 | 881 | 982 | 5.5 | 3 | 9.6 | 7 | 9.2 | 7 | 1,031 | |
| H64B Disorders of the Biliary Tract W/O CC | 421 | 287 | 2,608 | 2,896 | 3.1 | 2 | 4.5 | 4 | 4.4 | 3 | 3,317 | |
| Total Discharges | 5,382 | 5,216 | 9,788 | 15,006 | 4.3 | 2 | 8.9 | 6 | 7.3 | 4 | 20,388 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.
a Includes *Maternity* day patients.
b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.
d Total in-patients include *Maternity* in-patients.
e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.10 Total Discharges: MDC 8 Diseases and Disorders of the Musculoskeletal System and Connective Tissue: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 8 Diseases and Disorders of the Musculoskeletal System and Connective Tissue | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|-----------|--------------------|-----------------------------|-----------|--------------------|------|--------|----|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | N | |
| I01A Bilateral/Multiple Major Joint Proc of Lower Extremity W Revision or W Cat CC | 0 | 20 | 14 | 34 | 44.9 | 39 | 69.4 | 25 | 55.0 | 34 | 34 |
| I01B Bilateral/Multiple Major Joint Pr of Lower Extremity W/O Revision W/O Cat CC | 0 | 33 | 8 | 41 | 12.3 | 9 | 74.3 | 54 | 24.4 | 12 | 41 |
| I02A Microvascular Tissue Transfer or (Skin Graft W Cat or Sev CC), Excluding Hand | 0 | 13 | 41 | 54 | 26.8 | 26 | 49.2 | 35 | 43.8 | 33 | 54 |
| I02B Skin Graft W/O Cat or Sev CC, Excluding Hand | 11 | 49 | 35 | 84 | 6.1 | 2 | 14.5 | 9 | 9.6 | 4 | 95 |
| I03A Hip Replacement W Cat CC | 0 | 74 | 342 | 416 | 17.7 | 14 | 39.8 | 24 | 35.9 | 22 | 416 |
| I03B Hip Replacement W/O Cat CC | 1 | 2,999 | 1,382 | 4,381 | 8.4 | 8 | 14.9 | 11 | 10.4 | 8 | 4,382 |
| I04A Knee Replacement W Cat or Sev CC | 0 | 208 | 5 | 213 | 13.1 | 11 | 28.6 | 15 | 13.4 | 11 | 213 |
| I04B Knee Replacement W/O Cat or Sev CC | 0 | 1,634 | 12 | 1,646 | 8.2 | 8 | 7.9 | 8 | 8.2 | 8 | 1,646 |
| I05A Other Joint Replacement W Cat or Sev CC | 0 | 13 | 15 | 28 | 13.9 | 5 | 14.7 | 10 | 14.3 | 7 | 28 |
| I05B Other Joint Replacement W/O Cat or Sev CC | 2 | 120 | 57 | 177 | 5.3 | 4 | 7.0 | 5 | 5.8 | 4 | 179 |
| I06Z Spinal Fusion W Deformity | 6 | 140 | 14 | 154 | 10.8 | 7 | 12.9 | 9 | 11.0 | 8 | 160 |
| I07Z Amputation | 0 | 22 | 21 | 43 | 18.5 | 8 | 31.3 | 21 | 24.7 | 13 | 43 |
| I08A Other Hip and Femur Procedures W Cat CC | 1 | 12 | 369 | 381 | 33.9 | 17 | 46.3 | 27 | 45.9 | 27 | 382 |
| I08B Other Hip and Femur Procedures W/O Cat CC | 26 | 325 | 1,966 | 2,291 | 5.7 | 3 | 12.8 | 10 | 11.8 | 9 | 2,317 |
| I09A Spinal Fusion W Cat CC | 0 | 19 | 26 | 45 | 13.3 | 11 | 27.6 | 21 | 21.6 | 15 | 45 |
| I09B Spinal Fusion W/O Cat CC | 2 | 288 | 159 | 447 | 6.3 | 5 | 10.2 | 7 | 7.7 | 6 | 449 |
| I10A Other Back and Neck Procedures W Cat or Sev CC | 2 | 42 | 47 | 89 | 17.7 | 6 | 20.2 | 12 | 19.0 | 9 | 91 |
| I10B Other Back and Neck Procedures W/O Cat or Sev CC | 972 | 909 | 304 | 1,213 | 3.2 | 2 | 5.5 | 3 | 3.8 | 2 | 2,185 |
| I11Z Limb Lengthening Procedures | 3 | 40 | 9 | 49 | 6.2 | 6 | 12.4 | 6 | 7.4 | 6 | 52 |
| I12A Infect/Inflam of Bone and Joint W Misc Musculoskeletal Procs W Cat CC | 0 | 9 | 43 | 52 | 27.1 | 26 | 39.5 | 28 | 37.4 | 28 | 52 |
| I12B Infect/Inflam of Bone and Joint W Misc Musculoskeletal Procs W Sev or Mod CC | 4 | 31 | 97 | 128 | 13.0 | 7 | 17.7 | 14 | 16.5 | 14 | 132 |
| I12C Infect/Inflam of Bone and Joint W Misc Musculoskeletal Procs W/O CC | 60 | 129 | 151 | 280 | 6.5 | 3 | 10.8 | 9 | 8.8 | 5 | 340 |
| I13A Humerus, Tibia, Fibula and Ankle Procedures W CC | 2 | 64 | 495 | 559 | 5.7 | 3 | 12.8 | 6 | 12.0 | 5 | 561 |
| I13B Humerus, Tibia, Fibula and Ankle Procedures W/O CC | 93 | 550 | 3,943 | 4,493 | 2.6 | 2 | 3.4 | 2 | 3.3 | 2 | 4,586 |
| I15Z Cranio-Facial Surgery | 0 | 33 | 6 | 39 | 7.1 | 6 | 7.8 | 9 | 7.2 | 6 | 39 |
| I16Z Other Shoulder Procedures | 112 | 770 | 40 | 810 | 1.8 | 2 | 3.5 | 3 | 1.9 | 2 | 922 |
| I17A Maxillo-Facial Surgery W CC | 0 | 6 | 14 | 20 | 7.3 | 6 | 5.1 | 4 | 5.8 | 4 | 20 |
| I17B Maxillo-Facial Surgery W/O CC | 3 | 23 | 38 | 61 | 3.0 | 2 | 4.0 | 4 | 3.6 | 3 | 64 |
| I18Z Other Knee Procedures | 2,189 | 521 | 229 | 750 | 1.7 | 1 | 4.1 | 2 | 2.4 | 1 | 2,939 |
| I19A Other Elbow or Forearm Procedures W CC | 9 | 26 | 286 | 312 | 2.8 | 2 | 8.6 | 3 | 8.1 | 3 | 321 |
| I19B Other Elbow or Forearm Procedures W/O CC | 283 | 279 | 3,389 | 3,668 | 1.5 | 1 | 1.8 | 1 | 1.8 | 1 | 3,951 |
| I20Z Other Foot Procedures | 372 | 723 | 507 | 1,230 | 2.1 | 2 | 3.2 | 2 | 2.5 | 2 | 1,602 |

TABLE 5.10 Total Discharges: MDC 8 Diseases and Disorders of the Musculoskeletal System and Connective Tissue: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 8 Diseases and Disorders of the Musculoskeletal System and Connective Tissue | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|-----------|--------------------|-----------------------------|-----------|--------------------|------|--------|----|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | N | |
| I21Z Local Excision and Removal of Internal Fixation Devices of Hip and Femur | 77 | 61 | 10 | 71 | 2.5 | 1 | 12.0 | 5 | 3.8 | 1 | 148 |
| I23Z Local Excision and Removal of Internal Fixation Devices Excl Hip and Femur | 2,903 | 508 | 75 | 583 | 2.2 | 1 | 5.8 | 2 | 2.7 | 1 | 3,486 |
| I24Z Arthroscopy | 984 | 218 | 73 | 291 | 1.5 | 1 | 3.9 | 1 | 2.1 | 1 | 1,275 |
| I25A Bone and Joint Diagnostic Procedures Including Biopsy W CC | 21 | 20 | 30 | 50 | 5.0 | 2 | 26.4 | 18 | 17.8 | 11 | 71 |
| I25B Bone and Joint Diagnostic Procedures Including Biopsy W/O CC | 116 | 30 | 38 | 68 | 4.5 | 1 | 5.8 | 2 | 5.2 | 2 | 184 |
| I27A Soft Tissue Procedures W CC | 34 | 56 | 109 | 165 | 6.8 | 3 | 16.5 | 8 | 13.2 | 7 | 199 |
| I27B Soft Tissue Procedures W/O CC | 547 | 256 | 361 | 617 | 3.1 | 2 | 3.7 | 2 | 3.5 | 2 | 1,164 |
| I28A Other Musculoskeletal Procedures W CC | 16 | 54 | 104 | 158 | 13.2 | 7 | 19.8 | 9 | 17.5 | 8 | 174 |
| I28B Other Musculoskeletal Procedures W/O CC | 174 | 182 | 420 | 602 | 3.2 | 2 | 4.0 | 2 | 3.8 | 2 | 776 |
| I29Z Knee Reconstruction or Revision | 29 | 455 | 28 | 483 | 1.7 | 1 | 5.6 | 2 | 1.9 | 1 | 512 |
| I30Z Hand Procedures | 1,399 | 634 | 1,886 | 2,520 | 1.7 | 1 | 1.7 | 1 | 1.7 | 1 | 3,919 |
| I31A Hip Revision W Cat CC | 0 | 15 | 17 | 32 | 29.1 | 21 | 44.3 | 37 | 37.2 | 29 | 32 |
| I31B Hip Revision W/O Cat CC | 0 | 323 | 93 | 416 | 11.4 | 9 | 20.8 | 15 | 13.5 | 10 | 416 |
| I32A Knee Revision W Cat CC | 0 | 3 | 4 | 7 | 24.0 | 22 | 27.3 | 25 | 25.9 | 22 | 7 |
| I32B Knee Revision W Sev CC | 0 | 18 | 1 | 19 | 20.9 | 14 | 17.0 | 17 | 20.7 | 15 | 19 |
| I32C Knee Revision W/O Cat or Sev CC | 0 | 66 | 11 | 77 | 10.3 | 9 | 28.5 | 25 | 12.9 | 9 | 77 |
| I60Z Femoral Shaft Fractures | 0 | 1 | 86 | 87 | 10.0 | 10 | 7.5 | 3 | 7.5 | 3 | 87 |
| I61A Distal Femoral Fractures W CC | 0 | 1 | 23 | 24 | 208.0 | 208 | 22.3 | 8 | 30.0 | 8 | 24 |
| I61B Distal Femoral Fractures W/O CC | 2 | 2 | 55 | 57 | 4.5 | 5 | 6.0 | 3 | 5.9 | 3 | 59 |
| I63A Sprains, Strains and Dislocations of Hip, Pelvis and Thigh W CC | 0 | 1 | 41 | 42 | 9.0 | 9 | 8.6 | 4 | 8.6 | 4 | 42 |
| I63B Sprains, Strains and Dislocations of Hip, Pelvis and Thigh W/O CC | 3 | 2 | 152 | 154 | 3.0 | 3 | 3.0 | 2 | 3.0 | 2 | 157 |
| I64A Osteomyelitis W Cat or Sev CC | 5 | 15 | 69 | 84 | 20.9 | 16 | 31.2 | 20 | 29.4 | 19 | 89 |
| I64B Osteomyelitis W/O Cat or Sev CC | 161 | 45 | 128 | 173 | 5.8 | 4 | 10.0 | 7 | 8.9 | 6 | 334 |
| I65A Musculoskeletal Malignant Neoplasms W Cat CC | 19 | 47 | 74 | 121 | 11.1 | 6 | 19.5 | 15 | 16.3 | 10 | 140 |
| I65B Musculoskeletal Malignant Neoplasms W/O Cat CC | 884 | 368 | 382 | 750 | 6.0 | 4 | 7.8 | 5 | 7.0 | 4 | 1,634 |
| I66A Inflammatory Musculoskeletal Disorders W Cat or Sev CC | 55 | 37 | 117 | 154 | 21.7 | 10 | 24.2 | 12 | 23.6 | 11 | 209 |
| I66B Inflammatory Musculoskeletal Disorders W/O Cat or Sev CC | 6,054 | 245 | 470 | 715 | 3.7 | 2 | 5.9 | 4 | 5.1 | 3 | 6,769 |
| I67A Septic Arthritis W Cat or Sev CC | 0 | 6 | 29 | 35 | 12.8 | 12 | 23.9 | 22 | 22.0 | 18 | 35 |
| I67B Septic Arthritis W/O Cat or Sev CC | 29 | 9 | 91 | 100 | 17.7 | 12 | 7.8 | 5 | 8.7 | 6 | 129 |
| I68A Non-surgical Spinal Disorders W CC | 0 | 108 | 822 | 930 | 6.6 | 4 | 12.7 | 7 | 12.0 | 7 | 930 |
| I68B Non-surgical Spinal Disorders W/O CC | 0 | 302 | 1,694 | 1,996 | 4.3 | 2 | 4.8 | 3 | 4.8 | 3 | 1,996 |
| I68C Non-surgical Spinal Disorders, Sameday | 11,631 | 38 | 416 | 454 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 12,085 |
| I69A Bone Diseases and Arthropathies W Cat or Sev CC | 23 | 42 | 195 | 237 | 7.8 | 2 | 14.6 | 9 | 13.4 | 8 | 260 |
| I69B Bone Diseases and Arthropathies W/O Cat or Sev CC | 3,825 | 309 | 542 | 851 | 2.9 | 1 | 5.1 | 3 | 4.3 | 2 | 4,676 |
| I71A Other Musculotendinous Disorders W Cat or Sev CC | 46 | 19 | 208 | 227 | 7.6 | 6 | 11.5 | 6 | 11.2 | 6 | 273 |
| I71B Other Musculotendinous Disorders W/O Cat or Sev CC | 7,791 | 336 | 2,111 | 2,452 | 3.5 | 1 | 2.7 | 1 | 2.8 | 1 | 10,243 |

TABLE 5.10 Total Discharges: MDC 8 Diseases and Disorders of the Musculoskeletal System and Connective Tissue: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 8 Diseases and Disorders of the Musculoskeletal System and Connective Tissue | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|--|---------------------------|---------------|---------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|---------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median | N |
| I72A Specific Musculotendinous Disorders W Cat or Sev CC | 10 | 11 | 68 | 79 | 29.5 | 4 | 17.7 | 9 | 19.3 | 9 | 89 | |
| I72B Specific Musculotendinous Disorders W/O Cat or Sev CC | 2,519 | 115 | 507 | 622 | 2.7 | 1 | 4.1 | 2 | 3.8 | 2 | 3,141 | |
| I73A Aftercare of Musculoskeletal Implants/Prostheses W Cat or Sev CC | 8 | 415 | 33 | 448 | 17.7 | 12 | 20.8 | 16 | 17.9 | 12 | 456 | |
| I73B Aftercare of Musculoskeletal Implants/Prostheses W/O Cat or Sev CC | 1,984 | 462 | 223 | 685 | 11.2 | 7 | 6.9 | 3 | 9.8 | 5 | 2,669 | |
| I74Z Injury to Forearm, Wrist, Hand or Foot | 308 | 101 | 2,985 | 3,086 | 1.5 | 1 | 2.0 | 1 | 2.0 | 1 | 3,394 | |
| I75A Injury to Shoulder, Arm, Elbow, Knee, Leg or Ankle W CC | 5 | 17 | 441 | 458 | 19.8 | 8 | 17.5 | 7 | 17.6 | 7 | 463 | |
| I75B Injury to Shoulder, Arm, Elbow, Knee, Leg or Ankle W/O CC | 177 | 54 | 1,816 | 1,872 | 2.3 | 1 | 2.6 | 1 | 2.6 | 1 | 2,049 | |
| I76A Other Musculoskeletal Disorders W Cat or Sev CC | 30 | 17 | 131 | 148 | 25.1 | 7 | 19.3 | 9 | 19.9 | 9 | 178 | |
| I76B Other Musculoskeletal Disorders W/O Cat or Sev CC | 1,933 | 252 | 656 | 908 | 2.6 | 1 | 3.5 | 1 | 3.3 | 1 | 2,841 | |
| I77A Fractures of Pelvis W Cat or Sev CC | 0 | 5 | 178 | 183 | 19.0 | 11 | 21.4 | 15 | 21.3 | 14 | 183 | |
| I77B Fractures of Pelvis W/O Cat or Sev CC | 1 | 4 | 384 | 388 | 7.3 | 8 | 9.7 | 6 | 9.7 | 6 | 389 | |
| I78A Fractures of Neck of Femur W Cat or Sev CC | 0 | 3 | 93 | 96 | 35.3 | 41 | 14.0 | 9 | 14.7 | 9 | 96 | |
| I78B Fractures of Neck of Femur W/O Cat or Sev CC | 0 | 9 | 193 | 202 | 21.6 | 16 | 7.6 | 3 | 8.2 | 3 | 202 | |
| I79A Pathological Fracture W Cat CC | 0 | 4 | 24 | 28 | 30.3 | 35 | 33.8 | 24 | 33.3 | 26 | 28 | |
| I79B Pathological Fracture W/O Cat CC | 39 | 25 | 206 | 231 | 9.3 | 8 | 12.6 | 8 | 12.2 | 8 | 270 | |
| Total Discharges | 47,995 | 16,450 | 32,967 | 49,424 | 6.1 | 4 | 7.0 | 2 | 6.7 | 3 | 97,419 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.11 Total Discharges: MDC 9 Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 9 Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|-----------|--------------------|-----------------------------|-----------|--------------------|------|--------|----|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | N | |
| J01A Microvas Tiss Transf for Skin, Subcutaneous Tiss & Breast Disd W Cat/Sev CC | 0 | 10 | 0 | 10 | 11.3 | 9 | - | - | 11.3 | 9 | 10 |
| J01B Microvas Tiss Transf for Skin, Subcutaneous Tiss & Breast Disd W/O Cat/Sev CC | 0 | 15 | 1 | 16 | 8.2 | 8 | 10.0 | 10 | 8.3 | 8 | 16 |
| J06Z Major Procedures for Breast Conditions | 475 | 2,024 | 45 | 2,069 | 3.9 | 3 | 3.9 | 3 | 3.9 | 3 | 2,544 |
| J07Z Minor Procedures for Breast Conditions | 1,647 | 374 | 23 | 397 | 1.9 | 1 | 10.9 | 3 | 2.4 | 1 | 2,044 |
| J08A Other Skin Graft and/or Debridement Procedures W CC | 25 | 102 | 93 | 195 | 12.5 | 6 | 23.2 | 12 | 17.6 | 9 | 220 |
| J08B Other Skin Graft and/or Debridement Procedures W/O CC | 705 | 264 | 105 | 369 | 4.1 | 2 | 5.2 | 3 | 4.4 | 2 | 1,074 |
| J09Z Perianal and Pilonidal Procedures | 325 | 256 | 130 | 386 | 2.5 | 2 | 2.2 | 2 | 2.4 | 2 | 711 |
| J10Z Skin, Subcutaneous Tissue and Breast Plastic OR Procedures | 847 | 274 | 23 | 297 | 3.0 | 2 | 5.7 | 3 | 3.2 | 2 | 1,144 |
| J11Z Other Skin, Subcutaneous Tissue and Breast Procedures | 35,281 | 774 | 346 | 1,120 | 2.8 | 2 | 7.7 | 2 | 4.3 | 2 | 36,401 |
| J12A Lower Limb Procs W Ulcer/Cellulitis W Cat CC | 0 | 7 | 17 | 24 | 31.4 | 25 | 34.6 | 18 | 33.7 | 18 | 24 |
| J12B Lower Limb Procs W Ulcer/Cellulitis W/O Cat CC W Skin Graft/Flap Repair | 4 | 17 | 12 | 29 | 12.2 | 8 | 43.3 | 22 | 25.1 | 14 | 33 |
| J12C Lower Limb Procs W Ulcer/Cellulitis W/O Cat CC W/O Skin Graft/Flap Repair | 14 | 26 | 52 | 78 | 10.8 | 4 | 14.4 | 10 | 13.2 | 8 | 92 |
| J13A Lower Limb Procs W/O Ulcer/Cellulitis W Cat CC or W (Skin Graft and Sev CC) | 0 | 21 | 11 | 32 | 12.4 | 9 | 15.2 | 10 | 13.4 | 10 | 32 |
| J13B Lower Limb Procs W/O Ulcer/Cellulitis W/O Cat CC W/O (Skin Graft and Sev CC) | 97 | 132 | 22 | 154 | 4.1 | 2 | 6.0 | 6 | 4.3 | 2 | 251 |
| J14Z Major Breast Reconstructions | 3 | 197 | 6 | 203 | 7.4 | 7 | 8.2 | 8 | 7.4 | 7 | 206 |
| J60A Skin Ulcers W Cat CC | 0 | 8 | 63 | 71 | 60.3 | 19 | 32.6 | 14 | 35.7 | 14 | 71 |
| J60B Skin Ulcers W/O Cat CC | 0 | 52 | 339 | 391 | 15.5 | 9 | 12.6 | 8 | 13.0 | 8 | 391 |
| J60C Skin Ulcers, Sameday | 351 | 1 | 20 | 21 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 372 |
| J62A Malignant Breast Disorders W CC | 2,209 | 323 | 401 | 724 | 15.8 | 9 | 9.1 | 6 | 12.1 | 7 | 2,933 |
| J62B Malignant Breast Disorders W/O CC | 1,909 | 166 | 30 | 196 | 22.7 | 22 | 4.4 | 4 | 19.9 | 17 | 2,105 |
| J63A Non-Malignant Breast Disorders W CC | 23 | 6 | 36 | 42 | 6.3 | 6 | 6.6 | 4 | 6.5 | 4 | 65 |
| J63B Non-Malignant Breast Disorders W/O CC | 2,865 | 38 | 254 | 292 | 2.1 | 1 | 2.4 | 2 | 2.4 | 2 | 3,157 |
| J64A Cellulitis W Cat or Sev CC | 13 | 32 | 850 | 882 | 11.3 | 8 | 13.2 | 8 | 13.1 | 8 | 895 |
| J64B Cellulitis W/O Cat or Sev CC | 386 | 206 | 4,979 | 5,185 | 5.7 | 3 | 4.6 | 3 | 4.7 | 3 | 5,571 |
| J65A Trauma to the Skin, Subcutaneous Tissue and Breast W Cat or Sev CC | 0 | 0 | 155 | 155 | - | - | - | 7 | 13.2 | 7 | 155 |
| J65B Trauma to the Skin, Subcutaneous Tissue and Breast W/O Cat or Sev CC | 35 | 9 | 1,192 | 1,206 | 3.2 | 1 | 2.3 | 1 | 2.3 | 1 | 1,241 |
| J67A Minor Skin Disorders | 0 | 374 | 949 | 1,325 | 6.1 | 2 | 3.3 | 2 | 4.1 | 2 | 1,325 |
| J67B Minor Skin Disorders, Sameday | 9,852 | 19 | 362 | 382 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 10,234 |
| J68A Major Skin Disorders W Cat or Sev CC | 0 | 10 | 114 | 124 | 12.5 | 10 | 15.4 | 9 | 15.2 | 9 | 124 |
| J68B Major Skin Disorders W/O Cat or Sev CC | 0 | 72 | 553 | 626 | 6.9 | 4 | 4.1 | 3 | 4.4 | 3 | 626 |
| J68C Major Skin Disorders, Sameday | 20,934 | 14 | 128 | 142 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 21,076 |

TABLE 5.11 Total Discharges: MDC 9 Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 9 Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|--------------|---------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median |
| J69A Skin Malignancy W Cat CC | 0 | 29 | 36 | 65 | 15.6 | 8 | 18.3 | 11 | 17.1 | 9 | 65 |
| J69B Skin Malignancy W/O Cat CC | 0 | 144 | 76 | 220 | 11.1 | 7 | 10.6 | 6 | 10.9 | 7 | 220 |
| J69C Skin Malignancy, Sameday | 1,260 | 4 | 5 | 9 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 1,269 |
| Total Discharges | 79,260 | 6,000 | 11,428 | 17,437 | 5.8 | 3 | 5.9 | 3 | 5.9 | 3 | 96,697 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.
a Includes *Maternity* day patients.
b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.
d Total in-patients include *Maternity* in-patients.
e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.12 Total Discharges: MDC 10 Endocrine, Nutritional and Metabolic Diseases and Disorders: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 10 Endocrine, Nutritional and Metabolic Diseases and Disorders | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|---|---------------------------|--------------|--------------------|---------------|-----------------------------|-----------|------------|--------------------|------------|----------|---------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N | | |
| | N | N | N | Mean | Median | Mean | Median | Mean | Median | | | |
| K01A OR Procedures for Diabetic Complications W Cat CC | 0 | 23 | 133 | 156 | 36.8 | 21 | 43.1 | 23 | 42.1 | 23 | 156 | |
| K01B OR Procedures for Diabetic Complications W/O Cat CC | 12 | 38 | 127 | 165 | 9.9 | 6 | 18.1 | 13 | 16.2 | 11 | 177 | |
| K02A Pituitary Procedures W CC | 0 | 26 | 7 | 33 | 12.0 | 6 | 14.0 | 12 | 12.4 | 7 | 33 | |
| K02B Pituitary Procedures W/O CC | 2 | 51 | 4 | 55 | 5.4 | 5 | 7.3 | 8 | 5.6 | 5 | 57 | |
| K03Z Adrenal Procedures | 1 | 33 | 13 | 46 | 8.2 | 6 | 19.6 | 16 | 11.4 | 8 | 47 | |
| K04A Major Procedures for Obesity W CC | 0 | 6 | 0 | 6 | 13.2 | 5 | - | - | 13.2 | 5 | 6 | |
| K04B Major Procedures for Obesity W/O CC | 0 | 24 | 0 | 24 | 5.1 | 5 | - | - | - | 5 | 24 | |
| K05A Parathyroid Procedures W Cat or Sev CC | 0 | 21 | 4 | 25 | 6.0 | 5 | 23.5 | 22 | 8.8 | 5 | 25 | |
| K05B Parathyroid Procedures W/O Cat or Sev CC | 23 | 117 | 5 | 122 | 3.0 | 2 | 4.8 | 5 | 3.1 | 3 | 145 | |
| K06A Thyroid Procedures W Cat or Sev CC | 0 | 41 | 11 | 52 | 6.9 | 6 | 22.5 | 21 | 10.2 | 7 | 52 | |
| K06B Thyroid Procedures W/O Cat or Sev CC | 12 | 669 | 61 | 730 | 3.5 | 3 | 10.4 | 6 | 4.1 | 3 | 742 | |
| K07Z Obesity Procedures | 7 | 32 | 1 | 33 | 4.1 | 4 | 1.0 | 1 | 4.0 | 4 | 40 | |
| K08Z Thyroglossal Procedures | 9 | 51 | 1 | 52 | 2.5 | 2 | 1.0 | 1 | 2.5 | 2 | 61 | |
| K09A Other Endocrine, Nutritional and Metabolic OR Procedures W Cat CC | 0 | 6 | 25 | 31 | 6.7 | 7 | 27.0 | 19 | 23.0 | 15 | 31 | |
| K09B Other Endocrine, Nutritional and Metabolic OR Procs W Sev or Moderate CC | 4 | 26 | 20 | 46 | 7.0 | 4 | 14.5 | 13 | 10.3 | 6 | 50 | |
| K09C Other Endocrine, Nutritional and Metabolic OR Procedures W/O CC | 35 | 33 | 9 | 42 | 3.4 | 3 | 9.6 | 5 | 4.7 | 3 | 77 | |
| K40A Endoscopic or Investigative Proc for Metabolic Disorders W Cat CC | 0 | 7 | 67 | 74 | 18.4 | 10 | 34.1 | 21 | 32.6 | 21 | 74 | |
| K40B Endoscopic or Investigative Proc for Metabolic Disorders W/O Cat CC | 0 | 112 | 269 | 381 | 7.2 | 4 | 12.5 | 9 | 10.9 | 8 | 381 | |
| K40C Endoscopic or Investigative Procedure for Metabolic Disorders, Sameday | 866 | 1 | 0 | 1 | 1.0 | 1 | - | - | 1.0 | 1 | 867 | |
| K60A Diabetes W Cat or Sev CC | 2 | 41 | 654 | 695 | 23.6 | 12 | 11.7 | 7 | 12.4 | 7 | 697 | |
| K60B Diabetes W/O Cat or Sev CC | 330 | 433 | 2,943 | 3,378 | 3.5 | 2 | 4.3 | 3 | 4.2 | 3 | 3,708 | |
| K61Z Sev Nutritional Disturbance | 1 | 3 | 32 | 35 | 12.3 | 15 | 37.7 | 19 | 35.5 | 18 | 36 | |
| K62A Miscellaneous Metabolic Disorders W Cat or Sev CC | 60 | 76 | 758 | 834 | 11.2 | 6 | 11.6 | 6 | 11.5 | 6 | 894 | |
| K62B Miscellaneous Metabolic Disorders W/O Cat or Sev CC | 1,050 | 474 | 1,572 | 2,046 | 3.6 | 2 | 4.6 | 2 | 4.4 | 2 | 3,096 | |
| K63A Inborn Errors of Metabolism W CC | 165 | 41 | 32 | 73 | 6.3 | 5 | 13.8 | 8 | 9.6 | 5 | 238 | |
| K63B Inborn Errors of Metabolism W/O CC | 1,023 | 120 | 94 | 214 | 2.9 | 2 | 2.1 | 1 | 2.5 | 1 | 1,237 | |
| K64A Endocrine Disorders W Cat or Sev CC | 111 | 55 | 134 | 189 | 5.7 | 3 | 12.6 | 8 | 10.6 | 6 | 300 | |
| K64B Endocrine Disorders W/O Cat or Sev CC | 1,619 | 383 | 457 | 840 | 4.3 | 3 | 4.6 | 2 | 4.4 | 3 | 2,459 | |
| Total Discharges | 5,332 | 2,943 | 7,433 | 10,378 | 4.9 | 3 | 7.8 | 4 | 7.0 | 3 | 15,710 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.
a Includes *Maternity* day patients.
b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.
d Total in-patients include *Maternity* in-patients.
e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.13 Total Discharges: MDC 11 Diseases and Disorders of the Kidney and Urinary Tract: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 11 Diseases and Disorders of the Kidney and Urinary Tract | Day Patients ^a | Discharges | | | In-Patients | | | | | | Total Discharges ^b |
|---|---------------------------|------------|-----------|--------------------|-------------|--------|-----------------------------|--------|--------------------|--------|-------------------------------|
| | | Elective | Emergency | Total ^d | Elective | | Length of Stay ^c | | Total ^e | | |
| | N | N | N | N | Mean | Median | Mean | Median | Mean | Median | N |
| L02A Operative Insertion of Peritoneal Catheter for Dialysis W Cat or Sev CC | 1 | 19 | 23 | 42 | 5.7 | 4 | 24.0 | 10 | 15.7 | 8 | 43 |
| L02B Operative Insertion of Peritoneal Catheter for Dialysis W/O Cat or Sev CC | 9 | 25 | 17 | 42 | 5.9 | 4 | 12.8 | 7 | 8.7 | 6 | 51 |
| L03A Kidney, Ureter and Major Bladder Procedures for Neoplasm W Cat CC | 0 | 73 | 26 | 99 | 17.7 | 14 | 37.5 | 24 | 22.9 | 16 | 99 |
| L03B Kidney, Ureter and Major Bladder Procedures for Neoplasm W Sev CC | 0 | 89 | 24 | 113 | 11.4 | 10 | 16.5 | 14 | 12.5 | 11 | 113 |
| L03C Kidney, Ureter and Major Bladder Procedures for Neoplasm W/O Cat or Sev CC | 6 | 254 | 22 | 276 | 8.4 | 7 | 12.5 | 12 | 8.7 | 8 | 282 |
| L04A Kidney, Ureter & Major Bladder Procedures for Non-Neoplasm W Cat CC | 8 | 56 | 99 | 155 | 19.4 | 10 | 23.6 | 18 | 22.1 | 16 | 163 |
| L04B Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm W Sev CC | 9 | 75 | 54 | 129 | 7.4 | 5 | 13.3 | 10 | 9.8 | 8 | 138 |
| L04C Kidney, Ureter & Major Bladder Procedures for Non-Neoplasm W/O Cat or Sev CC | 168 | 433 | 145 | 578 | 5.8 | 5 | 7.8 | 6 | 6.3 | 5 | 746 |
| L05A Transurethral Prostatectomy W Cat or Sev CC | 0 | 20 | 25 | 45 | 9.0 | 9 | 19.2 | 15 | 14.7 | 12 | 45 |
| L05B Transurethral Prostatectomy W/O Cat or Sev CC | 8 | 101 | 43 | 144 | 4.8 | 4 | 9.2 | 8 | 6.1 | 5 | 152 |
| L06A Minor Bladder Procedures W Cat or Sev CC | 13 | 26 | 73 | 99 | 10.3 | 9 | 14.3 | 11 | 13.3 | 10 | 112 |
| L06B Minor Bladder Procedures W/O Cat or Sev CC | 380 | 173 | 88 | 261 | 3.8 | 3 | 6.2 | 5 | 4.6 | 3 | 641 |
| L07A Transurethral Procedures Except Prostatectomy W CC | 43 | 305 | 198 | 503 | 5.9 | 4 | 9.2 | 6 | 7.2 | 5 | 546 |
| L07B Transurethral Procedures Except Prostatectomy W/O CC | 762 | 631 | 523 | 1,154 | 3.0 | 2 | 3.2 | 2 | 3.1 | 2 | 1,916 |
| L08A Urethral Procedures W CC | 2 | 28 | 17 | 45 | 5.3 | 4 | 9.9 | 5 | 7.0 | 4 | 47 |
| L08B Urethral Procedures W/O CC | 95 | 111 | 50 | 161 | 3.2 | 2 | 4.2 | 4 | 3.5 | 3 | 256 |
| L09A Other Procedures for Kidney and Urinary Tract Disorders W Cat CC | 2 | 22 | 60 | 82 | 16.5 | 9 | 33.6 | 23 | 29.0 | 21 | 84 |
| L09B Other Procedures for Kidney and Urinary Tract Disorders W Sev CC | 8 | 53 | 32 | 85 | 4.1 | 2 | 15.7 | 11 | 8.5 | 4 | 93 |
| L09C Other Procedures for Kidney and Urinary Tract Disorders W/O Cat or Sev CC | 108 | 167 | 46 | 213 | 2.3 | 1 | 9.2 | 6 | 3.7 | 2 | 321 |
| L40Z Ureteroscopy | 80 | 39 | 115 | 154 | 3.2 | 2 | 3.6 | 3 | 3.5 | 3 | 234 |
| L41Z Cystourethroscopy, Sameday | 7,276 | 11 | 11 | 22 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 7,298 |
| L42Z ESW Lithotripsy for Urinary Stones | 1,200 | 25 | 47 | 72 | 2.4 | 1 | 4.3 | 3 | 3.7 | 3 | 1,272 |
| L60A Renal Failure W Cat CC | 15 | 29 | 477 | 506 | 15.9 | 10 | 24.3 | 13 | 23.8 | 13 | 521 |
| L60B Renal Failure W Sev CC | 259 | 64 | 661 | 725 | 8.3 | 7 | 11.7 | 7 | 11.4 | 7 | 984 |
| L60C Renal Failure W/O Cat or Sev CC | 849 | 231 | 860 | 1,091 | 4.3 | 2 | 7.3 | 5 | 6.6 | 4 | 1,940 |
| L61Z Haemodialysis | 167,954 | 8 | 1 | 9 | 2.0 | 2 | 1.0 | 1 | 1.9 | 1 | 167,963 |
| L62A Kidney and Urinary Tract Neoplasms W Cat or Sev CC | 300 | 97 | 236 | 333 | 10.9 | 5 | 12.8 | 9 | 12.2 | 8 | 633 |
| L62B Kidney and Urinary Tract Neoplasms W/O Cat or Sev CC | 901 | 221 | 184 | 405 | 5.9 | 3 | 5.3 | 3 | 5.6 | 3 | 1,306 |
| L63A Kidney and Urinary Tract Infections W Cat or Sev CC | 15 | 40 | 2,141 | 2,181 | 11.5 | 6 | 16.1 | 8 | 16.0 | 8 | 2,196 |
| L63B Kidney and Urinary Tract Infections W/O Cat or Sev CC | 1,516 | 186 | 5,674 | 5,865 | 4.1 | 3 | 5.2 | 3 | 5.2 | 3 | 7,381 |

TABLE 5.13 Total Discharges: MDC 11 Diseases and Disorders of the Kidney and Urinary Tract: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 11 Diseases and Disorders of the Kidney and Urinary Tract | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|--------------|---------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median |
| L64Z Urinary Stones and Obstruction | 345 | 220 | 2,358 | 2,579 | 3.9 | 2 | 2.9 | 2 | 3.0 | 2 | 2,924 |
| L65A Kidney and Urinary Tract Signs and Symptoms W Cat or Sev CC | 27 | 52 | 344 | 397 | 6.0 | 3 | 9.8 | 5 | 9.3 | 5 | 424 |
| L65B Kidney and Urinary Tract Signs and Symptoms W/O Cat or Sev CC | 1,298 | 264 | 1,206 | 1,470 | 2.9 | 2 | 4.1 | 3 | 3.9 | 2 | 2,768 |
| L66Z Urethral Stricture | 161 | 79 | 39 | 118 | 3.1 | 2 | 6.8 | 3 | 4.4 | 2 | 279 |
| L67A Other Kidney and Urinary Tract Diagnoses W Cat or Sev CC | 178 | 161 | 537 | 698 | 7.8 | 4 | 12.1 | 7 | 11.1 | 7 | 876 |
| L67B Other Kidney and Urinary Tract Diagnoses W/O Cat or Sev CC | 3,739 | 707 | 1,063 | 1,770 | 2.8 | 2 | 5.2 | 3 | 4.2 | 2 | 5,509 |
| L68Z Peritoneal Dialysis | 57 | 0 | 0 | 0 | - | - | - | - | - | - | 57 |
| Total Discharges | 187,792 | 5,095 | 17,519 | 22,621 | 5.3 | 3 | 7.9 | 4 | 7.3 | 4 | 210,413 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.14 Total Discharges: MDC 12 Diseases and Disorders of the Male Reproductive System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 12 Diseases and Disorders of the Male Reproductive System | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|---|---------------------------|--------------|--------------|--------------------|-----------------------------|------------|--------------------|------------|------------|------------|---------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median | N |
| M01A Major Male Pelvic Procedures W Cat or Sev CC | 0 | 66 | 2 | 68 | 10.2 | 8 | 36.5 | 37 | 10.9 | 8 | 68 | |
| M01B Major Male Pelvic Procedures W/O Cat or Sev CC | 0 | 292 | 8 | 300 | 7.0 | 7 | 9.3 | 8 | 7.1 | 7 | 300 | |
| M02A Transurethral Prostatectomy W Cat or Sev CC | 1 | 90 | 50 | 140 | 8.6 | 6 | 17.0 | 16 | 11.6 | 9 | 141 | |
| M02B Transurethral Prostatectomy W/O Cat or Sev CC | 18 | 641 | 111 | 752 | 4.8 | 4 | 8.0 | 7 | 5.3 | 4 | 770 | |
| M03Z Penis Procedures | 522 | 215 | 48 | 263 | 2.8 | 2 | 3.6 | 3 | 3.0 | 2 | 785 | |
| M04Z Testes Procedures | 1,042 | 432 | 350 | 782 | 2.2 | 1 | 2.5 | 1 | 2.3 | 1 | 1,824 | |
| M05Z Circumcision | 2,283 | 259 | 30 | 289 | 1.4 | 1 | 1.5 | 1 | 1.4 | 1 | 2,572 | |
| M06A Other Male Reproductive System OR Procedures W CC | 27 | 24 | 22 | 46 | 6.6 | 5 | 13.5 | 12 | 9.9 | 8 | 73 | |
| M06B Other Male Reproductive System OR Procedures W/O CC | 416 | 28 | 7 | 35 | 3.3 | 3 | 5.3 | 4 | 3.7 | 3 | 451 | |
| M40Z Cystourethroscopy, Sameday | 1,675 | 1 | 4 | 5 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 1,680 | |
| M60A Malignancy, Male Reproductive System W Cat or Sev CC | 192 | 139 | 245 | 384 | 13.3 | 6 | 14.6 | 8 | 14.1 | 7 | 576 | |
| M60B Malignancy, Male Reproductive System W/O Cat or Sev CC | 2,278 | 417 | 140 | 557 | 18.3 | 6 | 6.8 | 5 | 15.4 | 6 | 2,835 | |
| M61Z Benign Prostatic Hypertrophy | 1,384 | 99 | 101 | 200 | 3.7 | 2 | 6.2 | 5 | 5.0 | 4 | 1,584 | |
| M62Z Inflammation of the Male Reproductive System | 516 | 49 | 780 | 829 | 4.5 | 1 | 3.3 | 2 | 3.4 | 2 | 1,345 | |
| M63Z Sterilisation, Male | 357 | 8 | 0 | 8 | 1.4 | 1 | - | - | 1.4 | 1 | 365 | |
| M64Z Other Male Reproductive System Diagnoses | 661 | 69 | 538 | 607 | 2.7 | 2 | 2.3 | 1 | 2.3 | 1 | 1,268 | |
| Total Discharges | 11,372 | 2,829 | 2,436 | 5,265 | 6.7 | 4.0 | 5.0 | 2.0 | 5.9 | 3.0 | 16,637 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.15 Total Discharges: MDC 13 Diseases and Disorders of the Female Reproductive System: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 13 Diseases and Disorders of the Female Reproductive System | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|--------------|--------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | N | |
| N01Z Pelvic Evisceration and Radical Vulvectomy | 0 | 34 | 13 | 47 | 17.4 | 16 | 21.2 | 14 | 18.4 | 14 | 47 |
| N04A Hysterectomy for Non-Malignancy W Cat or Sev CC | 0 | 183 | 23 | 206 | 8.5 | 7 | 15.4 | 12 | 9.3 | 7 | 206 |
| N04B Hysterectomy for Non-Malignancy W/O Cat or Sev CC | 1 | 1,920 | 65 | 1,986 | 5.2 | 5 | 9.0 | 8 | 5.3 | 5 | 1,987 |
| N05A Oophorectomies and Complex Fallopian Tube Procs for Non-Malig W Cat or Sev CC | 0 | 45 | 14 | 59 | 8.5 | 7 | 10.3 | 9 | 8.9 | 7 | 59 |
| N05B Oophorectomies & Complex Fallopian Tube Procs for Non-Malig W/O Cat or Sev CC | 53 | 474 | 132 | 606 | 4.0 | 4 | 5.6 | 5 | 4.3 | 4 | 659 |
| N06A Female Reproductive System Reconstructive Procs W Cat or Sev CC | 1 | 74 | 1 | 75 | 5.2 | 5 | 6.0 | 6 | 5.3 | 5 | 76 |
| N06B Female Reproductive System Reconstructive Procs W/O Cat or Sev CC | 147 | 1,318 | 11 | 1,329 | 3.4 | 3 | 2.7 | 1 | 3.3 | 3 | 1,476 |
| N07Z Other Uterine and Adnexa Procedures for Non-Malignancy | 1,992 | 1,364 | 419 | 1,784 | 2.3 | 2 | 4.2 | 3 | 2.8 | 2 | 3,776 |
| N08Z Endoscopic and Laparoscopic Procedures for Female Reproductive System | 1,769 | 610 | 374 | 985 | 1.5 | 1 | 3.3 | 3 | 2.2 | 1 | 2,754 |
| N09Z Conisation, Vagina, Cervix and Vulva Procedures | 6,466 | 768 | 320 | 1,089 | 4.0 | 1 | 4.0 | 1 | 4.0 | 1 | 7,555 |
| N10Z Diagnostic Curettage or Diagnostic Hysteroscopy | 6,292 | 1,078 | 132 | 1,210 | 1.5 | 1 | 4.5 | 3 | 1.9 | 1 | 7,502 |
| N11Z Other Female Reproductive System OR Procedures | 23 | 60 | 50 | 111 | 9.3 | 7 | 14.5 | 10 | 11.5 | 7 | 134 |
| N12A Uterine and Adnexa Procedures for Malignancy W Cat CC | 0 | 54 | 33 | 87 | 17.1 | 13 | 23.6 | 19 | 19.6 | 15 | 87 |
| N12B Uterine and Adnexa Procedures for Malignancy W/O Cat CC | 16 | 502 | 82 | 584 | 7.2 | 7 | 10.0 | 9 | 7.6 | 7 | 600 |
| N60A Malignancy, Female Reproductive System W Cat CC | 58 | 40 | 115 | 155 | 12.3 | 10 | 19.0 | 15 | 17.3 | 14 | 213 |
| N60B Malignancy, Female Reproductive System W/O Cat CC | 1,154 | 426 | 410 | 838 | 8.8 | 4 | 8.6 | 5 | 8.7 | 4 | 1,992 |
| N61Z Infections, Female Reproductive System | 103 | 15 | 281 | 298 | 3.3 | 2 | 2.7 | 2 | 2.7 | 2 | 401 |
| N62Z Menstrual and Other Female Reproductive System Disorders | 4,732 | 478 | 2,206 | 2,697 | 1.9 | 1 | 2.2 | 1 | 2.1 | 1 | 7,429 |
| Total Discharges | 22,807 | 9,443 | 4,681 | 14,146 | 4.1 | 3 | 4.4 | 2 | 4.2 | 2 | 36,953 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.16 Total Discharges: MDC 14 Pregnancy, Childbirth and the Puerperium: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 14 Pregnancy, Childbirth and the Puerperium | Day Patients ^a | In-Patients | | | | | | | | | | | | | | Total Discharges ^b |
|---|---------------------------|-------------|------------|----------------|--------------------|-----------------------------|----------|------------|----------|------------|----------|--------------------|----------|----------------|--|-------------------------------|
| | | Discharges | | | | Length of Stay ^c | | | | | | | | | | |
| | | Elective | Emergency | Maternity | Total ^d | Elective | | Emergency | | Maternity | | Total ^e | | | | |
| N | N | N | N | Mean | Median | Mean | Median | Mean | Median | Mean | Median | N | | | | |
| O01A Caesarean Delivery W Cat or Sev CC | 0 | 1 | 2 | 3,159 | 3,162 | 32.0 | 32 | 5.0 | 5 | 8.9 | 6 | 8.9 | 6 | 3,162 | | |
| O01B Caesarean Delivery W/O Cat or Sev CC | 0 | 0 | 1 | 16,024 | 16,025 | - | - | 1.0 | 1 | 4.7 | 4 | 4.7 | 4 | 16,025 | | |
| O02A Vaginal Delivery W OR Procedure W Cat or Sev CC | 0 | 0 | 0 | 167 | 167 | - | - | - | - | 5.2 | 4 | 5.2 | 4 | 167 | | |
| O02B Vaginal Delivery W OR Procedure W/O Cat or Sev CC | 0 | 0 | 0 | 897 | 897 | - | - | - | - | 3.3 | 3 | 3.3 | 3 | 897 | | |
| O03A Ectopic Pregnancy W CC | 0 | 0 | 1 | 28 | 29 | - | - | 2.0 | 2 | 3.7 | 3 | 3.6 | 3 | 29 | | |
| O03B Ectopic Pregnancy W/O CC | 29 | 0 | 2 | 675 | 677 | - | - | 3.0 | 3 | 2.4 | 2 | 2.4 | 2 | 706 | | |
| O04A Postpartum and Post Abortion W OR Procedure W Cat or Sev CC ^f | 1 | 1 | 2 | 26 | 29 | 1.0 | 1 | 10.5 | 11 | 10.2 | 6 | 9.9 | 6 | 30 | | |
| O04B Postpartum and Post Abortion W OR Procedure W/O Cat or Sev CC ^f | 37 | 0 | 1 | 178 | 179 | - | - | 3.0 | 3 | 2.6 | 2 | 2.6 | 2 | 216 | | |
| O05Z Abortion W OR Procedure ^f | 1,648 | 0 | 2 | 3,483 | 3,485 | - | - | 3.5 | 4 | 1.3 | 1 | 1.3 | 1 | 5,133 | | |
| O60Z Vaginal Delivery | 0 | 3 | 2 | 52,417 | 52,422 | 2.3 | 2 | 1.0 | 1 | 2.7 | 2 | 2.7 | 2 | 52,422 | | |
| O61Z Postpartum and Post Abortion W/O OR Procedure ^f | 52 | 8 | 16 | 2,330 | 2,354 | 2.3 | 1 | 6.4 | 3 | 2.4 | 2 | 2.4 | 2 | 2,406 | | |
| O63Z Abortion W/O OR Procedure ^f | 960 | 0 | 1 | 3,131 | 3,132 | - | - | 2.0 | 2 | 1.3 | 1 | 1.3 | 1 | 4,092 | | |
| O64Z False Labour | 64 | 0 | 0 | 7,726 | 7,726 | - | - | - | - | 1.2 | 1 | 1.2 | 1 | 7,790 | | |
| O66Z Antenatal and Other Obstetric Admission | 5,719 | 8 | 107 | 34,669 | 34,784 | 2.6 | 2 | 2.6 | 2 | 1.7 | 1 | 1.7 | 1 | 40,503 | | |
| Total Discharges | 8,510 | 21 | 137 | 124,910 | 125,068 | 3.8 | 2 | 3.1 | 2 | 2.7 | 2 | 2.7 | 2 | 133,578 | | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.
a Includes *Maternity* day patients.
b Includes day patients and in-patients.
c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.
e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.
f This includes pregnancy with abortive outcome.

TABLE 5.17 Total Discharges: MDC 15 Newborns and Other Neonates: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 15 Newborns and Other Neonates | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|-----------|--------------------|-----------------------------|----|-----------|------|--------------------|----|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N |
| P01Z Neonate, Died or Transferred <5 Days of Admission W Significant OR Procedure | 0 | 7 | 56 | 63 | 2.1 | 2 | 2.4 | 2 | 2.3 | 2 | 63 |
| P02Z Cardiothoracic/Vascular Procedures for Neonates | 0 | 1 | 62 | 63 | 31.0 | 31 | 32.0 | 21 | 32.0 | 21 | 63 |
| P03Z Neonate, AdmWt 1000-1499 g W Significant OR Procedure | 0 | 8 | 217 | 225 | 46.3 | 43 | 46.1 | 44 | 46.1 | 44 | 225 |
| P04Z Neonate, AdmWt 1500-1999 g W Significant OR Procedure | 0 | 7 | 99 | 106 | 42.1 | 37 | 28.7 | 28 | 29.6 | 29 | 106 |
| P05Z Neonate, AdmWt 2000-2499 g W Significant OR Procedure | 0 | 4 | 65 | 69 | 20.8 | 19 | 27.2 | 20 | 26.8 | 20 | 69 |
| P06A Neonate, AdmWt >2499 g W Significant OR Procedure W Multi Major Problems | 3 | 13 | 175 | 188 | 14.6 | 7 | 35.1 | 17 | 33.7 | 16 | 191 |
| P06B Neonate, AdmWt >2499 g W Significant OR Procedure W/O Multi Major Problems | 5 | 28 | 123 | 151 | 5.6 | 5 | 15.0 | 11 | 13.3 | 10 | 156 |
| P60A Neonate, Died or Transferred <5 Days of Adm, W/O Significant OR Proc, Newborn | 0 | 0 | 488 | 488 | - | - | 1.4 | 1 | 1.4 | 1 | 488 |
| P60B Neonate, Died or Transf <5 Days of Adm, W/O Significant OR Proc, Not Newborn | 7 | 26 | 208 | 234 | 1.7 | 1 | 1.6 | 1 | 1.6 | 1 | 241 |
| P61Z Neonate, AdmWt <750 g | 3 | 1 | 82 | 83 | 37.0 | 37 | 63.3 | 56 | 63.0 | 55 | 86 |
| P62Z Neonate, AdmWt 750-999 g | 2 | 3 | 179 | 182 | 81.0 | 90 | 55.8 | 58 | 56.2 | 58 | 184 |
| P63Z Neonate, AdmWt 1000-1249 g W/O Significant OR Procedure | 2 | 5 | 84 | 89 | 35.4 | 45 | 36.7 | 38 | 36.6 | 38 | 91 |
| P64Z Neonate, AdmWt 1250-1499 g W/O Significant OR Procedure | 0 | 13 | 164 | 177 | 36.9 | 39 | 30.9 | 29 | 31.3 | 30 | 177 |
| P65A Neonate, AdmWt 1500-1999 g W/O Significant OR Proc W Multi Major Problems | 0 | 7 | 71 | 78 | 31.4 | 32 | 26.4 | 26 | 26.8 | 27 | 78 |
| P65B Neonate, AdmWt 1500-1999 g W/O Significant OR Procedure W Major Problem | 0 | 16 | 205 | 221 | 19.9 | 15 | 21.0 | 20 | 20.9 | 20 | 221 |
| P65C Neonate, AdmWt 1500-1999 g W/O Significant OR Procedure W Other Problem | 0 | 6 | 309 | 315 | 29.5 | 32 | 17.7 | 17 | 17.9 | 17 | 315 |
| P65D Neonate, AdmWt 1500-1999 g W/O Significant OR Procedure W/O Problem | 1 | 10 | 165 | 175 | 15.6 | 15 | 14.0 | 14.0 | 14.1 | 14 | 176 |
| P66A Neonate, AdmWt 2000-2499 g W/O Significant OR Proc W Multi Major Problems | 2 | 3 | 53 | 56 | 35.0 | 37 | 15.4 | 13.0 | 16.4 | 13 | 58 |
| P66B Neonate, AdmWt 2000-2499 g W/O Significant OR Procedure W Major Problem | 3 | 6 | 266 | 272 | 10.7 | 9 | 13.6 | 13.0 | 13.5 | 12 | 275 |
| P66C Neonate, AdmWt 2000-2499 g W/O Significant OR Procedure W Other Problem | 1 | 5 | 678 | 683 | 12.4 | 8 | 8.4 | 7.0 | 8.4 | 7 | 684 |
| P66D Neonate, AdmWt 2000-2499 g W/O Significant OR Procedure W/O Problem | 21 | 13 | 542 | 555 | 12.3 | 10 | 4.8 | 2.0 | 5.0 | 2 | 576 |
| P67A Neonate, AdmWt >2499 g W/O Significant OR Procedure W Multi Major Problems | 24 | 37 | 303 | 340 | 18.7 | 4 | 9.6 | 8.0 | 10.6 | 7 | 364 |
| P67B Neonate, AdmWt >2499 g W/O Significant OR Procedure W Major Problem | 79 | 60 | 1,318 | 1,378 | 10.4 | 4 | 6.8 | 5.0 | 6.9 | 5 | 1,457 |
| P67C Neonate, AdmWt >2499 g W/O Significant OR Procedure W Other Problem | 17 | 35 | 4,144 | 4,179 | 5.1 | 2 | 3.0 | 2.0 | 3.1 | 2 | 4,196 |

TABLE 5.17 Total Discharges: MDC 15 Newborns and Other Neonates: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay) (contd.)

| MDC 15 Newborns and Other Neonates | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|---------------|--------------------|-----------------------------|----------|------------|----------|--------------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N |
| | N | Mean | Median | Mean | Median | Mean | Median | Mean | Median | N | |
| P67D Neonate, AdmWt >2499 g W/O Significant OR Procedure W/O Problem | 328 | 72 | 4,097 | 4,169 | 4.9 | 1 | 2.3 | 1 | 2.4 | 1 | 4,497 |
| Total Discharges | 498 | 386 | 14,153 | 14,539 | 13.6 | 5 | 7.8 | 3 | 7.9 | 3 | 15,037 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.
a Includes *Maternity* day patients.
b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.
d Total in-patients include *Maternity* in-patients.
e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.18 Total Discharges: MDC 16 Diseases and Disorders of Blood, Blood Forming Organs, Immunological Disorders: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 16 Diseases and Disorders of Blood, Blood Forming Organs, Immunological Disorders | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|---|---------------------------|--------------|--------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median |
| Q01Z Splenectomy | 0 | 23 | 25 | 48 | 5.4 | 5 | 9.5 | 8 | 7.5 | 6 | 48 |
| Q02A Other OR Procedure of Blood and Blood Forming Organs W Cat or Sev CC | 7 | 26 | 47 | 73 | 9.1 | 6 | 25.8 | 14 | 19.9 | 10 | 80 |
| Q02B Other OR Procedure of Blood and Blood Forming Organs W/O Cat or Sev CC | 389 | 156 | 64 | 220 | 2.9 | 2 | 8.0 | 5 | 4.4 | 2 | 609 |
| Q60A Reticuloendothelial and Immunity Disorders W Cat or Sev CC | 105 | 114 | 466 | 580 | 6.4 | 5 | 8.9 | 5 | 8.4 | 5 | 685 |
| Q60B Reticuloendothelial and Immunity Disorders W/O Cat or Sev CC W Malignancy | 124 | 53 | 197 | 250 | 4.6 | 4 | 4.5 | 4 | 4.6 | 4 | 374 |
| Q60C Reticuloendothelial and Immunity Disorders W/O Cat or Sev CC W/O Malignancy | 2,446 | 128 | 514 | 642 | 3.8 | 2 | 3.8 | 2 | 3.8 | 2 | 3,088 |
| Q61A Red Blood Cell Disorders W Cat or Sev CC | 216 | 135 | 690 | 825 | 8.0 | 5 | 11.9 | 8 | 11.3 | 7 | 1,041 |
| Q61B Red Blood Cell Disorders W/O Cat or Sev CC | 29,811 | 633 | 1,636 | 2,271 | 2.5 | 1 | 4.5 | 3 | 4.0 | 2 | 32,082 |
| Q62Z Coagulation Disorders | 3,070 | 151 | 959 | 1,111 | 3.7 | 2 | 4.8 | 2 | 4.6 | 2 | 4,181 |
| Total Discharges | 36,168 | 1,419 | 4,598 | 6,020 | 3.9 | 2 | 6.3 | 3 | 5.8 | 3 | 42,188 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.
a Includes *Maternity* day patients.
b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.
d Total in-patients include *Maternity* in-patients.
e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.19 Total Discharges: MDC 17 Neoplastic Disorders (Haematological and Solid Neoplasms): AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 17 Neoplastic Disorders (Haematological and Solid Neoplasms) | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|--------------|--------------|--------------------|-----------------------------|-----------|--------------------|----------|-------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median |
| R01A Lymphoma and Leukaemia W Major OR Procedures W Cat or Sev CC | 0 | 20 | 45 | 65 | 23.0 | 17 | 28.0 | 22 | 26.4 | 21 | 65 |
| R01B Lymphoma and Leukaemia W Major OR Procedures W/O Cat or Sev CC | 18 | 35 | 40 | 76 | 4.9 | 4 | 12.5 | 10 | 8.9 | 7 | 94 |
| R02A Other Neoplastic Disorders W Major OR Procedures W Cat CC | 0 | 21 | 9 | 30 | 18.3 | 14 | 20.3 | 19 | 18.9 | 15 | 30 |
| R02B Other Neoplastic Disorders W Major OR Procedures W Sev or Moderate CC | 3 | 35 | 10 | 45 | 9.3 | 7 | 14.0 | 17 | 10.4 | 8 | 48 |
| R02C Other Neoplastic Disorders W Major OR Procedures W/O CC | 32 | 164 | 20 | 184 | 5.1 | 4 | 9.2 | 10 | 5.6 | 5 | 216 |
| R03A Lymphoma and Leukaemia W Other OR Procedures W Cat or Sev CC | 3 | 44 | 102 | 146 | 27.4 | 20 | 36.7 | 25 | 33.9 | 24 | 149 |
| R03B Lymphoma and Leukaemia W Other OR Procedures W/O Cat or Sev CC | 140 | 133 | 92 | 225 | 4.4 | 2 | 11.2 | 8 | 7.2 | 4 | 365 |
| R04A Other Neoplastic Disorders W Other OR Procedures W CC | 58 | 43 | 44 | 87 | 6.9 | 4 | 20.2 | 14 | 13.6 | 9 | 145 |
| R04B Other Neoplastic Disorders W Other OR Procedures W/O CC | 674 | 66 | 12 | 78 | 4.6 | 4 | 6.3 | 7 | 4.9 | 4 | 752 |
| R60A Acute Leukaemia W Cat CC | 88 | 163 | 228 | 391 | 23.4 | 23 | 23.5 | 13 | 23.5 | 19 | 479 |
| R60B Acute Leukaemia W/O Cat CC | 5,005 | 416 | 455 | 871 | 8.8 | 4 | 5.7 | 2 | 7.2 | 3 | 5,876 |
| R61A Lymphoma and Non-Acute Leukaemia W Cat CC | 0 | 139 | 307 | 446 | 21.8 | 19 | 22.1 | 14 | 22.0 | 15 | 446 |
| R61B Lymphoma and Non-Acute Leukaemia W/O Cat CC | 0 | 1,353 | 1,058 | 2,411 | 5.8 | 3 | 9.4 | 6 | 7.4 | 4 | 2,411 |
| R61C Lymphoma and Non-Acute Leukaemia, Sameday | 15,935 | 29 | 87 | 116 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 16,051 |
| R62A Other Neoplastic Disorders W CC | 288 | 95 | 111 | 206 | 12.7 | 6 | 11.7 | 7 | 12.2 | 7 | 494 |
| R62B Other Neoplastic Disorders W/O CC | 951 | 91 | 54 | 145 | 9.8 | 3 | 7.1 | 5 | 8.8 | 4 | 1,096 |
| R63Z Chemotherapy | 80,217 | 0 | 0 | 0 | - | - | - | - | - | - | 80,217 |
| R64Z Radiotherapy | 92,924 | 0 | 0 | 0 | - | - | - | - | - | - | 92,924 |
| Total Discharges | 196,336 | 2,847 | 2,674 | 5,522 | 8.8 | 4 | 12.9 | 7 | 10.8 | 5 | 201,858 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.20 Total Discharges: MDC 18 Infectious and Parasitic Diseases, Systemic or Unspecified Sites: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 18 Infectious and Parasitic Diseases, Systemic or Unspecified Sites | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|---|---------------------------|-------------|--------------|--------------------|-----------------------------|----------|------------|----------|--------------------|----------|--------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | | |
| N | N | N | N | Mean | Median | Mean | Median | Mean | Median | N | | |
| S60Z HIV, Sameday | 38 | 2 | 10 | 12 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 50 | |
| S65A HIV-Related Diseases W Cat CC | 0 | 8 | 57 | 65 | 79.3 | 29 | 17.5 | 12 | 25.1 | 12 | 65 | |
| S65B HIV-Related Diseases W Sev CC | 0 | 12 | 63 | 75 | 9.2 | 7 | 11.4 | 8 | 11.1 | 8 | 75 | |
| S65C HIV-Related Diseases W/O Cat or Sev CC | 0 | 151 | 62 | 213 | 23.2 | 15 | 7.5 | 7 | 18.6 | 11 | 213 | |
| T01A OR Procedures for Infectious and Parasitic Diseases W Cat CC | 3 | 10 | 120 | 130 | 27.5 | 23 | 38.3 | 20 | 37.5 | 20 | 133 | |
| T01B OR Procedures for Infectious and Parasitic Diseases W Sev or Moderate CC | 25 | 32 | 111 | 143 | 13.5 | 12 | 17.7 | 9 | 16.8 | 10 | 168 | |
| T01C OR Procedures for Infectious and Parasitic Diseases W/O CC | 59 | 60 | 184 | 244 | 7.6 | 6 | 9.3 | 8 | 8.9 | 7 | 303 | |
| T40Z Infectious and Parasitic Diseases W Ventilator Support | 0 | 1 | 19 | 20 | 4.0 | 4 | 11.3 | 5 | 11.0 | 5 | 20 | |
| T60A Septicaemia W Cat CC | 0 | 8 | 605 | 613 | 16.6 | 12 | 18.3 | 11 | 18.2 | 11 | 613 | |
| T60B Septicaemia W/O Cat CC | 36 | 20 | 893 | 913 | 9.7 | 7 | 9.1 | 6 | 9.1 | 6 | 949 | |
| T61A Postoperative and Post-Traumatic Infections W Cat or Sev CC | 18 | 22 | 152 | 174 | 10.5 | 7 | 13.7 | 7 | 13.3 | 7 | 192 | |
| T61B Postoperative and Post-Traumatic Infections W/O Cat or Sev CC | 220 | 94 | 774 | 871 | 7.1 | 5 | 5.5 | 4 | 5.6 | 4 | 1,091 | |
| T62A Fever of Unknown Origin W CC | 8 | 16 | 208 | 224 | 6.3 | 5 | 5.4 | 3 | 5.4 | 3 | 232 | |
| T62B Fever of Unknown Origin W/O CC | 23 | 14 | 279 | 294 | 2.5 | 2 | 3.6 | 2 | 3.5 | 2 | 317 | |
| T63Z Viral Illness | 840 | 47 | 3,977 | 4,026 | 3.1 | 2 | 2.2 | 1 | 2.2 | 1 | 4,866 | |
| T64A Other Infectious and Parasitic Diseases W Cat CC | 4 | 0 | 28 | 28 | - | - | 33.5 | 19 | 33.5 | 19 | 32 | |
| T64B Other Infectious and Parasitic Diseases W Sev or Moderate CC | 25 | 14 | 76 | 90 | 9.9 | 4 | 8.4 | 6 | 8.6 | 6 | 115 | |
| T64C Other Infectious and Parasitic Diseases W/O CC | 249 | 13 | 168 | 181 | 6.9 | 4 | 3.8 | 3 | 4.0 | 3 | 430 | |
| Total Discharges | 1,548 | 524 | 7,786 | 8,316 | 13.6 | 7 | 6.3 | 3 | 6.8 | 3 | 9,864 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.21 Total Discharges: MDC 19 Mental Diseases and Disorders: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 19 Mental Diseases and Disorders | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|--------------|--------------------|-----------------------------|-----------|--------------------|----------|-------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | N | |
| U40Z Mental Health Treatment, Sameday, W ECT | 104 | 2 | 2 | 4 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 108 |
| U60Z Mental Health Treatment, Sameday, W/O ECT | 503 | 19 | 570 | 589 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 1,092 |
| U61Z Schizophrenia Disorders | 0 | 17 | 123 | 140 | 37.5 | 19 | 50.6 | 25 | 49.0 | 24 | 140 |
| U62A Paranoia & Acute Psych Disorder W Cat/Sev CC or W Mental Health Legal Status | 0 | 3 | 14 | 17 | 11.0 | 11 | 23.1 | 16 | 20.9 | 14 | 17 |
| U62B Paranoia & Acute Psych Disorder W/O Cat/Sev CC W/O Mental Health Legal Status | 0 | 10 | 86 | 96 | 22.5 | 16 | 15.4 | 6 | 16.1 | 7 | 96 |
| U63Z Major Affective Disorders | 0 | 32 | 201 | 235 | 67.1 | 16 | 24.4 | 10 | 30.0 | 11 | 235 |
| U64Z Other Affective and Somatoform Disorders | 0 | 16 | 167 | 183 | 8.4 | 6 | 11.8 | 4 | 11.5 | 4 | 183 |
| U65Z Anxiety Disorders | 0 | 100 | 328 | 429 | 2.3 | 1 | 7.3 | 3 | 6.1 | 3 | 429 |
| U66Z Eating and Obsessive-Compulsive Disorders | 0 | 20 | 49 | 69 | 31.4 | 36 | 19.3 | 9 | 22.8 | 12 | 69 |
| U67Z Personality Disorders and Acute Reactions | 0 | 18 | 193 | 211 | 12.6 | 6 | 13.4 | 4 | 13.3 | 4 | 211 |
| U68Z Childhood Mental Disorders | 0 | 35 | 57 | 92 | 1.9 | 1 | 4.9 | 3 | 3.8 | 2 | 92 |
| Total Discharges | 607 | 272 | 1,790 | 2,065 | 16.0 | 2 | 12.0 | 2 | 12.5 | 2 | 2,672 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.22 Total Discharges: MDC 20 Alcohol/Drug Use and Alcohol/Drug Induced Organic Mental Disorders: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 20 Alcohol/Drug Use and Alcohol/Drug Induced Organic Mental Disorders | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|---|---------------------------|-------------|--------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|--------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median | N |
| V60Z Alcohol Intoxication and Withdrawal | 4 | 8 | 1,382 | 1,390 | 9.0 | 5 | 3.6 | 2 | 3.6 | 2 | 1,394 | |
| V61Z Drug Intoxication and Withdrawal | 1 | 2 | 103 | 105 | 14.0 | 14 | 3.1 | 1 | 3.3 | 1 | 106 | |
| V62A Alcohol Use Disorder and Dependence | 0 | 29 | 784 | 813 | 15.5 | 12 | 5.1 | 3 | 5.5 | 3 | 813 | |
| V62B Alcohol Use Disorder and Dependence, Sameday | 1 | 1 | 142 | 143 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 144 | |
| V63Z Opioid Use Disorder and Dependence | 2 | 70 | 21 | 91 | 16.8 | 17 | 6.0 | 2 | 14.3 | 15 | 93 | |
| V64Z Other Drug Use Disorder and Dependence | 0 | 48 | 58 | 106 | 21.3 | 21 | 5.1 | 1 | 12.4 | 6 | 106 | |
| Total Discharges | 8 | 158 | 2,490 | 2,648 | 17.4 | 17 | 4.0 | 2 | 4.8 | 2 | 2,656 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.23 Total Discharges: MDC 21 Injuries, Poisonings and Toxic Effects of Drugs: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 21 Injuries, Poisonings and Toxic Effects of Drugs | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|---------------|--------------------|-----------------------------|----------|------------|----------|--------------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N |
| W01Z Ventilation or Cranial Procedures for Multiple Significant Trauma | 0 | 0 | 25 | 25 | - | - | 23.4 | 15 | 23.4 | 15 | 25 |
| W02A Hip, Femur & Limb Pr for Mult Signif Trauma, Incl Implantation W Cat/Sev CC | 0 | 0 | 29 | 29 | - | - | 43.4 | 22 | 43.4 | 22 | 29 |
| W02B Hip, Femur & Limb Pr for Mult Signif Trauma, Incl Implantation W/O Cat/Sev CC | 0 | 1 | 39 | 40 | 49.0 | 49 | 16.9 | 12 | 17.7 | 12 | 40 |
| W03Z Abdominal Procedures for Multiple Significant Trauma | 0 | 0 | 32 | 32 | - | - | 13.5 | 11 | 13.5 | 11 | 32 |
| W04A Other OR Procs for Multiple Significant Trauma W Cat or Sev CC | 0 | 0 | 17 | 17 | - | - | 25.4 | 14 | 25.4 | 14 | 17 |
| W04B Other OR Procs for Multiple Significant Trauma W/O Cat or Sev CC | 0 | 2 | 33 | 35 | 13.5 | 14 | 16.0 | 13 | 15.9 | 13 | 35 |
| W60Z Multiple Trauma, Died or Transferred to Another Acute Care Facility <5 Days | 1 | 0 | 75 | 75 | - | - | 1.7 | 1 | 1.7 | 1 | 76 |
| W61A Multiple Trauma W/O Significant Procedures W Cat or Sev CC | 0 | 3 | 45 | 48 | 34.0 | 24 | 33.6 | 15 | 33.6 | 16 | 48 |
| W61B Multiple Trauma W/O Significant Procedures W/O Cat or Sev CC | 0 | 5 | 85 | 90 | 20.0 | 13 | 9.6 | 7 | 10.1 | 7 | 90 |
| X02A Microvascular Tiss Transfer or (Skin Graft W Cat/Sev CC) for Injuries to Hand | 0 | 1 | 20 | 21 | 6.0 | 6 | 12.6 | 6 | 12.3 | 6 | 21 |
| X02B Skin Graft for Injuries to Hand W/O Cat or Sev CC | 3 | 2 | 103 | 105 | 1.5 | 2 | 2.1 | 1 | 2.1 | 1 | 108 |
| X04A Other Procedures for Injuries to Lower Limb W Cat or Sev CC | 1 | 0 | 31 | 31 | - | - | 33.5 | 14 | 33.5 | 14 | 32 |
| X04B Other Procedures for Injuries to Lower Limb W/O Cat or Sev CC | 13 | 8 | 163 | 171 | 6.0 | 3 | 5.3 | 2 | 5.3 | 2 | 184 |
| X05A Other Procedures for Injuries to Hand W CC | 1 | 1 | 37 | 38 | 3.0 | 3 | 3.7 | 2 | 3.7 | 2 | 39 |
| X05B Other Procedures for Injuries to Hand W/O CC | 72 | 12 | 1,185 | 1,197 | 1.8 | 2 | 1.3 | 1 | 1.3 | 1 | 1,269 |
| X06A Other Procedures for Other Injuries W Cat or Sev CC | 8 | 28 | 192 | 220 | 13.1 | 10 | 16.2 | 8 | 15.8 | 8 | 228 |
| X06B Other Procedures for Other Injuries W/O Cat or Sev CC | 101 | 89 | 1,001 | 1,090 | 3.5 | 2 | 2.7 | 2 | 2.7 | 2 | 1,191 |
| X07A Skin Graft for Injuries Ex Hand W Microvascular Tiss Tfr or W (Cat or Sev CC) | 3 | 5 | 44 | 49 | 19.2 | 19 | 16.0 | 13 | 16.4 | 13 | 52 |
| X07B Skin Graft for Injuries Ex Hand W/O Microvascular Tiss Tfr W/O Cat or Sev CC | 2 | 13 | 82 | 95 | 8.2 | 6 | 7.8 | 7 | 7.9 | 7 | 97 |
| X40Z Injuries, Poisoning and Toxic Effects of Drugs W Ventilator Support | 0 | 0 | 85 | 85 | - | - | 9.1 | 4 | 9.1 | 4 | 85 |
| X60A Injuries W Cat or Sev CC | 2 | 6 | 382 | 389 | 6.7 | 4 | 11.4 | 7 | 11.3 | 6 | 391 |
| X60B Injuries W/O Cat or Sev CC | 212 | 42 | 4,220 | 4,292 | 1.7 | 1 | 2.1 | 1 | 2.1 | 1 | 4,504 |
| X61Z Allergic Reactions | 3 | 3 | 289 | 292 | 15.7 | 1 | 1.7 | 1 | 1.9 | 1 | 295 |
| X62A Poisoning/Toxic Effects of Drugs and Other Substances W Cat or Sev CC | 0 | 9 | 581 | 590 | 3.9 | 3 | 5.5 | 3 | 5.5 | 3 | 590 |
| X62B Poisoning/Toxic Effects of Drugs and Other Substances W/O Cat or Sev CC | 66 | 11 | 3,688 | 3,700 | 2.1 | 2 | 2.1 | 1 | 2.1 | 1 | 3,766 |
| X63A Sequelae of Treatment W Cat or Sev CC | 15 | 22 | 292 | 314 | 22.7 | 9 | 8.8 | 6 | 9.8 | 6 | 329 |
| X63B Sequelae of Treatment W/O Cat or Sev CC | 451 | 60 | 1,517 | 1,578 | 5.5 | 2 | 3.2 | 2 | 3.3 | 2 | 2,029 |
| X64A Other Injury, Poisoning and Toxic Effect Diagnosis W Cat or Sev CC | 0 | 3 | 48 | 53 | 20.3 | 19 | 15.9 | 5 | 15.7 | 5 | 53 |
| X64B Other Injury, Poisoning and Toxic Effect Diagnosis W/O Cat or Sev CC | 16 | 1 | 429 | 635 | 2.0 | 2 | 2.0 | 1 | 1.7 | 1 | 651 |
| Total Discharges | 970 | 327 | 14,769 | 15,336 | 7.2 | 2 | 3.5 | 1 | 3.6 | 1 | 16,306 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.24 Total Discharges: MDC 22 Burns: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 22 Burns | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|------------|--------------------|-----------------------------|-----------|--------------------|----------|------------|----------|------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median | N |
| Y01Z Ventilation for Burns and Sev Full Thickness Burns | 0 | 1 | 23 | 24 | 1.0 | 1 | 42.7 | 30 | 41.0 | 26 | 24 | |
| Y02A Other Burns W Skin Graft W CC | 0 | 4 | 68 | 72 | 5.0 | 5 | 24.4 | 18 | 23.3 | 17 | 72 | |
| Y02B Other Burns W Skin Graft W/O CC | 2 | 15 | 62 | 77 | 4.1 | 2 | 12.5 | 9 | 10.9 | 7 | 79 | |
| Y03Z Other OR Procedures for Other Burns | 13 | 28 | 42 | 70 | 4.9 | 2 | 8.4 | 6 | 7.0 | 4 | 83 | |
| Y60Z Burns, Transferred to Another Acute Care Facility <5 Days | 0 | 0 | 67 | 67 | - | - | 1.4 | 1 | 1.4 | 1 | 67 | |
| Y61Z Severe Burns | 0 | 4 | 65 | 69 | 6.3 | 6 | 13.3 | 6 | 12.9 | 6 | 69 | |
| Y62A Other Burns W CC | 0 | 2 | 48 | 50 | 7.0 | 7 | 9.7 | 6 | 9.6 | 6 | 50 | |
| Y62B Other Burns W/O CC | 26 | 4 | 240 | 244 | 7.5 | 6 | 4.5 | 2 | 4.6 | 2 | 270 | |
| Total Discharges | 41 | 58 | 615 | 673 | 5.0 | 3 | 10.2 | 4 | 9.8 | 4 | 714 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.
a Includes *Maternity* day patients.
b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.
d Total in-patients include *Maternity* in-patients.
e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.25 Total Discharges: MDC 23 Factors Influencing Health Status and Other Contacts with Health Services: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| MDC 23 Factors Influencing Health Status and Other Contacts with Health Services | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|---|---------------------------|--------------|--------------|--------------------|-----------------------------|-----------|--------------------|----------|-------------|----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | Mean | Median |
| Z01A OR Procedures W Diagnoses of Other Contacts W Health Services W Cat/Sev CC | 79 | 101 | 14 | 115 | 13.4 | 4 | 24.9 | 18 | 14.8 | 4 | 194 |
| Z01B OR Procedures W Diagnoses of Other Contacts W Health Services W/O Cat/Sev CC | 846 | 224 | 26 | 251 | 3.3 | 2 | 27.6 | 3 | 5.8 | 2 | 1,097 |
| Z40Z Endoscopy W Diagnoses of Other Contacts W Health Services, Sameday | 12,319 | 5 | 0 | 5 | 1.0 | 1 | - | - | 1.0 | 1 | 12,324 |
| Z60A Rehabilitation W Cat CC | 0 | 351 | 8 | 359 | 50.0 | 36 | 39.5 | 37 | 49.7 | 36 | 359 |
| Z60B Rehabilitation W/O Cat CC | 0 | 3,284 | 70 | 3,354 | 22.8 | 15 | 11.8 | 5 | 22.6 | 15 | 3,354 |
| Z60C Rehabilitation, Sameday | 762 | 4 | 2 | 6 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 768 |
| Z61A Signs and Symptoms | 0 | 197 | 1,103 | 1,301 | 4.8 | 3 | 10.0 | 4 | 9.2 | 4 | 1,301 |
| Z61B Signs and Symptoms, Sameday | 1,221 | 42 | 370 | 412 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 1,633 |
| Z63A Other Surgical Follow Up and Medical Care W Cat CC | 3 | 303 | 14 | 317 | 19.7 | 11 | 13.6 | 7 | 19.4 | 11 | 320 |
| Z63B Other Surgical Follow Up and Medical Care W/O Cat CC | 1,052 | 2,330 | 199 | 2,537 | 8.1 | 4 | 3.1 | 1 | 7.7 | 4 | 3,589 |
| Z64A Other Factors Influencing Health Status | 0 | 1,292 | 392 | 1,716 | 7.4 | 3 | 7.9 | 2 | 7.4 | 3 | 1,716 |
| Z64B Other Factors Influencing Health Status, Sameday | 26,408 | 155 | 284 | 1,415 | 1.0 | 1 | 1.0 | 1 | 1.0 | 1 | 27,823 |
| Z65Z Congenital Anomalies and Problems Arising from Neonatal Period | 82 | 52 | 44 | 96 | 3.2 | 2 | 7.6 | 3 | 5.2 | 2 | 178 |
| Total Discharges | 42,772 | 8,340 | 2,526 | 11,884 | 15.6 | 9 | 7.2 | 2 | 12.6 | 5 | 54,656 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.26 Total Discharges: Unassignable to MDC: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| Unassignable to MDC | Day Patients ^a | In-Patients | | | | | | | | | Total Discharges ^b |
|--|---------------------------|-------------|--------------|--------------------|-----------------------------|-----------|--------------------|-----------|-------------|-----------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | Emergency | Total ^e | Mean | Median | N | |
| 801A OR Procedures Unrelated to Principal Diagnosis W Cat CC | 4 | 93 | 623 | 717 | 31.2 | 18 | 41.2 | 24 | 40.0 | 24 | 721 |
| 801B OR Procedures Unrelated to Principal Diagnosis W Sev or Moderate CC | 39 | 143 | 301 | 446 | 9.2 | 6 | 20.4 | 11 | 16.8 | 10 | 485 |
| 801C OR Procedures Unrelated to Principal Diagnosis W/O CC | 549 | 394 | 322 | 718 | 5.1 | 3 | 8.1 | 4 | 6.5 | 3 | 1,267 |
| 963Z Neonatal Diagnosis Not Consistent W Age/Weight | 3 | 2 | 1 | 3 | 16.5 | 16 | 33.0 | 33 | 22.0 | 25 | 6 |
| Total Discharges | 595 | 632 | 1,247 | 1,884 | 9.9 | 4 | 27.7 | 15 | 21.7 | 10 | 2,479 |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

TABLE 5.27 Total Discharges: Pre-MDC: AR-DRG by Patient Type and Admission Type (N, In-Patient Length of Stay)

| Pre-MDC | Day Patients ^a | In-Patients | | | | | | | | | | Total Discharges ^b |
|---|---------------------------|-------------|--------------|--------------------|-----------------------------|-----------|-------------|-----------|--------------------|-----------|--------------|-------------------------------|
| | | Discharges | | | Length of Stay ^c | | | | | | | |
| | N | Elective | Emergency | Total ^d | Elective | | Emergency | | Total ^e | | N | |
| A01Z Liver Transplant | 0 | 26 | 14 | 40 | 24.1 | 22 | 88.8 | 48 | 46.8 | 24 | 40 | |
| A03Z Lung or Heart/Lung Transplant | 0 | 1 | 3 | 4 | 40.0 | 40 | 28.3 | 20 | 31.3 | 30 | 4 | |
| A05Z Heart Transplant | 0 | 1 | 3 | 4 | 24.0 | 24 | 134.0 | 84 | 106.5 | 54 | 4 | |
| A06A Tracheostomy W Ventilation >95 hours W Cat CC | 0 | 75 | 472 | 548 | 76.4 | 60 | 81.0 | 56 | 80.4 | 56 | 548 | |
| A06B Trach W Vent >95 hours W/O Cat CC or Trach/Vent >95 hours W Cat CC | 0 | 209 | 1,322 | 1,535 | 60.1 | 35 | 37.9 | 24 | 40.9 | 25 | 1,535 | |
| A06C Ventilation >95 hours W/O Cat CC | 0 | 27 | 131 | 158 | 22.6 | 17 | 16.5 | 11 | 17.6 | 12 | 158 | |
| A06D Tracheostomy W/O Cat CC | 1 | 44 | 53 | 97 | 27.6 | 20 | 26.9 | 23 | 27.2 | 22 | 98 | |
| A07Z Allogeneic Bone Marrow Transplant | 3 | 75 | 13 | 88 | 39.7 | 35 | 55.2 | 37 | 42.0 | 35 | 91 | |
| A08A Autologous Bone Marrow Transplant W Cat CC | 0 | 47 | 11 | 58 | 25.8 | 24 | 82.5 | 25 | 36.6 | 24 | 58 | |
| A08B Autologous Bone Marrow Transplant W/O Cat CC | 16 | 34 | 13 | 47 | 15.6 | 17 | 9.0 | 7 | 13.8 | 16 | 63 | |
| A09A Renal Transplant W Pancreas Transplant or W Cat CC | 0 | 8 | 25 | 33 | 14.0 | 12 | 18.6 | 17 | 17.5 | 15 | 33 | |
| A09B Renal Transplant W/O Pancreas Transplant W/O Cat CC | 0 | 23 | 68 | 91 | 10.2 | 7 | 10.0 | 9 | 10.1 | 8 | 91 | |
| A10Z Insertion of Ventricular Assist Devices | 0 | 3 | 5 | 8 | 209.7 | 61 | 30.0 | 15 | 97.4 | 44 | 8 | |
| A11A Insertion of Implantable Spinal Infusion Device W Cat CC | 1 | 6 | 6 | 12 | 29.5 | 16 | 18.0 | 18 | 23.8 | 18 | 13 | |
| A11B Insertion of Implantable Spinal Infusion Device W/O Cat CC | 3 | 17 | 3 | 20 | 8.2 | 6 | 56.3 | 37 | 15.5 | 8 | 23 | |
| A12Z Insertion of Neurostimulator Device | 124 | 81 | 30 | 111 | 3.8 | 2 | 8.3 | 3 | 5.0 | 2 | 235 | |
| A40Z ECMO | 0 | 3 | 11 | 14 | 16.0 | 17 | 81.5 | 42 | 67.4 | 25 | 14 | |
| Total Discharges | 148 | 680 | 2,183 | 2,868 | 40.0 | 25 | 44.9 | 26 | 43.8 | 26 | 3,016 | |

Notes: - Mean and median length of stay cannot be calculated as no in-patients reported.

a Includes *Maternity* day patients.

b Includes day patients and in-patients.

c Length of stay (mean and median) is based on acute and extended in-patients.

d Total in-patients include *Maternity* in-patients.

e Total in-patient length of stay (mean and median) includes *Maternity* in-patient length of stay.

Annex 2010

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STROKE DISCHARGE PROFILE, 2010

A 1.1 INTRODUCTION

As noted in Section One, this annex is designed to highlight particular topics of interest that merit a more focused supplementary analysis. This is the first year of this section's inclusion and a report on stroke has been chosen as the first topic.

A stroke is defined as 'a brain attack caused by a blockage of a blood vessel or a haemorrhage that disrupts blood flow to the brain, causing a focal or global neurological deficit lasting more than 24 hours, or causing death within 24 hours' (Smith *et al.*, 2010).¹ The following analysis only considers in-patient discharges with a principal diagnosis of stroke.²

Stroke is classified here into four main types using ICD-10-AM diagnostic codes (Table A 1.1), in line with recent analysis in the Irish literature (Smith *et al.*, 2010).³

TABLE A 1.1 Coding of Stroke (ICD-10-AM)

| ICD-10-AM Code | Definition |
|----------------|--|
| I60 | Subarachnoid Haemorrhage |
| I61 | Intracerebral Haemorrhage |
| I63 | Cerebral Infarction |
| I64 | Stroke, not specified as haemorrhage or infarction |

Note: This definition of stroke corresponds with that used in Smith *et al.* (2010)

A 1.2 STROKE IN-PATIENT DISCHARGES

In 2010, 5,973 in-patient discharges (excl. *Maternity*) with a principal diagnosis of stroke were reported to HIPE hospitals, totalling 133,160 in-patient bed days.⁴ These discharges had an in-patient mean length of stay of 22.3 days (median – 10 days).⁵ This compares with an in-patient mean length of stay for total in-patient discharges (excl. *Maternity*) of 7.0 days (median – 3 days). Excluding *Maternity*, stroke in-patient discharges accounted for 1.3 per cent of total in-patient discharges and 4.1 per cent of total in-patient bed days.

¹ Smith, S., Horgan, F., Sexton, E., Cowman, S., Hickey, A., Kelly, P., McGee, H., Murphy, S., O'Neill, D., Royston, M., Shelley, E., and Wiley M. (2010) Cost of Stroke in Ireland – Estimating the annual economic cost of stroke and transient ischemic attack (TIA) in Ireland. Dublin: Irish Heart Foundation.

² In 2010, 99.6% of discharges with a principal diagnosis of stroke were in-patients. No cases with a principal diagnosis of stroke were allocated an admission type *Maternity*.

³ See Section Three for details of clinical coding and classification.

⁴ Each HIPE discharge record represents one episode of care. Patients may be admitted to hospital more than once in any given time period with the same or different diagnoses. In the absence of a unique health identifier, therefore, the data reported to HIPE facilitate analysis of hospital discharge activity, but do not permit analysis of certain parameters, such as the number of hospital encounters per patient, or to estimate incidence or prevalence of a particular disease.

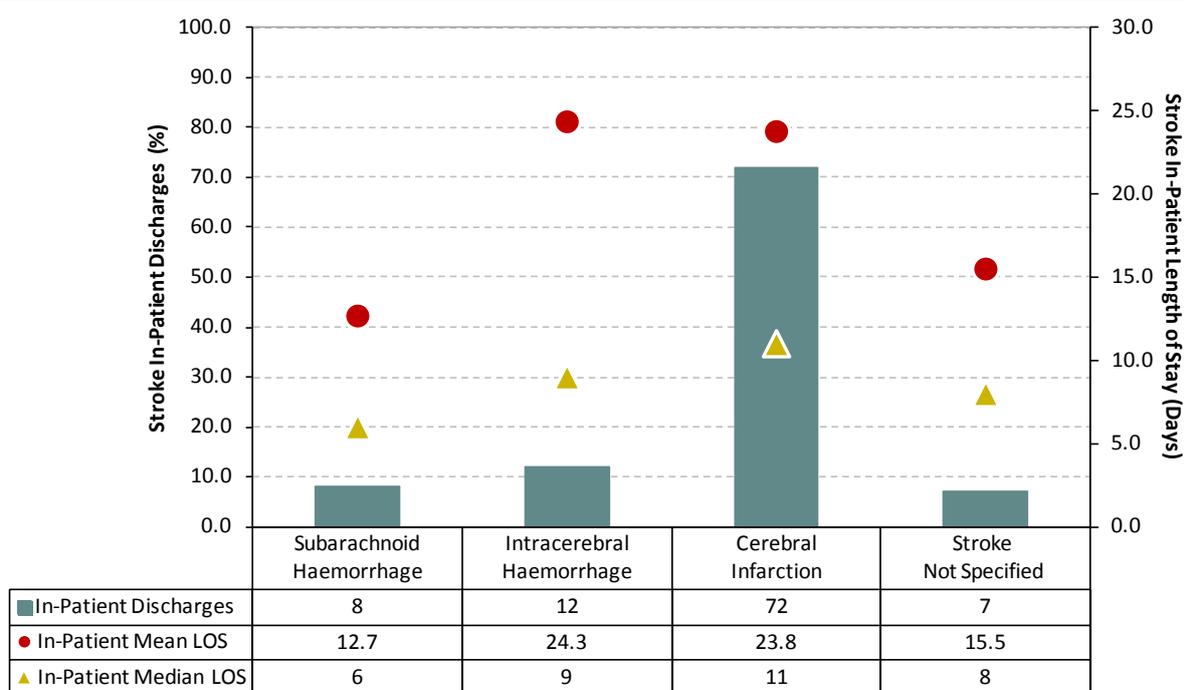
⁵ In 2010, 39 HIPE hospitals discharged in-patients with a principal diagnosis of stroke.

A 1.3 STROKE TYPE

Figure A 1.1 presents stroke in-patient discharges and length of stay by stroke type.

- Of 5,973 in-patient discharges with a principal diagnosis of stroke, 4,317 (72 per cent) were classified as having *cerebral infarction*.
- Haemorrhages accounted for over 20 per cent of all stroke in-patient discharges. Of these, 723 stroke in-patient discharges (12.1 per cent) were classified as having *intracerebral haemorrhage* with 507 (8.5 per cent) classified as having *subarachnoid haemorrhage*.
- *Subarachnoid haemorrhage* recorded the lowest in-patient mean length of stay of 12.7 days. *Intracerebral haemorrhage* had the highest in-patient mean length of stay of all stroke types (24.3 days).

FIGURE A 1.1 Stroke In-Patient Discharges: Stroke Type (N, Length of Stay)



A 1.4 DEMOGRAPHIC ANALYSIS

Table A 1.2 disaggregates stroke in-patient discharges by sex, age group and stroke type.

- Overall, 51.4 per cent of stroke in-patient discharges were male but this varied by stroke type.
- In terms of stroke type, the largest disparity between the sexes occurred for *subarachnoid haemorrhage* where 61.9 per cent of stroke in-patient discharges were female.
- Overall, 31.1 per cent of stroke in-patient discharges were between 75 and 84 years old, with those under 45 years representing only 6.4 per cent of discharges.
- The age profile varied by stroke type. In-patient discharges with a diagnosis of *subarachnoid haemorrhage* had a younger age profile relative to the other stroke diagnoses. Over 50 per cent of stroke in-patient discharges with a diagnosis of *subarachnoid haemorrhage* were in the 45–64 years age group.

TABLE A 1.2 Stroke In-Patient Discharges: Stroke Type by Sex and Age (N, %)

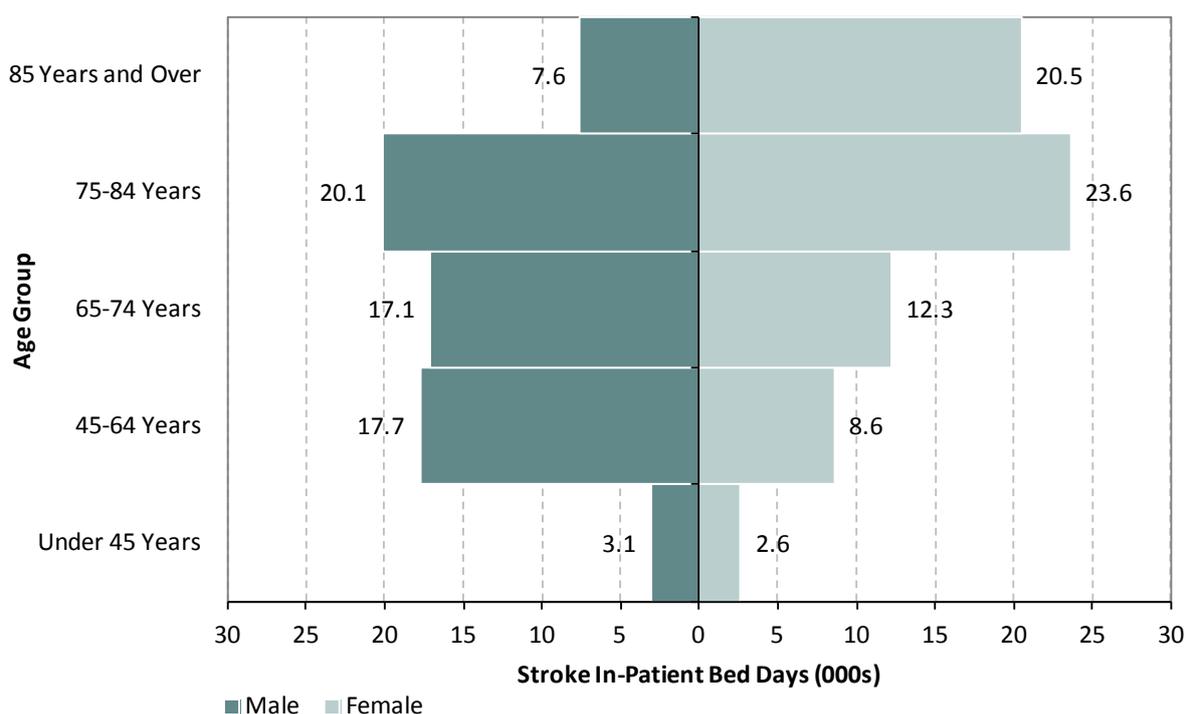
| | | Subarachnoid Haemorrhage | | Intracerebral Haemorrhage | | Cerebral Infarction | | Stroke Not Specified | | Stroke In-Patient Discharges | |
|--------|-------------------------------------|--------------------------|-------------|---------------------------|-------------|---------------------|-------------|----------------------|-------------|------------------------------|-------------|
| | | N | % | N | % | N | % | N | % | N | % |
| Male | < 45 Years | 53 | 10.5 | 41 | 5.7 | 104 | 2.4 | 8 | 1.9 | 206 | 3.4 |
| | 45-64 Years | 95 | 18.7 | 119 | 16.5 | 601 | 13.9 | 61 | 14.3 | 876 | 14.7 |
| | 65-74 Years | 27 | 5.3 | 81 | 11.2 | 590 | 13.7 | 40 | 9.4 | 738 | 12.4 |
| | 75-84 Years | 15 | 3.0 | 117 | 16.2 | 691 | 16.0 | 74 | 17.4 | 897 | 15.0 |
| | 85 Years and Over | ~ | 0.6 | 34 | 4.7 | 284 | 6.6 | 32 | 7.5 | 353 | 5.9 |
| | Total | 193 | 38.1 | 392 | 54.2 | 2,270 | 52.6 | 215 | 50.5 | 3,070 | 51.4 |
| Female | < 45 Years | 63 | 12.4 | 31 | 4.3 | 71 | 1.6 | 9 | 2.1 | 174 | 2.9 |
| | 45-64 Years | 162 | 32.0 | 70 | 9.7 | 256 | 5.9 | 35 | 8.2 | 523 | 8.8 |
| | 65-74 Years | 46 | 9.1 | 60 | 8.3 | 400 | 9.3 | 31 | 7.3 | 537 | 9.0 |
| | 75-84 Years | 26 | 5.1 | 114 | 15.8 | 750 | 17.4 | 71 | 16.7 | 961 | 16.1 |
| | 85 Years and Over | 17 | 3.4 | 56 | 7.7 | 570 | 13.2 | 65 | 15.3 | 708 | 11.9 |
| | Total | 314 | 61.9 | 331 | 45.8 | 2,047 | 47.4 | 211 | 49.5 | 2,903 | 48.6 |
| Total | < 45 Years | 116 | 22.9 | 72 | 10.0 | 175 | 4.1 | 17 | 4.0 | 380 | 6.4 |
| | 45-64 Years | 257 | 50.7 | 189 | 26.1 | 857 | 19.9 | 96 | 22.5 | 1,399 | 23.4 |
| | 65-74 Years | 73 | 14.4 | 141 | 19.5 | 990 | 22.9 | 71 | 16.7 | 1,275 | 21.3 |
| | 75-84 Years | 41 | 8.1 | 231 | 32.0 | 1,441 | 33.4 | 145 | 34.0 | 1,858 | 31.1 |
| | 85 Years and Over | 20 | 3.9 | 90 | 12.4 | 854 | 19.8 | 97 | 22.8 | 1,061 | 17.8 |
| | Stroke In-Patient Discharges | 507 | 100 | 723 | 100 | 4,317 | 100 | 426 | 100 | 5,973 | 100 |

Note: Percentage columns are subject to rounding.

Figure A 1.2 disaggregates stroke in-patient bed days by sex and age group.

- Stroke in-patient discharges in the 75–84 years age group accounted for the largest proportion of in-patient bed days, for both males (30.7 per cent) and females (35.0 per cent).
- In the 85 years and over age group, females accounted for 20,480 in-patient bed days (30.3 per cent) compared to 7,560 (11.5 per cent) for males.

FIGURE A 1.2 Stroke In-Patient Discharges: Sex by Age Group (Bed Days)



A 1.5 DISCHARGE DESTINATION

Table A 1.3 examines discharge destination and length of stay patterns for stroke in-patient discharges.

- Just over half of stroke in-patient discharges (50.6 per cent) were discharged home.
- 16.1 per cent of stroke in-patient discharges were transferred to another hospital.
- 16.2 per cent of stroke in-patient discharges died in hospital.
- Those discharged to long stay accommodation had an in-patient mean length of stay of 44.8 days, compared with those discharged home, who had an in-patient mean length of stay of 15.5 days.

TABLE A 1.3 Stroke In-Patient Discharges: Discharge Destination (N, %, and Length of Stay)

| Discharge Destination | Stroke In-Patient Discharges | | In-Patient Length of Stay | |
|-------------------------------------|------------------------------|------------|---------------------------|-------------|
| | N | % | Mean | Median |
| Home | 3,023 | 50.6 | 15.5 | 9 |
| Long stay accommodation | 978 | 16.4 | 44.8 | 21 |
| Transfer to other hospital | 962 | 16.1 | 25.9 | 12 |
| Died | 966 | 16.2 | 17.6 | 7 |
| Other | 44 | 0.7 | 14.4 | 6 |
| Stroke In-Patient Discharges | 5,973 | 100 | 22.3 | 10.0 |

Note: Percentage columns are subject to rounding.
See Appendix VI for information on how the HIPE variable 'Discharge Destination' was grouped for this report.

A 1.6 PRINCIPAL PROCEDURES

Table A 1.4 presents the top 5 principal procedures for stroke in-patient discharges that underwent a principal procedure based on ICD-10-AM classification.⁶

- 5,685 (95.2 per cent of) stroke in-patient discharges had a principal procedure.
- Of the 5,685 principal procedures performed, the top five procedures accounted for 83.4 per cent of these procedures.
- Stroke in-patient discharges with a principal procedure of *computerised tomography of brain* accounted for 55.0 per cent of stroke in-patient discharges with a principal procedure.

TABLE A 1.4 Stroke In-Patient Discharges: Top 5 Principal Procedure Blocks (N, %, and Length of Stay)

| Principal Procedure – Top 5 | | Stroke In-Patient Discharges | | In-Patient Length of Stay | |
|--|---|------------------------------|-------------|---------------------------|-----------|
| | | N | % | Mean | Median |
| 1952 | Computerised tomography of brain | 3,125 | 55.0 | 19.5 | 9 |
| 2015 | Magnetic resonance imaging | 735 | 12.9 | 23.6 | 11 |
| 1916 | Generalised allied health interventions | 548 | 9.6 | 24.6 | 12 |
| 0011 | Destruction of intracranial aneurysm or other vascular lesion | 175 | 3.1 | 16.8 | 12 |
| 0569 | Ventilatory support | 158 | 2.8 | 15.7 | 3 |
| Top 5 Principal Procedures for Stroke In-Patient Discharges | | 4,741 | 83.4 | 20.5 | 10 |
| Stroke In-Patient Discharges with a Principal Procedure | | 5,685 | 100 | 23.0 | 10 |

Notes: Percentage columns are subject to rounding.

⁶ See Section Three for details of clinical coding and classification.

A 1.7 CASE MIX ANALYSIS

Table A 1.5 presents the top 5 AR-DRGs for stroke in-patient discharges.⁷

- 93.2 per cent of stroke in-patient discharges were assigned to one of the top five AR-DRGs.
- 41.7 per cent of stroke in-patient discharges were assigned to AR-DRG B70C *Stroke and Other Cerebrovascular Disorders W/O Cat/Sev CC*.

TABLE A 1.5 Stroke In-Patient Discharges: Top 5 AR-DRGs (N, %, and Length of Stay)

| AR-DRGs – Top 5 | | Stroke In-Patient Discharges | | In-Patient Length of Stay | |
|---|---|------------------------------|-------------|---------------------------|-----------|
| | | N | % | Mean | Median |
| B70C | Stroke and Other Cerebrovascular Disorders W/O Cat/Sev CC | 2,490 | 41.7 | 13.5 | 8 |
| B70B | Stroke and Other Cerebrovascular Disorders W Sev CC | 1,440 | 24.1 | 22.6 | 13 |
| B70A | Stroke and Other Cerebrovascular Disorders W Cat CC | 1,027 | 17.2 | 50.1 | 28 |
| B70D | Stroke and Other Cerebrovascular Disorders, Died or Transferred <5 Days | 494 | 8.3 | 1.8 | 1 |
| B02C | Cranial Procedures W/O Cat/Sev CC | 113 | 1.9 | 11.9 | 8 |
| Top 5 AR-DRGs for Stroke In-Patient Discharges | | 5,564 | 93.2 | 21.5 | 10 |
| Stroke In-Patient Discharges | | 5,973 | 100 | 22.3 | 10 |

Notes: Percentage columns are subject to rounding.

⁷ See Section Five for details of the case mix classification.

Glossary & Abbreviations

GLOSSARY

| | |
|--------------------------------------|--|
| Acute hospital | An acute hospital provides medical and surgical treatment of relatively short duration (Department of Health and Children, 2001). |
| Additional diagnosis | A condition or complaint either coexisting with the principal diagnosis or arising during the episode of admitted patient care, episode of residential care or attendance at a health care establishment, as represented by a code (Health Data Standards Committee (2006), National Health Data Dictionary, Version 13, AIHW). |
| Admission type | The type of admission may generally be classified as a planned or emergency admission. Unlike emergency admissions, planned admissions are arranged in advance by the patient and/or service provider. |
| Case mix | Case mix is a method of quantifying hospital workload taking account of the complexity and resource-intensity of the services provided. |
| Complications | Complications may arise during the hospital stay. |
| Comorbidities | Comorbidities are assumed to be prior existing conditions, which were present at the time of admission. |
| Day patient | A day patient is admitted to hospital for treatment on an elective (rather than an emergency) basis and who is discharged alive, as scheduled, on the same day (Department of Health and Children, 2001). Births are not included. |
| Delivery discharges | Refers to <i>Maternity</i> discharges where the woman had a diagnosis of delivery (ICD-10-AM Z37). |
| Delivery status | Refers to the disaggregation of <i>maternity</i> discharges into delivery and non-delivery status determined by the presence of a diagnosis of delivery (Z37). |
| Diagnosis Related Group (DRG) | DRGs are clusters of cases with similar clinical attributes and resource requirements. In Ireland, the decision was made to move to Australian Refined Diagnosis Related Group (AR-DRG) from 2005 onwards. |
| Discharge rate | Discharge rate is the ratio of discharges to the corresponding population. The formula for calculating the discharge rate is: $\frac{\text{Discharges in group } i}{\text{Population of group } i} \times 1,000$ <p>Age-specific discharge rates are calculated as the number of discharges within a particular age group divided by the population within that particular age group multiplied by 1,000.</p> <p>Sex-specific discharge rates are calculated as the number of male (female) discharges divided by the male (female) population multiplied by 1,000.</p> <p>Age- and sex-specific discharge rates are calculated as the number of male (female) discharges within a particular age group divided by the number of males (females) in the population within that particular age group multiplied by 1,000.</p> <p>For HSE Areas, discharge rates are calculated as the number of discharges resident in the HSE Area divided by the population resident in the HSE Area multiplied by 1,000.</p> |
| Elective admission | An admission or procedure that has been arranged in advance (Department of Health and Children, 2001). This term is generally used to refer to in-patient discharges. The term planned admission may also be used. |
| Emergency admission | An emergency admission is unforeseen and requires urgent care (Department of Health and Children, 2001). This term is used to refer to in-patient discharges. |

| | |
|---|--|
| General hospital | A general hospital provides a broad range of services, and includes voluntary and non-voluntary (county and regional) hospitals. |
| GMS status | Refers to whether a patient holds a medical card. Up to 2004, the General Medical Services (Payments) Board was responsible for making payments on behalf of the health boards/regional authorities for national schemes (including GP services and prescriptions used by medical card holders). At the end of 2004, the GMS (Payments) Board was replaced by the Primary Care Reimbursement Service. |
| HSE area of hospitalisation | Refers to the HSE area in which the patient was treated. |
| HSE area of residence | Refers to the HSE area in which the patient resides. |
| Hospital In-Patient Enquiry (HIPE) | HIPE is a health information system that collates data on discharges from, and deaths in, acute hospitals in Ireland. |
| Hospital type | Relates to health board/regional authority hospitals and voluntary hospitals. It is also used to distinguish between general and other hospitals. |
| In-patient | An in-patient is admitted to hospital for treatment or investigation on a planned or emergency basis (Department of Health and Children, 2001). While a planned in-patient would stay for at least one night, in the case of emergency admissions the date of admission and discharge may be the same. |
| Length of stay | Length of stay refers to the time, expressed in days, between admission to and discharge from hospital. For day patients or where the dates of admission and discharge are the same, length of stay is set equal to one day. Mean length of stay is computed by dividing the number of days stayed by the number of discharges. The median length of stay is the middle value among the ordered lengths of stay, such that half of the values for length of stay are below the median and half the values for length of stay are above the median. |
| Major Diagnostic Category (MDC) | The MDC is a category generally based on a single body system or aetiology that is associated with a particular medical specialty. However, records assigned to MDCs 01, 15, 18 and 21 may have principal diagnoses associated with other categories. In AR-DRG Version 6.0, there are 23 MDCs. |
| Medical Assessment Unit | A medical assessment unit (MAU) is a consultant led unit that accepts direct referrals from G.P.s, it offers priority access to diagnostic facilities and preferably closes at night. |
| Method of delivery | Refers to the method of delivery derived for delivery discharges. These are based on delivery procedure codes at any procedure code level and are grouped into Non-instrumental, Instrumental and Elective or Emergency Caesarean section. |
| Maternity discharges | Discharges <i>admitted</i> in relation to their obstetrical experience (from conception to 6 weeks post delivery); that is, they are allocated to Admission Type code 'Maternity'. |
| Non-delivery | Non-delivery discharges are <i>Maternity</i> discharges where the admission was related to their obstetrical experience but who did not deliver during that episode of care. |
| Non-voluntary | A non-voluntary hospital is owned and funded by the Health Service Executive. It is also known as a HSE hospital (Citizen's Information, 2009). |
| 'Other' hospital | A hospital described as 'Other' specialises in the provision of medical and surgical services in a particular area, such as maternity hospitals, cancer hospitals or orthopaedic hospitals. |

| | |
|---|--|
| Patient type | A patient may be admitted to hospital as a day patient (which is planned and does not involve an overnight stay), or an in-patient. |
| Principal diagnosis | The diagnosis established after study to be chiefly responsible for occasioning an episode of admitted patient care, an episode of residential care, or an attendance at the health care establishment, as represented by a code. (Health Data Standards Committee (2006), National Health Data Dictionary, Version 13, AIHW). |
| Principal and additional procedure | <p>A procedure is defined as a clinical intervention that</p> <ul style="list-style-type: none"> • is surgical in nature, and/or • carries a procedural risk, and/or • carries an anaesthetic risk, and/or • requires specialised training, and/or • requires special facilities or equipment only available in an acute care setting. <p>The order of codes should be determined using the following hierarchy:</p> <ul style="list-style-type: none"> • procedure performed for treatment of the principal diagnosis • procedure performed for treatment of an additional diagnosis • diagnostic/exploratory procedure related to the principal diagnosis • diagnostic/exploratory procedure related to an additional diagnosis for the episode of care. (NCCH, 2008) |
| Public/private status | Refers to whether the patient is a public or private patient of the consultant. |
| Voluntary hospital | Management authorities for this group of hospitals vary widely. Some are owned and operated by religious orders, others are incorporated by charter or statute and work under lay boards of governors. These are financed to a large extent by State funds (Citizen's Information, 2009). For the purposes of this report, joint board hospitals are categorised as voluntary hospitals. |

Sources: The above definitions are taken directly from, or based on, those provided in the following:
 Department of Health and Children, 2001. Quality and Fairness a Health System for You: Health Strategy. Dublin: The Stationery Office.
 'Hospital Services – Introduction': Citizen's Information; date consulted: 9 December 2011.
www.citizensinformation.ie/categories/health/hospital-services/hospital_services_introduction
 For further information on the definitions of diagnoses see NCCH ICD-10-AM, July 2008, General Standards for Diseases.
 For further information on the definitions of procedures see NCCH ICD-10-AM, July 2008, General Standards for Procedures.
 For further information on AR-DRGs see Commonwealth Department of Health and Aged Care., 2008. Australian Refined Diagnosis Related Groups Version 6.0 Definitions Manual. Canberra: Commonwealth Department of Health and Ageing. pp. 4–15.

ABBREVIATIONS

| | |
|----------------------|--|
| Adm | Admission |
| Admwt | Admission Weight |
| ACHI | Australian Classification of Health Interventions |
| ACS | Australian Coding Standards |
| AICD | Automatic Implantable Cardioverter-Defibrillator |
| AMI | Acute Myocardial Infarction |
| ALOS | Average Length of Stay |
| AR-DRG | Australian Refined Diagnosis Related Group |
| BIU | Business Intelligence Unit |
| CABG | Coronary Artery Bypass Graft |
| Cat | Catastrophic |
| CC | Complication and/or Comorbidity |
| CDE | Common Bile Duct Exploration |
| CSO | Central Statistics Office |
| D&C | Dilation and Curettage |
| D&D | Diseases and Disorders |
| CPB pump | Cardiopulmonary bypass pump |
| DoH&C | Department of Health and Children |
| DRG | Diagnosis Related Group |
| EEG | Electroencephalography |
| ECMO | Extra corporeal membrane oxygenation |
| ECT | Electroconvulsive therapy |
| ENT | Ear, Nose and Throat |
| ERCP | Endoscopic Retrograde Cholangio Pancreatography |
| ESRI | Economic and Social Research Institute |
| ESW | Extracorporeal Shock Waves |
| GI | Gastro-intestinal |
| Fx | Fracture |
| g | Grams |
| GMS | General Medical Services |
| GP | General Practitioner |
| HIPE | Hospital In-Patient Enquiry |
| HIV | Human Immunodeficiency Virus |
| HSE | Health Service Executive |
| ICD-9-CM | Ninth Revision of the International Classification of Diseases, Clinical Modification, Version October 1998 |
| ICD-10-AM | Tenth Revision of the International Classification of Diseases, Australian Modification, 6 th Edition |
| Incl | Including |
| IHD | Ischaemic Heart Disease |
| Infect/inflam | Infection/inflammation |
| Inhal | Inhalation |
| Inves | Investigative |

| | |
|------------------|--|
| IT | Information Technology |
| MDC | Major Diagnostic Category |
| misc | Miscellaneous |
| n/a | Not applicable |
| NCCH | National Centre for Classification in Health |
| N | Number of Observations/Discharges |
| Non-malig | Non-malignant |
| NPRS | National Perinatal Reporting System |
| NTPF | National Treatment Purchase Fund |
| OR | Operating Room |
| PTCA | Percutaneous Transluminal Coronary Angioplasty |
| Sev | Severe |
| TIA | Transient Ischaemic Attack |
| URI | Upper Respiratory Infection |
| WHO | World Health Organisation |
| W/O | Without |

Appendices

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APPENDIX I: HIPE HOSPITALS

TABLE I.1 Listing of Hospitals Participating in the HIPE Scheme

| Hospital Name | County | Hospital Type | |
|--|-----------|---------------|-------------|
| HSE Dublin North East | | | |
| Beaumont Hospital | Dublin | Voluntary | General |
| The Children's University Hospital, Temple Street | Dublin | Voluntary | Paediatric |
| Connolly Hospital, Blanchardstown | Dublin | Non-Voluntary | County |
| Incorporated Orthopaedic Hospital, Clontarf | Dublin | Voluntary | Orthopaedic |
| Mater Misericordiae University Hospital | Dublin | Voluntary | General |
| Rotunda Hospital | Dublin | Voluntary | Maternity |
| National Orthopaedic Hospital, Cappagh | Dublin | Voluntary | Orthopaedic |
| St. Joseph's Hospital, Raheny | Dublin | Voluntary | General |
| Cavan General Hospital | Cavan | Non-Voluntary | County |
| Louth County Hospital, Dundalk | Louth | Non-Voluntary | County |
| Monaghan General Hospital | Monaghan | Non-Voluntary | County |
| Our Lady of Lourdes Hospital, Drogheda | Louth | Non-Voluntary | County |
| Our Lady's Hospital, Navan | Meath | Non-Voluntary | County |
| HSE Dublin Mid Leinster | | | |
| Coombe Women & Infants University Hospital | Dublin | Voluntary | Maternity |
| Naas General Hospital | Kildare | Non-Voluntary | County |
| National Maternity Hospital, Holles Street | Dublin | Voluntary | Maternity |
| National Rehabilitation Hospital (NRH), Dun Laoghaire | Dublin | Voluntary | Orthopaedic |
| Our Lady's Children's Hospital, Crumlin | Dublin | Voluntary | Paediatric |
| Peamount Hospital, Newcastle | Dublin | Voluntary | Other Care |
| Royal Victoria Eye and Ear Hospital | Dublin | Voluntary | ENT |
| St. Columcille's Hospital, Loughlinstown | Dublin | Non-Voluntary | County |
| St. James's Hospital | Dublin | Voluntary | General |
| St. Luke's & St. Anne's Hospital | Dublin | Voluntary | Cancer |
| St. Michael's Hospital, Dun Laoghaire | Dublin | Voluntary | General |
| St. Vincent's University Hospital, Elm Park | Dublin | Voluntary | General |
| Adelaide and Meath Hospital, Dublin Incorporating the National Children's Hospital (AMNCH), Tallaght | Dublin | Voluntary | General |
| Our Lady's Hospice, Harold's Cross | Dublin | Voluntary | Long Stay |
| Midland Regional Hospital, Mullingar | Westmeath | Non-Voluntary | County |
| Midland Regional Hospital, Portlaoise | Laois | Non-Voluntary | County |
| Midland Regional Hospital, Tullamore | Offaly | Non-Voluntary | County |
| Cherry Orchard Hospital, Ballyfermot | Dublin | Non-Voluntary | Other Care |
| Blackrock Hospice ^a | Dublin | Voluntary | Long Stay |

TABLE I.1 Listing of Hospitals Participating in the HIPE Scheme (contd.)

| Hospital Name | County | Hospital Type | |
|---|-----------|---------------|-------------|
| HSE West | | | |
| Midwestern Regional Hospital, Ennis | Clare | Non-Voluntary | County |
| Midwestern Regional Hospital, Nenagh | Tipperary | Non-Voluntary | County |
| Midwestern Regional Hospital, Dooradoyle | Limerick | Non-Voluntary | Regional |
| Midwestern Regional Maternity Hospital | Limerick | Non-Voluntary | Maternity |
| Midwestern Regional Orthopaedic Hospital, Croom | Limerick | Non-Voluntary | Orthopaedic |
| St. John's Hospital | Limerick | Voluntary | General |
| Letterkenny General Hospital | Donegal | Non-Voluntary | County |
| Sligo General Hospital | Sligo | Non-Voluntary | Regional |
| Mayo General Hospital, Castlebar | Mayo | Non-Voluntary | County |
| Portiuncula Hospital, Ballinasloe | Galway | Non-Voluntary | County |
| Roscommon County Hospital | Roscommon | Non-Voluntary | County |
| Galway University Hospitals ^b | Galway | Non-Voluntary | Regional |
| HSE South | | | |
| Lourdes Orthopaedic Hospital, Kilcreene | Kilkenny | Non-Voluntary | Orthopaedic |
| St. Luke's General Hospital | Kilkenny | Non-Voluntary | County |
| South Tipperary General Hospital, Clonmel | Tipperary | Non-Voluntary | County |
| Waterford Regional Hospital, Ardkeen | Waterford | Non-Voluntary | Regional |
| Wexford General Hospital | Wexford | Non-Voluntary | County |
| Cork University Hospital ^b | Cork | Non-Voluntary | Regional |
| Kerry General Hospital, Tralee | Kerry | Non-Voluntary | County |
| Bantry General Hospital | Cork | Non-Voluntary | County |
| Mallow General Hospital | Cork | Non-Voluntary | County |
| Mercy University Hospital | Cork | Voluntary | General |
| South Infirmary Victoria Hospital | Cork | Voluntary | General |
| St. Finbarr's Hospital | Cork | Non-Voluntary | County |
| St. Mary's Orthopaedic Hospital, Gurranebraher | Cork | Non-Voluntary | Orthopaedic |

Notes: Total number of hospitals participating in 2010: 57

a Participating in HIPE from 1 January 2010.

b HIPE activity data from 2010 for University College Hospital Galway and Merlin Park Regional Hospital are now reported as Galway University Hospitals.

APPENDIX II: HIPE DATA COLLECTED

TABLE II.1 Data Collected by HIPE

| Type of Data | Parameters | Notes |
|---------------------|---|--|
| Demographic Data | Date of birth | Full date of birth not exported outside the hospital. |
| | Sex | |
| | Marital status | Values include single, married, widowed, other (including separated), unknown, or divorced. |
| | Infant admission weight | Weight in whole grams on admission is collected for neonates (0-27 days old) and infants up to 1 year of age with admission weight of less than 2,500 grams. |
| | Area of residence by county or country | If resident in Ireland but outside Dublin, captures county of residence. If resident in Dublin, captures postal code. If usually resident outside Ireland, captures country of residence. |
| Clinical Data | One principal diagnosis | Uses the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), 6th Edition, July 2008. |
| | Nineteen additional diagnoses | Uses the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), 6th Edition, July 2008. |
| | One principal procedure | Uses the Australian Classification of Health Interventions (ACHI) of the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), 6th Edition, July 2008. |
| | Nineteen additional procedures | Uses the Australian Classification of Health Interventions (ACHI) of the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), 6th Edition, July 2008. |
| Administrative Data | Patient name | Is not exported outside the hospital. |
| | Hospital number | |
| | Chart number | Is unique to hospital of discharge. |
| | Admission and discharge dates | |
| | Dates of principal and first procedures | |
| | Day case indicator | |
| | Day ward indicator | Indicates if a day case patient was admitted to a dedicated named day ward. |
| | Day ward identifier | If the answer to day ward indicator is 'Yes', the day ward identifier must be entered to identify where the patient was treated. |
| | Type of admission | Values include elective, elective readmission, emergency, emergency readmission, maternity, or newborn. ^a |
| | Waiting list indicator | Indicates if an elective admission case is funded by the National Treatment Purchase Fund (NTPF). |
| | Mode of emergency admission | Indicates where the patient with admission codes emergency, emergency readmission, or newborn was treated prior to being admitted to the hospital as an in-patient, or when the patient was treated only in a registered Medical Assessment Unit (MAU). Values include Emergency Department, MAU-Admitted as In-Patient, other, unknown, and MAU – Day Only. |
| | Source of admission | Values include home, transfer from nursing home/convalescent home or other long stay accommodation, transfer from hospital (in HIPE), transfer from other hospital (not in HIPE), transfer from hospice (not in HIPE), transfer from psychiatric hospital/unit, newborn, temporary place of residence, prison, or other. |

Data Collected by HIPE (contd.)

| Type of Data | Parameters | Notes |
|------------------------------|--|---|
| Administrative Data (contd.) | Discharge destination | Values include: self discharge, home, nursing home, convalescent home or long stay accommodation, transfer to hospital (in HIPE) as emergency, transfer to hospital (in HIPE) as non-emergency, transfer to psychiatric hospital/unit, died with post-mortem, died without post-mortem, transfer to other hospital (not in HIPE) as emergency, transfer to other hospital (not in HIPE) as non-emergency, rehabilitation facility, hospice, prison, absconded, other, or temporary place of residence (e.g. hotel). |
| | Discharge status | Refers to the public/private status of the patient on discharge and not to the type of bed occupied. |
| | General Medical Service status | Refers to whether the patient is a medical card holder. |
| | Days in an intensive care environment | |
| | Days in a private/semi-private bed | |
| | Days in a public bed | |
| | Specialty | Refers to specialty of consultant associated with the principal diagnosis and is assigned locally based on a list provided by the Department of Health and Children. |
| | Primary consultant | Encrypted. |
| | Anaesthetist | Encrypted. Collected for each procedure performed under anaesthetic. |
| | Intensive care consultant | Encrypted. Up to ten may be recorded. |
| | Admitting consultant | Encrypted. |
| | Discharge consultant | Encrypted. |
| | Consultant responsible for each diagnosis | Encrypted. |
| | Consultant responsible for each procedure | Encrypted. |
| | Date of transfer to a pre-discharge unit | Date may be collected to identify when a patient was transferred to a pre-discharge unit prior to being discharged as planned – optional variable collected since 2004 |
| | Ward Identification | Admitting ward: The ward to which the patient was admitted. Discharge ward: The ward from which the patient was discharged. |
| Temporary leave days | Refers to the number of days the patient was absent from the hospital during an episode of care ^b | |

Notes: ^a For *Maternity* discharges on or after 1 January 2009 there is no longer a distinction between elective and emergency admissions as in previous years.

^b This was a new variable in 2007. To be consistent with previous years the calculation of average length of stay in this report does not take temporary leave days into account.

Source: HIPE Data Dictionary 2010 Version 2.0 available at www.hipe.ie.

APPENDIX III: HIPE DATA ENTRY FORM

FIGURE III.1 HIPE Data Entry Form, 2010

Hospital In-Patient Enquiry (HIPE) Summary Sheet
 For use with W-HIPE data entry software on ALL DISCHARGES FROM 01.01.2010

| | | | | | |
|------------------------|----------------------|---------------------------------------|----------------------|---|----------------------|
| Hospital No. | <input type="text"/> | Medical Record No. | <input type="text"/> | FOR LOCAL COLLECTION ONLY | |
| Sex | <input type="text"/> | Type (priority) of admission | W/List If=1-2 | Mode If=4,5,7 | *Name: _____ |
| Admission Date | <input type="text"/> | Admission Source | <input type="text"/> | <input type="text"/> | *Address: _____ |
| Discharge Date | <input type="text"/> | Discharge Code | <input type="text"/> | <input type="text"/> | _____ |
| *Date of Birth | <input type="text"/> | Affix Label (Vertical text) | | | |
| Area of Residence | <input type="text"/> | | | | |
| Admitting Ward | <input type="text"/> | | | | |
| Discharge Ward | <input type="text"/> | | | | |
| Transfer From | <input type="text"/> | | | | |
| Transfer To | <input type="text"/> | Marital Status | <input type="text"/> | Medical Card | <input type="text"/> |
| Day Case | <input type="text"/> | Infant Admit Weight (grams) | <input type="text"/> | *GMS Number | <input type="text"/> |
| Day Ward | <input type="text"/> | Discharge Status | <input type="text"/> | Admitting Consultant | <input type="text"/> |
| Day Ward ID | <input type="text"/> | Temporary Leave Days | <input type="text"/> | Discharge Consultant | <input type="text"/> |
| Oncology Day Ward Flag | <input type="text"/> | Date of Transfer to rehab/PDU | <input type="text"/> | Primary Consultant | <input type="text"/> |
| | | Days in Private/Semi Private Bed | <input type="text"/> | Intensive Care Consultant | <input type="text"/> |
| | | Days in a Public Bed | <input type="text"/> | Up to 10 Intensive Care consultants may be recorded | |
| | | Days in an Intensive Care environment | <input type="text"/> | | |

PDX = The diagnosis established after study to be chiefly responsible for occasioning the patient's episode of care in hospital (ACS 0001)

| ICD-10-AM Code | Principal Diagnosis (PDX) | Consultant | Specialty |
|----------------|---------------------------|----------------------|----------------------|
| (1) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (2) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (3) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (4) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (5) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (6) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (7) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (8) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (9) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (10) | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Up to 20 diagnoses codes may be entered on W-HIPE as appropriate - Continue on reverse of sheet if necessary

| Procedure/Intervention Codes | Block No. | Principal Procedure | Consultant | Consultant Anaesthetist |
|------------------------------|----------------------|----------------------|----------------------|-------------------------|
| (1) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (2) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (3) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (4) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (5) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (6) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (7) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (8) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (9) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| (10) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Up to 20 procedure codes may be entered on W-HIPE as appropriate - Continue on reverse of sheet if necessary

Date of 1st Procedure / / Date of Principal Procedure / /

Case Entered on W-HIPE Comment: _____

* Patient Name, Address, full DOB, and GMS number are currently not exported to the ESRI. Collected only at hospital level.

For use on all discharges from 01.01.2010

Source: Health Research & Information Division, ESRI, Whitaker Square, Sir John Rogerson's Quay Dublin 2. Tel 01- 8632000

APPENDIX IV: BED DATA

The HIPE Report has historically reported on figures for the number of beds in HIPE hospitals.¹ These were initially produced by the Department of Health but since 2006 have been provided by the HSE. For HIPE hospitals not managed by the HSE, bed data are sourced directly from those hospitals.

Number of Beds in HIPE Hospitals, 2006–2010

Table IV.1 shows the number of beds in HIPE hospitals over the years 2006–2010.

TABLE IV.1 Number of Beds in HIPE Hospitals, 2006-2010

| | 2006 | 2007 | 2008 | 2009 | 2010 | Average Annual % Change ^a | % Change |
|----------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--------------------------------------|-----------|
| | (%) | (%) | (%) | (%) | (%) | 2006-2010 | 2009-2010 |
| Day Patient Beds | 1,402 (10.2) | 1,529 (11.0) | 1,697 (12.2) | 1,774 (13.1) | 1,859 (14.0) | 7.3 - | 4.8 - |
| In-Patient Beds | 12,371 (89.8) | 12,356 (89.0) | 12,182 (87.8) | 11,751 (86.9) | 11,417 (86.0) | -2.0 | -2.8 |
| Total Hospital Beds | 13,773 (100) | 13,885 (100) | 13,879 (100) | 13,525 (100) | 13,276 (100) | - | - |

Notes: Percentages are reported in parentheses.

It should be noted when interpreting data on the number of hospital beds that the number of participating hospitals will have changed over time.

Source: Business Intelligence Unit in the Corporate Planning and Corporate Performance Directorate of the Health Service Executive (December, 2011)

The following tables indicate the volume and distribution of beds across the health system for 2010.

Number of Beds in HIPE Hospitals by HSE Region

Table IV.2 shows the number of HIPE hospital beds by HSE Region.

TABLE IV.2 Number of Beds in HIPE Hospitals by HSE Region, 2010

| | Day Patient Beds | | In-Patient Beds | | Total HIPE Hospital Beds | |
|----------------------------|----------------------------|-------------|-----------------------------|-------------|-----------------------------|------------|
| | N | % | N | % | N | % |
| HSE Dublin North East | 442 23.8 | 14.6 | 2,586 22.7 | 85.4 | 3,028 22.8 | 100 |
| HSE Dublin Mid Leinster | 564 30.3 | 13.3 | 3,674 32.2 | 86.7 | 4,238 31.9 | 100 |
| HSE South | 383 20.6 | 12.6 | 2,651 23.2 | 87.4 | 3,034 22.9 | 100 |
| HSE West | 470 25.3 | 15.8 | 2,506 21.9 | 84.2 | 2,976 22.4 | 100 |
| Total Hospital Beds | 1,859 100 | 14.0 | 11,417 100 | 86.0 | 13,276 100 | 100 |

Notes: Percentages columns are subject to rounding.
See additional notes and Source under Table IV.1.

¹ Number of beds represents the average number of beds per day that were available throughout the year and is exclusive of bed closures (HSE, 2011).

Number of Beds in HIPE Hospitals by Hospital Type

Table IV.3 shows the number of HIPE hospital beds by Hospital Type.

TABLE IV.3 Number of Beds in HIPE Hospitals by Hospital Type, 2010

| | Day Patient Beds | | In-Patient Beds | | Total Hospital Beds | |
|-----------------------------------|----------------------------|-------------|-----------------------------|-------------|-----------------------------|------------|
| | N | % | N | % | N | % |
| General Hospitals | 1,672 89.9 | 14.7 | 9,711 85.1 | 85.3 | 11,383 85.7 | 100 |
| Voluntary | 640 34.4 | 15.3 | 3,546 31.1 | 84.7 | 4,186 31.5 | 100 |
| Regional | 422 22.7 | 14.7 | 2,440 21.4 | 85.3 | 2,862 21.6 | 100 |
| County | 610 32.8 | 14.1 | 3,725 32.6 | 85.9 | 4,335 32.7 | 100 |
| Special Hospitals | 187 10.1 | 9.9 | 1,706 14.9 | 90.1 | 1,893 14.3 | 100 |
| Total (All Hospital Types) | 1,859 100 | 14.0 | 11,417 100 | 86.0 | 13,276 100 | 100 |

Notes: Percentages columns are subject to rounding.
See additional notes and Source under Table IV.1.

APPENDIX V: POPULATION ESTIMATES

Table V.1 presents the population data estimated in the ESRI which was used to calculate rates in Section Two. These are presented by sex, age group and HSE area of residence.

TABLE V.1 Population Data (Total, Male, Female by Age Group) by HSE Area of Residence, 2010

| | | HSE Dublin North East | HSE Dublin Mid Leinster | HSE South | HSE West | Total |
|-------------------|----------------|--------------------------|----------------------------|------------------|------------------|---------|
| Total Population | <1 Years* | 16,665 | 22,346 | 18,323 | 16,471 | 73,804 |
| | 1-14 Years* | 191,012 | 250,170 | 219,375 | 203,273 | 863,830 |
| | 15-24 Years | 120,264 | 157,988 | 149,731 | 143,774 | 571,757 |
| | 25-34 Years | 179,637 | 231,310 | 175,555 | 161,240 | 747,742 |
| | 35-44 Years | 155,944 | 201,318 | 168,284 | 151,755 | 677,301 |
| | 45-54 Years | 121,780 | 160,413 | 148,195 | 136,119 | 566,507 |
| | 55-64 Years | 94,899 | 124,645 | 121,085 | 115,308 | 455,937 |
| | 65-74 Years | 59,950 | 77,551 | 80,586 | 74,718 | 292,806 |
| | 75-84 Years | 34,274 | 43,232 | 46,789 | 44,575 | 168,870 |
| | 85 and Over | 11,365 | 13,838 | 15,886 | 17,199 | 58,289 |
| Total | 985,791 | 1,282,812 | 1,143,808 | 1,064,432 | 4,476,843 | |
| Male Population | <1 Years* | 8,541 | 11,452 | 9,389 | 8,439 | 37,822 |
| | 1-14 Years* | 98,166 | 128,308 | 112,340 | 104,109 | 442,923 |
| | 15-24 Years | 61,483 | 80,732 | 76,410 | 73,618 | 292,243 |
| | 25-34 Years | 90,192 | 116,412 | 89,651 | 82,821 | 379,077 |
| | 35-44 Years | 79,203 | 101,840 | 85,821 | 77,108 | 343,972 |
| | 45-54 Years | 60,707 | 79,845 | 74,852 | 68,781 | 284,185 |
| | 55-64 Years | 47,081 | 61,888 | 61,478 | 58,912 | 229,360 |
| | 65-74 Years | 28,858 | 37,173 | 39,847 | 37,543 | 143,422 |
| | 75-84 Years | 14,218 | 18,106 | 20,304 | 19,913 | 72,541 |
| | 85 and Over | 3,457 | 4,258 | 5,276 | 5,953 | 18,944 |
| Total | 491,906 | 640,014 | 575,370 | 537,199 | 2,244,489 | |
| Female Population | <1 Years* | 8,124 | 10,894 | 8,933 | 8,031 | 35,983 |
| | 1-14 Years* | 92,846 | 121,862 | 107,035 | 99,164 | 420,907 |
| | 15-24 Years | 58,782 | 77,256 | 73,321 | 70,155 | 279,514 |
| | 25-34 Years | 89,445 | 114,898 | 85,903 | 78,419 | 368,665 |
| | 35-44 Years | 76,741 | 99,478 | 82,463 | 74,647 | 333,329 |
| | 45-54 Years | 61,073 | 80,568 | 73,343 | 67,338 | 282,322 |
| | 55-64 Years | 47,818 | 62,756 | 59,607 | 56,396 | 226,577 |
| | 65-74 Years | 31,092 | 40,378 | 40,739 | 37,175 | 149,384 |
| | 75-84 Years | 20,056 | 25,126 | 26,485 | 24,662 | 96,328 |
| | 85 and Over | 7,909 | 9,580 | 10,610 | 11,246 | 39,345 |
| Total | 493,885 | 642,798 | 568,438 | 527,234 | 2,232,354 | |

Source:

Population data were estimated by the ESRI (August, 2011).

Notes:

Data were constructed by age, sex and county with counties Dublin and Tipperary split into north and south components as per the HSE area definitions. The estimates were derived using a cohort component model, and then applying the same mortality rates used by the CSO for their population projections, the CSO F2 fertility assumption along with published international migration data.

* Rates for these age groups were amended given revisions to population estimates (November 2012).

APPENDIX VI: DERIVED VARIABLES

For some of the categorical administrative variables, aggregation of categories has been necessary to ensure confidentiality Table VI.1 shows how the categories for these variables have been aggregated. For example, the admission type variables have been reduced from six categories to three categories.

TABLE VI.1 Derived Variables

| HIPE Variable | | Derived Variable for Report | |
|------------------------------|---|-----------------------------|--|
| Admission Type | | | |
| 1 | 'Elective' | 1 | 'Elective' (1, 2) |
| 2 | 'Elective Readmission' | 2 | 'Emergency' (4, 5, 7) |
| 4 | 'Emergency' | 3 | 'Maternity' (6) |
| 5 | 'Emergency Readmission' | | |
| 6 | 'Maternity' | | |
| 7 | 'New born' | | |
| Admission Source | | | |
| 1 | 'Home' | 1 | 'Home' (1) |
| 2 | 'Transfer from nursing home/convalescent home or other long stay accommodation' | 2 | Long stay accommodation (2, 5) |
| 3 | 'Transfer from hospital - in HIPE listing' | 3 | 'Transfer from other hospital' (3,4,6) |
| 4 | 'Transfer from other hospital - not in HIPE listing' | 4 | 'New born' (7) |
| 5 | 'Transfer from hospice - not in HIPE listing' | 5 | 'Other' (8, 9, 0) |
| 6 | 'Transfer from psychiatric hospital/unit' | | |
| 7 | 'New born' | | |
| 8 | 'Temporary place of residence' | | |
| 9 | 'Prison' | | |
| 0 | 'Other' | | |
| Discharge Destination | | | |
| 00 | 'Self discharge' | 1 | 'Home' (01) |
| 01 | 'Home' | 2 | 'Long stay accommodation' (02, 11) |
| 02 | 'Nursing home, convalescent home or long stay accommodation' | 3 | 'Transfer to other hospital' (03, 04, 05,08, 09, 10) |
| 03 | 'Transfer to hospital - in HIPE Hospital Listings - Emergency' | 4 | 'Died' (06, 07) |
| 04 | 'Transfer to hospital - in HIPE Hospital Listings - Non Emergency' | 5 | 'Other' (00, 12, 13, 14, 15) |
| 05 | 'Transfer to psychiatric hospital/unit' | | |
| 06 | 'Died with post mortem' | | |
| 07 | 'Died no post mortem' | | |
| 08 | 'Transfer to other hospital - not in HIPE Hospital Listings - Emergency' | | |
| 09 | 'Transfer to other hospital - not in HIPE Hospital Listings - Non Emergency' | | |
| 10 | 'To rehabilitation facility - not in HIPE Hospital Listings' | | |
| 11 | 'Hospice - not in HIPE Hospital Listings' | | |
| 12 | 'Prison' | | |
| 13 | 'Absconded' | | |
| 14 | 'Other – example Foster care' | | |
| 15 | 'Temporary Place of Residence' | | |

Note: For further information on all variables collected by HIPE see HIPE Data Dictionary 2010 Version 2.0 available at www.hipe.ie.

APPENDIX VII: REFERENCE TABLES

Table VII.1 presents the data used to produce Figures 2.12a to 2.12d in Section Two.

TABLE VII.1 Total Discharges (excl. *Maternity*): Proportion of Discharges Hospitalised within their HSE Region of Residence by County of Residence and Patient Type (N, %)

| | | Day Patients | | Elective In-Patients | | Emergency In-Patients | | Total Discharges (excl. <i>Maternity</i>) | |
|-------------------------|----------------|----------------|---------------|----------------------|---------------|-----------------------|----------------|--|-------------|
| | | N | % | N | % | N | % | N | % |
| HSE Dublin North East | Dublin North | 90,388 | 79.5 | 9,427 | 85.0 | 30,908 | 88.8 | 130,723 | 81.9 |
| | Cavan | 13,514 | 89.7 | 1,401 | 78.8 | 8,516 | 95.9 | 23,431 | 91.1 |
| | Monaghan | 11,286 | 90.2 | 1,055 | 77.0 | 5,413 | 95.7 | 17,754 | 90.9 |
| | Louth | 19,841 | 87.2 | 2,271 | 82.2 | 9,604 | 95.8 | 31,716 | 89.2 |
| | Meath | 20,488 | 76.0 | 2,759 | 76.7 | 12,384 | 86.9 | 35,631 | 79.5 |
| | Total | 155,517 | 81.4 | 16,913 | 82.1 | 66,825 | 90.8 | 239,255 | 83.9 |
| HSE Dublin Mid Leinster | Dublin South | 117,489 | 93.3 | 10,303 | 85.6 | 41,670 | 93.2 | 169,462 | 92.7 |
| | Kildare | 25,163 | 82.0 | 2,948 | 80.2 | 12,558 | 86.2 | 40,669 | 83.1 |
| | Wicklow | 25,122 | 96.1 | 2,403 | 84.7 | 7,671 | 93.0 | 35,196 | 94.5 |
| | Longford | 5,218 | 67.8 | 614 | 72.6 | 3,603 | 86.8 | 9,435 | 74.4 |
| | Westmeath | 15,813 | 78.1 | 1,417 | 70.0 | 7,747 | 81.1 | 24,977 | 78.5 |
| | Offaly | 15,007 | 89.1 | 1,416 | 79.1 | 5,599 | 88.4 | 22,022 | 88.2 |
| | Laois | 13,616 | 91.5 | 1,641 | 89.7 | 6,348 | 95.0 | 21,605 | 92.3 |
| Total | 217,428 | 89.7 | 20,742 | 82.8 | 85,196 | 90.4 | 323,366 | 89.4 | |
| HSE South | Carlow | 3,674 | 47.8 | 601 | 45.4 | 5,334 | 87.4 | 9,609 | 63.6 |
| | Wexford | 17,619 | 75.9 | 1,978 | 57.6 | 11,475 | 90.7 | 31,072 | 79.1 |
| | Kilkenny | 7,433 | 79.2 | 1,237 | 67.9 | 8,398 | 94.2 | 17,068 | 84.8 |
| | Tipp South | 11,604 | 86.6 | 2,910 | 87.0 | 7,972 | 94.6 | 22,486 | 89.4 |
| | Waterford | 18,320 | 94.6 | 2,261 | 82.7 | 9,595 | 96.9 | 30,176 | 94.3 |
| | Cork | 96,215 | 98.0 | 14,745 | 94.1 | 31,527 | 97.5 | 142,487 | 97.5 |
| | Kerry | 20,835 | 94.1 | 3,624 | 89.4 | 10,037 | 96.9 | 34,496 | 94.4 |
| | Total | 175,700 | 90.9 | 27,356 | 84.5 | 84,338 | 95.1 | 287,394 | 91.4 |
| HSE West | Limerick | 25,827 | 89.4 | 4,317 | 79.0 | 13,717 | 91.8 | 43,861 | 88.9 |
| | Clare | 14,267 | 95.1 | 2,673 | 87.8 | 8,577 | 96.5 | 25,517 | 94.7 |
| | Tipp North | 8,672 | 69.1 | 1,244 | 60.4 | 4,358 | 66.8 | 14,274 | 67.6 |
| | Galway | 53,531 | 97.8 | 5,289 | 90.2 | 20,632 | 97.5 | 79,452 | 97.2 |
| | Roscommon | 12,491 | 90.1 | 1,420 | 80.5 | 5,157 | 93.2 | 19,068 | 90.1 |
| | Mayo | 33,416 | 96.4 | 4,818 | 92.2 | 13,675 | 97.2 | 51,909 | 96.2 |
| | Leitrim | 5,127 | 76.9 | 510 | 59.0 | 1,944 | 77.5 | 7,581 | 75.5 |
| | Sligo | 18,417 | 93.9 | 1,762 | 81.8 | 7,146 | 96.5 | 27,325 | 93.7 |
| | Donegal | 29,640 | 93.3 | 2,975 | 70.5 | 15,557 | 95.3 | 48,172 | 92.1 |
| Total | 201,388 | 92.5 | 25,008 | 81.6 | 90,763 | 93.2 | 317,159 | 91.7 | |

Note: Percentage columns are subject to rounding.

APPENDIX VIII: AUSTRALIAN CODING STANDARD 0042

Australian Coding Standard 0042 Procedures not Normally Coded²

These procedures are normally not coded because they are usually routine in nature, performed for most patients and/or can occur multiple times during an episode. Most importantly, the resources used to perform these procedures are often reflected in the diagnosis or in an associated procedure. For example:

- X-ray and application of plaster is expected with a diagnosis of Colles fracture
- Intravenous antibiotics are expected with a diagnosis of septicaemia
- Cardioplegia in cardiac surgery

Note:

Some codes on this list may be required in certain standards elsewhere in the Australian Coding Standards. In such cases, the standard overrides this list and the stated code should therefore be assigned as described in the relevant standard.

The listed procedures should be coded if anaesthesia (except local) is required for the procedure (see [ACS 0031 Anaesthesia](#)).

These procedures should be coded if they are the principal reason for admission in same-day episodes of care.

1. Application of plaster
2. Cardioplegia when associated with cardiac surgery
3. Cardiotocography (CTG) except fetal scalp electrodes
4. Dressings
5. Drug treatment
Drug treatment should not be coded except if:
 - the substance is given as the principal treatment in same-day episodes of care (e.g. chemotherapy for neoplasm or HIV, see [ACS 0044 Chemotherapy](#))
 - drug treatment is specifically addressed in a coding standard (see [ACS 1316 Cement spacer/beads](#) and [ACS 1615 Specific interventions for the sick neonate](#))
6. Echocardiogram except transoesophageal echocardiogram
7. Electrocardiography (ECG) except patient-activated implantable cardiac event monitoring (loop recorder)

² Extracted from NCCH eBook, July 2008, General Standards for Interventions

8. Electrodes (pacing wires) – temporary: insertion of temporary transcutaneous or transvenous electrodes when associated with cardiac surgery; adjustment, repositioning, manipulation or removal of temporary electrodes
9. Electromyography (EMG)
10. Hypothermia when associated with cardiac surgery
11. Monitoring: cardiac, electroencephalography (EEG), vascular pressure except radiographic/video EEG monitoring 24 hours
12. Nasogastric intubation, aspiration and feeding, except nasogastric feeding in neonates. (see ACS 1615 Specific interventions for the sick neonate)
13. Perfusion when associated with cardiac surgery
14. Primary suture of surgical and traumatic wounds
Code only for traumatic wounds which are not associated with an underlying injury (e.g. suture of lacerated forearm would be coded if there is no other associated injury repair). (see ACS 1217 Repair of wound of skin and subcutaneous tissue)
15. Procedure components
16. Stress test
17. Traction if associated with another procedure
18. Ultrasound
19. Urinary catheterisation except if suprapubic or if patient discharged with catheter in situ (see ACS 0016 General procedure guidelines and ACS 1436 Admission for trial of void)
20. X-rays without contrast (plain)

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