

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
All Discharges	34,872,474	100.00	\$10,647	\$2,911	\$5,737	\$11,414	5.0	2.5	41.3	47.1
1 Operations on the nervous system	828,046	2.37	\$15,526	\$5,293	\$9,074	\$16,276	5.5	2.4	52.7	43.0
<b>1.1 Incision and excision of CNS [1.]</b>	70,597	0.20	\$36,364	\$15,569	\$25,031	\$41,603	10.2	8.6	56.6	55.3
1.1.1 Craniotomy and craniectomy	10,807	0.03	\$35,442	\$13,236	\$22,325	\$41,609	10.5	8.2	59.7	48.7
1.1.2 Incision of cerebral meninges	17,513	0.05	\$36,861	\$14,453	\$23,691	\$42,156	10.9	14.1	67.7	65.4
1.1.3 Other incision and excision of CNS	42,278	0.12	\$36,398	\$16,747	\$26,217	\$41,343	9.9	6.4	51.2	52.8
<b>1.2 Insertion, replacement, or removal of extracranial ventricular shunt [2.]</b>	25,133	0.07	\$26,921	\$8,417	\$13,189	\$25,497	8.9	2.9	53.9	36.6
<b>1.3 Laminectomy, excision intervertebral disc [3.]</b>	340,481	0.98	\$11,538	\$5,755	\$8,692	\$13,273	3.2	0.2	56.0	51.4
1.3.1 Excision of intervertebral disc	249,609	0.72	\$10,428	\$5,374	\$8,068	\$12,157	2.7	0.1	57.7	47.6
1.3.2 Laminectomy	90,872	0.26	\$14,602	\$7,180	\$10,721	\$16,636	4.7	0.4	51.3	61.9
<b>1.4 Diagnostic spinal tap [4.]</b>	251,437	0.72	\$10,963	\$3,842	\$6,659	\$12,270	6.0	2.3	50.3	25.1
<b>1.5 Insertion of catheter or spinal stimulator and injection into spinal canal [5.]</b>	50,490	0.14	\$10,096	\$3,828	\$6,746	\$11,992	5.7	1.2	37.1	57.1
<b>1.6 Decompression peripheral nerve [6.]</b>	4,655	0.01	\$9,396	\$3,961	\$6,285	\$10,362	3.8	0.1	47.6	49.0
1.6.1 Release of carpal tunnel	2,102	0.01	\$10,327	\$4,143	\$6,608	\$11,204	4.3	0.0	43.8	54.7
1.6.2 Other lysis of adhesion and decompression of peripheral nerves	2,553	0.01	\$8,630	\$3,772	\$6,051	\$9,811	3.4	0.2	50.8	44.2
<b>1.7 Other diagnostic nervous system procedures [7.]</b>	14,608	0.04	\$33,173	\$10,643	\$19,157	\$36,316	10.0	12.7	57.5	50.9
<b>1.8 Other non-OR or closed therapeutic nervous system procedures [8.]</b>	12,090	0.03	\$10,535	\$3,636	\$6,589	\$12,214	6.5	1.4	37.6	49.9
<b>1.9 Other OR therapeutic nervous system procedures [9.]</b>	58,555	0.17	\$30,582	\$8,850	\$16,255	\$31,536	8.2	6.6	54.3	42.9
2 Operations on the endocrine system	76,315	0.22	\$10,527	\$4,938	\$7,342	\$11,429	3.0	0.3	25.0	50.5

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Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
<b>2.1 Thyroidectomy, partial or complete [10.]</b>	47,752	0.14	\$7,732	\$4,529	\$6,476	\$9,129	2.0	0.1	17.3	49.2
<b>2.2 Diagnostic endocrine procedures [11.]</b>	2,196	0.01	\$14,401	\$6,869	\$10,766	\$16,699	6.9	2.3	34.5	62.1
<b>2.3 Other therapeutic endocrine procedures [12.]</b>	26,367	0.08	\$15,278	\$6,235	\$10,252	\$17,572	4.6	0.6	38.0	51.8
3 Operations on the eye	71,238	0.20	\$8,733	\$3,592	\$5,515	\$9,139	3.3	0.5	52.7	55.6
<b>3.1 Corneal transplant [13.]</b>	3,185	0.01	\$6,927	\$4,841	\$5,524	\$7,585	2.0	0.0	40.0	66.4
<b>3.2 Glaucoma procedures [14.]</b>	5,463	0.02	\$4,260	\$2,613	\$3,297	\$4,561	1.9	0.0	39.3	67.7
<b>3.3 Lens and cataract procedures [15.]</b>	7,208	0.02	\$6,497	\$2,984	\$4,454	\$7,074	3.1	0.1	35.5	72.4
3.3.1 Insertion of prosthetic lens	185	0.00	*	*	*	*	*	*	*	*
3.3.2 Phacoemulsification and aspiration of cataract	4,943	0.01	\$5,843	\$2,893	\$4,158	\$6,364	2.5	0.2	34.5	73.3
3.3.3 Other extracapsular extraction of lens	1,197	0.00	\$7,250	\$3,387	\$5,269	\$8,597	4.2	0.0	34.2	74.2
3.3.4 Other lens and cataract procedures	882	0.00	\$8,789	\$2,756	\$4,933	\$9,438	4.7	0.0	43.1	64.7
<b>3.4 Repair of retinal tear, detachment [16.]</b>	9,466	0.03	\$6,889	\$3,738	\$5,463	\$8,196	1.8	0.1	58.8	55.7
<b>3.5 Destruction of lesion of retina and choroid [17.]</b>	1,279	0.00	\$41,449	\$4,721	\$10,471	\$16,670	17.1	0.9	50.4	38.3
<b>3.6 Diagnostic procedures on eye [18.]</b>	1,025	0.00	\$9,385	\$3,412	\$6,187	\$10,562	5.2	0.5	45.9	55.5
<b>3.7 Other therapeutic procedures on eyelids, conjunctiva, cornea [19.]</b>	20,792	0.06	\$10,117	\$3,984	\$6,700	\$11,349	4.2	1.2	62.5	46.0
<b>3.8 Other intraocular therapeutic procedures [20.]</b>	15,725	0.05	\$6,911	\$3,692	\$5,061	\$7,848	2.3	0.3	49.2	59.7
<b>3.9 Other extraocular muscle and orbit therapeutic procedures [21.]</b>	7,094	0.02	\$11,781	\$4,526	\$7,868	\$12,641	3.7	0.6	58.5	46.2
4 Operations on the ear	23,899	0.07	\$10,066	\$3,770	\$5,993	\$10,637	3.9	0.4	53.6	34.3
<b>4.1 Tympanoplasty [22.]</b>	1,403	0.00	\$6,920	\$3,595	\$5,080	\$9,357	1.4	0.0	47.5	32.3
<b>4.2 Myringotomy [23.]</b>	5,690	0.02	\$10,579	\$3,293	\$5,561	\$10,062	4.4	1.1	54.8	15.5

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<b>4.3 Mastoidectomy [24.]</b>	3,997	0.01	\$11,341	\$4,730	\$6,524	\$11,319	2.9	0.2	53.3	38.6
<b>4.4 Diagnostic procedures on ear [25.]</b>	278	0.00	*	*	*	*	*	*	*	*
<b>4.5 Other therapeutic ear procedures [26.]</b>	12,531	0.04	\$9,780	\$3,691	\$6,036	\$10,764	4.2	0.2	53.6	41.2
5 Operations on the nose, mouth, and pharynx	145,124	0.42	\$9,733	\$3,429	\$5,725	\$9,960	3.9	0.7	55.3	41.7
<b>5.1 Control of epistaxis [27.]</b>	18,365	0.05	\$7,920	\$2,845	\$4,978	\$8,772	4.3	2.0	52.7	63.9
<b>5.2 Plastic procedures on nose [28.]</b>	10,978	0.03	\$7,925	\$3,596	\$5,699	\$8,945	2.5	0.3	59.7	44.0
<b>5.3 Dental procedures [29.]</b>	10,928	0.03	\$11,541	\$4,313	\$7,018	\$12,490	7.0	0.7	51.4	43.9
<b>5.4 Tonsillectomy and/or adenoidectomy [30.]</b>	21,707	0.06	\$5,020	\$2,277	\$3,196	\$5,154	1.7	0.1	52.8	13.7
5.4.1 Tonsillectomy without adenoidectomy	6,774	0.02	\$5,562	\$2,352	\$3,676	\$5,913	1.9	0.1	45.9	25.1
5.4.2 Tonsillectomy with adenoidectomy	11,427	0.03	\$4,794	\$2,330	\$3,007	\$4,675	1.7	0.0	55.8	6.6
5.4.3 Adenoidectomy without tonsillectomy	987	0.00	\$5,280	\$2,016	\$2,322	\$4,262	1.9	0.0	65.5	6.1
5.4.4 Control of hemorrhage after tonsillectomy or adenoidectomy	2,518	0.01	\$4,484	\$2,370	\$3,622	\$5,173	1.5	0.0	52.8	18.0
<b>5.5 Diagnostic procedures on nose, mouth and pharynx [31.]</b>	6,627	0.02	\$15,263	\$4,842	\$8,990	\$16,928	7.8	2.9	53.7	54.7
5.5.1 Diagnostic procedures on nasal sinuses	896	0.00	\$15,660	\$4,777	\$8,713	\$16,526	7.0	2.3	47.5	50.0
5.5.2 Other diagnostic procedures on nose, mouth and pharynx	5,730	0.02	\$15,201	\$4,842	\$9,140	\$17,141	7.9	3.0	54.6	55.4
<b>5.6 Other non-OR therapeutic procedures on nose, mouth and pharynx [32.]</b>	12,762	0.04	\$9,473	\$3,378	\$5,875	\$10,580	4.3	0.6	57.0	42.2
5.6.1 Non-OR procedures on nasal sinuses	1,733	0.00	\$19,430	\$5,489	\$8,797	\$17,968	7.2	0.6	51.6	44.0
5.6.2 Other non-OR procedures on nasal sinuses	11,030	0.03	\$7,908	\$3,149	\$5,533	\$9,703	3.8	0.6	57.8	41.9
<b>5.7 Other OR therapeutic procedures on nose, mouth and pharynx [33.]</b>	63,756	0.18	\$11,334	\$4,210	\$6,573	\$11,111	3.6	0.5	56.6	42.7

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Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
5.7.1 OR procedures on nasal sinuses	10,436	0.03	\$15,222	\$4,695	\$8,102	\$15,085	4.9	1.1	51.9	46.6
5.7.2 Excision salivary gland	12,235	0.04	\$7,910	\$4,348	\$6,428	\$9,540	2.0	0.2	48.9	56.5
5.7.3 Repair cleft lip	1,998	0.01	\$6,654	\$4,105	\$5,531	\$7,180	1.8	0.0	60.2	2.6
5.7.4 Correction cleft palate	2,768	0.01	\$7,594	\$4,320	\$5,775	\$7,683	2.0	0.0	49.8	3.6
5.7.5 Incision and drainage of tonsils	6,185	0.02	\$6,710	\$2,505	\$4,061	\$7,029	3.1	0.1	54.8	28.8
5.7.6 Other procedures on nose, mouth and pharynx	30,135	0.09	\$12,972	\$4,487	\$7,126	\$12,643	4.2	0.6	62.1	44.9
6 Operations on the respiratory system	595,608	1.71	\$35,655	\$8,341	\$15,919	\$30,862	12.2	8.5	55.4	58.8
<b>6.1 Tracheostomy, temporary and permanent [34.]</b>	69,003	0.20	\$147,197	\$55,455	\$111,301	\$193,419	36.7	25.1	56.9	60.3
<b>6.2 Tracheoscopy and laryngoscopy with biopsy [35.]</b>	27,963	0.08	\$8,426	\$985	\$3,125	\$8,813	4.7	1.7	47.9	24.9
<b>6.3 Lobectomy or pneumonectomy [36.]</b>	64,052	0.18	\$29,800	\$15,362	\$21,982	\$32,601	9.3	3.2	55.5	61.7
<b>6.4 Diagnostic bronchoscopy and biopsy of bronchus [37.]</b>	172,664	0.50	\$21,879	\$9,191	\$15,214	\$25,201	9.9	6.8	56.6	61.9
6.4.1 Bronchoscopy without biopsy	28,446	0.08	\$22,232	\$7,855	\$13,878	\$24,974	9.7	9.5	56.3	53.9
6.4.2 Endoscopic biopsy of bronchus	75,131	0.22	\$21,599	\$9,377	\$15,188	\$24,681	9.9	6.8	56.9	62.9
6.4.3 Needle biopsy of lung	15,867	0.05	\$14,670	\$6,820	\$11,289	\$18,197	7.9	3.4	56.3	68.0
6.4.4 Endoscopic biopsy of lung	53,220	0.15	\$24,225	\$10,750	\$17,276	\$28,101	10.5	6.5	56.6	62.8
<b>6.5 Other diagnostic procedures on lung and bronchus [38.]</b>	14,231	0.04	\$33,360	\$12,004	\$19,919	\$37,510	10.3	10.1	53.5	58.9
<b>6.6 Incision of pleura, thoracentesis, chest drainage [39.]</b>	172,856	0.50	\$15,657	\$5,932	\$10,608	\$18,921	8.2	8.2	53.1	61.5
6.6.1 Closed chest drainage	62,712	0.18	\$14,663	\$4,829	\$8,736	\$16,492	7.5	7.2	61.9	51.6
6.6.2 Open chest drainage	9,663	0.03	\$19,120	\$5,778	\$11,110	\$21,523	8.7	7.5	61.9	52.1

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	6.6.3 Thoracentesis	100,480	0.29	\$15,942	\$6,828	\$11,637	\$19,837	8.7	8.9	46.8	68.6
	<b>6.7 Other diagnostic procedures of respiratory tract and mediastinum [40.]</b>	17,673	0.05	\$20,227	\$7,784	\$14,046	\$24,550	8.4	4.2	56.2	60.2
	<b>6.8 Other non-OR therapeutic procedures on respiratory system [41.]</b>	16,410	0.05	\$18,680	\$6,607	\$11,902	\$21,851	8.7	6.6	51.6	55.2
	<b>6.9 Other OR therapeutic procedures on respiratory system [42.]</b>	40,756	0.12	\$32,178	\$10,450	\$19,649	\$35,666	10.9	3.6	64.0	51.3
7	Operations on the cardiovascular system	2,887,188	8.28	\$24,974	\$9,438	\$16,672	\$30,750	6.5	3.7	58.1	63.4
	<b>7.1 Heart valve procedures [43.]</b>	75,687	0.22	\$65,730	\$38,715	\$53,672	\$76,212	12.1	7.1	55.4	65.1
	<b>7.2 Coronary artery bypass graft (CABG) [44.]</b>	367,647	1.05	\$46,990	\$29,529	\$39,856	\$54,893	9.4	3.0	70.5	65.6
	7.2.1 Bypass of one coronary artery	37,260	0.11	\$42,192	\$27,459	\$36,763	\$49,567	8.9	2.7	64.8	63.1
	7.2.2 Bypass of two coronary arteries	95,009	0.27	\$45,039	\$28,964	\$38,814	\$52,188	9.3	2.9	68.3	65.4
	7.2.3 Bypass of three coronary arteries	108,640	0.31	\$47,941	\$30,282	\$40,435	\$55,096	9.7	3.2	70.5	66.5
	7.2.4 Bypass of four coronary arteries	74,940	0.21	\$52,032	\$32,168	\$43,812	\$60,639	10.0	3.7	75.2	66.9
	7.2.5 Other bypass of coronary arteries	51,798	0.15	\$44,724	\$27,410	\$37,820	\$54,724	8.6	2.2	72.1	64.1
	<b>7.3 Percutaneous transluminal coronary angioplasty (PTCA) [45.]</b>	479,449	1.37	\$21,617	\$12,674	\$18,455	\$27,103	3.8	1.0	66.8	63.4
	7.3.1 Single vessel PTCA	424,202	1.22	\$21,319	\$12,505	\$18,237	\$26,688	3.8	1.0	66.6	63.3
	7.3.2 Multiple vessel PTCA	55,247	0.16	\$24,009	\$14,164	\$20,389	\$30,468	3.8	0.8	68.5	64.6
	<b>7.4 Coronary thrombolysis [46.]</b>	268	0.00	*	*	*	*	*	*	*	*
	<b>7.5 Diagnostic cardiac catheterization, coronary arteriography [47.]</b>	651,303	1.87	\$12,540	\$6,800	\$10,034	\$14,968	4.1	1.1	56.5	62.9
	7.5.1 Coronary arteriography	18,902	0.05	\$7,354	\$2,757	\$4,289	\$8,921	3.3	0.9	58.8	63.6
	7.5.2 Cardiac catheterization	632,401	1.81	\$12,696	\$6,960	\$10,162	\$15,090	4.1	1.1	56.5	62.9

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<b>7.6 Insertion, revision, replacement, removal of cardiac pacemaker or cardioverter/defibrillator [48.]</b>	195,402	0.56	\$27,020	\$14,830	\$20,879	\$31,602	6.0	2.9	54.5	74.0
7.6.1 Insertion, revision, replacement, or removal of pacemaker leads	72,689	0.21	\$22,725	\$13,711	\$19,815	\$27,971	5.4	5.7	51.4	74.6
7.6.2 Insertion, revision, replacement, or removal of pacemaker device	98,023	0.28	\$23,038	\$14,575	\$19,452	\$26,907	5.8	1.3	50.9	75.8
7.6.3 Insertion, revision, replacement, or removal of cardioverter/defibrillator	24,689	0.07	\$59,890	\$41,703	\$54,618	\$71,546	8.9	0.7	78.3	65.2
<b>7.7 Other OR heart procedures [49.]</b>	62,244	0.18	\$42,226	\$15,232	\$29,138	\$50,789	8.1	13.1	55.3	51.2
<b>7.8 Extracorporeal circulation auxiliary to open heart procedures [50.]</b>	785	0.00	\$99,234	\$22,520	\$61,205	\$123,237	15.0	23.2	58.9	27.3
<b>7.9 Endarterectomy, vessel of head and neck [51.]</b>	151,273	0.43	\$13,706	\$7,679	\$11,080	\$16,177	3.6	0.6	56.6	71.1
<b>7.10 Aortic resection, replacement or anastomosis [52.]</b>	43,740	0.13	\$40,631	\$20,652	\$29,054	\$43,837	10.1	10.9	78.6	70.5
<b>7.11 Varicose vein stripping, lower limb [53.]</b>	3,768	0.01	\$7,196	\$3,540	\$5,504	\$8,584	2.6	0.2	33.6	52.3
<b>7.12 Other vascular catheterization, not heart [54.]</b>	211,430	0.61	\$23,883	\$7,861	\$14,409	\$26,267	10.7	12.8	43.5	49.8
7.12.1 Arterial catheterization	34,841	0.10	\$32,273	\$7,917	\$15,938	\$32,684	12.5	10.8	54.3	23.1
7.12.2 Umbilical vein catheterization	7,422	0.02	\$29,814	\$4,150	\$12,048	\$30,369	12.3	3.3	53.3	0.3
7.12.3 Venous catheterization	169,167	0.49	\$21,909	\$7,988	\$14,213	\$25,160	10.3	13.7	40.8	57.5
<b>7.13 Peripheral vascular bypass [55.]</b>	106,286	0.30	\$26,439	\$13,075	\$19,759	\$31,250	8.7	2.9	57.4	68.2
<b>7.14 Other vascular bypass and shunt, not heart [56.]</b>	10,675	0.03	\$46,216	\$16,306	\$27,689	\$51,704	10.4	10.3	52.3	49.6
<b>7.15 Creation, revision and removal of arteriovenous fistula or vessel-to-vessel cannula for dialysis [57.]</b>	64,457	0.18	\$21,566	\$9,132	\$15,305	\$25,878	8.2	2.7	49.0	61.3

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NS	<b>7.16 Hemodialysis [58.]</b>	152,801	0.44	\$11,473	\$4,686	\$7,794	\$13,251	5.6	4.6	48.5	60.6
	<b>7.17 Other OR procedures on vessels of head and neck [59.]</b>	5,558	0.02	\$30,196	\$10,609	\$17,435	\$33,456	7.2	3.3	50.4	51.4
	<b>7.18 Embolectomy and endarterectomy of lower limbs [60.]</b>	19,102	0.05	\$24,210	\$10,934	\$17,533	\$28,609	8.1	8.6	51.8	70.5
	<b>7.19 Other OR procedures on vessels other than head and neck [61.]</b>	193,181	0.55	\$28,388	\$9,764	\$17,254	\$31,917	8.1	5.1	50.7	62.1
	7.19.1 Interrupt vena cava	30,174	0.09	\$29,008	\$12,178	\$19,392	\$33,177	11.8	8.7	45.6	67.7
	7.19.2 Other OR procedures on blood vessels	116,557	0.33	\$31,743	\$9,597	\$18,143	\$35,290	8.5	5.5	52.0	59.2
	<b>7.20 Other diagnostic cardiovascular procedures [62.]</b>	40,537	0.12	\$14,612	\$7,346	\$11,199	\$17,466	5.4	0.9	55.3	61.5
	<b>7.21 Other non-OR therapeutic cardiovascular procedures [63.]</b>	51,597	0.15	\$22,565	\$8,871	\$16,020	\$26,950	7.9	9.8	54.7	60.3
	8 Operations on the hemic and lymphatic system	140,103	0.40	\$28,175	\$7,825	\$13,506	\$25,620	9.4	5.0	51.4	56.1
	<b>8.1 Bone marrow transplant [64.]</b>	8,556	0.02	\$136,524	\$64,419	\$98,036	\$157,701	27.8	8.8	39.8	41.3
	<b>8.2 Bone marrow biopsy [65.]</b>	62,603	0.18	\$20,705	\$7,336	\$12,359	\$22,076	9.6	5.9	50.5	61.1
	<b>8.3 Procedures on spleen [66.]</b>	19,583	0.06	\$32,156	\$11,659	\$18,480	\$32,796	8.9	6.0	55.4	44.4
	<b>8.4 Other therapeutic procedures, hemic and lymphatic system [67.]</b>	49,361	0.14	\$17,091	\$6,702	\$11,132	\$19,037	6.3	2.7	52.8	56.9
	8.4.1 Biopsy of lymphatic structure	16,572	0.05	\$20,386	\$8,321	\$14,172	\$24,172	8.6	5.2	53.0	57.3
	8.4.2 Simple excision of lymphatic structure	10,635	0.03	\$14,861	\$5,530	\$9,313	\$16,419	5.8	3.0	47.5	56.0
8.4.3 Regional lymph node excision	7,001	0.02	\$11,497	\$5,279	\$8,093	\$12,903	3.9	0.7	46.8	58.2	
8.4.4 Radical excision lymph nodes	12,818	0.04	\$18,488	\$7,936	\$12,052	\$19,138	5.0	0.7	60.8	59.8	
8.4.5 Other hemic and lymphatic procedures	2,335	0.01	\$13,150	\$5,072	\$8,271	\$12,462	5.5	1.1	50.2	38.7	
9 Operations on the digestive system	2,897,334	8.31	\$16,447	\$6,074	\$10,219	\$17,932	7.0	3.0	44.5	58.2	

**Source:** AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
9.1 Therapeutic procedures on the esophagus	11,968	0.03	\$11,111	\$4,612	\$7,600	\$12,620	6.6	1.9	46.4	69.0
<b>9.1.1 Injection or ligation of esophageal varices [68.]</b>	101	0.00	*	*	*	*	*	*	*	*
<b>9.1.2 Esophageal dilatation [69.]</b>	11,867	0.03	\$10,969	\$4,599	\$7,584	\$12,502	6.6	1.9	46.3	69.2
<b>9.2 Upper gastrointestinal endoscopy, biopsy [70.]</b>	627,552	1.80	\$11,408	\$5,130	\$8,044	\$13,126	6.1	2.4	46.1	64.2
9.2.1 Esophagoscopy	10,409	0.03	\$12,337	\$4,771	\$8,098	\$14,098	6.2	3.8	54.6	55.3
9.2.2 Gastroscopy	6,910	0.02	\$13,296	\$4,905	\$7,807	\$13,255	7.2	5.1	45.9	64.0
9.2.3 Esophagogastroduodenoscopy (EGD) without biopsy	238,029	0.68	\$11,808	\$5,112	\$8,135	\$13,619	6.2	3.3	47.3	64.4
9.2.4 Esophagogastroduodenoscopy (EGD) with biopsy	370,027	1.06	\$11,072	\$5,152	\$7,990	\$12,797	6.0	1.7	45.1	64.3
9.2.5 Endoscopic biopsy small intestine	2,177	0.01	\$14,431	\$5,025	\$7,834	\$13,130	6.9	1.9	46.9	58.1
<b>9.3 Gastrostomy, temporary and permanent [71.]</b>	94,510	0.27	\$22,798	\$9,415	\$16,163	\$27,103	13.7	8.4	43.0	74.7
<b>9.4 Colostomy, temporary and permanent [72.]</b>	10,867	0.03	\$32,905	\$13,639	\$22,062	\$37,433	13.2	6.9	48.3	62.7
<b>9.5 Ileostomy and other enterostomy [73.]</b>	6,657	0.02	\$35,256	\$11,576	\$21,083	\$36,944	16.1	10.1	50.2	62.4
<b>9.6 Gastrectomy, partial and total [74.]</b>	21,552	0.06	\$45,411	\$19,658	\$30,861	\$51,774	15.3	8.5	55.7	65.3
<b>9.7 Small bowel resection [75.]</b>	45,319	0.13	\$42,051	\$15,721	\$25,722	\$44,260	14.6	9.1	42.7	59.7
<b>9.8 Colonoscopy and biopsy [76.]</b>	242,734	0.70	\$10,922	\$4,847	\$7,733	\$12,547	6.4	1.5	38.7	66.4
9.8.1 Closed endoscopic biopsy of large intestine	100,620	0.29	\$11,623	\$5,086	\$8,047	\$13,112	6.6	1.5	36.6	62.4
9.8.2 Other endoscopy of large intestine	142,114	0.41	\$10,426	\$4,688	\$7,510	\$12,184	6.2	1.5	40.2	69.3
<b>9.9 Proctoscopy and anorectal biopsy [77.]</b>	15,280	0.04	\$12,783	\$4,642	\$7,789	\$13,791	7.0	2.1	45.2	60.1
<b>9.10 Colorectal resection [78.]</b>	253,439	0.73	\$27,811	\$13,350	\$19,725	\$30,842	10.8	4.5	46.6	66.0

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**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
9.10.1 Right hemicolectomy	76,093	0.22	\$26,751	\$12,844	\$18,932	\$29,724	10.7	4.6	44.4	69.0
9.10.2 Left hemicolectomy	29,816	0.09	\$30,738	\$14,902	\$22,141	\$34,457	11.5	5.6	47.7	67.1
9.10.3 Sigmoidectomy	71,629	0.21	\$26,540	\$12,939	\$18,952	\$29,722	10.5	4.0	46.8	65.3
9.10.4 Resection of rectum	33,695	0.10	\$24,462	\$13,465	\$19,149	\$27,661	9.8	2.0	50.0	65.7
9.10.5 Other colorectal resections	42,206	0.12	\$32,466	\$13,949	\$21,471	\$35,635	11.8	6.4	46.7	61.0
<b>9.11 Local excision of large intestine lesion (not endoscopic) [79.]</b>	1,563	0.00	\$14,689	\$7,532	\$11,367	\$16,822	6.4	1.5	51.7	60.7
<b>9.12 Appendectomy [80.]</b>	229,728	0.66	\$9,632	\$4,996	\$7,370	\$11,003	3.6	0.2	56.3	29.9
<b>9.13 Hemorrhoid procedures [81.]</b>	15,509	0.04	\$6,480	\$3,211	\$4,652	\$7,121	3.0	0.4	56.0	52.8
<b>9.14 Endoscopic retrograde cannulation of pancreas (ERCP) [82.]</b>	37,826	0.11	\$13,924	\$6,381	\$10,307	\$16,387	6.7	2.2	39.1	60.6
<b>9.15 Biopsy of liver [83.]</b>	27,259	0.08	\$18,344	\$6,838	\$11,989	\$21,056	8.6	8.0	53.2	58.3
<b>9.16 Cholecystectomy and common duct exploration [84.]</b>	408,355	1.17	\$14,309	\$7,101	\$10,718	\$16,557	4.7	0.9	30.7	54.4
9.16.1 Open cholecystectomy	100,128	0.29	\$20,123	\$9,613	\$14,544	\$23,115	7.6	2.1	41.1	60.2
9.16.2 Laparoscopic cholecystectomy	303,881	0.87	\$12,234	\$6,553	\$9,720	\$14,582	3.6	0.4	27.1	52.4
9.16.3 Incision of bile duct	4,346	0.01	\$26,259	\$12,055	\$19,248	\$30,008	10.1	5.2	39.3	65.6
<b>9.17 Inguinal and femoral hernia repair [85.]</b>	51,849	0.15	\$13,062	\$4,151	\$6,339	\$10,244	5.3	0.9	80.0	59.5
9.17.1 Unilateral repair inguinal hernia	37,599	0.11	\$10,012	\$4,087	\$6,183	\$9,640	4.0	0.9	85.4	61.5
9.17.2 Bilateral repair inguinal hernia	9,051	0.03	\$25,888	\$4,036	\$6,231	\$11,237	10.6	0.2	87.9	44.5
9.17.3 Femoral hernia repair	5,199	0.01	\$12,945	\$4,838	\$8,048	\$13,754	5.4	2.0	27.0	71.3
<b>9.18 Other hernia repair [86.]</b>	87,133	0.25	\$12,265	\$5,262	\$8,133	\$12,806	4.7	1.1	37.5	58.6
9.18.1 Umbilical hernia repair	13,567	0.04	\$11,507	\$4,383	\$6,906	\$11,454	4.4	1.8	43.3	54.4

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Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

	Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age	
	9.18.2 Incisional hernia repair	47,855	0.14	\$10,321	\$5,198	\$7,791	\$11,837	4.1	0.5	36.2	59.8	
	9.18.3 Other abdominal wall hernia repair	18,118	0.05	\$11,271	\$5,201	\$7,975	\$12,358	4.4	0.9	34.9	58.8	
	9.18.4 Other hernia repair	7,592	0.02	\$28,330	\$9,942	\$15,672	\$28,428	9.6	3.3	41.5	57.9	
95	<b>9.19 Laparoscopy [87.]</b>	19,075	0.05	\$11,169	\$5,737	\$8,494	\$12,620	3.7	0.8	14.0	36.6	
	<b>9.20 Abdominal paracentesis [88.]</b>	60,664	0.17	\$14,828	\$5,826	\$10,071	\$17,419	7.8	10.9	52.1	58.5	
	<b>9.21 Exploratory laparotomy [89.]</b>	25,262	0.07	\$25,635	\$8,512	\$14,262	\$26,271	8.5	15.8	45.6	50.9	
	<b>9.22 Excision, lysis peritoneal adhesions [90.]</b>	67,116	0.19	\$22,343	\$9,328	\$14,812	\$25,287	9.2	3.2	30.1	55.8	
	<b>9.23 Peritoneal dialysis [91.]</b>	20,971	0.06	\$10,867	\$4,537	\$7,516	\$12,912	5.7	3.4	48.9	52.6	
	<b>9.24 Other bowel diagnostic procedures [92.]</b>	6,716	0.02	\$15,536	\$5,488	\$10,026	\$17,957	6.6	5.3	50.0	50.1	
	<b>9.25 Other non-OR upper GI therapeutic procedures [93.]</b>	96,497	0.28	\$11,963	\$4,217	\$7,653	\$13,575	5.5	4.2	51.8	54.6	
	<b>9.26 Other OR upper GI therapeutic procedures [94.]</b>	83,253	0.24	\$28,633	\$9,431	\$15,587	\$29,060	9.5	5.5	50.8	47.6	
	<b>9.27 Other non-OR lower GI therapeutic procedures [95.]</b>	65,164	0.19	\$10,546	\$4,832	\$7,720	\$12,624	6.0	1.4	47.6	70.8	
	<b>9.28 Other OR lower GI therapeutic procedures [96.]</b>	101,359	0.29	\$20,249	\$6,788	\$12,289	\$21,749	8.2	2.7	52.6	53.4	
		9.28.1 Closure of stoma of large intestine	18,690	0.05	\$16,622	\$9,395	\$13,241	\$18,859	7.5	0.5	55.4	56.3
		9.28.2 Local excision of rectal lesion	3,461	0.01	\$9,333	\$4,310	\$6,327	\$10,740	4.1	0.4	46.3	70.7
		9.28.3 Incision of perirectal tissue	10,435	0.03	\$8,756	\$3,841	\$5,800	\$9,590	4.0	0.8	63.2	45.2
		9.28.4 Incision of perianal abscess	5,850	0.02	\$8,715	\$3,617	\$5,686	\$9,007	4.0	0.6	65.3	45.9
	9.28.5 Incision/excision of anal fistula	2,385	0.01	\$7,709	\$3,249	\$4,843	\$8,335	3.6	0.0	71.8	46.7	
	9.28.6 Other lower GI procedures	60,537	0.17	\$25,608	\$8,645	\$15,388	\$27,977	10.0	4.2	48.3	54.0	

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**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

	Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
95	<b>9.29 Other gastrointestinal diagnostic procedures [97.]</b>	14,669	0.04	\$19,701	\$7,832	\$12,937	\$22,761	8.9	6.3	42.4	64.5
	<b>9.30 Other non-OR gastrointestinal therapeutic procedures [98.]</b>	52,681	0.15	\$14,005	\$5,813	\$9,746	\$16,075	6.2	2.3	39.8	62.7
	<b>9.31 Other OR gastrointestinal therapeutic procedures [99.]</b>	94,808	0.27	\$31,798	\$9,759	\$17,989	\$34,584	11.1	5.7	46.7	53.3
	9.31.1 Radical pancreaticoduodenectomy	4,925	0.01	\$58,826	\$27,638	\$42,280	\$67,874	19.0	7.9	51.1	63.4
	9.31.2 Incision abdominal wall	10,898	0.03	\$16,245	\$5,418	\$9,425	\$16,717	7.2	2.1	45.8	51.6
	9.31.3 Excision or destruction of peritoneal tissue	9,658	0.03	\$22,264	\$8,893	\$14,830	\$26,051	8.2	3.3	30.2	53.9
	9.31.4 Creation of cutaneoperitoneal fistula	9,292	0.03	\$27,672	\$7,982	\$14,852	\$28,570	11.0	8.3	51.3	55.1
	9.31.5 Other gastrointestinal therapeutic procedures	60,035	0.17	\$34,560	\$11,153	\$19,681	\$36,714	11.7	6.2	48.4	52.4
	10 Operations on the urinary system	452,535	1.30	\$14,050	\$5,199	\$8,474	\$14,876	5.4	1.5	51.9	57.3
	10.1 Cystoscopy and other transurethral procedures	191,400	0.55	\$10,156	\$4,711	\$7,238	\$11,601	4.8	1.1	61.5	61.2
	<b>10.1.1 Endoscopy and endoscopic biopsy of the urinary tract [100.]</b>	65,718	0.19	\$11,703	\$5,205	\$8,331	\$13,916	7.0	1.5	57.0	63.9
	<b>10.1.2 Transurethral excision, drainage, or removal of urinary obstruction [101.]</b>	93,616	0.27	\$8,980	\$4,351	\$6,556	\$10,084	3.6	0.7	69.0	62.2
	<b>10.1.3 Ureteral catheterization [102.]</b>	32,066	0.09	\$10,391	\$5,026	\$7,600	\$11,969	4.2	1.2	48.8	52.7
	<b>10.2 Nephrotomy and nephrostomy [103.]</b>	24,521	0.07	\$19,347	\$8,518	\$13,633	\$22,940	7.3	3.0	50.9	56.8
	<b>10.3 Nephrectomy, partial or complete [104.]</b>	39,927	0.11	\$21,574	\$10,421	\$14,826	\$23,007	7.4	1.9	53.3	56.9
<b>10.4 Kidney transplant [105.]</b>	13,025	0.04	\$66,239	\$41,325	\$57,545	\$75,523	10.6	1.1	58.2	44.0	
<b>10.5 Genitourinary incontinence procedures [106.]</b>	49,128	0.14	\$7,352	\$4,853	\$6,561	\$8,916	2.5	0.0	0.7	57.3	

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**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
<b>10.6 Extracorporeal lithotripsy, urinary [107.]</b>	5,596	0.02	\$10,578	\$6,679	\$9,444	\$12,821	3.2	0.1	62.1	51.7
<b>10.7 Indwelling catheter [108.]</b>	14,412	0.04	\$8,969	\$3,701	\$6,181	\$11,007	6.0	8.5	52.3	70.1
<b>10.8 Procedures on the urethra [109.]</b>	20,917	0.06	\$10,680	\$4,877	\$7,908	\$13,000	5.0	1.6	76.5	58.0
<b>10.9 Other diagnostic procedures of urinary tract [110.]</b>	18,613	0.05	\$13,625	\$3,754	\$8,428	\$16,796	6.4	1.0	53.8	47.3
<b>10.10 Other non-OR therapeutic procedures of urinary tract [111.]</b>	21,619	0.06	\$8,156	\$2,675	\$4,669	\$9,344	4.3	1.8	38.3	45.4
<b>10.11 Other OR therapeutic procedures of urinary tract [112.]</b>	53,377	0.15	\$19,037	\$7,060	\$11,605	\$21,627	7.0	1.7	56.3	51.9
11 Operations on the male genital organs	1,336,229	3.83	\$3,407	\$739	\$1,125	\$2,926	2.6	0.1	100.0	13.5
<b>11.1 Transurethral resection of prostate (TURP) [113.]</b>	155,861	0.45	\$8,246	\$4,384	\$6,240	\$9,249	3.8	0.3	100.0	73.1
<b>11.2 Open prostatectomy [114.]</b>	70,994	0.20	\$13,496	\$8,533	\$11,989	\$16,003	4.5	0.2	100.0	63.8
<b>11.3 Circumcision [115.]</b>	1,072,116	3.07	\$1,764	\$678	\$940	\$1,418	2.3	0.0	100.0	0.1
<b>11.4 Diagnostic procedures, male genital [116.]</b>	4,039	0.01	\$14,131	\$6,471	\$10,875	\$17,807	8.5	1.9	100.0	70.5
<b>11.5 Other non-OR therapeutic procedures, male genital [117.]</b>	4,567	0.01	\$10,518	\$3,784	\$6,414	\$11,791	5.5	1.2	100.0	47.4
<b>11.6 Other OR therapeutic procedures, male genital [118.]</b>	28,651	0.08	\$10,522	\$4,412	\$7,807	\$12,835	3.6	0.6	100.0	52.2
11.6.1 Unilateral orchiectomy	4,057	0.01	\$10,766	\$4,199	\$6,463	\$11,970	4.2	1.0	100.0	42.4
11.6.2 Bilateral orchiectomy	3,392	0.01	\$13,472	\$5,481	\$9,119	\$16,411	6.8	1.7	100.0	76.4
11.6.3 Orchiopexy	2,573	0.01	\$6,596	\$2,864	\$4,149	\$5,643	2.2	0.0	100.0	15.5
11.6.4 Insert or replace penile prosthesis	7,556	0.02	\$12,102	\$8,842	\$11,670	\$15,176	1.8	0.0	100.0	60.3
11.6.5 Other male genital procedures	11,072	0.03	\$9,385	\$3,928	\$6,384	\$10,386	3.9	0.6	100.0	51.4

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**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

	Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
59	12 Operations on the female genital organs	964,302	2.77	\$8,771	\$5,160	\$7,283	\$10,183	3.1	0.1	0.0	44.3
	12.1 Oophorectomy, unilateral and bilateral [119.]	70,079	0.20	\$10,526	\$5,740	\$8,137	\$11,769	3.8	0.2	0.0	44.5
	12.2 Other operations on ovary [120.]	32,847	0.09	\$8,603	\$5,220	\$7,284	\$10,028	2.9	0.1	0.0	31.2
	12.3 Ligation of fallopian tubes [121.]	71,517	0.21	\$6,025	\$4,221	\$5,601	\$7,177	1.9	0.0	0.0	29.6
	12.4 Other operations on fallopian tubes [123.]	11,632	0.03	\$7,903	\$5,020	\$6,865	\$9,569	2.6	0.0	0.0	32.9
	12.5 Hysterectomy, abdominal and vaginal [124.]	564,328	1.62	\$9,273	\$5,799	\$7,909	\$10,776	3.2	0.1	0.0	47.0
	12.5.1 Total abdominal hysterectomy	354,001	1.02	\$9,656	\$6,096	\$8,157	\$11,044	3.6	0.1	0.0	46.7
	12.5.2 Vaginal hysterectomy	192,185	0.55	\$8,118	\$5,252	\$7,273	\$9,906	2.4	0.0	0.0	47.6
	12.5.3 Other hysterectomy	18,142	0.05	\$14,120	\$7,319	\$10,960	\$16,881	4.8	0.3	0.0	47.1
	12.6 Other excision of cervix and uterus [125.]	32,386	0.09	\$8,393	\$5,409	\$7,600	\$10,152	2.9	0.0	0.0	37.6
	12.7 Abortion (termination of pregnancy) [126.]	3,679	0.01	\$7,450	\$2,570	\$4,477	\$7,608	2.9	0.5	0.0	27.7
	12.8 Dilatation and curettage (D&C), aspiration after delivery or abortion [127.]	44,709	0.13	\$5,341	\$2,768	\$4,017	\$6,068	1.6	0.1	0.0	28.2
	12.9 Diagnostic dilatation and curettage (D&C) [128.]	14,750	0.04	\$8,434	\$3,976	\$6,130	\$9,402	3.7	0.2	0.0	48.4
	12.10 Repair of cystocele and rectocele, obliteration of vaginal vault [129.]	45,825	0.13	\$6,740	\$4,337	\$5,972	\$8,164	2.5	0.0	0.0	62.5
12.11 Other diagnostic procedures, female organs [130.]	8,871	0.03	\$11,941	\$4,940	\$7,999	\$13,855	6.2	1.9	0.0	53.6	
12.12 Other non-OR therapeutic procedures, female organs [131.]	7,022	0.02	\$5,862	\$2,137	\$3,987	\$6,979	2.8	0.3	0.0	34.9	
12.13 Other OR therapeutic procedures, female organs [132.]	56,656	0.16	\$9,976	\$4,358	\$6,822	\$10,449	3.7	0.2	0.0	47.6	

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

	Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
69	13 Obstetrical procedures	3,718,075	10.66	\$4,561	\$2,639	\$3,684	\$5,408	2.2	0.0	0.0	27.1
	<b>13.1 Episiotomy [133.]</b>	708,684	2.03	\$3,668	\$2,501	\$3,265	\$4,345	1.8	0.0	0.0	26.8
	<b>13.2 Cesarean section [134.]</b>	791,779	2.27	\$7,590	\$4,995	\$6,595	\$8,619	3.7	0.0	0.0	28.5
	<b>13.3 Forceps, vacuum, and breech delivery [135.]</b>	375,942	1.08	\$4,115	\$2,771	\$3,660	\$4,910	1.9	0.0	0.0	27.0
	13.3.1 Low forceps delivery with episiotomy	84,388	0.24	\$4,253	\$2,897	\$3,785	\$5,078	2.1	0.0	0.0	27.0
	13.3.2 Vacuum extraction with episiotomy	189,157	0.54	\$4,017	\$2,745	\$3,622	\$4,823	1.9	0.0	0.0	26.8
	13.3.3 Other vacuum extraction	75,406	0.22	\$4,003	\$2,657	\$3,539	\$4,761	1.8	0.0	0.0	27.2
	13.3.4 Other forceps or breech delivery	26,990	0.08	\$4,689	\$2,872	\$3,918	\$5,348	2.2	0.0	0.0	27.0
	<b>13.4 Artificial rupture of membranes to assist delivery [136.]</b>	69,516	0.20	\$3,383	\$2,231	\$3,004	\$4,053	1.6	0.0	0.0	25.7
	<b>13.5 Other procedures to assist delivery [137.]</b>	1,097,378	3.15	\$3,692	\$2,368	\$3,186	\$4,318	1.8	0.0	0.0	26.6
	13.5.1 Induction of labor by artificial rupture of membranes	12,177	0.03	\$3,187	\$2,156	\$2,863	\$3,776	1.8	0.0	0.0	27.1
	13.5.2 Medical induction of labor	72,563	0.21	\$3,892	\$2,356	\$3,336	\$4,667	1.9	0.0	0.0	27.0
	13.5.3 Other manually assisted labor	1,006,992	2.89	\$3,685	\$2,374	\$3,182	\$4,301	1.8	0.0	0.0	26.6
	13.5.4 Other delivery procedures	5,645	0.02	\$3,574	\$1,909	\$2,873	\$4,482	1.9	0.0	0.0	27.2
	<b>13.6 Diagnostic amniocentesis [138.]</b>	8,169	0.02	\$8,022	\$3,194	\$5,322	\$9,182	5.2	0.0	0.0	25.8
	<b>13.7 Fetal monitoring [139.]</b>	59,905	0.17	\$3,512	\$1,843	\$2,691	\$3,931	2.3	0.0	0.0	26.4
	<b>13.8 Repair of current obstetric laceration [140.]</b>	573,118	1.64	\$3,476	\$2,365	\$3,120	\$4,085	1.7	0.0	0.0	26.9
	13.8.1 Repair of obstetric laceration of uterus or cervix	4,232	0.01	\$4,786	\$2,842	\$3,792	\$5,192	2.3	0.0	0.0	26.4
	13.8.2 Repair of obstetric laceration of bladder or urethra	21,179	0.06	\$3,884	\$2,559	\$3,362	\$4,534	1.7	0.0	0.0	25.5

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

	Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
	13.8.3 Repair of obstetric laceration of rectum or sphincter	46,338	0.13	\$3,807	\$2,623	\$3,454	\$4,501	1.9	0.0	0.0	26.7
	13.8.4 Repair of other obstetric laceration	501,368	1.44	\$3,417	\$2,330	\$3,075	\$4,015	1.7	0.0	0.0	27.0
	<b>13.9 Other therapeutic obstetrical procedures [141.]</b>	9,248	0.03	\$4,119	\$2,194	\$3,174	\$4,747	1.9	0.0	0.0	27.2
	<b>13.10 Removal of ectopic pregnancy [122.]</b>	24,337	0.07	\$7,827	\$5,153	\$7,112	\$9,606	2.4	0.1	0.0	29.7
14	Operations on the musculoskeletal system	1,864,658	5.35	\$16,838	\$7,819	\$13,403	\$20,529	5.5	1.1	44.7	59.1
	<b>14.1 Partial excision bone [142.]</b>	37,481	0.11	\$16,089	\$5,801	\$9,405	\$16,760	5.7	0.6	54.6	48.8
	<b>14.2 Bunionectomy or repair of toe deformities [143.]</b>	4,319	0.01	\$6,978	\$4,163	\$5,772	\$8,291	2.7	0.0	19.6	56.9
	14.3 Treatment of fracture or dislocation	634,520	1.82	\$14,136	\$6,613	\$10,488	\$16,095	5.2	1.1	42.7	56.2
09	<b>14.3.1 Treatment, facial fracture or dislocation [144.]</b>	28,094	0.08	\$14,496	\$6,269	\$10,109	\$16,077	3.8	0.2	76.4	33.3
	<b>14.3.2 Treatment, fracture or dislocation of radius and ulna [145.]</b>	55,979	0.16	\$9,541	\$4,441	\$6,921	\$10,768	3.0	0.2	49.3	44.4
	<b>14.3.3 Treatment, fracture or dislocation of hip and femur [146.]</b>	286,194	0.82	\$16,850	\$9,379	\$13,172	\$18,802	6.9	2.1	31.6	70.9
	<b>14.3.4 Treatment, fracture or dislocation of lower extremity (other than hip or femur) [147.]</b>	183,730	0.53	\$11,877	\$5,612	\$8,457	\$12,979	4.0	0.2	48.8	45.6
	<b>14.3.5 Other fracture and dislocation procedure [148.]</b>	80,523	0.23	\$12,710	\$4,943	\$7,938	\$13,539	4.1	0.6	52.2	44.0
	<b>14.4 Arthroscopy [149.]</b>	4,661	0.01	\$10,294	\$5,532	\$7,916	\$11,529	3.4	0.2	61.2	42.2
	14.4.1 Arthroscopy of knee	2,739	0.01	\$10,869	\$5,449	\$7,897	\$12,729	4.2	0.4	62.6	40.7
	14.4.2 Other arthroscopy	1,922	0.01	\$9,471	\$5,613	\$7,944	\$10,874	2.2	0.0	59.2	44.2
	<b>14.5 Division of joint capsule, ligament or cartilage [150.]</b>	4,796	0.01	\$8,545	\$4,736	\$6,681	\$10,087	2.7	0.0	43.9	38.8

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
<b>14.6 Excision of semilunar cartilage of knee [151.]</b>	8,941	0.03	\$9,730	\$5,444	\$8,279	\$11,822	2.4	0.0	61.2	43.1
14.7 Arthroplasty	668,991	1.92	\$19,382	\$13,202	\$17,748	\$23,529	5.1	0.7	38.7	67.5
<b>14.7.1 Arthroplasty knee [152.]</b>	315,940	0.91	\$19,481	\$13,859	\$18,077	\$23,591	4.6	0.2	40.8	65.0
<b>14.7.2 Hip replacement, total and partial [153.]</b>	291,457	0.84	\$21,350	\$14,547	\$18,951	\$24,736	6.2	1.4	34.2	72.5
<b>14.7.3 Arthroplasty other than hip or knee [154.]</b>	61,594	0.18	\$9,544	\$4,892	\$7,520	\$12,306	2.3	0.1	49.4	56.2
<b>14.8 Arthrocentesis [155.]</b>	29,466	0.08	\$9,742	\$3,750	\$6,409	\$11,410	6.5	1.0	53.0	59.7
<b>14.9 Injections and aspirations of muscles, tendons, bursa, joints and soft tissue [156.]</b>	5,121	0.01	\$11,125	\$3,943	\$7,030	\$12,843	7.5	1.6	50.0	59.5
<b>14.10 Amputation of lower extremity [157.]</b>	109,972	0.32	\$23,339	\$8,702	\$14,613	\$26,767	11.8	4.7	56.9	68.0
14.10.1 Amputation of toe	31,103	0.09	\$16,283	\$6,808	\$11,241	\$19,513	9.3	1.2	62.2	63.7
14.10.2 Amputation through foot	13,997	0.04	\$24,137	\$9,347	\$16,486	\$29,856	13.2	2.2	64.6	64.3
14.10.3 Below knee amputation	32,781	0.09	\$26,309	\$10,208	\$16,749	\$30,656	12.7	4.9	58.5	68.0
14.10.4 Above knee amputation	30,088	0.09	\$25,913	\$9,353	\$15,339	\$28,989	12.6	9.2	45.7	74.7
14.10.5 Other lower extremity amputation	2,003	0.01	\$39,955	\$11,336	\$20,990	\$42,157	14.8	8.4	62.5	58.1
<b>14.11 Spinal fusion [158.]</b>	99,149	0.28	\$24,147	\$10,905	\$17,286	\$28,874	5.0	0.4	49.1	47.7
<b>14.12 Other diagnostic procedures on musculoskeletal system [159.]</b>	22,834	0.07	\$20,106	\$7,758	\$13,379	\$23,000	9.3	3.5	48.9	57.4
<b>14.13 Other therapeutic procedures on muscles and tendons [160.]</b>	95,143	0.27	\$9,978	\$4,506	\$6,668	\$10,335	3.4	0.5	61.6	47.1
14.13.1 Rotator cuff repair	26,651	0.08	\$6,558	\$4,162	\$5,834	\$8,081	1.8	0.0	56.7	61.1
14.13.2 Other suture of muscle, tendon and fascia	12,000	0.03	\$7,831	\$4,051	\$6,112	\$8,960	2.4	0.2	73.5	40.4

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).



**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
14.13.3 Other muscle and tendon procedures	56,493	0.16	\$12,044	\$4,843	\$7,391	\$12,274	4.4	0.8	61.4	41.9
<b>14.14 Other OR therapeutic procedures on bone [161.]</b>	34,881	0.10	\$14,204	\$6,395	\$9,663	\$15,304	4.3	0.5	53.5	38.1
<b>14.15 Other OR therapeutic procedures on joints [162.]</b>	59,269	0.17	\$14,169	\$6,211	\$9,617	\$15,903	5.4	0.8	55.3	50.9
<b>14.16 Other non-OR therapeutic procedures on musculoskeletal system [163.]</b>	10,085	0.03	\$10,283	\$4,242	\$7,021	\$11,611	7.9	0.6	33.2	69.8
<b>14.17 Other OR therapeutic procedures on musculoskeletal system [164.]</b>	35,030	0.10	\$14,350	\$6,559	\$10,715	\$16,704	4.4	1.0	48.4	40.7
15 Operations on the integumentary system	721,061	2.07	\$15,703	\$5,255	\$8,946	\$16,581	7.5	2.1	41.5	54.0
15.1 Procedures on the breast	123,302	0.35	\$8,527	\$4,856	\$6,903	\$9,917	2.8	0.3	0.9	61.8
<b>15.1.1 Breast biopsy and other diagnostic procedures on breast [165.]</b>	4,717	0.01	\$13,090	\$5,562	\$8,881	\$16,377	7.5	3.2	1.7	62.6
<b>15.1.2 Lumpectomy, quadrantectomy of breast [166.]</b>	28,319	0.08	\$7,517	\$4,234	\$6,125	\$8,736	2.4	0.4	0.6	60.3
<b>15.1.3 Mastectomy [167.]</b>	90,266	0.26	\$8,605	\$5,027	\$7,090	\$10,144	2.7	0.1	0.9	62.3
<b>15.2 Incision and drainage, skin and subcutaneous tissue [168.]</b>	63,493	0.18	\$9,875	\$3,973	\$6,673	\$11,501	5.9	0.6	55.8	47.1
<b>15.3 Debridement of wound, infection or burn [169.]</b>	219,226	0.63	\$21,061	\$6,830	\$12,194	\$23,306	10.7	3.2	55.2	56.0
<b>15.4 Excision of skin lesion [170.]</b>	24,137	0.07	\$13,124	\$4,899	\$8,137	\$14,521	6.8	1.5	46.9	58.5
<b>15.5 Suture of skin and subcutaneous tissue [171.]</b>	72,043	0.21	\$7,899	\$3,209	\$5,441	\$9,359	3.9	1.3	59.4	49.0
<b>15.6 Skin graft [172.]</b>	33,973	0.10	\$29,033	\$7,226	\$13,726	\$30,062	11.7	1.2	59.1	49.6
<b>15.7 Other diagnostic procedures on skin and subcutaneous tissue [173.]</b>	13,494	0.04	\$14,654	\$5,543	\$9,595	\$16,639	8.6	3.7	47.4	54.7

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Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
<b>15.8 Other non-OR therapeutic procedures on skin and breast [174.]</b>	123,879	0.36	\$19,624	\$6,575	\$12,058	\$21,941	9.8	4.0	44.0	53.4
15.8.1 Aspiration of skin and subcutaneous tissue	6,885	0.02	\$9,891	\$3,904	\$6,913	\$12,181	6.6	0.7	51.7	53.0
15.8.2 Insertion of totally implantable vascular access device	63,098	0.18	\$25,542	\$9,557	\$15,823	\$27,796	10.7	6.4	43.7	55.3
15.8.3 Debridement of nail	16,479	0.05	\$15,136	\$6,914	\$11,258	\$18,337	14.7	1.8	43.5	73.8
15.8.4 Other skin and breast procedures, non-OR	37,416	0.11	\$13,385	\$3,580	\$7,440	\$15,226	6.6	1.6	43.3	41.4
<b>15.9 Other OR therapeutic procedures on skin and breast [175.]</b>	47,515	0.14	\$10,990	\$5,210	\$8,336	\$12,916	2.8	0.5	13.8	43.1
15.9.1 Bilateral reduction mammoplasty	16,721	0.05	\$7,941	\$5,020	\$7,299	\$9,932	1.4	0.0	1.3	35.8
15.9.2 Excision pilonidal cyst or sinus	1,733	0.00	\$5,761	\$3,351	\$4,520	\$6,804	2.5	0.0	61.5	28.6
15.9.3 Other skin and breast procedures, OR	29,061	0.08	\$13,072	\$5,735	\$9,717	\$16,007	3.6	0.8	18.2	48.2
16 Miscellaneous diagnostic and therapeutic procedures	4,520,869	12.96	\$11,630	\$3,168	\$6,212	\$12,140	6.4	5.8	46.8	49.8
<b>16.1 Other organ transplantation [176.]</b>	5,732	0.02	\$190,833	\$90,125	\$142,682	\$227,885	32.6	9.7	60.2	45.6
16.2 Computerized axial tomography (CT) scan	430,711	1.24	\$8,915	\$3,871	\$6,301	\$10,511	5.7	3.7	46.0	61.5
<b>16.2.1 Computerized axial tomography (CT) scan head [177.]</b>	295,541	0.85	\$8,807	\$3,750	\$6,143	\$10,340	5.7	4.2	46.2	63.1
<b>16.2.2 CT scan chest [178.]</b>	28,870	0.08	\$10,651	\$4,948	\$7,868	\$12,718	6.9	3.3	50.1	64.6
<b>16.2.3 CT scan abdomen [179.]</b>	87,289	0.25	\$8,908	\$4,135	\$6,492	\$10,488	5.2	2.4	44.1	56.3
<b>16.2.4 Other CT scan [180.]</b>	19,012	0.05	\$7,983	\$3,494	\$5,573	\$9,476	5.5	1.6	45.5	54.7
<b>16.3 Myelogram [181.]</b>	11,584	0.03	\$7,548	\$2,698	\$5,353	\$9,232	4.1	0.6	47.8	54.7
<b>16.4 Mammography [182.]</b>	1,130	0.00	\$10,399	\$4,055	\$6,503	\$10,270	9.8	0.4	1.4	59.8

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
<b>16.5 Routine chest X-ray [183.]</b>	12,881	0.04	\$5,951	\$2,631	\$4,246	\$7,219	5.2	2.7	45.2	49.1
<b>16.6 Intraoperative cholangiogram [184.]</b>	778	0.00	\$18,098	\$7,067	\$11,976	\$19,215	6.9	1.9	43.0	60.7
<b>16.7 Upper gastrointestinal X-ray [185.]</b>	17,022	0.05	\$10,701	\$3,791	\$6,554	\$12,231	7.7	1.8	45.2	56.0
<b>16.8 Lower gastrointestinal X-ray [186.]</b>	4,519	0.01	\$7,955	\$3,153	\$5,337	\$8,979	5.7	1.4	43.0	59.6
<b>16.9 Intravenous pyelogram [187.]</b>	30,987	0.09	\$4,858	\$2,073	\$3,250	\$5,439	3.1	0.2	54.1	48.4
<b>16.10 Cerebral arteriogram [188.]</b>	36,828	0.11	\$13,772	\$7,226	\$10,976	\$16,558	5.5	2.0	50.1	61.1
<b>16.11 Contrast aortogram [189.]</b>	14,750	0.04	\$12,733	\$5,811	\$9,326	\$15,609	4.8	2.7	55.1	65.7
<b>16.12 Contrast arteriogram of femoral and lower extremity arteries [190.]</b>	13,993	0.04	\$13,570	\$4,877	\$9,003	\$17,180	5.6	2.7	54.6	67.0
<b>16.13 Arterio or venogram (not heart and head) [191.]</b>	32,602	0.09	\$12,605	\$5,193	\$9,027	\$15,347	5.7	1.8	44.9	58.4
16.14 Diagnostic ultrasound	443,216	1.27	\$9,336	\$3,982	\$6,635	\$11,047	5.2	1.7	41.7	58.5
<b>16.14.1 Diagnostic ultrasound of head and neck [192.]</b>	31,972	0.09	\$10,884	\$4,042	\$6,656	\$11,578	6.0	0.7	43.8	59.1
<b>16.14.2 Diagnostic ultrasound of heart (echocardiogram) [193.]</b>	234,607	0.67	\$10,238	\$4,812	\$7,597	\$12,222	5.3	2.0	46.9	65.5
<b>16.14.3 Diagnostic ultrasound of gastrointestinal tract [194.]</b>	13,869	0.04	\$6,753	\$3,012	\$4,904	\$8,071	4.5	1.4	36.5	54.0
<b>16.14.4 Diagnostic ultrasound of urinary tract [195.]</b>	31,430	0.09	\$8,546	\$3,417	\$5,692	\$9,951	5.5	1.8	43.2	45.7
<b>16.14.5 Diagnostic ultrasound of abdomen or retroperitoneum [196.]</b>	58,694	0.17	\$7,839	\$3,241	\$5,419	\$9,251	4.5	1.7	37.8	49.6
<b>16.14.6 Other diagnostic ultrasound [197.]</b>	72,644	0.21	\$7,799	\$2,886	\$5,143	\$9,183	5.2	1.2	27.4	49.4
<b>16.15 Magnetic resonance imaging [198.]</b>	81,939	0.23	\$10,393	\$4,963	\$7,634	\$12,231	6.3	1.5	45.6	57.3
<b>16.16 Electroencephalogram (EEG) [199.]</b>	22,458	0.06	\$11,270	\$4,217	\$7,398	\$12,905	7.1	2.3	48.6	48.1

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
<b>16.17 Nonoperative urinary system measurements [200.]</b>	542	0.00	\$11,418	\$3,438	\$6,935	\$11,844	7.0	2.0	42.3	54.8
<b>16.18 Cardiac stress tests [201.]</b>	84,248	0.24	\$6,586	\$3,548	\$5,394	\$8,141	2.8	0.1	50.5	60.4
<b>16.19 Electrocardiogram [202.]</b>	37,073	0.11	\$5,668	\$2,440	\$4,005	\$6,664	4.1	2.2	45.1	59.9
<b>16.20 Electrographic cardiac monitoring [203.]</b>	108,238	0.31	\$6,055	\$2,769	\$4,442	\$7,366	3.3	2.3	46.7	64.7
<b>16.21 Swan-Ganz catheterization for monitoring [204.]</b>	20,287	0.06	\$27,225	\$11,707	\$20,089	\$33,924	8.8	34.0	53.5	69.1
<b>16.22 Arterial blood gases [205.]</b>	68,626	0.20	\$8,755	\$3,393	\$5,894	\$10,383	5.2	5.4	46.6	57.5
<b>16.23 Microscopic examination (bacterial smear, culture, toxicology) [206.]</b>	10,923	0.03	\$4,653	\$1,289	\$2,584	\$6,062	4.5	1.3	40.3	34.5
16.24 Radioisotope scan	85,610	0.25	\$9,977	\$4,742	\$7,325	\$11,929	5.9	1.8	41.0	62.3
<b>16.24.1 Radioisotope bone scan [207.]</b>	16,916	0.05	\$9,713	\$4,467	\$6,862	\$11,475	7.4	2.1	41.0	66.0
<b>16.24.2 Radioisotope pulmonary scan [208.]</b>	35,512	0.10	\$10,481	\$5,021	\$7,822	\$12,655	5.6	2.4	38.9	62.4
<b>16.24.3 Radioisotope scan and function studies [209.]</b>	30,281	0.09	\$9,395	\$4,568	\$7,015	\$11,194	5.2	0.8	43.1	60.6
<b>16.24.4 Other radioisotope scan [210.]</b>	2,901	0.01	\$11,548	\$4,833	\$7,734	\$13,679	8.1	3.1	44.8	58.4
<b>16.25 Therapeutic radiology [211.]</b>	73,945	0.21	\$11,916	\$4,784	\$8,170	\$14,126	6.8	5.0	42.1	61.5
16.26 Physical therapy	259,939	0.75	\$13,336	\$4,829	\$8,870	\$16,498	11.6	1.2	40.5	64.9
<b>16.26.1 Diagnostic physical therapy [212.]</b>	11,921	0.03	\$16,059	\$5,848	\$11,048	\$21,121	14.6	1.5	40.5	68.9
<b>16.26.2 Physical therapy exercises, manipulation, and other procedures [213.]</b>	159,590	0.46	\$14,246	\$5,250	\$9,438	\$17,535	12.1	1.3	38.1	71.5
<b>16.26.3 Traction, splints, and other wound care [214.]</b>	38,894	0.11	\$8,497	\$2,758	\$5,105	\$10,109	5.9	1.3	48.5	47.3
<b>16.26.4 Other physical therapy and rehabilitation [215.]</b>	49,535	0.14	\$13,547	\$5,685	\$9,693	\$16,791	13.7	0.8	42.3	56.5

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
<b>16.27 Respiratory intubation and mechanical ventilation [216.]</b>	466,077	1.34	\$32,813	\$8,620	\$18,720	\$38,698	10.9	31.1	51.1	49.7
16.27.1 Endotracheal intubation	140,280	0.40	\$26,181	\$4,590	\$12,813	\$29,844	9.0	28.8	50.5	41.6
16.27.2 Continuous mechanical ventilation less than 96 hours	203,468	0.58	\$21,676	\$8,578	\$15,353	\$26,684	7.4	33.0	51.2	55.5
16.27.3 Continuous mechanical ventilation 96 hours or more	95,903	0.28	\$69,268	\$30,633	\$49,152	\$80,885	21.4	36.5	51.5	54.7
16.27.4 Other respiratory intubation and mechanical ventilation	26,427	0.08	\$20,862	\$5,685	\$12,479	\$24,649	10.7	9.8	51.6	30.8
<b>16.28 Other respiratory therapy [217.]</b>	171,478	0.49	\$7,001	\$2,575	\$4,743	\$8,335	4.6	3.3	46.0	41.6
16.28.1 Respiratory medication administered by nebulizer	81,763	0.23	\$7,532	\$3,162	\$5,263	\$9,114	4.8	2.6	46.5	43.6
16.28.2 Oxygen therapy	74,196	0.21	\$6,262	\$1,783	\$3,961	\$7,511	4.3	3.5	46.0	36.3
16.28.3 Other respiratory treatments	15,519	0.04	\$7,673	\$3,154	\$5,033	\$8,144	5.2	5.7	43.6	56.6
<b>16.29 Psychological and psychiatric evaluation and therapy [218.]</b>	137,802	0.40	\$12,204	\$4,346	\$8,291	\$15,438	13.6	0.2	45.7	43.4
16.29.1 Psychiatric drug therapy	44,447	0.13	\$11,825	\$4,720	\$8,297	\$14,475	13.6	0.3	51.2	39.9
16.29.2 Electroconvulsive therapy	29,725	0.09	\$18,734	\$8,904	\$14,880	\$23,840	20.4	0.2	30.8	56.5
16.29.3 Individual psychotherapy	27,971	0.08	\$8,616	\$3,274	\$5,561	\$10,524	9.4	0.2	46.5	41.1
16.29.4 Other psychological and psychiatric evaluation and therapy	35,659	0.10	\$10,025	\$3,440	\$6,537	\$12,180	11.4	0.1	50.6	38.4
<b>16.30 Alcohol and drug rehabilitation/detoxification [219.]</b>	400,264	1.15	\$4,636	\$2,140	\$3,339	\$5,448	6.1	0.1	68.4	39.4
16.30.1 Alcohol rehabilitation	13,503	0.04	\$7,548	\$2,434	\$5,090	\$10,668	13.3	0.0	72.6	41.1
16.30.2 Alcohol detoxification	129,474	0.37	\$4,591	\$2,004	\$3,202	\$5,273	4.2	0.2	74.4	44.6
16.30.3 Alcohol rehabilitation and detoxification	35,751	0.10	\$5,505	\$2,818	\$4,387	\$6,566	7.8	0.0	71.4	45.2

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
16.30.4 Drug rehabilitation	7,680	0.02	\$6,396	\$2,536	\$4,330	\$7,929	10.7	0.0	50.5	31.7
16.30.5 Drug detoxification	71,837	0.21	\$3,542	\$1,906	\$2,918	\$4,170	4.3	0.0	58.7	35.7
16.30.6 Drug rehabilitation and detoxification	19,979	0.06	\$5,351	\$2,632	\$4,104	\$6,384	7.4	0.0	56.5	35.9
16.30.7 Alcohol and drug rehabilitation	21,201	0.06	\$7,271	\$3,403	\$6,535	\$11,119	16.2	0.0	66.0	32.3
16.30.8 Alcohol and drug detoxification	70,293	0.20	\$3,256	\$1,732	\$2,682	\$3,781	4.3	0.0	70.4	35.9
16.30.9 Alcohol and drug rehabilitation and detoxification	30,546	0.09	\$5,518	\$2,943	\$4,491	\$6,616	8.3	0.0	69.4	35.3
<b>16.31 Ophthalmologic and otologic diagnosis and treatment [220.]</b>	2,366	0.01	\$15,370	\$2,085	\$7,812	\$18,059	9.8	0.0	44.1	20.7
<b>16.32 Nasogastric tube [221.]</b>	31,565	0.09	\$7,853	\$3,094	\$5,145	\$9,134	4.8	6.0	44.9	56.7
<b>16.33 Blood transfusion [222.]</b>	217,819	0.62	\$10,961	\$4,216	\$7,333	\$12,870	6.3	7.5	43.6	64.1
<b>16.34 Enteral and parenteral nutrition [223.]</b>	46,842	0.13	\$18,737	\$6,920	\$12,356	\$22,308	11.8	14.6	40.5	58.7
<b>16.35 Cancer chemotherapy [224.]</b>	255,054	0.73	\$11,699	\$4,312	\$6,969	\$11,542	4.4	1.3	44.4	52.4
<b>16.36 Conversion of cardiac rhythm [225.]</b>	77,581	0.22	\$9,261	\$3,295	\$6,008	\$11,011	4.3	21.8	59.6	68.2
<b>16.37 Other diagnostic radiology and related techniques [226.]</b>	55,477	0.16	\$10,300	\$3,908	\$6,896	\$11,918	5.8	1.7	46.8	51.4
<b>16.38 Other diagnostic procedures (interview, evaluation, consultation) [227.]</b>	47,393	0.14	\$11,910	\$4,164	\$7,427	\$13,536	6.8	4.9	43.1	47.8
<b>16.39 Prophylactic vaccinations and inoculations [228.]</b>	309,025	0.89	\$1,559	\$582	\$828	\$1,330	2.2	0.0	30.8	0.3
<b>16.40 Nonoperative removal of foreign body [229.]</b>	4,768	0.01	\$7,397	\$2,815	\$4,542	\$8,183	3.5	1.3	60.2	37.8
<b>16.41 Extracorporeal shock wave lithotripsy, other than urinary [230.]</b>	60	0.00	*	*	*	*	*	*	*	*
<b>16.42 Other therapeutic procedures [231.]</b>	386,736	1.11	\$9,452	\$3,013	\$5,851	\$11,221	5.5	2.5	46.5	39.3

Source: AHCPR, Center for Organization and Delivery Studies, Healthcare Cost and Utilization Project (HCUP).

**Table 2**  
**Statistics for 1996 HCUP Nationwide Inpatient Sample, by multi-level CCS procedure (principal procedure only)**

Multi-level Clinical Classifications Software (CCS) category <sup>1</sup>	Number of discharges <sup>2</sup>	Percent of discharges	Mean charges	25 %tile charges	Median charges	75 %tile charges	Mean LOS	Percent died	Percent male	Mean age
<b>16.42.1</b> Inject antibiotic	123,400	0.35	\$8,673	\$3,436	\$5,762	\$10,070	6.0	2.9	45.2	43.9
<b>16.42.2</b> Other phototherapy (newborn)	64,436	0.18	\$10,128	\$1,792	\$3,550	\$10,900	7.1	0.1	48.9	0.1
<b>16.42.3</b> Other therapies	198,900	0.57	\$9,721	\$3,356	\$6,501	\$12,037	4.8	2.9	46.4	49.1
No Procedure Listed	13,618,888	39.05	\$5,801	\$2,017	\$4,043	\$7,234	4.2	2.2	41.2	46.8

<sup>1</sup> CCS categories are presented in bold lettering with the CCS category number at the end of the word label, in brackets. See the AHCPR website for definitions of CCS categories: [www.ahcpr.gov/data/hcup](http://www.ahcpr.gov/data/hcup).

<sup>2</sup> Numbers of discharges are weighted national estimates based on 100% of the data from the HCUP Nationwide Inpatient Sample. Results are not presented for any procedure category for which the unweighted number of discharges is less than 70. Estimates presented here have a relative error of less than 30%. Out of the "All Discharges" category, **11,002** discharges had invalid procedure codes and are not represented in the table details.

Acronyms used in Table 2: CNS—central nervous system; GI—gastrointestinal; LOS—length of stay in hospital (in days); and OR—operating room.