Table O1
Outpatient Procedure Groups by Admission Source
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Row Percents

ICD-9-CM Procedure Group	Outpatient Procedures NOT Originating in ED Number	Row %	Outpatient Procedures Originating in ED Number	Row %	Total Number
00 Procedures and Interventions, NEC	8	88.9	1	11.1	9
01 Incision, Excision of Brain, Skull	2	50.0	2	50.0	4
02 Other Brain, Skull Operations	4	100.0	0	0.0	4
03 Spinal Cord & Canal Operations	4,550	93.8	299	6.2	4,849
04 Cranial & Peripheral Nerve Operations	2,935	87.8	409	12.2	3,344
05 Sympathetic Nerve Operations	209	99.5	1	0.5	210
06 Thyroid, Parathyroid Operations	305	100.0	0	0.0	305
07 Other Endocrine Gland Operations	5	100.0	0	0.0	5
08 Eyelid Operations	334	48.1	361	51.9	695
09 Lacrimal System Operations	67	98.5	1	1.5	68
10 Conjunctival Operations	23	100.0	0	0.0	23
11 Operations on Cornea	77	72.6	29	27.4	106
12 Anterior Eye Segment Operations	286	96.9	9	3.1	295
13 Operations on Lens of Eye	5,006	99.3	33	0.7	5,039
14 Posterior Eye Segment Operations	233	98.3	4	1.7	237
15 Extraocular Muscle Operations	135	100.0	0	0.0	135
16 Orbit & Eyeball Operations	28	90.3	3	9.7	31
18 External Ear Operations	135	61.6	84	38.4	219
19 Middle Ear Reconstructions	122	100.0	0	0.0	122
20 Other Middle & Inner Ear Operations	1,332	100.0	0	0.0	1,332
21 Operations on Nose	651	55.9	514	44.1	1,165
22 Nasal Sinus Operations	187	98.4	3	1.6	190
23 Tooth Removal & Restoration	566	97.8	13	2.2	579
24 Other Operations on Teeth & Gums	6	7.5	74	92.5	80
25 Operations on Tongue	63	82.9	13	17.1	76
26 Salivary Gland Operations	69	98.6	1	1.4	70
27 Other Mouth & Face Operations	127	25.7	367	74.3	494
28 Tonsil & Adenoid Operations	977	93.5	68	6.5	1,045
29 Operations on Pharynx	31	86.1	5	13.9	36
30 Excision of Larynx	95	100.0	0	0.0	95
31 Larynx, Trachea Operations, NEC	127	83.6	25	16.4	152

Table O1
Outpatient Procedure Groups by Admission Source
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Row Percents

ICD-9-CM Procedure Group	Outpatient Procedures NOT Originating in ED Number	Row %	Outpatient Procedures Originating in ED Number	Row %	Total Number
32 Lung & Bronchus Excision	4	100.0	0	0.0	4
33 Other Bronchial & Lung Operations	494	97.6	12	2.4	506
34 Thorax Operations Except Lung	116	69.0	52	31.0	168
36 Operations on Heart Vessels	73	93.6	5	6.4	78
37 Other Heart & Pericardium Operations	1,190	93.1	88	6.9	1,278
38 Vessel Incision, Excision, Occlusion	2,158	93.8	142	6.2	2,300
39 Other Operations on Vessels	458	97.4	12	2.6	470
40 Lymphatic System Operations	244	99.2	2	0.8	246
41 Bone Marrow & Spleen Operations	86	92.5	7	7.5	93
42 Operations on Esophagus	541	93.1	40	6.9	581
43 Incision, Excision of Stomach	137	96.5	5	3.5	142
44 Other Operations on Stomach	242	96.0	10	4.0	252
45 Intestinal Incision, Excision, Anastomosis	23,962	99.0	238	1.0	24,200
46 Other Intestinal Operations	23	100.0	0	0.0	23
47 Operations on Appendix	35	16.6	176	83.4	211
48 Other Rectal & Perirectal Operations	1,791	97.8	40	2.2	1,831
49 Operations on Anus	427	79.1	113	20.9	540
50 Operations on Liver	357	100.0	0	0.0	357
51 Biliary Tract Operations	1,174	94.4	69	5.6	1,243
52 Operations on Pancreas	16	100.0	0	0.0	16
53 Repair of Hernia	2,143	98.7	28	1.3	2,171
54 Other Abdominal Region Operations	476	93.0	36	7.0	512
55 Operations on Kidney	126	97.7	3	2.3	129
56 Operations on Ureter	222	86.0	36	14.0	258
57 Urinary Bladder Operations	1,077	55.9	850	44.1	1,927
58 Operations on Urethra	158	99.4	1	0.6	159
59 Other Urinary Tract Operations	435	92.8	34	7.2	469
60 Prostate & Seminal Vesicle Operations	98	100.0	0	0.0	98
61 Scrotum & Tunica Vaginalis Operations	104	91.2	10	8.8	114
62 Operations on Testes	114	96.6	4	3.4	118
63 Spermatic Cord, Epididymis, Vas Deferens Operations	259	98.9	3	1.1	262

Table O1
Outpatient Procedure Groups by Admission Source
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Row Percents

ICD-9-CM Procedure Group	Outpatient Procedures NOT Originating in ED Number	Row %	Outpatient Procedures Originating in ED Number	Row %	Total Number
64 Operations on Penis	324	97.9	7	2.1	331
65 Operations on Ovary	469	96.7	16	3.3	485
66 Fallopian Tube Operations	578	97.5	15	2.5	593
67 Operations on Cervix	419	99.3	3	0.7	422
68 Other Uterine Incision, Excision	501	98.8	6	1.2	507
69 Other Uterus & Supporting Structure Operations	1,356	92.9	104	7.1	1,460
70 Vagina & Cul-de-Sac Operations	199	96.1	8	3.9	207
71 Vulvar & Perineal Operations	130	80.7	31	19.3	161
73 Assisting, Inducing Delivery, NEC	63	98.4	1	1.6	64
74 C-Section, Removal of Fetus	1	50.0	1	50.0	2
75 Other Obstetric Operations	2,721	97.7	65	2.3	2,786
76 Facial Bone & Joint Operations	58	79.5	15	20.5	73
77 Incision, Excision, Division of Bone, NEC	1,038	99.3	7	0.7	1,045
78 Other Bone Operations Except Face	666	97.8	15	2.2	681
79 Reduction of Fracture, Dislocation	811	36.6	1,407	63.4	2,218
80 Incision, Excision of Joint	3,072	99.4	18	0.6	3,090
81 Joint Repair & Plastic Operations	2,161	95.7	96	4.3	2,257
82 Hand Muscle, Tendon, Fascia Operations	1,049	93.4	74	6.6	1,123
83 Other Muscle, Tendon, Fascia, Bursa Operations	1,161	94.8	64	5.2	1,225
84 Other Musculoskeletal Procedures	98	81.0	23	19.0	121
85 Operations on the Breast	2,235	99.3	15	0.7	2,250
86 Skin & Subcutaneous Tissue Operations	3,129	26.5	8,700	73.5	11,829
Total for All Procedures	79,674	84.1	15,026	15.9	94,700

Outpatient procedure records include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99.
Procedure groups are created using the first procedure on each record which is in the defined code range, grouped by the first two digits of the procedure code.
These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures (see discussion in the User's Guide to Outpatient Procedure Tables for details).

Table O2
Top 20 Outpatient Procedure Groups and Leading Procedures by Admission Source
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Average Charges

ICD-9-CM Procedure Group	Outpatient Procedures NOT Originating in ED Number	Outpatient Procedures NOT Originating in ED Average Charges	Outpatient Procedures Originating in ED Number	Outpatient Procedures Originating in ED Average Charges	Total Number	Total Average Charges
45 Intestinal Incision, Excision, Anastomosis	**23,962**	**$1,539**	**238**	**$3,334**	**24,200**	**$1,557**
4523 Colonoscopy	10,007	$1,327	27	$3,514	10,034	$1,333
4542 Endoscopic polypectomy of large intestine	6,502	$1,770	19	$4,045	6,521	$1,776
4516 Esophagogastroduodenoscopy [EGD] with closed biopsy	2,846	$1,703	37	$4,058	2,883	$1,732
4525 Closed [endoscopic] biopsy of large intestine	2,478	$1,686	18	$4,523	2,496	$1,707
All Other Procedures in Group	2,129	$1,443	137	2,854	2,266	$1,529
86 Skin & Subcutaneous Tissue Operations	**3,129**	**$2,277**	**8,700**	**$551**	**11,829**	**$1,002**
8659 Closure of skin and subcutaneous tissue of other sites	56	$1,994	7,098	$527	7,154	$534
863 Other local excision/destruction of lesion/tissue of skin	1,712	$1,467	17	$611	1,729	$1,459
All Other Procedures in Group	1,361	$3,317	1,585	$657	2,946	$1,874
13 Operations on Lens of Eye	**5,006**	**$3,548**	**33**	**$1,372**	**5,039**	**$3,534**
1341 Phacoemulsification and aspiration of cataract	4,099	$3,833	7	$5,096	4,106	$3,835
1364 Discission of secondary membrane [after cataract]	506	$848	18	$380	524	$832
All Other Procedures in Group	401	$4,088	8	$344	409	$4,009
03 Spinal Cord & Canal Operations	**4,550**	**$1,081**	**299**	**$1,920**	**4,849**	**$1,133**
0392 Injection of other agent into spinal canal	3,426	$638	6	$2,790	3,432	$642
0391 Injection of anesthetic into spinal canal for analgesia	858	$931	2	$650	860	$931
All Other Procedures in Group	266	$7,415	291	$1,910	557	$4,503
04 Cranial & Peripheral Nerve Operations	**2,935**	**$2,477**	**409**	**$656**	**3,344**	**$2,254**
0443 Release of carpal tunnel	1,601	$2,645	1	$4,340	1,602	$2,646
0481 Injection of anesthetic into peripheral nerve for analgesia	429	$837	395	$519	824	$685
042 Destruction of cranial and peripheral nerves	552	$1,366	1	$8,776	553	$1,379
All Other Procedures in Group	353	$5,448	12	$4,166	365	$5,406
80 Incision, Excision of Joint	**3,072**	**$5,520**	**18**	**$2,563**	**3,090**	**$5,503**
806 Excision of semilunar cartilage of knee	1,713	$4,680	2	$3,660	1,715	$4,678
8051 Excision of interbvertebral disc	324	$6,640	1	$6,883	325	$6,641
All Other Procedures in Group	1,035	$6,562	15	$2,128	1,050	$6,499

Table O2
Top 20 Outpatient Procedure Groups and Leading Procedures by Admission Source
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Average Charges

ICD-9-CM Procedure Group	Outpatient Procedures NOT Originating in ED Number	Outpatient Procedures NOT Originating in ED Average Charges	Outpatient Procedures Originating in ED Number	Outpatient Procedures Originating in ED Average Charges	Total Number	Total Average Charges
75 Other Obstetric Operations	**2,721**	**$495**	**65**	**$1,072**	**2,786**	**$509**
7534 Other fetal monitoring	1,403	$580	39	$1,020	1,442	$593
7535 Other diagnostic procedures on fetus and amnion	1,300	$396	26	$1,150	1,326	$411
All Other Procedures in Group	18	$1,325	0	--	18	$1,325
38 Vessel Incision, Excision, Occlusion	**2,158**	**$3,040**	**142**	**$2,223**	**2,300**	**$2,958**
3893 Venous catheterization, not elsewhere classified	1,072	$3,805	50	$2,692	1,122	$3,597
3899 Other puncture of vein [phlebotomy]	570	$1,175	61	$773	631	$1,136
3859 Ligation and stripping of lower limb varicose veins	282	$6,039	1	$9,787	283	$6,052
All Other Procedures in Group	234	$3,264	30	$4,136	264	$3,369
81 Joint Repair & Plastic Operations	**2,161**	**$6,971**	**96**	**$1,330**	**2,257**	**$6,730**
8183 Other repair of shoulder	468	$8,822	0	--	468	$8,822
8192 Injection of therapeutic substance into joint or ligament	484	$670	8	$1,398	492	$682
8145 Other repair of cruciate ligaments	373	$11,176	1	$11,693	374	$11,177
8147 Other repair of knee	269	$6,047	0	--	269	$6,047
All Other Procedures in Group	567	$8,488	87	$1,204	654	$7,509
85 Operations on the Breast	**2,235**	**$3,942**	**15**	**$735**	**2,250**	**$3,920**
8521 Local excision of lesion of breast	868	$3,368	1	$1,022	869	$3,366
8511 Closed [percutaneous] [needle] biopsy of breast	763	$2,411	1	$1,656	764	$2,411
All Other Procedures in Group	604	$6,703	13	$642	617	$6,575
79 Reduction of Fracture, Dislocation	**811**	**$6,486**	**1,407**	**$2,277**	**2,218**	**$3,814**
7902 Closed reduction of fracture w/o internal fixation--radius and ulna	63	$3,462	355	$1,832	418	$2,075
All Other Procedures in Group	748	$6,737	1,052	$2,427	1,800	$4,217
53 Repair of Hernia	**2,143**	**$5,119**	**28**	**$5,064**	**2,171**	**$5,119**
5304 Repair of indirect inguinal hernia with graft or prosthesis	513	$4,929	4	$5,365	517	$4,933
5303 Repair of direct inguinal hernia with graft or prosthesis	401	$4,866	1	$4,618	402	$4,865
All Other Procedures in Group	1,229	$5,282	23	$5,031	1,252	$5,277

Table O2
Top 20 Outpatient Procedure Groups and Leading Procedures by Admission Source
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Average Charges

ICD-9-CM Procedure Group	Outpatient Procedures NOT Originating in ED Number	Outpatient Procedures NOT Originating in ED Average Charges	Outpatient Procedures Originating in ED Number	Outpatient Procedures Originating in ED Average Charges	Total Number	Total Average Charges
57 Urinary Bladder Operations	**1,077**	**$3,759**	**850**	**$1,502**	**1,927**	**$2,753**
5794 Insertion of indwelling urinary catheter	41	$897	521	$1,528	562	$1,494
5732 Other cystoscopy	468	$3,427	8	$3,387	476	$3,427
5749 Other transurethral excision/destruction of bladder lesion/tissue	353	$4,233	2	$3,645	355	$4,230
5799 Other operations on bladder	9	$226	286	$1,402	295	$1,390
All Other Procedures in Group	206	$4,154	33	$1,369	239	$3,767
48 Other Rectal & Perirectal Operations	**1,791**	**$1,756**	**40**	**$1,593**	**1,831**	**$1,752**
4836 [Endoscopic] polypectomy of rectum	1,265	$1,725	0	--	1,265	$1,725
4824 Closed [endoscopic] biopsy of rectum	402	$1,411	4	$3,671	406	$1,433
All Other Procedures in Group	124	$3,206	36	$1,362	160	$2,788
69 Other Uterus & Supporting Structure Operations	**1,356**	**$3,109**	**104**	**$3,771**	**1,460**	**$3,156**
6909 Other dilation and curettage	789	$3,228	15	$4,426	804	$3,250
6952 Aspiration curettage following delivery or abortion	175	$2,577	49	$3,591	224	$2,799
All Other Procedures in Group	392	$3,107	40	$3,745	432	$3,166
20 Other Middle & Inner Ear Operations	**1,332**	**$2,727**	**0**	**--**	**1,332**	**$2,727**
2001 Myringotomy with insertion of tube	1,241	$2,059	0	--	1,241	$2,059
All Other Procedures in Group	91	$11,821	0	--	91	$11,821
37 Other Heart & Pericardium Operations	**1,190**	**$8,166**	**88**	**$7,321**	**1,278**	**$8,108**
3722 Left heart cardiac catheterization	783	$4,741	74	$7,607	857	$4,990
3723 Combined right and left heart cardiac catheterization	157	$6,807	6	$7,784	163	$6,843
All Other Procedures in Group	250	$19,720	8	$4,334	258	$19,242
51 Biliary Tract Operations	**1,174**	**$7,597**	**69**	**$9,891**	**1,243**	**$7,724**
5123 Laparoscopic cholecystectomy	973	$8,089	59	$10,614	1,032	$8,234
All Other Procedures in Group	201	$5,175	10	$5,629	211	$5,197
83 Other Muscle, Tendon, Fascia, Bursa Operations	**1,161**	**$6,308**	**64**	**$2,979**	**1,225**	**$6,134**
8363 Rotator cuff repair	386	$10,977	0	--	386	$10,977
8339 Excision of lesion of other soft tissue	123	$3,566	0	--	123	$3,566
All Other Procedures in Group	652	$4,051	64	$2,979	716	$3,955

Table O2
Top 20 Outpatient Procedure Groups and Leading Procedures by Admission Source
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Average Charges

ICD-9-CM Procedure Group	Outpatient Procedures NOT Originating in ED Number	Outpatient Procedures NOT Originating in ED Average Charges	Outpatient Procedures Originating in ED Number	Outpatient Procedures Originating in ED Average Charges	Total Number	Total Average Charges
21 Operations on Nose	**651**	**$4,454**	**514**	**$732**	**1,165**	**$2,804**
2103 Control of epistaxis by cauterization (and packing)	11	$2,637	194	$595	205	$675
2188 Other septoplasty	194	$4,641	0	--	194	$4,641
215 Submucous resection of nasal septum	187	$5,647	1	$3,079	188	$5,633
2101 Control of epistaxis by anterior nasal packing	1	$211	170	$667	171	$664
2181 Suture of laceration of nose	1	--	117	$792	118	$792
All Other Procedures in Group	257	$3,511	32	$1,621	289	$3,301
Total for Above Procedures	**64,615**	**$2,831**	**13,179**	**$1,064**	**77,794**	**$2,527**
Total for All Other Procedures	**15,059**	**$4,138**	**1,847**	**$2,406**	**16,906**	**$3,948**
Total for All Procedures in Range 00.0 - 86.99	**79,674**	**$3,081**	**15,026**	**$1,229**	**94,700**	**$2,783**

Outpatient procedure records include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99.
Charge data should be used with caution. See discussion in the User's Guide to Outpatient Procedure Tables for details.
Records with missing charges are included in the number of procedures reported but are excluded from the average charges calculation.
Top 20 procedure groups are based on the combined outpatient totals.
Procedure groups are created using the first procedure on each record which is in the defined code range, grouped by the first two digits of the procedure code.
These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures (see discussion in the User's Guide to Outpatient Procedure Tables for details).

Table O3
Top 10 Outpatient Procedure Groups by Age and Sex for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Column Percents

MALES			FEMALES		
ICD-9 Procedure	**Number**	**Col %**	**ICD-9 Procedure**	**Number**	**Col %**
Age Under 15			Age Under 15		
20 Other Middle & Inner Ear Operations	728	29.8	20 Other Middle & Inner Ear Operations	523	31.3
28 Tonsil & Adenoid Operations	318	13.0	28 Tonsil & Adenoid Operations	320	19.2
23 Tooth Removal & Restoration	265	10.9	23 Tooth Removal & Restoration	221	13.2
64 Operations on Penis	215	8.8	86 Skin & Subcutaneous Tissue Operations	75	4.5
53 Repair of Hernia	152	6.2	45 Intestinal Incision, Excision, Anastomosis	61	3.7
86 Skin & Subcutaneous Tissue Operations	86	3.5	79 Reduction of Fracture, Dislocation	44	2.6
79 Reduction of Fracture, Dislocation	75	3.1	15 Extraocular Muscle Operations	44	2.6
62 Operations on Testes	52	2.1	53 Repair of Hernia	33	2.0
45 Intestinal Incision, Excision, Anastomosis	47	1.9	09 Lacrimal System Operations	28	1.7
15 Extraocular Muscle Operations	35	1.4	19 Middle Ear Reconstructions	27	1.6
All Cases	2,441	100.0	All Cases	1,670	100.0
Age Between 15 and 44			Age Between 15 and 44		
45 Intestinal Incision, Excision, Anastomosis	1,208	17.0	75 Other Obstetric Operations	2,718	19.7
80 Incision, Excision of Joint	689	9.7	45 Intestinal Incision, Excision, Anastomosis	1,796	13.0
03 Spinal Cord & Canal Operations	662	9.3	69 Other Uterus & Supporting Structure Operations	820	5.9
81 Joint Repair & Plastic Operations	554	7.8	85 Operations on the Breast	665	4.8
53 Repair of Hernia	495	7.0	03 Spinal Cord & Canal Operations	634	4.6
86 Skin & Subcutaneous Tissue Operations	445	6.3	86 Skin & Subcutaneous Tissue Operations	551	4.0
04 Cranial & Peripheral Nerve Operations	367	5.2	66 Fallopian Tube Operations	545	4.0
79 Reduction of Fracture, Dislocation	298	4.2	04 Cranial & Peripheral Nerve Operations	542	3.9
78 Other Bone Operations Except Face	202	2.8	80 Incision, Excision of Joint	484	3.5
21 Operations on Nose	186	2.6	81 Joint Repair & Plastic Operations	448	3.2
All Cases	7,091	100.0	All Cases	13,790	100.0

Table O3
Top 10 Outpatient Procedure Groups by Age and Sex for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Column Percents

MALES			FEMALES		
ICD-9 Procedure	**Number**	**Col %**	**ICD-9 Procedure**	**Number**	**Col %**
Age Between 45 and 64			Age Between 45 and 64		
45 Intestinal Incision, Excision, Anastomosis	6,472	43.1	45 Intestinal Incision, Excision, Anastomosis	7,288	40.2
03 Spinal Cord & Canal Operations	893	5.9	85 Operations on the Breast	1,075	5.9
80 Incision, Excision of Joint	819	5.5	03 Spinal Cord & Canal Operations	1,035	5.7
53 Repair of Hernia	661	4.4	04 Cranial & Peripheral Nerve Operations	884	4.9
48 Other Rectal & Perirectal Operations	565	3.8	80 Incision, Excision of Joint	708	3.9
38 Vessel Incision, Excision, Occlusion	562	3.7	86 Skin & Subcutaneous Tissue Operations	680	3.7
04 Cranial & Peripheral Nerve Operations	514	3.4	13 Operations on Lens of Eye	583	3.2
86 Skin & Subcutaneous Tissue Operations	499	3.3	48 Other Rectal & Perirectal Operations	506	2.8
13 Operations on Lens of Eye	475	3.2	81 Joint Repair & Plastic Operations	489	2.7
81 Joint Repair & Plastic Operations	366	2.4	69 Other Uterus & Supporting Structure Operations	444	2.4
All Cases	15,009	100.0	All Cases	18,147	100.0
Age 65 and Over			Age 65 and Over		
45 Intestinal Incision, Excision, Anastomosis	3,163	33.0	45 Intestinal Incision, Excision, Anastomosis	3,926	32.9
13 Operations on Lens of Eye	1,402	14.6	13 Operations on Lens of Eye	2,454	20.5
38 Vessel Incision, Excision, Occlusion	584	6.1	03 Spinal Cord & Canal Operations	833	7.0
03 Spinal Cord & Canal Operations	481	5.0	85 Operations on rhe Breast	415	3.5
57 Urinary Bladder Operations	433	4.5	86 Skin & Subcutaneous Tissue Operations	402	3.4
86 Skin & Subcutaneous Tissue Operations	391	4.1	04 Cranial & Peripheral Nerve Operations	380	3.2
53 Repair of Hernia	383	4.0	38 Vessel Incision, Excision, Occlusion	330	2.8
37 Other Heart & Pericardium Operations	297	3.1	48 Other Rectal & Perirectal Operations	280	2.3
48 Other Rectal & Perirectal Operations	250	2.6	37 Other Heart & Pericardium Operations	220	1.8
04 Cranial & Peripheral Nerve Operations	246	2.6	80 Incision, Excision of Joint	186	1.6
All Cases	9,580	100.0	All Cases	11,943	100.0

Procedure groups are created from first procedure in ICD-9-CM code range 00.0 - 86.99, grouped by first two digits of procedure code.
Total for age/sex groups do not equal total for all outpatient procedures due to 3 records missing sex data.
These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures (see discussion in the User's Guide to Outpatient Procedure Tables for details).

Table O4
Top 20 Outpatient Procedure Groups by Primary Payer for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures, Average Charges, and Row and Column Percents

Number of Procedures

Primary Payer

ICD-9 Procedure	Medicare	Medicaid	Other Gov.	Workers Comp.	Private Ins.	Other	Unknown	Total
45 Intestinal Incision, Excision, Anastomosis	7,456	1,649	160	6	14,239	452	0	23,962
13 Operations on Lens of Eye	3,837	174	16	3	892	84	0	5,006
03 Spinal Cord & Canal Operations	1,508	529	57	544	1,852	60	0	4,550
86 Skin & Subcutaneous Tissue Operations	886	411	16	30	1,669	117	0	3,129
80 Incision, Excision of Joint	406	297	26	414	1,863	66	0	3,072
04 Cranial & Peripheral Nerve Operations	783	347	29	466	1,238	72	0	2,935
75 Other Obstetric Operations	7	1,411	10	1	1,239	53	0	2,721
85 Operations on the Breast	470	189	26	1	1,448	101	0	2,235
81 Joint Repair & Plastic Operations	328	237	14	286	1,228	68	0	2,161
38 Vessel Incision, Excision, Occlusion	540	129	129	6	1,341	13	0	2,158
53 Repair of Hernia	522	282	8	118	1,154	59	0	2,143
48 Other Rectal & Perirectal Operations	542	122	9	0	1,101	16	1	1,791
69 Other Uterus & Supporting Structure Operations	124	242	9	0	866	115	0	1,356
20 Other Middle & Inner Ear Operations	18	631	11	1	658	13	0	1,332
37 Other Heart & Pericardium Operations	554	95	4	1	522	14	0	1,190
51 Biliary Tract Operations	276	198	10	0	636	54	0	1,174
83 Other Muscle, Tendon, Fascia, Bursa Operations	256	122	13	154	579	37	0	1,161
57 Urinary Bladder Operations	617	76	6	0	356	22	0	1,077
82 Hand Muscle, Tendon, Fascia Operations	250	109	7	92	566	25	0	1,049
77 Incision, Excision, Division of Bone, NEC	214	120	15	43	627	19	0	1,038
All Other Procedures	3,201	2,956	108	273	7,293	603	0	14,434
Total	22,795	10,326	683	2,439	41,367	2,063	1	79,674

Procedure groups are created using the first procedure on each record which is in the ICD-9-CM code range 00.0 - 86.99, grouped by first two digits of procedure code.

"Other" payer includes self-pay, no charge, and other

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Table O4
Top 20 Outpatient Procedure Groups by Primary Payer for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures, Average Charges, and Row and Column Percents

Mean Charges

Primary Payer

ICD-9 Procedure	Medicare	Medicaid	Other Gov.	Workers Comp.	Private Ins.	Other	Unknown	Total
45 Intestinal Incision, Excision, Anastomosis	$1,599	$1,574	$1,589	$1,476	$1,502	$1,587	--	$1,539
13 Operations on Lens of Eye	$3,516	$3,801	$4,642	$5,228	$3,574	$4,246	--	$3,548
03 Spinal Cord & Canal Operations	$1,096	$864	$1,067	$1,462	$901	$4,716	--	$1,081
86 Skin & Subcutaneous Tissue Operations	$2,284	$2,427	$4,777	$2,316	$2,156	$3,198	--	$2,277
80 Incision, Excision of Joint	$4,881	$5,650	$4,714	$6,493	$5,372	$7,267	--	$5,520
04 Cranial & Peripheral Nerve Operations	$2,496	$2,582	$2,165	$2,427	$2,410	$3,375	--	$2,477
75 Other Obstetric Operations	$466	$478	$443	$593	$517	$463	--	$495
85 Operations on the Breast	$3,894	$3,903	$3,894	$1,545	$3,784	$6,523	--	$3,942
81 Joint Repair & Plastic Operations	$3,632	$6,834	$5,173	$7,680	$7,552	$10,400	--	$6,971
38 Vessel Incision, Excision, Occlusion	$2,471	$2,350	$4,191	$4,014	$3,675	$2,833	--	$3,040
53 Repair of Hernia	$5,354	$5,087	$3,560	$5,329	$4,995	$5,431	--	$5,119
48 Other Rectal & Perirectal Operations	$1,801	$1,913	$1,776	--	$1,715	$1,861	$1,342	$1,756
69 Other Uterus & Supporting Structure Operations	$2,918	$3,771	$3,212	--	$3,165	$1,492	--	$3,109
20 Other Middle & Inner Ear Operations	$14,164	$2,598	$1,868	$47,218	$2,468	$3,565	--	$2,727
37 Other Heart & Pericardium Operations	$7,507	$7,163	$12,779	$3,930	$9,042	$7,148	--	$8,166
51 Biliary Tract Operations	$7,386	$7,928	$6,688	--	$7,560	$8,050	--	$7,597
83 Other Muscle, Tendon, Fascia, Bursa Operations	$6,264	$5,578	$4,723	$7,018	$6,115	$9,522	--	$6,308
57 Urinary Bladder Operations	$3,701	$3,431	$4,660	--	$3,986	$2,724	--	$3,759
82 Hand Muscle, Tendon, Fascia Operations	$1,963	$3,083	$3,195	$2,895	$2,003	$3,418	--	$2,226
77 Incision, Excision, Division of Bone, NEC	$4,671	$4,987	$6,153	$6,101	$4,816	$8,893	--	$4,949
All Other Procedures	$4,266	$4,215	$4,842	$3,390	$4,470	$4,737	--	$4,366
Total	$2,937	$3,059	$3,190	$4,158	$3,049	$4,126	$1,342	$3,081

Charge data should be used with caution. See discussion in the User's Guide to Outpatient Procedure Tables for details.
Records with missing charges are included in the number of procedures reported but are excluded from the average charges calculation.
Procedure groups are created using the first procedure on each record which is in the ICD-9-CM code range 00.0 - 86.99, grouped by first two digits of procedure code.
"Other" payer includes self-pay, no charge, and other sources of payment
These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures (see discussion in the User's Guide to Outpatient Procedure Tables for details).

Table O4
Top 20 Outpatient Procedure Groups by Primary Payer for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures, Average Charges, and Row and Column Percents

Row Percents

Primary Payer

ICD-9 Procedure	Medicare	Medicaid	Other Gov.	Workers Comp.	Private Ins.	Other	Unknown	Total
45 Intestinal Incision, Excision, Anastomosis	31.1	6.9	0.7	0.0	59.4	1.9	0.0	100.0
13 Operations on Lens of Eye	76.6	3.5	0.3	0.1	17.8	1.7	0.0	100.0
03 Spinal Cord & Canal Operations	33.1	11.6	1.3	12.0	40.7	1.3	0.0	100.0
86 Skin & Subcutaneous Tissue Operations	28.3	13.1	0.5	1.0	53.3	3.7	0.0	100.0
80 Incision, Excision of Joint	13.2	9.7	0.8	13.5	60.6	2.1	0.0	100.0
04 Cranial & Peripheral Nerve Operations	26.7	11.8	1.0	15.9	42.2	2.5	0.0	100.0
75 Other Obstetric Operations	0.3	51.9	0.4	0.0	45.5	1.9	0.0	100.0
85 Operations on the Breast	21.0	8.5	1.2	0.0	64.8	4.5	0.0	100.0
81 Joint Repair & Plastic Operations	15.2	11.0	0.6	13.2	56.8	3.1	0.0	100.0
38 Vessel Incision, Excision, Occlusion	25.0	6.0	6.0	0.3	62.1	0.6	0.0	100.0
53 Repair of Hernia	24.4	13.2	0.4	5.5	53.8	2.8	0.0	100.0
48 Other Rectal & Perirectal Operations	30.3	6.8	0.5	0.0	61.5	0.9	0.1	100.0
69 Other Uterus & Supporting Structure Operations	9.1	17.8	0.7	0.0	63.9	8.5	0.0	100.0
20 Other Middle & Inner Ear Operations	1.4	47.4	0.8	0.1	49.4	1.0	0.0	100.0
37 Other Heart & Pericardium Operations	46.6	8.0	0.3	0.1	43.9	1.2	0.0	100.0
51 Biliary Tract Operations	23.5	16.9	0.9	0.0	54.2	4.6	0.0	100.0
83 Other Muscle, Tendon, Fascia, Bursa Operations	22.0	10.5	1.1	13.3	49.9	3.2	0.0	100.0
57 Urinary Bladder Operations	57.3	7.1	0.6	0.0	33.1	2.0	0.0	100.0
82 Hand Muscle, Tendon, Fascia Operations	23.8	10.4	0.7	8.8	54.0	2.4	0.0	100.0
77 Incision, Excision, Division of Bone, NEC	20.6	11.6	1.4	4.1	60.4	1.8	0.0	100.0
All Other Procedures	22.2	20.4	0.7	1.9	50.5	4.2	0.0	100.0
Total	28.6	13.0	0.9	3.1	51.9	2.6	0.0	100.0

Procedure groups are created using the first procedure on each record which is in the ICD-9-CM code range 00.0 - 86.99, grouped by first two digits of procedure code.

"Other" payer includes self-pay, no charge, and other sources of payment

These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures (see discussion in the User's Guide to Outpatient Procedure Tables for details).

Table O4
Top 20 Outpatient Procedure Groups by Primary Payer for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures, Average Charges, and Row and Column Percents

Column Percents

Primary Payer

ICD-9 Procedure	Medicare	Medicaid	Other Gov.	Workers Comp.	Private Ins.	Other	Unknown	Total
45 Intestinal Incision, Excision, Anastomosis	32.7	16.0	23.4	0.2	34.4	21.9	0.0	30.1
13 Operations on Lens of Eye	16.8	1.7	2.3	0.1	2.2	4.1	0.0	6.3
03 Spinal Cord & Canal Operations	6.6	5.1	8.3	22.3	4.5	2.9	0.0	5.7
86 Skin & Subcutaneous Tissue Operations	3.9	4.0	2.3	1.2	4.0	5.7	0.0	3.9
80 Incision, Excision of Joint	1.8	2.9	3.8	17.0	4.5	3.2	0.0	3.9
04 Cranial & Peripheral Nerve Operations	3.4	3.4	4.2	19.1	3.0	3.5	0.0	3.7
75 Other Obstetric Operations	0.0	13.7	1.5	0.0	3.0	2.6	0.0	3.4
85 Operations on the Breast	2.1	1.8	3.8	0.0	3.5	4.9	0.0	2.8
81 Joint Repair & Plastic Operations	1.4	2.3	2.0	11.7	3.0	3.3	0.0	2.7
38 Vessel Incision, Excision, Occlusion	2.4	1.2	18.9	0.2	3.2	0.6	0.0	2.7
53 Repair of Hernia	2.3	2.7	1.2	4.8	2.8	2.9	0.0	2.7
48 Other Rectal & Perirectal Operations	2.4	1.2	1.3	0.0	2.7	0.8	100.0	2.2
69 Other Uterus & Supporting Structure Operations	0.5	2.3	1.3	0.0	2.1	5.6	0.0	1.7
20 Other Middle & Inner Ear Operations	0.1	6.1	1.6	0.0	1.6	0.6	0.0	1.7
37 Other Heart & Pericardium Operations	2.4	0.9	0.6	0.0	1.3	0.7	0.0	1.5
51 Biliary Tract Operations	1.2	1.9	1.5	0.0	1.5	2.6	0.0	1.5
83 Other Muscle, Tendon, Fascia, Bursa Operations	1.1	1.2	1.9	6.3	1.4	1.8	0.0	1.5
57 Urinary Bladder Operations	2.7	0.7	0.9	0.0	0.9	1.1	0.0	1.4
82 Hand Muscle, Tendon, Fascia Operations	1.1	1.1	1.0	3.8	1.4	1.2	0.0	1.3
77 Incision, Excision, Division of Bone, NEC	0.9	1.2	2.2	1.8	1.5	0.9	0.0	1.3
All Other Procedures	14.0	28.6	15.8	11.2	17.6	29.2	0.0	18.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Procedure groups are created using the first procedure on each record which is in the ICD-9-CM code range 00.0 - 86.99, grouped by first two digits of procedure code.

"Other" payer includes self-pay, no charge, and other sources of payment

These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures (see discussion in the User's Guide to Outpatient Procedure Tables for details).

Table O5
Top 20 Outpatient Procedure Groups by Vermont Hospitals for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Average Charges

		BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	VA	Total
45	Intestinal Incision, Excision, Anastomosis																
	Num	1,238	2,532	891	8,070	561	1	335	1,054	765	2,049	953	2,804	1,898	808	3	23,962
	$	1,265	1,641	1,406	1,660	3,114	284	1,939	2,684	2,020	1,226	1,605	912	1,202	1,063	--	1,539
13	Operations on Lens of Eye																
	Num	407	486	127	1,063	633	0	82	306	566	238	383	284	226	205	0	5,006
	$	2,402	2,482	4,025	3,624	3,577	--	6,283	4,850	3,673	3,989	3,449	4,121	3,054	3,628	--	3,548
03	Spinal Cord & Canal Operations																
	Num	170	384	12	2,672	68	0	56	3	41	793	0	174	166	0	11	4,550
	$	753	795	804	1,069	1,067	--	16,638	3,403	1,963	422	--	489	556	--	--	1,081
86	Skin & Subcutaneous Tissue Operations																
	Num	71	252	152	1,162	58	1	48	62	60	418	66	427	261	44	47	3,129
	$	3,700	2,496	1,610	2,709	4,356	1,982	2,914	3,672	3,257	931	4,018	1,510	1,766	3,997	590	2,277
80	Incision, Excision of Joint																
	Num	214	254	232	1,154	33	0	34	9	100	230	98	383	203	127	1	3,072
	$	4,406	4,366	10,529	5,079	6,093	--	6,829	8,664	8,176	5,311	6,621	5,075	4,081	4,925	--	5,520
04	Cranial & Peripheral Nerve Operations																
	Num	104	195	64	1,567	61	0	49	84	46	251	87	194	132	101	0	2,935
	$	2,263	2,457	4,960	2,067	4,512	--	4,947	3,012	5,582	1,973	4,184	2,819	3,342	1,239	--	2,477
75	Other Obstetric Operations																
	Num	0	100	13	1,656	40	0	0	40	447	379	0	0	42	4	0	2,721
	$	--	301	1,472	545	722	--	--	818	347	380	--	--	702	2,887	--	495
85	Operations on the Breast																
	Num	54	277	54	1,216	27	0	31	67	17	120	52	184	101	35	0	2,235
	$	4,738	3,552	6,516	3,920	6,698	--	7,157	5,525	4,564	2,252	5,652	3,051	3,500	3,433	--	3,942
81	Joint Repair & Plastic Operations																
	Num	108	139	95	1,006	113	0	60	5	37	124	60	223	148	36	7	2,161
	$	6,544	7,663	14,173	6,121	695	--	12,045	14,858	7,743	7,271	12,454	7,590	6,174	8,912	--	6,971
38	Vessel Incision, Excision, Occlusion																
	Num	11	62	21	484	11	0	6	19	356	151	4	96	61	20	856	2,158
	$	3,506	3,819	2,048	4,583	11,044	--	7,163	3,553	1,882	615	4,046	2,381	3,248	327	--	3,040

Table O5
Top 20 Outpatient Procedure Groups by Vermont Hospitals for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Average Charges

	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	VA	Total
53 Repair of Hernia																
Num	114	195	83	692	51	0	27	117	76	198	115	224	197	54	0	2,143
$	3,905	4,430	7,872	4,688	6,855	--	8,092	6,842	7,803	4,460	6,759	4,113	4,966	4,475	--	5,119
48 Other Rectal & Perirectal Operations																
Num	48	210	83	614	49	0	1	80	46	168	59	166	186	80	1	1,791
$	1,534	1,691	1,588	1,985	3,400	--	2,343	2,867	2,363	1,325	1,707	1,160	1,278	1,295	--	1,756
69 Other Uterus & Supporting Structure Operations																
Num	37	95	38	511	16	0	3	34	38	70	58	139	207	109	1	1,356
$	3,294	2,881	4,126	2,648	6,228	--	4,953	4,268	4,971	2,530	4,564	2,594	3,234	3,581	--	3,109
20 Other Middle & Inner Ear Operations																
Num	73	88	2	700	5	0	5	40	25	101	109	90	78	16	0	1,332
$	2,729	2,067	4,822	2,844	4,027	--	6,468	2,811	4,588	2,052	3,844	1,857	1,870	1,939	--	2,727
37 Other Heart & Pericardium Operations																
Num	4	3	0	1,080	0	0	0	0	4	0	0	83	15	1	0	1,190
$	12,076	14,056	--	8,098	--	--	--	--	22,534	--	--	6,977	13,928	3,469	--	8,166
51 Biliary Tract Operations																
Num	63	132	60	355	19	0	20	51	37	121	43	142	97	34	0	1,174
$	5,378	6,614	11,125	6,858	14,387	--	8,597	8,534	12,508	6,952	10,826	7,590	5,798	9,182	--	7,597
83 Other Muscle, Tendon, Fascia, Bursa Operations																
Num	67	117	76	345	42	0	15	14	65	130	55	96	110	26	3	1,161
$	5,118	7,110	13,917	5,056	5,182	--	8,361	4,840	7,988	4,235	11,599	5,609	4,287	7,671	--	6,308
57 Urinary Bladder Operations																
Num	44	262	74	260	124	0	9	18	49	34	34	99	57	0	13	1,077
$	4,064	1,855	1,168	5,608	2,088	--	3,110	9,300	5,847	2,824	6,633	4,046	6,269	--	132	3,759
82 Hand Muscle, Tendon, Fascia Operations																
Num	71	73	39	452	7	0	17	2	63	69	17	126	79	34	0	1,049
$	2,159	2,472	4,660	1,899	4,470	--	5,805	3,629	2,903	2,426	4,336	1,735	1,570	1,672	--	2,226
77 Incision, Excision, Division of Bone, NEC																
Num	48	43	32	302	61	1	5	12	95	91	77	100	138	33	0	1,038
$	4,361	3,947	11,119	3,933	8,251	957	7,907	6,273	6,586	3,776	7,198	3,991	3,745	4,774	--	4,949

Table O5
Top 20 Outpatient Procedure Groups by Vermont Hospitals for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Average Charges

	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	VA	Total
All Other Procedures																
Num	774	857	549	6,426	317	0	149	335	466	1,116	497	1,488	1,150	299	11	14,434
$	3,743	3,375	6,142	4,598	5,439	--	7,082	5,908	5,398	3,044	5,998	3,386	3,554	4,971	--	4,366
Hospital Total																
Num	3,720	6,756	2,697	31,787	2,296	3	952	2,352	3,399	6,851	2,767	7,522	5,552	2,066	954	79,674
$	2,721	2,568	4,899	3,161	3,860	1,074	5,762	4,017	3,492	2,072	4,223	2,568	2,638	2,889	465	3,081

Charge data should be used with caution. See discussion in the User's Guide to Outpatient Procedure Tables for details.
Records with missing charges are included in the number of procedures reported but excluded from the average charges.
Procedure groups are created using the first procedure on each record which is in the ICD-9-CM code range 00.0 - 86.99, grouped by first two digits of procedure code.
These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures (see discussion in the User's Guide to Outpatient Procedure Tables for details).

Table O6
Outpatient Procedure Groups by Vermont Hospitals for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Column Percents

	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	VA	Total
00 Procedures and Interventions, NEC																
Num	0	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
01 Incision, Excision of Brain, Skull																
Num	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
02 Other Brain, Skull Operations																
Num	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
03 Spinal Cord & Canal Operations																
Num	170	384	12	2,672	68	0	56	3	41	793	0	174	166	0	11	4,550
Col %	4.6	5.7	0.4	8.4	3.0	0.0	5.9	0.1	1.2	11.6	0.0	2.3	3.0	0.0	1.2	5.7
04 Cranial & Peripheral Nerve Operations																
Num	104	195	64	1,567	61	0	49	84	46	251	87	194	132	101	0	2,935
Col %	2.8	2.9	2.4	4.9	2.7	0.0	5.1	3.6	1.4	3.7	3.1	2.6	2.4	4.9	0.0	3.7
05 Sympathetic Nerve Operations																
Num	0	6	0	93	3	0	0	0	0	106	0	0	1	0	0	209
Col %	0.0	0.1	0.0	0.3	0.1	0.0	0.0	0.0	0.0	1.5	0.0	0.0	0.0	0.0	0.0	0.3
06 Thyroid, Parathyroid Operations																
Num	13	2	1	256	2	0	0	1	0	7	1	16	6	0	0	305
Col %	0.3	0.0	0.0	0.8	0.1	0.0	0.0	0.0	0.0	0.1	0.0	0.2	0.1	0.0	0.0	0.4
07 Other Endocrine Gland Operations																
Num	0	0	0	3	0	0	0	0	0	0	0	0	2	0	0	5
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
08 Eyelid Operations																
Num	14	4	1	234	1	0	3	3	2	23	21	8	12	8	0	334
Col %	0.4	0.1	0.0	0.7	0.0	0.0	0.3	0.1	0.1	0.3	0.8	0.1	0.2	0.4	0.0	0.4
09 Lacrimal System Operations																
Num	3	2	0	46	1	0	0	1	0	12	1	0	1	0	0	67
Col %	0.1	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.1

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10 Conjunctival Operations																
Num	1	1	0	13	0	0	0	2	2	3	1	0	0	0	0	23
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
11 Operations on Cornea																
Num	3	0	0	57	0	0	0	0	5	4	4	0	3	1	0	77
Col %	0.1	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.1	0.1	0.1	0.0	0.1	0.0	0.0	0.1
12 Anterior Eye Segment Operations																
Num	16	19	0	48	0	0	1	2	40	11	7	125	11	5	1	286
Col %	0.4	0.3	0.0	0.2	0.0	0.0	0.1	0.1	1.2	0.2	0.3	1.7	0.2	0.2	0.1	0.4
13 Operations on Lens of Eye																
Num	407	486	127	1,063	633	0	82	306	566	238	383	284	226	205	0	5,006
Col %	10.9	7.2	4.7	3.3	27.6	0.0	8.6	13.0	16.7	3.5	13.8	3.8	4.1	9.9	0.0	6.3
14 Posterior Eye Segment Operations																
Num	17	7	0	164	2	0	0	0	18	0	2	19	4	0	0	233
Col %	0.5	0.1	0.0	0.5	0.1	0.0	0.0	0.0	0.5	0.0	0.1	0.3	0.1	0.0	0.0	0.3
15 Extraocular Muscle Operations																
Num	1	0	0	114	14	0	0	0	1	2	0	0	2	1	0	135
Col %	0.0	0.0	0.0	0.4	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2
16 Orbit & Eyeball Operations																
Num	0	0	0	25	1	0	0	0	0	1	0	0	0	1	0	28
Col %	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
18 External Ear Operations																
Num	8	11	10	60	1	0	1	1	4	14	7	9	9	0	0	135
Col %	0.2	0.2	0.4	0.2	0.0	0.0	0.1	0.0	0.1	0.2	0.3	0.1	0.2	0.0	0.0	0.2
19 Middle Ear Reconstructions																
Num	2	12	0	64	0	0	2	0	3	1	14	15	9	0	0	122
Col %	0.1	0.2	0.0	0.2	0.0	0.0	0.2	0.0	0.1	0.0	0.5	0.2	0.2	0.0	0.0	0.2
20 Other Middle & Inner Ear Operations																
Num	73	88	2	700	5	0	5	40	25	101	109	90	78	16	0	1,332
Col %	2.0	1.3	0.1	2.2	0.2	0.0	0.5	1.7	0.7	1.5	3.9	1.2	1.4	0.8	0.0	1.7

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21 Operations on Nose																
Num	48	14	8	206	1	0	50	7	17	76	12	148	56	5	3	651
Col %	1.3	0.2	0.3	0.6	0.0	0.0	5.3	0.3	0.5	1.1	0.4	2.0	1.0	0.2	0.3	0.8
22 Nasal Sinus Operations																
Num	23	9	0	83	0	0	1	0	6	16	16	22	11	0	0	187
Col %	0.6	0.1	0.0	0.3	0.0	0.0	0.1	0.0	0.2	0.2	0.6	0.3	0.2	0.0	0.0	0.2
23 Tooth Removal & Restoration																
Num	3	3	141	264	0	0	0	0	5	1	0	36	103	10	0	566
Col %	0.1	0.0	5.2	0.8	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.5	1.9	0.5	0.0	0.7
24 Other Operations on Teeth & Gums																
Num	1	0	1	4	0	0	0	0	0	0	0	0	0	0	0	6
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
25 Operations on Tongue																
Num	18	4	1	15	1	0	0	2	0	4	4	11	2	1	0	63
Col %	0.5	0.1	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.1	0.1	0.1	0.0	0.0	0.0	0.1
26 Salivary Gland Operations																
Num	5	4	1	30	0	0	0	1	4	7	1	15	1	0	0	69
Col %	0.1	0.1	0.0	0.1	0.0	0.0	0.0	0.0	0.1	0.1	0.0	0.2	0.0	0.0	0.0	0.1
27 Other Mouth & Face Operations																
Num	16	3	6	37	4	0	0	2	4	13	7	25	9	1	0	127
Col %	0.4	0.0	0.2	0.1	0.2	0.0	0.0	0.1	0.1	0.2	0.3	0.3	0.2	0.0	0.0	0.2
28 Tonsil & Adenoid Operations																
Num	132	71	2	252	1	0	30	13	50	107	83	132	100	4	0	977
Col %	3.5	1.1	0.1	0.8	0.0	0.0	3.2	0.6	1.5	1.6	3.0	1.8	1.8	0.2	0.0	1.2
29 Operations on Pharynx																
Num	3	2	0	15	0	0	0	0	0	0	2	6	3	0	0	31
Col %	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.1	0.0	0.0	0.0
30 Excision of Larynx																
Num	16	6	0	40	0	0	0	0	4	8	2	7	12	0	0	95
Col %	0.4	0.1	0.0	0.1	0.0	0.0	0.0	0.0	0.1	0.1	0.1	0.1	0.2	0.0	0.0	0.1

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31 Larynx, Trachea Operations, NEC																
Num	12	10	0	45	0	0	0	3	5	4	8	28	10	2	0	127
Col %	0.3	0.1	0.0	0.1	0.0	0.0	0.0	0.1	0.1	0.1	0.3	0.4	0.2	0.1	0.0	0.2
32 Lung & Bronchus Excision																
Num	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
33 Other Bronchial & Lung Operations																
Num	11	48	0	295	0	0	1	20	1	4	0	65	44	5	0	494
Col %	0.3	0.7	0.0	0.9	0.0	0.0	0.1	0.9	0.0	0.1	0.0	0.9	0.8	0.2	0.0	0.6
34 Thorax Operations Except Lung																
Num	8	4	0	71	7	0	0	1	1	3	0	6	14	0	1	116
Col %	0.2	0.1	0.0	0.2	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.3	0.0	0.1	0.1
36 Operations on Heart Vessels																
Num	0	0	0	73	0	0	0	0	0	0	0	0	0	0	0	73
Col %	0.0	0.0	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1
37 Other Heart & Pericardium Operations																
Num	4	3	0	1,080	0	0	0	0	4	0	0	83	15	1	0	1,190
Col %	0.1	0.0	0.0	3.4	0.0	0.0	0.0	0.0	0.1	0.0	0.0	1.1	0.3	0.0	0.0	1.5
38 Vessel Incision, Excision, Occlusion																
Num	11	62	21	484	11	0	6	19	356	151	4	96	61	20	856	2,158
Col %	0.3	0.9	0.8	1.5	0.5	0.0	0.6	0.8	10.5	2.2	0.1	1.3	1.1	1.0	89.7	2.7
39 Other Operations on Vessels																
Num	0	5	0	402	0	0	0	0	0	7	0	43	1	0	0	458
Col %	0.0	0.1	0.0	1.3	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.6	0.0	0.0	0.0	0.6
40 Lymphatic System Operations																
Num	15	19	13	91	6	0	2	11	7	15	6	29	22	8	0	244
Col %	0.4	0.3	0.5	0.3	0.3	0.0	0.2	0.5	0.2	0.2	0.2	0.4	0.4	0.4	0.0	0.3

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41 Bone Marrow & Spleen Operations																
Num	0	0	2	65	1	0	1	1	6	5	0	0	1	4	0	86
Col %	0.0	0.0	0.1	0.2	0.0	0.0	0.1	0.0	0.2	0.1	0.0	0.0	0.0	0.2	0.0	0.1
42 Operations on Esophagus																
Num	58	71	22	237	7	0	2	6	9	12	11	88	17	1	0	541
Col %	1.6	1.1	0.8	0.7	0.3	0.0	0.2	0.3	0.3	0.2	0.4	1.2	0.3	0.0	0.0	0.7
43 Incision, Excision of Stomach																
Num	0	8	3	59	2	0	1	10	2	18	2	10	22	0	0	137
Col %	0.0	0.1	0.1	0.2	0.1	0.0	0.1	0.4	0.1	0.3	0.1	0.1	0.4	0.0	0.0	0.2
44 Other Operations on Stomach																
Num	1	7	2	172	0	0	3	1	2	35	2	6	9	2	0	242
Col %	0.0	0.1	0.1	0.5	0.0	0.0	0.3	0.0	0.1	0.5	0.1	0.1	0.2	0.1	0.0	0.3
45 Intestinal Incision, Excision, Anastomosis																
Num	1,238	2,532	891	8,070	561	1	335	1,054	765	2,049	953	2,804	1,898	808	3	23,962
Col %	33.3	37.5	33.0	25.4	24.4	33.3	35.2	44.8	22.5	29.9	34.4	37.3	34.2	39.1	0.3	30.1
46 Other Intestinal Operations																
Num	0	0	0	15	0	0	0	3	0	2	1	0	2	0	0	23
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
47 Operations on Appendix																
Num	1	2	0	8	4	0	1	7	1	5	1	0	2	1	2	35
Col %	0.0	0.0	0.0	0.0	0.2	0.0	0.1	0.3	0.0	0.1	0.0	0.0	0.0	0.0	0.2	0.0
48 Other Rectal & Perirectal Operations																
Num	48	210	83	614	49	0	1	80	46	168	59	166	186	80	1	1,791
Col %	1.3	3.1	3.1	1.9	2.1	0.0	0.1	3.4	1.4	2.5	2.1	2.2	3.4	3.9	0.1	2.2
49 Operations on Anus																
Num	8	36	4	201	8	0	4	20	17	37	16	49	18	9	0	427
Col %	0.2	0.5	0.1	0.6	0.3	0.0	0.4	0.9	0.5	0.5	0.6	0.7	0.3	0.4	0.0	0.5
50 Operations on Liver																
Num	23	18	2	241	0	0	1	0	0	0	0	60	12	0	0	357
Col %	0.6	0.3	0.1	0.8	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.8	0.2	0.0	0.0	0.4

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51 Biliary Tract Operations																
Num	63	132	60	355	19	0	20	51	37	121	43	142	97	34	0	1,174
Col %	1.7	2.0	2.2	1.1	0.8	0.0	2.1	2.2	1.1	1.8	1.6	1.9	1.7	1.6	0.0	1.5
52 Operations on Pancreas																
Num	0	0	0	13	0	0	0	0	0	0	0	0	3	0	0	16
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0
53 Repair of Hernia																
Num	114	195	83	692	51	0	27	117	76	198	115	224	197	54	0	2,143
Col %	3.1	2.9	3.1	2.2	2.2	0.0	2.8	5.0	2.2	2.9	4.2	3.0	3.5	2.6	0.0	2.7
54 Other Abdominal Region Operations																
Num	26	36	19	182	9	0	0	23	28	30	12	32	49	29	1	476
Col %	0.7	0.5	0.7	0.6	0.4	0.0	0.0	1.0	0.8	0.4	0.4	0.4	0.9	1.4	0.1	0.6
55 Operations on Kidney																
Num	0	0	0	115	2	0	0	2	3	0	0	0	4	0	0	126
Col %	0.0	0.0	0.0	0.4	0.1	0.0	0.0	0.1	0.1	0.0	0.0	0.0	0.1	0.0	0.0	0.2
56 Operations on Ureter																
Num	18	13	2	124	0	0	6	3	7	13	1	9	26	0	0	222
Col %	0.5	0.2	0.1	0.4	0.0	0.0	0.6	0.1	0.2	0.2	0.0	0.1	0.5	0.0	0.0	0.3
57 Urinary Bladder Operations																
Num	44	262	74	260	124	0	9	18	49	34	34	99	57	0	13	1,077
Col %	1.2	3.9	2.7	0.8	5.4	0.0	0.9	0.8	1.4	0.5	1.2	1.3	1.0	0.0	1.4	1.4
58 Operations on Urethra																
Num	5	9	2	75	3	0	0	17	4	6	9	24	4	0	0	158
Col %	0.1	0.1	0.1	0.2	0.1	0.0	0.0	0.7	0.1	0.1	0.3	0.3	0.1	0.0	0.0	0.2
59 Other Urinary Tract Operations																
Num	22	35	14	190	9	0	3	25	14	23	20	50	26	4	0	435
Col %	0.6	0.5	0.5	0.6	0.4	0.0	0.3	1.1	0.4	0.3	0.7	0.7	0.5	0.2	0.0	0.5
60 Prostate & Seminal Vesicle Operations																
Num	3	4	15	18	1	0	0	1	22	9	1	3	20	0	1	98
Col %	0.1	0.1	0.6	0.1	0.0	0.0	0.0	0.0	0.6	0.1	0.0	0.0	0.4	0.0	0.1	0.1

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61 Scrotum & Tunica Vaginalis Operations																
Num	4	8	2	37	3	0	1	7	3	6	6	17	10	0	0	104
Col %	0.1	0.1	0.1	0.1	0.1	0.0	0.1	0.3	0.1	0.1	0.2	0.2	0.2	0.0	0.0	0.1
62 Operations on Testes																
Num	6	2	3	72	2	0	0	2	1	5	6	8	7	0	0	114
Col %	0.2	0.0	0.1	0.2	0.1	0.0	0.0	0.1	0.0	0.1	0.2	0.1	0.1	0.0	0.0	0.1
63 Spermatic Cord, Epididymis, Vas Deferens Operations																
Num	3	67	12	70	43	0	4	1	4	17	10	23	5	0	0	259
Col %	0.1	1.0	0.4	0.2	1.9	0.0	0.4	0.0	0.1	0.2	0.4	0.3	0.1	0.0	0.0	0.3
64 Operations on Penis																
Num	11	45	4	113	41	0	2	7	15	17	2	33	12	21	1	324
Col %	0.3	0.7	0.1	0.4	1.8	0.0	0.2	0.3	0.4	0.2	0.1	0.4	0.2	1.0	0.1	0.4
65 Operations on Ovary																
Num	22	29	25	243	9	0	3	10	13	24	10	6	44	31	0	469
Col %	0.6	0.4	0.9	0.8	0.4	0.0	0.3	0.4	0.4	0.4	0.4	0.1	0.8	1.5	0.0	0.6
66 Fallopian Tube Operations																
Num	30	43	29	125	19	0	4	40	33	63	35	63	70	24	0	578
Col %	0.8	0.6	1.1	0.4	0.8	0.0	0.4	1.7	1.0	0.9	1.3	0.8	1.3	1.2	0.0	0.7
67 Operations on Cervix																
Num	6	16	41	72	18	0	3	24	9	49	0	53	100	28	0	419
Col %	0.2	0.2	1.5	0.2	0.8	0.0	0.3	1.0	0.3	0.7	0.0	0.7	1.8	1.4	0.0	0.5
68 Other Uterine Incision, Excision																
Num	48	4	20	118	37	0	1	20	36	95	33	5	61	23	0	501
Col %	1.3	0.1	0.7	0.4	1.6	0.0	0.1	0.9	1.1	1.4	1.2	0.1	1.1	1.1	0.0	0.6
69 Other Uterus & Supporting Structure Operations																
Num	37	95	38	511	16	0	3	34	38	70	58	139	207	109	1	1,356
Col %	1.0	1.4	1.4	1.6	0.7	0.0	0.3	1.4	1.1	1.0	2.1	1.8	3.7	5.3	0.1	1.7
70 Vagina & Cul-de-Sac Operations																
Num	8	3	17	103	4	0	0	4	5	18	5	9	16	7	0	199
Col %	0.2	0.0	0.6	0.3	0.2	0.0	0.0	0.2	0.1	0.3	0.2	0.1	0.3	0.3	0.0	0.2

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71 Vulvar & Perineal Operations																
Num	6	7	3	51	2	0	1	6	2	20	9	11	7	5	0	130
Col %	0.2	0.1	0.1	0.2	0.1	0.0	0.1	0.3	0.1	0.3	0.3	0.1	0.1	0.2	0.0	0.2
73 Assisting, Inducing Delivery, NEC																
Num	0	1	1	35	15	0	0	0	3	1	2	0	5	0	0	63
Col %	0.0	0.0	0.0	0.1	0.7	0.0	0.0	0.0	0.1	0.0	0.1	0.0	0.1	0.0	0.0	0.1
74 C-Section, Removal of Fetus																
Num	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Col %	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
75 Other Obstetric Operations																
Num	0	100	13	1,656	40	0	0	40	447	379	0	0	42	4	0	2,721
Col %	0.0	1.5	0.5	5.2	1.7	0.0	0.0	1.7	13.2	5.5	0.0	0.0	0.8	0.2	0.0	3.4
76 Facial Bone & Joint Operations																
Num	0	1	0	29	0	0	0	0	0	19	0	5	3	1	0	58
Col %	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.3	0.0	0.1	0.1	0.0	0.0	0.1
77 Incision, Excision, Division of Bone, NEC																
Num	48	43	32	302	61	1	5	12	95	91	77	100	138	33	0	1,038
Col %	1.3	0.6	1.2	1.0	2.7	33.3	0.5	0.5	2.8	1.3	2.8	1.3	2.5	1.6	0.0	1.3
78 Other Bone Operations Except Face																
Num	39	57	28	223	13	0	7	5	13	88	36	66	73	18	0	666
Col %	1.0	0.8	1.0	0.7	0.6	0.0	0.7	0.2	0.4	1.3	1.3	0.9	1.3	0.9	0.0	0.8
79 Reduction of Fracture, Dislocation																
Num	32	66	89	259	12	0	10	12	31	46	60	85	72	36	1	811
Col %	0.9	1.0	3.3	0.8	0.5	0.0	1.1	0.5	0.9	0.7	2.2	1.1	1.3	1.7	0.1	1.0
80 Incision, Excision of Joint																
Num	214	254	232	1,154	33	0	34	9	100	230	98	383	203	127	1	3,072
Col %	5.8	3.8	8.6	3.6	1.4	0.0	3.6	0.4	2.9	3.4	3.5	5.1	3.7	6.1	0.1	3.9

Table O6
Outpatient Procedure Groups by Vermont Hospitals for Discharges Not Originating in the Emergency Department
2004 VT Hospital Data, Includes VT Residents and Non-Residents
Number of Procedures and Column Percents

	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	VA	Total
81 Joint Repair & Plastic Operations																
Num	108	139	95	1,006	113	0	60	5	37	124	60	223	148	36	7	2,161
Col %	2.9	2.1	3.5	3.2	4.9	0.0	6.3	0.2	1.1	1.8	2.2	3.0	2.7	1.7	0.7	2.7
82 Hand Muscle, Tendon, Fascia Operations																
Num	71	73	39	452	7	0	17	2	63	69	17	126	79	34	0	1,049
Col %	1.9	1.1	1.4	1.4	0.3	0.0	1.8	0.1	1.9	1.0	0.6	1.7	1.4	1.6	0.0	1.3
83 Other Muscle, Tendon, Fascia, Bursa Operations																
Num	67	117	76	345	42	0	15	14	65	130	55	96	110	26	3	1,161
Col %	1.8	1.7	2.8	1.1	1.8	0.0	1.6	0.6	1.9	1.9	2.0	1.3	2.0	1.3	0.3	1.5
84 Other Musculoskeletal Procedures																
Num	4	3	3	43	8	0	0	8	4	4	8	8	2	3	0	98
Col %	0.1	0.0	0.1	0.1	0.3	0.0	0.0	0.3	0.1	0.1	0.3	0.1	0.0	0.1	0.0	0.1
85 Operations on the Breast																
Num	54	277	54	1,216	27	0	31	67	17	120	52	184	101	35	0	2,235
Col %	1.5	4.1	2.0	3.8	1.2	0.0	3.3	2.8	0.5	1.8	1.9	2.4	1.8	1.7	0.0	2.8
86 Skin & Subcutaneous Tissue Operations																
Num	71	252	152	1,162	58	1	48	62	60	418	66	427	261	44	47	3,129
Col %	1.9	3.7	5.6	3.7	2.5	33.3	5.0	2.6	1.8	6.1	2.4	5.7	4.7	2.1	4.9	3.9
Hospital Totals																
Num	3,720	6,756	2,697	31,787	2,296	3	952	2,352	3,399	6,851	2,767	7,522	5,552	2,066	954	79,674
Col %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

Procedure groups are created using the first procedure on each record which is in the ICD-9-CM code range 00.0-86.99, grouped by the first two digits of the procedure code.

These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures (see discussion in the User's Guide to Outpatient Procedure Tables for details).

Table O7
Top 20 Outpatient Procedure Groups by VT, NH and NY Hospitals for Discharges Not Originating in the Emergency Department
2004 VT, NH and NY Hospital Data, VT Residents Only
Number of Procedures and Row Percents

	BRAT	CVMC	COPL	DHMC	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	VA	Other NH	NY Hosps	Total
45 Intestinal Incision, Excision, Anastomosis																			
Num	1,072	2,520	890	2,429	7,628	555	1	277	1,044	753	2,030	888	2,679	1,402	742	2	749	28	25,689
Row %	4.2	9.8	3.5	9.5	29.7	2.2	0.0	1.1	4.1	2.9	7.9	3.5	10.4	5.5	2.9	0.0	2.9	0.1	100.0
13 Operations on Lens of Eye																			
Num	339	484	127	236	1,024	590	0	58	302	414	236	347	273	178	170	0	250	27	5,055
Row %	6.7	9.6	2.5	4.7	20.3	11.7	0.0	1.1	6.0	8.2	4.7	6.9	5.4	3.5	3.4	0.0	4.9	0.5	100.0
03 Spinal Cord & Canal Operations																			
Num	136	381	12	39	1,908	66	0	26	3	40	718	0	153	113	0	3	131	18	3,747
Row %	3.6	10.2	0.3	1.0	50.9	1.8	0.0	0.7	0.1	1.1	19.2	0.0	4.1	3.0	0.0	0.1	3.5	0.5	100.0
80 Incision, Excision of Joint																			
Num	172	254	230	226	1,039	32	0	19	8	96	229	93	359	158	106	0	194	22	3,237
Row %	5.3	7.8	7.1	7.0	32.1	1.0	0.0	0.6	0.2	3.0	7.1	2.9	11.1	4.9	3.3	0.0	6.0	0.7	100.0
86 Skin & Subcutaneous Tissue Operations																			
Num	59	250	151	224	1,030	57	1	42	60	58	413	60	395	188	38	30	108	36	3,200
Row %	1.8	7.8	4.7	7.0	32.2	1.8	0.0	1.3	1.9	1.8	12.9	1.9	12.3	5.9	1.2	0.9	3.4	1.1	100.0
04 Cranial & Peripheral Nerve Operations																			
Num	80	194	63	90	1,225	53	0	39	84	45	246	79	175	98	87	0	208	13	2,779
Row %	2.9	7.0	2.3	3.2	44.1	1.9	0.0	1.4	3.0	1.6	8.9	2.8	6.3	3.5	3.1	0.0	7.5	0.5	100.0
75 Other Obstetric Operations																			
Num	0	99	13	28	1,610	40	0	0	40	445	376	0	0	25	4	0	26	0	2,706
Row %	0.0	3.7	0.5	1.0	59.5	1.5	0.0	0.0	1.5	16.4	13.9	0.0	0.0	0.9	0.1	0.0	1.0	0.0	100.0
85 Operations on the Breast																			
Num	47	277	54	267	1,118	27	0	16	67	17	119	46	166	69	28	0	59	20	2,397
Row %	2.0	11.6	2.3	11.1	46.6	1.1	0.0	0.7	2.8	0.7	5.0	1.9	6.9	2.9	1.2	0.0	2.5	0.8	100.0
81 Joint Repair & Plastic Operations																			
Num	81	137	95	137	889	111	0	35	5	36	121	56	208	124	31	3	164	23	2,256
Row %	3.6	6.1	4.2	6.1	39.4	4.9	0.0	1.6	0.2	1.6	5.4	2.5	9.2	5.5	1.4	0.1	7.3	1.0	100.0
53 Repair of Hernia																			
Num	96	194	82	160	635	50	0	17	116	76	198	98	202	152	48	0	80	18	2,222
Row %	4.3	8.7	3.7	7.2	28.6	2.3	0.0	0.8	5.2	3.4	8.9	4.4	9.1	6.8	2.2	0.0	3.6	0.8	100.0

Table O7
Top 20 Outpatient Procedure Groups by VT, NH and NY Hospitals for Discharges Not Originating in the Emergency Department
2004 VT, NH and NY Hospital Data, VT Residents Only
Number of Procedures and Row Percents

	BRAT	CVMC	COPL	DHMC	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	VA	Other NH	NY Hosps	Total
38 Vessel Incision, Excision, Occlusion																			
Num	8	61	20	75	446	10	0	3	19	339	151	4	91	51	20	471	6	14	1,789
Row %	0.4	3.4	1.1	4.2	24.9	0.6	0.0	0.2	1.1	18.9	8.4	0.2	5.1	2.9	1.1	26.3	0.3	0.8	100.0
48 Other Rectal & Perirectal Operations																			
Num	39	209	83	78	563	49	0	1	80	44	168	52	153	127	72	1	38	2	1,759
Row %	2.2	11.9	4.7	4.4	32.0	2.8	0.0	0.1	4.5	2.5	9.6	3.0	8.7	7.2	4.1	0.1	2.2	0.1	100.0
37 Other Heart & Pericardium Operations																			
Num	3	3	0	511	791	0	0	0	0	4	0	0	76	14	1	0	13	100	1,516
Row %	0.2	0.2	0.0	33.7	52.2	0.0	0.0	0.0	0.0	0.3	0.0	0.0	5.0	0.9	0.1	0.0	0.9	6.6	100.0
69 Other Uterus & Supporting Structure Operations																			
Num	26	95	38	71	486	15	0	2	34	35	69	47	131	146	95	0	36	4	1,330
Row %	2.0	7.1	2.9	5.3	36.5	1.1	0.0	0.2	2.6	2.6	5.2	3.5	9.8	11.0	7.1	0.0	2.7	0.3	100.0
51 Biliary Tract Operations																			
Num	47	131	60	127	289	19	0	17	51	37	121	39	136	72	33	0	44	0	1,223
Row %	3.8	10.7	4.9	10.4	23.6	1.6	0.0	1.4	4.2	3.0	9.9	3.2	11.1	5.9	2.7	0.0	3.6	0.0	100.0
20 Other Middle & Inner Ear Operations																			
Num	58	88	2	80	522	5	0	4	40	23	101	96	90	73	13	0	10	4	1,209
Row %	4.8	7.3	0.2	6.6	43.2	0.4	0.0	0.3	3.3	1.9	8.4	7.9	7.4	6.0	1.1	0.0	0.8	0.3	100.0
83 Other Muscle, Tendon, Fascia, Bursa Operations																			
Num	55	117	75	97	297	40	0	11	14	59	130	51	92	93	19	2	47	6	1,205
Row %	4.6	9.7	6.2	8.0	24.6	3.3	0.0	0.9	1.2	4.9	10.8	4.2	7.6	7.7	1.6	0.2	3.9	0.5	100.0
57 Urinary Bladder Operations																			
Num	37	262	74	66	240	123	0	8	18	47	32	32	87	36	0	7	62	8	1,139
Row %	3.2	23.0	6.5	5.8	21.1	10.8	0.0	0.7	1.6	4.1	2.8	2.8	7.6	3.2	0.0	0.6	5.4	0.7	100.0
77 Incision, Excision, Division of Bone, NEC																			
Num	38	43	32	37	276	57	0	3	11	95	89	73	97	101	33	0	60	5	1,050
Row %	3.6	4.1	3.0	3.5	26.3	5.4	0.0	0.3	1.0	9.0	8.5	7.0	9.2	9.6	3.1	0.0	5.7	0.5	100.0
82 Hand Muscle, Tendon, Fascia Operations																			
Num	55	73	39	61	411	7	0	13	2	60	69	16	120	55	29	0	33	2	1,045
Row %	5.3	7.0	3.7	5.8	39.3	0.7	0.0	1.2	0.2	5.7	6.6	1.5	11.5	5.3	2.8	0.0	3.2	0.2	100.0

Table O7
Top 20 Outpatient Procedure Groups by VT, NH and NY Hospitals for Discharges Not Originating in the Emergency Department
2004 VT, NH and NY Hospital Data, VT Residents Only
Number of Procedures and Row Percents

	BRAT	CVMC	COPL	DHMC	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	VA	Other NH	NY Hosps	Total
All Other																			
Num	619	850	546	1,965	5,525	312	0	92	333	410	1,080	436	1,375	895	271	7	586	111	15,413
Row %	4.0	5.5	3.5	12.7	35.8	2.0	0.0	0.6	2.2	2.7	7.0	2.8	8.9	5.8	1.8	0.0	3.8	0.7	100.0
Hospital Totals																			
Num	3,067	6,722	2,686	7,004	27,952	2,218	2	683	2,331	3,133	6,696	2,513	7,058	4,170	1,840	526	2,904	461	81,966
Row %	3.7	8.2	3.3	8.5	34.1	2.7	0.0	0.8	2.8	3.8	8.2	3.1	8.6	5.1	2.2	0.6	3.5	0.6	100.0

Top 20 procedure groups are based on the combined Vermont, New Hampshire, and New York outpatient procedure totals.
Procedure groups are created using the first procedure on each record which is in the ICD-9-CM code range 00.0-86.99, grouped by the first two digits of the procedure code.
New Hampshire data are provided by the New Hampshire Department of Health and Human Services.
New Hampshire outpatient data do not include admission source information. Therefore, all outpatient records with a procedure in the correct ICD-9-CM code range are included.
New York data are provided by the New York Department of Health.
These tables are not comparable to tables published in the 2002 Monograph or prior years because of the expanded definition of outpatient procedures
(see discussion in the User's Guide to Outpatient Procedure Tables for details).