Table 7.11: Hospital Length of Stay and Charges for Children and Adolescents Age 20 and Under with Musculoskeletal (MSK) Pain Syndromes Diagnoses, ¹, by Sex and Age, United States 2012

Number of Hospital Discharges (in 000s)

Sex Age in Years **Hospital Discharges** 1 to 5 6 to 10 11 to 13 14 to 17 18 to 20 Male <u>Female</u> <u><1</u> **Total** Any MSK Pain Syndrome Diagnoses [2] 1.9 2.7 2.8 6.3 9.2 11.6 6.8 20.8 Primary Diagnosis [3] 0.9 1.0 0.3 0.4 0.3 0.5 0.3 1.9 Discharges/Visits for Any MSK Diagnoses 274.2 223.9 178.0 59.9 53.0 47 4 82.8 75.8 498.2 Proportion Any MSK Pain Syndrome to Any MSK Diagnoses 3.4% 5.2% 3.2% 5.1% 5.9% 7.6% 9.0% 4.2% Proportion Primary MSK Pain Syndrome to Any MSK Diagnoses 0.3% 0.4% 0.5% 0.8% 0.6% 0.6% 0.4% 0.4% Discharges/Visits for All Diagnosis 3.194.5 3.478.3 4.270.0 550.4 305.8 221.0 503.0 816.0 6.675.2 Proportion Any MSK Pain Syndrome to All Diagnoses 0.3% 0.3% 0.3% 0.9% 1.3% 1.3% 0.8% 0.3% Proportion Primary MSK Pain Syndrome to All Diagnoses 0.0% 0.0% 0.1% 0.1% 0.1% 0.1% 0.0% 0.0% Mean LOS and Charges **Hospital Charges** Any MSK Pain Syndrome Diagnoses [2] 5.7 Mean Length of Stay 5.6 5.0 6.3 5.3 5.6 Mean Charges [4] (in 1,000 \$s) 45.7 37.5 42.7 37.1 39.0 52.6 43.3 42.0 Total Charges (in million \$s) 420.6 \$ 452.5 71.2 115.2 147.4 \$ 252.1 872.9 Primary Diagnosis [3] Mean Length of Stay 2.6 29 3 4 3 1 3.5 2.1 3 4 3 4 Mean Charges [4] (in 1,000 \$s) 20.5 25.0 15.3 17.5 24.4 25.8 32.6 22.9 Total Charges (in million \$s) 18.5 Ś 25.0 Ś 4.6 Ś 7.0 Ś 7.3 Ś 12.9 9.8 \$ 43.4 Ś

^{*} Data does not meet standards for reliability.

^[1] Includes amplified musculoskeletal pain, juvenile primary fibromyalgia syndrome, reflex sympathetic dystrophy, benign hypermobility syndrome, and benign limb pains.

^[2] The number of possible diagnoses varies by database: KID=25; NEDS=15,NHAMCS_OP=3; NAMCS=3.

^[3] Primary diagnosis defined as the first Dx.

^[4] Average charges are based on individual record discharges. The fees included may vary from patient to patient, but generally include hospital room, supplies, medications, laboratory fees, and care staff, such as nurses. They generally do not include professional fees (doctors) and non-covered charges. In a small proportion of the discharge cases, professional fees (doctors) are not removed from total charges because the data source cannot provide the information. Emergency charges incurred prior to admission to the hospital may be included in total charges.

Source: HCUP Kids' Inpatient Database (KID). Healthcare Cost and Utilization Project (HCUP). 2012. Agency for Healthcare Research and Quality, Rockville, MD. www.hcup-