

8 Principal and additional procedures for admitted patients

Introduction

The *National Health Data Dictionary* Version 7.0 (NHDC 1998) defines a procedure as a clinical intervention that is surgical in nature; carries a procedural risk; carries an anaesthetic risk; requires specialised training; and/or requires special facilities or equipment only available in an acute setting. The principal procedure is defined as the most significant procedure that was performed for treatment of the principal diagnosis. However, the *Dictionary* also states that when no procedure was performed for treatment of the principal diagnosis, other procedures can be reported as the principal procedure. In order these are, a procedure performed for treatment of an additional diagnosis, a diagnostic/exploratory procedure related to the principal diagnosis, or a diagnostic/exploratory procedure related to an additional diagnosis. Procedures therefore encompass surgical procedures and also non-surgical investigative and therapeutic procedures such as X-rays and chemotherapy.

Procedures are not undertaken during all hospital admissions so only a proportion of the separation records includes principal (or additional) procedure data. For example, principal procedures were reported for only 59% of separations with a principal diagnosis within the *Certain infectious and parasitic diseases* chapter.

Principal and additional procedures for 1998–99 were classified, coded and reported to the National Hospital Morbidity Database by Queensland, Western Australia, South Australia and Tasmania using the *Australian Version of the International Classification of Diseases, 9th Revision, Clinical Modification* (ICD-9-CM) (National Coding Centre 1996), and by New South Wales, Victoria, the Australian Capital Territory and the Northern Territory using the *International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification* (ICD-10-AM) (National Centre for Classification in Health 1998). The data reported in ICD-9-CM were mapped by the Institute to ICD-10-AM so that national data could be presented in a single classification in this report. Further information about this mapping is presented in Appendix 4.

The procedure classification is divided into chapters by anatomical site and within each chapter by a 'superior' to 'inferior' (head to toe) approach. These groups are divided into more specific procedure groupings, beginning with the least invasive procedure through to the most invasive. The blocks, which are numbered sequentially, group the very specific procedure codes. The tables and figures in this chapter use the groups of blocks, blocks and abbreviated descriptions. Full descriptions of the categories are available in the ICD-10-AM publication.

Most of the information is presented using three methods of grouping records based on the ICD-10-AM procedure classification:

- ICD-10-AM procedure chapters – these 21 groups provide information aggregated at the ICD-10-AM chapter level (Figures 8.1 and 8.2);
- ICD-10-AM procedure block groupings – these 64 groups were chosen to provide more detailed information than ICD-10-AM chapters, but still cover the entire procedure classification at a manageable level (Tables 8.1 to 8.8). Tables 8.18 and 8.19 present counts of all procedures (principal and additional) using these groupings; and

- ICD-10-AM blocks – these 1,635 categories describe procedures at a quite specific level. Detailed information is presented for the 30 of these groups with the highest number of separations (Tables 8.10 to 8.17) and summary information is provided for all of the groups (for which separations were reported) on the Internet at <http://www.aihw.gov.au/publications/health/ahs98-9.html> (Tables S8.1 and S8.2).

In addition, Table 8.9 presents information on the number of procedures reported (principal and additional procedures).

Tables are presented with summary separation, patient day and average length of stay statistics for public and private hospitals, nationally and by State and Territory. National information on age group and sex distributions is also presented. The data on relative ranking of the various procedure groups (by numbers of separations or patient days) depend to some extent on the chosen groups of procedure codes.

Some data for private hospitals in Tasmania and the Australian Capital Territory have not been included in Tables 8.4, 8.6, 8.13, 8.15 and 8.19. The data were supplied but were not published for confidentiality reasons. Western Australia, Victoria and Tasmania were not able to supply data on procedures for their public psychiatric hospitals.

Overall, there were 4.4 million separations for which a principal procedure was reported, 77% of total separations. Sixteen million patient days were reported for separations with a principal procedure, 73% of the total.

ICD-10-AM chapters

Figures 8.1 and 8.2 provide a summary of the number of separations and patient days by principal procedure, by sector, reported for each of the ICD-10-AM procedure chapter groupings.

The highest number of separations in the public sector was for *Procedures on urinary system*, followed by *Procedures on digestive system*. In the private sector, *Procedures on digestive system* had the largest number of separations, followed *Procedures on musculoskeletal system*.

The highest number of patient days in the public sector was reported for *Allied health interventions*, followed by the *Procedures on digestive system*. In the private sector the highest number of patient days was reported for the *Procedures on digestive system* chapter, followed by the chapter on *Allied health interventions*.

For both sectors together, the two chapters with the most procedures were *Procedures on digestive system*, followed by *Procedures on urinary system*. The two chapters with the largest numbers of patient days were *Allied health interventions* and *Procedures on digestive system*.

Principal procedures were reported for varying proportions of separations in the ICD-10-AM principal diagnoses groups. High proportions of separations for the *Neoplasms* (93%, 370,044), *Diseases of the blood and blood-forming organs* (93%, 66,524), *Diseases of the digestive system* (88%, 599,807) and *Diseases of the genitourinary system* (86%, 311,125) chapters had principal procedures reported. In contrast, principal procedures were reported for smaller proportions of separations with principal diagnoses in the *Mental and behavioural disorders* (65%, 155,112) and *Certain infectious and parasitic diseases* (41%, 36,133) chapters.

Broad procedure groupings

Sector

Public hospitals accounted for 63% of the separations with reported principal procedures (2,774,793), although they accounted for 67% of the separations overall (Tables 8.1 and 8.2). Similarly, although 73% of overall patient days were in public hospitals, only 70% of patient days associated with principal procedures were in public hospitals (11,446,509). This reflected the higher proportion of separations in the private sector that were reported with a principal procedure (88%), compared with the public sector. In public hospitals, 72% of total separations involved a principal procedure (2,774,793), and these separations were associated with 70% of total patient days (11,461,449) (Table 8.1). In contrast, 88% of total separations in private hospitals involved a principal procedure (1,641,124), and these separations were associated with 80% of total patient days (4,865,012) (Table 8.2).

If procedures from Block 1780 onwards (that is, chemotherapeutic and radiation oncology, miscellaneous procedures, imaging services and allied health interventions) are not included, there was a total of 3,365,450 separations reported with a principal procedure. Of these, 1,953,978 separations were reported for same day stays and 1,411,472 were reported for overnight or longer stays. The private sector reported a higher proportion of separations for 'same day procedures' than the public sector. The public sector reported 1,131,876 (56%) and 874,614 (44%) same day separations and overnight or longer stay separations with a principal procedure, respectively, and the private sector reported 822,102 (60%) and 536,858 (40%) separations, respectively (Tables 8.1 and 8.2).

The group of principal procedures that accounted for a large number of separations in public hospitals was *Procedures on kidney* (Blocks 1040–1063). The principal procedure which was reported for most of these separations was *Haemodialysis* (procedure code 13100-00 [1059]); this was reported for 91% (402,748) of this group. Within the *Chemotherapeutic and radiation oncology procedures* group (Blocks 1780–1799), *Chemotherapy, intravenous administration < 1 hours duration* (procedure code 13915-00 [1781]) was the most commonly reported individual procedure (99,978, 69%).

In private hospitals the largest group of principal procedures was *Other procedures on abdomen, peritoneum and hernia* (Blocks 983–1011). The principal procedure which accounted for most of the separations in this group was *Panendoscopy with biopsy* (procedure code 30473-01 [1005]) (97,657), 58% of the group overall. *Procedures on large intestine* (Blocks 904–925) was the second most frequently reported group; *Fibreoptic colonoscopy to caecum* (procedure code 32090-00 [905]) was the most commonly reported individual procedure (84,876, 53%) within this group.

States and Territories

Tables 8.3 to 8.6 contain detail on the pattern of hospital use in the States and Territories by block number, in both the public and private sectors. These tables enable State by State comparisons of overall hospital use for the different procedure groupings, and the share of separations between the private and public sector. For example, the proportion of total separations for *Procedures on skull, brain and meninges* (Blocks 1–28) in public hospitals rather than private was higher in New South Wales (85%, 2,691) than in Queensland (71%, 1,141). The proportion of total patient days for *Other procedures on appendix* (Blocks 926–927) that were reported for private hospitals rather than public hospitals varied by State, from 30% (835) in Western Australia to 16% (1,173) in New South Wales.

Some of these differences among the States and Territories could reflect the fact that data from Queensland, Western Australia, South Australia and Tasmania were mapped from

ICD-9-CM to ICD-10-AM for this report. For example, only jurisdictions that reported in ICD-10-AM had separations recorded for the group *Procedures on neck, thorax and ribs* (Blocks 1373–1380). No ICD-9-CM codes mapped to these ICD-10-AM blocks because the blocks are specific for bones of the neck and thorax. The equivalent ICD-9-CM codes are not, and were mapped to less specific codes in the group *Other procedures for musculoskeletal system* (Blocks 1551–1579). There were relatively more separations for this latter group for ICD-9-CM States.

Age group and sex

In Tables 8.7 and 8.8, information on the number of separations by age group and principal procedure grouping is presented for males and females. These tables show a number of different patterns in the age distributions of separations for the various procedure groups. For example, patients admitted for *Procedures on middle and inner ear and mastoid* (Blocks 307–333) were mostly in the younger age groups, while the opposite was the case for *Procedures on coronary arteries and aorta* (Blocks 667–693). Other groups of procedures had a peak in the middle age groups, for example *Procedures on spinal cord and spinal canal structures* (Blocks 29–60) and *Procedures on nose and sinuses* (Blocks 370–389).

These tables also indicate the relative importance of the procedure groups as causes of hospitalisation for each sex and age group. For example, males in the 15 to 24 years age group commonly had *Procedures on skin and subcutaneous tissue* (Blocks 1600–1660) and *Dental and orthodontic procedures* (Blocks 450–490). For females, the age group with the highest number of separations with a principal procedure was the 25 to 34 years age group. Older females were more frequently reported for groups such as *Procedures on kidney* (Blocks 1040–1063) and *Allied health interventions* (Blocks 2050–2140).

Number of procedure codes

Table 8.9 presents information on the number of procedure codes (principal and additional) reported to the National Hospital Morbidity Database. These counts are of procedure codes as reported in either ICD-9-CM or ICD-10-AM and not as mapped from ICD-9-CM to ICD-10-AM. Thus the data reported for New South Wales, Victoria, the Australian Capital Territory and Northern Territory (ICD-10-AM jurisdictions) are not completely comparable with data reported by South Australia, Western Australia, Tasmania and Queensland (ICD-9-CM jurisdictions).

There were marked differences between the States and Territories in the maximum number of procedures reported (for example, in the public sector, 31 procedures for Queensland, Tasmania and the Northern Territory and 12 for South Australia and Victoria); however, with the exception of Northern Territory, the average number of procedure codes per separation varied little among the jurisdictions, for both the public and private sectors. The Institute requested a maximum of 31 codes so this may have restricted the number of codes reported by some states.

In the public sector 4.3% of records had five or more procedure codes, but in the private sector just over 3.6% of records fell into this category. This may have been due to more complicated cases being treated in public hospitals, or differences in coding practices between the sectors.

High volume procedures

Tables 8.10 to 8.17 present information on the most common principal procedures (at the block level of the ICD-10-AM classification).

Tables 8.10 and 8.11 contain summary separation, patient day and average length of stay statistics for the 30 blocks with the most separations in public and private hospitals. In the public sector, the most common principal procedure blocks were *Haemodialysis* (Block 1059) (426,773 separations) and *Generalised allied health interventions* (Block 2140) (153,312 separations).

For *Haemodialysis* (Block 1059) the average length of stay was 1.1 days and the proportion of separations that were same day separations was 99% (422,551). Separations for which *Generalised allied health interventions* (Block 2140) were reported as the principal procedure had an average length of stay of 12.1 days. The highest number of patient days was reported for separations with principal procedures within the *Generalised allied health interventions* (Block 2140) group (1,854,532), followed by separations with *Computerised tomography of brain* (Block 1952) (488,595) reported as the principal procedure.

In the private sector, the most frequent principal procedure was *Panendoscopy with excision* (Block 1008) (99,220 separations), with the second most frequent being *Fibreoptic colonoscopy* (Block 905) (88,990 separations). The principal procedure reported in association with the highest number of patient days (390,523), *Generalised allied health interventions* (Block 2140), also had the longest average length of stay (12.1 days).

There was some variation between the States and Territories in the relative number of separations for the most common procedure blocks (Tables 8.12 and 8.13), some of which could reflect the fact that data from Queensland, Western Australia, South Australia and Tasmania were mapped from ICD-9-CM to ICD-10-AM for this report. Sometimes, a number of ICD-9-CM codes were mapped to a non-specific code in ICD-10-AM (because of the different axis structures of the classifications; see Appendix 4). Thus, for example, in the public sector there were relatively higher numbers of separations reported by ICD-9-CM States (compared with ICD-10-AM jurisdictions) for Block 1625 *Excision of lesion of skin and subcutaneous tissue not elsewhere classified* and Block 1571 *Other repair procedures on bone of other musculoskeletal sites*. There were relatively more separations for ICD-10-AM jurisdictions for Block 2140 *Generalised allied health interventions* in the public sector and relatively more for ICD-9-CM States for Block 2064 *Physiotherapy diagnostic evaluation*. This was probably largely because an equivalent less specific category (for example for physiotherapy, not further specified) was not available in ICD-9-CM.

Age and sex

There was little difference between males and females in the proportion of separations with principal procedures, with both recording 77% (2,041,097 and 2,374,761, respectively) (Tables 8.16 and 8.17). For both males and females, the group of principal procedures with the most separations was *Haemodialysis* (Block 1059).

For males, the age group for which the highest number of separations with principal procedures was reported was the 65 to 74 years age group (405,158) (Table 8.16). However, there was a great variation in the age distribution for the different blocks, with males under the age of 5 years being the most commonly reported for *Myringotomy* (Block 309), for example. For females the age group with the largest number of separations with principal procedures was the 25 to 34 years age group (389,352) (Table 8.17). Older females were more frequently reported for principal procedure groups such as *Haemodialysis* (Block 1059), *Generalised allied health intervention* (Block 2140) and *Extracapsular crystalline lens extraction by phacoemulsification* (Block 197).

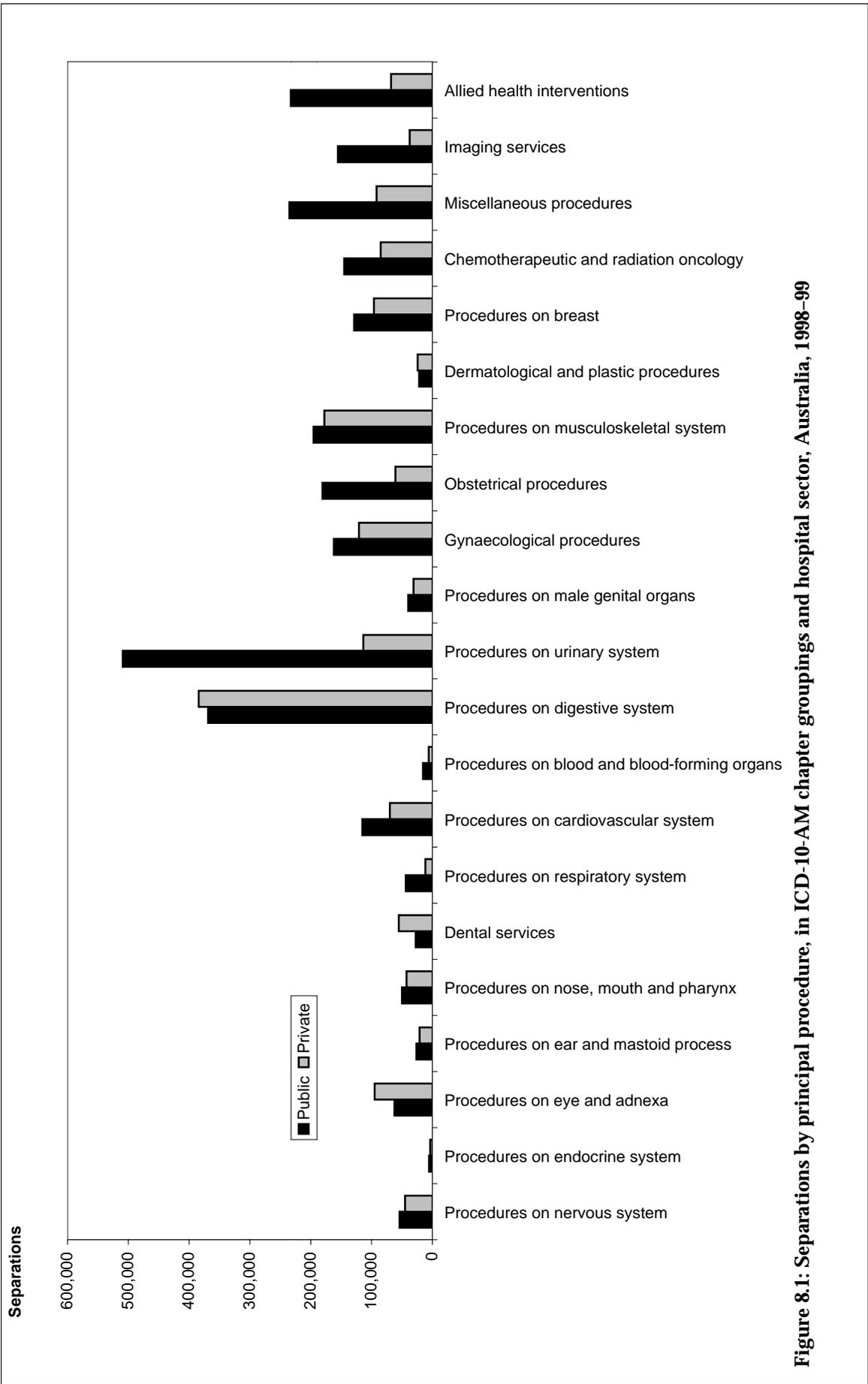
Additional data

The accompanying tables on the Internet at <http://www.aihw.gov.au/publications/health/ahs98-9.html> provide national summary statistics for public and private hospitals for each principal procedure block (as presented for the top 30 procedure blocks in Tables 8.10 and 8.11). For confidentiality, the statistics for some blocks in the private sector have been suppressed. The information was suppressed if there were fewer than 50 private hospital separations reported for the block and there were fewer than three reporting units (hospitals, or States or Territories where the hospitals were not individually identified), or there were three reporting units and one contributed more than 85% of the total separations, or two contributed more than 90% of the separations for the block.

Total procedures

Tables 8.18 and 8.19 provide counts of all the procedures (principal and additional) reported for 1998–99, by State and Territory for the public and private sectors. The totals are the total number of procedures, rather than the total number of separations or separations for which a procedure was reported. Counts of all procedures for groups such as *Procedures on ovaries and fallopian tubes* (Blocks 1240–1258) (71,829), *Induction and augmentation of labour* (Blocks 1330–1335) (165,351) and *Procedures on skin and subcutaneous tissue* (Blocks 1600–1660) (344,636) are much higher than counts of principal procedures (Table 8.1), indicating that these procedures were commonly reported as additional procedures.

The most commonly reported procedure group in public hospitals and private hospitals combined was *Allied health interventions* (Blocks 2050–2140) (300,751). The second largest group for public and private hospitals combined (655,015) was *Miscellaneous non-operative procedures* (Blocks 1820–1899). A block which accounted for many of these was *Transfusion of blood and gamma globulin* (Block 1861), 22% of the group overall (145,535).



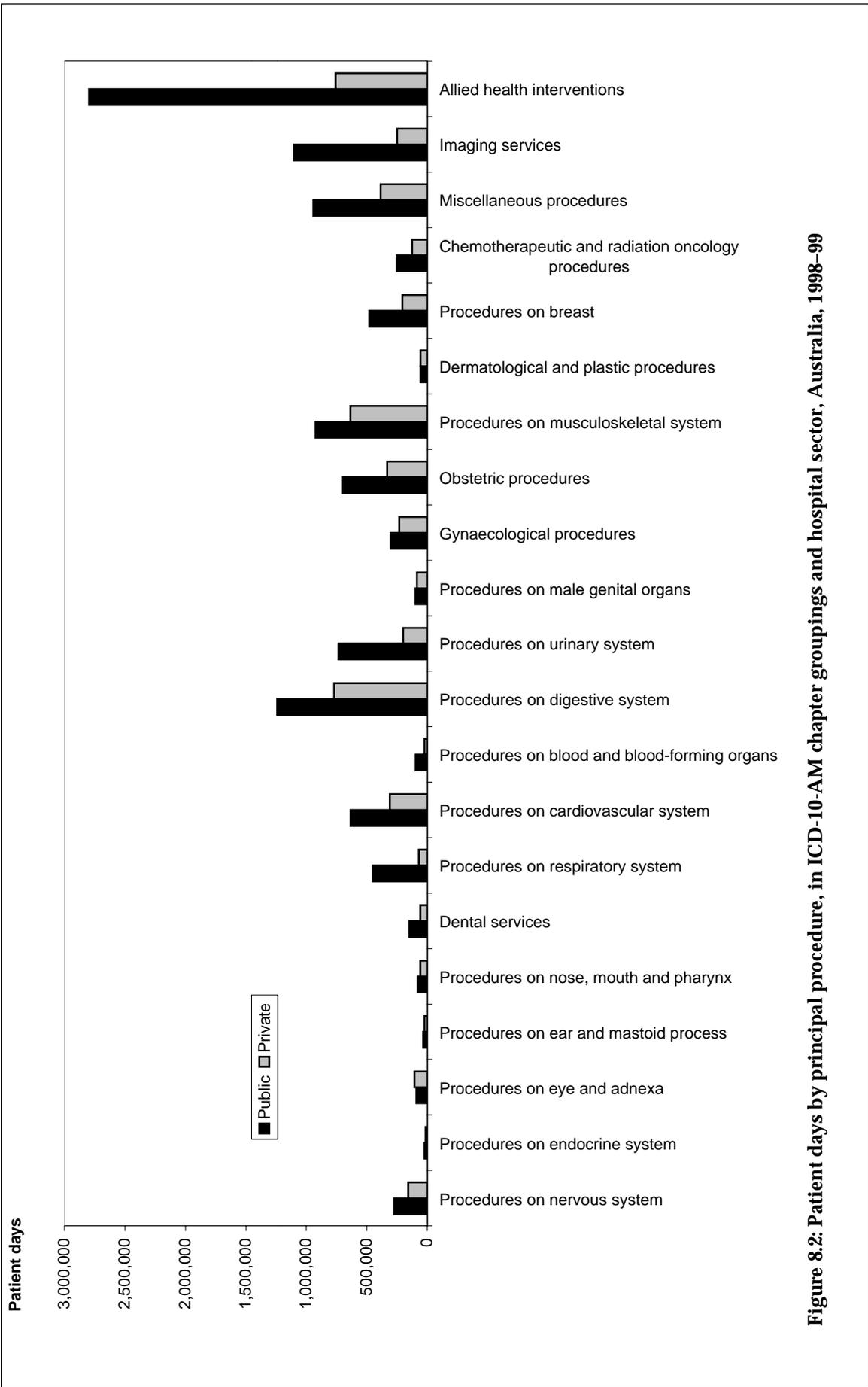


Figure 8.2: Patient days by principal procedure, in ICD-10-AM chapter groupings and hospital sector, Australia, 1998-99

Table 8.1: Separation, same day separation, patient day and average length of stay statistics by principal procedure in ICD-10-AM groupings, public hospitals, Australia, 1998–99

Principal procedure blocks		Separations	Same day separations	Per cent same day separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS (days) excluding same day
1–28	Procedures on skull, brain and meninges	7,569	124	1.6	4.0	102,821	54.5	13.6	13.8
29–60	Procedures on spinal cord and spinal canal structures	25,376	7,442	29.3	13.5	131,981	70.0	5.2	6.9
61–86	Procedures on nerves and ganglia	21,219	14,783	69.7	11.3	38,273	20.3	1.8	3.6
110–129	Procedures on thyroid, parathyroid and endocrine glands	5,611	158	2.8	3.0	24,101	12.8	4.3	4.4
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	7,509	4,453	59.3	4.0	16,384	8.7	2.2	3.9
193–203	Procedures on lens	41,081	33,374	81.2	21.8	47,692	25.3	1.2	1.9
204–256	Procedures on retina, conjunctiva and other areas of eye	13,894	7,735	55.7	7.4	25,463	13.5	1.8	2.9
300–306	Procedures on external ear	3,241	2,181	67.3	1.7	5,126	2.7	1.6	2.8
307–333	Procedures on middle and inner ear and mastoid	23,010	17,474	75.9	12.2	29,099	15.4	1.3	2.1
370–389	Procedures on nose and sinuses	18,673	6,541	35.0	9.9	29,838	15.8	1.6	1.9
390–399	Procedures on tongue, salivary gland and ducts	3,669	1,686	46.0	1.9	9,611	5.1	2.6	4.0
400–408	Procedures on mouth, palate or uvula	3,638	1,794	49.3	1.9	7,927	4.2	2.2	3.3
409–422	Procedures on tonsils, adenoids and pharynx	24,077	3,132	13.0	12.8	33,551	17.8	1.4	1.5
450–490	Dental and orthodontic procedures	27,269	24,085	88.3	14.5	147,259	78.1	5.4	38.7
520–542	Procedures on larynx and trachea	6,217	2,775	44.6	3.3	61,340	32.5	9.9	17.0
543–558	Procedures on bronchus, lung and pleura	18,076	8,419	46.6	9.6	108,168	57.4	6.0	10.3
559–567	Procedures on chest wall, mediastinum and diaphragm	9,198	1,240	13.5	4.9	70,352	37.3	7.6	8.7
568–569	Airway management, continuous ventilatory support	10,149	709	7.0	5.4	210,430	111.6	20.7	22.2
600–638	Procedures on atrium, ventricle, septum and valves	3,947	67	1.7	2.1	44,830	23.8	11.4	11.5
639–666	Other procedures on heart, myocardium and pericardium	10,261	2,101	20.5	5.4	45,820	24.3	4.5	5.4
667–693	Procedures on coronary arteries and aorta	54,342	14,451	26.6	28.8	252,450	133.9	4.6	6.0
694–767	Procedures on arteries and veins	46,701	12,269	26.3	24.8	291,761	154.8	6.2	8.1
800–817	Procedures on blood and blood-forming organs	15,539	7,338	47.2	8.2	96,006	50.9	6.2	10.8
850–869	Procedures on oesophagus	8,499	4,913	57.8	4.5	29,096	15.4	3.4	6.7
870–890	Procedures on stomach	9,014	1,993	22.1	4.8	102,290	54.3	11.3	14.3
891–903	Procedures on small intestine	3,620	167	4.6	1.9	46,809	24.8	12.9	13.5
904–925	Procedures on large intestine	96,627	75,765	78.4	51.3	261,852	138.9	2.7	8.9
926–927	Procedures on appendix	18,448	102	0.6	9.8	63,011	33.4	3.4	3.4
928–950	Procedures on rectum and anus	23,871	8,965	37.6	12.7	86,925	46.1	3.6	5.2
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	44,131	7,845	17.8	23.4	198,482	105.3	4.5	5.3
983–1011	Other procs. on abdomen, peritoneum, omentum and digestive system	164,563	104,210	63.3	87.3	452,589	240.1	2.8	5.8
1040–1063	Procedures on kidney	442,716	427,435	96.5	234.8	536,751	284.7	1.2	7.2
1064–1128	Procedures on bladder, ureter and urethra	66,371	38,542	58.1	35.2	197,025	104.5	3.0	5.7
1160–1170	Procedures on prostate and seminal vesicle	11,320	954	8.4	6.0	61,696	32.7	5.5	5.9

(continued)

Table 8.1 (continued): Separation, same day separation, patient day and average length of stay statistics by principal procedure in ICD-10-AM groupings, public hospitals, Australia, 1998–99

Principal procedure blocks	Separations	Same day separations	Per cent same day separations	Separations per 10,000 population	Patient days		ALOS (days)	
					Patient days	per 10,000 population	ALOS (days)	excluding same day
1171–1176 Procedures on scrotum and tunical vaginalis	1,494	430	28.8	0.8	2,909	1.5	1.9	2.3
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	14,621	10,727	73.4	7.8	18,233	9.7	1.2	1.9
1190–1203 Procedures on penis and other male genital organs	12,134	10,226	84.3	6.4	15,257	8.1	1.3	2.6
1230–1239 Procedures on female pelvic cavity	10,075	7,206	71.5	5.3	18,394	9.8	1.8	3.9
1240–1258 Procedures on ovaries and fallopian tubes	25,378	14,062	55.4	13.5	50,139	26.6	2.0	3.2
1259–1273 Procedures on uterus	85,492	56,071	65.6	45.4	170,943	90.7	2.0	3.9
1274–1278 Procedures on cervix	21,135	19,262	91.1	11.2	24,014	12.7	1.1	2.5
1279–1288 Procedures on vagina and pelvic floor	10,461	5,088	48.6	5.5	27,569	14.6	2.6	4.2
1289–1299 Procedures on other female genital organs	9,407	7,348	78.1	5.0	12,895	6.8	1.4	2.7
1330–1335 Induction and augmentation of labour	50,061	2,739	5.5	26.6	174,613	92.6	3.5	3.6
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	18,146	234	1.3	9.6	79,721	42.3	4.4	4.4
1340 Caesarean delivery	36,285	87	0.2	19.2	222,996	118.3	6.1	6.2
1341–1347 Other obstetric and postpartum procedures	76,258	12,903	16.9	40.5	220,570	117.0	2.9	3.3
1360–1372 Procedures on head, facial bones and joints	6,687	2,706	40.5	3.5	16,226	8.6	2.4	3.4
1373–1380 Procedures on neck, thorax and ribs	249	38	15.3	0.1	2,437	1.3	9.8	11.4
1381–1393 Procedures on spinal cord and vertebrae	1,741	64	3.7	0.9	24,262	12.9	13.9	14.4
1394–1407 Procedures on shoulder, scapula and clavicle	7,220	1,537	21.3	3.8	19,470	10.3	2.7	3.2
1408–1438 Procedures on humerus, elbow and forearm	18,829	3,661	19.4	10.0	44,048	23.4	2.3	2.7
1439–1475 Procedures on hand, wrist and phalanges	20,520	9,660	47.1	10.9	33,277	17.7	1.6	2.2
1476–1494 Procedures on hip, pelvis and femur	25,164	225	0.9	13.3	304,680	161.6	12.1	12.2
1495–1525 Procedures on knee, patella, tibia and fibula	40,489	18,995	46.9	21.5	187,022	99.2	4.6	7.8
1526–1550 Procedures on ankle, foot and toes	16,768	2,771	16.5	8.9	86,314	45.8	5.1	6.0
1551–1579 Other procedures for musculoskeletal system	57,838	20,909	36.2	30.7	206,435	109.5	3.6	5.0
1600–1660 Procedures on skin and subcutaneous tissue	120,793	65,944	54.6	64.1	456,501	242.2	3.8	7.1
1661–1718 Plastic, cosmetic and corrective procedures	8,018	2,930	36.5	4.3	23,046	12.2	2.9	4.0
1740–1759 Procedures on breast	21,781	10,831	49.7	11.6	56,562	30.0	2.6	4.2
1780–1799 Chemotherapeutic and radiation oncology procedures	144,887	123,728	85.4	76.9	254,503	135.0	1.8	6.2
1820–1899 Miscellaneous non-operative procedures	235,353	115,224	49.0	124.8	942,195	499.8	4.0	6.9
1940–2016 Imaging services	155,217	26,304	16.9	82.3	1,103,465	585.4	7.1	8.4
2050–2140 Allied health interventions	232,846	16,190	7.0	123.5	2,795,944	1,483.2	12.0	12.8
No principal procedure or not reported	1,084,898	305,397	28.1	575.5	4,812,779	2,553.0	4.4	5.8
Total	3,859,691	1,718,719	44.5	2,047.5	16,274,228	8,633.0	4.2	6.8

Note: Abbreviation: ALOS—average length of stay.

Table 8.2: Separation, same day separation, patient day and average length of stay statistics by principal procedure in ICD-10-AM groupings, private hospitals, Australia, 1998-99

Principal procedure blocks		Separations	Same day separations	Per cent same day separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS (days) excluding same day
1-28	Procedures on skull, brain and meninges	1,900	36	1.9	1.0	21,577	11.6	11.4	11.6
29-60	Procedures on spinal cord and spinal canal structures	20,195	6,448	31.9	10.8	101,778	54.5	5.0	6.9
61-86	Procedures on nerves and ganglia	22,864	16,076	70.3	12.3	35,038	18.8	1.5	2.8
110-129	Procedures on thyroid, parathyroid and endocrine glands	3,670	51	1.4	2.0	13,793	7.4	3.8	3.8
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	8,549	6,540	76.5	4.6	10,197	5.5	1.2	1.8
193-203	Procedures on lens	75,791	57,185	75.5	40.6	82,297	44.1	1.1	1.3
204-256	Procedures on retina, conjunctiva and other areas of eye	10,627	7,638	71.9	5.7	13,244	7.1	1.2	1.9
300-306	Procedures on external ear	1,481	865	58.4	0.8	2,235	1.2	1.5	2.2
307-333	Procedures on middle and inner ear and mastoid	19,765	15,935	80.6	10.6	22,427	12.0	1.1	1.7
370-389	Procedures on nose and sinuses	20,692	6,651	32.1	11.1	28,997	15.5	1.4	1.6
390-399	Procedures on tongue, salivary gland and ducts	2,342	1,014	43.3	1.3	4,877	2.6	2.1	2.9
400-408	Procedures on mouth, palate or uvula	2,762	1,591	57.6	1.5	3,981	2.1	1.4	2.0
409-422	Procedures on tonsils, adenoids and pharynx	16,775	2,343	14.0	9.0	20,437	11.0	1.2	1.3
450-490	Dental and orthodontic procedures	55,187	46,734	84.7	29.6	57,551	30.8	1.0	1.3
520-542	Procedures on larynx and trachea	2,896	2,043	70.5	1.6	8,391	4.5	2.9	7.4
543-558	Procedures on bronchus, lung and pleura	5,946	2,577	43.3	3.2	37,698	20.2	6.3	10.4
559-567	Procedures on chest wall, mediastinum and diaphragm	2,228	254	11.4	1.2	17,410	9.3	7.8	8.7
568-569	Airway management, continuous ventilatory support	507	38	7.5	0.3	6,392	3.4	12.6	13.5
600-638	Procedures on atrium, ventricle, septum and valves	2,042	137	6.7	1.1	22,497	12.1	11.0	11.7
639-666	Other procedures on heart, myocardium and pericardium	5,000	799	16.0	2.7	18,748	10.0	3.7	4.3
667-693	Procedures on coronary arteries and aorta	38,008	9,528	25.1	20.4	152,138	81.5	4.0	5.0
694-767	Procedures on arteries and veins	24,739	4,398	17.8	13.3	117,183	62.8	4.7	5.5
800-817	Procedures on blood and blood-forming organs	5,903	2,972	50.3	3.2	24,256	13.0	4.1	7.3
850-869	Procedures on oesophagus	5,466	4,351	79.6	2.9	11,957	6.4	2.2	6.8
870-890	Procedures on stomach	4,069	397	9.8	2.2	29,796	16.0	7.3	8.0
891-903	Procedures on small intestine	1,814	153	8.4	1.0	19,367	10.4	10.7	11.6
904-925	Procedures on large intestine	158,538	143,852	90.7	85.0	247,252	132.5	1.6	7.0
926-927	Procedures on appendix	5,115	21	0.4	2.7	17,119	9.2	3.3	3.4
928-950	Procedures on rectum and anus	18,786	7,989	42.5	10.1	67,765	36.3	3.6	5.5
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	21,282	2,151	10.1	11.4	82,337	44.1	3.9	4.2
983-1011	Other procedures on abdomen, peritoneum and hernia	169,339	131,175	77.5	90.8	295,062	158.1	1.7	4.3
1040-1063	Procedures on kidney	55,799	53,124	95.2	29.9	73,925	39.6	1.3	7.8
1064-1128	Procedures on bladder, ureter and urethra	58,014	36,361	62.7	31.1	126,195	67.6	2.2	4.1
1160-1170	Procedures on prostate and seminal vesicle	14,018	2,208	15.8	7.5	63,799	34.2	4.6	5.2

(continued)

Table 8.2 (continued): Separation, same day separation, patient day and average length of stay statistics by principal procedure in ICD-10-AM groupings, private hospitals, Australia, 1998–99

Principal procedure blocks		Separations	Same day separations	Per cent same day separations	Separations per 10,000 population	Patient days	Patient days		ALOS (days) excluding same day
							per 10,000 population	ALOS (days)	
1171–1176	Procedures on scrotum and tunical vaginalis	527	242	45.9	0.3	1,010	0.5	1.9	2.7
1177–1189	Procedures on testis, vas deferens, epididymis, spermatic cord	11,154	8,222	73.7	6.0	13,717	7.4	1.2	1.9
1190–1203	Procedures on penis and other male genital organs	5,405	4,185	77.4	2.9	7,908	4.2	1.5	3.1
1230–1239	Procedures on pelvic cavity	7,208	5,274	73.2	3.9	11,464	6.1	1.6	3.2
1240–1258	Procedures on ovaries and fallopian tubes	12,316	6,617	53.7	6.6	24,872	13.3	2.0	3.2
1259–1273	Procedures on uterus	62,813	45,226	72.0	33.7	134,001	71.8	2.1	5.0
1274–1278	Procedures on cervix	8,129	7,398	91.0	4.4	9,599	5.1	1.2	3.0
1279–1288	Procedures on vagina and pelvic floor	6,421	1,566	24.4	3.4	27,193	14.6	4.2	5.3
1289–1299	Procedures on other female genital organs	24,042	23,101	96.1	12.9	25,490	13.7	1.1	2.5
1330–1335	Induction and augmentation of labour	12,844	154	1.2	6.9	64,760	34.7	5.0	5.1
1336–1339	Spontaneous vertex, or forceps, vacuum or breech delivery	8,582	27	0.3	4.6	50,984	27.3	5.9	6.0
1340	Caesarean delivery	16,854	18	0.1	9.0	123,786	66.3	7.3	7.4
1341–1347	Other obstetric and postpartum procedures	22,414	3,843	17.1	12.0	93,304	50.0	4.2	4.8
1360–1372	Procedures on head, facial bones and joints	2,446	1,542	63.0	1.3	3,342	1.8	1.4	2.0
1373–1380	Procedures on neck, thorax and ribs	191	44	23.0	0.1	909	0.5	4.8	5.9
1381–1393	Procedures on spinal cord and vertebrae	2,264	133	5.9	1.2	21,813	11.7	9.6	10.2
1394–1407	Procedures on shoulder, scapula and clavicle	16,410	2,235	13.6	8.8	40,458	21.7	2.5	2.7
1408–1438	Procedures on humerus, elbow and forearm	4,472	1,253	28.0	2.4	10,329	5.5	2.3	2.8
1439–1475	Procedures on hand, wrist and phalanges	15,932	9,282	58.3	8.5	21,686	11.6	1.4	1.9
1476–1494	Procedures on hip, pelvis and femur	14,147	217	1.5	7.6	176,406	94.5	12.5	12.6
1495–1525	Procedures on knee, patella, tibia and fibula	67,115	34,450	51.3	36.0	214,109	114.7	3.2	5.5
1526–1550	Procedures on ankle, foot and toes	13,133	3,116	23.7	7.0	42,474	22.8	3.2	3.9
1551–1579	Other procedures for musculoskeletal system	41,326	17,261	41.8	22.1	104,364	55.9	2.5	3.6
1600–1660	Procedures on skin and subcutaneous tissue	76,416	54,695	71.6	41.0	172,421	92.4	2.3	5.4
1661–1718	Plastic, cosmetic and corrective procedures	19,881	8,303	41.8	10.7	34,078	18.3	1.7	2.2
1740–1759	Procedures on breast	24,409	10,063	41.2	13.1	56,397	30.2	2.3	3.2
1780–1799	Chemotherapeutic and radiation oncology procedures	84,968	76,072	89.5	45.5	125,256	67.1	1.5	5.5
1820–1899	Miscellaneous non-operative procedures	91,801	42,315	46.1	49.2	386,250	207.0	4.2	7.0
1940–2016	Imaging services	37,490	4,534	12.1	20.1	251,152	134.6	6.7	7.5
2050–2140	Allied health interventions	67,905	18,435	27.1	36.4	757,764	406.1	11.2	14.9
	No principal procedure or not reported	234,234	64,850	27.7	125.5	1,179,801	632.3	5.0	6.6
Total		1,875,358	1,028,308	54.8	1005.0	6,044,813	3,239.5	3.2	5.9

Note: Abbreviation: ALOS—average length of stay.

Table 8.3: Separations by principal procedure in ICD-10-AM groupings, public hospitals, States and Territories, 1998–99

Principal procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, brain and meninges	2,691	2,119	1,141	737	525	148	165	43	7,569
29–60	Procedures on spinal cord and spinal canal structures	7,854	5,611	4,975	2,659	2,746	778	383	370	25,376
61–86	Procedures on nerves and ganglia	6,513	5,262	3,641	2,719	2,181	441	294	168	21,219
110–129	Procedures on thyroid, parathyroid and endocrine glands	2,248	1,403	968	371	376	140	72	33	5,611
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	2,280	1,827	1,568	960	626	116	38	94	7,509
193–203	Procedures on lens	14,412	11,504	5,311	4,762	4,275	172	339	306	41,081
204–256	Procedures on retina, conjunctiva and other areas of eye	4,191	4,053	2,330	1,336	1,650	158	88	88	13,894
300–306	Procedures on external ear	705	469	1,391	298	261	51	31	35	3,241
307–333	Procedures on middle and inner ear and mastoid	6,220	6,663	4,258	2,379	2,629	218	411	232	23,010
370–389	Procedures on nose and sinuses	4,704	4,784	4,071	2,040	2,428	307	224	115	18,673
390–399	Procedures on tongue, salivary gland and ducts	1,332	917	646	322	293	72	58	29	3,669
400–408	Procedures on mouth, palate or uvula	1,038	935	805	346	331	94	50	39	3,638
409–422	Procedures on tonsils, adenoids and pharynx	7,399	6,975	4,301	2,097	2,489	267	424	125	24,077
450–490	Dental and orthodontic procedures	6,744	7,467	6,105	2,464	2,727	872	475	415	27,269
520–542	Procedures on larynx and trachea	1,838	1,481	1,435	503	762	98	62	38	6,217
543–558	Procedures on bronchus, lung and pleura	6,061	4,695	3,405	1,423	1,636	533	214	109	18,076
559–567	Procedures on chest wall, mediastinum and diaphragm	2,882	2,164	1,981	935	795	232	127	82	9,198
568–569	Airway management, continuous ventilatory support	3,024	2,343	2,120	818	1,250	190	200	204	10,149
600–638	Procedures on atrium, ventricle, septum and valves	1,283	1,051	921	266	243	114	69	0	3,947
639–666	Other procedures on heart, myocardium and pericardium	3,851	2,597	1,502	1,002	917	166	173	53	10,261
667–693	Procedures on coronary arteries and aorta	18,868	12,466	8,214	6,048	5,717	1,505	1,521	3	54,342
694–767	Procedures on arteries and veins	14,147	12,446	9,009	4,093	4,687	1,076	847	396	46,701
800–817	Procedures on blood and blood-forming organs	4,379	4,117	3,314	1,652	1,005	509	470	93	15,539
850–869	Procedures on oesophagus	2,637	2,202	1,348	842	935	263	222	50	8,499
870–890	Procedures on stomach	2,873	2,764	1,529	679	862	109	131	67	9,014
891–903	Procedures on small intestine	1,172	862	707	393	321	100	55	10	3,620
904–925	Procedures on large intestine	33,191	21,500	16,831	12,020	8,698	1,978	1,745	664	96,627
926–927	Procedures on appendix	6,353	4,752	3,193	1,906	1,265	371	379	229	18,448
928–950	Procedures on rectum and anus	8,713	5,973	3,810	2,173	2,347	395	308	152	23,871
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	15,941	11,239	7,221	3,916	3,875	814	823	302	44,131
983–1011	Other procedures on abdomen, peritoneum and hernia	54,550	39,816	29,921	17,179	15,699	3,415	2,521	1,462	164,563
1040–1063	Procedures on kidney	125,307	132,056	68,726	46,273	30,538	10,058	11,468	18,290	442,716
1064–1128	Procedures on bladder, ureter and urethra	22,796	16,294	10,317	7,466	6,843	1,533	671	451	66,371
1160–1170	Procedures on prostate and seminal vesicle	3,864	3,600	1,539	851	995	271	163	37	11,320

(continued)

Table 8.3 (continued): Separations by principal procedure in ICD-10-AM groupings, public hospitals, States and Territories, 1998–99

Principal procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171–1176 Procedures on scrotum and tunical vaginalis	644	417	155	98	75	20	42	43	1,494
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	4,778	3,948	1,931	1,686	1,845	225	101	107	14,621
1190–1203 Procedures on penis and other male genital organs	4,866	3,489	1,104	1,174	1,100	115	82	204	12,134
1230–1239 Procedures on pelvic cavity	4,577	4,177	344	276	191	51	263	196	10,075
1240–1258 Procedures on ovaries and fallopian tubes	7,497	7,024	4,023	3,377	2,304	451	342	360	25,378
1259–1273 Procedures on uterus	28,412	26,906	9,405	6,166	10,402	1,388	1,108	1,705	85,492
1274–1278 Procedures on cervix	4,526	5,668	5,937	1,247	2,845	383	236	293	21,135
1279–1288 Procedures on vagina and pelvic floor	2,833	2,143	2,395	849	2,002	126	78	35	10,461
1289–1299 Procedures on other female genital organs	3,326	2,610	1,167	928	1,123	121	64	68	9,407
1330–1335 Induction and augmentation of labour	17,867	14,127	9,338	3,520	2,550	1,094	991	574	50,061
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	7,475	4,084	2,266	2,013	1,448	388	333	139	18,146
1340 Caesarean delivery	11,984	8,678	6,868	3,537	3,243	772	601	602	36,285
1341–1347 Other obstetric and postpartum procedures	21,992	13,511	18,893	7,809	10,576	1,745	983	749	76,258
1360–1372 Procedures on head, facial bones and joints	2,071	1,648	1,297	582	543	198	178	170	6,687
1373–1380 Procedures on neck, thorax and ribs	131	102	0	0	0	0	15	1	249
1381–1393 Procedures on spinal cord and vertebrae	579	398	447	130	145	15	26	1	1,741
1394–1407 Procedures on shoulder, scapula and clavicle	2,349	1,719	1,520	641	715	97	130	49	7,220
1408–1438 Procedures on humerus, elbow and forearm	10,728	6,427	326	160	149	31	565	443	18,829
1439–1475 Procedures on hand, wrist and phalanges	7,916	5,993	2,945	1,379	1,329	286	399	273	20,520
1476–1494 Procedures on hip, pelvis and femur	9,311	6,603	3,564	2,274	2,141	520	604	147	25,164
1495–1525 Procedures on knee, patella, tibia and fibula	13,544	11,483	6,067	3,310	4,119	589	890	487	40,489
1526–1550 Procedures on ankle, foot and toes	6,610	5,138	2,063	1,093	1,046	222	369	227	16,768
1551–1579 Other procedures for musculoskeletal system	10,809	9,107	17,799	9,821	7,396	1,888	501	517	57,838
1600–1660 Procedures on skin and subcutaneous tissue	35,434	24,989	30,909	11,405	12,983	2,342	1,348	1,383	120,793
1661–1718 Plastic, cosmetic and corrective procedures	2,231	2,371	1,241	703	1,209	107	99	57	8,018
1740–1759 Procedures on breast	6,817	6,314	3,640	2,131	1,873	517	325	164	21,781
1780–1799 Chemotherapeutic and radiation oncology procedures	36,225	45,516	25,809	14,571	13,551	4,368	4,596	251	144,887
1820–1899 Miscellaneous non-operative procedures	64,068	52,101	49,357	27,730	28,557	8,802	3,380	1,358	235,353
1940–2016 Imaging services	58,761	38,516	25,970	13,233	11,781	3,384	2,299	1,273	155,217
2050–2140 Allied health interventions	99,157	65,500	32,724	10,739	15,011	3,506	3,717	2,492	232,846
No principal procedure or not reported	383,817	245,036	220,655	91,059	100,684	19,202	8,712	15,733	1,084,898
Total	1,273,396	970,150	708,713	357,569	355,863	80,517	58,598	54,885	3,859,691

Note: ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

Table 8.4: Separations by principal procedure in ICD-10-AM groupings, private hospitals, States and Territories, 1998–99

Principal procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, brain and meninges	464	578	468	122	148	n.p.	n.p.	n.a.	1,900
29–60	Procedures on spinal cord and spinal canal structures	5,890	4,837	3,277	2,581	2,625	n.p.	n.p.	n.a.	20,195
61–86	Procedures on nerves and ganglia	6,324	5,876	3,980	3,825	1,748	n.p.	n.p.	n.a.	22,864
110–129	Procedures on thyroid, parathyroid and endocrine glands	1,292	797	747	377	290	n.p.	n.p.	n.a.	3,670
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	2,898	1,384	2,728	925	303	n.p.	n.p.	n.a.	8,549
193–203	Procedures on lens	29,202	14,896	18,186	6,535	4,314	n.p.	n.p.	n.a.	75,791
204–256	Procedures on retina, conjunctiva and other areas of eye	3,334	2,462	2,534	1,075	691	n.p.	n.p.	n.a.	10,627
300–306	Procedures on external ear	397	521	268	178	73	n.p.	n.p.	n.a.	1,481
307–333	Procedures on middle and inner ear and mastoid	5,919	4,991	3,508	1,895	2,696	n.p.	n.p.	n.a.	19,765
370–389	Procedures on nose and sinuses	5,309	3,892	5,811	1,997	2,974	n.p.	n.p.	n.a.	20,692
390–399	Procedures on tongue, salivary gland and ducts	700	564	457	303	205	n.p.	n.p.	n.a.	2,342
400–408	Procedures on mouth, palate or uvula	987	630	428	256	324	n.p.	n.p.	n.a.	2,762
409–422	Procedures on tonsils, adenoids and pharynx	5,563	3,343	3,744	1,938	1,565	n.p.	n.p.	n.a.	16,775
450–490	Dental and orthodontic procedures	15,710	14,690	10,634	7,264	5,004	n.p.	n.p.	n.a.	55,187
520–542	Procedures on larynx and trachea	893	771	611	245	288	n.p.	n.p.	n.a.	2,896
543–558	Procedures on bronchus, lung and pleura	1,244	1,459	1,929	546	556	n.p.	n.p.	n.a.	5,946
559–567	Procedures on chest wall, mediastinum and diaphragm	396	601	590	321	235	n.p.	n.p.	n.a.	2,228
568–569	Airway management, continuous ventilatory support	103	155	148	30	57	n.p.	n.p.	n.a.	507
600–638	Procedures on atrium, ventricle, septum and valves	889	514	386	125	127	n.p.	n.p.	n.a.	2,042
639–666	Other procedures on heart, myocardium and pericardium	1,970	1,292	1,100	217	394	n.p.	n.p.	n.a.	5,000
667–693	Procedures on coronary arteries and aorta	13,472	10,241	7,991	2,999	2,655	n.p.	n.p.	n.a.	38,008
694–767	Procedures on arteries and veins	6,673	7,907	5,244	2,076	1,904	n.p.	n.p.	n.a.	24,739
800–817	Procedures on blood and blood-forming organs	1,163	1,377	2,195	496	353	n.p.	n.p.	n.a.	5,903
850–869	Procedures on oesophagus	1,517	1,547	1,272	307	568	n.p.	n.p.	n.a.	5,466
870–890	Procedures on stomach	829	1,382	964	316	419	n.p.	n.p.	n.a.	4,069
891–903	Procedures on small intestine	390	467	516	190	180	n.p.	n.p.	n.a.	1,814
904–925	Procedures on large intestine	54,575	41,852	36,693	12,092	9,818	n.p.	n.p.	n.a.	158,538
926–927	Procedures on appendix	1,173	1,146	1,298	835	427	n.p.	n.p.	n.a.	5,115
928–950	Procedures on rectum and anus	6,826	4,323	3,629	1,948	1,376	n.p.	n.p.	n.a.	18,786
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	6,502	5,362	4,613	2,218	1,763	n.p.	n.p.	n.a.	21,282
983–1011	Other procedures on abdomen, peritoneum and hernia	53,328	47,272	39,247	13,565	11,333	n.p.	n.p.	n.a.	169,339
1040–1063	Procedures on kidney	12,669	18,516	12,005	3,286	9,121	n.p.	n.p.	n.a.	55,799
1064–1128	Procedures on bladder, ureter and urethra	21,804	13,045	11,341	5,300	3,954	n.p.	n.p.	n.a.	58,014
1160–1170	Procedures on prostate and seminal vesicle	4,031	4,447	2,507	1,212	912	n.p.	n.p.	n.a.	14,018

(continued)

Table 8.4 (continued): Separations by principal procedure in ICD-10-AM groupings, private hospitals, States and Territories, 1998–99

Principal procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171–1176 Procedures on scrotum and tunical vaginalis	234	107	82	48	30	n.p.	n.p.	n.a.	527
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	3,939	2,777	1,863	1,221	834	n.p.	n.p.	n.a.	11,154
1190–1203 Procedures on penis and other male genital organs	2,083	1,193	879	607	332	n.p.	n.p.	n.a.	5,405
1230–1239 Procedures on pelvic cavity	3,778	2,215	592	209	138	n.p.	n.p.	n.a.	7,208
1240–1258 Procedures on ovaries and fallopian tubes	3,796	3,060	2,463	1,465	907	n.p.	n.p.	n.a.	12,316
1259–1273 Procedures on uterus	27,718	13,491	8,443	7,389	3,714	n.p.	n.p.	n.a.	62,813
1274–1278 Procedures on cervix	2,718	2,345	1,574	658	481	n.p.	n.p.	n.a.	8,129
1279–1288 Procedures on vagina and pelvic floor	2,204	1,571	1,229	604	550	n.p.	n.p.	n.a.	6,421
1289–1299 Procedures on other female genital organs	8,638	6,119	5,698	2,012	688	n.p.	n.p.	n.a.	24,042
1330–1335 Induction and augmentation of labour	4,312	3,336	2,408	1,721	274	n.p.	n.p.	n.a.	12,844
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	2,466	2,277	1,552	1,200	738	n.p.	n.p.	n.a.	8,582
1340 Caesarean delivery	4,463	4,107	4,073	2,256	1,281	n.p.	n.p.	n.a.	16,854
1341–1347 Other obstetric and postpartum procedures	5,248	5,377	5,341	3,048	2,427	n.p.	n.p.	n.a.	22,414
1360–1372 Procedures on head, facial bones and joints	850	694	456	161	157	n.p.	n.p.	n.a.	2,446
1373–1380 Procedures on neck, thorax and ribs	70	118	0	0	0	n.p.	n.p.	n.a.	191
1381–1393 Procedures on spinal cord and vertebrae	679	556	376	245	272	n.p.	n.p.	n.a.	2,264
1394–1407 Procedures on shoulder, scapula and clavicle	5,145	4,998	2,272	1,710	1,738	n.p.	n.p.	n.a.	16,410
1408–1438 Procedures on humerus, elbow and forearm	2,139	1,831	177	133	100	n.p.	n.p.	n.a.	4,472
1439–1475 Procedures on hand, wrist and phalanges	5,578	5,005	2,377	1,168	1,297	n.p.	n.p.	n.a.	15,932
1476–1494 Procedures on hip, pelvis and femur	3,841	4,156	2,654	1,352	1,434	n.p.	n.p.	n.a.	14,147
1495–1525 Procedures on knee, patella, tibia and fibula	24,185	16,584	9,525	6,914	7,157	n.p.	n.p.	n.a.	67,115
1526–1550 Procedures on ankle, foot and toes	4,914	3,895	1,358	1,273	1,161	n.p.	n.p.	n.a.	13,133
1551–1579 Other procedures for musculoskeletal system	8,807	6,366	9,892	8,060	5,740	n.p.	n.p.	n.a.	41,326
1600–1660 Procedures on skin and subcutaneous tissue	27,289	16,485	15,931	6,082	8,354	n.p.	n.p.	n.a.	76,416
1661–1718 Plastic, cosmetic and corrective procedures	6,499	5,545	3,521	1,984	1,741	n.p.	n.p.	n.a.	19,881
1740–1759 Procedures on breast	7,050	6,885	4,844	2,592	2,068	n.p.	n.p.	n.a.	24,409
1780–1799 Chemotherapeutic and radiation oncology procedures	16,250	28,579	22,905	8,686	7,246	n.p.	n.p.	n.a.	84,968
1820–1899 Miscellaneous non-operative procedures	26,063	22,894	28,232	7,244	4,994	n.p.	n.p.	n.a.	91,801
1940–2016 Imaging services	6,960	9,687	10,966	4,328	3,309	n.p.	n.p.	n.a.	37,490
2050–2140 Allied health interventions	26,893	16,715	15,825	3,813	3,392	n.p.	n.p.	n.a.	67,905
No principal procedure or not reported	47,372	73,562	52,722	31,219	18,787	n.p.	n.p.	n.a.	234,234
Total	566,617	495,667	411,279	186,997	150,741	n.p.	n.p.	n.a.	1,875,358

Note: ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

n.a. not available.

n.p. not published.

Table 8.5: Patient days by principal procedure in ICD-10-AM groupings, public hospitals, States and Territories, 1998–99

Principal procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, brain and meninges	37,774	26,061	16,242	10,341	6,882	1,937	3,025	559	102,821
29–60	Procedures on spinal cord and spinal canal structures	42,872	27,421	29,419	12,445	11,436	3,236	2,714	2,438	131,981
61–86	Procedures on nerves and ganglia	12,198	8,286	6,793	5,340	3,848	971	524	313	38,273
110–129	Procedures on thyroid, parathyroid and endocrine glands	9,962	5,735	3,901	1,662	1,572	763	401	105	24,101
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	6,484	2,793	2,832	2,181	1,515	317	81	181	16,384
193–203	Procedures on lens	16,964	12,985	6,163	5,559	4,841	181	361	638	47,692
204–256	Procedures on retina, conjunctiva and other areas of eye	8,514	6,564	4,516	2,610	2,635	290	154	180	25,463
300–306	Procedures on external ear	1,046	801	1,993	466	527	88	122	83	5,126
307–333	Procedures on middle and inner ear and mastoid	8,252	7,937	5,222	3,190	3,462	263	456	317	29,099
370–389	Procedures on nose and sinuses	8,299	7,590	6,036	3,271	3,653	542	308	139	29,838
390–399	Procedures on tongue, salivary gland and ducts	3,633	2,510	1,521	761	708	184	210	84	9,611
400–408	Procedures on mouth, palate or uvula	2,632	1,860	1,556	703	783	239	68	86	7,927
409–422	Procedures on tonsils, adenoids and pharynx	11,284	8,956	5,586	2,891	3,699	387	586	162	33,551
450–490	Dental and orthodontic procedures	8,989	9,236	120,889	2,863	3,139	958	521	664	147,259
520–542	Procedures on larynx and trachea	14,900	12,095	15,994	7,220	8,746	1,331	647	407	61,340
543–558	Procedures on bronchus, lung and pleura	37,318	28,376	17,915	9,533	9,252	2,358	2,411	1,005	108,168
559–567	Procedures on chest wall, mediastinum and diaphragm	22,662	15,992	14,694	6,643	6,677	2,026	1,045	613	70,352
568–569	Airway management, continuous ventilatory support	60,090	46,690	44,886	19,989	25,538	3,397	5,174	4,666	210,430
600–638	Procedures on atrium, ventricle, septum and valves	14,036	11,884	9,862	3,936	3,070	861	1,181	0	44,830
639–666	Other procedures on heart, myocardium and pericardium	18,595	10,523	6,575	4,110	3,737	1,041	726	513	45,820
667–693	Procedures on coronary arteries and aorta	98,499	60,622	33,441	23,579	22,404	7,446	6,450	9	252,450
694–767	Procedures on arteries and veins	103,668	69,108	55,015	23,609	24,347	5,511	6,485	4,018	291,761
800–817	Procedures on blood and blood-forming organs	35,102	20,953	17,143	9,802	7,882	2,098	2,391	635	96,006
850–869	Procedures on oesophagus	10,014	7,857	4,008	2,778	2,651	856	729	203	29,096
870–890	Procedures on stomach	36,517	28,022	14,188	10,240	8,841	1,503	1,658	1,321	102,290
891–903	Procedures on small intestine	16,186	10,799	7,857	5,208	4,387	1,350	784	238	46,809
904–925	Procedures on large intestine	94,236	59,406	43,677	27,904	24,480	5,461	4,832	1,856	261,852
926–927	Procedures on appendix	22,626	15,901	10,028	6,531	4,400	1,314	1,346	865	63,011
928–950	Procedures on rectum and anus	33,885	24,111	11,520	7,241	7,290	1,210	1,004	664	86,925
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	80,836	48,591	28,671	16,590	15,301	3,404	3,518	1,571	198,482
983–1011	Other procedures on abdomen, peritoneum and hernia	171,940	99,948	76,519	41,980	42,448	8,625	6,918	4,211	452,589
1040–1063	Procedures on kidney	159,865	152,699	86,451	53,724	36,950	12,085	14,071	20,906	536,751
1064–1128	Procedures on bladder, ureter and urethra	65,780	39,852	37,743	24,601	19,384	4,741	2,668	2,256	197,025
1160–1170	Procedures on prostate and seminal vesicle	23,664	17,224	8,101	4,363	5,501	1,295	1,220	328	61,696

(continued)

Table 8.5 (continued): Patient days by principal procedure in ICD-10-AM groupings, public hospitals, States and Territories, 1998–99

Principal procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171–1176 Procedures on scrotum and tunical vaginalis	1,259	682	347	253	140	34	73	121	2,909
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	5,998	4,791	2,500	2,086	2,175	347	148	188	18,233
1190–1203 Procedures on penis and other male genital organs	6,243	4,156	1,452	1,395	1,250	150	181	430	15,257
1230–1239 Procedures on pelvic cavity	8,687	6,339	1,063	742	511	233	540	279	18,394
1240–1258 Procedures on ovaries and fallopian tubes	15,780	12,472	8,598	6,340	4,456	923	904	666	50,139
1259–1273 Procedures on uterus	58,565	47,637	22,835	15,009	18,646	3,175	2,654	2,422	170,943
1274–1278 Procedures on cervix	5,388	6,445	6,544	1,594	2,990	440	292	321	24,014
1279–1288 Procedures on vagina and pelvic floor	8,658	5,901	4,939	3,295	3,991	392	306	87	27,569
1289–1299 Procedures on other female genital organs	4,830	3,252	1,710	1,316	1,401	183	94	109	12,895
1330–1335 Induction and augmentation of labour	64,852	49,971	28,865	12,644	8,650	3,415	3,567	2,649	174,613
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	31,749	18,356	9,551	9,669	6,353	1,628	1,581	834	79,721
1340 Caesarean delivery	76,235	52,928	37,534	22,460	20,837	4,453	4,034	4,515	222,996
1341–1347 Other obstetric and postpartum procedures	73,209	44,062	45,200	21,854	25,499	4,516	2,991	3,239	220,570
1360–1372 Procedures on head, facial bones and joints	5,370	3,050	2,941	1,687	1,701	607	339	531	16,226
1373–1380 Procedures on neck, thorax and ribs	1,020	1,368	0	0	0	0	48	1	2,437
1381–1393 Procedures on spinal cord and vertebrae	7,935	6,791	5,854	1,659	1,521	194	307	1	24,262
1394–1407 Procedures on shoulder, scapula and clavicle	7,074	4,653	3,204	1,974	1,758	309	382	116	19,470
1408–1438 Procedures on humerus, elbow and forearm	24,897	14,084	740	554	308	77	1,217	2,171	44,048
1439–1475 Procedures on hand, wrist and phalanges	12,953	8,827	4,610	2,540	2,120	590	681	956	33,277
1476–1494 Procedures on hip, pelvis and femur	113,117	76,183	46,397	28,201	23,698	6,707	7,268	3,109	304,680
1495–1525 Procedures on knee, patella, tibia and fibula	75,607	45,131	25,649	16,271	13,649	2,743	4,654	3,318	187,022
1526–1550 Procedures on ankle, foot and toes	34,094	24,097	10,515	7,491	4,720	1,214	2,128	2,055	86,314
1551–1579 Other procedures for musculoskeletal system	42,601	32,263	55,323	40,698	23,252	6,904	2,209	3,185	206,435
1600–1660 Procedures on skin and subcutaneous tissue	150,579	93,587	100,699	47,047	42,870	8,644	4,067	9,008	456,501
1661–1718 Plastic, cosmetic and corrective procedures	7,326	7,260	2,506	1,869	3,196	247	336	306	23,046
1740–1759 Procedures on breast	18,414	15,786	10,830	5,121	4,265	1,052	721	373	56,562
1780–1799 Chemotherapeutic and radiation oncology procedures	66,541	86,415	43,047	23,419	21,356	6,621	6,679	425	254,503
1820–1899 Miscellaneous non-operative procedures	287,147	214,752	203,286	89,694	100,707	25,782	13,914	6,913	942,195
1940–2016 Imaging services	443,452	223,305	197,267	95,522	89,638	24,419	19,153	10,709	1,103,465
2050–2140 Allied health interventions	1,181,277	843,469	363,259	119,504	191,933	38,539	33,673	24,290	2,795,944
No principal procedure or not reported	1,729,426	843,319	1,036,289	464,096	497,607	160,356	26,407	55,279	4,812,779
Total	5,869,605	3,710,720	3,040,511	1,409,868	1,453,184	383,163	216,337	190,840	16,274,228

Note: ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

Table 8.6: Patient days by principal procedure in ICD-10-AM groupings, private hospitals, States and Territories, 1998–99

Principal procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, brain and meninges	5,337	6,369	5,861	1,311	1,553	n.p.	n.p.	n.a.	21,577
29–60	Procedures on spinal cord and spinal canal structures	30,330	25,777	19,791	11,534	9,126	n.p.	n.p.	n.a.	101,778
61–86	Procedures on nerves and ganglia	9,513	9,264	6,347	5,927	2,337	n.p.	n.p.	n.a.	35,038
110–129	Procedures on thyroid, parathyroid and endocrine glands	4,309	3,413	3,276	1,056	1,015	n.p.	n.p.	n.a.	13,793
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	3,366	1,600	3,112	1,243	459	n.p.	n.p.	n.a.	10,197
193–203	Procedures on lens	31,200	15,899	20,073	7,481	4,503	n.p.	n.p.	n.a.	82,297
204–256	Procedures on retina, conjunctiva and other areas of eye	4,025	3,007	3,212	1,458	910	n.p.	n.p.	n.a.	13,244
300–306	Procedures on external ear	506	663	626	291	100	n.p.	n.p.	n.a.	2,235
307–333	Procedures on middle and inner ear and mastoid	6,798	5,493	3,912	2,204	3,189	n.p.	n.p.	n.a.	22,427
370–389	Procedures on nose and sinuses	7,027	5,797	7,560	3,329	4,251	n.p.	n.p.	n.a.	28,997
390–399	Procedures on tongue, salivary gland and ducts	1,332	1,172	1,091	645	423	n.p.	n.p.	n.a.	4,877
400–408	Procedures on mouth, palate or uvula	1,282	1,032	662	317	468	n.p.	n.p.	n.a.	3,981
409–422	Procedures on tonsils, adenoids and pharynx	6,681	4,355	4,230	2,267	2,095	n.p.	n.p.	n.a.	20,437
450–490	Dental and orthodontic procedures	16,075	14,962	10,967	8,476	5,152	n.p.	n.p.	n.a.	57,551
520–542	Procedures on larynx and trachea	1,475	2,324	2,487	734	1,246	n.p.	n.p.	n.a.	8,391
543–558	Procedures on bronchus, lung and pleura	7,324	9,322	13,891	3,553	2,482	n.p.	n.p.	n.a.	37,698
559–567	Procedures on chest wall, mediastinum and diaphragm	3,026	4,820	4,767	2,267	1,730	n.p.	n.p.	n.a.	17,410
568–569	Airway management, continuous ventilatory support	1,130	1,888	1,987	329	886	n.p.	n.p.	n.a.	6,392
600–638	Procedures on atrium, ventricle, septum and valves	7,716	6,527	5,129	1,248	1,872	n.p.	n.p.	n.a.	22,497
639–666	Other procedures on heart, myocardium and pericardium	5,654	5,796	4,658	763	1,753	n.p.	n.p.	n.a.	18,748
667–693	Procedures on coronary arteries and aorta	48,719	43,086	37,201	8,873	12,372	n.p.	n.p.	n.a.	152,138
694–767	Procedures on arteries and veins	27,175	36,286	30,260	10,340	9,363	n.p.	n.p.	n.a.	117,183
800–817	Procedures on blood and blood-forming organs	4,838	5,364	8,170	2,815	1,856	n.p.	n.p.	n.a.	24,256
850–869	Procedures on oesophagus	3,029	3,512	3,047	882	1,077	n.p.	n.p.	n.a.	11,957
870–890	Procedures on stomach	5,686	9,800	7,026	3,096	3,220	n.p.	n.p.	n.a.	29,796
891–903	Procedures on small intestine	3,801	5,541	5,443	2,059	1,890	n.p.	n.p.	n.a.	19,367
904–925	Procedures on large intestine	74,505	64,743	61,426	21,767	17,929	n.p.	n.p.	n.a.	247,252
926–927	Procedures on appendix	3,870	3,933	4,286	2,592	1,621	n.p.	n.p.	n.a.	17,119
928–950	Procedures on rectum and anus	20,175	17,671	13,880	7,568	6,036	n.p.	n.p.	n.a.	67,765
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	22,835	20,857	19,346	8,547	7,569	n.p.	n.p.	n.a.	82,337
983–1011	Other procedures on abdomen, peritoneum and hernia	82,077	78,846	73,605	27,614	23,393	n.p.	n.p.	n.a.	295,062
1040–1063	Procedures on kidney	17,551	23,349	16,451	4,804	10,652	n.p.	n.p.	n.a.	73,925
1064–1128	Procedures on bladder, ureter and urethra	39,204	26,172	25,815	16,071	11,312	n.p.	n.p.	n.a.	126,195
1160–1170	Procedures on prostate and seminal vesicle	18,463	17,663	12,074	5,738	4,850	n.p.	n.p.	n.a.	63,799

(continued)

Table 8.6 (continued): Patient days by principal procedure in ICD-10-AM groupings, private hospitals, States and Territories, 1998–99

Principal procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171–1176 Procedures on scrotum and tunical vaginalis	381	151	161	183	79	n.p.	n.p.	n.a.	1,010
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	4,575	3,290	2,662	1,527	991	n.p.	n.p.	n.a.	13,717
1190–1203 Procedures on penis and other male genital organs	2,671	1,829	1,584	858	459	n.p.	n.p.	n.a.	7,908
1230–1239 Procedures on pelvic cavity	5,051	3,401	1,407	577	490	n.p.	n.p.	n.a.	11,464
1240–1258 Procedures on ovaries and fallopian tubes	7,385	6,218	5,027	2,949	1,979	n.p.	n.p.	n.a.	24,872
1259–1273 Procedures on uterus	47,338	31,113	22,013	16,051	10,919	n.p.	n.p.	n.a.	134,001
1274–1278 Procedures on cervix	3,060	2,806	1,938	857	521	n.p.	n.p.	n.a.	9,599
1279–1288 Procedures on vagina and pelvic floor	8,320	7,004	4,689	3,000	2,829	n.p.	n.p.	n.a.	27,193
1289–1299 Procedures on other female genital organs	8,876	6,530	6,022	2,181	859	n.p.	n.p.	n.a.	25,490
1330–1335 Induction and augmentation of labour	22,078	17,796	11,741	7,899	1,344	n.p.	n.p.	n.a.	64,760
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	14,046	13,518	9,279	7,795	4,119	n.p.	n.p.	n.a.	50,984
1340 Caesarean delivery	32,005	31,186	28,662	17,812	9,140	n.p.	n.p.	n.a.	123,786
1341–1347 Other obstetric and postpartum procedures	25,486	24,107	19,702	10,576	9,639	n.p.	n.p.	n.a.	93,304
1360–1372 Procedures on head, facial bones and joints	1,118	925	685	210	222	n.p.	n.p.	n.a.	3,342
1373–1380 Procedures on neck, thorax and ribs	438	452	0	0	0	n.p.	n.p.	n.a.	909
1381–1393 Procedures on spinal cord and vertebrae	6,024	5,939	4,143	2,179	2,285	n.p.	n.p.	n.a.	21,813
1394–1407 Procedures on shoulder, scapula and clavicle	12,679	11,511	6,535	3,920	4,422	n.p.	n.p.	n.a.	40,458
1408–1438 Procedures on humerus, elbow and forearm	4,873	4,291	432	263	199	n.p.	n.p.	n.a.	10,329
1439–1475 Procedures on hand, wrist and phalanges	7,282	6,662	3,128	1,880	1,926	n.p.	n.p.	n.a.	21,686
1476–1494 Procedures on hip, pelvis and femur	45,558	46,563	39,655	18,341	16,521	n.p.	n.p.	n.a.	176,406
1495–1525 Procedures on knee, patella, tibia and fibula	73,143	49,304	37,282	24,729	20,167	n.p.	n.p.	n.a.	214,109
1526–1550 Procedures on ankle, foot and toes	15,220	12,137	5,350	4,978	3,200	n.p.	n.p.	n.a.	42,474
1551–1579 Other procedures for musculoskeletal system	20,348	17,234	26,159	20,840	13,427	n.p.	n.p.	n.a.	104,364
1600–1660 Procedures on skin and subcutaneous tissue	51,376	39,483	40,293	18,405	17,043	n.p.	n.p.	n.a.	172,421
1661–1718 Plastic, cosmetic and corrective procedures	10,043	10,054	5,137	3,611	3,853	n.p.	n.p.	n.a.	34,078
1740–1759 Procedures on breast	16,949	15,639	9,835	6,346	5,492	n.p.	n.p.	n.a.	56,397
1780–1799 Chemotherapeutic and radiation oncology procedures	24,434	45,000	33,489	10,071	10,144	n.p.	n.p.	n.a.	125,256
1820–1899 Miscellaneous non-operative procedures	114,033	90,539	111,476	31,708	28,053	n.p.	n.p.	n.a.	386,250
1940–2016 Imaging services	46,306	60,178	80,388	27,500	19,092	n.p.	n.p.	n.a.	251,152
2050–2140 Allied health interventions	285,124	238,669	132,092	40,972	44,797	n.p.	n.p.	n.a.	757,764
No principal procedure or not reported	228,334	344,717	314,572	120,018	125,313	n.p.	n.p.	n.a.	1,179,801
Total	1,670,588	1,634,549	1,407,207	587,435	518,214	n.p.	n.p.	n.a.	6,044,813

Note: Abbreviation: op.—operation.

n.a. not available.

Table 8.7: Separations for males by age group and principal procedure in ICD-10-AM groupings, all hospitals, Australia, 1998–99

Principal procedure blocks		<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75+	Total ^(a)
1–28	Procedures on skull, brain and meninges	136	133	365	526	559	577	730	769	812	558	5,165
29–60	Procedures on spinal cord and spinal canal structures	1,020	883	800	1,109	2,726	3,898	3,682	2,840	2,922	2,185	22,065
61–86	Procedures on nerves and ganglia	6	53	189	1,353	2,521	3,635	3,752	2,931	2,705	2,498	19,643
110–129	Procedures on thyroid, parathyroid and endocrine glands	3	43	70	98	238	336	509	439	378	149	2,263
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	173	429	282	491	904	1,224	1,212	1,156	1,485	1,618	8,974
193–203	Procedures on lens	36	46	85	108	237	655	2,220	5,100	14,866	23,823	47,176
204–256	Procedures on retina, conjunctiva and other areas of eye	347	1,513	1,115	746	797	827	1,243	1,514	2,375	2,569	13,046
300–306	Procedures on external ear	14	229	470	269	286	358	360	324	370	412	3,092
307–333	Procedures on middle and inner ear and mastoid	704	9,476	8,075	841	762	1,110	1,153	864	759	340	24,084
370–389	Procedures on nose and sinuses	32	473	1,462	2,412	3,015	3,766	3,886	2,959	2,527	1,879	22,411
390–399	Procedures on tongue, salivary gland and ducts	149	436	320	149	248	364	468	456	416	258	3,264
400–408	Procedures on mouth, palate or uvula	26	396	348	385	505	552	639	408	320	153	3,732
409–422	Procedures on tonsils, adenoids and pharynx	83	5,844	8,474	2,304	1,188	687	363	267	275	158	19,643
450–490	Dental and orthodontic procedures	20	4,536	6,180	11,879	5,959	2,754	1,745	960	709	424	35,166
520–542	Procedures on larynx and trachea	140	182	256	154	352	597	971	1,221	1,278	683	5,834
543–558	Procedures on bronchus, lung and pleura	193	228	178	455	635	884	1,637	2,938	4,554	2,981	14,683
559–567	Procedures on chest wall, mediastinum and diaphragm	46	25	75	702	624	603	731	1,026	1,522	1,527	6,881
568–569	Airway management, continuous ventilatory support	2,177	146	165	342	420	399	450	523	889	664	6,175
600–638	Procedures on atrium, ventricle, septum and valves	202	131	104	79	96	211	383	646	925	639	3,416
639–666	Other procedures on heart, myocardium and pericardium	24	42	147	248	304	487	1,029	1,428	2,194	2,991	8,894
667–693	Procedures on coronary arteries and aorta	182	155	156	108	481	3,727	12,204	17,910	20,009	8,779	63,711
694–767	Procedures on arteries and veins	506	718	819	1,182	1,679	3,019	4,644	6,552	9,877	7,068	36,065
800–817	Procedures on blood and blood-forming organs	59	392	589	774	806	1,181	1,694	1,930	2,123	1,652	11,200
850–869	Procedures on oesophagus	91	248	259	183	345	644	1,144	1,526	1,930	1,687	8,057
870–890	Procedures on stomach	443	246	259	252	422	693	806	849	1,159	1,445	6,574
891–903	Procedures on small intestine	98	30	64	150	185	234	377	482	689	468	2,777
904–925	Procedures on large intestine	183	171	422	2,129	6,504	14,132	24,293	26,254	27,528	17,297	118,913
926–927	Procedures on appendix	2	94	3,243	3,665	2,287	1,466	825	426	253	140	12,401
928–950	Procedures on rectum and anus	308	209	248	814	3,064	4,853	5,330	4,134	3,244	1,702	23,906
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	39	39	119	440	1,447	3,232	4,352	4,397	5,215	3,671	22,951
983–1011	Other procedures on abdomen, peritoneum and hernia	2,254	3,265	3,195	6,772	14,721	23,530	32,376	31,434	32,175	22,677	172,399
1040–1063	Procedures on kidney	177	391	923	7,436	24,017	36,882	47,213	57,305	76,557	37,616	288,517
1064–1128	Procedures on bladder, ureter and urethra	643	957	916	1,188	2,862	5,723	9,898	13,722	21,019	21,526	78,454
1160–1170	Procedures on prostate and seminal vesicle	0	3	1	6	25	104	1,263	5,593	9,697	8,645	25,337

(continued)

Table 8.7 (continued): Separations for males by age group and principal procedure in ICD-10-AM groupings, all hospitals, Australia, 1998–99

Principal procedure blocks	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75+	Total ^(a)
1171–1176 Procedures on scrotum and tunical vaginalis	34	106	522	402	276	268	164	109	74	66	2,021
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	347	1,619	2,246	1,239	5,315	9,279	2,863	1,097	901	863	25,769
1190–1203 Procedures on penis and other male genital organs	5,072	4,609	3,790	893	812	552	516	525	465	304	17,538
1230–1347 Procedures on female genital organs; obstetrical procedures	..	..	..	..	..	..	..	..	..	..	..
1360–1372 Procedures on head, facial bones and joints	1	23	568	3,140	1,918	851	356	153	74	42	7,126
1373–1380 Procedures on neck, thorax and ribs	3	1	9	18	24	36	34	59	66	22	272
1381–1393 Procedures on spinal cord and vertebrae	2	5	63	192	287	469	417	283	184	113	2,015
1394–1407 Procedures on shoulder, scapula and clavicle	4	4	120	2,355	2,162	1,992	2,724	2,786	1,821	766	14,734
1408–1438 Procedures on humerus, elbow and forearm	10	798	5,514	1,802	1,163	1,069	850	541	350	257	12,354
1439–1475 Procedures on hand, wrist and phalanges	38	375	1,125	4,664	4,463	3,347	2,901	2,465	2,032	1,049	22,459
1476–1494 Procedures on hip, pelvis and femur	42	187	657	679	568	702	1,237	2,451	3,931	5,350	15,804
1495–1525 Procedures on knee, patella, tibia and fibula	13	104	1,321	9,169	11,299	11,057	10,180	8,150	7,694	4,405	63,392
1526–1550 Procedures on ankle, foot and toes	231	311	887	2,067	2,183	2,103	2,023	1,542	1,400	973	13,720
1551–1579 Other procedures for musculoskeletal system	237	1,428	7,733	10,717	9,770	8,347	7,246	5,366	4,119	2,830	57,793
1600–1660 Procedures on skin and subcutaneous tissue	5,184	4,011	7,644	12,542	11,815	11,632	12,697	12,457	15,699	17,852	111,534
1661–1718 Plastic, cosmetic and corrective procedures	378	221	812	1,386	1,188	1,175	1,334	1,160	1,280	1,357	10,291
1740–1759 Procedures on breast	5	7	85	511	444	232	194	177	175	117	1,947
1780–1799 Chemotherapeutic and radiation oncology procedures	168	1,555	2,738	2,519	3,584	6,863	16,675	29,796	34,116	14,527	112,541
1820–1899 Miscellaneous non-operative procedures	12,289	7,840	8,272	9,416	12,913	18,149	24,243	23,361	28,754	25,742	170,979
1940–2016 Imaging services	1,694	2,999	3,691	5,632	7,514	9,425	11,692	13,879	20,202	23,379	100,107
2050–2140 Allied health interventions	2,383	2,590	2,978	5,530	7,873	9,189	12,267	15,780	28,065	45,176	131,831
No principal procedure or not reported	42,033	47,806	40,269	50,273	58,493	59,313	62,332	61,749	79,845	97,147	599,266
Total	80,684	108,761	131,417	174,895	225,285	279,394	346,527	385,169	485,003	423,219	2,640,362

(a) Total includes separations for which age was not reported.

.. not applicable

Table 8.8: Separations for females by age group and principal procedure in ICD-10-AM groupings, all hospitals, Australia, 1998-99

Principal procedure blocks		<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75+	Total ^(a)
1-28	Procedures on skull, brain and meninges	120	106	270	274	389	533	735	676	706	495	4,304
29-60	Procedures on spinal cord and spinal canal structures	745	629	664	1,784	3,130	3,533	3,759	2,965	3,302	2,995	23,506
61-86	Procedures on nerves and ganglia	7	32	143	916	2,307	4,648	5,993	3,913	3,271	3,210	24,440
110-129	Procedures on thyroid, parathyroid and endocrine glands	6	46	88	365	914	1,373	1,638	1,134	993	461	7,018
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	101	351	197	251	660	813	769	782	1,231	1,929	7,084
193-203	Procedures on lens	33	42	54	69	165	481	1,912	5,694	21,323	39,923	69,696
204-256	Procedures on retina, conjunctiva and other areas of eye	341	1,510	1,037	536	568	731	1,010	1,277	1,949	2,516	11,475
300-306	Procedures on external ear	10	198	381	145	181	206	165	120	115	109	1,630
307-333	Procedures on middle and inner ear and mastoid	476	5,926	6,110	745	924	1,115	1,196	964	779	456	18,691
370-389	Procedures on nose and sinuses	42	346	941	1,557	2,267	2,684	2,992	2,327	1,986	1,812	16,954
390-399	Procedures on tongue, salivary gland and ducts	61	190	210	134	266	371	448	402	370	295	2,747
400-408	Procedures on mouth, palate or uvula	25	273	295	216	240	355	413	382	276	193	2,668
409-422	Procedures on tonsils, adenoids and pharynx	47	3,849	9,293	5,090	1,565	611	257	198	163	136	21,209
450-490	Dental and orthodontic procedures	16	3,711	6,566	21,060	8,333	3,437	2,014	1,000	597	555	47,289
520-542	Procedures on larynx and trachea	130	159	156	137	255	446	585	540	536	335	3,279
543-558	Procedures on bronchus, lung and pleura	102	141	122	323	453	778	1,422	2,018	2,325	1,655	9,339
559-567	Procedures on chest wall, mediastinum and diaphragm	22	18	47	207	305	449	576	724	932	1,265	4,545
568-569	Airway management, continuous ventilatory support	1,549	98	82	189	231	294	393	438	620	585	4,479
600-638	Procedures on atrium, ventricle, septum and valves	155	141	107	64	81	138	250	387	673	577	2,573
639-666	Other procedures on heart, myocardium and pericardium	38	41	91	230	303	429	631	694	1,361	2,549	6,367
667-693	Procedures on coronary arteries and aorta	160	164	114	70	172	1,040	3,851	6,891	10,421	5,755	28,638
694-767	Procedures on arteries and veins	456	596	817	911	2,861	5,263	6,245	5,763	6,555	5,908	35,375
800-817	Procedures on blood and blood-forming organs	45	311	440	576	879	1,266	1,816	1,628	1,660	1,621	10,242
850-869	Procedures on oesophagus	63	161	89	109	190	429	782	902	1,279	1,904	5,908
870-890	Procedures on stomach	134	195	193	220	518	879	911	720	968	1,771	6,509
891-925	Procedures on small and large intestines	217	120	408	3,597	8,602	17,889	28,785	29,169	28,976	21,143	138,906
926-927	Procedures on appendix	2	66	2,528	3,694	2,174	1,338	701	333	179	147	11,162
928-950	Procedures on rectum and anus	105	161	152	821	2,691	3,563	3,733	2,836	2,450	2,239	18,751
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	31	39	145	2,394	6,209	7,072	8,090	7,222	6,261	4,999	42,462
983-1011	Other procedures on abdomen, peritoneum and hernia	681	1,364	1,977	8,202	15,750	23,133	30,221	27,852	27,735	24,587	161,502
1040-1063	Procedures on kidney	74	102	685	4,441	15,511	21,408	32,607	48,455	63,767	22,946	209,996
1064-1128	Procedures on bladder, ureter and urethra	212	464	662	1,286	2,928	5,330	8,094	8,173	9,595	9,185	45,929
1160-1203	Procedures on male genital organs	..	..	..	..	..	..	..	..	..	..	..

(continued)

Table 8.8 (continued): Separations for females by age group and principal procedure in ICD-10-AM groupings, all hospitals, Australia, 1998–99

Principal procedure blocks	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75+	Total ^(a)
1230–1239 Procedures on female pelvic cavity	4	3	69	3,358	6,861	4,598	1,492	433	303	162	17,283
1240–1258 Procedures on ovaries and fallopian tubes	7	6	197	3,447	15,652	13,645	3,114	837	514	273	37,692
1259–1273 Procedures on uterus	1	3	155	20,731	36,175	39,220	30,928	11,343	6,548	3,196	148,303
1274–1278 Procedures on cervix	0	3	9	6,273	10,194	6,479	3,799	1,597	665	244	29,263
1279–1288 Procedures on vagina and pelvic floor	11	44	143	1,618	2,491	2,459	3,081	2,877	2,699	1,459	16,882
1289–1299 Procedures on other female genital organs	20	108	164	1,933	14,386	13,704	1,546	621	505	458	33,447
1330–1335 Induction and augmentation of labour	0	0	30	15,851	38,205	8,769	49	0	0	0	62,904
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	0	0	7	5,026	17,613	4,062	18	0	0	0	26,728
1340 Caesarean delivery	1	0	12	7,606	33,458	11,983	77	1	0	0	53,138
1341–1347 Other obstetric and postpartum procedures	0	0	56	22,146	60,580	15,766	117	3	3	0	98,672
1360–1372 Procedures on head, facial bones and joints	2	18	263	552	425	307	192	96	75	77	2,007
1373–1380 Procedures on neck, thorax and ribs	0	6	5	15	32	19	31	20	29	11	168
1381–1393 Procedures on spinal cord and vertebrae	7	3	140	173	148	332	415	310	277	185	1,990
1394–1407 Procedures on shoulder, scapula and clavicle	1	8	64	458	597	1,011	1,818	1,851	1,836	1,252	8,896
1408–1438 Procedures on humerus, elbow and forearm	7	705	3,315	437	512	644	862	1,068	1,426	1,971	10,947
1439–1475 Procedures on hand, wrist and phalanges	30	302	625	1,416	1,842	1,964	2,452	2,252	1,935	1,175	13,993
1476–1494 Procedures on hip, pelvis and femur	125	179	342	214	235	390	1,054	2,186	5,052	13,730	23,507
1495–1525 Procedures on knee, patella, tibia and fibula	9	60	889	4,117	4,595	5,624	7,084	7,306	8,426	6,102	44,212
1526–1550 Procedures on ankle, foot and toes	128	215	662	1,115	1,211	1,845	2,899	3,084	2,721	2,301	16,181
1551–1579 Other procedures for musculoskeletal system	177	1,171	4,887	3,550	4,071	4,923	6,328	5,583	5,308	5,372	41,370
1600–1660 Procedures on skin and subcutaneous tissue	4,131	3,194	5,927	6,957	7,583	9,670	11,233	9,499	10,906	16,574	85,674
1661–1718 Plastic, cosmetic and corrective procedures	255	169	765	1,976	2,579	3,300	3,727	2,127	1,411	1,299	17,608
1740–1759 Procedures on breast	14	16	92	2,967	6,436	9,976	10,929	6,786	4,563	2,464	44,243
1780–1799 Chemotherapeutic and radiation oncology procedures	99	1,334	2,029	1,581	4,138	13,796	27,334	29,663	26,416	10,906	117,296
1820–1899 Miscellaneous non-operative procedures	9,364	5,273	6,707	10,686	16,520	18,964	22,136	18,294	20,992	27,232	156,168
1940–2016 Imaging services	1,321	2,462	2,494	4,676	7,240	8,122	9,798	10,197	16,108	30,178	92,597
2050–2140 Allied health interventions	1,963	1,929	2,734	8,366	13,551	11,435	12,402	14,873	27,874	73,792	168,919
No principal procedure or not reported	33,104	35,482	29,267	94,076	139,799	80,953	61,358	51,938	67,271	126,595	719,843
Total	56,987	74,243	97,113	291,934	529,151	405,995	379,267	351,424	417,217	491,264	3,094,604

(a) Total includes separations for which age was not reported.

... not applicable

Table 8.9: Separations by number of procedures reported and hospital sector, States and Territories, 1998–99

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Hospital sector	(Number)								
Public hospitals									
Separations ^(a)	1,273,396	970,150	708,713	357,569	355,863	80,517	58,598	54,885	3,859,691
No procedure reported	383,817	245,036	220,533	91,023	100,560	19,182	8,712	15,672	1,084,535
One procedure code only	543,224	470,141	293,031	164,385	157,739	39,389	32,232	31,408	1,731,549
Two procedure codes only	174,667	130,648	92,983	51,476	52,787	10,433	8,838	4,367	526,199
Three procedure codes only	79,234	57,122	41,020	24,335	22,114	4,227	3,789	1,746	233,587
Four procedure codes only	40,540	29,483	21,739	11,622	10,139	2,304	2,039	757	118,623
Five or more procedure codes	51,914	37,720	39,407	14,728	12,524	4,982	2,988	935	165,198
Mean procedure codes per separation ^(b)	1.8	1.8	2.0	1.8	1.8	1.9	1.9	1.4	1.8
Maximum number of procedure codes	19	12	31	31	12	31	25	31	..
Private hospitals									
Separations ^(a)	566,617	495,667	411,279	186,997	150,741	47,167	16,890	n.a.	1,875,358
No procedure reported	47,372	73,562	52,682	31,166	18,769	8,355	2,199	n.a.	234,105
One procedure code only	329,869	264,501	201,862	86,908	70,700	21,129	7,893	n.a.	982,862
Two procedure codes only	112,947	93,041	94,527	39,483	31,789	11,559	3,626	n.a.	386,972
Three procedure codes only	43,111	32,939	32,192	16,928	12,760	3,455	1,794	n.a.	143,179
Four procedure codes only	16,695	14,586	14,454	6,694	6,404	1,670	861	n.a.	61,364
Five or more procedure codes	16,623	17,038	15,562	5,818	10,319	999	517	n.a.	66,876
Mean procedure codes per separation ^(b)	1.7	1.7	1.8	1.8	2.0	1.7	1.8	n.a.	1.7
Maximum number of procedure codes	19	12	27	11	10	14	15	n.a.	..
	(Per cent)								
Public hospitals									
No procedure reported	30.1	25.3	31.1	25.5	28.3	23.8	14.9	28.6	28.1
One procedure code only	42.7	48.5	41.3	46.0	44.3	48.9	55.0	57.2	44.9
Two procedure codes only	13.7	13.5	13.1	14.4	14.8	13.0	15.1	8.0	13.6
Three procedure codes only	6.2	5.9	5.8	6.8	6.2	5.2	6.5	3.2	6.1
Four procedure codes only	3.2	3.0	3.1	3.3	2.8	2.9	3.5	1.4	3.1
Five or more procedure codes	4.1	3.9	5.6	4.1	3.5	6.2	5.1	1.7	4.3
Private hospitals									
No procedure reported	8.4	14.8	12.8	16.7	12.5	17.7	13.0	n.a.	12.5
One procedure code only	58.2	53.4	49.1	46.5	46.9	44.8	46.7	n.a.	52.4
Two procedure codes only	19.9	18.8	23.0	21.1	21.1	24.5	21.5	n.a.	20.6
Three procedure codes only	7.6	6.6	7.8	9.1	8.5	7.3	10.6	n.a.	7.6
Four procedure codes only	2.9	2.9	3.5	3.6	4.2	3.5	5.1	n.a.	3.3
Five or more procedure codes	2.9	3.4	3.8	3.1	6.8	2.1	3.1	n.a.	3.6

(a) Includes separations for which no procedure codes were reported.

(b) Means are for separations with one or more procedures.

.. not applicable.

n.a. not available.

Note: The Institute requested up to 31 procedure codes to be reported.

Table 8.10: Separation, same day separation, patient day and average length of stay statistics for the 30 principal procedure ICD-10-AM blocks with the highest number of separations, public hospitals, Australia, 1998–99

Principal procedure block	Separations	Same day separations	Per cent	Separations	Patient days	Patient days	ALOS (days)	Rank by patient days
			same day separations	per 10,000 population		per 10,000 population		
1059 Haemodialysis	426,773	422,551	99.0	22.6	449,741	23.9	1.1	3
2140 Generalised allied health interventions	153,312	10,314	6.7	8.1	1,854,446	98.4	12.1	1
1781 Intravenous chemotherapy	131,336	116,621	88.8	7.0	186,731	9.9	1.4	7
1892 Injection or infusion of therapeutic or prophylactic substance	82,202	44,379	54.0	4.4	272,556	14.5	3.3	4
1008 Panendoscopy with excision	78,828	64,190	81.4	4.2	171,807	9.1	2.2	10
1952 Computerised tomography of brain	57,345	8,826	15.4	3.0	488,595	25.9	8.5	2
905 Fibreoptic colonoscopy	51,679	45,207	87.5	2.7	81,756	4.3	1.6	23
1861 Transfusion of blood and gamma globulin	51,606	27,152	52.6	2.7	177,007	9.4	3.4	9
1344 Postpartum suture	39,932	923	2.3	2.1	135,407	7.2	3.4	11
1340 Caesarean section	36,285	87	0.2	1.9	222,996	11.8	6.1	6
911 Fibreoptic colonoscopy with excision	35,493	29,732	83.8	1.9	65,497	3.5	1.8	30
1005 Panendoscopy	34,108	24,852	72.9	1.8	96,721	5.1	2.8	19
197 Extracapsular crystalline lens extraction by phacoemulsification	33,589	27,765	82.7	1.8	37,197	2.0	1.1	63
1267 Evacuation of uterus	29,545	23,679	80.1	1.6	31,932	1.7	1.1	75
1334 Medical or surgical induction of labour	28,478	1,528	5.4	1.5	108,028	5.7	3.8	17
1088 Examination procedures on bladder	26,543	22,452	84.6	1.4	43,374	2.3	1.6	51
965 Cholecystectomy	25,928	230	0.9	1.4	97,215	5.2	3.7	18
1625 Excision of lesion of skin and subcutaneous tissue nec	25,270	21,407	84.7	1.3	51,696	2.7	2.0	43
412 Tonsillectomy or adenoidectomy	21,660	2,347	10.8	1.1	26,372	1.4	1.2	83
2064 Physiotherapy diagnostic evaluation	20,836	1,244	6.0	1.1	226,263	12.0	10.9	5
990 Repair of inguinal hernia	20,640	5,260	25.5	1.1	38,963	2.1	1.9	60
1265 Curettage of uterus	19,646	17,499	89.1	1.0	22,151	1.2	1.1	93
668 Coronary angiography	19,245	6,982	36.3	1.0	66,410	3.5	3.5	29
1335 Medical or surgical augmentation of labour	18,764	641	3.4	1.0	58,351	3.1	3.1	35
1849 Other nonoperative procedures on respiratory system	18,539	1,797	9.7	1.0	127,835	6.8	6.9	12
926 Appendicectomy	18,423	100	0.5	1.0	62,866	3.3	3.4	31
1571 Other repair procedures on bone of other musculoskeletal sites	16,815	2,951	17.5	0.9	52,126	2.8	3.1	42
1635 Repair of wound of skin and subcutaneous tissue	16,597	9,008	54.3	0.9	42,028	2.2	2.5	55
458 Surgical removal of tooth	15,099	13,520	89.5	0.8	16,726	0.9	1.1	115
309 Myringotomy	14,996	13,700	91.4	0.8	16,315	0.9	1.1	120
Other	1,205,281	446,378	37.0	63.9	6,132,341	325.3	5.1	..
No principal procedure or not reported	1,084,898	305,397	28.1	57.6	4,812,779	255.3	4.4	..
Total	3,859,691	1,718,719	44.5	204.7	16,274,228	863.3	4.2	..

Notes: 1. A similar listing of all principal procedures in ICD-10-AM blocks is provided on the Internet at <http://www.aihw.gov.au/publications/health/ahs98-9.html>.

2. Abbreviation: nec—not elsewhere classified

.. not applicable.

Table 8.11: Separation, same day separation, patient day and average length of stay statistics for the 30 principal procedure ICD-10-AM blocks with the highest number of separations, private hospitals, Australia, 1998–99

Principal procedure block		Separations	Same day separations	Per cent same day separations	Separations per 10,000 population	Patient days		ALOS (days)	Rank by patient days
						Patient days	per 10,000 population		
1008	Panendoscopy with excision	99,220	92,915	93.6	53.2	133,417	71.5	1.3	10
905	Fibreoptic colonoscopy	88,990	83,967	94.4	47.7	103,878	55.7	1.2	23
1781	Intravenous chemotherapy	73,561	67,202	91.4	39.4	91,943	49.3	1.2	7
911	Fibreoptic colonoscopy with excision	64,053	59,288	92.6	34.3	80,211	43.0	1.3	30
197	Extracapsular crystalline lens extraction by phacoemulsification	63,878	47,770	74.8	34.2	69,292	37.1	1.1	63
1059	Haemodialysis	53,003	52,721	99.5	28.4	54,924	29.4	1.0	3
458	Surgical removal of tooth	45,510	37,855	83.2	24.4	47,411	25.4	1.0	115
1005	Panendoscopy	35,227	31,901	90.6	18.9	55,693	29.8	1.6	19
2140	Generalised allied health interventions	32,388	5,642	17.4	17.4	390,521	209.3	12.1	1
1625	Excision of lesion of skin and subcutaneous tissue nec	26,343	21,471	81.5	14.1	41,657	22.3	1.6	43
1088	Examination procedures on bladder	23,911	20,421	85.4	12.8	32,853	17.6	1.4	51
1267	Evacuation of uterus	22,354	21,668	96.9	12.0	22,570	12.1	1.0	75
1297	Procedures for reproductive medicine	21,365	21,154	99.0	11.4	21,422	11.5	1.0	49
990	Repair of inguinal hernia	18,812	2,039	10.8	10.1	39,195	21.0	2.1	60
1340	Caesarean section	16,854	18	0.1	9.0	123,786	66.3	7.3	6
1892	Injection or infusion of therapeutic or prophylactic substance	16,738	9,349	55.9	9.0	55,771	29.9	3.3	4
412	Tonsillectomy or adenoidectomy	16,153	2,127	13.2	8.7	18,635	10.0	1.2	83
1826	Group psychotherapy	16,001	13,713	85.7	8.6	66,067	35.4	4.1	313
965	Cholecystectomy	15,788	59	0.4	8.5	55,701	29.9	3.5	18
309	Myringotomy	14,695	13,918	94.7	7.9	15,042	8.1	1.0	120
1861	Transfusion of blood and gamma globulin	14,579	5,979	41.0	7.8	56,895	30.5	3.9	9
668	Coronary angiography	14,371	5,251	36.5	7.7	28,182	15.1	2.0	29
1505	Other excision procedures on knee or leg	12,978	8,620	66.4	7.0	22,830	12.2	1.8	70
1265	Curettage of uterus	12,705	11,466	90.2	6.8	13,521	7.2	1.1	93
1344	Postpartum suture	11,867	39	0.3	6.4	59,782	32.0	5.0	11
1404	Other repair procedures on shoulder	11,532	761	6.6	6.2	30,659	16.4	2.7	148
76	Release of carpal and tarsal tunnel	11,223	8,739	77.9	6.0	12,930	6.9	1.2	154
1832	Sleep study	10,524	32	0.3	5.6	10,983	5.9	1.0	179
667	Cardiac catheterisation	10,203	3,388	33.2	5.5	23,184	12.4	2.3	58
1620	Excision of benign lesion of skin and subcutaneous tissue	10,165	9,155	90.1	5.4	11,862	6.4	1.2	103
	Other	756,133	304,830	40.3	405.2	3,074,195	1,647.5	4.1	..
	No principal procedure or not reported	234,234	64,850	27.7	125.5	1,179,801	632.3	5.0	..
Total		1,875,358	1,028,308	54.8	1,005.0	6,044,813	3,239.5	3.2	..

Notes: 1. A similar listing of all principal procedures in ICD-10-AM blocks is provided on the Internet at <http://www.aihw.gov.au/publications/health/ahs98-9.html>.

2. Abbreviation: nec—not elsewhere classified

.. not applicable.

Table 8.12: Separations for the 30 principal procedure ICD-10-AM blocks with the highest number of separations, public hospitals, States and Territories, 1998–99

Principal procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1059 Haemodialysis	120,293	128,374	65,025	44,753	29,427	9,789	11,030	18,082	426,773
2140 Generalised allied health interventions	83,449	63,531	84	37	8	5	3,710	2,488	153,312
1781 Intravenous chemotherapy	31,542	38,916	24,785	14,088	13,198	4,245	4,324	238	131,336
1892 Injection or infusion of therapeutic or prophylactic substance	21,850	17,408	18,046	9,142	11,316	2,873	1,365	202	82,202
1008 Panendoscopy with excision	28,842	18,231	13,410	8,663	5,566	1,594	1,611	911	78,828
1952 Computerised tomography of brain	19,703	15,513	10,167	4,722	4,718	1,326	677	519	57,345
905 Fibreoptic colonoscopy	17,238	11,716	9,504	6,032	4,926	1,041	873	349	51,679
1861 Transfusion of blood and gamma globulin	17,968	15,106	6,854	3,719	5,592	1,397	650	320	51,606
1344 Postpartum suture	15,460	9,099	7,058	3,423	2,805	747	828	512	39,932
1340 Caesarean section	11,984	8,678	6,868	3,537	3,243	772	601	602	36,285
911 Fibreoptic colonoscopy with excision	12,731	7,538	5,686	5,099	2,714	734	727	264	35,493
1005 Panendoscopy	9,325	9,534	5,848	3,327	4,841	813	214	206	34,108
197 Extracapsular crystalline lens extraction by phacoemulsification	12,333	9,337	4,167	3,554	3,657	34	308	199	33,589
1267 Evacuation of uterus	10,363	10,758	86	908	5,343	456	374	1,257	29,545
1334 Medical or surgical induction of labour	9,791	8,654	4,714	2,443	1,543	573	464	296	28,478
1088 Examination procedures on bladder	8,540	6,277	4,271	3,139	3,248	740	206	122	26,543
965 Cholecystectomy	9,209	6,808	4,577	2,074	2,347	370	345	198	25,928
1625 Excision of lesion of skin and subcutaneous tissue nec	1,928	1,259	11,353	4,106	5,539	1,020	53	12	25,270
412 Tonsillectomy or adenoidectomy	6,848	6,416	3,581	1,916	2,163	234	392	110	21,660
2064 Physiotherapy diagnostic evaluation	3,308	586	9,675	2,177	3,466	1,623	1	0	20,836
990 Repair of inguinal hernia	6,949	5,151	3,830	1,953	1,968	343	313	133	20,640
1265 Curettage of uterus	5,974	6,561	3,094	2,002	1,188	292	291	244	19,646
668 Coronary angiography	11,206	6,607	128	5	37	165	1,097	0	19,245
1335 Medical or surgical augmentation of labour	7,036	4,745	4,053	998	818	440	427	247	18,764
1849 Other nonoperative procedures on respiratory system	5,854	3,760	5,019	2,030	1,286	208	235	147	18,539
926 Appendicectomy	6,344	4,743	3,188	1,904	1,265	371	379	229	18,423
1571 Other repair procedures on bone of other musculoskeletal sites	69	89	8,278	4,218	3,328	830	2	1	16,815
1635 Repair of wound of skin and subcutaneous tissue	3,251	2,972	7,507	1,752	793	168	72	82	16,597
458 Surgical removal of tooth	3,852	4,300	3,197	1,119	1,606	469	352	204	15,099
309 Myringotomy	4,098	5,008	1,805	1,673	1,855	168	282	107	14,996
Other	382,241	287,439	232,200	121,997	125,375	27,475	17,683	10,871	1,205,281
No principal procedure or not reported	383,817	245,036	220,655	91,059	100,684	19,202	8,712	15,733	1,084,898
Total	1,273,396	970,150	708,713	357,569	355,863	80,517	58,598	54,885	3,859,691

Note: ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

Note: Abbreviation: nec—not elsewhere classified

Table 8.13: Separations for the 30 principal procedure ICD-10-AM blocks with the highest number of separations, private hospitals, States and Territories, 1998–99

Principal procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1008 Panendoscopy with excision	35,378	24,817	24,374	7,479	4,962	n.p.	n.p.	n.a.	99,220
905 Fiberoptic colonoscopy	30,616	24,850	20,304	5,358	5,875	n.p.	n.p.	n.a.	88,990
1781 Intravenous chemotherapy	14,638	19,504	22,432	8,655	7,106	n.p.	n.p.	n.a.	73,561
911 Fiberoptic colonoscopy with excision	22,619	15,496	14,991	6,162	3,475	n.p.	n.p.	n.a.	64,053
197 Extracapsular crystalline lens extraction by phacoemulsification	25,076	12,635	15,568	4,272	3,854	n.p.	n.p.	n.a.	63,878
1059 Haemodialysis	11,980	17,873	11,204	3,034	8,912	n.p.	n.p.	n.a.	53,003
458 Surgical removal of tooth	12,992	11,886	9,352	5,616	4,195	n.p.	n.p.	n.a.	45,510
1005 Panendoscopy	7,692	14,135	6,800	2,254	3,536	n.p.	n.p.	n.a.	35,227
2140 Generalised allied health interventions	19,043	12,157	706	4	5	n.p.	n.p.	n.a.	32,388
1625 Excision of lesion of skin and subcutaneous tissue nec	1,348	3,173	11,757	2,993	5,994	n.p.	n.p.	n.a.	26,343
1088 Examination procedures on bladder	9,221	5,889	4,974	1,855	1,073	n.p.	n.p.	n.a.	23,911
1267 Evacuation of uterus	14,686	3,063	764	3,363	234	n.p.	n.p.	n.a.	22,354
1297 Procedures for reproductive medicine	7,736	5,502	5,179	1,703	448	n.p.	n.p.	n.a.	21,365
990 Repair of inguinal hernia	6,171	4,629	3,790	1,921	1,454	n.p.	n.p.	n.a.	18,812
1340 Caesarean section	4,463	4,107	4,073	2,256	1,281	n.p.	n.p.	n.a.	16,854
1892 Injection or infusion of therapeutic or prophylactic substance	1,789	4,880	4,813	2,910	1,693	n.p.	n.p.	n.a.	16,738
412 Tonsillectomy or adenoidectomy	5,415	3,190	3,590	1,870	1,493	n.p.	n.p.	n.a.	16,153
1826 Group psychotherapy	9,889	812	5,254	25	21	n.p.	n.p.	n.a.	16,001
965 Cholecystectomy	5,226	3,643	3,348	1,632	1,260	n.p.	n.p.	n.a.	15,788
309 Myringotomy	4,350	3,957	2,381	1,332	2,080	n.p.	n.p.	n.a.	14,695
1861 Transfusion of blood and gamma globulin	2,832	4,528	4,716	1,044	1,033	n.p.	n.p.	n.a.	14,579
668 Coronary angiography	8,614	5,146	116	7	419	n.p.	n.p.	n.a.	14,371
1505 Other excision procedures on knee or leg	201	2,194	3,755	2,786	3,299	n.p.	n.p.	n.a.	12,978
1265 Curettage of uterus	3,529	3,751	2,102	1,476	1,202	n.p.	n.p.	n.a.	12,705
1344 Postpartum suture	3,678	3,278	2,286	1,108	1,014	n.p.	n.p.	n.a.	11,867
1404 Other repair procedures on shoulder	3,510	2,371	2,064	1,622	1,566	n.p.	n.p.	n.a.	11,532
76 Release of carpal and tarsal tunnel	3,226	3,061	2,287	1,224	1,001	n.p.	n.p.	n.a.	11,223
1832 Sleep study	4,877	2,710	1,990	293	408	n.p.	n.p.	n.a.	10,524
667 Cardiac catheterisation	128	883	5,110	2,259	1,313	n.p.	n.p.	n.a.	10,203
1620 Excision of benign lesion of skin and subcutaneous tissue	6,582	3,463	0	0	0	n.p.	n.p.	n.a.	10,165
Other	231,740	194,522	158,477	79,265	61,748	n.p.	n.p.	n.a.	756,133
No principal procedure or not reported	47,372	73,562	52,722	31,219	18,787	n.p.	n.p.	n.a.	234,234
Total	566,617	495,667	411,279	186,997	150,741	n.p.	n.p.	n.a.	1,875,358

Notes: 1. ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

2. Abbreviation: nec—not elsewhere classified.

n.a. not available.

n.p. not published.

Table 8.14: Average length of stay (days) for the 30 principal procedure ICD-10-AM blocks with the highest number of separations, public hospitals, States and Territories, 1998–99

Principal procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1059 Haemodialysis	1.1	1.0	1.1	1.0	1.0	1.1	1.0	1.1	1.1
2140 Generalised allied health interventions	11.8	12.8	11.2	18.4	22.5	7.6	9.1	9.8	12.1
1781 Intravenous chemotherapy	1.5	1.5	1.3	1.3	1.4	1.2	1.2	1.5	1.4
1892 Injection or infusion of therapeutic or prophylactic substance	3.9	3.1	3.3	3.2	2.8	2.7	3.1	6.2	3.3
1008 Panendoscopy with excision	2.4	1.9	2.2	1.9	2.3	2.0	2.2	2.0	2.2
1952 Computerised tomography of brain	8.3	6.7	10.1	10.1	10.3	8.7	11.0	9.4	8.5
905 Fiberoptic colonoscopy	1.6	1.6	1.6	1.5	1.6	1.4	1.5	1.7	1.6
1861 Transfusion of blood and gamma globulin	3.5	3.5	3.5	3.2	2.8	3.4	3.4	4.2	3.4
1344 Postpartum suture	3.4	3.4	3.2	3.5	3.5	3.6	3.0	4.3	3.4
1340 Caesarean section	6.4	6.1	5.5	6.4	6.4	5.8	6.7	7.5	6.1
911 Fiberoptic colonoscopy with excision	1.9	1.8	1.7	1.7	2.0	1.9	2.2	2.1	1.8
1005 Panendoscopy	3.7	2.4	2.7	2.4	2.4	2.4	4.3	3.0	2.8
197 Extracapsular crystalline lens extraction by phacoemulsification	1.1	1.1	1.1	1.1	1.1	1.0	1.0	2.0	1.1
1267 Evacuation of uterus	1.1	1.0	1.8	1.1	1.0	1.1	1.2	1.1	1.1
1334 Medical or surgical induction of labour	4.0	3.7	3.5	3.8	3.8	3.4	4.0	4.7	3.8
1088 Examination procedures on bladder	1.7	1.4	1.7	1.6	1.8	1.6	1.5	2.5	1.6
965 Cholecystectomy	4.4	3.6	3.0	3.6	3.2	3.8	4.1	5.6	3.7
1625 Excision of lesion of skin and subcutaneous tissue not elsewhere classific	2.2	1.8	2.3	1.8	1.9	1.6	2.1	2.3	2.0
412 Tonsillectomy or adenoidectomy	1.3	1.2	1.1	1.3	1.3	1.1	1.2	1.1	1.2
2064 Physiotherapy diagnostic evaluation	13.1	25.4	9.1	10.7	10.8	11.8	20.0	0.0	10.9
990 Repair of inguinal hernia	2.2	1.7	1.6	1.9	1.9	2.1	1.5	2.3	1.9
1265 Curettage of uterus	1.1	1.1	1.2	1.1	1.3	1.1	1.1	1.3	1.1
668 Coronary angiography	3.7	3.3	4.6	1.2	3.5	3.4	2.3	0.0	3.5
1335 Medical or surgical augmentation of labour	3.1	3.3	2.7	3.1	3.0	3.0	3.2	4.4	3.1
1849 Other nonoperative procedures on respiratory system	6.0	8.1	6.1	7.1	7.2	11.7	13.7	15.8	6.9
926 Appendectomy	3.6	3.3	3.1	3.4	3.5	3.5	3.6	3.8	3.4
1571 Other repair procedures on bone of other musculoskeletal sites	3.6	3.5	2.8	3.4	3.2	3.6	2.5	2.0	3.1
1635 Repair of wound of skin and subcutaneous tissue	4.4	2.4	1.6	3.1	2.5	4.3	2.3	2.8	2.5
458 Surgical removal of tooth	1.2	1.1	1.1	1.1	1.1	1.1	1.0	1.4	1.1
309 Myringotomy	1.1	1.1	1.1	1.1	1.1	1.1	1.0	1.0	1.1
Total^(a)	4.6	3.8	4.3	4.0	4.1	4.8	3.7	3.5	4.2

(a) For all separations.

Note: ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

Table 8.15: Average length of stay (days) for the 30 principal procedure ICD-10-AM blocks with the highest number of separations, private hospitals, States and Territories, 1998–99

Principal procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1008 Panendoscopy with excision	1.2	1.3	1.5	1.5	1.5	n.p.	n.p.	n.a.	1.3
905 Fiberoptic colonoscopy	1.1	1.2	1.2	1.2	1.2	n.p.	n.p.	n.a.	1.2
1781 Intravenous chemotherapy	1.2	1.4	1.2	1.1	1.2	n.p.	n.p.	n.a.	1.2
911 Fiberoptic colonoscopy with excision	1.1	1.3	1.3	1.4	1.4	n.p.	n.p.	n.a.	1.3
197 Extracapsular crystalline lens extraction by phacoemulsification	1.1	1.1	1.1	1.2	1.0	n.p.	n.p.	n.a.	1.1
1059 Haemodialysis	1.0	1.0	1.1	1.0	1.0	n.p.	n.p.	n.a.	1.0
458 Surgical removal of tooth	1.0	1.0	1.0	1.2	1.0	n.p.	n.p.	n.a.	1.0
1005 Panendoscopy	1.5	1.4	2.0	1.9	1.5	n.p.	n.p.	n.a.	1.6
2140 Generalised allied health interventions	10.2	14.9	11.9	46.0	1.4	n.p.	n.p.	n.a.	12.1
1625 Excision of lesion of skin and subcutaneous tissue not elsewhere classified	1.5	1.5	1.7	1.5	1.3	n.p.	n.p.	n.a.	1.6
1088 Examination procedures on bladder	1.2	1.3	1.6	1.7	1.5	n.p.	n.p.	n.a.	1.4
1267 Evacuation of uterus	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
1297 Procedures for reproductive medicine	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
990 Repair of inguinal hernia	2.2	2.1	1.8	2.1	2.6	n.p.	n.p.	n.a.	2.1
1340 Caesarean section	7.2	7.6	7.0	7.9	7.1	n.p.	n.p.	n.a.	7.3
1892 Injection or infusion of therapeutic or prophylactic substance	4.1	2.7	2.9	4.3	3.2	n.p.	n.p.	n.a.	3.3
412 Tonsillectomy or adenoidectomy	1.1	1.2	1.1	1.1	1.3	n.p.	n.p.	n.a.	1.2
1826 Group psychotherapy	4.2	2.1	4.1	19.8	21.3	n.p.	n.p.	n.a.	4.1
965 Cholecystectomy	3.2	3.8	3.7	3.5	3.7	n.p.	n.p.	n.a.	3.5
309 Myringotomy	1.0	1.0	1.0	1.0	1.1	n.p.	n.p.	n.a.	1.0
1861 Transfusion of blood and gamma globulin	4.3	4.2	3.2	4.4	4.2	n.p.	n.p.	n.a.	3.9
668 Coronary angiography	1.7	2.3	2.6	3.1	2.3	n.p.	n.p.	n.a.	2.0
1505 Other excision procedures on knee or leg	9.2	1.7	1.8	1.8	1.4	n.p.	n.p.	n.a.	1.8
1265 Curettage of uterus	1.1	1.0	1.1	1.1	1.1	n.p.	n.p.	n.a.	1.1
1344 Postpartum suture	5.0	5.2	5.1	4.8	5.1	n.p.	n.p.	n.a.	5.0
1404 Other repair procedures on shoulder	2.6	2.9	2.8	2.3	2.6	n.p.	n.p.	n.a.	2.7
76 Release of carpal and tarsal tunnel	1.1	1.1	1.2	1.3	1.1	n.p.	n.p.	n.a.	1.2
1832 Sleep study	1.0	1.1	1.1	1.0	1.0	n.p.	n.p.	n.a.	1.0
667 Cardiac catheterisation	2.1	2.5	2.4	1.9	2.4	n.p.	n.p.	n.a.	2.3
1620 Excision of benign lesion of skin and subcutaneous tissue	1.2	1.2	..	..	..	n.p.	n.p.	n.a.	1.2
Total^(a)	2.9	3.3	3.4	3.2	3.4	n.p.	n.p.	n.a.	3.2

Note: ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

(a) For all separations.

n.a. not available.

n.p. not published.

.. not applicable.

Table 8.16: Separations for males for the 30 principal procedure ICD-10-AM blocks with the highest number of separations, by age group, all hospitals, Australia, 1998–99

Principal procedure block	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75+	Total ^(a)
1059 Haemodialysis	0	50	637	7,019	23,348	35,754	45,563	55,420	74,237	36,334	278,362
1781 Intravenous chemotherapy	167	1,430	2,503	2,394	3,275	6,086	14,747	26,496	30,066	12,048	99,212
1008 Panendoscopy with excision	260	525	1,141	3,198	7,898	12,515	16,598	15,564	15,880	10,617	84,196
2140 Generalised allied health interventions	1,343	1,613	1,808	3,165	4,373	5,243	6,876	9,256	17,491	28,722	79,890
905 Fiberoptic colonoscopy	3	29	102	833	3,490	8,208	13,550	12,997	13,152	8,316	60,680
911 Fiberoptic colonoscopy with excision	36	79	253	1,124	2,703	5,435	9,840	11,908	12,257	7,217	50,852
1892 Injection or infusion of therapeutic or prophylactic substance	3,728	3,339	3,912	2,867	3,201	4,723	6,018	6,124	7,376	5,595	46,883
197 Extracapsular crystalline lens extraction by phacoemulsification	1	7	11	60	145	451	1,782	4,145	12,374	20,012	38,988
990 Repair of inguinal hernia	1,682	1,993	1,336	1,656	2,649	3,953	5,930	6,206	6,211	4,295	35,911
1861 Transfusion of blood and gamma globulin	240	1,236	1,659	1,833	1,735	1,768	2,758	4,096	8,527	11,689	35,541
1952 Computerised tomography of brain	589	1,211	1,578	2,799	2,839	2,767	3,074	3,837	6,392	9,877	34,963
1088 Examination procedures on bladder	138	189	322	498	1,185	2,264	4,146	6,038	9,270	8,966	33,016
1005 Panendoscopy	43	70	129	1,271	2,916	4,518	5,746	5,680	6,435	5,545	32,353
1625 Excision of lesion of skin and subcutaneous tissue not elsewhere classified	106	433	1,005	1,033	1,532	2,551	3,810	4,380	6,004	6,851	27,705
458 Surgical removal of tooth	4	746	2,467	11,165	5,183	2,043	1,146	638	487	293	24,172
668 Coronary angiography	1	7	12	35	207	1,384	4,224	6,180	7,067	3,200	22,317
1165 Transurethral prostatectomy	0	0	0	0	5	38	642	3,503	7,418	7,468	19,074
412 Tonsillectomy or adenoidectomy	29	5,765	8,372	2,048	976	504	149	45	29	11	17,928
309 Myringotomy	681	8,861	6,103	228	156	226	271	245	247	138	17,156
667 Cardiac catheterisation	99	115	124	63	172	1,120	3,278	4,486	4,785	2,067	16,309
1849 Other nonoperative procedures on respiratory system	5,404	1,846	1,060	243	337	783	1,304	1,408	1,577	1,427	15,389
1196 Excision procedures on penis	4,846	3,935	3,411	693	576	386	282	299	303	232	14,963
1554 Other application insertion or removal procedures on other musculoskeletal sites	37	263	1,708	3,784	3,260	2,242	1,561	915	581	410	14,761
1571 Other repair procedures on bone of other musculoskeletal sites	7	583	4,188	3,267	2,136	1,441	1,066	631	391	242	13,952
1183 Vasectomy and epididymectomy	0	1	0	101	3,931	7,489	1,601	161	40	26	13,350
1858 Other cardiovascular tests or nonsurgical procedures	30	61	125	290	400	983	1,933	2,710	3,596	2,275	12,403
926 Appendectomy	2	91	3,231	3,664	2,287	1,466	824	425	253	140	12,383
1832 Sleep study	178	214	249	229	934	2,264	3,493	2,598	1,621	596	12,376
1505 Other excision procedures on knee or leg	0	3	84	1,219	1,951	2,451	2,562	1,843	1,267	669	12,049
1635 Repair of wound of skin and subcutaneous tissue	45	900	1,479	2,636	2,423	1,630	1,047	651	509	685	12,005
Other	18,952	25,360	42,139	65,207	80,569	97,396	118,374	124,535	149,315	130,109	851,958
No principal procedure or not reported	42,033	47,806	40,269	50,273	58,493	59,312	62,332	61,749	79,845	97,147	599,265
Total	80,684	108,761	131,417	174,895	225,285	279,394	346,527	385,169	485,003	423,219	2,640,362

(a) Includes separations for which age was not reported.

Table 8.17: Separations for females for the 30 principal procedure ICD-10-AM blocks with the highest number of separations, by age group, all hospitals, Australia, 1998–99

Principal procedure block	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75+	Total ^(a)
1059 Haemodialysis	0	4	400	4,050	14,607	20,202	31,303	46,942	61,885	22,019	201,412
2140 Generalised allied health interventions	1,081	1,179	1,684	4,920	7,880	6,621	6,999	9,072	18,192	48,182	105,810
1781 Intravenous chemotherapy	98	1,164	1,920	1,463	3,618	12,527	24,665	27,217	23,810	9,185	105,667
1008 Panendoscopy with excision	163	368	1,015	4,250	7,772	13,363	18,961	17,576	16,742	13,642	93,852
905 Fiberoptic colonoscopy	6	21	70	1,568	4,603	11,129	18,456	16,979	16,004	11,151	79,987
197 Extracapsular crystalline lens extraction by phacoemulsification	0	2	11	41	98	380	1,548	4,720	17,986	33,693	58,479
1340 Caesarean section	1	0	12	7,606	33,458	11,983	77	1	0	0	53,138
1892 Injection or infusion of therapeutic or prophylactic substance	3,013	2,625	3,432	3,756	5,591	6,062	7,228	6,666	6,847	6,835	52,055
1267 Evacuation of uterus	0	0	124	17,615	22,849	10,989	306	9	1	2	51,898
1344 Postpartum suture	0	0	26	10,759	32,983	7,994	34	1	1	0	51,799
911 Fiberoptic colonoscopy with excision	29	53	203	1,762	3,469	5,931	9,155	10,357	10,520	7,215	48,694
1334 Medical or surgical induction of labour	0	0	18	8,329	23,411	5,655	38	0	0	0	37,451
1005 Panendoscopy	31	42	143	1,325	2,709	4,649	6,796	6,722	7,084	7,480	36,981
458 Surgical removal of tooth	2	555	3,077	20,235	7,462	2,477	1,249	622	381	376	36,436
1265 Curettage of uterus	0	0	16	1,912	5,777	8,394	9,680	3,824	1,928	820	32,351
1952 Computerised tomography of brain	486	841	885	1,568	1,998	2,112	2,411	2,652	5,104	13,719	31,777
1861 Transfusion of blood and gamma globulin	174	501	1,203	1,619	1,835	1,954	2,867	3,241	5,660	11,589	30,643
965 Cholecystectomy	2	4	83	1,963	5,082	5,469	6,151	5,073	3,979	2,331	30,137
1297 Procedures for reproductive medicine	0	0	0	387	12,422	12,010	374	6	0	0	25,201
1625 Excision of lesion of skin and subcutaneous tissue not elsewhere classified	99	456	1,231	1,238	1,901	2,963	3,684	3,171	3,858	5,307	23,908
1335 Medical or surgical augmentation of labour	0	0	9	6,634	12,968	2,579	6	0	0	0	22,196
1744 Local excision of breast	1	5	45	1,442	2,844	5,141	5,664	3,584	2,298	1,047	22,071
412 Tonsillectomy or adenoidectomy	17	3,781	9,184	4,793	1,408	459	143	66	26	8	19,885
1259 Examination procedures on uterus	1	1	7	754	2,998	4,975	6,153	2,559	1,214	566	19,228
1275 Destruction procedures on cervix	0	0	4	4,654	7,152	3,920	1,992	701	243	70	18,736
1268 Abdominal hysterectomy	0	1	3	38	1,342	6,234	6,879	1,713	993	557	17,760
1343 Other procedures associated with delivery	0	0	6	3,892	11,154	2,613	7	0	0	0	17,672
1345 Postpartum evacuation of uterus	0	0	7	3,748	9,912	3,792	60	1	0	0	17,520
1088 Examination procedures on bladder	40	169	291	601	1,045	1,854	2,745	3,152	3,970	3,571	17,438
2064 Physiotherapy diagnostic evaluation	130	183	269	473	964	705	996	1,288	2,662	7,447	15,117
Other	18,509	26,806	42,468	74,463	138,040	139,906	141,282	121,571	138,558	157,857	999,462
No principal procedure or not reported	33,104	35,482	29,267	94,076	139,799	80,953	61,358	51,938	67,271	126,595	719,843
Total	56,987	74,243	97,113	291,934	529,151	405,995	379,267	351,424	417,217	491,264	3,094,604

(a) Includes separations for which age was not reported.

Table 8.18: Principal and additional procedures in ICD-10-AM groupings, public hospitals, States and Territories, 1998–99

Procedure block number	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28 Procedures on skull, brain and meninges	4,379	3,193	1,823	1,326	824	263	312	84	12,204
29–60 Procedures on spinal cord and spinal canal structures	14,029	13,292	15,402	10,756	7,584	2,266	1,303	541	65,173
61–86 Procedures on nerves and ganglia	8,050	6,626	4,824	3,434	2,680	579	388	214	26,795
110–129 Procedures on thyroid, parathyroid and endocrine glands	2,577	1,572	1,097	531	449	158	95	37	6,516
160–192 Procedures on eyeball, cornea, sclera, iris and ciliary body	3,327	2,434	2,914	1,766	925	138	63	116	11,683
193–203 Procedures on lens	14,935	11,797	10,708	9,625	8,554	354	351	314	56,638
204–256 Procedures on retina, conjunctiva and other areas of eye	6,466	5,818	3,725	2,130	2,255	219	162	137	20,912
300–306 Procedures on external ear	1,026	772	2,007	481	492	96	62	51	4,987
307–333 Procedures on middle and inner ear and mastoid	8,707	8,281	6,676	3,254	3,744	270	578	283	31,793
370–389 Procedures on nose and sinuses	10,265	10,316	8,613	4,886	5,717	597	593	226	41,213
390–399 Procedures on tongue, salivary gland and ducts	1,639	1,097	894	403	371	90	74	35	4,603
400–408 Procedures on mouth, palate or uvula	1,464	1,488	1,218	587	599	150	76	64	5,646
409–422 Procedures on tonsils, adenoids and pharynx	8,600	7,854	5,061	2,373	2,850	298	478	155	27,669
450–490 Dental and orthodontic procedures	12,079	13,092	9,942	4,647	4,352	1,146	727	836	46,821
520–542 Procedures on larynx and trachea	3,669	2,978	2,629	957	1,301	202	148	89	11,973
543–558 Procedures on bronchus, lung and pleura	8,583	6,799	5,235	2,005	2,367	687	382	157	26,215
559–567 Procedures on chest wall, mediastinum and diaphragm	5,567	4,481	4,361	2,118	1,662	493	803	153	19,638
568–569 Airway management, continuous ventilatory support	11,397	9,859	6,304	2,602	3,906	789	869	619	36,345
600–638 Procedures on atrium, ventricle, septum and valves	13,353	8,845	6,761	4,916	2,820	508	1,339	0	38,542
639–666 Other procedures on heart, myocardium and pericardium	13,080	20,666	10,107	3,765	3,653	1,646	1,547	91	54,555
667–693 Procedures on coronary arteries and aorta	27,912	19,377	17,178	13,177	11,458	2,905	1,912	6	93,925
694–767 Procedures on arteries and veins	27,390	22,024	21,771	7,659	8,555	2,229	2,448	787	92,863
800–817 Procedures on blood and blood-forming organs	8,358	7,106	5,427	2,913	2,244	746	686	146	27,626
850–869 Procedures on oesophagus	4,346	2,980	3,088	1,675	1,745	725	314	75	14,948
870–890 Procedures on stomach	4,174	3,876	2,205	986	1,301	154	236	93	13,025
891–903 Procedures on small intestine	2,553	1,977	1,642	993	750	255	144	35	8,349
904–925 Procedures on large intestine	45,752	27,908	21,586	15,651	12,036	2,498	2,194	899	128,524
926–927 Procedures on appendix	7,015	5,323	3,843	2,135	1,457	415	440	248	20,876
928–950 Procedures on rectum and anus	13,489	8,032	5,132	3,214	3,086	528	408	222	34,111
951–982 Procedures on liver, gallbladder, biliary tract and pancreas	27,279	16,947	12,200	6,494	6,509	1,214	1,531	546	72,720
983–1011 Other procedures on abdomen, peritoneum and hernia	69,328	50,028	42,924	26,203	23,328	4,708	3,329	1,752	221,600
1040–1063 Procedures on kidney	128,861	134,812	70,345	47,715	31,369	10,266	11,754	18,545	453,667
1064–1128 Procedures on bladder, ureter and urethra	38,922	24,480	20,164	12,963	14,029	2,988	1,291	670	115,507
1160–1170 Procedures on prostate and seminal vesicle	4,492	4,030	1,728	942	1,162	291	239	40	12,924

(continued)

Table 8.18 (continued): Principal and additional procedures in ICD-10-AM groupings, public hospitals, States and Territories, 1998–99

Procedure block number	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171–1176 Procedures on scrotum and tunical vaginalis	921	611	242	161	135	32	53	53	2,208
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	5,775	4,898	2,642	2,165	2,189	308	138	127	18,242
1190–1203 Procedures on penis and other male genital organs	5,333	3,839	1,298	1,348	1,234	139	116	227	13,534
1230–1239 Procedures on pelvic cavity	9,874	8,913	1,084	806	611	103	519	341	22,251
1240–1258 Procedures on ovaries and fallopian tubes	12,497	11,891	7,926	6,272	4,492	923	595	639	45,235
1259–1273 Procedures on uterus	48,753	47,490	19,399	12,175	15,694	2,104	2,158	2,179	149,952
1274–1278 Procedures on cervix	8,124	8,176	7,072	1,786	3,845	532	406	342	30,283
1279–1288 Procedures on vagina and pelvic floor	6,606	6,072	7,202	2,414	4,367	293	216	83	27,253
1289–1299 Procedures on other female genital organs	3,975	3,317	1,611	1,158	1,334	158	79	89	11,721
1330–1335 Induction and augmentation of labour	43,112	31,668	20,565	10,735	9,102	2,473	2,499	1,367	121,521
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	11,115	6,236	2,910	2,376	1,920	531	428	192	25,708
1340 Caesarean delivery	12,241	9,090	6,907	3,557	3,266	772	608	615	37,056
1341–1347 Other obstetric and postpartum procedures	39,088	28,242	35,259	13,420	21,646	3,402	1,687	1,073	143,817
1360–1372 Procedures on head, facial bones and joints	2,547	1,989	1,596	779	682	247	216	251	8,307
1373–1380 Procedures on neck, thorax and ribs	252	216	0	0	0	0	31	1	500
1381–1393 Procedures on spinal cord and vertebrae	898	757	624	184	241	32	67	1	2,804
1394–1407 Procedures on shoulder, scapula and clavicle	2,670	2,017	2,251	1,136	1,270	143	150	64	9,701
1408–1438 Procedures on humerus, elbow and forearm	13,244	7,910	551	276	239	48	753	568	23,589
1439–1475 Procedures on hand, wrist and phalanges	10,345	8,298	3,933	2,035	1,863	418	559	403	27,854
1476–1494 Procedures on hip, pelvis and femur	10,278	7,464	3,954	2,500	2,369	566	700	187	28,018
1495–1525 Procedures on knee, patella, tibia and fibula	15,905	13,627	10,611	6,145	8,225	991	1,102	648	57,254
1526–1550 Procedures on ankle, foot and toes	8,835	7,093	3,825	2,023	2,219	581	551	312	25,439
1551–1579 Other procedures for musculoskeletal system	17,014	15,383	25,914	14,842	10,886	2,653	1,092	891	88,675
1600–1660 Procedures on skin and subcutaneous tissue	60,212	45,029	48,217	20,260	21,080	4,068	2,664	2,485	204,015
1661–1718 Plastic, cosmetic and corrective procedures	3,590	4,131	2,085	1,148	2,570	165	196	94	13,979
1740–1759 Procedures on breast	7,927	7,446	4,294	2,671	2,152	587	379	181	25,637
1780–1799 Chemotherapeutic and radiation oncology procedures	40,757	50,592	28,237	15,535	14,585	4,741	4,868	263	159,578
1820–1899 Miscellaneous nonoperative procedures	131,524	98,132	109,104	56,888	47,865	15,092	8,017	2,816	469,438
1940–2016 Imaging services	131,872	81,424	56,759	29,804	24,130	7,417	5,685	2,479	339,570
2050–2140 Allied health interventions	414,685	288,705	221,764	64,936	61,837	28,439	18,507	7,815	1,106,688
Total	1,643,032	1,280,816	977,370	484,817	448,182	118,829	92,315	55,052	5,100,413

Note: ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in

ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

n.a. not available.

n.p. not published.

Table 8.19: Principal and additional procedures in ICD-10-AM groupings, private hospitals, States and Territories, 1998–99

Procedure block number		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1-28	Procedures on skull, brain and meninges	867	909	709	157	197	n.p.	n.p.	n.a.	2,994
29-60	Procedures on spinal cord and spinal canal structures	9,560	11,207	10,756	8,331	5,654	n.p.	n.p.	n.a.	47,733
61-86	Procedures on nerves and ganglia	7,996	7,914	5,065	4,860	2,855	n.p.	n.p.	n.a.	30,143
110-129	Procedures on thyroid, parathyroid and endocrine glands	1,463	898	877	487	337	n.p.	n.p.	n.a.	4,248
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	3,789	1,692	4,076	1,601	408	n.p.	n.p.	n.a.	11,946
193-203	Procedures on lens	30,206	19,102	36,462	13,203	8,293	n.p.	n.p.	n.a.	112,032
204-256	Procedures on retina, conjunctiva and other areas of eye	5,647	3,639	4,364	1,649	1,107	n.p.	n.p.	n.a.	17,182
300-306	Procedures on external ear	683	966	961	297	501	n.p.	n.p.	n.a.	3,520
307-333	Procedures on middle and inner ear and mastoid	7,601	7,433	5,166	2,591	3,412	n.p.	n.p.	n.a.	27,130
370-389	Procedures on nose and sinuses	15,903	10,352	14,443	5,085	8,276	n.p.	n.p.	n.a.	56,038
390-399	Procedures on tongue, salivary gland and ducts	877	665	581	362	276	n.p.	n.p.	n.a.	2,905
400-408	Procedures on mouth, palate or uvula	1,400	1,037	856	450	670	n.p.	n.p.	n.a.	4,607
409-422	Procedures on tonsils, adenoids and pharynx	6,566	3,953	4,525	2,186	1,855	n.p.	n.p.	n.a.	19,847
450-490	Dental and orthodontic procedures	24,601	21,938	12,822	10,332	6,539	n.p.	n.p.	n.a.	79,068
520-542	Procedures on larynx and trachea	1,219	1,196	1,124	422	537	n.p.	n.p.	n.a.	4,643
543-558	Procedures on bronchus, lung and pleura	1,995	2,185	2,863	697	796	n.p.	n.p.	n.a.	8,815
559-567	Procedures on chest wall, mediastinum and diaphragm	963	1,243	1,655	563	522	n.p.	n.p.	n.a.	5,125
568-569	Airway management, continuous ventilatory support	985	1,000	1,107	243	730	n.p.	n.p.	n.a.	4,147
600-638	Procedures on atrium, ventricle, septum and valves	11,322	8,458	7,412	2,469	2,296	n.p.	n.p.	n.a.	32,135
639-666	Other procedures on heart, myocardium and pericardium	7,873	9,487	6,136	1,040	1,955	n.p.	n.p.	n.a.	26,543
667-693	Procedures on coronary arteries and aorta	23,114	17,593	18,302	6,089	5,896	n.p.	n.p.	n.a.	72,241
694-767	Procedures on arteries and veins	10,860	13,387	9,198	3,115	3,252	n.p.	n.p.	n.a.	41,408
800-817	Procedures on haematopoietic, lymph systems and spleen	2,704	2,991	3,615	1,187	995	n.p.	n.p.	n.a.	12,164
850-869	Procedures on oesophagus	2,401	2,359	2,869	731	1,037	n.p.	n.p.	n.a.	9,909
870-890	Procedures on stomach	1,078	1,752	1,278	420	590	n.p.	n.p.	n.a.	5,309
891-903	Procedures on small intestines	1,254	1,063	1,212	467	499	n.p.	n.p.	n.a.	4,645
904-925	Procedures on large intestines	66,916	48,976	44,293	15,308	12,626	n.p.	n.p.	n.a.	192,516
926-927	Procedures on appendix	1,401	1,419	1,688	967	521	n.p.	n.p.	n.a.	6,274
928-950	Procedures on rectum and anus	12,237	6,003	5,512	2,747	1,927	n.p.	n.p.	n.a.	29,353
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	11,447	8,371	8,529	3,833	3,109	n.p.	n.p.	n.a.	36,452
983-1011	Other procedures on abdomen, peritoneum and hernia	67,735	58,521	56,715	19,353	16,224	n.p.	n.p.	n.a.	224,800
1040-1063	Procedures on kidney	13,073	18,956	12,386	3,392	9,220	n.p.	n.p.	n.a.	57,269
1064-1128	Procedures on bladder, ureter and urethra	33,739	21,049	20,418	9,384	10,563	n.p.	n.p.	n.a.	100,309
1160-1170	Procedures on prostate and seminal vesicle	4,814	4,914	2,847	1,330	1,047	n.p.	n.p.	n.a.	16,109

(continued)

Table 8.19 (continued): Principal and additional procedures in ICD-10-AM groupings, private hospitals, States and Territories, 1998–99

Procedure block number	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171-1176 Procedures on scrotum and tunical vaginalis	351	147	137	91	55	n.p.	n.p.	n.a.	829
1177-1189 Procedures on testis, vas deferens, epididymis, spermatic cord	4,708	3,489	2,392	1,511	1,117	n.p.	n.p.	n.a.	13,892
1190-1203 Procedures on penis and other male genital organs	2,395	1,361	1,025	712	389	n.p.	n.p.	n.a.	6,250
1230-1239 Procedures on pelvic cavity	7,046	4,370	1,388	491	495	n.p.	n.p.	n.a.	14,238
1240-1258 Procedures on ovaries and fallopian tubes	7,200	6,589	6,090	3,182	2,281	n.p.	n.p.	n.a.	26,594
1259-1273 Procedures on uterus	42,939	28,536	16,507	11,647	6,827	n.p.	n.p.	n.a.	110,709
1274-1278 Procedures on cervix	4,795	3,751	2,425	1,055	764	n.p.	n.p.	n.a.	13,422
1279-1288 Procedures on vagina and pelvic floor	5,623	4,292	3,388	1,767	1,255	n.p.	n.p.	n.a.	16,984
1289-1293 Procedures on other female genital organs	9,134	6,469	6,603	2,312	856	n.p.	n.p.	n.a.	26,343
1330-1335 Induction and augmentation of labour	13,922	11,884	7,230	5,949	2,933	n.p.	n.p.	n.a.	43,830
1336-1339 Spontaneous vertex, or forceps, vacuum or breech delivery	3,675	3,091	1,934	1,442	927	n.p.	n.p.	n.a.	11,515
1340 Caesarean delivery	4,575	4,249	4,099	2,285	1,282	n.p.	n.p.	n.a.	17,205
1341-1347 Other obstetric and postpartum procedures	10,759	10,255	10,381	5,805	4,575	n.p.	n.p.	n.a.	43,605
1360-1374 Procedures on head, facial bones and joints	1,057	831	541	172	179	n.p.	n.p.	n.a.	2,927
1375-1380 Procedures on neck, thorax and ribs	195	192	0	0	0	n.p.	n.p.	n.a.	391
1381-1393 Procedures on spinal cord and vertebrae	1,407	1,198	753	302	465	n.p.	n.p.	n.a.	4,297
1394-1407 Procedures on shoulder, scapula and clavicle	6,627	8,259	4,340	3,837	4,145	n.p.	n.p.	n.a.	27,972
1408-1438 Procedures on humerus, elbow and forearm	2,816	2,654	424	316	333	n.p.	n.p.	n.a.	6,701
1439-1475 Procedures on hand, wrist and phalanges	7,981	7,673	3,313	1,803	2,047	n.p.	n.p.	n.a.	23,559
1476-1494 Procedures on hip, pelvis and femur	4,377	4,768	2,877	1,437	1,579	n.p.	n.p.	n.a.	15,783
1495-1525 Procedures on knee, patella, tibia and fibula	28,585	26,306	19,879	15,458	17,622	n.p.	n.p.	n.a.	112,564
1526-1550 Procedures on ankle, foot and toes	7,308	6,503	2,135	2,388	2,374	n.p.	n.p.	n.a.	21,624
1551-1579 Other procedures for musculoskeletal system	18,179	12,760	15,936	12,991	12,421	n.p.	n.p.	n.a.	76,479
1600-1660 Procedures on skin and subcutaneous tissue	49,576	31,759	28,980	11,215	15,191	n.p.	n.p.	n.a.	140,621
1661-1718 Plastic, cosmetic and corrective procedures	10,980	10,315	6,356	3,825	3,150	n.p.	n.p.	n.a.	35,683
1740-1759 Procedures on breast	8,512	8,458	6,063	3,419	2,699	n.p.	n.p.	n.a.	30,308
1780-1799 Chemotherapy, brachytherapy and radiotherapy	16,858	29,856	23,780	8,909	7,454	n.p.	n.p.	n.a.	88,333
1820-1899 Miscellaneous non-operative procedures	41,168	39,817	71,423	17,953	10,016	n.p.	n.p.	n.a.	185,577
1940-2016 Imaging services	21,900	25,634	28,057	10,237	7,717	n.p.	n.p.	n.a.	98,324
2050-2140 Allied health interventions	125,970	90,614	56,767	19,461	39,319	n.p.	n.p.	n.a.	340,198
Total	864,907	718,708	646,045	277,320	265,189	n.p.	n.p.	n.a.	2,866,316

Note: ICD-9-CM data reported by Queensland, Western Australia, South Australia and Tasmania have been mapped to ICD-10-AM. Comparisons with data reported by the other jurisdictions in ICD-10-AM should be made cautiously, with reference to the classifications and maps, as appropriate.

n.a. not available.

n.p. not published.