

# **Australian hospital statistics 1999–00**

The Australian Institute of Health and Welfare is Australia's national health and welfare statistics and information agency. The Institute's mission is to improve the health and well-being of Australians by informing community discussion and decision making through national leadership in developing and providing health and welfare statistics and information.

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# **Australian hospital statistics 1999–00**

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# Foreword

The Institute is pleased to be able to present this comprehensive report on Australia's public hospitals and on the admitted patient activity of the public and private sectors in 1999-00. As in previous reports in this series, included are key statistics from the Institute's National Hospital Morbidity Database and National Public Hospital Establishments Database, compiled each year with the assistance of data providers in the State and Territory health authorities.

Included is detailed information on the activity and costs of Australia's 748 public hospitals, grouped into 15 peer groups, and a range of other hospital performance indicator, expenditure and resource statistics on a State and Territory basis.

Diagnosis, procedure and external cause information for admitted patients was provided for this report by all States and Territories using the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM). This marks a major improvement in uniformity in Australian hospital statistics, following a year in which this classification was used in some States and Territories and its predecessor was used in others. Diagrams illustrate the relationships between these data on diagnoses and procedures and other data provided for the almost 6 million admitted patient episodes in Australian hospitals in 1999-00.

Accompanying the report on the Institute's Internet site is a growing collection of related statistical information that is not included in the hard copy form of the publication. Also available on the Internet site are interactive cubes of data from the National Hospital Morbidity Database that allow users to specify their own tables relating to the principal diagnoses and Diagnosis Related Groups for admitted patients. This resource is being expanded and will encompass other admitted patient data over coming months.

Although this report is the Institute's seventh annual hospital statistics report, it remains a challenge for the Institute and the data providers to collate the data and produce the report within 12 months of the end of the year to which it relates. The Institute will continue to work with the data providers and the Australian Hospital Statistics Advisory Committee to maintain timeliness, and to improve the quality and usefulness of this report. Comments from readers are always welcome.

Richard Madden  
Director  
June 2001



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- Geoff Sims (AIHW) (Chair)
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Jenny Hargreaves and John Goss managed the project.



# List of abbreviations

ABS	Australian Bureau of Statistics
ACHS	Australian Council on Healthcare Standards
AGPS	Australian Government Publishing Service
AHSAC	Australian Hospital Statistics Advisory Committee
AIHW	Australian Institute of Health and Welfare
ALOS	Average length of stay
AN-DRG	Australian National Diagnosis Related Group
AN-SNAP	Australian National Sub-Acute and Non-Acute Patient Classification
AR-DRG	Australian Refined Diagnosis Related Group
ASCCSS	Australian Standard Classification of Countries for Social Statistics
ASGC	Australian Standard Geographical Classification
CC	Complications and co-morbidities
CDE	Common bile duct exploration
CGC	Commonwealth Grants Commission
CHASP	Community Health Accreditation and Standards Program
DHAC	Commonwealth Department of Health and Aged Care
Dis.	Diseases
DPIE	Department of Primary Industry and Energy
DRG	Diagnosis Related Group
DVA	Department of Veterans' Affairs
ECMO	Extracorporeal membrane oxygenation
Exp.	Exposure to
FTE	Full time equivalent
HASAC	Health and Allied Services Advisory Council
ICD-9-CM	International Classification of Diseases, 9th Revision, Clinical Modification
ICD-10-AM	International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification
IFRAC	Admitted patient fraction
ISO	International Standards Organisation
mal.	Malignant
MDC	Major Diagnostic Category
MPS	Multi-purpose Service
n.a.	Not available
NCCH	National Centre for Classification in Health
Nec	Not elsewhere classified
NHCDC	National Hospital Cost Data Collection
NHPA	National Health Priority Area

n.p.	Not published
OECD	Organisation for Economic Cooperation and Development
Op.	Operation
Procs	Procedures
Re.	Related to
RMOs	Resident medical officers
RRMA	Rural, Remote and Metropolitan Area
SACC	Standard Australian Classification of Countries
SCRCSSP	Steering Committee for the Review of Commonwealth/State Service Provision
SLA	Statistical Local Area
VMO	Visiting medical officer
W	With
W/O	Without
..	Not applicable

# Highlights

*Australian Hospital Statistics 1999–00* is the seventh Australian Institute of Health and Welfare annual summary reports describing the characteristics and activity of Australia's hospitals. It summarises 1999–00 data reported to the Institute's National Public Hospital Establishments Database and National Hospital Morbidity Database.

## Hospital performance indicators

- Nationally, the cost per casemix-adjusted separation in public hospitals was \$2,728. This figure is a measure of the average cost of providing care for an admitted patient, adjusted for the relative complexity of the patient's condition and hospital services provided. Non-medical labour (\$1,454) and medical labour (\$502) were large components of the cost.
- Victoria reported the lowest cost per casemix-adjusted separation (\$2,529) and the Northern Territory reported the highest (\$3,444). Principal referral and specialist women's and children's hospitals had an average cost per casemix-adjusted separation of \$2,831. For small rural acute care hospitals, the average cost was \$2,604.
- There was considerable variation between the States and Territories in separation rates for some procedures. For example, coronary artery bypass grafts were reported for New South Wales residents at a rate 25% higher, and for Western Australian residents at a rate 27% lower, than the rates for the other jurisdictions combined.
- The average length of stay for 9 of the top 10 overnight stay AR-DRGs was higher in private hospitals compared with public hospitals. For example, for O60D *Vaginal delivery without complicating diagnosis*, it was 3.1 days in public hospitals and 4.8 days in private hospitals.

## Hospitals, beds, staff and expenditure

- There were 724 public acute hospitals and 24 public psychiatric hospitals in Australia in 1999–00. Numbers of hospitals can vary from year to year, often because of changes in administrative arrangements. A more useful indicator of the quantum of hospital services is the number of available beds. In 1999–00 there were 52,947 public hospital beds, a decline from the 53,885 beds reported in the previous year.
- Nurses made up 45.1% of total full time equivalent staff of public hospitals, with salaried medical officers comprising 9.5%.
- Total recurrent expenditure of public hospitals in Australia in 1999–00, excluding depreciation, was \$14,350 million, or about \$753 per person. Salaries and wages totalled \$8,935 million, 62% of the total.

## Patient numbers and lengths of stay

- The number of admissions to public and private hospitals continues to increase. There was a total of 5.9 million separations in 1999–00, an increase of 2.8% compared with 1998–99.
- Between 1998–99 and 1999–00, separations from public acute hospitals increased by 0.4% to 3.9 million. From private hospitals, they increased by about 6.8% (adjusted for changes in coverage of the data collection) to 2.0 million. The private hospitals' share of overall patient separations was 34.3% in 1999–00, compared with 32.7% in 1998–99.

- Patient days in public acute hospitals increased by 0.6% compared with 1998–99, to 15.1 million. Private hospital patient days increased by 5.1%, to 6.4 million, 28.1% of the total.
- The average length of stay in private hospitals decreased in 1999–00, to 3.1 days from 3.2 days in 1998–99, following the overall pattern of decline shown in previous years. The average length of stay in 1999–00 was the same as in 1998–99 in public acute hospitals (3.9 days) and for non-same day separations in all hospitals combined (6.6 days).
- The proportion of separations that were same day was 49.2% overall (compared with 47.9% in 1998–99), 45.8% in public acute hospitals and 56.2% in private hospitals.

## Patient characteristics

### Public and private patients

- Public patients accounted for 3.5 million separations in 1999–00 (58.9% of the total), an increase of 1.5% compared with 1998–99. Most were in public hospitals, but 2.3% were in private hospitals, compared with 1.6% in 1998–99.
- Private patients accounted for 2.0 million separations in 1999–00 (33.8% of the total), an increase of 6.1% compared with 1998–99. The proportion of these in public hospitals was 14.9%, compared with 17.0% in 1998–99.

### Age, sex and Aboriginal and Torres Strait Islander status

- Australians aged over 65 years, comprising 12% of the total population, accounted for 32.5% of total hospital separations and 47.7% of patient days. The average length of stay for these patients was 5.6 days, compared with 3.8 days for all patients.
- Females accounted for 53.7% of separations in 1999–00 although they comprised 50.2% of the population. There were more separations for females than males in all age groups from 15 to 54 years (which include child-bearing ages for women) and in the 75 years and over age groups, in which women outnumber men in the population.
- Aboriginal and Torres Strait Islander peoples had twice as many separations per 1,000 population of other persons, after allowing for age structure. This is likely to be an underestimate because the identification of Aboriginal and Torres Strait Islanders as patients is incomplete.

### Diagnoses, procedures, external causes and AR-DRGs

- Commonly reported principal diagnoses in both the public and private sectors included dialysis, rehabilitation, chemotherapy for cancer, angina pectoris, cataract, abdominal and pelvic pain, pain in throat and chest, and gastro-oesophageal reflux disease.
- For 78.2% of separations, there was an operation or other procedure reported. In public hospitals, allied health interventions and procedures on the urinary system were the most commonly reported. In private hospitals, procedures on the digestive system were the most common, followed by allied health interventions.
- Falls were commonly reported external causes of injury for both the public and private sectors, as were exposures to mechanical forces and transport accidents.
- L61Z *Admit for renal dialysis* was the most commonly reported AR-DRG in the public sector, (12.1% of public hospital separations) and G44C *Other colonoscopy, same day* was the leading AR-DRG in the private sector (6.7% of separations). Other high volume AR-DRGs included R63Z *Chemotherapy* and O60D *Vaginal delivery without complicating diagnosis*.

# 1 Introduction

*Australian Hospital Statistics 1999–00* continues the Australian Institute of Health and Welfare's series of annual summary reports describing the characteristics and activity of Australia's hospitals. This report follows previous annual information for the years 1993–94 to 1998–99 (AIHW 1997a, 1997b, 1998, 1999a, 2000a).

This series of reports has been based on data for the financial years 1993–94 to 1999–00 supplied to the Institute by the State and Territory health authorities. Hospital-level data are provided for the Institute's National Public Hospital Establishments Database, and cover resources, expenditure and revenue for public hospitals, and a summary of the services they provided to admitted and non-admitted patients. Patient-level data are provided for the Institute's National Hospital Morbidity Database for both public and private hospitals. Included are data on the diagnoses and other characteristics of admitted patients, and on the hospital care they receive.

The collection and reporting of the data in this report were undertaken by the Institute under the auspices of the Australian Health Ministers' Advisory Council through the National Health Information Agreement. Most of the data collected were as specified in the National Minimum Data Set for Institutional Health Care and data element definitions were as specified for 1999–00 in the *National Health Data Dictionary* Version 8.0 (National Health Data Committee 1999).

## This report

This report summarises 1999–00 data reported to the National Public Hospital Establishments Database and the National Hospital Morbidity Database. This chapter describes the two databases and briefly discusses their overall limitations.

Chapter 2 presents hospital performance indicator data, drawn from both the databases and a number of other sources. The indicators are based on those initially developed by the National Health Ministers' Benchmarking Working Group and published in the Working Group's reports. Indicators for previous years have also been used by the National Health Performance Committee in their report on health sector performance indicators (National Health Performance Committee 2000) and by the Steering Committee for the Review of Commonwealth/State Service Provision in their reports of government service provision (SCRCSSP 2001).

Chapter 3 summarises other data on public hospitals from the National Public Hospital Establishments Database.

Chapter 4 uses both databases to provide an overview of activity in Australian hospitals based on establishment characteristics.

Chapters 5 to 10 present a range of patient-based information from the National Hospital Morbidity Database, including information on the principal diagnoses of the patients (Chapter 7), the procedures they underwent (Chapter 8) and the Australian Refined Diagnosis Related Groups for each hospital separation (Chapter 10).

In all chapters, unless otherwise specified:

- public acute hospitals and public psychiatric hospitals are included in the public hospital (public sector) category, and all public hospitals other than public psychiatric hospitals are included in the public acute hospital category.
- private psychiatric hospitals, private free-standing day hospital facilities and other private hospitals are included in the private hospital (private sector) category.

The appendices provide more detailed technical notes on the data and analyses than are included in the chapters. In particular, Appendix 3 includes notes on the presentation of data in the tables and Appendix 6 includes the population estimates used for population rate calculations.

Summary information on the Department of Health and Aged Care's National Hospital Cost Data Collection is provided in Appendix 8. This collection is the source of Australian Refined Diagnosis Related Group (AR-DRG) cost weight and average cost information used in Chapters 2, 4, 5 and 10.

## **The National Public Hospital Establishments Database**

The National Public Hospital Establishments Database holds a record for each public hospital in Australia. It is collated from the routine administrative collections of public acute hospitals, psychiatric hospitals, drug and alcohol hospitals and dental hospitals in all States and Territories.

The collection only covers hospitals within the jurisdiction of the State and Territory health authorities. Hence, public hospitals not administered by the State and Territory health authorities (for example, Department of Defence hospitals, some hospitals run by correctional authorities in some jurisdictions and those in off-shore territories) are not included. A list of the hospitals included in the database for 1999-00 is provided on the Internet (see Appendix 5).

Information is included on hospital resources (beds, staff and specialised services), recurrent expenditure, non-appropriation revenue and services to admitted and non-admitted patients. Data on capital expenditure and depreciation are also collected for each jurisdiction. The collection is based on the establishment-level activity and resource data elements, and the system-level data elements, of the National Minimum Data Set for Institutional Health Care.

Validation processes for 1999-00 data involved detailed consultation by the Institute with data providers in each State and Territory, to ensure data quality. Nevertheless, the collection does have some limitations and missing values.

## **The National Hospital Morbidity Database**

The National Hospital Morbidity Database is a compilation of electronic summary records collected in admitted patient morbidity data collection systems in Australian hospitals. Data relating to admitted patients in almost all hospitals are included: public acute hospitals, public psychiatric hospitals, private acute hospitals, private psychiatric hospitals and private free-standing day hospital facilities. Lists of the public and private hospitals included in the database for 1999-00 are provided on the Internet (see Appendix 5).

Public sector hospitals that were not included were those not within the jurisdiction of a State or Territory health authority (hospitals operated by the Department of Defence or correctional authorities, for example, and hospitals located in off-shore territories). In

addition, data were not supplied for one small 'outpatient clinic' in Queensland, a forensic hospital in Tasmania, and a mothercraft hospital in the Australian Capital Territory.

Private sector hospitals that were not included were 17 free-standing day hospital facilities and one other private hospital in Victoria, all private free-standing day hospital facilities in the Australian Capital Territory, and the one private hospital in the Northern Territory. For South Australia, data were not available for three private free-standing day hospital facilities (one of which commenced operation in September 1999) and data were missing for March to June 2000, for May to June 2000 and for June 2000, respectively, for three others. For Tasmania, data were not available for one private free-standing day hospital facility and one other private hospital, and were missing for April to June 2000, December 1999 to June 2000, January and February 2000 and June 2000, respectively, for four other private hospitals.

The data supplied for the National Hospital Morbidity Database were based on the patient-level data items of the National Minimum Data Set for Institutional Health Care. They include demographic, administrative and length of stay data, and data on the diagnoses of the patient, the procedures they underwent in hospital and external causes of injury and poisoning. Information on the quality of the diagnosis, procedure and external cause data, coded using the *International Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM)* (NCCH 1998), is included in Appendix 3.

Records for 1999–00 are for hospital separations (discharges, transfers, deaths or changes in type of episode of care) in the period 1 July 1999 to 30 June 2000. Data on patients who were admitted on any date before 1 July 1999 are included, provided that they also separated between 1 July 1999 and 30 June 2000. A record is included for each separation, not for each patient, so patients who separated more than once in the year have more than one record in the database.

Most data providers were able to supply records for separations of patients aged 9 days or less on admission (*Newborn* episodes of care) with no 'qualified days' (see Glossary). These patients do not meet admission criteria for all purposes, so they have been excluded from this report, except as specified in Chapter 5. Records for hospital boarders were also excluded, as they are not admitted patients.

A process of validation of the morbidity database was jointly undertaken by the Institute and the data providers to ensure data quality. When data were supplied using non-standard definitions or classifications, the Institute mapped them to the *National Health Data Dictionary* definitions, where possible, in collaboration with the data providers. Further information on the mapping of data for *Newborn* episodes of care (those for patients aged 9 days or less on admission) and of data for the area of usual residence of the patients is presented in Appendix 3. This Appendix also includes a description of variation among the States and Territories in the reporting of hospital in the home care.

## Limitations of the data

Appropriate sections of this report provide notes on the major variations from the *National Health Data Dictionary* definitions, substantial differences in scope, the effects of different populations and other major impacts on data quality. The following general notes should also be used to guide interpretation of the data.

- Although the *National Health Data Dictionary* definitions form the basis of the two databases, the actual definitions used may have varied among the data providers and from one year to another. In addition, admission practices and the detail of the scope of the data collections may vary among the jurisdictions and from year to year.

Comparisons between the States and Territories, reporting years and hospital sectors should therefore be made with reference to the accompanying notes.

- Not all private hospital separations are included in the National Hospital Morbidity Database so the counts of private hospital separations presented in this report are likely to be underestimates of the actual counts. In 1998–99, the National Hospital Morbidity Database reported 110,941 (5.6%) fewer separations than the Australian Bureau of Statistics' Private Health Establishments Collection, which has wider coverage (see Appendix 3). At the time of publication of this report, Private Health Establishments Collection data for 1999–00 were not available. When they become available shortly after the publication of this report, an estimate will be made of underenumeration of separations in the National Hospital Morbidity Database for 1999–00, by comparing it with the 1999–00 Private Health Establishments Collection data. This estimate will be included with *Australian Hospital Statistics 1999–00* on the Internet.
- Each State and Territory has a demographic structure that differs from other jurisdictions, and factors such as age and Aboriginal and Torres Strait Islander status can have an effect on the nature of health care delivery amongst jurisdictions. For example, the average length of stay in hospital, or the frequency of particular procedures, can be affected by the demographic composition of the population.
- Although data on separations from the National Hospital Morbidity Database can reflect an aspect of the burden of disease in the community, they do not usually provide measures of the incidence or prevalence of conditions. This is because not all persons with a type or degree of illness are treated in hospital and there are multiple admissions for some chronic conditions. Also, the number and pattern of hospitalisations can be affected by differing admission practices, and differing levels and patterns of service provision.

## **New presentation of data on procedures and external causes**

For 1999–00 the data element *Procedure* superseded the previous data elements *Principal procedure* and *Additional procedure* for the National Hospital Morbidity Database. Because of the discontinuation of the concept of a *Principal procedure* amongst the reported procedures, the data on procedures presented in this report differ from those presented in previous reports in this series, which were mostly based on principal procedures. As more than one procedure can be reported for each separation, and all have equal 'status', there are three types of data presented:

- data on the separations for which there was one or more procedures reported within the group of procedures (an ICD-10-AM procedure block, group of blocks or chapter) being considered, regardless of whether the procedure was the first reported or another procedure. Because more than one procedure can be reported for each separation, the counts for these data are not additive, so totals in the tables will not usually equal the sum of counts in the rows.
- data on the separations for which a procedure within a group of procedures being considered was the first reported procedure. These data have been included in some tables to enable some comparison with previous reports. Although the data elements changed, the method of coding procedures remained the same, with the order of codes determined using the following hierarchy: procedures performed for the treatment of the principal diagnosis; procedures performed for treatment of additional diagnoses; diagnostic/exploratory procedures related to the principal diagnosis; and



diagnostic/exploratory procedures related to additional diagnoses. Hence, 1999–00 data on the first reported procedure will be largely comparable with data from previous years reported for principal procedures.

- data on the total number of procedures reported. For these data, all procedures within a group of procedures being considered are counted, even if there are more than one reported for a separation.

Similarly, one or more external causes of injury or poisoning can be reported for each separation in the National Hospital Morbidity Database. In previous reports in this series, data were presented only on first reported external causes for separations for which the principal diagnosis was an injury or poisoning. However, external causes can be reported for principal diagnoses other than those in the ICD-10-AM injury and poisoning chapter, and for additional diagnoses in the injury and poisoning chapter and elsewhere. In addition, although, in the past, only some States and Territories had the capacity to report more than one external cause for each separation, they all now have this capability, so State and Territory data on external causes are more comparable than in the past. Hence, the reporting of external causes for this report has been revised, with three types of data presented:

- data on the separations for which there was one or more external causes reported within the group of external causes (an ICD-10-AM block or chapter) being considered, regardless of whether the external cause was the first reported or another external cause. Because more than one external cause can be reported for each separation, the counts for these data are not additive, so totals in the tables will not usually equal the sum of counts in the rows.
- data on the separations for which an external cause within a group of external causes being considered was the first reported external cause, and the number of those separations for which an injury and poisoning was reported as the principal diagnosis. Both these types of data have been included in some tables to enable some comparison with previous reports.
- data on the total number of external causes reported. For these data, all external causes within a group of external causes being considered are counted, even if there are more than one reported for a separation.

## **This report and additional data on the Internet**

This report is available on the Internet at

**<http://www.aihw.gov.au/publications/hse/ahs99-00/index.html>**

The text of the report is presented in PDF format and the tables as downloadable Excel spreadsheets.

This site also includes lists of hospitals that contributed to the databases for 1999–00 (see Appendix 5) and additional data from the National Hospital Morbidity Database, in Excel spreadsheets. The spreadsheets provide tables that present further detail on diagnoses, procedures and AR-DRGs version 4.1 for admitted patients.

A couple of months after this report is published, the Internet site will also include updates for the tables in Chapters 2, 4, 5 and 10 that use AR-DRG cost weight and average cost information. At the time of publication, 1999–00 cost weights and average costs were not available so 1998–99 cost weight data were used instead. Updates will also be provided for the tables in Chapters 2 and 3 and in Appendix 3, which use data on private hospitals

from the Private Health Establishments Collection. These data were also not available when this report was published.

More information on the Internet tables is in Chapters 7, 8 and 10 and in Appendices 1 and 5.

### **Interactive data cubes**

Also included on the site are interactive cubes of data from the National Hospital Morbidity Database (<http://www.aihw.gov.au/hospitaldata/datacubes/index.html>) which allow users to specify tables and graphs as required. There are four data cubes currently available:

- Principal diagnoses for 1993–94 to 1997–98 (using ICD-9-CM to classify diagnoses)
- Principal diagnoses for 1998–99 and 1999–00 (using ICD-10-AM to classify diagnoses)
- Australian Refined Diagnosis Related Groups version 4.0/4.1 for 1997–98 to 1999–00
- Principal diagnoses for separations including specialised psychiatric care for 1998–99 (using ICD-10-AM to classify diagnoses)

Later in 2001, data cubes covering procedure and external cause information will be added and the cube relating to specialised psychiatric care will be updated to include 1999–00 data.

Each cube includes information on the number of separations (same day and overnight), patient days and average length of stay, by age group and sex and year of separation, for each diagnosis or AR-DRG. The cube on specialised psychiatric care also includes data on the mental health legal status of the patient for each separation.

# 2 Hospital performance indicators

## Introduction

This chapter describes hospital performance indicators in terms of the average cost per separation, average salaries of staff employed, the number of accredited hospitals, and selected procedures and the length of stay for the most common diagnoses. These indicators were determined under the framework developed by the National Health Ministers' Benchmarking Working Group (see NHMBWG 1999). The indicators have also been reported in earlier editions of *Australian Hospital Statistics* and by the Steering Committee for the Review of Commonwealth/State Service Provision (SCRCSSP 2001). The data relate to the activity and resources of public hospitals, and there are also some data presented for private hospitals.

Those indicators that can be derived from data collected through the National Minimum Data Set for Institutional Health Care, established under the National Health Information Agreement process, have been included in this report. The principal elements for reviewing the performance of health care service delivery are efficiency (for which the principal indicator is cost per unit of output) and effectiveness (for which broad indicators are quality, appropriateness and access and equity). Indicators available for this report that provide a measure of hospital efficiency include cost per casemix-adjusted separation in public acute hospitals; average salaries for medical and non-medical staff in public acute hospitals; and average length of stay for AR-DRGs with the highest number of separations. Only two effectiveness measures are available for reporting: the number of available beds in accredited hospitals, which is a measure of quality; and separation rates for selected procedures in public and private hospitals, which is a measure of the appropriateness of acute hospital service delivery. Access and equity indicators are not included in this report. Hospital waiting times data are presented in separate reports (AIHW 2000f).

Improving data quality is a key strategy in the development of performance reporting in the hospital sector. Those indicators for which regular high quality data are available have benefited from collaborative data development and standardisation processes which health agencies have had in place under the National Health Information Agreement process. However, data for a substantial number of performance indicators required for reporting under the agreed framework remain unavailable. The effort required to implement a new performance indicator is not trivial in a national service delivery system as large and as complex as in the health services field. The National Health Information Agreement provides an established process for endorsing national data standards and for including new data elements in national minimum data sets.

## Cost per casemix-adjusted separation

Table 2.1 shows the total cost per casemix-adjusted separation for all States and Territories for 1999–00. At the national level, the cost per casemix-adjusted separation was \$2,728. A large portion of these costs is attributed to non-medical salaries and medical labour costs; nationally these costs were \$1,454 and \$502 respectively, per casemix-adjusted separation.

This performance indicator is a measure of the average cost of providing care for an admitted patient (whether an overnight-stay patient or a same day patient), adjusted for the relative complexity of the patient's clinical condition and for the hospital services provided.

## **Enhancement of current indicators**

### **Separating acute and non acute costs**

The current methodology includes all admitted patient separations and their associated costs. It is appropriate to include the 97% of separations which are acute in this calculation, as meaningful cost weights are available for each of the acute separations. However, the 3% of separations which are not acute are also included. Unfortunately there are no cost weights for these separations, so as an approximation the cost per separation for the acute separations is applied.

To provide an estimate of the average casemix-adjusted cost of acute non-psychiatric patients both New South Wales and Victoria provided the Institute with estimates of the expenditure on acute non-psychiatric patients. This is done by first estimating the costs of all acute patients and then taking out the costs of the psychiatric care days in designated psychiatric units. The effect of restricting the analysis to only acute non-psychiatric patients was to reduce the cost per casemix-adjusted separation by 8% in New South Wales and 9% in Victoria (Table 2.2). Thus, in this case, the refinement of the methodology does not change the relative relationship of NSW and Victoria on this efficiency indicator.

The cost per casemix adjusted separation falls when the non acute and psychiatric separations are excluded, because these excluded separations have a cost per separation which is higher than the average cost of an acute separation. This arises because although these separations are relatively low cost per patient day, they typically have very long lengths of stay. Thus the average cost per separation of these palliative, rehabilitation, non-acute and psychiatric separations is \$5,769 for New South Wales and \$6,347 for Victoria, over twice the costs of typical acute separations.

The data used in these calculations is in some cases preliminary, so when better data are provided, and when the 1999-00 cost weights are available, the Institute will be updating these numbers on its website.

There are still a number of methodological difficulties to be resolved in this area, such as an examination of the consistency of counting separations that are not acute, the consistency of dealing with separations involving psychiatric unit care, and consistency in determination of statistical separations. The Institute will be publishing information about these methodological issues later in the year.

The Institute hopes that all jurisdictions will soon be in a position to provide data on the costs of treating acute admitted patients that are separated in a year. In addition, if the States and Territories are able to provide cost weights for episodes not acute, e.g. AN-SNAP weights for admitted patient episodes such as palliative care and rehabilitation care, then it will also be possible to publish a cost per palliative care separation, a cost per rehabilitation care separation, a cost per maintenance care separation, etc.

### **Subcomponents of costs per separation**

In 1998-99 the National Hospital Cost Data Collection (NHCDC) included 74% of public hospital separations (Appendix 8). The NHCDC collects information at a more detailed

level than the National Public Hospital Establishments Database. As more and more hospitals come into the NHCDC it will be increasingly possible to use NHCDC data to refine the data that is published in *Australian Hospital Statistics* to improve the accuracy of the subcomponents of the cost per casemix-adjusted separation. For example, the nursing cost per casemix-adjusted separation is currently calculated by applying the overall inpatient fraction to nursing costs. Using NHCDC data it is possible to work out a nursing cost inpatient fraction. The nursing cost per casemix-adjusted separation calculated in this way would be better for benchmarking purposes.

### **Notes on methodology**

A full description of the methodology used to derive the cost per casemix-adjusted separation figures is provided at Appendix 4. Users of the indicator should refer to the information in that appendix when interpreting the data. The calculation of these figures is sensitive to a number of deficiencies in available data. In particular:

- capital costs (including depreciation where available) are not included in numerators (see Table 3.7 for available data on depreciation); and
- recurrent expenditure on admitted patients (the numerator) is estimated in different ways in different hospitals, and so is not always comparable.

In 1999–00 all States used ICD-10-AM and AR-DRG version 4.1 whereas in 1998–99 jurisdictions used a mixture of ICD-9-CM and ICD-10-CM, and AR-DRG version 4.0/4.1. The 1999–00 AR-DRG version 4.1 cost weights were not available for this publication so the 1998–99 AR-DRG combined cost weights version 4.0/4.1 were used (Department of Health and Aged Care 2000).

### **Hospital peer groups**

When making comparisons it is useful if the units being compared have been grouped into categories so that variation in the variable of interest is explained by the attributes defining the group (Hindle 1999). The peer groups in this publication are designed to explain variability in the average cost per casemix-adjusted separation and to group hospitals into broadly similar groups in terms of their range of admitted patient activities. Peer grouping enables comparison at a more appropriate level. Any benchmarking is best done using peer group data rather than data for a jurisdiction as a whole.

The Australian Institute of Health and Welfare worked with the National Health Ministers' Benchmarking Working Group (NHMBWG) and the National Health Performance Committee (NHPC) to develop the national hospital peer group classification. The hospital peer classification is summarised below. Details of the derivation of these peer groups are contained in Appendix 11 of *Australian Hospital Statistics 1998–99* (AIHW 2000a). These peer groups have been allocated names that are broadly descriptive of the types of hospitals included in each category.

Table 2.3 shows the variation within and between the different peer groups. Table 2.4 reports the data at the individual State and Territory level.

The dominant hospital peer group category is the principal referral and specialist women's and children's group. In 1999–00 they accounted for 66% of public acute and psychiatric hospital expenditure and 63% of separations. The proportion of expenditure accounted for by this group varied from a low of 56% in South Australia to 60% in New South Wales and 78% in Tasmania. The cost per casemix-adjusted separation for this group was \$2,831

which is 4% higher than the cost per separation for the selected hospitals in Table 2.1 of \$2,728.

### National hospital peer group classification

Peer group	Definition
A Principal referral & Women's & children's	<p>A1 Metropolitan hospitals with &gt;20,000 acute casemix-adjusted separations and rural hospitals with &gt;16,000 acute casemix-adjusted separations per annum.</p> <p>A2 Specialised acute women's and children's hospitals with &gt;10,000 acute casemix-adjusted separations per annum. Possible further sub-groups are:</p> <p style="padding-left: 40px;">A2.1 Obstetric and women's specialist</p> <p style="padding-left: 40px;">A2.2 Women's and children's</p> <p style="padding-left: 40px;">A2.3 Paediatric specialist</p>
A9 Un-peered and other	Prison medical services, special circumstance hospitals, hospitals, metropolitan hospitals with <2,000 acute casemix-adjusted separations, hospitals with <200 separations, etc.
B Major	<p>B1 Metropolitan acute hospitals treating more than 10,000 acute casemix-adjusted separations per annum.</p> <p>B2 Rural acute hospitals treating &gt;8,000 acute casemix-adjusted separations per annum and remote hospitals with &gt;5,000 casemix-weighted separations.</p>
C Medium	<p>C1 Medium group 1 acute hospitals, treating between 5,000 and 10,000 acute casemix-adjusted separations per annum.</p> <p>C2 Medium group 2 acute hospitals, treating between 2,000 and 5,000 acute casemix-adjusted separations per annum, plus acute hospitals treating &lt;2,000 casemix-adjusted separations per annum but with &gt;2,000 separations per annum.</p>
D Small hospitals	<p>D1 Small rural acute hospitals (mainly small country town hospitals), acute hospitals treating &lt;2,000 separations per annum, and with less than 40% non-acute and outlier patient days of total patient days.</p> <p>D2 Small non-acute hospitals, treating &lt;2,000 separations per annum, and with more than 40% non-acute and outlier patient days of total patient days. (Community non-acute).</p> <p>D3 Small remote hospitals (&lt;5,000 acute casemix-weighted separations but not 'MPS' and not 'community non-acute'). Most are &lt;2,000 separations.</p>
E Sub- and non-acute	<p>For this category, a majority of patient days is generally accounted for by rehabilitative, palliative care and non-acute patients:</p> <p>E1 Aged care homes (not in scope of collection)</p> <p>E2 Multi-purpose services</p> <p>E3 Hospices</p> <p>E4 Rehabilitation</p> <p>E5 Mothercraft</p>
E6	Other non-acute (e.g. geriatric treatment centres combining rehabilitation and palliative care with a few acute patients).
F	Psychiatric

## Average salaries and wages expenditure

Average salaries paid to public hospital staff by States and Territories are presented in Table 2.5. A number of jurisdictions do not report staffing numbers and salaries for the different nurse categories and, therefore, average nursing salaries have been produced as a

single figure for this report. Some States and Territories have difficulty in differentiating between 'other personal care staff' and 'domestic and other staff'. Thus, some of the variation in average salaries reported within these categories is a result of different reporting practices.

The data show variation in the distribution of labour costs among jurisdictions. States and Territories that reported the highest rates of staff resources did not necessarily report higher costs per casemix-adjusted separation (Table 2.1). The variations in the data are affected by different practices in 'outsourcing' services, and different arrangements for purchasing domestic and catering functions among jurisdictions. Where services are outsourced, the ratio of salary to non-salary costs will be reduced. The degree of outsourcing of high paid versus low paid staff will be a factor that affects the comparison of averages, for example outsourcing the domestic services and retaining domestic service managers to oversee the activities of the contractors.

Salaries per full time equivalent nurse in 1999–00 were \$51,092, which was an increase of 2% on the average salary in 1998–99. Salaries per full time equivalent salaried medical officer were \$97,300, which was an increase of 8% on the previous year.

## Hospital accreditation

Available administrative indicators of hospital quality include a number of accreditation, certification and award schemes. In particular the number of hospitals that have accreditation by the Australian Council on Healthcare Standards (ACHS) has been used in the past by NHMBWG and SCRCSSP as a process indicator of quality. ACHS accreditation is awarded when hospitals demonstrate a continuing adherence to the ACHS quality assurance standards, and is one of the few indicators of hospital quality that is available nationally.

In recent years other organisations have been accrediting hospitals such as the Australian Quality Council (AQC) and the Quality Improvement Council (QIC). A number of hospitals have been certified as ISO 9000 or ISO 9001 compliant. Others have received accreditation under CHASP – the Community Health Accreditation and Standards Program administered by the Australian Community Health Association. Due to time constraints, it has not been possible to gather information for all jurisdictions on accreditation by non-ACHS organisations. This information is included in Table 2.6 for those jurisdictions who had the information to hand. This shows that in some jurisdictions, non-ACHS accreditation is becoming a significant means of accreditation, particularly for smaller hospitals. In NSW 5% out the 85% of beds accredited are accredited by AQC, QMS or according to ISO standards.

For Australia as a whole, 79% of public hospital beds have been accredited by ACHS, and an unknown proportion accredited by other organisations. Future editions of *Australian Hospital Statistics* will contain more complete information on accreditation by non-ACHS organisations.

Comparison of accreditation data in Table 2.6 among the States and Territories is limited because of the voluntary nature of a hospital's participation in the award scheme and because accreditation at any point in time does not assume a fixed or continuing status for a hospital.

## Separation rates for selected procedures

Separation rates for 'selected' procedures have been selected because of the frequency with which they are undertaken, because they are often elective and discretionary, and there are sometimes treatment alternatives available (NHMBWG 1998). Use of particular procedures should be interpreted with care as their relative importance can vary from place to place and over time. The procedures in the table were included after consultation with States and Territories. Users of this indicator should note the scope restrictions of the National Hospital Morbidity Database, in particular private hospitals in the Northern Territory and other hospitals as discussed in Chapter 1. This may result in under reporting of procedure rates for some of the procedures and in particular those procedures that are more likely to be performed in private and private free-standing day hospital facilities, which will be under counted for some jurisdictions.

1999-00 data were recorded using ICD-10-AM. (In 1998-99, the ICD-9-CM and ICD-10-AM coded States were reported separately.)

The age- and sex-standardised separation rates that are presented take account of the different age and sex structures of the populations of the States and Territories. In Table 2.7, the standardised rate for each procedure for each State and Territory is accompanied by the standardised rate for all other jurisdictions excluding the reference State or Territory. For example, the rate for appendicectomy in Queensland was 1.61 separations per 1,000 population. The standardised rate for the other States and Territories combined was 1.40 per 1,000 population. Thus, Queensland had a separation rate for appendicectomy that was 16% higher than the rate for all the other jurisdictions combined. This difference was statistically significant (that is, there is a less than 1% chance that the difference between Queensland and the other jurisdictions occurred by chance).

The most common of the procedures were endoscopy, lens insertions and arthroscopic procedures. There was marked variation in rates among the jurisdictions for these (and other) procedures. Some of this reflects differences in the coverage of private and private free-standing day hospital facilities in the database.

Caesarean section was the fourth most common of the selected procedures. The rate was highest in Queensland and lowest in the Australian Capital Territory. The number of caesarean sections is dependent on the birth rate as well as the population thus it is useful to express the rate per birth as well as per population. The number of in-hospital births has been included as a second point of reference. There are completeness problems in terms of non-hospital births and comparability problems with age differences in the per birth rate of caesarean sections. Tasmania has the highest rate on this basis, with 29 caesarean sections per 100 in-hospital births. Further information on caesarean sections compared to other deliveries can be found in the *Australia's Mothers and Babies 1998* (AIHW NPSU: Nassar et al. 2001).

## Average lengths of stay for the top 10 AR-DRGs

Within the performance indicator framework for the hospital sector, the average length of stay for overnight separations for the most commonly reported AR-DRGs is an indicator of efficiency in service delivery. Table 2.8 presents data on the average length of stay for overnight separations for the 10 AR-DRGs for which the highest number of overnight separations were reported for 1999-00. These data are not equivalent to the data



presented in the tables in Chapter 10 as same day separations are excluded, as are separations with lengths of stay over 365 days.

The table illustrates variation in the average length of stay for some AR-DRGs across the States and Territories and between the sectors. Of the top 10, AR-DRG F62B *Heart failure and shock without catastrophic complications or comorbidities* had the longest average length of stay of 6.9 days nationally, with considerable variation between sectors and across jurisdictions, ranging from 8.1 days to 6.2 days. Following this, length of stay for AR-DRG O01D *Caesarean delivery without complicating diagnosis* was 5.5 days and for AR-DRG N04Z *Hysterectomy for non-malignancy*, it was 4.8 days nationally. The average length of stay for AR-DRG O60D *Vaginal delivery without complicating diagnosis* was 3.5 days: 3.1 days in the public sector and 4.8 days in the private sector. For 9 of these top 10 DRGs, the average length of stay was longer in the private hospitals than the public hospitals.

**Table 2.1: Cost(a) per casemix-adjusted separation, selected public acute hospitals,(b) States and Territories, 1999-00**

<b>Variable</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas(c)</b>	<b>ACT</b>	<b>NT(d)</b>	<b>Total</b>
Total separations ('000)(e)	1,186	977	668	346	337	72	61	58	3,705
Acute separations ('000)(e)	1,160	948	640	341	330	71	60	57	3,607
Proportion of separations not acute %	2.3	2.9	4.2	1.4	2.0	1.7	1.2	1.7	2.6
Average cost weight(f)	1.04	0.98	0.99	0.93	0.99	1.07	0.96	0.77	1.00
Casemix-adjusted separations ('000)(g)	1,230	961	660	323	334	77	58	44	3,687
Total admitted patient days ('000)(e)	4,550	3,670	2,280	1,222	1,163	297	210	195	13,588
Admitted patient days for acute patients ('000)(e)	4,148	3,053	1,987	1,118	1,056	250	196	182	11,991
Proportion of bed days not acute %	8.8	16.8	12.9	8.5	9.2	15.9	6.8	6.3	11.8
Total recurrent expenditure (\$m)	4,553	3,361	2,107	1,330	1,043	305	257	197	13,153
Inpatient fraction(h)	0.73	0.71	0.79	0.79	0.80	0.70	0.70	0.77	0.74
Total admitted patient recurrent expenditure (\$m)	3,320	2,376	1,663	1,054	835	213	180	152	9,793
Public patient day proportion(i)	0.81	0.87	0.91	0.88	0.85	0.80	0.90	0.94	0.85
Newborn episodes with no qualified days ('000)	56.5	38.5	29.7	14.1	10.1	0.2	2.9	2.5	155
<b>Data for excluded hospitals</b>									
Separations for excluded hospitals ('000)(b)(e)	59	27	40	14	23	2	2	0	166
Per cent of all separations %	4.8	2.6	5.6	3.9	6.4	2.3	2.5	..	4.3
Expenditure for excluded hospitals (\$m)	517	147	241	112	154	13	1.45	..	1,185
Inpatient fraction for excluded hospitals	0.75	0.50	0.69	0.82	0.92	n.a.	1.00	..	0.74
Unadjusted cost per separation	6,509	2,741	4,222	6,435	6,095	n.a.	927	..	5,250
<b>Average cost data for selected hospitals</b>									
Non-medical labour costs per casemix-adjusted separation (\$)									
Nursing	735	710	717	808	657	n.a.	750	887	n.a.
Diagnostic/allied health(k)	207	231	151	248	197	n.a.	191	177	n.a.
Administrative	211	205	180	263	210	n.a.	231	261	n.a.
Other staff	185	144	218	240	122	n.a.	124	412	n.a.
Superannuation(j)	128	110	143	163	127	n.a.	197	116	n.a.
<i>Total non-medical labour costs</i>	<i>1,466</i>	<i>1,400</i>	<i>1,409</i>	<i>1,722</i>	<i>1,313</i>	<i>1,524</i>	<i>1,493</i>	<i>1,853</i>	<i>1,454</i>

(continued)

**Table 2.1 (continued): Cost(a) per casemix-adjusted separation, selected public acute hospitals,(b) States and Territories, 1999-00**

Variable	NSW	Vic	Qld	WA	SA	Tas(c)	ACT	NT(d)	Total
Other recurrent costs per casemix-adjusted separation (\$)									
Domestic services	61	70	81	181	71	38	124	192	80
Repairs/maintenance	64	54	46	98	94	77	60	88	64
Medical supplies(k)	204	210	261	223	164	274	290	180	216
Drug supplies	146	126	138	178	131	132	153	173	141
Food supplies	34	30	24	23	16	35	36	34	29
Administration	160	151	147	197	157	318	178	186	162
Other	91	59	39	116	127	12	189	244	80
<i>Total other recurrent costs</i>	<i>760</i>	<i>700</i>	<i>736</i>	<i>1,016</i>	<i>760</i>	<i>886</i>	<i>1,030</i>	<i>1,097</i>	<i>772</i>
<b>Total excluding medical labour costs</b>	<b>2,226</b>	<b>2,100</b>	<b>2,145</b>	<b>2,738</b>	<b>2,073</b>	<b>2,410</b>	<b>2,523</b>	<b>2,950</b>	<b>2,226</b>
Medical labour costs per casemix-adjusted separation (\$)									
Public patients									
Salaried/sessional staff	312	310	311	383	285	296	347	426	317
VMO payments	162	62	63	142	144	53	231	38	112
Private patients (estimated)(l)	112	57	37	72	77	89	66	30	73
<i>Total medical labour costs</i>	<i>586</i>	<i>429</i>	<i>411</i>	<i>597</i>	<i>506</i>	<i>438</i>	<i>644</i>	<i>494</i>	<i>502</i>
<b>Total cost per casemix adjusted separation(a)</b>	<b>2,812</b>	<b>2,529</b>	<b>2,556</b>	<b>3,335</b>	<b>2,579</b>	<b>2,848</b>	<b>3,167</b>	<b>3,444</b>	<b>2,728</b>

(a) Excludes depreciation.

(b) Psychiatric hospitals, drug and alcohol services, mothercraft hospitals, Unpeered and other, hospices, rehabilitation facilities, small non-acute and multi-purpose services are excluded from this table. Appendix 5 lists w

(c) Tasmania is the only jurisdiction with a significant payroll tax burden. As a result, payroll tax has been estimated at 6.7% of salary plus superannuation and removed from the above. Consequently the above data do no

(d) These figures should be interpreted in conjunction with the consideration of cost disabilities associated with hospital service delivery in the Northern Territory (see Appendix 4).

(e) Separations from the National Hospital Morbidity Database whose type of episode of care is acute, newborn with qualified days or unspecified.

(f) Average cost weight from the National Hospital Morbidity Database, based on acute and unspecified separations and newborn episodes of care with qualified days, using the 1998-99 AR-DRG v 4.0/4.1 combined cost

(g) Casemix-adjusted separations is the product of Total separations and Average cost weight.

(h) None of the selected hospitals above have had their admitted patient proportion estimated by the HASAC ratio.

(i) Eligible public patient days as a proportion of total patient days, excluding newborns with no qualified days.

(l) Estimated private patient medical costs calculated as the sum of salary/sessional and VMO payments divided by the number of public patient days multiplied by the number of private patient days. This is a notional es

(k) Queensland pathology services are now being purchased from the statewide pathology service rather than being provided by each hospitals' employees.

. . not applicable.

n.a. not available.

**Table 2.2: Cost per acute casemix-adjusted separation (excluding psychiatric unit expenditure and activity)**

<b>Variable</b>	<b>NSW</b>	<b>Vic</b>
Total separations ('000)	1,186	977
Acute separations ('000)(b)	1,160	948
Acute designated psychiatric unit separations ('000)(c)	22	19
Acute separations and excluding psychiatric unit separations ('000)(c)	1,138	929
Proportion of separations not acute and including psychiatric unit separations	4.1%	4.9%
Total recurrent expenditure (\$m)	4,553	3,361
Total admitted patient expenditure (\$m)	3,320	2,376
<b>Costs relating to acute (excluding psychiatric unit) separations</b>		
Average cost weight(e)	1.033	0.965
Casemix-adjusted acute separations ('000)	1,176	896
Acute non-psychiatric admitted patient fraction(d)	0.668	0.616
Total acute patient (excluding psychiatric patient) recurrent expenditure (\$m)	3,041	2,070
Cost per casemix-adjusted acute separation (excluding psychiatric unit expenditures)	2,587	2,309
Cost per total casemix-adjusted separation (Table 2.1)	2,812	2,529
Percentage this exceeds cost per acute separation (excluding psychiatric unit expenditures)	8.0%	8.7%

(a) Excludes psychiatric, mothercraft, hospices, small non-acute, un-peered and other hospitals, rehabilitation facilities, and multi-purpose services.

(b) From the National Hospital Morbidity Database. Details of acute separations and bed days compared to non-acute separations and bed days are presented in Table 2.1.

(c) Acute separations are separations where the type of episode of care is acute, newborn with qualified days, or unspecified. Psychiatric unit separations are separations where the type of episode of care is psychiatric.

(d) The acute non-psychiatric admitted patient fraction is that portion of recurrent costs which are for acute admitted patients and which exclude the costs of psychiatric patients.

(e) Average cost weight from the National Hospital Morbidity Database, based on acute and unspecified separations and newborn episodes of care with qualified days.

Note: The Cost per non-acute separation and including psychiatric unit separations is \$5,769 for NSW and \$6,347 for Victoria.

**Table 2.3: Average costs(a) and selected parameters by hospital peer group, Australia,(b) 1999-00**

	Number of establishments	Average beds	Average separations	Average cost weight	Cost per separation	Cost per patient day	Average length of	Total expenditure	Cost per casemix-adjusted separation (\$)		
									Average	Q3	Q1
Principal referral. - Metropolitan (>20,000 separations) & rural (>16,000 separations)	50	506	45,102	1.04	2,817	747	3.8	8,554,423	2,789	2,907	2,590
Women's & children's >10,000 separations	9	258	23,779	0.95	3,037	975	3.1	911,074	3,326	3,707	3,033
<i>Principal referral &amp; Women's &amp; children's</i>	59	468	41,849	1.03	2,836	764	3.7	9,465,497	2,831	3,107	2,593
Large metropolitan, >10,000 separations	20	171	15,037	0.99	2,333	631	3.7	939,060	2,450	7,999	1,189
Large rural (>8,000 separations) & remote (>5,000 separations)	20	146	13,043	0.89	2,262	687	3.3	806,613	2,599	2,867	2,048
<i>Total other large metro and rural</i>	40	159	14,040	0.94	2,300	656	3.5	1,745,673	2,516	2,915	2,249
Medium 5,000-10,000 separations	32	99	7,945	0.88	2,409	717	3.4	790,088	2,810	2,896	2,101
Medium 2,000-5,000 separations	72	50	3,525	0.81	1,988	551	3.6	638,186	2,540	3,082	2,332
<i>Total medium</i>	104	65	4,898	0.84	2,200	632	3.5	1,428,274	2,685	2,860	2,138
Small rural acute <2,000 separations	95	24	1,053	0.83	2,094	458	4.6	271,733	2,604	2,963	2,192
Remote acute <5,000 separations	56	24	1,194	0.78	2,466	743	3.3	239,177	3,188	3,152	2,234
<i>Total small rural and remote acute</i>	151	24	1,105	0.81	2,243	551	4.1	510,910	2,833	4,517	2,777
Small non-acute <2,000 separations	104	24	581	n.a.	2,851	244	11.7	216,155	n.a.	n.a.	n.a.
Multi-purpose service	55	19	513	n.a.	3,007	445	6.8	109,857	n.a.	n.a.	n.a.
Hospice	3	58	996	n.a.	7,671	550	13.9	32,859	n.a.	n.a.	n.a.
Rehabilitation	6	55	637	n.a.	14,819	573	25.9	77,801	n.a.	n.a.	n.a.
Mothercraft	6	24	2,018	n.a.	876	324	2.7	12,067	n.a.	n.a.	n.a.
Other non-acute	15	54	870	n.a.	6,820	364	18.7	138,813	n.a.	n.a.	n.a.
<i>Total non-acute (includes small non-acute)</i>	189	26	638	n.a.	3,683	332	10.9	587,552	n.a.	n.a.	n.a.
Unpeered and other acute (includes hospitals <200 separations)	116	7	225	n.a.	2,492	406	6.3	210,186	n.a.	n.a.	n.a.
Psychiatric(c)	19	139	917	n.a.	21,545	329	65.5	406,264	n.a.	n.a.	n.a.
<b>Total</b>	<b>678</b>	<b>79</b>	<b>5,770</b>	<b>n.a.</b>	<b>2,757</b>	<b>658</b>	<b>4.2</b>	<b>14,354,354</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>
<i>Teaching hospitals (excluding psychiatric)</i>	<i>51</i>	<i>462</i>	<i>43,340</i>	<i>1.04</i>	<i>2,903</i>	<i>780</i>	<i>3.7</i>	<i>8,704,867</i>	<i>2,877</i>	<i>4,037</i>	<i>2,313</i>

(a) Expenditure data excludes depreciation.

(b) Excludes a few small hospitals with missing expenditure data: Some data reported at network level. Peer group of hospital listed in Appendix 5.

(c) Psychiatric hospitals consist of a mix of short term acute, long term, psychogeriatric and forensic psychiatric hospitals.

n.a. not available.

**Table 2.4: Costs and utilisation by hospital peer group, Australia,(a)(b) public acute & psychiatric hospitals, 1999-00**

	NSW	Vic	QLD	WA	SA	Tas	ACT	NT	Total
<b>Principal referral: Metropolitan (&gt;20,000 acute weighted separations) &amp; rural (&gt;16,000 acute weighted separations)</b>									
Number of hospitals	18	11	11	3	3	2	1	1	50
Average beds per hospital	418	771	421	593	461	364	503	268	506
Separations per hospital	36,615	65,590	35,514	58,394	55,466	30,939	48,368	32,046	45,102
Average cost weight(d)	1.08	1.01	1.07	1.00	1.05	1.06	0.89	0.75	1.04
Cost per separation	3,040	2,540	2,851	n.p.	n.p.	2,669	n.p.	n.p.	2,817
Cost per patient day	783	649	791	n.p.	n.p.	650	n.p.	n.p.	747
Cost per casemix-adjusted separation	2,940	2,577	2,703	n.p.	n.p.	2,608	n.p.	n.p.	2,789
Total expenditure (\$'000)	2,780,157	2,617,939	1,330,251	n.p.	n.p.	249,034	n.p.	n.p.	8,554,423
<b>Specialist women's &amp; children's &gt;10,000 acute weighted separations</b>									
Number of hospitals	3	1	3	1	1	0	0	0	9
Average beds per hospital	171	535	166	488	288	..	..	..	258
Separations per hospital	17,308	54,649	13,640	36,522	29,998	..	..	..	23,779
Average cost weight(d)	1.02	0.96	0.93	0.91	0.87	..	..	..	0.95
Cost per separation	3,051	n.p.	2,891	n.p.	n.p.	..	..	..	3,037
Cost per patient day	957	n.p.	969	n.p.	n.p.	..	..	..	975
Cost per casemix-adjusted separation	3,170	n.p.	3,176	n.p.	n.p.	..	..	..	3,326
Total expenditure (\$'000)	240,998	n.p.	160,136	n.p.	n.p.	..	..	..	911,074
<b>Total principal referral and Specialist women's &amp; children's</b>									
Number of hospitals	21	12	14	4	4	2	1	1	59
Average beds per hospital	383	752	366	567	418	364	503	268	468
Separations per hospital	33,856	64,679	30,827	52,926	49,099	30,939	48,368	32,046	41,849
Average cost weight(d)	1.08	1.00	1.05	0.98	1.02	1.06	0.89	0.75	1.03
Cost per separation	3,041	2,551	2,855	3,325	2,696	2,669	n.p.	n.p.	2,836
Cost per patient day	794	665	806	923	823	650	n.p.	n.p.	764
Cost per casemix-adjusted separation	2,955	2,600	2,743	3,462	2,693	2,608	n.p.	n.p.	2,831
Total expenditure (\$'000)	3,021,154	2,830,782	1,490,387	884,739	664,626	249,034	n.p.	n.p.	9,465,496
<b>Large metropolitan, (&gt;10,000 acute weighted separations)</b>									
Number of hospitals	13	0	3	0	3	0	1	0	20
Average beds per hospital	165	..	177	..	198	..	162	..	171
Separations per hospital	14,079	..	16,802	..	18,337	..	12,288	..	15,037
Average cost weight(d)	0.99	..	0.94	..	0.98	..	1.10	..	0.99
Cost per separation	2,359	..	1,971	..	2,383	..	n.p.	..	2,333
Cost per patient day	615	..	656	..	625	..	n.p.	..	631
Cost per casemix-adjusted separation	2,471	..	2,094	..	2,572	..	n.p.	..	2,450
Total expenditure (\$'000)	586,229	..	135,706	..	168,738	..	n.p.	..	939,060
<b>Large rural (&gt;8,000 acute weighted separations) &amp; remote (&gt;5,000 acute weighted separations)</b>									
Number of hospitals	6	6	4	2	0	1	0	1	20
Average beds per hospital	142	143	171	117	..	131	..	162	146
Separations per hospital	12,290	13,710	14,652	9,962	..	8,224	..	18,098	13,043
Average cost weight(d)	0.99	0.88	0.79	0.86	..	1.15	..	0.69	0.89
Cost per separation	2,649	2,128	1,665	2,295	..	n.p.	..	n.p.	2,262
Cost per patient day	740	635	567	780	..	n.p.	..	n.p.	687
Cost per casemix-adjusted separation	2,763	2,459	2,108	2,710	..	n.p.	..	n.p.	2,599
Total expenditure (\$'000)	244,490	239,033	155,565	57,738	..	n.p.	..	n.p.	806,613
<b>Total large rural, remote and metropolitan</b>									
Number of hospitals	19	6	7	2	3	1	1	1	40
Average beds per hospital	157	143	173	117	198	131	162	162	159
Separations per hospital	13,514	13,710	15,573	9,962	18,337	8,224	12,288	18,098	14,040
Average cost weight(d)	0.99	0.88	0.86	0.86	0.98	1.15	1.10	0.69	0.94
Cost per separation	2,442	2,128	1,807	2,295	2,383	n.p.	n.p.	n.p.	2,300
Cost per patient day	650	635	608	780	625	n.p.	n.p.	n.p.	656
Cost per casemix-adjusted separation	2,556	2,459	2,105	2,710	2,572	n.p.	n.p.	n.p.	2,516
Total expenditure (\$'000)	830,719	239,033	291,271	57,738	168,738	n.p.	n.p.	n.p.	1,745,672

(continued)

**Table 2.4 (continued): Costs and utilisation by hospital peer group, Australia,(a)(b) public acute & psychiatric hospitals, 1999-00**

	NSW	Vic(b)	QLD	WA	SA	Tas	ACT	NT	Total
<b>Medium 5,000 to 10,000 acute weighted separations</b>									
Number of hospitals	10	5	6	7	4	0	0	0	32
Average beds per hospital	86	86	108	134	76	..	..	..	99
Separations per hospital	7,162	7,568	8,062	9,268	7,880	..	..	..	7,945
Average cost weight(d)	0.99	0.83	0.86	0.80	0.85	..	..	..	0.88
Cost per separation	2,836	1,924	2,154	2,515	2,194	..	..	..	2,409
Cost per patient day	783	655	694	680	737	..	..	..	717
Cost per casemix-adjusted separation	2,948	2,381	2,514	3,221	2,638	..	..	..	2,810
Total expenditure (\$'000)	267,658	97,556	136,983	201,688	86,203	..	..	..	790,088
<b>Medium 2,000 to 5,000 acute weighted separations</b>									
Number of hospitals	30	16	11	4	11	0	0	0	72
Average beds per hospital	49	50	53	50	50	..	..	..	50
Separations per hospital	3,463	3,606	3,736	3,288	3,443	..	..	..	3,525
Average cost weight(d)	0.8	0.8	0.7	0.8	0.9	..	..	..	0.81
Cost per separation	2,292	1,765	1,486	2,211	1,959	..	..	..	1,988
Cost per patient day	585	543	426	710	545	..	..	..	551
Cost per casemix-adjusted separation	2,822	2,292	2,218	2,819	2,280	..	..	..	2,540
Total expenditure (\$'000)	310,520	132,643	82,090	34,440	78,494	..	..	..	638,186
<b>Total medium</b>									
Number of hospitals	40	21	17	11	15	0	0	0	104
Average beds per hospital	58	59	72	104	58	..	..	..	65
Separations per hospital	4,388	4,549	5,263	7,094	4,711	..	..	..	4,898
Average cost weight(d)	0.90	0.81	0.79	0.80	0.87	..	..	..	0.84
Cost per separation	2,514	1,828	1,847	2,464	2,071	..	..	..	2,200
Cost per patient day	662	584	563	684	628	..	..	..	632
Cost per casemix-adjusted separation	2,879	2,330	2,406	3,153	2,449	..	..	..	2,685
Total expenditure (\$'000)	578,178	230,198	219,073	236,128	164,697	..	..	..	1,428,274
<b>Small rural acute &lt;2,000 acute weighted separations &amp; less than 40% not acute or outlier beddays</b>									
Number of hospitals	25	22	14	14	17	3	0	0	95
Average beds per hospital	28	22	17	23	29	17	..	..	24
Separations per hospital	1,329	1,052	926	759	1,061	678	..	..	1,053
Average cost weight(d)	0.84	0.83	0.79	0.79	0.84	n.p.	..	..	0.83
Cost per separation	2,256	2,006	1,594	2,755	1,940	n.p.	..	..	2,094
Cost per patient day	470	397	476	699	397	n.p.	..	..	458
Cost per casemix-adjusted separation	2,773	2,480	2,049	3,530	2,378	n.p.	..	..	2,603
Total expenditure (\$'000)	94,439	60,697	29,631	38,520	40,576	n.p.	..	..	271,733
<b>Remote acute &lt;5,000 acute weighted separations</b>									
Number of hospitals	5	0	25	21	2	0	0	3	56
Average beds per hospital	27	..	23	22	14	..	..	37	24
Separations per hospital	1,408	..	1,005	1,226	627	..	..	2,565	1,194
Average cost weight(d)	0.70	..	0.77	0.81	0.78	..	..	0.84	0.78
Cost per separation	1,500	..	1,910	3,179	2,020	..	..	2,849	2,466
Cost per patient day	429	..	534	1,060	649	..	..	831	743
Cost per casemix-adjusted separation	2,166	..	2,536	3,965	2,610	..	..	3,408	3,188
Total expenditure (\$'000)	19,441	..	74,657	111,818	3,477	..	..	29,785	239,177
<b>Total small rural and remote acute</b>									
Number of hospitals	30	22	39	35	19	3	0	3	151
Average beds per hospital	28	22	21	23	28	17	..	37	24
Separations per hospital	1,342	1,052	977	1,039	1,015	678	..	2,565	1,105
Average cost weight(d)	0.82	0.83	0.78	0.80	0.84	n.p.	..	0.84	0.81
Cost per separation	2,124	2,006	1,802	3,055	1,946	n.p.	..	2,849	2,243
Cost per patient day	464	397	515	933	408	n.p.	..	831	551
Cost per casemix-adjusted separation	2,680	2,480	2,366	3,845	2,392	n.p.	..	3,408	2,832
Total expenditure (\$'000)	113,880	60,697	104,288	150,337	44,053	n.p.	..	29,785	510,910

(continued)

**Table 2.4 (continued): Costs and utilisation by hospital peer group, Australia,(a)(b) public acute & psychiatric hospitals, 1999-00**

	NSW	Vic(b)	QLD	WA	SA	Tas	ACT	NT	Total
<b>Small non-acute &lt;2,000 acute weighted separations more than 40% not acute or outlier bed days</b>									
Number of hospitals	39	4	34	2	20	5	0	0	104
Average beds per hospital	23	21	24	19	30	16	..	..	24
Separations per hospital	520	843	682	490	521	423	..	..	581
Cost per separation	3,431	2,944	2,375	4,613	2,785	n.a.	..	..	2,851
Cost per patient day	249	441	213	767	263	n.a.	..	..	244
Total expenditure (\$'000)	85,050	10,793	69,791	5,722	35,541	n.a.	..	..	216,155
<b>Multi-purpose service</b>									
Number of hospitals	15	7	9	18	6	0	0	0	55
Average beds per hospital	14	14	21	19	39	..	..	..	19
Separations per hospital	306	830	747	376	828	..	..	..	513
Cost per separation	4,639	2,416	1,758	3,756	n.p.	..	..	..	3,007
Cost per patient day	269	675	275	1,056	n.p.	..	..	..	445
Total expenditure (\$'000)	27,588	20,619	16,690	34,321	n.p.	..	..	..	109,856
<b>Hospice</b>									
Number of hospitals	3	0	0	0	0	0	0	0	3
Average beds per hospital	58	..	..	..	..	..	..	..	58
Separations per hospital	996	..	..	..	..	..	..	..	996
Cost per separation	7,671	..	..	..	..	..	..	..	7,671
Cost per patient day	550	..	..	..	..	..	..	..	550
Total expenditure (\$'000)	32,859	..	..	..	..	..	..	..	32,859
<b>Rehabilitation</b>									
Number of hospitals	5	0	0	0	1	0	0	0	6
Average beds per hospital	40	..	..	..	133	..	..	..	55
Separations per hospital	569	..	..	..	976	..	..	..	637
Cost per separation	14,330	..	..	..	n.p.	..	..	..	14,819
Cost per patient day	644	..	..	..	n.p.	..	..	..	573
Total expenditure (\$'000)	61,654	..	..	..	n.p.	..	..	..	77,801
<b>Mothercraft</b>									
Number of hospitals	0	3	1	0	1	0	1	0	6
Average beds per hospital	..	28	40	..	9	..	10	..	24
Separations per hospital	..	3,126	1,922	..	807	..	793	..	2,018
Cost per separation	..	639	n.p.	..	n.p.	..	n.p.	..	876
Cost per patient day	..	256	n.p.	..	n.p.	..	n.p.	..	324
Total expenditure (\$'000)	..	7,008	n.p.	..	n.p.	..	n.p.	..	12,067
<b>Other non-acute</b>									
Number of hospitals	13	2	0	0	0	0	0	0	15
Average beds per hospital	51	71	..	..	..	..	..	..	54
Separations per hospital	854	970	..	..	..	..	..	..	870
Cost per separation	6,257	10,046	..	..	..	..	..	..	6,820
Cost per patient day	348	437	..	..	..	..	..	..	364
Total expenditure (\$'000)	116,679	22,134	..	..	..	..	..	..	138,813
<b>Total non-acute</b>									
Number of hospitals	75	16	44	20	28	5	1	0	189
Average beds per hospital	29	26	24	19	34	14	10	..	26
Separations per hospital	557	1,281	723	388	600	389	793	..	638
Cost per separation	5,358	2,412	2,180	3,864	3,555	n.a.	n.p.	..	3,683
Cost per patient day	338	444	225	999	334	n.a.	n.p.	..	338
Total expenditure (\$'000)	323,830	60,554	89,424	40,042	62,997	n.a.	n.p.	..	587,551
<b>Unpeered and other acute(c) (includes hospitals with fewer than 200 separations)</b>									
Number of hospitals	17	9	59	14	10	6	0	0	116
Average beds per hospital	14	9	3	15	11	5	..	..	7
Separations per hospital	278	612	110	278	476	123	..	..	225
Cost per separation	4,509	1,953	1,039	5,083	1,191	n.a.	..	..	2,492
Cost per patient day	293	604	255	1,244	323	n.a.	..	..	406
Total expenditure (\$'000)	32,343	73,418	62,068	24,145	9,002	n.a.	..	..	210,186

(continued)



**Table 2.4 (continued): Costs and utilisation by hospital peer group, Australia,(a)(b) public acute & psychiatric hospitals, 1999-00**

	NSW	Vic(b)	QLD	WA	SA	Tas	ACT	NT	Total
<b>Psychiatric(e)</b>									
Number of hospitals	9	1	7	1	1	0	0	0	19
Average beds per hospital	119	90	103	283	479	..	..	..	139
Separations per hospital	1,025	520	200	2,692	3,592	..	..	..	917
Cost per separation	15,899	n.p.	65,058	n.p.	n.p.	..	..	..	21,545
Cost per patient day	316	n.p.	215	n.p.	n.p.	..	..	..	329
Total expenditure (\$'000)	170,674	n.p.	91,459	n.p.	n.p.	..	..	..	406,264
<b>Total</b>									
Number of hospitals	211	87	187	87	80	17	3	5	677
Average beds per hospital	84	140	55	61	66	60	225	108	79
Separations per hospital	5,873	11,536	3,785	4,142	4,737	4,411	20,219	11,568	5,770
Cost per separation	2,992	2,440	2,586	3,178	2,712	2,835	2,986	2,618	2,757
Cost per patient day	646	639	602	848	661	628	861	778	658
Total expenditure (\$'000)	5,070,777	3,507,211	2,347,970	1,441,974	1,196,872	334,142	258,624	196,784	14,354,354
<b>Teaching (excluding psychiatric)</b>									
Number of hospitals	17	9	10	4	4	3	2	2	51
Average beds per hospital	412	907	358	567	418	286	333	215	462
Separations per hospital	36,730	78,740	28,825	52,926	49,099	23,367	30,328	25,072	43,340
Average cost weight(d)	1.09	1.01	1.12	0.98	1.02	1.07	0.93	0.69	1.04
Cost per separation	3,094	2,569	3,187	3,325	2,696	2,885	n.p.	n.p.	2,903
Cost per patient day	812	674	860	923	823	698	n.p.	n.p.	780
Cost per casemix-adjusted separation	2,988	2,601	2,890	3,462	2,693	2,778	n.p.	n.p.	2,877
Total expenditure (\$'000)	2,736,033	2,578,789	1,121,847	884,739	664,626	294,655	n.p.	n.p.	8,704,867

(a) Expenditure data excludes depreciation.

(b) Some data reported at network level. Networks can contain smaller, specialised and non-acute hospitals.

(c) Excludes a few small hospitals with missing expenditure data.

(d) Average cost weight from the National Hospital Morbidity Database, based on acute and unspecified separations and newborn episodes of care with qualified days, using

(e) Psychiatric hospitals consist of a

n.p. Not published.

.. Not applicable.

**Table 2.5: Average salary of full time equivalent staff,<sup>(a)</sup> public acute and psychiatric hospitals, States and Territories, 1999-00 (\$)**

<b>Staffing category</b>	<b>NSW</b>	<b>Vic<sup>(b)</sup></b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas<sup>(c)</sup></b>	<b>ACT</b>	<b>NT</b>	<b>Australia<sup>(c)</sup></b>
Salaried medical officers	95,543	109,515	89,580	103,122	79,717	95,769	106,101	109,515	97,269
Nurses	50,802	56,232	48,834	49,477	46,125	n.a.	48,487	52,177	n.a.
Other personal care staff	n.a.	30,975	36,211	32,703	n.a.	n.a.	35,624	40,522	n.a.
Diagnostic & health professionals	50,133	48,764	51,007	47,692	47,757	n.a.	47,415	66,887	n.a.
Administrative & clerical staff	46,617	43,896	38,154	38,562	36,636	n.a.	43,079	48,978	n.a.
Domestic & other staff	33,001	37,966	33,171	33,335	31,075	n.a.	31,016	39,293	n.a.
<b>Total staff</b>	<b>51,130</b>	<b>55,646</b>	<b>48,267</b>	<b>49,097</b>	<b>46,044</b>	<b>47,167</b>	<b>51,433</b>	<b>55,788</b>	<b>50,981</b>

(a) Where average full time equivalent (FTE) staff numbers were not available, staff numbers at 30 June 2000 were used.

(b) For Victoria, salaries and FTEs may be slightly understated

(c) Breakdown of salary and FTEs for staff who are not medical officers is not available.

n.a. not available.

**Table 2.6: Number of public acute and psychiatric hospitals and available beds<sup>(a)</sup> accreditation status<sup>(b)</sup> States and Territories, 1999–00**

Hospital accreditation	NSW <sup>(c)</sup>	Vic <sup>(d)</sup>	Qld <sup>(e)</sup>	WA	SA	Tas	ACT <sup>(f)</sup>	NT	Total
<b>Public hospitals</b>									
ACHS accredited hospitals	128	108	73	38	52	4	2	1	406
Other accredited hospitals	20	5	8	n.a.	n.a.	n.a.	1	0	n.a.
Total accredited hospitals	148	113	81	n.a.	n.a.	n.a.	3	1	n.a.
<i>Total public hospitals</i>	216	143	187	90	76	24	3	5	744
ACHS accredited beds	14,176	11,421	7,286	3,283	3,807	871	665	268	41,777
Other accredited beds	902	84	149	n.a.	n.a.	n.a.	10	0	n.a.
Total accredited beds	15,078	11,505	7,435	n.a.	n.a.	n.a.	675	268	n.a.
<i>Total available beds for admitted patients</i>	17,754	12,162	10,320	5,299	5,045	1,152	675	569	52,976

(a) Where average available beds for the year were not available, bed numbers at 30 June 2000 were used.

(b) Accreditation status during 1999–00.

(c) Of the 'Other accredited hospitals', 17 were accredited by AQC, 2 were accredited according to ISO standards and one was accredited by QMS.

(d) Of the 'Other accredited hospitals' 2 were accredited by QICSA and 3 were accredited according to ISO9002 standards.

(e) All of the 'other accredited' hospitals were accredited by QIC using the IHCA standards.

(f) One establishment was accredited by CHASP.

n.a. not available.

Table 2.7: Separation statistics for selected procedures<sup>(a)</sup> by State or Territory of usual residence, all hospitals,<sup>(b)</sup> States and Territories, 1999-00

Procedure	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total <sup>(c)</sup>
<b>Appendicectomy</b>									
Separations <sup>(d)</sup>	8,133	6,460	5,595	3,109	1,926	655	380	187	26,445
Separations within State of residence (%)	97	99	99	99	99	98	94	94	
Separation rate <sup>(e)</sup>	1.33	1.42	1.61	1.69	1.36	1.46	1.21	0.89	1.44
Separation rate <sup>(e)</sup> for other States	1.49	1.44	1.40	1.41	1.44	1.44	1.44	1.44	
Difference, State/Territory & national rate (%)	-11.3	-1.7	15.5	19.9	-6.1	1.3	-15.8	-38.1	
Significance of difference	**	-	**	**	**	-	**	**	
<b>Coronary artery bypass graft</b>									
Separations <sup>(d)</sup>	6,898	4,319	3,071	1,147	1,182	396	188	70	17,271
Separations within State of residence (%)	93	99	99	99	99	95	90	0	
Separation rate <sup>(e)</sup>	0.97	0.83	0.85	0.63	0.66	0.74	0.74	0.58	0.84
Separation rate <sup>(e)</sup> for other States	0.78	0.85	0.84	0.86	0.86	0.84	0.84	0.84	
Difference, State/Territory & national rate (%)	24.8	-2.4	0.7	-27.5	-23.3	-12.7	-11.9	-31.2	
Significance of difference	**	-	-	**	**	**	-	**	
<b>Angioplasty</b>									
Separations <sup>(d)</sup>	6,962	5,973	2,987	1,901	1,803	546	300	103	20,575
Separations within State of residence (%)	93	99	99	99	99	98	86	0	
Separation rate <sup>(e)</sup>	0.97	1.14	0.81	1.02	1.02	1.00	1.13	0.79	1.00
Separation rate <sup>(e)</sup> for other States	1.01	0.95	1.04	0.99	0.99	1.00	0.99	1.00	
Difference, State/Territory & national rate (%)	-3.2	20.8	-22.4	2.9	2.8	0.4	13.2	-20.6	
Significance of difference	*	**	**	-	-	-	-	*	
<b>Caesarean section</b>									
Separations <sup>(d)</sup>	17,847	13,757	11,681	5,844	4,462	1,165	748	528	56,032
Separations within State of residence (%)	97	100	99	100	99	99	98	97	
In-hospital births	85,996	59,755	47,664	24,260	18,313	3,963	3,978	2,695	246,624
Separations per 100 in-hospital birth	21	23	25	24	24	29	19	20	
Separation rate <sup>(e)</sup>	2.96	3.03	3.54	3.27	3.37	2.95	2.40	2.41	3.13
Separation rate <sup>(e)</sup> for other States	3.21	3.16	3.03	3.11	3.11	3.13	3.14	3.14	
Difference, State/Territory & national rate (%)	-7.9	-4.0	16.6	5.0	8.3	-5.7	-23.6	-23.0	
Significance of difference	**	**	**	**	**	*	**	**	
<b>Cholecystectomy</b>									
Separations <sup>(d)</sup>	15,014	11,015	8,493	4,134	3,961	1,023	593	202	44,435
Separations within State of residence (%)	97	99	99	100	100	98	95	90	
Separation rate <sup>(e)</sup>	2.19	2.18	2.32	2.16	2.41	2.06	1.90	1.32	2.21
Separation rate <sup>(e)</sup> for other States	2.23	2.22	2.19	2.22	2.20	2.22	2.22	2.22	
Difference, State/Territory & national rate (%)	-1.6	-1.8	6.0	-2.4	9.9	-6.9	-14.4	-40.5	
Significance of difference	-	-	**	-	**	*	**	**	

(continued)

**Table 2.7 (continued): Separation statistics for selected procedures,<sup>(a)</sup> by State or Territory of usual residence, all hospitals,<sup>(b)</sup> States and Territories, 199**

Procedure	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total <sup>(c)</sup>
<b>Diagnostic gastrointestinal endoscopy</b>									
Separations <sup>(d)</sup>	171,818	134,150	102,527	47,881	37,149	9,284	3,464	1,822	508,095
Separations within State of residence (%)	98	99	99	100	100	99	95	91	
Separation rate <sup>(e)</sup>	24.52	26.16	27.71	25.05	21.64	17.63	11.80	12.32	24.87
Separation rate <sup>(e)</sup> for other States	25.05	24.44	24.25	24.85	25.17	25.06	25.07	24.96	
Difference, State/Territory & national rate (%)	-2.1	7.0	14.2	0.8	-14.0	-29.6	-52.9	-50.7	
Significance of difference	**	**	**	-	**	**	**	**	
<b>Hip replacement</b>									
Separations <sup>(d)</sup>	7,496	5,970	3,244	2,288	2,224	674	332	29	22,257
Separations within State of residence (%)	94	99	98	100	100	99	94	76	
Separation rate <sup>(e)</sup>	1.01	1.09	0.87	1.22	1.15	1.19	1.31	0.36	1.04
Separation rate <sup>(e)</sup> for other States	1.06	1.02	1.08	1.02	1.03	1.04	1.04	1.04	
Difference, State/Territory & national rate (%)	-4.9	6.4	-19.8	19.6	11.6	14.7	26.3	-66.0	
Significance of difference	**	**	**	**	**	**	**	**	
<b>Hysterectomy</b>									
Separations <sup>(d)</sup>	10,537	8,003	6,379	3,771	3,245	1,035	536	151	33,657
Separations within State of residence (%)	96	99	99	100	100	99	95	85	
Separation rate <sup>(e)</sup>	1.51	1.55	1.69	1.89	1.96	2.06	1.61	0.81	1.63
Separation rate <sup>(e)</sup> for other States	1.70	1.66	1.62	1.61	1.61	1.62	1.64	1.64	
Difference, State/Territory & national rate (%)	-11.1	-6.8	4.3	17.4	22.2	26.5	-1.7	-50.7	
Significance of difference	**	**	**	**	**	**	-	**	
<b>Lens insertion</b>									
Separations <sup>(d)</sup>	45,689	29,237	24,499	11,593	9,258	2,363	958	403	124,000
Separations within State of residence (%)	97	99	98	100	100	99	94	91	
Separation rate <sup>(e)</sup>	6.05	5.27	6.58	6.32	4.64	4.04	3.96	4.97	5.76
Separation rate <sup>(e)</sup> for other States	5.60	5.93	5.58	5.71	5.87	5.81	5.78	5.76	
Difference, State/Territory & national rate (%)	8.0	-11.1	17.8	10.7	-20.9	-30.4	-31.5	-13.7	
Significance of difference	**	**	**	**	**	**	**	**	
<b>Tonsillectomy</b>									
Separations <sup>(d)</sup>	10,334	8,346	6,122	3,773	2,830	598	426	128	32,557
Separations within State of residence (%)	96	99	99	100	100	99	96	86	
Separation rate <sup>(e)</sup>	1.73	1.92	1.81	2.10	2.13	1.36	1.40	0.60	1.83
Separation rate <sup>(e)</sup> for other States	1.88	1.80	1.84	1.80	1.81	1.85	1.84	1.85	
Difference, State/Territory & national rate (%)	-7.9	6.7	-1.5	16.6	17.5	-26.2	-23.8	-67.6	
Significance of difference	**	**	-	**	**	**	**	**	

(continued)

**Table 2.7 (continued): Separation statistics for selected procedures,<sup>(a)</sup> by State or Territory of usual residence, all hospitals,<sup>(b)</sup> [States and Territories, 1991]**

Procedure	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total <sup>(c)</sup>
<b>Myringotomy</b>									
Separations <sup>(d)</sup>	10,016	9,967	5,698	4,260	3,900	643	409	138	35,031
Separations within State of residence (%)	96	99	99	100	100	99	96	91	
Separation rate <sup>(e)</sup>	1.65	2.29	1.69	2.41	2.94	1.44	1.40	0.61	1.96
Separation rate <sup>(e)</sup> for other States	2.12	1.86	2.02	1.91	1.88	1.97	1.97	1.98	
Difference, State/Territory & national rate (%)	-22.4	23.5	-16.6	25.9	56.0	-27.2	-28.8	-69.1	
Significance of difference	**	**	**	**	**	**	**	**	
<b>Knee replacement</b>									
Separations <sup>(d)</sup>	7,815	3,796	3,155	2,030	1,802	456	307	40	19,401
Separations within State of residence (%)	94	98	99	99	99	97	93	68	
Separation rate <sup>(e)</sup>	1.08	0.72	0.88	1.13	0.98	0.82	1.26	0.43	0.94
Separation rate <sup>(e)</sup> for other States	0.86	1.02	0.95	0.92	0.94	0.94	0.94	0.94	
Difference, State/Territory & national rate (%)	25.5	-29.3	-8.1	22.7	4.8	-13.5	34.5	-54.4	
Significance of difference	**	**	**	**	-	**	**	**	
<b>Prostatectomy</b>									
Separations <sup>(d)</sup>	8,126	7,013	3,649	1,858	2,014	597	263	50	23,570
Separations within State of residence (%)	95	98	99	100	99	99	93	74	
Separation rate <sup>(e)</sup>	1.12	1.31	1.00	1.03	1.08	1.06	1.08	0.61	1.13
Separation rate <sup>(e)</sup> for other States	1.14	1.07	1.16	1.14	1.14	1.14	1.13	1.14	
Difference, State/Territory & national rate (%)	-1.5	22.3	-13.7	-10.2	-4.9	-6.3	-5.1	-46.1	
Significance of difference	-	**	**	**	*	-	-	**	
<b>Arthroscopic procedures (includes arthroscopies)</b>									
Separations <sup>(d)</sup>	32,373	27,449	15,913	13,550	13,072	2,361	1,662	658	107,038
Separations within State of residence (%)	95	97	99	100	100	97	91	57	
Separation rate <sup>(e)</sup>	4.89	5.63	4.42	7.10	8.42	4.95	5.28	3.49	5.47
Separation rate <sup>(e)</sup> for other States	5.77	5.42	5.71	5.30	5.22	5.49	5.48	5.49	
Difference, State/Territory & national rate (%)	-15.3	3.8	-22.7	33.9	61.2	-9.8	-3.6	-36.5	
Significance of difference	**	**	**	**	**	**	-	**	

(a) The procedures are defined using ICD-10-AM codes in Appendix 3. Procedures include National Health Minister's Benchmarking Working Group sentinel procedures and additional procedures requested by States and Territories.

(b) Some private hospitals are not included. See Chapter 1 for details.

(c) Includes *Other Territories*.

(d) Excludes multiple procedures during the same separation within the same sentinel group.

(e) Rate per 1,000 population was directly age- and sex-standardised to the Australian population at 30 June 1991.

- not significant, \* significant at 5%, \*\* significant at 1%.

**Table 2.8: Average length of stay (days) for the 10 AR-DRGs (version 4) with the highest number of separations,<sup>(a)</sup> excluding same day separations, by hos**

AR-DRG	Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
O60D Vaginal Delivery W/O Complicating Diagnosis	Public	3.13	3.13	2.79	3.30	3.10	3.32	2.90	3.74	3.08
	Private	4.77	4.93	4.76	4.76	4.90	3.94	5.42	n.a.	4.80
	<i>Total</i>	<i>3.47</i>	<i>3.56</i>	<i>3.25</i>	<i>3.79</i>	<i>3.52</i>	<i>3.55</i>	<i>3.53</i>	<i>3.74</i>	<i>3.49</i>
G67B Oesophagitis, Gastroent & Misc Digestive System	Public	2.79	2.55	2.40	2.60	2.54	3.44	3.41	2.94	2.63
	Private	4.49	3.84	3.54	3.43	3.56	3.09	4.00	n.a.	3.74
	<i>Total</i>	<i>2.98</i>	<i>2.84</i>	<i>2.74</i>	<i>2.83</i>	<i>2.77</i>	<i>3.30</i>	<i>3.57</i>	<i>2.94</i>	<i>2.87</i>
O01D Caesarean Delivery W/O Complicating Diagnosis	Public	5.14	4.96	4.27	5.01	5.13	4.53	4.96	6.07	4.90
	Private	6.46	6.60	6.09	6.96	6.63	5.82	7.13	n.a.	6.48
	<i>Total</i>	<i>5.57</i>	<i>5.54</i>	<i>5.00</i>	<i>5.93</i>	<i>5.63</i>	<i>5.10</i>	<i>5.80</i>	<i>6.07</i>	<i>5.48</i>
H04B Cholecystectomy W/O Closed CDE W/O Catastrophic	Public	2.58	2.40	1.94	2.63	2.09	2.27	2.25	3.20	2.37
	Private	2.54	2.80	2.50	2.46	2.84	2.53	2.71	n.a.	2.61
	<i>Total</i>	<i>2.57</i>	<i>2.54</i>	<i>2.19</i>	<i>2.54</i>	<i>2.37</i>	<i>2.40</i>	<i>2.46</i>	<i>3.20</i>	<i>2.47</i>
F74Z Chest Pain	Public	2.40	2.00	2.16	2.11	2.19	2.83	2.03	2.44	2.22
	Private	3.10	2.73	2.84	2.41	2.07	2.31	3.40	n.a.	2.67
	<i>Total</i>	<i>2.45</i>	<i>2.15</i>	<i>2.30</i>	<i>2.20</i>	<i>2.16</i>	<i>2.65</i>	<i>2.11</i>	<i>2.44</i>	<i>2.30</i>
D11Z Tonsillectomy, Adenoidectomy	Public	1.28	1.19	1.16	1.23	1.29	1.28	1.14	1.25	1.22
	Private	1.12	1.20	1.09	1.16	1.18	1.29	1.21	n.a.	1.14
	<i>Total</i>	<i>1.20</i>	<i>1.19</i>	<i>1.12</i>	<i>1.20</i>	<i>1.24</i>	<i>1.28</i>	<i>1.17</i>	<i>1.25</i>	<i>1.19</i>
G09Z Inguinal and Femoral Hernia Procedures Age>0	Public	2.10	1.83	1.52	1.95	2.06	1.84	1.28	1.66	1.89
	Private	2.09	2.03	1.71	2.09	2.27	2.01	2.04	n.a.	2.02
	<i>Total</i>	<i>2.09</i>	<i>1.94</i>	<i>1.63</i>	<i>2.04</i>	<i>2.17</i>	<i>1.95</i>	<i>1.72</i>	<i>1.66</i>	<i>1.96</i>
N04Z Hysterectomy for Non-Malignancy	Public	4.65	4.25	3.92	4.62	4.43	3.81	5.02	4.27	4.37
	Private	5.16	5.81	4.76	5.63	5.53	5.24	6.11	n.a.	5.33
	<i>Total</i>	<i>4.88</i>	<i>4.84</i>	<i>4.34</i>	<i>5.10</i>	<i>4.92</i>	<i>4.53</i>	<i>5.65</i>	<i>4.27</i>	<i>4.80</i>
E69C Bronchitis and Asthma Age<50 W/O CC	Public	2.13	1.93	2.10	2.21	2.18	2.35	2.15	2.32	2.10
	Private	2.83	2.63	2.65	2.43	3.42	2.43	2.52	n.a.	2.68
	<i>Total</i>	<i>2.15</i>	<i>1.98</i>	<i>2.18</i>	<i>2.24</i>	<i>2.27</i>	<i>2.36</i>	<i>2.19</i>	<i>2.32</i>	<i>2.15</i>
F62B Heart Failure and Shock W/O Catastrophic CC	Public	6.73	6.11	5.85	6.42	6.11	8.11	6.46	6.21	6.38
	Private	9.63	8.42	8.23	7.99	7.35	8.09	9.07	n.a.	8.43
	<i>Total</i>	<i>7.10</i>	<i>6.78</i>	<i>6.62</i>	<i>6.80</i>	<i>6.43</i>	<i>8.10</i>	<i>7.06</i>	<i>6.21</i>	<i>6.85</i>

(a) Separations for which the type of episode of care was reported as acute, or was not reported and the length of stay was less than 366 days.

n.a. not available.

Abbreviations: CC—complications and comorbidities, CDE—common bile duct exploration, W/O—without, W—with.

# 3 Overview of public hospital establishments

## Introduction

This chapter describes the public hospital sector in terms of the number of hospitals, availability of hospital beds, staff employed and specialised services provided. This chapter also provides information on public hospital expenditure and revenue. The main source of data is the National Public Hospital Establishments Database.

The data in this chapter primarily relate to public hospitals; however, data on private hospitals are also presented in Table 3.1 to 1998–99. When data for private hospitals in 1999–00 becomes available from the ABS, it will be added to the Internet versions of Tables 3.1 to 3.4.

## Hospitals by sector, 1995–96 to 1999–00

A range of data on hospitals, available beds, expenditure and revenue are presented in Table 3.1. Over the five-year period a number of jurisdictions changed from accounting on a cash basis to accrual accounting. A number of other changes to reporting arrangements have occurred over the period, and therefore comparisons across years must be made with care.

The count of public hospitals is subject to variation due to changes in administrative arrangements from year to year, and so provides limited comparative data. The number of beds in public hospitals, which is a more relevant measure, has decreased by 3% per year since 1995–96 from 59,720 to 52,947.

From 1995–96 to 1998–99, expenditure increased by 29% in the private sector (9% per year). Public hospital expenditure grew by 5% in 1999–00 which was the average annual growth for the period 1995–96 to 1999–00.

Revenue for the public sector increased by 2.3% per year in the period 1995–96 to 1999–00, while private sector revenue grew by 7.2% per year in the period 1995–96 to 1998–99.

## Hospitals and hospital beds

Information on the number of hospitals and hospital beds available by State and Territory is provided in Table 3.2. Data in this table are provided for public hospitals only. Nationally, there were 748 public hospitals with 52,947 beds.

Apparent changes and differences in the number of hospitals reported by States and Territories are mainly caused by changes in administrative or reporting arrangements and not necessarily by changes to the number of hospital campuses or buildings. Some groups of hospitals have been amalgamated into single units since the 1998–99 report and have been counted as one unit in the 1999–00 report. Conversely some hospitals which were previously counted under networks in 1998–99 have been counted separately in 1999–00.



In addition, the service delivery structure differs between jurisdictions and the count of hospitals in States and Territories does not provide useful comparative data.

Comparing increases or decreases in the number of available beds across years is a more reliable indicator of shifts in the availability of admitted patient services. Nationally, there were 938 fewer available beds in public hospitals in 1999–00 when compared with the 53,885 beds in 1998–99. This represents a national decline of 1.7% in available public hospital beds which is lower than the annual average decline of 3.0% in the period 1995–96 to 1999–00.

## **Hospital size**

Table 3.3 presents information on the distribution of hospitals by their size, which has been determined by the number of available beds. There are many small sized hospitals, particularly in those jurisdictions that cover large geographic areas. The majority of beds are in larger hospitals and in more densely populated areas. Although 69% of hospitals had fewer than 50 beds, these small hospitals had only 18% of available beds.

## **Regional distribution of beds**

The distribution of public hospital beds across metropolitan, rural and remote areas is presented in Table 3.4. Information on the number of available beds per 1,000 population is also provided as a comparative measure across States and Territories. This table does not, however, provide data on the distribution and availability of private hospital beds, nor does it take account of the differences in areas serviced by a hospital or the different types of services provided. The availability of public hospital beds ranged between 2.6 beds per 1,000 population nationally in metropolitan areas, 3.3 beds per 1,000 population in rural areas and 4.9 beds per 1,000 population in remote areas. There is not an exact geographic fit between population distribution and the distribution of hospital services. Hospitals based in central locations may also serve patients who reside in rural and remote areas of a State or Territory or in other jurisdictions.

The higher rate of public hospital beds in rural and remote areas than in metropolitan areas partly balances the lower relative provision of private hospital beds in the rural and remote areas. The higher rate of beds in non-metropolitan areas also balances other health infrastructure differentials such as the shortages of medical practitioners in rural and remote areas (AIHW: Strong et al. 1998). Many of the rural and remote hospitals have a high proportion of nursing home type patients who, in metropolitan areas, are cared for in nursing homes or hostels.

## **Specialised services**

Data relating to the availability of specialised services (such as obstetric/maternity services, intensive care units, cancer treatment centres and organ transplant services) for all States and Territories are presented in Table 3.5. By far, the most common specialised services offered by hospitals nationally were domiciliary care services and services provided by obstetric/maternity and nursing home care units. By contrast, acute spinal cord injury units and pancreas, heart and liver transplant services were provided by only a few hospitals nationally, reflecting the highly specialised nature of those services and the limited demand. Data on specialised services were not available for all hospitals and are under-counted for some jurisdictions.

## Staffing

Information on the number of staff employed in public hospitals by State and Territory is presented in Table 3.6. Data on full time equivalent staff are reported here as the average available staff for the year. The collection of data by staffing category is not consistent among States and Territories – for some jurisdictions, best estimates in some staffing categories only are reported. New South Wales, Western Australia and Tasmania were unable to provide information by nurse categories, although data on total nurse numbers are provided.

Nationally, 175,291 full time equivalent staff were employed in the public hospital sector in 1999–00. Nurses constituted 45% (79,006) of public hospital staff; registered nurses were the largest group in those States and Territories that reported a break down of the nursing categories.

There were 16,688 salaried medical officers employed in public hospitals throughout Australia, representing 10% of the public hospital labour force. Information on numbers of visiting medical officers (VMOs), who are contracted by hospitals to provide services to public patients and paid on a sessional or fee-for-service basis in public hospitals, is not available due to problems in the collection of systematic data on the hours, sessions and/or services provided by VMOs in many hospitals. (See Table 3.7 for data on payments to VMOs.)

Variation in some staffing categories (in particular, ‘other personal care staff’ and ‘domestic and other staff’) is most likely due to different reporting practices within the States. Queensland, in particular, has noted that there is little difference between these categories, and that an employee may perform different functions within these two categories on different days. South Australia and New South Wales did not provide data on ‘other personal care staff’ and these staff are included in the ‘diagnostic/allied health’ and ‘domestic’ staffing categories.

There has been an increase in the outsourcing of services with a large labour-related component (e.g. food services and domestic services). Increased outsourcing explains some of the decline in full time equivalent staff in some staffing categories and also some of the differences between the States and Territories.

## Recurrent expenditure

Commonwealth and State government expenditure for 1999–00 on public hospitals, including public psychiatric hospitals, accounts for over one-third of all government sector expenditure on health in this period (AIHW 2000b). Expenditure is a mixture of expenditure for hospitals in the States and Territories that reported on an accrual basis relating to 1999–00 and payments made during 1999–00 for those States and Territories that reported on a ‘cash’ basis.

Expenditure data reported to the National Public Hospital Establishments Database are not exactly comparable with other data such as data reported in the Institute’s annual *Health Expenditure Bulletin* (AIHW 2000b). The data presented in this report excludes expenditure for population health, primary and community based services administered by New South Wales hospitals, and trust fund expenditure, whereas the Health Expenditure Bulletins include it.

Nationally, recurrent expenditure on public acute and psychiatric hospitals was \$14.4 billion in 1999–00. Information on gross recurrent expenditure, categorised into salary and

non-salary expenditure, is presented in Table 3.7. Real recurrent expenditure in 1999–00 was \$14.0 billion (referenced to 1998–99 constant prices) and there was a real increase in recurrent expenditure as compared to 1998–99 of 2.6%.

The largest share of expenditure was for salary payments. Even when payments to VMOs and payments for outsourced services, which include large labour components, are excluded, salary payments accounted for 62% of the \$14.4 billion spent within the public hospital system. Salary payments include salaries and wages, payments to staff on paid leave, workers' compensation leave and salaries paid to contract staff where the contract was for the supply of labour and where full time equivalent staffing data are available.

Medical and surgical supplies (which include consumable supplies only and not equipment purchases), administrative expenses and drug supplies were the major non-salary expenses for public hospitals nationally.

Depreciation has also been reported in Table 3.7 for some jurisdictions, and the data show that there is variation between States and Territories, ranging from 6.5% of total expenditure in Queensland to 4.0% in Western Australia. It is anticipated that as accrual accounting becomes universally adopted by health authorities, comparable data on depreciation will become available. Depreciation data effectively provide a smoothed-out annual report on capital expenditure (how capital is expended or used up).

## Revenue

Hospital revenue (excluding general revenue payments received from State or Territory governments) is reported in Table 3.8. In this table, States and Territories have reported revenue against three categories: patient revenue, recoveries (income from the use of hospital facilities by salaried medical officers or private practitioners exercising their rights of private practice, and other recoveries), and other revenues. In data reported for Queensland, 'patient revenue' includes revenue for items such as pharmacy and ambulance, which could be considered as 'recoveries'.

There is some inconsistency in the treatment of income from asset sales. Western Australia netted out asset sales in its capital expenditure accounts, South Australia netted out land sales in its capital expenditure accounts and reported sales from other surplus goods in the revenue figures. Both the Australian Capital Territory and the Northern Territory reported revenue from asset disposal as part of other revenue. Victoria and Queensland account for asset sales in their capital expenditure accounts. The income from asset disposal (apart from major assets such as land, buildings and some motor vehicles) is usually not very significant as capital assets are generally retained until they are either worn out or obsolete, making their residual value comparatively small. Sometimes there is even a net cost incurred in disposing of an asset.

Australian public hospitals received \$1.2 billion in revenue in 1999–00. This was 9% of total recurrent expenditure. Revenue as a proportion of total expenditure was variable across States and Territories. Public hospital revenue in Tasmania and the Australian Capital Territory represented 11% of expenditure, whereas public hospital revenues in Queensland and South Australia were less than 5% of expenditure.

Patient revenue, the largest revenue category, accounted for 59% of all revenue, and was 5% of total recurrent expenditure.

**Table 3.1: Summary of hospitals, Australia, 1995–96 to 1999–00**

	1995–96	1996–97(a)	1997–98	1998–99	1999–00	Change(b)
<b>Public acute and psychiatric hospitals</b>						
Hospitals(c)	756	727	764	755	748	
Available beds	59,720	56,836	55,735	53,885	52,947	-3.0%
Beds per 1,000 population	3.3	3.1	3.0	2.9	2.8	-4.1%
Non-admitted occasions of service(d)	34,543,875	32,030,998	32,605,248	34,251,233	33,683,679	-0.6%
Total salary expenditure (\$'000)	7,704,239	7,839,999	8,242,305	8,551,873	8,934,794	3.8%
Total non-salary expenditure (\$'000)	4,160,121	4,320,898	4,783,440	5,125,518	5,415,618	6.8%
Total recurrent expenditure (\$'000)	11,864,360	12,160,897	13,025,745	13,677,391	14,350,412	4.9%
Total revenue (\$'000)	1,116,942	1,009,502	1,068,763	1,175,653	1,223,461	2.3%
<b>Private hospitals</b>						
Hospitals	323	319	317	312	n.a.	
Available beds	22,757	22,966	23,091	23,746	n.a.	1.4%
Beds per 1,000 population	1.3	1.2	1.2	1.3	n.a.	0.2%
Total recurrent expenditure (\$'000)	2,823,781	3,087,710	3,231,530	3,613,591	n.a.	8.6%
Total revenue (\$'000)	3,083,859	3,374,271	3,517,030	3,797,681	n.a.	7.2%
<b>Public and private hospitals</b>						
Hospitals	1,079	1,046	1,081	1,067	n.a.	
Available beds	82,477	79,802	78,826	77,631	n.a.	-2.0%
Beds per 1,000 population	4.5	4.3	4.2	4.1	n.a.	-3.1%
Total recurrent expenditure (\$'000)	14,688,141	15,248,607	16,257,275	17,290,982	n.a.	5.6%
Total revenue (\$'000)	4,200,801	4,383,773	4,585,793	4,973,334	n.a.	5.8%
<b>Private free-standing day hospital facilities</b>						
Day hospital facilities	140	153	175	190	n.a.	
Total recurrent expenditure (\$'000)	80,238	95,410	122,311	137,480	n.a.	19.7%
Total revenue (\$'000)	99,305	119,215	145,278	161,400	n.a.	17.6%
<b>Public and private hospitals and facilities</b>						
Hospitals and facilities	1,219	1,199	1,256	1,257	n.a.	
Total recurrent expenditure (\$'000)	14,768,379	15,344,017	16,379,586	17,428,462	n.a.	5.7%
Total revenue (\$'000)	4,300,106	4,502,988	4,731,071	5,134,734	n.a.	6.1%

(a) From 1996–97 New South Wales excluded

population health and primary and community-

(b) Annual average percent changes. For section on 'Public acute and psychiatric hospitals'

(c) Apparent changes in the number of hospitals reported are, in many instances, caused more

(d) Excludes public psychiatric hospitals. Reporting arrangements have varied significantly across years.

n.a. not available.

Note: Private hospital data are provided from the Australian Bureau of Statistics Private Health Establishments Collection.

**Table 3.2: Number of hospitals(a) and available beds by hospital sector and type, States and Territories, 1999-00**

	NSW	Vic(b)	Qld	WA	SA	Tas	ACT	NT	Total
<b>Hospitals</b>									
Public acute hospitals	207	142	179	88	79	21	3	5	724
Public psychiatric hospitals(c)	9	1	8	2	1	3	0	0	24
<i>Total public hospitals</i>	<i>216</i>	<i>143</i>	<i>187</i>	<i>90</i>	<i>80</i>	<i>24</i>	<i>3</i>	<i>5</i>	<i>748</i>
<b>Available beds</b>									
Public acute hospitals	16,686	12,072	9,598	5,000	4,566	1,035	675	540	50,172
Public psychiatric hospitals(c)	1,068	90	722	299	479	117	..	..	2,775
<i>Total beds available in public hospitals</i>	<i>17,754</i>	<i>12,162</i>	<i>10,320</i>	<i>5,299</i>	<i>5,045</i>	<i>1,152</i>	<i>675</i>	<i>540</i>	<i>52,947</i>

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses.

(b) The count of public acute hospitals in Victoria is a count of the campuses which report separately to the Victorian Admitted Episodes Database, so is different to numbers reported in Table 2.4.

(c) Includes public psychiatric and alcohol and drug hospitals. Eg Queensland's 8 hospitals include 7 psychiatric and 1 alcohol and drug facility.

.. not applicable.

Note: Private hospital data are provided from the Australian Bureau of Statistics Private Health Establishments Collection.

**Table 3.3: Number of public acute and psychiatric hospitals<sup>(a)</sup> and available beds by hospital size, States and Territories, 1999–00**

<b>Hospital size<sup>(b)</sup></b>	<b>NSW</b>	<b>Vic<sup>(c)</sup></b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
<b>Hospitals</b>									
Less than 11	15	34	70	18	8	13	1	0	159
11–50	122	49	79	50	55	7	0	2	364
51–100	31	23	11	8	7	1	0	1	82
101–200	27	16	11	5	4	1	1	1	66
201–500	15	18	13	7	5	2	0	1	61
501+	6	3	3	2	1	0	1	0	16
<b>Total</b>	<b>216</b>	<b>143</b>	<b>187</b>	<b>90</b>	<b>80</b>	<b>24</b>	<b>3</b>	<b>5</b>	<b>748</b>
<b>Available beds</b>									
Less than 11	104	240	226	117	54	70	10	..	820
11–50	3,131	1,225	1,948	1,088	1,542	153	..	50	8,965
51–100	2,335	1,697	834	515	468	70	..	60	6,150
101–200	3,801	2,220	1,497	576	600	131	162	162	9,149
201–500	4,736	5,133	3,654	1,841	1,757	728	..	268	18,118
501+	3,648	1,647	2,161	1,162	624	..	503	..	9,744
<b>Total</b>	<b>17,754</b>	<b>12,162</b>	<b>10,320</b>	<b>5,299</b>	<b>5,045</b>	<b>1,152</b>	<b>675</b>	<b>540</b>	<b>52,947</b>

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses.

(b) Size is based on the number of available beds.

(c) The count of hospitals in Victoria is a count of the campuses which report data separately to the Victorian Admitted Episodes Database.

.. not applicable.

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Region	NSW	Vic <sup>(b)</sup>	Qld	WA	SA	Tas	ACT	NT	Total
<b>Hospitals</b>									
Capital cities	50	47	28	16	15	6	3	1	166
Other metropolitan centres	19	2	5	..	..	..	..	..	26
<i>Total metropolitan</i>	69	49	33	16	15	6	3	1	192
Large rural centres	11	6	8	..	1	2	..	..	28
Small rural centres	23	9	6	3	5	1	..	..	47
Other rural areas	97	77	53	33	46	13	0	0	319
<i>Total rural</i>	131	92	67	36	52	16	0	0	394
Remote centres	..	..	16	9	..	..	..	2	27
Other remote areas	16	2	71	29	13	2	..	2	135
<i>Total remote</i>	16	2	87	38	13	2	..	4	162
<b>Total all regions</b>	<b>216</b>	<b>143</b>	<b>187</b>	<b>90</b>	<b>80</b>	<b>24</b>	<b>3</b>	<b>5</b>	<b>748</b>
<b>Available beds per 1,000 population</b>									
Capital cities	2.6	2.4	2.9	2.6	2.8	3.0	2.2	3.5	2.6
Other metropolitan centres	2.8	2.9	2.2	..	..	..	..	..	2.6
<i>Total metropolitan</i>	2.6	2.4	2.8	2.6	2.8	3.0	2.2	3.5	2.6
Large rural centres	4.2	4.3	3.8	..	3.0	3.2	..	..	4.0
Small rural centres	3.0	3.8	2.4	2.4	4.6	2.3	..	..	3.1
Other rural areas	3.5	2.6	2.6	4.4	4.9	1.1	..	..	3.2
<i>Total rural</i>	3.5	3.2	3.0	3.5	4.7	2.0	..	..	3.3
Remote centres	..	..	4.1	4.2	..	..	..	6.3	4.5
Other remote areas	5.6	1.9	7.1	5.2	8.0	3.2	..	1.0	5.2
<i>Total remote</i>	5.6	1.9	5.7	4.6	8.0	3.2	..	3.1	4.9
<b>Total all regions</b>	<b>2.8</b>	<b>2.6</b>	<b>3.0</b>	<b>2.9</b>	<b>3.4</b>	<b>2.4</b>	<b>2.2</b>	<b>3.0</b>	<b>2.9</b>

(a) The number of hospitals reported can be affected by administrative and/or reporting arrangements and is not necessarily a measure of the number of physical hospital buildings or campuses.

(b) The count of hospitals in Victoria is a count of the campuses which report data separately to the Victorian Admitted Episodes Database.

.. not applicable.

**Table 3.5: Number of public acute hospitals<sup>(a)</sup> with specialised services, States and Territories, 1999–00**

<b>Specialised services</b>	<b>NSW</b>	<b>Vic<sup>(b)</sup></b>	<b>Qld</b>	<b>WA</b>	<b>SA<sup>(b)</sup></b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Acute renal dialysis unit	14	12	5	5	4	2	1	2	<b>45</b>
Acute spinal cord injury unit	2	1	1	1	1				<b>6</b>
AIDS unit	8	4	4	2	1		1	1	<b>21</b>
Alcohol and drug unit	35	15	9	3	4			1	<b>67</b>
Burns unit (level III)	4	2	3	2	2	1			<b>14</b>
Cardiac surgery unit	10	8	3	4	3	1	1		<b>30</b>
Clinical genetics unit	9	5	2	3	2		1		<b>22</b>
Coronary care unit	49	27	16	6	10	3	2	2	<b>115</b>
Diabetes unit	22	14	8	8	6	3	1	1	<b>63</b>
Domiciliary care service	122	89	15	40	39	1		3	<b>309</b>
Geriatric assessment unit	47	32	12	17	11	1	1		<b>121</b>
Hospice care unit	29	26	10	23	20				<b>108</b>
Infectious diseases unit	9	11	7	4	4		1	2	<b>38</b>
Intensive care unit (level III)	40	19	4	6	5	3	1	2	<b>80</b>
In-vitro fertilisation unit	3	4			2				<b>9</b>
Maintenance renal dialysis centre	37	50	15	10	7	2	1	3	<b>125</b>
Major plastic/reconstructive surgery unit	10	10	4	4	3	1	1		<b>33</b>
Neonatal intensive care unit (level III)	13	4	3	2	2	1	1	1	<b>27</b>
Neurosurgical unit	12	9	6	4	4	1	1		<b>37</b>
Nursing home care unit	66	78	10	40	42	9			<b>245</b>
Obstetric/maternity service	90	67	61	40	32	5	3	5	<b>303</b>
Oncology unit	33	28	15	8	5	3	1		<b>93</b>
Psychiatric unit/ward	38	33	17	10	8	2	2	2	<b>112</b>
Refractory epilepsy unit	5	5		1	1	1			<b>13</b>
Rehabilitation unit	47	31	16	13	19	3	1	2	<b>132</b>
Sleep centre	10	7	4	2	4				<b>27</b>
Specialist paediatric service	49	24	29	15	9	3	2	3	<b>134</b>
Transplantation unit—bone marrow	9	6	2	3	2	1	1		<b>24</b>
Transplantation unit—heart (including heart/lung)	1	2	1	1					<b>5</b>
Transplantation unit—liver	2	2	2	1	1				<b>8</b>
Transplantation unit—pancreas	1	1							<b>2</b>
Transplantation unit—renal	9	6	1	2	2				<b>20</b>

(a) Excludes psychiatric and drug and alcohol hospitals.

(b) underestimate  
as some small

Note: For some jurisdictions these data were not available for all hospitals so the number of services is therefore under-enumerated.



**Table 3.6: Average full time equivalent staff,<sup>(a)</sup> public acute and psychiatric hospitals, States and Territories, 1999-00**

Staffing category	NSW <sup>(b)</sup>	Vic <sup>(c)</sup>	Qld	WA <sup>(d)</sup>	SA <sup>(e)</sup>	Tas <sup>(f)</sup>	ACT	NT	Total
<b>Full time equivalent staff numbers</b>									
Salaried medical officers	5,777	3,858	3,058	1,580	1,574	346	271	224	16,688
Registered nurses	n.a.	15,221	11,823	6,796	5,850	n.a.	1,122	824	..
Enrolled nurses	n.a.	2,439	2,229	729	1,485	n.a.	177	156	..
Student nurses	n.a.	..	..	n.a.	..	n.a.	..	0	..
Trainee/pupil nurses	n.a.	..	..	n.a.	..	n.a.	..	0	..
<i>Total nurses</i>	<i>28,288</i>	<i>17,660</i>	<i>14,052</i>	<i>7,525</i>	<i>7,335</i>	<i>1,867</i>	<i>1,299</i>	<i>980</i>	<i>79,006</i>
Other personal care staff	n.a.	523	527	650	n.a.	n.a.	122	95	..
Diagnostic & allied health professionals	7,790	6,755	2,898	2,213	1,918	n.a.	333	153	..
Administrative & clerical staff	8,442	6,672	4,262	2,949	2,640	n.a.	448	308	..
Domestic & other staff	11,112	5,058	6,146	2,753	2,142	n.a.	197	507	..
<b>Total staff</b>	<b>61,409</b>	<b>40,526</b>	<b>30,943</b>	<b>17,670</b>	<b>15,609</b>	<b>4,197</b>	<b>2,670</b>	<b>2,267</b>	<b>175,291</b>

(a) Where average full time equivalent (FTE) staff numbers were not available, staff numbers at 30 June 2000 were used.

(b) New South Wales *Other personal care staff* are included in *Diagnostic & health professionals* and *Domestic & other staff*.

(c) For Victoria FTEs may be slightly understated.

(d) *Other personal care staff* for Western Australia excludes staff on retention who do not work regular hours. Many hospitals were unable to provide a split between nurse categories and these have been coded as ..

(e) South Australian *Other personal care staff* are included in *Diagnostic & health professionals* and *Domestic & other staff*.

(f) Except for medical officers, data is not available to reliably split staff FTE by staff category.

n.a. not available.

.. not applicable.

**Table 3.7: Recurrent expenditure (\$'000), public acute and psychiatric hospitals, States and Territories, 1999-00**

Recurrent expenditure category	NSW(a)	Vic	Qld(b)	WA	SA(c)	Tas(d)	ACT	NT(e)	Total
Salaried medical officers	551,982	422,500	273,947	162,881	125,495	33,135	28,783	24,584	1,623,307
Registered nurses	n.a.	878,689	600,694	352,812	282,351	n.a.	56,590	44,976	n.a.
Enrolled nurses	n.a.	114,405	85,542	19,493	56,001	n.a.	6,406	6,155	n.a.
Student nurses	n.a.	..	..	n.a.	..	n.a.	..	0	n.a.
Trainee/pupil nurses	n.a.	..	..	n.a.	..	n.a.	..	0	n.a.
<b>Total nurses</b>	<b>1,437,060</b>	<b>993,094</b>	<b>686,236</b>	<b>372,305</b>	<b>338,352</b>	<b>71,379</b>	<b>62,996</b>	<b>51,131</b>	<b>4,012,553</b>
Other personal care staff	n.a.	16,214	19,099	21,257	n.a.	n.a.	4,329	3,854	n.a.
Diagnostic & health professionals	390,542	329,422	147,825	105,523	91,576	n.a.	15,802	10,235	n.a.
Administrative & clerical staff	393,552	292,891	162,615	113,715	96,712	n.a.	19,294	15,070	n.a.
Domestic & other staff	366,697	192,028	203,857	91,759	66,553	n.a.	6,125	19,911	n.a.
Not allocable to a salary expenditure category	..	9,036	..	..	..	93,441	..	..	102,477
<b>Total salary &amp; wages expenditure</b>	<b>3,139,833</b>	<b>2,255,185</b>	<b>1,493,579</b>	<b>867,440</b>	<b>718,688</b>	<b>197,955</b>	<b>137,329</b>	<b>124,785</b>	<b>8,934,794</b>
Payments to visiting medical officers	288,342	87,548	54,547	61,220	66,299	6,563	19,213	2,218	585,950
Superannuation payments	244,010	155,129	135,119	74,361	61,233	16,965	16,429	2,606	705,852
Drug supplies	257,068	172,449	119,292	74,928	58,012	14,858	12,671	9,955	719,233
Medical & surgical supplies	359,024	290,446	224,622	91,894	70,361	30,622	24,086	10,365	1,101,420
Food supplies	68,053	42,528	23,992	11,794	9,595	4,386	3,065	1,960	165,373
Domestic services	115,620	99,185	77,599	77,617	34,077	4,565	10,385	11,058	430,106
Repairs & maintenance	119,992	76,662	43,806	43,787	45,480	8,851	4,953	5,080	348,611
Patient transport	33,063	15,267	15,185	13,154	8,611	2,702	879	4,765	93,626
Administrative expenses	310,707	215,685	137,817	86,912	75,747	45,300	14,830	10,723	897,721
Interest payments	1,235	332	0	22,441	1,657	0	105	n.a.	25,770
Depreciation	248,547	n.a.	163,749	59,961	206	0	11,290	n.a.	n.a.
Other recurrent expenditure	133,831	93,302	22,412	16,425	47,113	1,375	14,679	9,326	338,463
Not allocable to non-salary expenditure category	..	3,493	..	..	..	..	..	..	3,493
<b>Total non-salary expenditure</b>	<b>1,930,945</b>	<b>1,252,026</b>	<b>854,391</b>	<b>574,533</b>	<b>478,185</b>	<b>136,187</b>	<b>121,295</b>	<b>68,056</b>	<b>5,415,618</b>
<b>Total expenditure excluding depreciation</b>	<b>5,070,778</b>	<b>3,507,211</b>	<b>2,347,970</b>	<b>1,441,973</b>	<b>1,196,873</b>	<b>334,142</b>	<b>258,624</b>	<b>192,841</b>	<b>14,350,412</b>

(a) New South Wales hospital expenditure recorded against special purposes and trust funds and in population and primary care programs is excluded. Other personal care staff are not reported separately.

(b) Queensland Pathology services are purchased from a statewide pathology service rather than being provided by each hospital's employees.

(c) South Australian Interest payments are included in Administrative expenses. Most Trainee/pupil nurses are enrolled in tertiary institutions.

(d) Tasmanian hospitals pay payroll tax, with most being included in Administrative expenses and the remainder in Other recurrent expenditure. Except for medical officers, salaries for staff categories are not reported.

(e) Superannuation for 4 of the 5 NT hospitals is included here. Interest payments are not reported.

n.a. not available.

.. not applicable.

**Table 3.8: Revenue (\$'000), public acute and psychiatric hospitals, States and Territories, 1999-00**

<b>Revenue source</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld<sup>(a)</sup></b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Patient revenue	329,947	200,881	55,082	47,849	42,502	28,298	12,465	9,678	726,702
Recoveries	130,600	46,486	15,288	22,585	51	6,451	4,313	3,066	228,840
Other revenue	84,174	97,572	37,226	23,536	6,102	2,258	10,640	6,411	267,919
<b>Total revenue</b>	<b>544,721</b>	<b>344,939</b>	<b>107,596</b>	<b>93,970</b>	<b>48,655</b>	<b>37,007</b>	<b>27,418</b>	<b>19,155</b>	<b>1,223,461</b>

(a) *Patient revenue* includes revenue for items such as pharmacy and ambulance, which may be considered to be *Recoveries*.

# 4 Overview of activity in Australian hospitals

This chapter presents summary statistics for admitted patients in public and private hospitals, and for non-admitted patients in public hospitals. Information is included on the number of separations for patients and their aggregated and average lengths of stay, presented on the basis of the sector of the hospital (public or private) and the type of hospital within the sector. Later chapters present information on the basis of characteristics of the patients and their hospital stays (Chapters 5 to 10).

Tables 4.1 and 4.2 are derived from the National Hospital Morbidity Database and present summary separation, patient day, average length of stay and average cost weight information by hospital sector and type. Table 4.1 reports the available national statistics for the years 1995–96 to 1999–00 and Table 4.2 reports the statistics for 1999–00 by State and Territory. All types of episode of care are included, except as noted below for the average cost weight information. That is, separations for which the type of episode of care was *Acute care*, *Rehabilitation care*, *Palliative care*, *Non-acute care* and *Other care* are included, as are *Newborn* episodes of care, provided that they had at least one qualified patient day.

For 1999–00, the hospital sectors and types reported in this chapter are public acute hospitals, public psychiatric hospitals, private free-standing day hospital facilities and other private hospitals. Data are also presented for all public hospitals combined, all acute hospitals (that is, excluding public psychiatric hospitals), all private hospitals and all hospitals.

Data on non-admitted patient occasions of service in public hospitals, derived from the National Public Hospital Establishments Database, are summarised in Table 4.3. The occasions of service are categorised by service type and provide information on the range of emergency department, outpatient and other non-admitted services provided by public hospitals.

As detailed in Chapter 1, there is some variation in the scope of the National Hospital Morbidity Database among the States and Territories. There is also some variation in the way in which *Newborn* episodes of care were reported and in the inclusion of periods of hospital in the home care, as described in Appendix 3. These variations should be considered when comparing States and Territories, the public and private sectors and reporting years.

## Admitted patients by sector and hospital type

### Separations

There were 5,897,860 separations reported from public and private acute and psychiatric hospitals in 1999–00 (Table 4.2), an increase of 162,811 (2.8%) compared with 1998–99 (Table 4.1). Public hospital separations increased by 0.3% (12,507) compared with 1998–99 and there was an 8.0% (150,304) increase in the private sector.

The increase in the private sector is likely partly to reflect increased coverage of the National Hospital Morbidity Database for 1999–00. Compared with 1998–99, coverage increased for private hospitals other than free-standing day hospital facilities in Western Australia, Tasmania and the Australian Capital Territory, but decreased slightly for private free-standing day hospital facilities in Victoria. It is roughly estimated that an increase of about 23,100 separations may be attributable to this changed coverage (based simply on the decrease in the separation count for private free-standing day hospital facilities in Victoria, increases in separation counts for other private hospitals in Tasmania and the Australian Capital Territory, and increases for hospitals in Western Australia to the levels reported for 1998–99 from the Private Health Establishments Collection). In that case, the increase in private sector separations not attributable to the increased coverage would have been about 127,200, or 6.8%. This follows increases (not adjusted for coverage change) of 4.6% between 1997–98 and 1998–99, and of 6.4% between 1996–97 and 1997–98.

The number of separations reported for public psychiatric hospitals (17,950) decreased by 2,326 when compared with 1998–99, a decrease of 11.5%.

The private sector accounted for 34.3% of the 5.89 million separations (2,025,662), compared with 32.7% (1,875,358) in 1998–99. Private free-standing day hospital facilities accounted for 280,136 or 13.8% of private sector separations, compared with 261,139 or 13.9% in 1998–99.

There was some variation in the number of separations reported for each month of the year, for both the public and private sectors (Figures 4.1 and 4.2). The least number of separations were reported for January for both sectors, apparent for both same day and non-same day separations.

## **Same day separations**

1999–00 saw a continuation of the recent annual increases in the proportions of admitted patients being treated on a same day basis, that is, admitted and separated on the same date.

Same day separations have been distinguished from other separations in this report to illustrate the proportions of total separations which they represent, and also to demonstrate the effect on average lengths of stay when patients receiving this type of hospital care are classified as admitted. In most countries of the Organisation for Economic Cooperation and Development (OECD), same day patients are not admitted, and reported average lengths of stay are greater than those calculated for Australia (OECD 2000).

In Australia in 1999–00, 2,904,107 separations were on a same day basis, an increase of 5.7% compared with 1998–99 and 32.5% compared with 1995–96. These separations comprised 49.2% of all separations (compared with 47.9% (2,747,027) in 1998–99). There were increases in the proportions of same day patients in both public acute hospitals (from 44.7% to 45.8%) and private hospitals (from 54.8% to 56.2%).

There was some variation among the States and Territories in the proportion of separations that were same day separations. For public acute hospitals, New South Wales had a lower proportion than the national average (40.9%), whereas the Australian Capital Territory (51.9%) and the Northern Territory (51.3%) had markedly higher proportions. In the private sector, New South Wales (59.4%) and Queensland (57.8%) reported higher proportions than average. The Australian Capital Territory (42.3%) and Tasmania (45.9%) reported lower proportions, reflecting the incomplete coverage of private free-standing day hospital facilities for these two jurisdictions.

## Separation rates

The age-standardised separation rate per 1,000 population decreased by 1.1% between 1998–99 and 1999–00 for public acute hospitals and increased by 6.2% for private hospitals, not adjusted for changes in coverage (Table 4.1, Figure 4.3).

Among the States and Territories, the Northern Territory reported the highest age-standardised public acute hospital separation rate in 1999–00 (360.3 per 1,000 population; Table 4.2) and Tasmania reported the lowest (154.3 per 1,000 population). Private hospital separation rates ranged from 79.1 per 1,000 population in the Australian Capital Territory (for which separations from same day facilities were not included in the database) to 123.6 per 1,000 population in Queensland. For all hospitals combined, the Northern Territory reported the highest age-standardised separation rate (360.3 per 1,000 population), despite its private hospital not being included in the database.

These rates are likely to have been affected by whether or not separate episodes of care (see Glossary) within a hospital stay were counted as individual separations, the way in which hospital stays for patients aged 9 days or less on admission (*Newborn* episodes) were counted, and the reporting of hospital in the home care (see Appendix 3 for details). The private sector in the Australian Capital Territory and Tasmania had not implemented separate episodes of care in 1999–00 and this would have had the effect of reducing the number of separations and increasing the average length of stay for these hospitals in comparison with the others. In addition, there were changes in the coverage of private hospitals, as described above that would affect comparisons between reporting years.

The age-standardised separation rate for public psychiatric hospitals varied widely, from 0.1 per 1,000 population in Victoria, to 2.4 per 1,000 population in South Australia. This variation reflects differences in the extent to which public psychiatric services have been mainstreamed into public acute hospitals.

## Average cost weight of separations

In Table 4.2, average cost weights are presented for 1999–00 based on the 1998–99 combined cost weights for the Australian Refined Diagnosis Related Group (AR-DRG) version 4.0/4.1 into which each separation was assigned on the basis of demographic and clinical characteristics of the patient. Separations were only included where the type of episode of care was reported as *Acute*, or was not reported, or where the episode type was *Newborn* and the separation had at least one qualified day. Thus separations for rehabilitation, palliative care, non-acute care, other care and newborns with no qualified days were excluded.

The average cost weight information provides a guide to the relative complexity and resource use of admissions within hospitals, with a value of 1.00 representing the theoretical average for all separations. Cost weights for 1998–99 were used, as 1999–00 cost weights were not available at the time of publication of this report (see Appendix 8). Separate private and public sector cost weights were used, as they reflect the differing cost structures of the two sectors. Public sector cost weights were used for the rows *Public acute and private hospitals*, and *Total*.

In Tables 4.1 and 4.2, average cost weights for 1998–99 are based on the 1998–99 combined cost weights for AR-DRG versions 4.0 and 4.1. Average cost weights for 1997–98 and for 1996–97 are based on AN-DR version 3.1 and 1997–98 and 1996–97 cost weights, respectively. Average cost weights for 1995–96 are based on AN-DR version 3.0 and its corresponding cost weights. Comparisons of average cost weights between the

reporting years and between the sectors should therefore be made with caution. Further information about the AR-DRG classification and cost weights is included in Chapter 10 and Appendix 8.

Table 4.2 indicates that, within the public sector, most States and Territories had average cost weights close to the national average for public acute hospitals. The Northern Territory was the only exception, with an average cost weight of 0.77. This reflects the high proportion (33.2%) of separations in the Northern Territory that were for *Admit for renal dialysis* (AR-DRG L61Z), an AR-DRG with a relatively low cost weight.

The validity of comparisons of average cost weights is limited by differences in the extent to which each jurisdiction's psychiatric services are integrated into its public hospital system. For example, in Victoria, almost all public psychiatric hospitals are now mainstreamer and are therefore included in the public acute hospital data. Cost weights are of little use as a measure of resource requirements for these services because the relevant AR-DRGs are much less homogeneous than for other acute services.

The average cost weight for private free-standing day hospitals was markedly lower (0.56) than for other private hospitals (1.05), reflecting the lower complexity and same day nature of most admissions in these hospitals. The average cost weights for the other private hospitals ranged from 0.98 in Western Australia to 1.13 in the Australian Capital Territory.

## Patient days

Patient days represent the number of full or partial days stay for patients who separated from hospital during the reporting period, and represent the aggregated length of stay for all patients (see Glossary). They have previously been referred to as bed days. A total of 22,586,046 patient days were reported for 1999–00, 71.9% in the public sector and 28.1% in the private sector.

There was an increase in patient days reported for public acute hospitals (85,145, 0.6%) in 1999–00 compared with 1998–99, and there was also an increase reported for private hospitals (311,012, 5.1%). Patient days for public acute and private hospitals combined increased by 1.9% (396,157) and for all hospitals combined, they increased by 1.2% (267,005).

Public psychiatric hospital patient days decreased by 10.0% (129,152) nationally. Age-standardised rates for 1999–00 ranged from 6.2 patient days per 1,000 population in Victoria to 120.8 per 1,000 population in Queensland.

The number of age-standardised patient days per 1,000 population in 1999–00 fell by 0.3% for public acute and private hospitals combined compared with 1998–99. Public acute hospital patient days per 1,000 fell by 1.5%, with those for private hospitals increasing by 2.8%.

Of the States and Territories, the Northern Territory reported the highest number of patient days per 1,000 population for public acute hospitals in 1999–00 (1,291.9 per 1,000 population) and Tasmania reported the lowest (648.7 per 1,000 population). The highest age-standardised population rate for patient days in private hospitals was reported by Queensland (402.9 per 1,000 population). The highest rate for all hospitals combined was reported by the Northern Territory (1,291.9 per 1,000 population) and the lowest by Tasmania (1,009.3 per 1,000 population).

## Average length of stay

The average length of stay for public acute and private hospitals combined was 3.6 days, a slight reduction from 3.7 days in 1998–99, reflecting the increases in same day separations and a continuation of the trend suggested by the data over the last few years (Figure 4.4). For public acute hospitals, there was no change between 1998–99 and 1999–00 (3.9 days). For private hospitals, the average length of stay was 3.1 days in 1999–00, a reduction from 3.2 days in the previous year. The average length of stay for public psychiatric hospitals increased from 63.4 days in 1998–99 to 64.4 days in 1999–00.

Tasmania reported the greatest average length of stay for public acute hospitals (4.5 days) and the Northern Territory reported the shortest (3.4 days). For private hospitals other than free-standing day hospital facilities, Queensland reported the greatest average length of stay (3.9 days) and Western Australia reported the shortest (3.2 days).

With same day separations excluded (as is the practice in most OECD countries), average lengths of stay have not reduced markedly over the last few years (Table 4.1, Figure 4.4). The average length of stay in 1999–00 was longer than in 1998–99 for public acute hospitals (6.4 days compared with 6.3 days). For private hospitals, the average length of stay remained the same in 1998–99 and 1999–00 (5.9 days). These figures indicate that most of the reductions in average length of stay overall are a result of increasing proportions of same day separations, rather than reductions in length of stay for non-same day stays. The average lengths of stay are within the range of those reported for 1997 and 1998 average lengths of stay for acute care for other OECD countries (OECD 2000).

## Non-admitted patients in public hospitals

Information on non-admitted patient occasions of service delivered by Australian public acute and psychiatric hospitals is provided in Table 4.3.

About 34 million non-admitted patient occasions of service were delivered to individuals through Australian public acute hospitals in 1999–00. The largest groups of these were *Other medical/surgical/obstetric* encounters (34.2% of the total), followed by *Accident and emergency* services (15.5%) and *Pathology* (12.4%). *Allied health* and *Community health* were also frequently provided services, together accounting for 14.3% of non-admitted patient services. These categories include services such as: physiotherapy, speech therapy, dietary advice, baby clinics, aged care assessment teams and immunisation clinics.

In addition to the services provided to individuals, 473,449 group sessions were delivered through public acute hospitals. These services include group activities conducted in the same areas against which individual non-admitted patient services are recorded. A group service is defined as a service provided to two or more patients, but excludes services provided to two or more family members, which are treated as services provided to an individual. Because of the inconsistent reporting of group sessions against the sub-categories, the total number of sessions only is reported.

Users of these data should note that there is considerable variation among States and Territories and between reporting years, for the way in which non-admitted patient occasions of service data are collected. In particular, South Australian hospitals reported non-admitted patient services using a different set of categories that is not consistent with those used by other States and Territories. South Australia's casemix payment system determines the categories for reporting non-admitted patient services and these only partially align with the national categories. Categories for which there is no equivalent



category are reported as 'not applicable'. Over the last few years, New South Wales, South Australia, Western Australia, Queensland and Tasmania all had changes in reporting arrangements for non-admitted occasions of service. For example, in New South Wales the large increase from 117,025 mental health occasions of service in 1997-98 to 995,176 in 1998-99 is due to reclassification of a class of occasions of service previously reported under community health.

Differing admission practices between the States and Territories will also lead to variation among jurisdictions in the services reported in Table 4.3. States and Territories may also differ in the extent to which these types of services are provided in non-hospital settings (such as community health centres), which is beyond the scope of this data collection.

Data on the number of non-admitted patient occasions of service provided through public psychiatric hospitals are also requested, although data collection in this area is poor. A total of 83,825 services were provided in Queensland, the only State or Territory for which these data were supplied (Table 4.3). These services include emergency and outpatient care and outreach/community care provided to individuals or groups. Information collected for these hospitals is not disaggregated further, due to the restricted range of services usually provided through psychiatric hospitals.

**Table 4.1: Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, by hospital type, Australia, 1995–96 to 1999–00<sup>(a)</sup>**

	1995–96	1996–97	1997–98	1998–99	1999–00
<b>Separations ('000)</b>					
Public hospitals <sup>(b)</sup>	3,593	3,642	3,770	3,860	3,872
Public acute hospitals	3,568	3,622	3,748	3,839	3,854
Public psychiatric hospitals <sup>(c)(g)</sup>	25	20	23	20	18
Private hospitals	1,577	1,685	1,793	1,875	2,026
Private free-standing day hospital facilities	n.a.	221	248	261	280
Other private hospitals	n.a.	1,464	1,545	1,614	1,746
Public acute & private hospitals <sup>(d)</sup>	5,146	5,307	5,541	5,715	5,880
<b>Total</b>	<b>5,171</b>	<b>5,327</b>	<b>5,563</b>	<b>5,735</b>	<b>5,898</b>
<b>Same day separations ('000)</b>					
Public hospitals <sup>(b)</sup>	1,420	1,521	1,625	1,719	1,767
Public acute hospitals	1,419	1,520	1,622	1,716	1,764
Public psychiatric hospitals <sup>(c)(g)</sup>	1	1	2	2	2
Private hospitals	772	859	953	1,028	1,137
Private free-standing day hospital facilities	n.a.	220	248	260	278
Other private hospitals	n.a.	640	705	769	860
Public acute & private hospitals <sup>(d)</sup>	2,191	2,379	2,575	2,745	2,902
<b>Total</b>	<b>2,192</b>	<b>2,380</b>	<b>2,578</b>	<b>2,747</b>	<b>2,904</b>
<b>Same day separations as a % of total</b>					
Public hospitals <sup>(b)</sup>	39.5	41.8	43.1	44.5	45.6
Public acute hospitals	39.8	42.0	43.3	44.7	45.8
Public psychiatric hospitals <sup>(c)(g)</sup>	5.5	3.9	10.6	11.3	13.3
Private hospitals	48.9	51.0	53.1	54.8	56.2
Private free-standing day hospital facilities	n.a.	99.2	100.0	99.4	99.2
Other private hospitals	n.a.	43.7	45.6	47.6	49.3
Public acute & private hospitals <sup>(d)</sup>	42.6	44.8	46.5	48.0	49.3
<b>Total</b>	<b>42.4</b>	<b>44.7</b>	<b>46.3</b>	<b>47.9</b>	<b>49.2</b>
<b>Separations per 1,000 population<sup>(e)</sup></b>					
Public hospitals <sup>(b)</sup>	196.3	195.8	199.9	199.7	197.4
Public acute hospitals	193.2	193.1	197.0	198.7	196.5
Public psychiatric hospitals <sup>(c)(g)</sup>	1.7	1.1	1.2	1.1	1.0
Private hospitals	85.1	89.2	93.2	95.5	101.4
Private free-standing day hospital facilities	n.a.	11.8	12.9	13.3	14.1
Other private hospitals	n.a.	77.5	80.2	82.2	87.3
Public acute & private hospitals <sup>(d)</sup>	277.7	281.6	289.4	293.5	297.1
<b>Total</b>	<b>279.1</b>	<b>282.7</b>	<b>290.6</b>	<b>294.5</b>	<b>298.0</b>
<b>Average cost weight of separations<sup>(f)</sup></b>					
Public hospitals <sup>(b)</sup>	1.02	1.02	1.00	1.00	0.99
Public acute hospitals	1.02	1.02	1.00	0.99	0.99
Public psychiatric hospitals <sup>(c)(g)</sup>	1.19	1.19	1.58	1.79	1.64
Private hospitals	0.92	0.94	0.96	0.90	0.98
Private free-standing day hospital facilities	n.a.	0.54	0.56	0.52	0.56
Other private hospitals	n.a.	1.01	1.02	0.97	1.05
Public acute & private hospitals <sup>(d)</sup>	0.99	0.99	0.98	0.96	0.99
<b>Total</b>	<b>0.99</b>	<b>0.99</b>	<b>0.99</b>	<b>0.97</b>	<b>0.99</b>

(continued)

**Table 4.1 (continued): Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, by hospital type, Australia, 1995–96 to 1999–00<sup>(a)</sup>**

	1995–96	1996–97	1997–98	1998–99	1999–00
<b>Patient days ('000)</b>					
Public hospitals <sup>(b)</sup>	16,555	16,532	16,560	16,274	16,230
Public acute hospitals	15,607	15,181	15,152	14,989	15,074
Public psychiatric hospitals <sup>(c)(g)</sup>	948	1,350	1,409	1,285	1,156
Private hospitals	5,893	5,834	5,995	6,045	6,356
Private free-standing day hospital facilities	n.a.	222	248	261	280
Other private hospitals	n.a.	5,613	5,747	5,784	6,076
Public acute & private hospitals <sup>(d)</sup>	21,499	21,015	21,146	21,034	21,430
<b>Total</b>	<b>22,448</b>	<b>22,366</b>	<b>22,555</b>	<b>22,319</b>	<b>22,586</b>
<b>Patient days per 1,000 population<sup>(e)</sup></b>					
Public hospitals <sup>(b)</sup>	878.3	861.7	848.8	817.8	799.6
Public acute hospitals	827.1	789.4	774.1	751.3	740.2
Public psychiatric hospitals <sup>(c)(g)</sup>	89.8	72.3	74.7	66.6	59.3
Private hospitals	311.6	302.0	303.8	299.4	307.7
Private free-standing day hospital facilities	0.0	11.7	12.8	13.2	14.1
Other private hospitals	311.6	288.3	289.0	284.2	293.7
Public acute & private hospitals <sup>(d)</sup>	1,136.7	1,089.4	1,075.9	1,048.7	1,046.0
<b>Total</b>	<b>1,187.9</b>	<b>1,161.7</b>	<b>1,150.6</b>	<b>1,115.3</b>	<b>1,105.3</b>
<b>Average length of stay (days)</b>					
Public hospitals <sup>(b)</sup>	4.6	4.5	4.4	4.2	4.2
Public acute hospitals	4.4	4.2	4.0	3.9	3.9
Public psychiatric hospitals <sup>(c)(g)</sup>	52.1	66.3	62.4	63.4	64.4
Private hospitals	3.7	3.5	3.3	3.2	3.1
Private free-standing day hospital facilities	n.a.	1.0	1.0	1.0	1.0
Other private hospitals	n.a.	3.8	3.7	3.6	3.5
Public acute & private hospitals <sup>(d)</sup>	4.2	4.0	3.8	3.7	3.6
<b>Total</b>	<b>4.3</b>	<b>4.2</b>	<b>4.1</b>	<b>3.9</b>	<b>3.8</b>
<b>Average length of stay, excluding same day separations (days)</b>					
Public hospitals <sup>(b)</sup>	7.0	7.1	7.0	6.8	6.9
Public acute hospitals	6.6	6.5	6.4	6.3	6.4
Public psychiatric hospitals <sup>(c)(g)</sup>	54.4	69.0	69.7	71.4	74.1
Private hospitals	6.4	6.0	6.0	5.9	5.9
Private free-standing day hospital facilities	n.a.	1.1	1.0	1.0	1.0
Other private hospitals	n.a.	6.0	6.0	5.9	5.9
Public acute & private hospitals <sup>(d)</sup>	6.5	6.4	6.3	6.2	6.2
<b>Total</b>	<b>6.8</b>	<b>6.8</b>	<b>6.7</b>	<b>6.6</b>	<b>6.6</b>

(a) For 1995–96 to 1999–00 data on separations and patient days for public patients, private patients and other categories of patients in the public and private sector are presented in Table 5.5.

(b) Includes the Department of Veterans' Affairs hospitals.

(c) Public psychiatric hospital data were not included in 1995–96 for Queensland. Victoria was not able to provide patient days data for all separations in 1995–96 and for 407 separations in 1996–97, as leave days could not be identified.

(d) Excludes public psychiatric hospitals.

(e) Figures are rates per 1,000 directly age-standardised to the Australian population at 30 June 1991. For public psychiatric hospitals and private hospitals, rates were derived using populations of the reporting States and Territories only, without adjustment for incomplete reporting.

(f) Separations for which the type of episode of care was reported as acute, or as newborn with qualified patient days, or was not reported. For further details see Chapter 10. Public national cost weights were used for the *Public acute & private hospitals* and *Total* rows. AR-DRG version 4.1 was used for 1999–00, AR-DRG version 4.0/4.1 for 1998–99, AN-DRG version 3.1 for 1996–97 and 1997–98, and version 3.0 for 1995–96.

(g) Caution should be used with average length of stay for public psychiatric hospitals. The figures include a small percentage of long stay patients who affect the average markedly. The median length of stay for Australia in 1999–00 was 7 days and the median length of stay excluding same day separations for Australia was 10 days.

n.a. not available.

**Table 4.2: Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, by hospital type, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Separations</b>									
Public hospitals	1,245,814	1,003,609	707,914	360,394	360,020	75,951	60,656	57,840	3,872,198
Public acute hospitals	1,236,593	1,003,089	706,511	357,702	356,428	75,429	60,656	57,840	3,854,248
Public psychiatric hospitals	9,221	520	1,403	2,692	3,592	522	..	..	17,950
Private hospitals <sup>(a)</sup>	604,276	519,838	452,410	215,095	159,794	51,495	22,754	n.a.	2,025,662
Private free-standing day hospital facilities	131,331	42,890	85,594	10,063	8,925	1,333	n.a.	..	280,136
Other private hospitals	472,945	476,948	366,816	205,032	150,869	50,162	22,754	n.a.	1,745,526
Public acute & private hospitals <sup>(b)</sup>	1,840,869	1,522,927	1,158,921	572,797	516,222	126,924	83,410	57,840	5,879,910
<b>Total</b>	<b>1,850,090</b>	<b>1,523,447</b>	<b>1,160,324</b>	<b>575,489</b>	<b>519,814</b>	<b>127,446</b>	<b>83,410</b>	<b>57,840</b>	<b>5,897,860</b>
<b>Same day separations</b>									
Public hospitals	507,579	500,495	326,432	167,637	168,988	34,393	31,467	29,659	1,766,650
Public acute hospitals	505,500	500,493	326,415	167,590	168,765	34,382	31,467	29,659	1,764,271
Public psychiatric hospitals	2,079	2	17	47	223	11	..	..	2,379
Private hospitals <sup>(a)</sup>	359,181	295,997	261,595	109,470	77,958	23,640	9,616	n.a.	1,137,457
Private free-standing day hospital facilities	128,989	42,890	85,588	10,063	8,925	1,319	n.a.	..	277,774
Other private hospitals	230,192	253,107	176,007	99,407	69,033	22,321	9,616	n.a.	859,683
Public acute & private hospitals <sup>(b)</sup>	864,681	796,490	588,010	277,060	246,723	58,022	41,083	29,659	2,901,728
<b>Total</b>	<b>866,760</b>	<b>796,492</b>	<b>588,027</b>	<b>277,107</b>	<b>246,946</b>	<b>58,033</b>	<b>41,083</b>	<b>29,659</b>	<b>2,904,107</b>
<b>Same day separations as a % of total</b>									
Public hospitals	40.7	49.9	46.1	46.5	46.9	45.3	51.9	51.3	45.6
Public acute hospitals	40.9	49.9	46.2	46.9	47.3	45.6	51.9	51.3	45.8
Public psychiatric hospitals	22.5	0.4	1.2	1.7	6.2	2.1	..	..	13.3
Private hospitals <sup>(a)</sup>	59.4	56.9	57.8	50.9	48.8	45.9	42.3	n.a.	56.2
Private free-standing day hospital facilities	98.2	100.0	100.0	100.0	100.0	98.9	n.a.	..	99.2
Other private hospitals	48.7	53.1	48.0	48.5	45.8	44.5	42.3	n.a.	49.3
Public acute & private hospitals <sup>(b)</sup>	47.0	52.3	50.7	48.4	47.8	45.7	49.3	51.3	49.3
<b>Total</b>	<b>46.8</b>	<b>52.3</b>	<b>50.7</b>	<b>48.2</b>	<b>47.5</b>	<b>45.5</b>	<b>49.3</b>	<b>51.3</b>	<b>49.2</b>
<b>Separations per 1,000 population<sup>(c)</sup></b>									
Public hospitals	185.5	203.1	198.9	193.9	226.8	155.5	211.1	360.3	197.4
Public acute hospitals	184.0	203.0	198.5	192.5	224.4	154.3	211.1	360.3	196.5
Public psychiatric hospitals	1.5	0.1	0.4	1.4	2.4	1.1	..	..	1.0
Private hospitals <sup>(a)</sup>	88.0	102.4	123.6	114.5	94.8	102.6	79.1	n.a.	101.4
Private free-standing day hospital facilities	19.3	8.5	23.4	5.5	5.1	2.4	n.a.	..	14.1
Other private hospitals	68.7	93.9	100.2	109.1	89.7	100.2	79.1	n.a.	87.3
Public acute & private hospitals <sup>(b)</sup>	272.0	305.3	322.1	307.0	319.2	257.0	290.2	360.3	297.1
<b>Total</b>	<b>273.5</b>	<b>305.5</b>	<b>322.5</b>	<b>308.5</b>	<b>321.6</b>	<b>258.1</b>	<b>290.2</b>	<b>360.3</b>	<b>298.0</b>

(continued)

**Table 4.2 (continued): Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, all hospitals, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Average cost weight of separations<sup>(d)</sup></b>									
Public hospitals	1.04	0.98	0.98	0.94	0.99	1.07	0.96	0.77	0.99
Public acute hospitals	1.03	0.98	0.98	0.93	0.98	1.07	0.96	0.77	0.99
Public psychiatric hospitals	1.34	2.14	2.08	1.89	2.05	1.86	..	..	1.64
Private hospitals <sup>(a)</sup>	0.95	0.98	0.97	0.96	1.04	1.06	1.13	n.a.	0.98
Private free-standing day hospital facilities	0.57	0.50	0.55	0.56	0.71	0.83	n.a.	..	0.56
Other private hospitals	1.07	1.03	1.07	0.98	1.06	1.07	1.13	n.a.	1.05
Public acute & private hospitals <sup>(b)</sup>	1.01	0.98	0.97	0.94	1.00	1.07	1.00	0.77	0.99
<b>Total</b>	<b>1.01</b>	<b>0.98</b>	<b>0.97</b>	<b>0.94</b>	<b>1.00</b>	<b>1.07</b>	<b>1.00</b>	<b>0.77</b>	<b>0.99</b>
<b>Patient days</b>									
Public hospitals	5,769,219	3,829,729	3,040,641	1,350,334	1,478,887	356,373	210,410	194,628	16,230,221
Public acute hospitals	5,305,903	3,799,504	2,615,368	1,266,965	1,340,127	341,066	210,410	194,628	15,073,971
Public psychiatric hospitals	463,316	30,225	425,273	83,369	138,760	15,307	..	..	1,156,250
Private hospitals <sup>(a)</sup>	1,745,079	1,645,396	1,510,441	665,353	532,846	174,708	82,002	n.a.	6,355,825
Private free-standing day hospital facilities	131,331	42,890	85,594	10,063	8,925	1,333	n.a.	..	280,136
Other private hospitals	1,613,748	1,602,506	1,424,847	655,290	523,921	173,375	82,002	n.a.	6,075,689
Public acute & private hospitals <sup>(b)</sup>	7,050,982	5,444,900	4,125,809	1,932,318	1,872,973	515,774	292,412	194,628	21,429,796
<b>Total</b>	<b>7,514,298</b>	<b>5,475,125</b>	<b>4,551,082</b>	<b>2,015,687</b>	<b>2,011,733</b>	<b>531,081</b>	<b>292,412</b>	<b>194,628</b>	<b>22,586,046</b>
<b>Patient days per 1,000 population<sup>(c)</sup></b>									
Public hospitals	823.7	743.0	836.8	721.4	865.8	677.9	760.0	1,291.9	799.6
Public acute hospitals	753.9	736.9	716.0	677.3	781.1	648.7	760.0	1,291.9	740.2
Public psychiatric hospitals	69.8	6.2	120.8	44.1	84.7	29.2	..	..	59.3
Private hospitals <sup>(a)</sup>	246.1	312.2	402.9	353.7	296.4	331.4	299.7	n.a.	307.7
Private free-standing day hospital facilities	19.3	8.5	23.4	5.5	5.1	2.4	n.a.	..	14.1
Other private hospitals	226.8	303.8	379.5	348.2	291.3	328.9	299.7	n.a.	293.7
Public acute & private hospitals <sup>(b)</sup>	1,000.0	1,049.1	1,118.9	1,030.9	1,077.5	980.1	1,059.7	1,291.9	1,046.0
<b>Total</b>	<b>1,069.8</b>	<b>1,055.3</b>	<b>1,239.7</b>	<b>1,075.1</b>	<b>1,162.2</b>	<b>1,009.3</b>	<b>1,059.7</b>	<b>1,291.9</b>	<b>1,105.3</b>
<b>Average length of stay (days)</b>									
Public hospitals	4.6	3.8	4.3	3.7	4.1	4.7	3.5	3.4	4.2
Public acute hospitals	4.3	3.8	3.7	3.5	3.8	4.5	3.5	3.4	3.9
Public psychiatric hospitals <sup>(e)</sup>	50.2	58.1	303.1	31.0	38.6	29.3	..	..	64.4
Private hospitals <sup>(a)</sup>	2.9	3.2	3.3	3.1	3.3	3.4	3.6	n.a.	3.1
Private free-standing day hospital facilities	1.0	1.0	1.0	1.0	1.0	1.0	n.a.	..	1.0
Other private hospitals	3.4	3.4	3.9	3.2	3.5	3.5	3.6	n.a.	3.5
Public acute & private hospitals <sup>(b)</sup>	3.8	3.6	3.6	3.4	3.6	4.1	3.5	3.4	3.6
<b>Total</b>	<b>4.1</b>	<b>3.6</b>	<b>3.9</b>	<b>3.5</b>	<b>3.9</b>	<b>4.2</b>	<b>3.5</b>	<b>3.4</b>	<b>3.8</b>

(continued)

**Table 4.2 (continued): Summary of separation, same day separation, average cost weight, patient day and average length of stay statistics, all hospitals, States and Territories, 1999-00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Average length of stay, excluding same day separations (days)</b>									
Public hospitals	7.1	6.6	7.1	6.1	6.9	7.7	6.1	5.9	6.9
Public acute hospitals	6.6	6.6	6.0	5.8	6.2	7.5	6.1	5.9	6.4
Public psychiatric hospitals <sup>(e)</sup>	64.6	58.3	306.8	31.5	41.1	29.9	..	..	74.1
Private hospitals <sup>(a)</sup>	5.7	6.0	6.5	5.3	5.6	5.4	5.5	n.a.	5.9
Private free-standing day hospital facilities	1.0	..	1.0	..	..	1.0	n.a.	..	1.0
Other private hospitals	5.7	6.0	6.5	5.3	5.6	5.4	5.5	n.a.	5.9
Public acute & private hospitals <sup>(b)</sup>	6.3	6.4	6.2	5.6	6.0	6.6	5.9	5.9	6.2
<b>Total</b>	<b>6.8</b>	<b>6.4</b>	<b>6.9</b>	<b>5.8</b>	<b>6.5</b>	<b>6.8</b>	<b>5.9</b>	<b>5.9</b>	<b>6.6</b>

(a) Includes private psychiatric hospitals. Coverage of private hospitals is incomplete for some States and Territories. See Chapter 1 for details.

(b) Excludes public psychiatric hospitals.

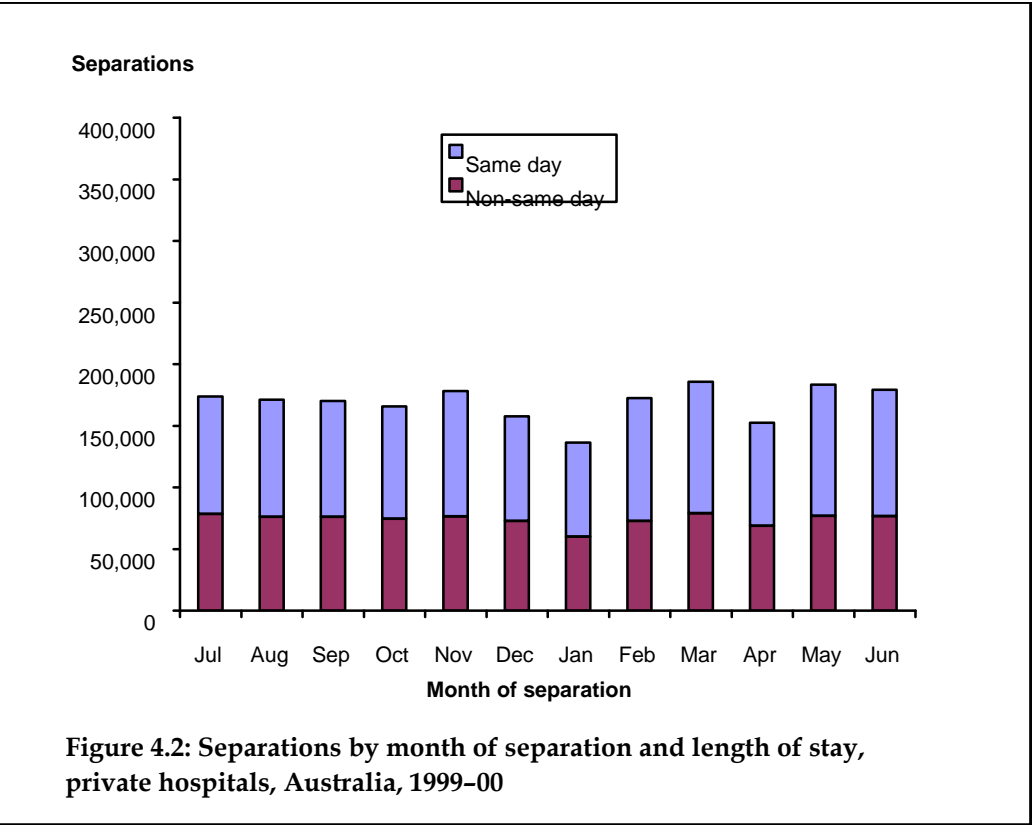
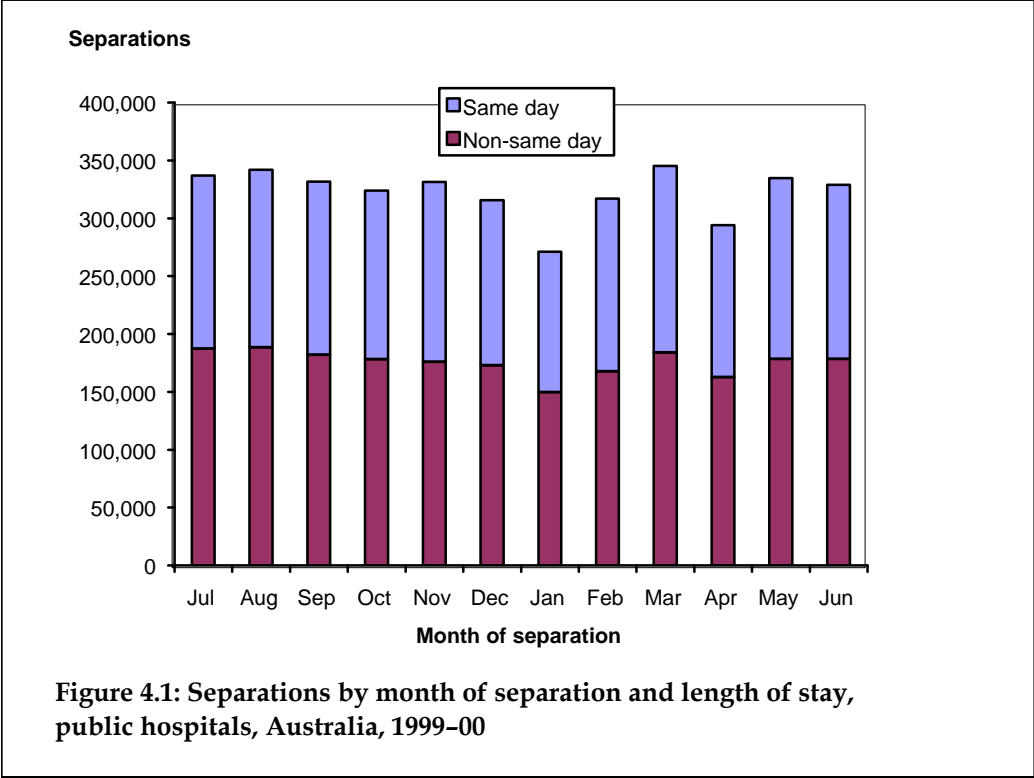
(c) Figures are directly age-standardised to the Australian population at 30 June 1991. In the *Total* column, the rates for private hospitals were derived using populations of the reporting States and Territories only, without adjustment for incomplete reporting.

(d) Separations for which the type of episode of care was reported as acute, or as newborn with qualified patient days, or was not reported. For further details, see Chapter 10. Public national cost weights were used for the *Public acute and private hospitals* and *Total* rows.

(e) Caution should be used with average length of stay for public psychiatric hospitals. The figures include a small percentage of long stay patients who affect the average markedly. The median length of stay for Australia was 7 days and the median length of stay excluding same day separations for Australia was 10 days.

.. not applicable.

n.a. not available.



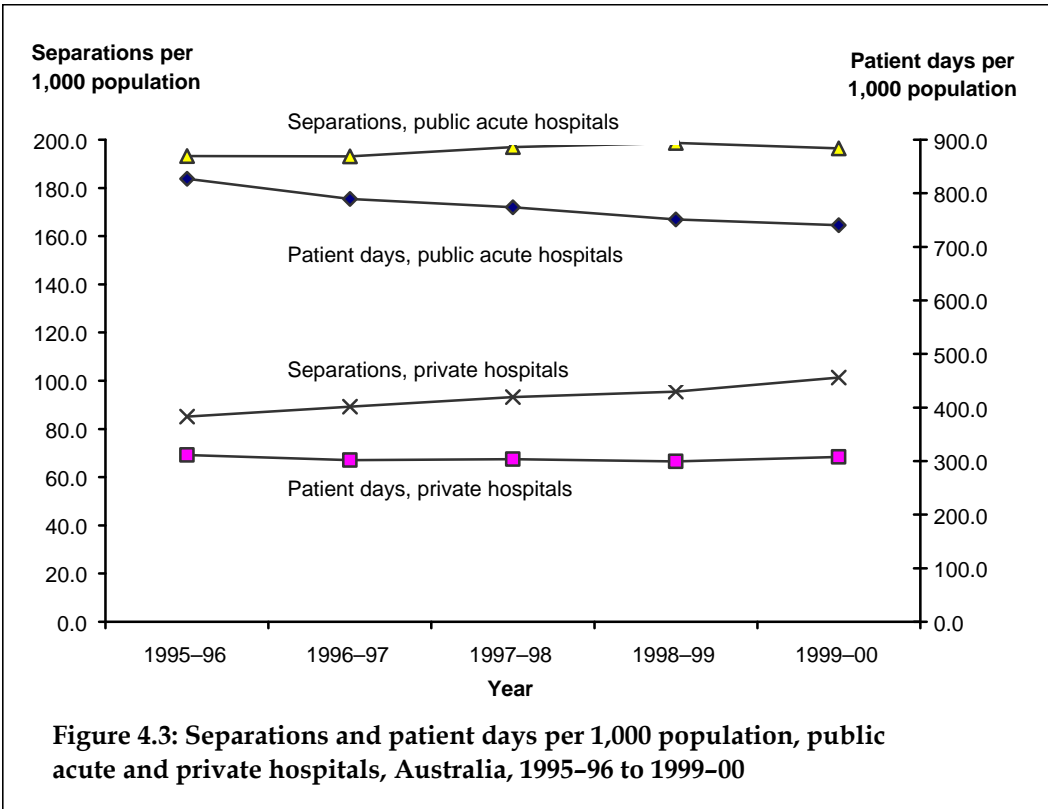


Figure 4.3: Separations and patient days per 1,000 population, public acute and private hospitals, Australia, 1995-96 to 1999-00

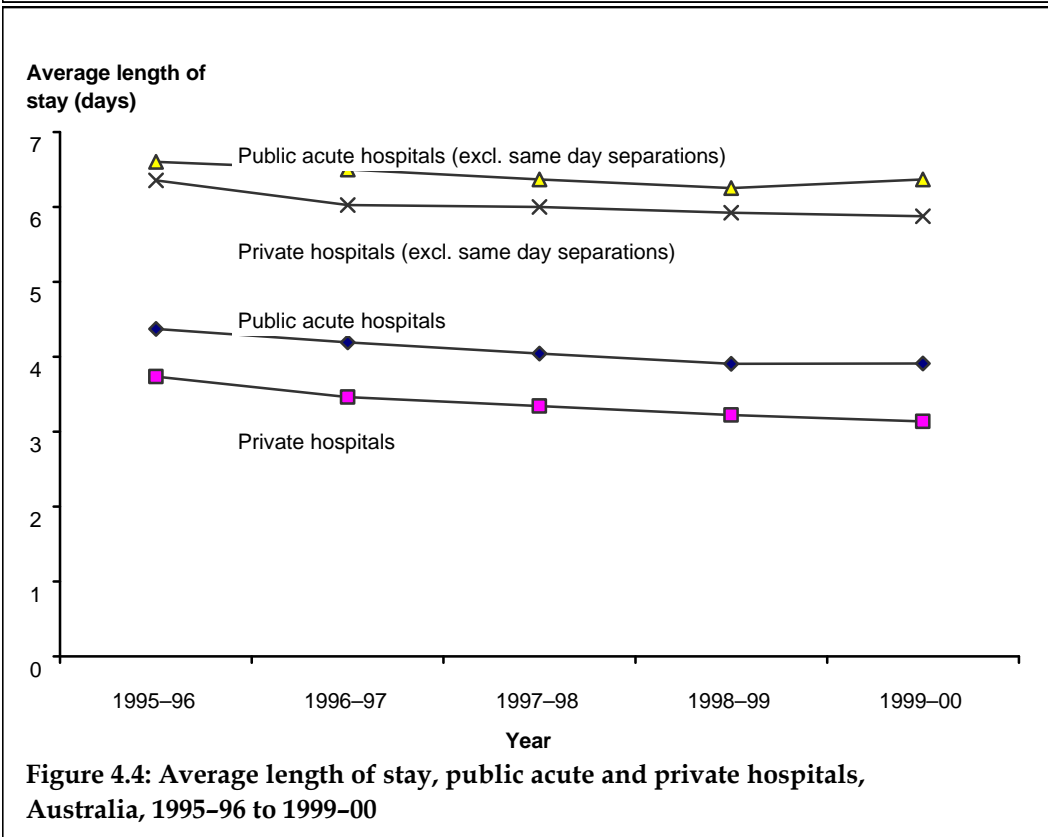


Figure 4.4: Average length of stay, public acute and private hospitals, Australia, 1995-96 to 1999-00



**Table 4.3: Non-admitted patient occasions of service, by type of non-admitted patient care, public acute and psychiatric hospitals, States and Territories**

Type of non-admitted patient care	NSW	Vic	Qld	WA <sup>(a)</sup>	SA	Tas	ACT	NT	Total <sup>(b)</sup>
<b>Public acute hospitals</b>									
Accident & emergency	1,608,664	1,117,961	1,146,519	611,305	463,044	91,732	84,825	96,240	5,220,290
Dialysis	..	..	2,274	..	..	..	..	..	2,274
Pathology	1,937,549	672,606	986,134	323,486	..	167,957	30,797	66,293	4,184,822
Radiology & organ imaging	806,403	480,103	808,475	320,821	227,634	78,533	53,305	69,410	2,844,684
Endoscopy & related procedures	..	..	1,342	..	..	..	..	..	1,342
Other medical/surgical/obstetric	6,099,612	1,360,740	2,134,110	517,044	964,997	197,408	164,956	77,497	11,516,364
Mental health	..	857,983	106,632	80,108	18,083	1,069	7,160	..	1,071,035
Alcohol & drug	..	44,211	48,396	..	..	..	..	..	92,607
Dental	..	187,102	416,346	8,799	8,208	1,393	..	..	621,848
Pharmacy	425,282	330,478	763,501	173,394	..	42,003	364	14,401	1,749,423
Allied health	..	999,630	620,430	651,791	264,882	85,105	8,832	13,193	2,643,863
Community health	887,670	503,095	181,869	600,939	..	..	..	..	2,173,573
District nursing	227,960	430,853	58,235	135,350	..	..	..	..	852,398
Other outreach	..	9,250	105,792	117,016	449,895	12,792	14,411	..	709,156
<b>Total services</b>	<b>11,993,140</b>	<b>6,994,012</b>	<b>7,380,055</b>	<b>3,540,053</b>	<b>2,396,743</b>	<b>677,992</b>	<b>364,650</b>	<b>337,034</b>	<b>33,683,679</b>
Group sessions	174,560	55,932	35,211	21,996	180,311	n.a.	5,439	..	473,449
<b>Public psychiatric hospitals</b>									
Emergency & outpatient individual sessions	n.a.	n.a.	12,137	n.a.	n.a.	n.a.	..	..	12,137
Emergency & outpatient group sessions	n.a.	n.a.	1,824	n.a.	n.a.	n.a.	..	..	1,824
Outreach/community individual sessions	n.a.	n.a.	68,895	n.a.	n.a.	n.a.	..	..	68,895
Outreach/community group sessions	n.a.	n.a.	969	n.a.	n.a.	n.a.	..	..	969
<b>Total services</b>	<b>n.a.</b>	<b>n.a.</b>	<b>83,825</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>..</b>	<b>..</b>	<b>83,825</b>

(a) The count of pathology occasions of service in Western Australia is considerably lower than last year due to a changed method of counting at a major hospital.

(b) For public psychiatric hospitals, includes only those States and Territories for which data are available.

Note: The reliability of non-admitted patient occasions of service data is not good, and in addition significant differences occur between States and Territories due to different counting methods, so the overall comparability

n.a. not available.

.. not applicable.

# 5 Administrative data for admitted patients

## Introduction

Data in this chapter are derived from the National Hospital Morbidity Database at the Institute, the compilation of patient-level data for all separations from public and private hospitals in Australia. For each separation in the database, a range of administrative and related data elements was reported including patient accommodation status, hospital insurance status, compensable status, State or Territory of usual residence, type of episode of care, mode of admission, mode of separation and inter-hospital contracted patient status. The tables in this chapter present separation, patient day, average cost weight and average length of stay statistics for these variables. All types of episode of care are included, except as noted below for the average cost weight information. That is, separations for which the type of episode of care was *Acute care*, *Rehabilitation care*, *Palliative care*, *Non-acute care* and *Other care* are included, as are *Newborn* episodes of care, provided that they had at least one qualified patient day. Tables 5.11 and 5.12 also include *Newborn* episodes that did not include qualified days.

Data providers supplied information on each patient's accommodation status, which incorporates a distinction between patients who are and are not eligible for treatment in accordance with the Australian Health Care Agreements. 'Eligible' patients are further categorised as *Eligible public patients*, *Eligible private patients*, *Eligible Department of Veterans' Affairs patients* or *Eligible other patients*. These data are as supplied by the States and Territories and, in the case of Department of Veterans' Affairs (DVA) patients, their eligibility to receive hospital treatment as a DVA patient may not necessarily have been confirmed by DVA. Additional definitional material regarding these categories can be found in the Glossary and in the *National Health Data Dictionary* Version 8 (NHDC 1999).

Data on insurance status indicate whether a patient has hospital insurance; that is, insurance providing benefits related to charges for hospital accommodation and services. Insurance status should not be confused with whether the patient is admitted as a public, private or other type of patient. Individuals can elect to be admitted in public hospitals as public or private patients irrespective of their insurance status. It is apparent that the data reported on insurance status are of poor quality. Consequently, they are not published here but are available to interested users.

Data on the compensable status of each patient were also supplied, a compensable patient being defined as any person who is entitled to the payment of, or who has been paid, compensation, damages or other benefits (including a payment in settlement of a claim for compensation, damages or other benefits) in respect of the injury, illness or disease for which he or she is receiving care and treatment.

Compensable status reflects the status of the patient at the time of separation. The *National Health Data Dictionary* specifies that the compensable status of the patient should be reported as *Compensable* or *Not compensable*; however, some data providers also used a *Not reported* category.

State or Territory of usual residence could be reported as one of the six States, the Australian Capital Territory, the Northern Territory, other Australian territories (including Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory) or other (including resident overseas, at sea, no fixed address). More detailed information on the area of usual residence of the patient is stored in the National Hospital Morbidity Database as the Statistical Local Area of residence and has been used to generate maps in this chapter (Figures 5.1 and 5.2).

Type of episode of care was also reported for most separations, but was not available for almost half of the private hospital separations in Tasmania. An episode of care is defined as a phase of treatment for an admitted patient. It may correspond to a patient's entire hospital stay, or the hospital stay may be divided into separate episodes of care of different types. In the latter case, a 'statistical separation' occurs between such episodes, and a new separation record is generated. Thus, separations in the database are actually for phases of treatment, not necessarily for entire hospital stays. Definitions of each type of care are contained in the *National Health Data Dictionary* Version 8 and summarised in the Glossary. They are:

- acute care
- rehabilitation care – delivered in a designated unit
- rehabilitation care – according to a designated program
- rehabilitation care – principal clinical intent
- palliative care – delivered in a designated unit
- palliative care – according to a designated program
- palliative care – principal clinical intent
- non-acute care
- newborn
- other care.

Not all States and Territories supplied information to this level of detail for rehabilitation and palliative care. For rehabilitation, a category of *Rehabilitation, not further specified* was used by some and is included in the tables in this chapter. As very few palliative care separations were reported using the detailed categories, only the category of *Palliative care, not further specified* has been used in Tables 5.11 and 5.12. The *Newborn* category was a new care type for 1998–99, used for all patients aged 9 days or less at admission. *Newborn* episodes of care comprise qualified days only, separations with a mixture of qualified and unqualified days and separations with unqualified days only. Three jurisdictions did not implement this *Newborn* definition in 1998–99 or 1999–00; therefore, for these States and Territories, there are no separations with a mixture of qualified and unqualified days reported (see the Glossary and Appendix 3 for more information).

To conform with changes to the *National Health Data Dictionary* definition of care type for 2000–01, all non-acute patients in Queensland hospitals were statistically discharged at about five minutes to midnight on 30 June 2000 and then readmitted one or two minutes later with a new 'care type' category. This would have had the effect of increasing the numbers of non-acute separations and the numbers of statistical discharges relative to other States and Territories.

Mode of admission was a new data element for 1999–00 and replaced source of referral to acute hospital or private psychiatric hospital, and was also collected for public psychiatric hospitals. It indicates the mechanism by which a person begins an episode of care (transferred from another hospital, statistical admission – episode type change, other planned and unplanned admissions), as shown in Table 5.13.

The mode of separation records the status of the patient (discharged, transferred, episode type change, died) at the time of separation and for some categories the place to which the person was discharged or transferred (Table 5.14).

Data on inter-hospital same day contracted patient status were provided by seven jurisdictions (Table 5.16). An inter-hospital same day contracted patient is defined in the *National Health Data Dictionary* as an admitted same day patient whose treatment and/or care is provided under a specific arrangement with another hospital at which the patient is an admitted patient. Separations can be reported as *Inter-hospital same day contracted patient* or *Other*. New South Wales, Queensland, South Australia and the Northern Territory provided information on contracted patients regardless of whether they were admitted on a same day basis. Victoria, South Australia and Tasmania also used a *Not reported* category.

## Public, private and other patients

Eligible public patients accounted for 87.5% of separations from public hospitals (3,388,440) compared with 7.7% for eligible private patients (296,962) (Table 5.1). Eligible Department of Veterans' Affairs patients made up the majority of the remainder. The two major categories were reversed in private hospitals, with eligible public patients making up 4.0% of separations (80,914) and eligible private patients 83.6% (1,693,727). Overall 58.9% of separations were for eligible public patients (3,469,354) and 33.8% (1,990,689) for eligible private patients. There was a more marked difference in the number of patient days (Table 5.4), with 62.4% (14,085,589) of patient days recorded for eligible public patients and 27.7% (6,250,841) for eligible private patients.

For both sectors combined there were 177.7 separations per 1,000 population (age-standardised) for eligible public patients compared with 99.7 for eligible private patients (Table 5.2). The latter figure is underestimated because separations were not available for the Northern Territory private hospital, nor for a number of private hospitals and/or private free-standing day hospital facilities in Victoria, the Australian Capital Territory, Tasmania and South Australia (see Chapter 1 for details). The Northern Territory recorded the highest eligible public patient separation rate (342.4 per 1,000), consistent with its high public hospital separation rate. The separation rates for eligible public patients in private hospitals in Western Australia (19.0 per 1,000) and Tasmania (22.2 per 1,000) was markedly higher than those recorded for other States and Territories.

Table 5.3 presents the average cost weight of separations in each State and Territory by hospital sector and accommodation status. The table has been restricted to separations with an episode of care type of *Acute* or *Newborn* (for separations with at least one qualified day) (see Appendix 3 for more information) or which the care type was not reported. In all States and Territories except South Australia, the average cost weights for eligible private patients in public hospitals were higher than those for eligible public patients. In South Australia, the average cost weights was the same. In almost every case in both public acute and private hospitals, Department of Veterans' Affairs patients had average cost weights markedly higher than these hospitals' main patient groups of eligible public and eligible private patients respectively. More detail about the AR-DRG classification and cost weights is included in Chapter 10 and, in reference to the effects of the integration of public psychiatric services into public hospital systems, in Chapter 4.

Since 1995–96 there has been a decline in the numbers of separations and patient days recorded by eligible private patients in public hospitals (Table 5.5). The proportion of public hospital patient days attributable to private patients fell from 11.6% to 7.8% over

this period. On the other hand, the proportion of patient days attributable to eligible public patients in private hospitals increased from 2.7% to 4.3% over the same time. Private hospitals also showed steady growth in eligible Department of Veterans' Affairs patients treated, increasing from 9.1% of patient days in 1995–96 to 13.6% in 1999–00.

During this period, the Department of Veterans' Affairs either integrated its repatriation hospitals into State public systems or sold them to private companies. Many veterans continue to access former repatriation hospitals, including the two privatised hospitals in Western Australia and Queensland. In addition, as each repatriation hospital was integrated or sold, the Repatriation Private Patient Scheme was introduced in that State. The Repatriation Private Patient Scheme allows veterans easier access to the private sector if public hospital services are not available. The rising numbers of people entitled to treatment at Department of Veterans' Affairs expense, in conjunction with easier access to the private system, have also contributed to more veterans being treated in the private sector.

## Compensable status

Overall, around 2% of patients (106,279) were compensable in 1999–00 (Table 5.6). In the public sector, 1.1% of patients (40,897) fell into this category, while in the private sector 3.2% of patients (65,382) were compensable.

## Area of usual residence

Data on the State or Territory of usual residence were provided for over 99% of separations. Table 5.7 indicates how many separations in each State and Territory was for patients who were interstate residents. Overall, 97.7% (5,759,506) of separations were for patients who resided in the State or Territory where they were treated (Table 5.9). However, in the Australian Capital Territory, of those separations for which this information was reported, only about 76% were for Australian Capital Territory residents (58,694), with the majority of the remainder resident in New South Wales. This is mainly because the Australian Capital Territory acts as a referral centre for the surrounding districts, which are part of New South Wales.

Age-standardised separation rates per 1,000 population for each State and Territory, by hospital sector and State or Territory of usual residence, are presented in Table 5.8. In the public sector, residents of the Northern Territory had the highest separation rate per 1,000 population, 335.2, and residents of Tasmania had the lowest, 154.1. In the private sector, residents of Queensland had the highest separation rate per 1,000 population, 118.6. Residents of the Australian Capital Territory had low separation rates per 1,000 population at 45.3; however, data were not provided for private free-standing day hospital facilities in the Australian Capital Territory. New South Wales residents had the next lowest private hospital separation rate per 1,000 population, 86.3. No data were provided for the private hospital sector for the Northern Territory.

The average cost weight of separations in each State and Territory by each hospital sector and State or Territory of usual residence is presented in Table 5.10. As for Table 5.3, this table has been restricted to separations with an episode of care type of *Acute* or *Newborn* (for separations with at least one qualified day) or for which the care type was not reported (for more detail see Chapter 10 and Chapter 4). Public hospitals generally had average cost weights that were higher for interstate patients than for patients from their own State. Separations for Northern Territory residents had higher average cost weights

for the public sector in all States than in the Northern Territory, consistent with a tendency for movement of Territory residents with more complex treatment requirements to hospitals in other States. New South Wales and Queensland residents had higher average cost weights for treatment provided by the private sector in most other States and Territories than in their own State.

Separation rates per 1,000 population varied by Statistical Division of the usual residence of the patient for both public and private hospitals (Figures 5.1 and 5.2). In the public sector, the highest rates were reported for residents of the Statistical Divisions of Kimberley in Western Australian and Darwin in the Northern Territory. In the private sector, the highest rates were reported for Moreton in Queensland and South-West in Western Australia. The data for these maps were derived from data provided on the area of usual residence of the patients, aggregated to Statistical Divisions as described in Appendix 3.

## Type of episode of care

Table 5.11 presents separations by type of episode of care. For public and private sectors together, 92.8% of separations were classified as episodes of *Acute care*, 4.1% as *Newborn* and 1.8% as *Rehabilitation care*. There was some variation among the States and Territories and between the public and private sectors. For example, the proportion of public hospital separations that was for *Rehabilitation care* ranged from 0.5% (324) in the Australian Capital Territory to 2.9% in Queensland (21,398). The type of episode of care was not reported for the majority of private hospital separations for Tasmania.

Not all jurisdictions implemented the *Newborn* definition so some jurisdictions did not have any *Newborn* separations with a mixture of qualified and unqualified days (see Appendix 3 for more information). *Newborn* separations with all unqualified days have only been included in Tables 5.11 and 5.12 in this report and, as such, will cause total separations in Table 5.11 to differ from those of other tables. They accounted for an additional 190,335 separations, the majority (157,992, 83.0%) being in the public sector. Victoria was unable to provide data for *Newborn* separations with unqualified days only for the private sector, which means that the total number of *Newborn* episodes is underestimated for this State.

The average length of stay for episodes of *Acute care* in private hospitals (2.9 days) was shorter than in public hospitals (3.4 days) (Table 5.12). The average length of stay for *Newborn* episodes with a mixture of qualified and unqualified days has been presented split into the average number of qualified days and the average number of unqualified days. In the public sector, the average length of stay overall for these 'mixed' separations was 3.0 qualified days and 2.5 unqualified days, compared with 10.5 days for qualified newborns and 3.0 days for unqualified newborns. The long average length of stay for *Non-acute* care in Victorian private hospitals reflects some extended lengths of stay in some Victorian rural bush nursing hospitals; 14 of these patients had lengths of stay over 365 days.

## Mode of admission

In both public and private hospitals (Table 5.13), most separations had a mode of admission of *Other* (95.7%, 5,642,569), the term used to refer to all planned and unplanned admissions, except transfers from other hospitals and statistical admissions. Public hospitals recorded higher proportions of both transfers from other hospitals (3.7%,

144,246) and statistical admissions (1.1%, 42,210) than were reported for private hospitals (2.6%, 52,060 and 0.3%, 5,499, respectively).

## Mode of separation

The majority of patients (5,446,032, over 92.3%) were included in the *Other* category, suggesting that most patients go home after separation from hospital. This was particularly the case in the private sector, where 95.9% of separations (1,942,520) were categorised as *Other*; in the public sector, this figure was 90.5% (3,503,512) (Table 5.14). The main difference between the sectors was that more patients were transferred to other hospitals in the public sector (4.8%) than in the private sector (2.0%). There were also greater proportions of separations in the public sector for statistical discharges, deaths and the *Left against medical advice/discharge at own risk* category.

Data on patients aged over 70 years may provide information that is useful to assess continuity of care. Table 5.15 presents information by type of episode of care and mode of separation for patients aged over 70 years. For most episode types, the mode of separation with the highest number of separations reported was *Other*, which includes discharge to usual residence/own accommodation/welfare institution. For separations where episode type was palliative care, the mode of separation with the most separations was *Died* (6,422, 54.9%). Of the patients whose mode of separation was *Discharge/transfer to an aged care facility*, 76.0% (32,298) had an episode type of acute care, 8.1% (3,459) had an episode type of rehabilitation, 1.0% (409) had an episode type of palliative care and 14.8% (6,267) had an episode type of non-acute care.

There is a discrepancy between the number of patients reporting a mode of separation of discharged/transferred to another hospital (225,688) and the number of patients who recorded a source of referral of transfer from another hospital (196,306) (Tables 5.13, 5.14). This may indicate that not all patients who are transferred from one hospital to another are having this recorded as their mode of admission.

## Inter-hospital contracted patient status

Table 5.16 presents information on separations by inter-hospital contracted patient status and hospital sector for each State and Territory. Data were not provided or were incomplete for some of the States and Territories, and data on inter-hospital contracted patients was provided for non-same day separations for New South Wales, Queensland, South Australia and the Northern Territory.

The number of inter-hospital same day contracted patients was higher for private hospitals (39,863) than for public hospitals (5,703). New South Wales reported the highest number of separations that were for inter-hospital contracted patients (28,187, 1.5%). New South Wales, Queensland, South Australia and the Northern Territory included 420, 12, 335 and 60 separations that were not same day in the public sector, respectively. For the private sector, New South Wales, Queensland and South Australia included 1,014, 60 and 19 separations, respectively, those were not same day.

As inter-hospital contracted patients are admitted patients of both the contracting and contracted hospital, these separations represent some double counting of hospital activity in the National Hospital Morbidity Database.

**Table 5.1: Separations by accommodation status and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Accommodation status</b>									
<b>Public hospitals</b>									
Eligible public patient	1,037,055	890,198	644,086	325,605	314,897	65,385	56,144	55,070	3,388,440
Eligible private patient	130,893	63,283	46,909	22,041	25,560	5,000	2,411	865	296,962
Eligible Department of Veterans' Affairs patient	54,862	33,627	10,610	7,333	15,367	4,134	1,235	252	127,420
Eligible other patient	14,270	13,377	4,064	3,926	3,429	1,266	616	191	41,139
Ineligible patient	8,733	3,124	2,245	1,033	767	107	249	1,296	17,554
Not reported	1	0	0	456	0	59	1	166	683
<i>Total</i>	<i>1,245,814</i>	<i>1,003,609</i>	<i>707,914</i>	<i>360,394</i>	<i>360,020</i>	<i>75,951</i>	<i>60,656</i>	<i>57,840</i>	<i>3,872,198</i>
<b>Private hospitals</b>									
Eligible public patient	22,021	5,713	4,329	35,036	3,098	10,679	38	n.a.	80,914
Eligible private patient	518,377	453,490	375,916	154,857	144,886	30,879	15,322	n.a.	1,693,727
Eligible Department of Veterans' Affairs patient	45,595	40,009	57,304	16,178	4,034	2,135	2,153	n.a.	167,408
Eligible other patient	15,458	20,193	12,798	8,698	7,519	2,540	1,351	n.a.	68,557
Ineligible patient	2,818	433	2,063	326	257	2	4	n.a.	5,903
Not reported	7	0	0	0	0	5,260	3,886	n.a.	9,153
<i>Total</i>	<i>604,276</i>	<i>519,838</i>	<i>452,410</i>	<i>215,095</i>	<i>159,794</i>	<i>51,495</i>	<i>22,754</i>	<i>n.a.</i>	<i>2,025,662</i>
<b>All hospitals</b>									
Eligible public patient	1,059,076	895,911	648,415	360,641	317,995	76,064	56,182	55,070	3,469,354
Eligible private patient	649,270	516,773	422,825	176,898	170,446	35,879	17,733	865	1,990,689
Eligible Department of Veterans' Affairs patient	100,457	73,636	67,914	23,511	19,401	6,269	3,388	252	294,828
Eligible other patient	29,728	33,570	16,862	12,624	10,948	3,806	1,967	191	109,696
Ineligible patient	11,551	3,557	4,308	1,359	1,024	109	253	1,296	23,457
Not reported	8	0	0	456	0	5,319	3,887	166	9,836
<b>Total separations</b>	<b>1,850,090</b>	<b>1,523,447</b>	<b>1,160,324</b>	<b>575,489</b>	<b>519,814</b>	<b>127,446</b>	<b>83,410</b>	<b>57,840</b>	<b>5,897,860</b>

n.a. not available.



**Table 5.2: Separation rates<sup>(a)</sup> per 1,000 population by accommodation status and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Accommodation status</b>	<b>Public hospitals</b>								
Eligible public patient	155.8	180.9	181.3	175.2	200.6	135.3	194.7	342.4	173.6
Eligible private patient	19.1	12.9	13.0	11.9	16.1	10.1	8.6	5.2	15.0
Eligible Department of Veterans' Affairs patient	6.9	5.8	2.8	3.9	7.3	6.8	5.0	4.1	5.7
Eligible other patient	2.2	2.8	1.2	2.1	2.3	2.8	1.9	0.9	2.2
Ineligible patient	1.4	0.7	0.6	0.6	0.5	0.3	0.8	6.7	0.9
Not reported	0.0	0.0	0.0	0.2	0.0	0.1	0.0	1.0	0.0
<i>Total</i>	<i>185.5</i>	<i>203.1</i>	<i>198.9</i>	<i>193.9</i>	<i>226.8</i>	<i>155.5</i>	<i>211.1</i>	<i>360.3</i>	<i>197.4</i>
	<b>Private hospitals</b>								
Eligible public patient	3.3	1.1	1.2	19.0	1.9	22.2	0.2	n.a.	4.1
Eligible private patient	76.1	90.1	103.4	82.3	86.0	60.7	52.4	n.a.	84.7
Eligible Department of Veterans' Affairs patient	5.8	6.9	14.8	8.6	1.9	3.5	8.8	n.a.	7.5
Eligible other patient	2.3	4.1	3.6	4.5	4.8	5.2	4.1	n.a.	3.5
Ineligible patient	0.5	0.1	0.6	0.2	0.2	0.0	0.0	n.a.	0.3
Not reported	0.0	0.0	0.0	0.0	0.0	11.0	13.5	n.a.	0.5
<i>Total</i>	<i>88.0</i>	<i>102.4</i>	<i>123.6</i>	<i>114.5</i>	<i>94.8</i>	<i>102.6</i>	<i>79.1</i>	<i>n.a.</i>	<i>101.4</i>
	<b>All hospitals</b>								
Eligible public patient	159.1	182.0	182.5	194.2	202.5	157.6	194.9	342.4	177.7
Eligible private patient	95.2	103.0	116.4	94.1	102.1	70.8	61.0	5.2	99.7
Eligible Department of Veterans' Affairs patient	12.7	12.8	17.6	12.6	9.2	10.4	13.9	4.1	13.2
Eligible other patient	4.6	6.9	4.7	6.6	7.1	8.1	6.1	0.9	5.7
Ineligible patient	1.8	0.8	1.2	0.7	0.7	0.3	0.9	6.7	1.3
Not reported	0.0	0.0	0.0	0.2	0.0	11.1	13.5	1.0	0.5
<b>Total separations</b>	<b>273.5</b>	<b>305.5</b>	<b>322.5</b>	<b>308.5</b>	<b>321.6</b>	<b>258.1</b>	<b>290.2</b>	<b>360.3</b>	<b>298.0</b>

(a) The rates were directly age-standardised to the Australian population at 30 June 1991. For details see Appendix 3.  
n.a. not available.

**Table 5.3: Average cost weight of separations<sup>(a)</sup> by accommodation status and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA <sup>(b)</sup>	SA	Tas	ACT	NT	Total
<b>Accommodation status</b>	<b>Public acute hospitals</b>								
Eligible public patient	1.01	0.96	0.97	0.91	0.97	1.03	0.93	0.75	0.97
Eligible private patient	1.11	1.04	0.98	1.10	0.97	1.27	1.20	0.85	1.07
Eligible Department of Veterans' Affairs patient	1.20	1.15	1.15	1.26	1.31	1.24	1.40	0.99	1.20
Eligible other patient	1.39	1.74	1.69	1.62	1.74	1.59	1.61	0.94	1.59
Ineligible patient	1.24	1.21	1.19	1.10	1.06	1.11	1.08	1.36	1.22
Not reported	..	..	..	2.06	..	1.38	3.26	0.54	1.67
<b>Total</b>	<b>1.04</b>	<b>0.98</b>	<b>0.98</b>	<b>0.94</b>	<b>0.99</b>	<b>1.07</b>	<b>0.96</b>	<b>0.77</b>	<b>0.99</b>
	<b>Private hospitals</b>								
Eligible public patient	1.09	0.39	0.78	0.86	1.72	1.00	1.91	n.a.	0.94
Eligible private patient	0.92	0.95	0.94	0.95	1.02	1.08	1.03	n.a.	0.95
Eligible Department of Veterans' Affairs patient	1.27	1.38	1.21	1.36	1.27	1.38	1.40	n.a.	1.29
Eligible other patient	0.97	1.04	0.91	0.90	0.99	0.91	1.05	n.a.	0.98
Ineligible patient	0.75	1.41	0.89	0.96	1.02	0.69	1.09	n.a.	0.87
Not reported	1.15	..	..	..	..	0.96	1.37	n.a.	1.14
<b>Total</b>	<b>0.95</b>	<b>0.98</b>	<b>0.97</b>	<b>0.96</b>	<b>1.04</b>	<b>1.06</b>	<b>1.13</b>	<b>n.a.</b>	<b>0.98</b>

(a) Separations for which the type of episode of care was reported as acute, or as newborn with qualified patient days, or was not reported. For further details see Chapter 10.

(b) Accommodation status data were not available for public psychiatric hospitals so separations for those hospitals were included in the *Not reported* category.

n.a. not available.

.. not applicable.

**Table 5.4: Patient days by accommodation status and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Accommodation status</b>	<b>Public hospitals</b>								
Eligible public patient	4,633,732	3,318,149	2,765,902	1,172,194	1,262,629	288,901	188,710	182,738	13,812,955
Eligible private patient	627,846	233,129	184,273	88,601	107,967	18,866	10,674	1,985	1,273,341
Eligible Department of Veterans' Affairs patient	362,048	203,637	63,058	38,504	86,720	20,699	7,251	1,373	783,290
Eligible other patient	71,894	63,753	19,195	21,886	18,720	7,029	3,015	549	206,041
Ineligible patient	73,627	11,061	8,213	3,638	2,851	303	736	7,668	108,097
Not reported	72	0	0	25,511	0	20,575	24	315	46,497
<i>Total</i>	<i>5,769,219</i>	<i>3,829,729</i>	<i>3,040,641</i>	<i>1,350,334</i>	<i>1,478,887</i>	<i>356,373</i>	<i>210,410</i>	<i>194,628</i>	<i>16,230,221</i>
	<b>Private hospitals</b>								
Eligible public patient	73,203	7,410	38,486	105,572	14,821	32,857	285	n.a.	272,634
Eligible private patient	1,410,734	1,336,405	1,144,072	442,590	486,018	110,144	47,537	n.a.	4,977,500
Eligible Department of Veterans' Affairs patient	219,265	204,424	303,299	99,358	15,884	13,252	10,804	n.a.	866,286
Eligible other patient	36,690	95,515	19,481	17,169	15,415	5,567	3,293	n.a.	193,130
Ineligible patient	5,142	1,642	5,103	664	708	4	6	n.a.	13,269
Not reported	45	0	0	0	0	12,884	20,077	n.a.	33,006
<i>Total</i>	<i>1,745,079</i>	<i>1,645,396</i>	<i>1,510,441</i>	<i>665,353</i>	<i>532,846</i>	<i>174,708</i>	<i>82,002</i>	<i>n.a.</i>	<i>6,355,825</i>
	<b>All hospitals</b>								
Eligible public patient	4,706,935	3,325,559	2,804,388	1,277,766	1,277,450	321,758	188,995	182,738	14,085,589
Eligible private patient	2,038,580	1,569,534	1,328,345	531,191	593,985	129,010	58,211	1,985	6,250,841
Eligible Department of Veterans' Affairs patient	581,313	408,061	366,357	137,862	102,604	33,951	18,055	1,373	1,649,576
Eligible other patient	108,584	159,268	38,676	39,055	34,135	12,596	6,308	549	399,171
Ineligible patient	78,769	12,703	13,316	4,302	3,559	307	742	7,668	121,366
Not reported	117	0	0	25,511	0	33,459	20,101	315	79,503
<b>Total patient days</b>	<b>7,514,298</b>	<b>5,475,125</b>	<b>4,551,082</b>	<b>2,015,687</b>	<b>2,011,733</b>	<b>531,081</b>	<b>292,412</b>	<b>194,628</b>	<b>22,586,046</b>

n.a. not available.

**Table 5.5: Separations and patient days by accommodation status, hospital sector and year, Australia, 1995–96 to 1999–00**

	1995–96		1996–97		1997–98		1998–99		1999–00	
	Separations	Patient days	Separations	Patient days	Separations	Patient days	Separations	Patient days	Separations	Patient days
<b>Accommodation status</b>	<b>Public hospitals</b>									
Eligible public patient	2,983,446	13,301,071	3,075,874	13,542,776	3,241,015	13,405,319	3,363,790	13,543,770	3,388,440	13,812,955
Eligible private patient	437,746	1,924,078	392,773	1,725,621	355,281	1,673,008	318,860	1,550,483	296,962	1,273,341
Eligible DVA patient	110,061	776,588	114,428	765,996	108,597	675,436	114,713	697,672	127,420	783,290
Eligible other patient	46,001	348,219	44,258	318,535	40,847	215,789	41,235	199,948	41,138	206,034
Ineligible patient	11,406	46,856	12,046	54,662	13,765	58,956	14,718	60,910	17,554	108,097
Not reported	4,675	158,367	2,588	124,137	10,593	531,921	6,375	221,445	683	46,497
<i>Total</i>	<i>3,593,335</i>	<i>16,555,179</i>	<i>3,641,967</i>	<i>16,531,727</i>	<i>3,770,098</i>	<i>16,560,429</i>	<i>3,859,691</i>	<i>16,274,228</i>	<i>3,872,197</i>	<i>16,230,214</i>
	<b>Private hospitals</b>									
Eligible public patient	36,814	156,375	39,603	169,578	43,563	175,263	54,389	202,406	80,914	272,634
Eligible private patient	1,365,827	4,909,980	1,443,600	4,779,123	1,511,274	4,807,651	1,556,680	4,766,987	1,693,727	4,977,500
Eligible DVA patient	93,152	535,971	109,231	600,227	134,622	714,365	158,278	794,251	167,408	866,286
Eligible other patient	77,720	270,040	71,139	248,251	76,932	251,857	73,817	217,473	68,557	193,130
Ineligible patient	2,925	11,564	2,723	7,431	4,921	13,089	5,527	14,101	5,903	13,269
Not reported	1,036	8,580	18,652	29,488	21,664	42,702	26,667	49,595	9,153	33,006
<i>Total</i>	<i>1,577,474</i>	<i>5,892,510</i>	<i>1,684,948</i>	<i>5,834,098</i>	<i>1,792,976</i>	<i>6,004,927</i>	<i>1,875,358</i>	<i>6,044,813</i>	<i>2,025,662</i>	<i>6,355,825</i>
	<b>All hospitals</b>									
Eligible public patient	3,020,260	13,457,446	3,115,477	13,712,354	3,284,578	13,580,582	3,418,179	13,746,176	3,469,354	14,085,589
Eligible private patient	1,803,573	6,834,058	1,836,373	6,504,744	1,866,555	6,480,659	1,875,540	6,317,470	1,990,689	6,250,841
Eligible DVA patient	203,213	1,312,559	223,659	1,366,223	243,219	1,389,801	272,991	1,491,923	294,828	1,649,576
Eligible other patient	123,721	618,259	115,397	566,786	117,779	467,646	115,052	417,421	109,696	399,171
Ineligible patient	14,331	58,420	14,769	62,093	18,686	72,045	20,245	75,011	23,457	121,366
Not reported	5,711	166,947	21,240	153,625	32,257	574,623	33,042	271,040	9,836	79,503
<b>Total separations/patient days</b>	<b>5,170,809</b>	<b>22,447,689</b>	<b>5,326,915</b>	<b>22,365,825</b>	<b>5,563,074</b>	<b>22,565,356</b>	<b>5,735,049</b>	<b>22,319,041</b>	<b>5,897,860</b>	<b>22,586,046</b>

Note: Abbreviation: DVA—Department of Veterans' Affairs.

**Table 5.6: Separations by compensable status and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Compensable status</b>	<b>Public hospitals</b>								
Compensable	13,944	13,378	4,092	3,771	3,429	1,052	466	765	40,897
Non-compensable	1,231,869	990,185	703,822	356,623	356,591	74,840	60,190	56,916	3,831,036
Not reported	1	46	0	0	0	59	0	159	265
<i>Total</i>	<i>1,245,814</i>	<i>1,003,609</i>	<i>707,914</i>	<i>360,394</i>	<i>360,020</i>	<i>75,951</i>	<i>60,656</i>	<i>57,840</i>	<i>3,872,198</i>
	<b>Private hospitals</b>								
Compensable	14,135	20,193	12,814	7,750	7,519	2,321	650	n.a.	65,382
Non-compensable	590,134	499,645	439,596	207,345	152,275	43,914	16,206	n.a.	1,949,115
Not reported	7	0	0	0	0	5,260	5,898	n.a.	11,165
<i>Total</i>	<i>604,276</i>	<i>519,838</i>	<i>452,410</i>	<i>215,095</i>	<i>159,794</i>	<i>51,495</i>	<i>22,754</i>	<i>n.a.</i>	<i>2,025,662</i>
	<b>All hospitals</b>								
Compensable	28,079	33,571	16,906	11,521	10,948	3,373	1,116	765	106,279
Non-compensable	1,822,003	1,489,830	1,143,418	563,968	508,866	118,754	76,396	56,916	5,780,151
Not reported	8	46	0	0	0	5,319	5,898	159	11,430
<b>Total separations</b>	<b>1,850,090</b>	<b>1,523,447</b>	<b>1,160,324</b>	<b>575,489</b>	<b>519,814</b>	<b>127,446</b>	<b>83,410</b>	<b>57,840</b>	<b>5,897,860</b>

n.a. not available.

**Table 5.7: Separations by State or Territory of usual residence and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>State or Territory of usual residence</b>	<b>Public hospitals</b>								
New South Wales	1,225,775	15,038	10,087	401	1,700	108	14,663	319	1,268,091
Victoria	5,563	981,264	1,656	397	2,277	255	187	254	991,853
Queensland	6,872	798	691,426	232	240	74	138	220	700,000
Western Australia	329	426	324	357,747	239	154	17	1,074	360,310
South Australia	605	1,060	421	198	352,890	24	41	1,485	356,724
Tasmania	232	1,162	143	59	59	75,251	12	25	76,943
Australian Capital Territory	2,156	154	173	29	38	11	45,531	31	48,123
Northern Territory	189	155	288	185	1,822	52	4	54,432	57,127
Other Australian territories <sup>(a)</sup>	128	393	30	97	0	0	1	0	649
Not elsewhere classified <sup>(b)</sup>	3,965	2,355	2,775	1,049	755	22	62	0	10,983
Not reported	0	804	591	0	0	0	0	0	1,395
<b>Total</b>	<b>1,245,814</b>	<b>1,003,609</b>	<b>707,914</b>	<b>360,394</b>	<b>360,020</b>	<b>75,951</b>	<b>60,656</b>	<b>57,840</b>	<b>3,872,198</b>
	<b>Private hospitals</b>								
New South Wales	592,814	4,996	14,856	160	1,059	70	3,627	n.a.	617,582
Victoria	5,227	512,763	948	137	793	80	20	n.a.	519,968
Queensland	3,482	590	434,222	71	106	34	21	n.a.	438,526
Western Australia	178	163	114	214,280	60	14	5	n.a.	214,814
South Australia	189	302	235	51	156,834	15	5	n.a.	157,631
Tasmania	143	565	126	16	28	51,114	5	n.a.	51,997
Australian Capital Territory	1,325	145	82	7	34	11	13,163	n.a.	14,767
Northern Territory	122	97	241	55	766	8	2	n.a.	1,291
Other Australian territories <sup>(a)</sup>	31	4	28	32	0	0	1	n.a.	96
Not elsewhere classified <sup>(b)</sup>	764	207	1,158	286	114	149	7	n.a.	2,685
Not reported	1	6	400	0	0	0	5,898	n.a.	6,305
<b>Total</b>	<b>604,276</b>	<b>519,838</b>	<b>452,410</b>	<b>215,095</b>	<b>159,794</b>	<b>51,495</b>	<b>22,754</b>	<b>n.a.</b>	<b>2,025,662</b>

(a) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.

(b) Includes resident overseas, at sea, no fixed address.

n.a. not available.

**Table 5.8: Separation rates<sup>(a)</sup> per 1,000 population by State or Territory of usual residence and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>State or Territory of usual residence</b>	<b>Public hospitals</b>								
New South Wales	182.4	2.3	1.5	0.1	0.3	0.0	2.2	0.0	188.8
Victoria	1.1	198.5	0.3	0.1	0.5	0.1	0.0	0.1	200.6
Queensland	1.9	0.2	194.2	0.1	0.1	0.0	0.0	0.1	196.7
Western Australia	0.2	0.2	0.2	192.5	0.1	0.1	0.0	0.6	193.9
South Australia	0.4	0.7	0.3	0.1	222.2	0.0	0.0	1.0	224.7
Tasmania	0.5	2.5	0.3	0.1	0.1	154.1	0.0	0.1	157.6
Australian Capital Territory	7.3	0.5	0.6	0.1	0.1	0.0	157.7	0.1	166.4
Northern Territory	1.1	0.9	1.6	1.1	11.8	0.4	0.0	335.2	352.1
Other Australian territories <sup>(b)</sup>	53.5	134.6	12.4	43.1	0.0	0.0	0.6	0.0	244.2
	<b>Private hospitals</b>								
New South Wales	86.3	0.7	2.1	0.0	0.2	0.0	0.5	n.a.	89.8
Victoria	1.0	101.0	0.2	0.0	0.2	0.0	0.0	n.a.	102.4
Queensland	1.0	0.2	118.6	0.0	0.0	0.0	0.0	n.a.	119.8
Western Australia	0.1	0.1	0.1	114.1	0.0	0.0	0.0	n.a.	114.4
South Australia	0.1	0.2	0.1	0.0	92.9	0.0	0.0	n.a.	93.4
Tasmania	0.3	1.1	0.2	0.0	0.1	101.9	0.0	n.a.	103.6
Australian Capital Territory	4.4	0.5	0.3	0.0	0.1	0.0	45.3	n.a.	50.7
Northern Territory	0.8	0.6	1.5	0.3	4.6	0.0	0.0	n.a.	7.9
Other Australian territories <sup>(b)</sup>	9.7	1.2	16.5	10.7	0.0	0.0	0.6	n.a.	38.6
	<b>All hospitals</b>								
New South Wales	268.7	3.0	3.6	0.1	0.4	0.0	2.7	0.0	278.6
Victoria	2.2	299.5	0.5	0.1	0.6	0.1	0.0	0.1	303.1
Queensland	2.9	0.4	312.8	0.1	0.1	0.0	0.0	0.1	316.5
Western Australia	0.3	0.3	0.2	306.6	0.2	0.1	0.0	0.6	308.3
South Australia	0.5	0.9	0.4	0.2	315.2	0.0	0.0	1.0	318.1
Tasmania	0.8	3.6	0.5	0.2	0.2	255.9	0.0	0.1	261.3
Australian Capital Territory	11.6	1.0	0.9	0.1	0.2	0.1	203.0	0.1	217.0
Northern Territory	2.0	1.5	3.0	1.4	16.4	0.5	0.0	335.2	360.0
Other Australian territories <sup>(b)</sup>	63.2	135.8	28.9	53.8	0.0	0.0	1.2	0.0	282.8

(a) The rates were directly age-standardised to the Australian population at 30 June 1991. For details see Appendix 3.

(b) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.

n.a. not available.

**Table 5.9: Per cent of separations by State or Territory of usual residence and hospital sector, States and Territories, 1999-00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>State or Territory of usual residence</b>	<b>Public hospitals</b>								
New South Wales	98.4	1.5	1.4	0.1	0.5	0.1	24.2	0.6	32.7
Victoria	0.4	97.8	0.2	0.1	0.6	0.3	0.3	0.4	25.6
Queensland	0.6	0.1	97.7	0.1	0.1	0.1	0.2	0.4	18.1
Western Australia	<0.1	<0.1	<0.1	99.3	0.1	0.2	<0.1	1.9	9.3
South Australia	<0.1	0.1	0.1	0.1	98.0	<0.1	0.1	2.6	9.2
Tasmania	<0.1	0.1	<0.1	<0.1	<0.1	99.1	<0.1	<0.1	2.0
Australian Capital Territory	0.2	<0.1	<0.1	<0.1	<0.1	<0.1	75.1	0.1	1.2
Northern Territory	<0.1	<0.1	<0.1	0.1	0.5	0.1	<0.1	94.1	1.5
Other Australian territories <sup>(a)</sup>	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1
Not elsewhere classified <sup>(b)</sup>	0.3	0.2	0.4	0.3	0.2	<0.1	0.1	<0.1	0.3
Not reported	<0.1	0.1	0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1
<b>Total</b>	<b>99.9</b>	<b>99.9</b>	<b>99.9</b>	<b>99.9</b>	<b>100.0</b>	<b>99.9</b>	<b>99.9</b>	<b>100.0</b>	<b>99.9</b>
	<b>Private hospitals</b>								
New South Wales	98.1	1.0	3.3	0.1	0.7	0.1	15.9	n.a.	30.5
Victoria	0.9	98.6	0.2	0.1	0.5	0.2	0.1	n.a.	25.7
Queensland	0.6	0.1	96.0	<0.1	0.1	0.1	0.1	n.a.	21.6
Western Australia	<0.1	<0.1	<0.1	99.6	<0.1	<0.1	<0.1	n.a.	10.6
South Australia	<0.1	0.1	0.1	<0.1	98.1	<0.1	<0.1	n.a.	7.8
Tasmania	<0.1	0.1	<0.1	<0.1	<0.1	99.3	<0.1	n.a.	2.6
Australian Capital Territory	0.2	<0.1	<0.1	<0.1	<0.1	<0.1	57.8	n.a.	0.7
Northern Territory	<0.1	<0.1	0.1	<0.1	0.5	<0.1	<0.1	n.a.	0.1
Other Australian territories <sup>(a)</sup>	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	n.a.	<0.1
Not elsewhere classified <sup>(b)</sup>	0.1	<0.1	0.3	0.1	0.1	0.3	<0.1	n.a.	0.1
Not reported	<0.1	<0.1	0.1	<0.1	<0.1	<0.1	25.9	n.a.	0.3
<b>Total</b>	<b>99.9</b>	<b>100.0</b>	<b>99.9</b>	<b>99.9</b>	<b>99.9</b>	<b>100.0</b>	<b>99.9</b>	<b>n.a.</b>	<b>100.0</b>

(a) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.

(b) Includes resident overseas, at sea, no fixed address.

n.a. not available.



**Table 5.10: Average cost weight of separations<sup>(a)</sup> by State or Territory of usual residence and hospital sector, States and Territories, 1999-00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>State or Territory of usual residence</b>	<b>Public hospitals</b>								
New South Wales	1.03	1.03	1.35	1.09	1.55	1.35	1.14	1.04	1.04
Victoria	1.04	0.97	0.99	1.03	1.30	0.99	1.84	0.83	0.98
Queensland	1.07	1.25	0.97	1.35	1.07	0.91	1.03	1.00	0.97
Western Australia	1.24	2.51	1.22	0.93	0.97	0.38	1.08	0.70	0.94
South Australia	1.52	1.67	1.20	1.29	0.98	0.90	1.30	0.73	0.98
Tasmania	1.60	2.30	1.32	1.36	1.22	1.07	3.02	0.86	1.09
Australian Capital Territory	1.54	1.13	0.83	1.17	0.93	0.87	0.89	1.24	0.92
Northern Territory	1.08	1.82	1.55	1.23	2.21	1.06	1.73	0.77	0.82
Other Australian territories <sup>(b)</sup>	1.04	1.03	1.33	1.36	..	..	0.43	..	1.09
Not elsewhere classified <sup>(c)</sup>	1.41	1.13	1.27	1.27	1.28	2.79	1.57	..	1.30
Not reported	..	1.32	..	..	..	..	..	..	0.78
<b>Total</b>	<b>1.04</b>	<b>0.98</b>	<b>0.98</b>	<b>0.94</b>	<b>0.99</b>	<b>1.07</b>	<b>0.96</b>	<b>0.77</b>	<b>0.99</b>
	<b>Private hospitals</b>								
New South Wales	0.95	1.16	1.11	0.92	1.23	1.19	1.26	n.a.	0.96
Victoria	0.86	0.98	1.03	0.94	1.22	1.22	0.97	n.a.	0.98
Queensland	0.80	1.07	0.97	1.16	1.16	1.58	1.13	n.a.	0.96
Western Australia	1.51	1.10	1.17	0.96	1.07	1.39	0.73	n.a.	0.96
South Australia	1.47	1.11	1.02	1.37	1.03	1.14	0.87	n.a.	1.03
Tasmania	1.63	1.60	1.35	1.36	1.22	1.06	1.45	n.a.	1.07
Australian Capital Territory	1.30	1.44	1.43	0.81	0.78	1.25	1.13	n.a.	1.15
Northern Territory	1.07	1.23	1.05	1.07	1.32	0.79	1.25	n.a.	1.23
Other Australian territories <sup>(b)</sup>	0.70	1.21	1.50	1.59	..	..	0.65	n.a.	1.27
Not elsewhere classified <sup>(c)</sup>	1.48	1.27	0.93	1.21	1.17	1.18	1.39	n.a.	1.17
Not reported	1.10	1.37	..	..	..	..	1.04	n.a.	0.98
<b>Total</b>	<b>0.95</b>	<b>0.98</b>	<b>0.97</b>	<b>0.96</b>	<b>1.04</b>	<b>1.06</b>	<b>1.13</b>	<b>n.a.</b>	<b>0.98</b>

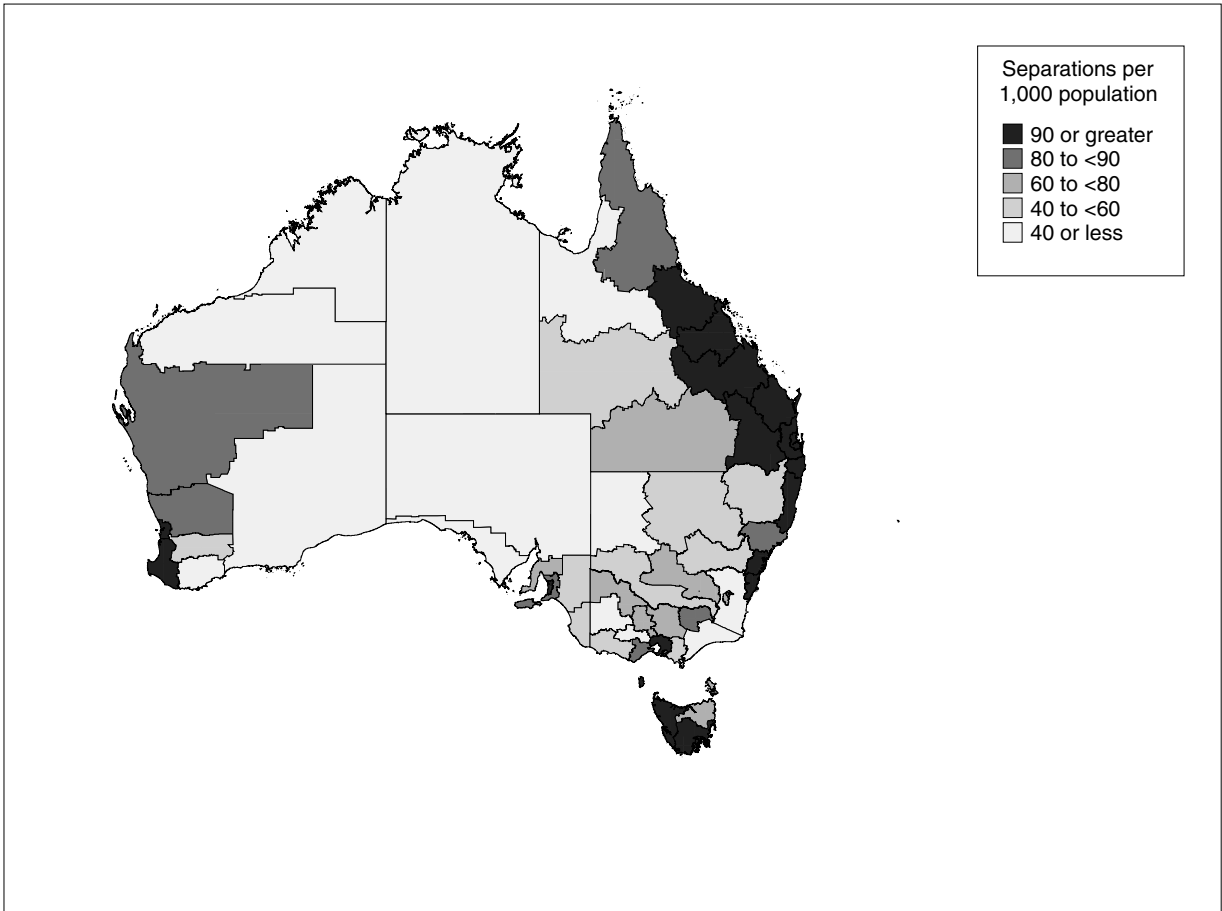
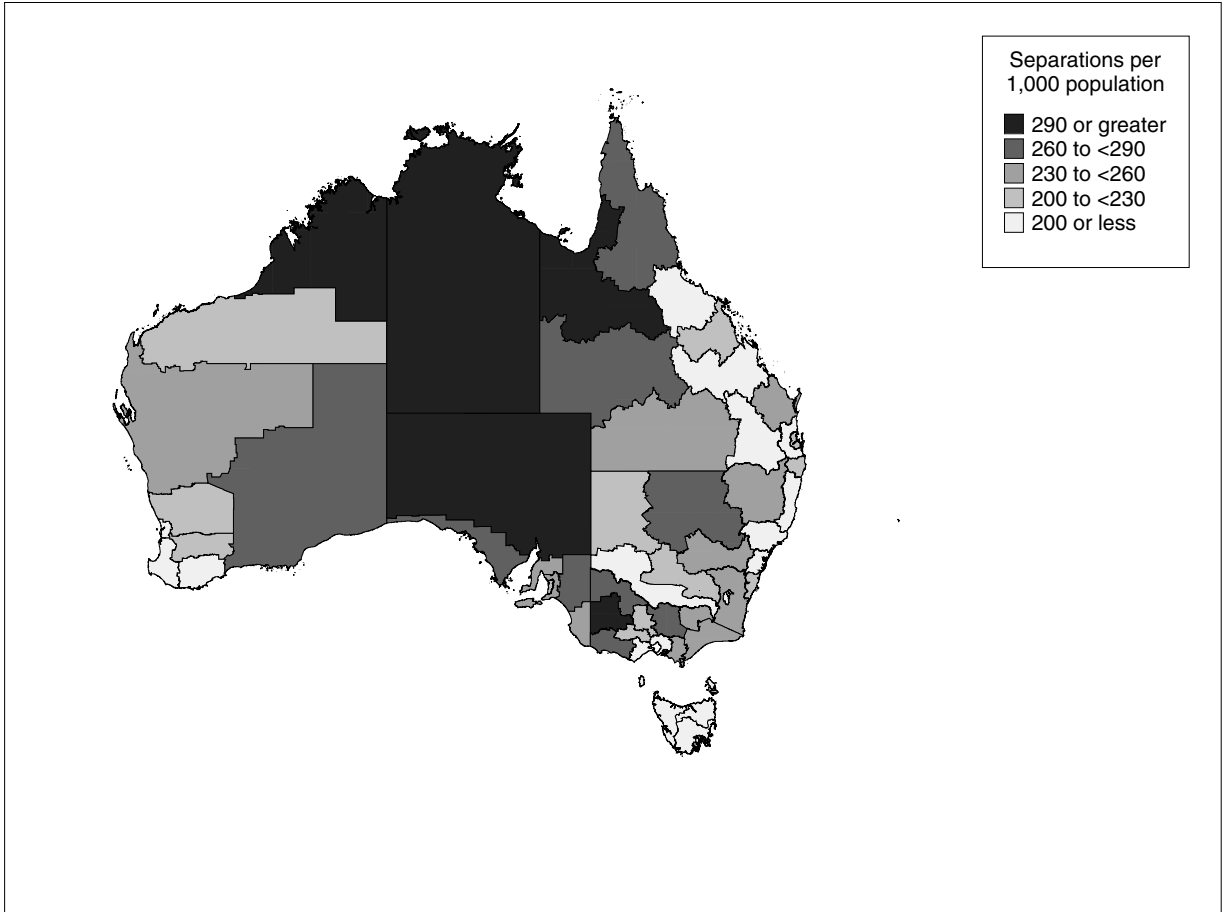
(a) Separations for which the type of episode of care was reported as acute, or as newborn with qualified patient days, or was not reported. For further details see Chapter 10.

(b) Includes Cocos (Keeling) Islands, Christmas Island, Jervis Bay Territory.

(c) Includes resident overseas, at sea, no fixed address.

n.a. not available.

.. not applicable.



**Table 5.11: Separations by type of episode of care and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Type of episode of care</b>	<b>Public hospitals</b>								
Acute care	1,188,250	962,140	670,048	352,495	346,409	73,403	59,008	55,599	3,707,352
Rehabilitation care—not further specified	22,608	17,858	0	0	3,775	0	0	569	44,810
Rehabilitation care—delivered in a designated unit	n.a.	n.a.	13,036	353	n.a.	0	274	n.a.	13,663
Rehabilitation care—according to a designated program	n.a.	n.a.	6,576	2	n.a.	557	19	n.a.	7,154
Rehabilitation care—principal clinical intent	n.a.	n.a.	1,786	2,888	n.a.	0	31	n.a.	4,705
<i>Rehabilitation total</i>	<i>22,608</i>	<i>17,858</i>	<i>21,398</i>	<i>3,243</i>	<i>3,775</i>	<i>557</i>	<i>324</i>	<i>569</i>	<i>70,332</i>
Palliative care, not further specified	7,361	4,059	3,041	488	1,077	343	337	36	16,742
Non-acute care	8,594	8,988	5,642	1,672	1,019	597	77	359	26,948
Newborn—qualified days only	9,920	8,379	5,516	2,487	2,578	878	828	1,196	31,782
Newborn—qualified and unqualified days	5,327	2,185	1,869	0	1,612	0	66	0	11,059
Newborn—unqualified days only	56,709	38,746	30,843	15,467	10,600	289	2,858	2,480	157,992
<i>Newborn total</i>	<i>71,956</i>	<i>49,310</i>	<i>38,228</i>	<i>17,954</i>	<i>14,790</i>	<i>1,167</i>	<i>3,752</i>	<i>3,676</i>	<i>200,833</i>
Other care	3,754	0	400	9	3,550	156	16	11	7,896
Not reported	0	0	0	0	0	17	0	70	87
<b>Total</b>	<b>1,302,523</b>	<b>1,042,355</b>	<b>738,757</b>	<b>375,861</b>	<b>370,620</b>	<b>76,240</b>	<b>63,514</b>	<b>60,320</b>	<b>4,030,190</b>
	<b>Private hospitals</b>								
Acute care	572,216	509,838	432,381	209,907	157,161	22,452	21,823	n.a.	1,925,778
Rehabilitation care—not further specified	16,527	7,176	0	0	845	0	n.a.	n.a.	24,548
Rehabilitation care—delivered in a designated unit	n.a.	n.a.	4,035	1,235	n.a.	0	n.a.	n.a.	5,270
Rehabilitation care—according to a designated program	n.a.	n.a.	731	112	n.a.	146	n.a.	n.a.	989
Rehabilitation care—principal clinical intent	n.a.	n.a.	9,531	461	n.a.	0	n.a.	n.a.	9,992
<i>Rehabilitation total</i>	<i>16,527</i>	<i>7,176</i>	<i>14,297</i>	<i>1,808</i>	<i>845</i>	<i>146</i>	<i>n.a.</i>	<i>n.a.</i>	<i>40,799</i>
Palliative care, not further specified	596	158	1,753	1,702	193	197	0	n.a.	4,599
Non-acute care	474	93	818	428	1,107	6,882	33	n.a.	9,835
Newborn—qualified days only	4,495	2,572	1,046	1,250	487	818	683	n.a.	11,351
Newborn—qualified and unqualified days	664	1	606	0	0	0	214	n.a.	1,485
Newborn—unqualified days only	13,734	0	10,571	7,599	92	0	347	n.a.	32,343
<i>Newborn total</i>	<i>18,893</i>	<i>2,573</i>	<i>12,223</i>	<i>8,849</i>	<i>579</i>	<i>818</i>	<i>1,244</i>	<i>n.a.</i>	<i>45,179</i>
Other care	9,304	0	1,509	0	1	50	1	n.a.	10,865
Not reported	0	0	0	0	0	20,950	0	n.a.	0
<b>Total</b>	<b>618,010</b>	<b>519,838</b>	<b>462,981</b>	<b>222,694</b>	<b>159,886</b>	<b>51,495</b>	<b>23,101</b>	<b>n.a.</b>	<b>2,037,055</b>

n.a. not available.

**Table 5.12: Average length of stay (days) by type of episode of care and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Type of episode of care</b>	<b>Public hospitals</b>								
Acute care	3.9	3.2	3.1	3.4	3.3	3.8	3.2	3.1	3.4
Rehabilitation care—not further specified	19.1	17.6	..	..	26.8	..	..	8.2	19.0
Rehabilitation care—delivered in a designated unit	n.a.	n.a.	5.3	25.2	n.a.	..	20.7	n.a.	6.1
Rehabilitation care—according to a designated program	n.a.	n.a.	6.0	17.0	n.a.	25.7	20.3	n.a.	7.6
Rehabilitation care—principal clinical intent	n.a.	n.a.	17.3	24.7	n.a.	..	17.0	n.a.	21.9
<i>Rehabilitation total</i>	<i>19.1</i>	<i>17.6</i>	<i>6.5</i>	<i>24.8</i>	<i>26.8</i>	<i>25.7</i>	<i>20.3</i>	<i>8.2</i>	<i>15.5</i>
Palliative care, not further specified	12.4	15.4	9.0	11.3	12.0	12.5	16.0	15.0	12.5
Non-acute care	60.4	34.6	117.4	18.9	178.1	79.0	29.1	19.5	65.4
Newborn—qualified days only	9.7	10.1	11.6	11.7	12.6	11.1	10.0	8.5	10.5
Newborn—qualified and unqualified days (qualified days)	3.2	3.3	2.6	..	2.3	..	6.6	..	3.0
Newborn—qualified and unqualified days (unqualified days)	2.5	2.6	2.4	..	2.5	..	3.3	..	2.5
Newborn—unqualified days only	3.0	3.1	2.7	3.3	3.0	6.9	2.9	3.3	3.0
<i>Newborn total</i>	<i>4.1</i>	<i>4.5</i>	<i>4.1</i>	<i>4.5</i>	<i>4.9</i>	<i>10.0</i>	<i>4.6</i>	<i>5.0</i>	<i>4.3</i>
Other care	9.1	..	122.4	1.9	5.5	11.1	2.5	8.8	13.2
Not reported	..	..	..	..	..	12.3	..	4.3	2.4
<b>Total<sup>(a)</sup></b>	<b>4.6</b>	<b>3.8</b>	<b>4.3</b>	<b>3.7</b>	<b>4.1</b>	<b>4.7</b>	<b>3.5</b>	<b>3.4</b>	<b>4.2</b>
	<b>Private hospitals</b>								
Acute care	2.6	2.9	3.0	2.9	3.1	3.2	3.5	n.a.	2.9
Rehabilitation care—not further specified	8.4	18.0	..	..	16.0	..	n.a.	n.a.	11.5
Rehabilitation care—delivered in a designated unit	n.a.	n.a.	9.1	18.7	n.a.	..	n.a.	n.a.	11.4
Rehabilitation care—according to a designated program	n.a.	n.a.	5.1	7.2	n.a.	19.7	n.a.	n.a.	7.5
Rehabilitation care—principal clinical intent	n.a.	n.a.	2.6	17.1	n.a.	..	n.a.	n.a.	3.3
<i>Rehabilitation total</i>	<i>8.4</i>	<i>18.0</i>	<i>4.6</i>	<i>17.5</i>	<i>16.0</i>	<i>19.7</i>	<i>n.a.</i>	<i>n.a.</i>	<i>9.3</i>
Palliative care, not further specified	14.3	11.2	10.1	11.6	12.6	12.6	..	n.a.	11.4
Non-acute care	11.4	263.6	129.9	11.8	23.1	3.0	8.2	n.a.	18.9
Newborn—qualified days only	6.0	5.5	12.7	7.9	7.1	4.4	5.8	n.a.	6.3
Newborn—qualified and unqualified days (qualified days)	3.2	1.0	2.8	..	..	..	2.5	n.a.	2.9
Newborn—qualified and unqualified days (unqualified days)	3.3	5.0	3.7	..	..	..	4.5	n.a.	3.6
Newborn—unqualified days only	4.7	..	4.9	4.8	4.2	..	4.6	n.a.	4.8
<i>Newborn total</i>	<i>5.1</i>	<i>5.5</i>	<i>5.7</i>	<i>5.3</i>	<i>6.6</i>	<i>4.4</i>	<i>5.7</i>	<i>n.a.</i>	<i>5.2</i>
Other care	6.1	..	1.9	..	1.0	17.3	37.0	n.a.	5.6
Not reported	..	..	..	..	..	3.5	..	n.a.	3.1
<b>Total<sup>(a)</sup></b>	<b>2.9</b>	<b>3.2</b>	<b>3.3</b>	<b>3.1</b>	<b>3.3</b>	<b>3.4</b>	<b>3.6</b>	<b>n.a.</b>	<b>3.1</b>

(a) Excluding newborn episodes with unqualified days only.

n.a. not available.

.. not applicable.

**Table 5.13: Separations by mode of admission and hospital sector, States and Territories, 1999-00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Mode of admission</b>	<b>Public hospitals</b>								
Admitted patient transferred from another hospital	59,473	35,507	21,019	9,957	14,478	1,672	1,515	625	144,246
Statistical admission: type change	14,043	8,359	8,868	588	8,656	1,024	174	498	42,210
Other <sup>(a)</sup>	1,167,925	959,223	678,027	349,849	332,478	72,733	58,967	56,717	3,675,919
Not reported	4,373	520	0	0	4,408	522	0	0	9,823
<i>Total</i>	<i>1,245,814</i>	<i>1,003,609</i>	<i>707,914</i>	<i>360,394</i>	<i>360,020</i>	<i>75,951</i>	<i>60,656</i>	<i>57,840</i>	<i>3,872,198</i>
	<b>Private hospitals</b>								
Admitted patient transferred from another hospital	18,206	18,275	7,668	2,807	4,374	114	616	n.a.	52,060
Statistical admission: type change	2,323	338	1,437	1,022	34	331	14	n.a.	5,499
Other <sup>(a)</sup>	582,380	501,225	443,305	211,266	155,306	51,050	22,118	n.a.	1,966,650
Not reported	1,367	0	0	0	80	0	6	n.a.	1,453
<i>Total</i>	<i>604,276</i>	<i>519,838</i>	<i>452,410</i>	<i>215,095</i>	<i>159,794</i>	<i>51,495</i>	<i>22,754</i>	<i>n.a.</i>	<i>2,025,662</i>
	<b>All hospitals</b>								
Admitted patient transferred from another hospital	77,679	53,782	28,687	12,764	18,852	1,786	2,131	625	196,306
Statistical admission: type change	16,366	8,697	10,305	1,610	8,690	1,355	188	498	47,709
Other <sup>(a)</sup>	1,750,305	1,460,448	1,121,332	561,115	487,784	123,783	81,085	56,717	5,642,569
Not reported	5,740	520	0	0	4,488	522	6	0	11,276
<b>Total</b>	<b>1,850,090</b>	<b>1,523,447</b>	<b>1,160,324</b>	<b>575,489</b>	<b>519,814</b>	<b>127,446</b>	<b>83,410</b>	<b>57,840</b>	<b>5,897,860</b>

(a) *Other* refers to all planned and unplanned admissions except transfers from other hospitals and statistical admissions.

n.a. not available.

.. not applicable.

**Table 5.14: Separations by mode of separation and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Mode of separation</b>	<b>Public hospitals</b>								
Discharge/transfer to an(other) acute hospital	69,407	51,331	28,571	13,432	10,511	2,209	1,843	1,762	179,066
Discharge/transfer to aged care facility	14,621	10,105	5,172	1,959	6,758	883	561	172	40,231
Discharge/transfer to an(other) psychiatric hospital	2,398	140	383	1,459	709	0	22	9	5,120
Discharge/transfer to other health care accommodation <sup>(a)</sup>	2,531	251	2,055	1,220	6,929	805	280	1,733	15,804
Statistical discharge: type change	14,016	8,670	9,022	799	4,566	1,669	1	0	38,743
Left against medical advice/discharge at own risk	11,587	4,157	5,441	3,326	2,090	285	115	1,453	28,454
Statistical discharge from leave	3,592	8	549	2,088	265	0	156	0	6,658
Died	21,405	13,377	8,534	3,517	4,628	1,262	717	333	53,773
Other <sup>(b)</sup>	1,106,257	915,570	648,187	332,594	323,313	68,838	56,961	51,792	3,503,512
Not reported	0	0	0	0	251	0	0	586	837
<b>Total</b>	<b>1,245,814</b>	<b>1,003,609</b>	<b>707,914</b>	<b>360,394</b>	<b>360,020</b>	<b>75,951</b>	<b>60,656</b>	<b>57,840</b>	<b>3,872,198</b>
	<b>Private hospitals</b>								
Discharge/transfer to an(other) acute hospital	10,911	12,474	6,881	2,618	1,398	6,746	221	n.a.	41,249
Discharge/transfer to aged care facility	1,468	2,104	1,691	427	2,065	43	34	n.a.	7,832
Discharge/transfer to an(other) psychiatric hospital	97	0	10	86	60	0	0	n.a.	253
Discharge/transfer to other health care accommodation <sup>(a)</sup>	436	8	638	222	2,928	6,631	25	n.a.	10,888
Statistical discharge: type change	1,923	378	1,460	1,191	44	234	1	n.a.	5,231
Left against medical advice/discharge at own risk	621	134	233	190	45	128	2	n.a.	1,353
Statistical discharge from leave	116	0	5	59	7	0	0	n.a.	187
Died	2,653	3,822	3,885	1,981	1,373	150	113	n.a.	13,977
Other <sup>(b)</sup>	586,051	500,918	437,607	208,321	149,702	37,563	22,358	n.a.	1,942,520
Not reported	0	0	0	0	2,172	0	0	n.a.	2,172
<b>Total</b>	<b>604,276</b>	<b>519,838</b>	<b>452,410</b>	<b>215,095</b>	<b>159,794</b>	<b>51,495</b>	<b>22,754</b>	<b>n.a.</b>	<b>2,025,662</b>

(a) Includes mothercraft hospitals and hostels recognised by the Commonwealth Department of Health and Aged Care, unless this is the usual place of residence.

(b) Includes discharge to usual residence/own accommodation/welfare institution (including prisons, hostels and group homes providing primarily welfare services).

n.a. not available.

Table 5.15: Separations for patients over 70 years by type of episode of care and mode of separation, all hospitals, Australia, 1999–00

Type of episode of care	Discharge/ transfer to an(other) acute hospital	Discharge/ transfer to an aged care facility	Discharge/ transfer to an(other) psychiatric hospital	Discharge/ transfer to other health care accommo- dation <sup>(a)</sup>	Statistical discharge: type change	Left against medical advice/ discharge at own risk	Statistical discharge from leave	Died	Other <sup>(b)</sup>	Not reported	Total
Acute care	82,135	32,298	566	9,971	24,139	2,163	705	38,429	1,194,733	202	1,385,341
Rehabilitation care—not further specified	2,907	2,755	10	418	2,307	136	192	426	31,977	16	41,144
Rehabilitation care—delivered in a designated unit	176	301	6	134	664	10	26	76	7,513	0	8,906
Rehabilitation care—according to a designated program	149	75	0	22	198	0	5	40	2,233	0	2,722
Rehabilitation care—principal clinical intent	488	328	7	140	452	2	32	79	2,736	0	4,264
<i>Rehabilitation total</i>	<i>3,720</i>	<i>3,459</i>	<i>23</i>	<i>714</i>	<i>3,621</i>	<i>148</i>	<i>255</i>	<i>621</i>	<i>44,459</i>	<i>16</i>	<i>57,036</i>
Palliative care—not further specified	389	316	0	33	204	14	76	4,607	2,353	0	7,992
Palliative care—delivered in a designated unit	51	37	0	37	73	1	1	887	928	0	2,015
Palliative care—according to a designated program	12	3	0	0	31	0	0	51	87	0	184
Palliative care—principal clinical intent	54	53	0	12	57	4	1	876	453	0	1,510
<i>Palliative care total</i>	<i>506</i>	<i>409</i>	<i>0</i>	<i>82</i>	<i>365</i>	<i>19</i>	<i>78</i>	<i>6,421</i>	<i>3,821</i>	<i>0</i>	<i>11,701</i>
Non-acute care	2,555	6,267	17	317	2,517	84	109	1,856	10,001	147	23,870
Other care	140	42	4	12	254	0	2	55	2,666	2	3,177
Not reported	42	2	0	0	17	88	0	28	6,024	0	6,201
<b>Total</b>	<b>89,098</b>	<b>42,477</b>	<b>610</b>	<b>11,096</b>	<b>30,913</b>	<b>2,502</b>	<b>1,149</b>	<b>47,410</b>	<b>1,261,704</b>	<b>367</b>	<b>1,487,326</b>

(a) Includes mothercraft hospitals and hostels recognised by the Commonwealth Department of Health and Aged Care, unless this is the usual place of residence.

(b) Includes discharge to usual residence/own accommodation/welfare institution (including prisons, hostels and group homes providing primarily welfare services).

**Table 5.16: Separations by inter-hospital contracted patient status and hospital sector, States and Territories, 1999-00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Inter-hospital contracted patient status</b>	<b>Public hospitals</b>								
Inter-hospital same day contracted <sup>(a)</sup>	2,450	1,211	131	795	741	0	0	375	5,703
Other	1,243,364	1,001,878	707,783	359,599	352,438	0	60,656	57,465	3,783,183
Not reported	0	520	0	0	6,841	75,951	0	0	83,312
<i>Total</i>	<i>1,245,814</i>	<i>1,003,609</i>	<i>707,914</i>	<i>360,394</i>	<i>360,020</i>	<i>75,951</i>	<i>60,656</i>	<i>57,840</i>	<i>3,872,198</i>
	<b>Private hospitals</b>								
Inter-hospital same day contracted <sup>(a)</sup>	25,737	5,411	2,537	5,966	212	0	0	0	39,863
Other	578,539	514,427	449,873	209,129	159,502	0	22,754	0	1,934,224
Not reported	0	0	0	0	80	51,495	0	0	51,575
<i>Total</i>	<i>604,276</i>	<i>519,838</i>	<i>452,410</i>	<i>215,095</i>	<i>159,794</i>	<i>51,495</i>	<i>22,754</i>	<i>n.a.</i>	<i>2,025,662</i>
	<b>All hospitals</b>								
Inter-hospital same day contracted <sup>(a)</sup>	28,187	6,622	2,668	6,761	953	0	0	375	45,566
Other	1,821,903	1,516,305	1,157,656	568,728	511,940	0	83,410	57,465	5,717,407
Not reported	0	520	0	0	6,921	127,446	0	0	134,887
<b>Total separations</b>	<b>1,850,090</b>	<b>1,523,447</b>	<b>1,160,324</b>	<b>575,489</b>	<b>519,814</b>	<b>127,446</b>	<b>83,410</b>	<b>57,840</b>	<b>5,897,860</b>

(a) 1,920 separations for inter-hospital contracted care were non-same day separations, 827 in public hospitals and 1,093 in private hospitals.

n.a. not available.



# 6 Demographic profile for admitted patients

## Introduction

This chapter presents a demographic profile of admitted patients who separated from hospital during 1999–00.

Data on the sex of each patient was reported to the National Hospital Morbidity Database as male, female, indeterminate or not stated/inadequately described. The 39 separations for patients who were not reported as male or female are included in totals for persons in the tables in this chapter.

Most States and Territories supplied the date of birth of the patient for the database, in which case the Institute calculated the age of the patient by subtracting the date of birth from the date of admission. The exceptions were Victoria and Queensland, which supplied the age in years or days for each patient. The 9 separations for which the age of the patient was not reported are included in the totals in tables including age group.

The data on Aboriginal and Torres Strait Islander status were supplied by most data providers, categorised as:

- Aboriginal but not Torres Strait Islander origin
- Torres Strait Islander but not Aboriginal origin
- Aboriginal and Torres Strait Islander origin
- not Aboriginal or Torres Strait Islander origin
- not reported.

The additional category *Aboriginal or Torres Strait Islander origin, not further specified* was created by the Institute to cater for definitional variations between jurisdictions, including the use of the superseded version of this data element.

All States and Territories except the Northern Territory supplied country of birth details coded to the Australian Bureau of Statistics' Australian Standard Classification of Countries for Social Statistics (ASCCSS). The Northern Territory data for country of birth, which was provided according to the Australian Bureau of Statistics' Standard Australian Classification of Countries (SACC), were mapped by the Institute to the ASCCSS.

The age-standardised rates in this chapter were derived using 30 June 1999 population estimates for Aboriginal and Torres Strait Islander peoples, other Australians and country of birth group population groups because 31 December (mid-year) estimates were not available for the Aboriginal and Torres Strait Islander and country of birth group populations; this includes age-standardised rates calculated for separations for Aboriginal and Torres Strait Islander persons and persons not of Aboriginal or Torres Strait Islander origin (Table 6.7) and by country of birth (Table 6.8). Thus, there will be small discrepancies between the age-standardised rates in this chapter and the standardised rates reported in Chapters 2, 4 and 5, which were based on 31 December 1999 estimates (see Appendix 3).

## Sex

There were more separations for females than males in all age groups from 15 to 54 years (which include child-bearing ages for women), and also in the 75 years and over age groups (Table 6.1). Females accounted for higher proportions of separations than males, 53.0% of total separations in public hospitals (2,050,720) (Table 6.2) and 55.2% in private hospitals (1,117,162) (Table 6.3). Separations per 1,000 population were higher for females than males in age groups from 15 to 49 years in public hospitals and from 15 to 59 years in private hospitals (Figures 6.1 and 6.2). Females also accounted for more patient days (12,251,467) than males (10,334,365) (Table 6.4). In public hospitals, they accounted for 52.6% (8,543,397) of patient days, and for more patient days than males in the age groups, 15 to 44 years and 75 years and over (Table 6.5). In private hospitals, females accounted for 58.3% (3,708,070) of patient days, and for more patient days than males in the 15 years and over age groups (Table 6.6). Similar patterns were evident in the number of patient days reported per 1,000 population in both public and private hospitals (Figures 6.3 and 6.4).

## Age

In public hospitals, separations peaked in two age groups. The first was in the 65 to 74 years age group, which was most commonly reported for male patients, and the second was in the 25 to 34 years age group, which was most commonly reported for female patients (Table 6.2). The number of separations per 1,000 population was highest for patients in the 85 years and over age group (Figure 6.1). The highest number of patient days for females was reported in the 75 to 84 years age group and for males in the age group 65 to 74 years (Table 6.5). Average length of stay was highest for patients aged 85 years and over (Figure 6.5).

In private hospitals, separations peaked in the 65 to 74 years age group for male patients and in the 45 to 54 years age group for female patients (Table 6.3). Patients in the 75 to 84 years age group accounted for the most patient days (Table 6.6), and had the highest number of separations per 1,000 population (Figure 6.2). As for public hospitals, the average length of stay was longest for patients aged 85 years and over (Figure 6.6).

In both sectors combined the population group 65 years and over accounted for a high proportion of admitted patient activity. This population (2,337,506), which comprised 12% of the total Australian population, accounted for 1.9 million separations (32.5%) and 10.8 million patient days (47.7%). There were 820.9 separations per 1,000 population for this age group compared with an overall rate of 309.6 per 1,000 for the total population. The average length of stay for these patients was 5.6 days, compared with 3.8 days for all patients.

## Aboriginal and Torres Strait Islander status

Table 6.7 presents Aboriginal and Torres Strait Islander status data by hospital sector and State and Territory. For Aboriginal and Torres Strait Islander patients, the age-standardised rates were calculated using the Australian Bureau of Statistics experimental projections of the Aboriginal and Torres Strait Islander population for June 1999 (Appendix Table A6.2). These rates are subject to variability in relatively small populations of Aboriginals and Torres Strait Islanders, such as in the Australian Capital Territory.

There were 170,851 separations for patients reported as Aboriginal or Torres Strait Islander, mainly in New South Wales, Queensland, Western Australia and the Northern

Territory. Overall, on an age-standardised basis, there were 620.9 separations for Aboriginal and Torres Strait Islander patients reported per 1,000 Aboriginal and Torres Strait Islander population for Australia, compared to the rate for the overall population of 300.2 per 1,000.

After the Australian Capital Territory (for which rates are subject to variability), the Northern Territory reported the highest number of separations for Aboriginal and Torres Strait Islander patients per 1,000 Aboriginal and Torres Strait Islander population (962.5 per 1,000). Western Australia and South Australia reported the next highest rates (815.8 and 785.7 per 1,000, respectively), ahead of Queensland and New South Wales (644.4 and 423.8 per 1,000 population, respectively). These rates are influenced by the quality of the data on Aboriginal and Torres Strait Islander status, which varied among the States and Territories, as described below. They can also be influenced by variation among the jurisdictions in the health status of Aboriginals and Torres Strait Islanders and in their access to hospital services.

Figure 6.7 presents separation rates per 1,000 population by reported Aboriginal and Torres Strait Islander status and age group and sex. Aboriginal and Torres Strait Islander status categories included as 'Aboriginal or Torres Strait Islander' were *Aboriginal but not Torres Strait Islander origin*, *Torres Strait Islander but not Aboriginal origin*, *Aboriginal and Torres Strait Islander origin*, and *Aboriginal or Torres Strait Islander origin, not further specified*.

The rates for both Aboriginal and Torres Strait Islander males and females were higher than those for other patients in all age groups, and markedly so for patients aged over 34 years. Rates for Aboriginals and Torres Strait Islanders for older age groups are subject to variability due to the relatively small populations in these age groups.

### **Quality of Aboriginal and Torres Strait Islander status data**

The variation in the number of Aboriginal and Torres Strait Islander separations per 1,000 Aboriginal and Torres Strait Islander population among the States and Territories suggests that there was variation in the proportion of Aboriginal and Torres Strait Islander persons who were identified as such in the hospital morbidity data collections and/or in the total population.

The quality of the data provided for Aboriginal and Torres Strait Islander status in 1999–00, although better than previous years, is still in need of improvement, being considered acceptable for only the Northern Territory and South Australia. Data on Aboriginal and Torres Strait Islander status in this chapter should therefore be interpreted cautiously.

For 1999–00, the New South Wales Health Department reports that its data were in need of improvement. To address this issue, the department has implemented a range of strategies which include the ongoing distribution of *Better Practice Guidelines to Improve the Level of Aboriginal and Torres Strait Islander Identification* and the release of a Departmental Circular, *Principles for Recording Aboriginal and Torres Strait Islander Origin Information of Patients and Clients*. In addition, its Aboriginal Health Information Strategy Unit continues to conduct the *Training Program for Frontline Staff* targeting staff who collect patient information. It also trains staff as facilitators across all Area Health Services.

The Victorian Department of Human Services reports that its 1999–00 data were in need of improvement. The *National Health Data Dictionary* question on Aboriginal and Torres Strait Islander status is a mandatory data field for admission to all hospitals. However, the question is not always asked and it is sometimes possible for systems to default to 'no'. Hospitals are encouraged to assess the quality of their data internally, but this is not mandatory and not all do so.

Queensland Health reports that its 1999–00 data were regarded as being in need of improvement. The Department is conducting a program of audits and is working to improve overall Aboriginal and Torres Strait Islander identification in all mainstream administrative data collections.

The Health Department of Western Australia regards its 1999–00 Aboriginal and Torres Strait Islander status data as being in need of improvement. This view is supported by findings of a recent project undertaken to assess the quality of identification of Aboriginal and Torres Strait Islander people in Western Australian hospital data. The project involved surveys in rural and metropolitan hospitals using the methodology developed in 1998 by the Aboriginal and Torres Strait Islander Health and Welfare Information Unit of the Australian Bureau of Statistics and the Australian Institute of Health and Welfare. The specific results are yet to be published.

The South Australian Department of Human Services regards its 1999–00 Aboriginal and Torres Strait Islander status data as being of acceptable quality. The Department conducts training courses in data collection every year and these reinforce the need to comply with *National Health Data Dictionary* standards for Aboriginal and Torres Strait Islander identification. A 30% loading for casemix payments is applied to Aboriginal and Torres Strait Islander separations in South Australia, and this acts as an incentive for improved identification.

The Tasmanian Department of Human Services reports that its 1999–00 data were much improved since 1998–99, but still in need of improvement. An outposted Australian Bureau of Statistics staff member is working with the department to improve the data quality throughout the State. The number of patients not responding to the Aboriginal and Torres Strait Islander questions is low.

The Australian Capital Territory Department of Health and Community Care considers that its 1999–00 data were in need of improvement. During 2000 the Department conducted training for both the Canberra Hospital and Calvary Hospital staff. Aboriginal Liaison Officers have been employed and Aboriginal and Torres Strait Islander status is a funding component in contracts with the hospitals. Identification has improved for 2000–01 and those data should prove to be satisfactory.

The Northern Territory's Territory Health Services reports that the quality of its 1999–00 Aboriginal and Torres Strait Islander status data is considered to be acceptable. Territory Health Services now retains historical reporting of Indigenous status and is soon to embark on a project where individual client systems will receive a report of individuals who have reported their Indigenous status as Aboriginal on one occasion and as Torres Strait Islander on another. System owners will follow up on these clients. All management and statistical reporting, however, is based on a person's currently reported Indigenous status.

## Country of birth

Australian-born patients accounted for 74.1% (4,367,413) of total separations, 73.8% in the public sector and 74.6% in the private sector (Table 6.8). There was some variation in the proportions of separations in the public and private sectors by country of birth. For Australian-born persons, 65.4% were in the public sector, as were 78.8% for persons born in Greece, 77.2% for persons born in the Middle East and North Africa, 46.9% for persons born in Japan and 50.9% for persons born in the United States of America. The age and sex-standardised separation rate for Australian-born patients was higher (307.4 per 1,000) than that for the overseas-born population (241.7 per 1,000).

**Table 6.1: Separations by age group and sex, all hospitals, States and Territories, 1999-00**

Sex	Age group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT <sup>(a)</sup>	Total
Females	Under 1	19,841	14,331	9,863	5,277	4,765	1,424	1,337	1,346	58,184
	1-4	24,561	15,188	14,895	7,862	6,378	1,477	1,029	1,173	72,563
	5-14	30,670	21,481	19,550	10,919	8,068	2,074	1,537	1,066	95,365
	15-24	89,270	67,404	58,213	31,745	26,135	6,822	3,881	4,525	287,995
	25-34	165,095	140,566	98,777	52,860	44,602	11,458	7,342	6,290	526,990
	35-44	122,775	110,113	80,241	42,753	34,625	9,278	6,169	5,232	411,186
	45-54	110,945	103,415	79,623	40,637	34,845	9,057	5,930	5,516	389,968
	55-64	111,726	95,838	74,536	35,737	32,183	7,983	5,631	4,398	368,032
	65-74	138,233	115,384	83,925	36,952	38,319	8,466	5,267	1,420	427,966
	75-84	129,992	100,848	68,228	31,138	36,906	8,261	3,675	734	379,782
85 and over	50,949	41,369	25,061	13,001	14,926	3,199	1,208	131	149,844	
	<i>Total<sup>(b)</sup></i>	<i>994,062</i>	<i>825,938</i>	<i>612,912</i>	<i>308,881</i>	<i>281,752</i>	<i>69,499</i>	<i>43,006</i>	<i>31,832</i>	<i>3,167,882</i>
Males	Under 1	28,092	20,470	13,693	7,302	6,647	1,835	1,700	1,563	81,302
	1-4	36,073	22,835	21,014	11,657	9,139	2,128	1,786	1,567	106,199
	5-14	43,022	28,657	26,936	13,854	10,124	2,684	1,905	1,450	128,632
	15-24	55,257	42,386	38,234	18,744	14,851	3,599	2,593	1,757	177,421
	25-34	66,979	57,078	45,167	26,358	19,760	4,934	3,257	3,275	226,808
	35-44	84,417	72,621	57,871	31,458	23,728	6,340	4,554	4,771	285,760
	45-54	107,817	89,420	76,137	35,676	32,717	7,363	5,864	5,212	360,206
	55-64	123,551	105,223	83,640	38,414	33,835	8,343	6,656	2,746	402,408
	65-74	156,785	137,937	95,872	43,833	44,093	10,442	7,229	2,775	498,966
	75-84	125,522	97,316	72,983	31,209	34,555	8,408	4,221	742	374,956
85 and over	28,512	23,543	15,865	8,102	8,613	1,853	639	127	87,254	
	<i>Total<sup>(b)</sup></i>	<i>856,027</i>	<i>697,487</i>	<i>547,412</i>	<i>266,607</i>	<i>238,062</i>	<i>57,929</i>	<i>40,404</i>	<i>25,987</i>	<i>2,729,915</i>
Persons <sup>(b)</sup>	Under 1	47,934	34,823	23,556	12,579	11,412	3,261	3,037	2,912	139,514
	1-4	60,634	38,023	35,909	19,519	15,517	3,605	2,815	2,740	178,762
	5-14	73,692	50,138	46,486	24,773	18,192	4,757	3,442	2,517	223,997
	15-24	144,527	109,790	96,447	50,489	40,986	10,421	6,474	6,289	465,423
	25-34	232,074	197,644	143,944	79,219	64,362	16,394	10,599	9,568	753,804
	35-44	207,192	182,734	138,112	74,211	58,353	15,619	10,723	10,009	696,953
	45-54	218,762	192,835	155,760	76,313	67,562	16,423	11,794	10,729	750,178
	55-64	235,277	201,061	158,176	74,151	66,018	16,327	12,287	7,144	770,441
	65-74	295,018	253,321	179,797	80,785	82,412	18,918	12,496	4,195	926,942
	75-84	255,514	198,164	141,211	62,347	71,461	16,669	7,896	1,476	754,738
85 and over	79,461	64,912	40,926	21,103	23,539	5,052	1,847	258	237,098	
<b>Total separations</b>		<b>1,850,090</b>	<b>1,523,447</b>	<b>1,160,324</b>	<b>575,489</b>	<b>519,814</b>	<b>127,446</b>	<b>83,410</b>	<b>57,840</b>	<b>5,897,860</b>

(a) Public hospitals only in the Northern Territory.

(b) Includes patient days for which sex and/or age group were not reported.

**Table 6.2: Separations by age group and sex, public hospitals, States and Territories, 1999–00**

<b>Sex</b>	<b>Age group</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Females	Under 1	16,980	12,093	8,287	3,899	4,453	938	870	1,346	48,866
	1–4	21,414	13,003	11,952	6,059	5,427	1,153	842	1,173	61,023
	5–14	24,231	16,772	15,169	7,892	6,579	1,381	1,261	1,066	74,351
	15–24	65,860	49,737	45,257	20,350	21,216	4,570	3,056	4,525	214,571
	25–34	115,309	98,429	66,180	32,862	34,872	6,628	5,403	6,290	365,973
	35–44	75,317	67,160	47,069	25,030	24,052	5,040	4,087	5,232	252,987
	45–54	61,727	58,841	42,429	22,144	20,179	4,570	3,778	5,516	219,184
	55–64	67,488	58,283	40,027	20,376	19,399	4,258	4,001	4,398	218,230
	65–74	89,991	71,206	44,999	23,074	24,619	4,750	4,024	1,420	264,083
	75–84	86,618	61,012	34,366	19,101	22,456	4,403	2,459	734	231,149
85 and over	38,628	26,713	14,280	8,855	8,883	1,947	863	131	100,300	
	<i>Total<sup>(a)</sup></i>	<i>663,564</i>	<i>533,250</i>	<i>370,015</i>	<i>189,642</i>	<i>192,135</i>	<i>39,638</i>	<i>30,644</i>	<i>31,832</i>	<i>2,050,720</i>
Males	Under 1	23,656	17,115	11,206	5,343	6,136	1,200	1,129	1,563	67,348
	1–4	31,021	19,578	16,820	9,076	7,802	1,585	1,456	1,567	88,905
	5–14	35,545	23,127	21,461	10,413	8,435	1,835	1,516	1,450	103,782
	15–24	40,179	28,497	27,728	11,513	10,365	2,406	1,864	1,757	124,309
	25–34	47,889	40,726	32,962	18,282	14,736	3,440	2,678	3,275	163,988
	35–44	56,421	48,700	38,674	20,640	16,831	3,993	3,636	4,771	193,666
	45–54	66,539	55,973	43,613	21,336	21,312	4,240	4,392	5,212	222,617
	55–64	76,656	68,823	49,969	23,576	22,303	5,160	4,971	2,746	254,204
	65–74	104,986	94,183	56,087	28,205	30,012	6,563	5,338	2,775	328,149
	75–84	78,693	58,326	31,042	17,308	23,811	4,737	2,616	742	217,275
85 and over	20,664	15,297	8,337	5,060	6,142	1,143	416	127	57,186	
	<i>Total<sup>(a)</sup></i>	<i>582,249</i>	<i>470,346</i>	<i>337,899</i>	<i>170,752</i>	<i>167,885</i>	<i>36,302</i>	<i>30,012</i>	<i>25,987</i>	<i>1,821,432</i>
Persons <sup>(a)</sup>	Under 1	40,637	29,221	19,493	9,242	10,589	2,138	1,999	2,912	116,231
	1–4	52,435	32,581	28,772	15,135	13,229	2,738	2,298	2,740	149,928
	5–14	59,776	39,899	36,630	18,305	15,014	3,216	2,777	2,517	178,134
	15–24	106,039	78,234	72,985	31,863	31,581	6,976	4,920	6,289	338,887
	25–34	163,198	139,155	99,142	51,144	49,608	10,068	8,081	9,568	529,964
	35–44	131,738	115,860	85,743	45,670	40,883	9,033	7,723	10,009	446,659
	45–54	128,266	114,814	86,042	43,480	41,491	8,811	8,170	10,729	441,803
	55–64	144,144	127,106	89,996	43,952	41,702	9,418	8,972	7,144	472,434
	65–74	194,977	165,389	101,086	51,279	54,631	11,323	9,362	4,195	592,242
	75–84	165,311	119,338	65,408	36,409	46,267	9,140	5,075	1,476	448,424
85 and over	59,292	42,010	22,617	13,915	15,025	3,090	1,279	258	157,486	
<b>Total separations</b>		<b>1,245,814</b>	<b>1,003,609</b>	<b>707,914</b>	<b>360,394</b>	<b>360,020</b>	<b>75,951</b>	<b>60,656</b>	<b>57,840</b>	<b>3,872,198</b>

(a) Includes separations for which sex and/or age group were not reported.

**Table 6.3: Separations by age group and sex, private hospitals, States and Territories, 1999–00**

<b>Sex</b>	<b>Age group</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Females	Under 1	2,861	2,238	1,576	1,378	312	486	467	n.a.	9,318
	1–4	3,147	2,185	2,943	1,803	951	324	187	n.a.	11,540
	5–14	6,439	4,709	4,381	3,027	1,489	693	276	n.a.	21,014
	15–24	23,410	17,667	12,956	11,395	4,919	2,252	825	n.a.	73,424
	25–34	49,786	42,137	32,597	19,998	9,730	4,830	1,939	n.a.	161,017
	35–44	47,458	42,953	33,172	17,723	10,573	4,238	2,082	n.a.	158,199
	45–54	49,218	44,574	37,194	18,493	14,666	4,487	2,152	n.a.	170,784
	55–64	44,238	37,555	34,509	15,361	12,784	3,725	1,630	n.a.	149,802
	65–74	48,242	44,178	38,926	13,878	13,700	3,716	1,243	n.a.	163,883
	75–84	43,374	39,836	33,862	12,037	14,450	3,858	1,216	n.a.	148,633
85 and over	12,321	14,656	10,781	4,146	6,043	1,252	345	n.a.	49,544	
	<i>Total<sup>(a)</sup></i>	<i>330,498</i>	<i>292,688</i>	<i>242,897</i>	<i>119,239</i>	<i>89,617</i>	<i>29,861</i>	<i>12,362</i>	<i>n.a.</i>	<i>1,117,162</i>
Males	Under 1	4,436	3,355	2,487	1,959	511	635	571	n.a.	13,954
	1–4	5,052	3,257	4,194	2,581	1,337	543	330	n.a.	17,294
	5–14	7,477	5,530	5,475	3,441	1,689	849	389	n.a.	24,850
	15–24	15,078	13,889	10,506	7,231	4,486	1,193	729	n.a.	53,112
	25–34	19,090	16,352	12,205	8,076	5,024	1,494	579	n.a.	62,820
	35–44	27,996	23,921	19,197	10,818	6,897	2,347	918	n.a.	92,094
	45–54	41,278	33,447	32,524	14,340	11,405	3,123	1,472	n.a.	137,589
	55–64	46,895	36,400	33,671	14,838	11,532	3,183	1,685	n.a.	148,204
	65–74	51,799	43,754	39,785	15,628	14,081	3,879	1,891	n.a.	170,817
	75–84	46,829	38,990	41,941	13,901	10,744	3,671	1,605	n.a.	157,681
85 and over	7,848	8,246	7,528	3,042	2,471	710	223	n.a.	30,068	
	<i>Total<sup>(a)</sup></i>	<i>273,778</i>	<i>227,141</i>	<i>209,513</i>	<i>95,855</i>	<i>70,177</i>	<i>21,627</i>	<i>10,392</i>	<i>n.a.</i>	<i>908,483</i>
Persons <sup>(a)</sup>	Under 1	7,297	5,602	4,063	3,337	823	1,123	1,038	n.a.	23,283
	1–4	8,199	5,442	7,137	4,384	2,288	867	517	n.a.	28,834
	5–14	13,916	10,239	9,856	6,468	3,178	1,541	665	n.a.	45,863
	15–24	38,488	31,556	23,462	18,626	9,405	3,445	1,554	n.a.	126,536
	25–34	68,876	58,489	44,802	28,075	14,754	6,326	2,518	n.a.	223,840
	35–44	75,454	66,874	52,369	28,541	17,470	6,586	3,000	n.a.	250,294
	45–54	90,496	78,021	69,718	32,833	26,071	7,612	3,624	n.a.	308,375
	55–64	91,133	73,955	68,180	30,199	24,316	6,909	3,315	n.a.	298,007
	65–74	100,041	87,932	78,711	29,506	27,781	7,595	3,134	n.a.	334,700
	75–84	90,203	78,826	75,803	25,938	25,194	7,529	2,821	n.a.	306,314
85 and over	20,169	22,902	18,309	7,188	8,514	1,962	568	n.a.	79,612	
<b>Total separations</b>		<b>604,276</b>	<b>519,838</b>	<b>452,410</b>	<b>215,095</b>	<b>159,794</b>	<b>51,495</b>	<b>22,754</b>	<b>n.a.</b>	<b>2,025,662</b>

(a) Includes separations for which sex and/or age group were not reported.

n.a. not available.

**Table 6.4: Patient days by age group and sex, all hospitals, States and Territories, 1999-00**

<b>Sex</b>	<b>Age group</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT<sup>(a)</sup></b>	<b>Total</b>
Females	Under 1	105,232	74,628	59,878	29,086	25,791	8,770	7,362	10,309	321,056
	1-4	47,893	26,624	25,408	14,803	11,897	2,444	1,969	6,415	137,453
	5-14	67,159	43,230	39,279	22,970	15,776	3,681	2,806	4,399	199,300
	15-24	232,399	165,430	148,384	84,785	64,736	18,004	10,346	14,201	738,285
	25-34	486,173	384,717	296,375	159,445	125,603	33,365	24,607	19,138	1,529,423
	35-44	387,623	290,470	204,070	121,160	96,940	27,096	18,492	14,023	1,159,874
	45-54	339,263	273,779	237,504	108,980	93,436	25,998	17,815	11,451	1,108,226
	55-64	372,451	277,235	223,726	107,341	101,953	28,107	17,050	11,247	1,139,110
	65-74	606,187	457,840	345,365	138,402	164,843	42,415	20,724	4,889	1,780,665
	75-84	851,572	641,829	463,875	198,023	253,090	70,505	24,073	3,846	2,506,813
85 and over	535,644	411,988	348,710	125,745	152,937	41,710	11,820	1,993	1,630,547	
	<i>Total<sup>(b)</sup></i>	<i>4,031,601</i>	<i>3,048,476</i>	<i>2,392,574</i>	<i>1,110,740</i>	<i>1,107,002</i>	<i>302,095</i>	<i>157,064</i>	<i>101,915</i>	<i>12,251,467</i>
Males	Under 1	130,753	96,336	75,352	36,659	33,494	10,197	9,873	9,874	402,538
	1-4	65,564	39,903	35,471	21,512	15,261	3,381	2,848	5,827	189,767
	5-14	86,357	53,179	50,182	27,427	18,703	4,939	3,517	5,364	249,668
	15-24	197,226	123,804	135,175	55,103	47,227	10,334	7,361	7,162	583,392
	25-34	247,498	163,811	163,012	75,614	65,687	13,529	8,549	11,654	749,354
	35-44	281,856	193,052	205,363	83,243	67,013	17,000	11,946	14,215	873,688
	45-54	382,896	238,872	222,839	96,553	89,297	22,505	16,094	12,327	1,081,383
	55-64	442,015	313,941	308,628	112,224	107,914	29,695	20,208	11,500	1,346,125
	65-74	698,283	500,391	397,867	164,542	184,115	46,934	28,204	9,812	2,030,148
	75-84	710,483	508,718	423,300	167,326	196,201	50,642	21,700	3,539	2,081,909
85 and over	239,764	194,414	141,319	64,741	79,819	19,806	5,048	1,383	746,294	
	<i>Total<sup>(b)</sup></i>	<i>3,482,695</i>	<i>2,426,517</i>	<i>2,158,508</i>	<i>904,944</i>	<i>904,731</i>	<i>228,962</i>	<i>135,348</i>	<i>92,660</i>	<i>10,334,365</i>
Persons <sup>(b)</sup>	Under 1	235,987	171,096	135,230	65,745	59,285	18,967	17,235	20,194	723,739
	1-4	113,457	66,527	60,879	36,315	27,158	5,825	4,817	12,242	327,220
	5-14	153,516	96,409	89,461	50,397	34,479	8,620	6,323	9,764	448,969
	15-24	429,625	289,234	283,559	139,888	111,963	28,338	17,707	21,382	1,321,696
	25-34	733,671	548,528	459,387	235,062	191,290	46,896	33,156	30,797	2,278,787
	35-44	669,479	483,522	409,433	204,403	163,953	44,097	30,438	28,254	2,033,579
	45-54	722,159	512,651	460,343	205,533	182,733	48,506	33,909	23,779	2,189,613
	55-64	814,466	591,176	532,354	219,565	209,867	57,803	37,258	22,747	2,485,236
	65-74	1,304,470	958,231	743,232	302,944	348,958	89,364	48,928	14,701	3,810,828
	75-84	1,562,055	1,150,547	887,175	365,349	449,291	121,149	45,773	7,385	4,588,724
85 and over	775,408	606,402	490,029	190,486	232,756	61,516	16,868	3,376	2,376,841	
<b>Total patient days</b>		<b>7,514,298</b>	<b>5,475,125</b>	<b>4,551,082</b>	<b>2,015,687</b>	<b>2,011,733</b>	<b>531,081</b>	<b>292,412</b>	<b>194,628</b>	<b>22,586,046</b>

(a) Public hospitals only in the Northern Territory.

(b) Includes patient days for which sex and/or age group were not reported.



**Table 6.5: Patient days by age group and sex, public hospitals, States and Territories, 1999-00**

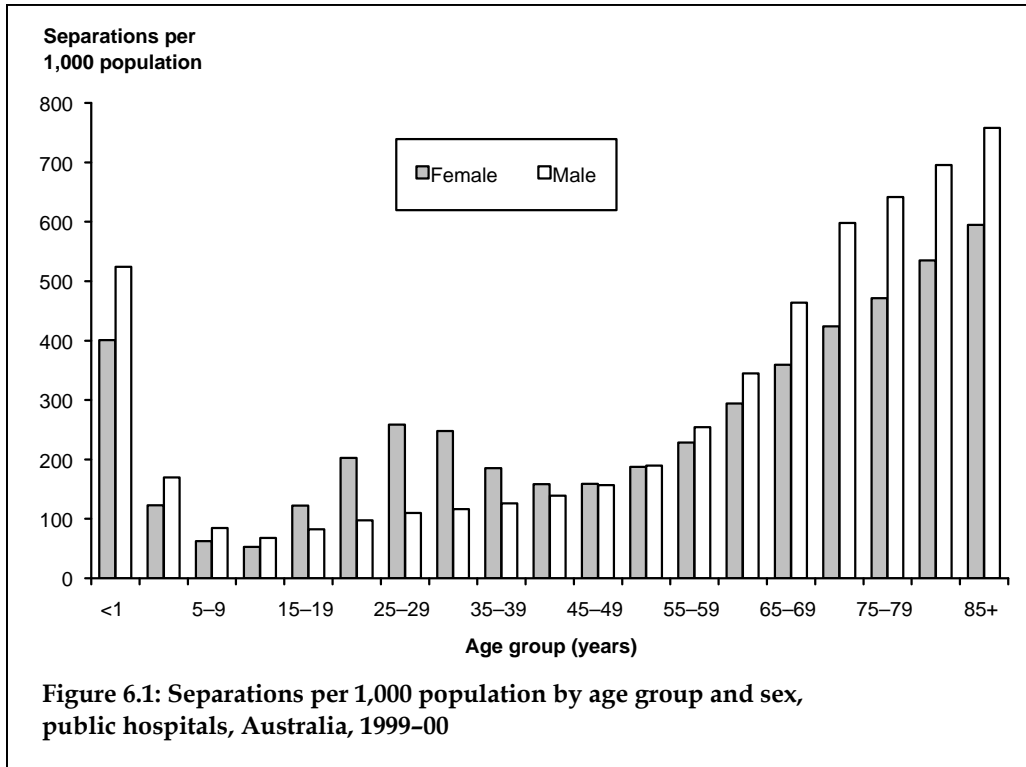
<b>Sex</b>	<b>Age group</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Females	Under 1	89,149	64,049	50,032	22,824	23,746	6,902	5,124	10,309	272,135
	1-4	43,669	24,061	21,187	12,369	10,900	2,038	1,731	6,415	122,370
	5-14	55,955	36,694	32,905	18,853	13,839	2,741	2,461	4,399	167,847
	15-24	188,427	129,766	121,372	63,437	54,507	12,923	8,542	14,201	593,175
	25-34	349,475	264,317	205,027	98,544	94,965	19,538	17,305	19,138	1,068,309
	35-44	276,946	183,237	125,970	72,807	67,386	15,959	11,652	14,023	767,980
	45-54	227,635	167,660	150,238	63,875	57,194	14,012	11,877	11,451	703,942
	55-64	262,029	180,021	139,111	66,911	64,934	17,191	12,185	11,247	753,629
	65-74	450,864	306,213	209,872	87,009	115,130	26,371	14,790	4,889	1,215,138
	75-84	646,579	431,454	260,255	128,343	170,923	47,774	16,098	3,846	1,705,272
85 and over	436,896	285,501	217,801	88,772	102,829	30,987	8,110	1,993	1,172,889	
	<i>Total<sup>(a)</sup></i>	<i>3,027,625</i>	<i>2,073,679</i>	<i>1,533,770</i>	<i>723,744</i>	<i>776,353</i>	<i>196,436</i>	<i>109,875</i>	<i>101,915</i>	<i>8,543,397</i>
Males	Under 1	111,416	82,663	63,041	28,829	31,286	7,527	7,311	9,874	341,947
	1-4	59,287	36,219	30,040	18,128	13,841	2,710	2,421	5,827	168,473
	5-14	73,696	45,731	42,282	22,988	16,663	3,780	2,959	5,364	213,463
	15-24	172,386	94,710	118,219	41,999	38,864	8,095	6,216	7,162	487,651
	25-34	213,195	126,864	141,899	61,545	56,207	10,565	7,400	11,654	629,329
	35-44	230,010	146,214	168,663	64,119	53,024	12,183	9,814	14,215	698,242
	45-54	292,524	168,742	149,516	66,279	63,893	14,924	11,629	12,327	779,834
	55-64	333,102	222,592	224,134	76,729	78,136	21,475	15,342	11,500	983,010
	65-74	548,798	364,225	271,747	110,865	137,342	32,411	20,732	9,812	1,495,932
	75-84	516,065	330,552	217,097	93,771	150,093	31,512	13,290	3,539	1,355,919
85 and over	191,113	137,399	80,233	41,338	63,185	14,739	3,421	1,383	532,811	
	<i>Total<sup>(a)</sup></i>	<i>2,741,592</i>	<i>1,756,007</i>	<i>1,506,871</i>	<i>626,590</i>	<i>702,534</i>	<i>159,921</i>	<i>100,535</i>	<i>92,660</i>	<i>7,686,710</i>
Persons <sup>(a)</sup>	Under 1	200,567	146,755	113,073	51,653	55,032	14,429	12,435	20,194	614,138
	1-4	102,956	60,280	51,227	30,497	24,741	4,748	4,152	12,242	290,843
	5-14	129,651	82,425	75,187	41,841	30,502	6,521	5,420	9,764	381,311
	15-24	360,813	224,476	239,591	105,436	93,371	21,018	14,758	21,382	1,080,845
	25-34	562,670	391,181	346,926	160,089	151,172	30,103	24,705	30,797	1,697,643
	35-44	506,956	329,451	294,633	136,926	120,410	28,142	21,466	28,254	1,466,238
	45-54	520,159	336,402	299,754	130,154	121,087	28,937	23,506	23,779	1,483,778
	55-64	595,131	402,613	363,245	143,640	143,070	38,666	27,527	22,747	1,736,639
	65-74	999,662	670,438	481,619	197,874	252,472	58,797	35,522	14,701	2,711,085
	75-84	1,162,644	762,006	477,352	222,114	321,016	79,286	29,388	7,385	3,061,191
85 and over	628,009	422,900	298,034	130,110	166,014	45,726	11,531	3,376	1,705,700	
<b>Total patient days</b>		<b>5,769,219</b>	<b>3,829,729</b>	<b>3,040,641</b>	<b>1,350,334</b>	<b>1,478,887</b>	<b>356,373</b>	<b>210,410</b>	<b>194,628</b>	<b>16,230,221</b>

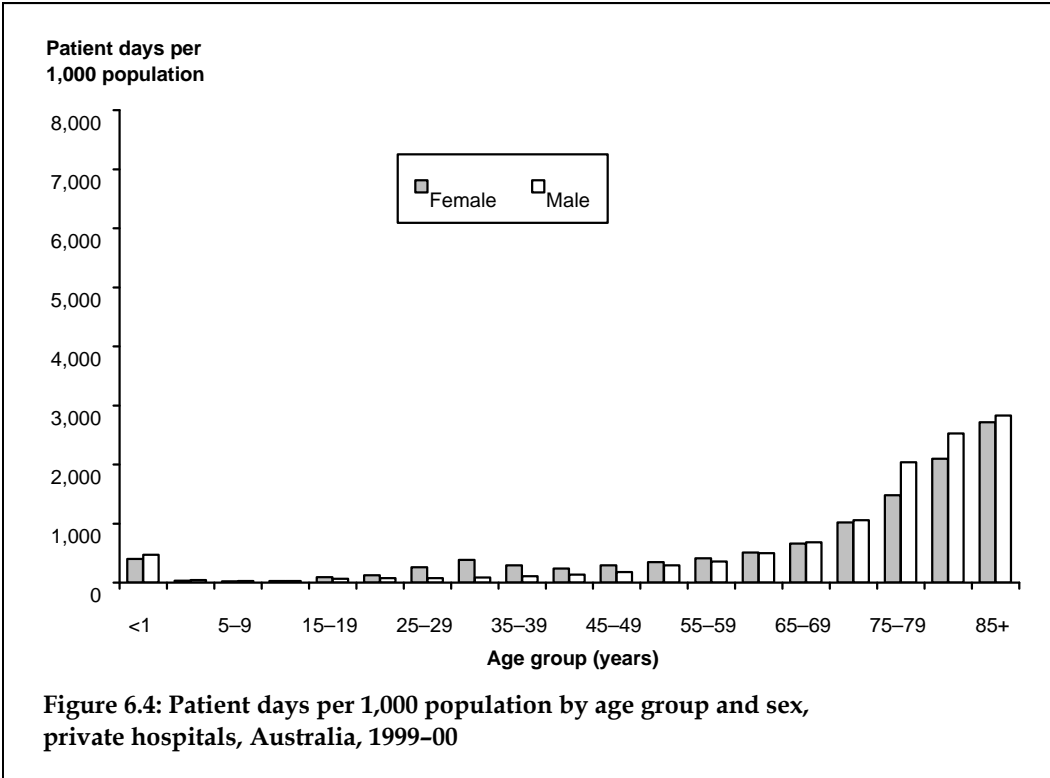
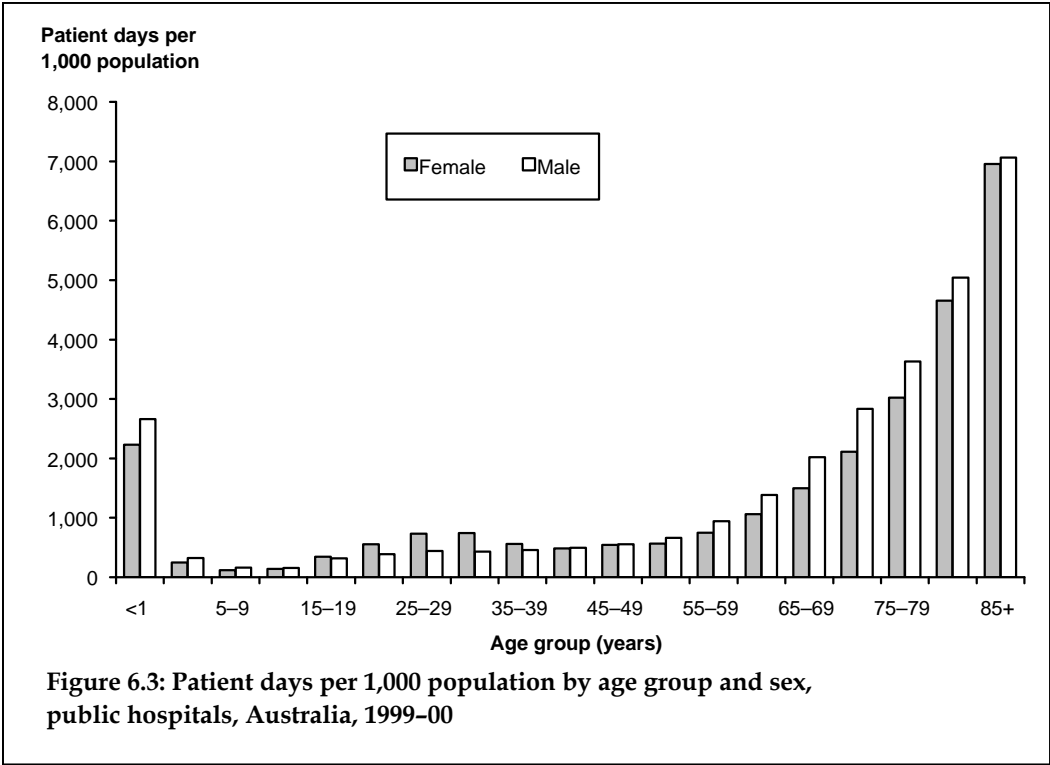
(a) Includes patient days for which sex and/or age group were not reported.

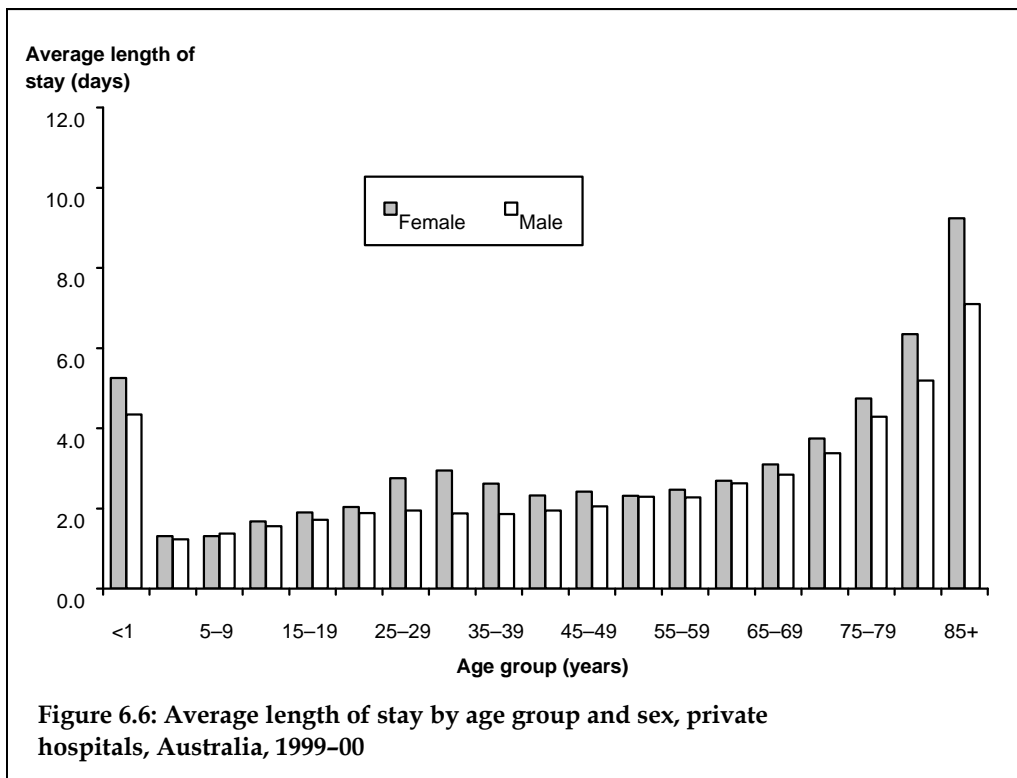
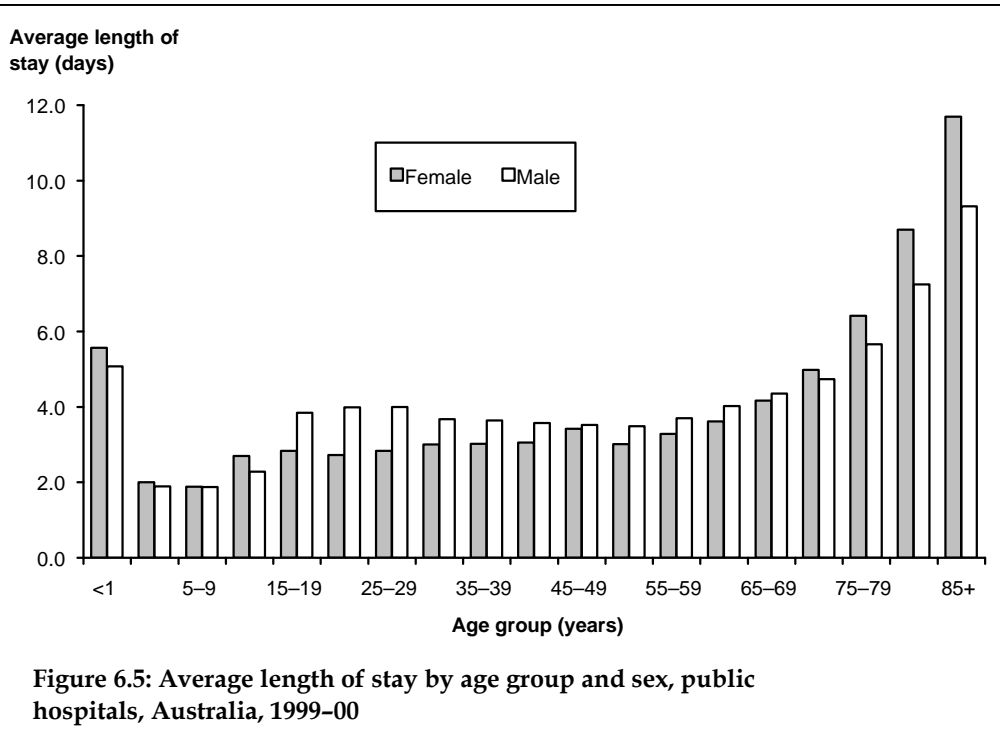
**Table 6.6: Patient days by age group and sex, private hospitals, States and Territories, 1999–00**

<b>Sex</b>	<b>Age group</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Females	Under 1	16,083	10,579	9,846	6,262	2,045	1,868	2,238	n.a.	48,921
	1–4	4,224	2,563	4,221	2,434	997	406	238	n.a.	15,083
	5–14	11,204	6,536	6,374	4,117	1,937	940	345	n.a.	31,453
	15–24	43,972	35,664	27,012	21,348	10,229	5,081	1,804	n.a.	145,110
	25–34	136,698	120,400	91,348	60,901	30,638	13,827	7,302	n.a.	461,114
	35–44	110,677	107,233	78,100	48,353	29,554	11,137	6,840	n.a.	391,894
	45–54	111,628	106,119	87,266	45,105	36,242	11,986	5,938	n.a.	404,284
	55–64	110,422	97,214	84,615	40,430	37,019	10,916	4,865	n.a.	385,481
	65–74	155,323	151,627	135,493	51,393	49,713	16,044	5,934	n.a.	565,527
	75–84	204,993	210,375	203,620	69,680	82,167	22,731	7,975	n.a.	801,541
85 and over	98,748	126,487	130,909	36,973	50,108	10,723	3,710	n.a.	457,658	
	<i>Total<sup>(a)</sup></i>	<i>1,003,976</i>	<i>974,797</i>	<i>858,804</i>	<i>386,996</i>	<i>330,649</i>	<i>105,659</i>	<i>47,189</i>	<i>n.a.</i>	<i>3,708,070</i>
Males	Under 1	19,337	13,673	12,311	7,830	2,208	2,670	2,562	n.a.	60,591
	1–4	6,277	3,684	5,431	3,384	1,420	671	427	n.a.	21,294
	5–14	12,661	7,448	7,900	4,439	2,040	1,159	558	n.a.	36,205
	15–24	24,840	29,094	16,956	13,104	8,363	2,239	1,145	n.a.	95,741
	25–34	34,303	36,947	21,113	14,069	9,480	2,964	1,149	n.a.	120,025
	35–44	51,846	46,838	36,700	19,124	13,989	4,817	2,132	n.a.	175,446
	45–54	90,372	70,130	73,323	30,274	25,404	7,581	4,465	n.a.	301,549
	55–64	108,913	91,349	84,494	35,495	29,778	8,220	4,866	n.a.	363,115
	65–74	149,485	136,166	126,120	53,677	46,773	14,523	7,472	n.a.	534,216
	75–84	194,418	178,166	206,203	73,555	46,108	19,130	8,410	n.a.	725,990
85 and over	48,651	57,015	61,086	23,403	16,634	5,067	1,627	n.a.	213,483	
	<i>Total<sup>(a)</sup></i>	<i>741,103</i>	<i>670,510</i>	<i>651,637</i>	<i>278,354</i>	<i>202,197</i>	<i>69,041</i>	<i>34,813</i>	<i>n.a.</i>	<i>2,647,655</i>
Persons <sup>(a)</sup>	Under 1	35,420	24,341	22,157	14,092	4,253	4,538	4,800	n.a.	109,601
	1–4	10,501	6,247	9,652	5,818	2,417	1,077	665	n.a.	36,377
	5–14	23,865	13,984	14,274	8,556	3,977	2,099	903	n.a.	67,658
	15–24	68,812	64,758	43,968	34,452	18,592	7,320	2,949	n.a.	240,851
	25–34	171,001	157,347	112,461	74,973	40,118	16,793	8,451	n.a.	581,144
	35–44	162,523	154,071	114,800	67,477	43,543	15,955	8,972	n.a.	567,341
	45–54	202,000	176,249	160,589	75,379	61,646	19,569	10,403	n.a.	705,835
	55–64	219,335	188,563	169,109	75,925	66,797	19,137	9,731	n.a.	748,597
	65–74	304,808	287,793	261,613	105,070	96,486	30,567	13,406	n.a.	1,099,743
	75–84	399,411	388,541	409,823	143,235	128,275	41,863	16,385	n.a.	1,527,533
85 and over	147,399	183,502	191,995	60,376	66,742	15,790	5,337	n.a.	671,141	
<b>Total patient days</b>		<b>1,745,079</b>	<b>1,645,396</b>	<b>1,510,441</b>	<b>665,353</b>	<b>532,846</b>	<b>174,708</b>	<b>82,002</b>	<b>n.a.</b>	<b>6,355,825</b>

(a) Includes patient days for which sex and/or age group were not reported.  
n.a. not available.







**Table 6.7: Separations by Aboriginal or Torres Strait Islander status<sup>(a)</sup> and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Aboriginal or Torres Strait Islander status</b>	<b>Public hospitals</b>								
Aboriginal but not Torres Strait Islander origin	29,283	6,371	37,341	33,740	12,104	917	204	33,703	153,663
Torres Strait Islander but not Aboriginal origin	462	92	7,709	47	21	258	15	72	8,676
Aboriginal and Torres Strait Islander origin	120	309	1,776	160	58	30	0	548	3,001
Aboriginal or Torres Strait Islander origin, not further specified	0	0	0	0	0	0	939	0	939
Not Aboriginal or Torres Strait Islander origin	1,215,949	996,837	636,511	326,444	337,547	69,899	58,746	23,399	3,665,332
Not reported	0	0	24,577	3	10,290	4,847	752	118	40,587
<i>Total</i>	<i>1,245,814</i>	<i>1,003,609</i>	<i>707,914</i>	<i>360,394</i>	<i>360,020</i>	<i>75,951</i>	<i>60,656</i>	<i>57,840</i>	<i>3,872,198</i>
	<b>Private hospitals</b>								
Aboriginal but not Torres Strait Islander origin	2,675	86	453	682	165	0	3	n.a.	4,064
Torres Strait Islander but not Aboriginal origin	105	31	67	35	4	0	0	n.a.	242
Aboriginal and Torres Strait Islander origin	28	73	105	33	10	17	0	n.a.	266
Aboriginal or Torres Strait Islander origin, not further specified	0	0	0	0	0	0	0	n.a.	0
Not Aboriginal or Torres Strait Islander origin	601,465	519,628	361,847	214,345	151,699	43,199	22,746	n.a.	1,914,929
Not reported	3	20	89,938	0	7,916	8,279	5	n.a.	106,161
<i>Total</i>	<i>604,276</i>	<i>519,838</i>	<i>452,410</i>	<i>215,095</i>	<i>159,794</i>	<i>51,495</i>	<i>22,754</i>	<i>n.a.</i>	<i>2,025,662</i>
	<b>All hospitals<sup>(b)</sup></b>								
Aboriginal but not Torres Strait Islander origin	31,958	6,457	37,794	34,422	12,269	917	207	33,703	157,727
Torres Strait Islander but not Aboriginal origin	567	123	7,776	82	25	258	15	72	8,918
Aboriginal and Torres Strait Islander origin	148	382	1,881	193	68	47	0	548	3,267
Aboriginal or Torres Strait Islander origin, not further specified	0	0	0	0	0	0	939	0	939
Not Aboriginal or Torres Strait Islander origin	1,817,414	1,516,465	998,358	540,789	489,246	113,098	81,492	23,399	5,580,261
Not reported	3	20	114,515	3	18,206	13,126	757	118	146,748
<b>Total</b>	<b>1,850,090</b>	<b>1,523,447</b>	<b>1,160,324</b>	<b>575,489</b>	<b>519,814</b>	<b>127,446</b>	<b>83,410</b>	<b>57,840</b>	<b>5,897,860</b>
Separation rate <sup>(c)</sup> for Aboriginal and/or Torres Strait Islanders per 1,000	423.8	393.6	644.4	815.8	785.7	133.2	1835.7 <sup>(d)</sup>	962.5	620.9
Separation rate <sup>(c)</sup> for others per 1,000	274.0	307.5	286.6	299.7	306.9	234.5	288.6	207.4	288.4
Separation rate <sup>(c)</sup> for all per 1,000	275.4	307.8	325.6	311.3	322.7	258.4	293.1	365.3	300.2

(a) Identification of Aboriginal and Torres Strait Islander patients is not considered to be complete and completeness varies amongst the jurisdictions. See the text of Chapter 6 for further detail.

(b) Public hospitals only in the Northern Territory.

(c) The rates were directly age-standardised to the Australian population at 30 June 1991. For details, see Appendix 3. Aboriginal and Torres Strait Islander population data are included in Appendix 6.

(d) Rates reported for the Aboriginal and Torres Strait Islander population in the Australian Capital Territory are subject to variability due to the small population of Aboriginal and Torres Strait Islanders in the Ter n.a. not available.

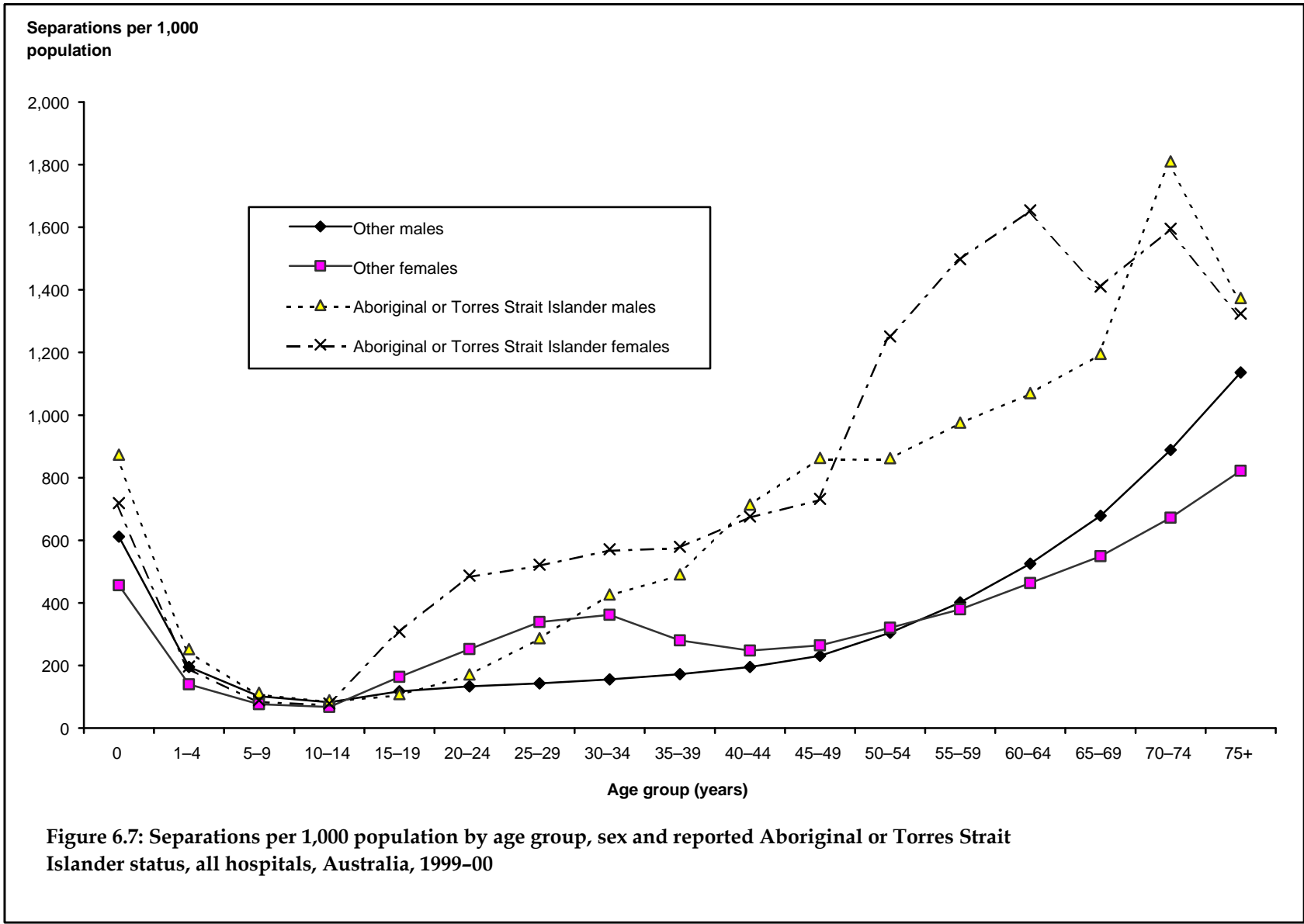


Table 6.8: Separations by selected country/region of birth and hospital sector, Australia, 1999-00

Country/region	Separations			Separations per 1,000 population <sup>(a)</sup>		
	Public hospitals	Private hospitals	All sectors	Public hospitals	Private hospitals	All sectors
Australia	2,855,921	1,511,492	4,367,413	200.1	107.3	307.4
New Zealand	58,596	24,195	82,791	173.3	69.7	243.0
Papua New Guinea	4,349	2,436	6,785	222.7	128.4	351.1
Fiji	10,069	2,966	13,035	307.0	91.6	398.6
Oceania (other)	12,440	4,012	16,452	389.4	122.7	512.1
<i>Oceania (total)</i>	<i>2,941,375</i>	<i>1,545,101</i>	<i>4,486,476</i>	<i>200.1</i>	<i>106.4</i>	<i>306.4</i>
United Kingdom and Ireland	261,558	141,097	402,655	154.6	77.8	232.4
Greece	49,191	13,262	62,453	198.2	60.3	258.5
Italy	83,343	41,181	124,524	185.2	92.0	277.3
Malta	15,761	5,710	21,471	186.2	70.0	256.2
Former Yugoslavia	48,284	11,962	60,246	179.2	41.4	220.6
Former USSR and Baltic States	20,592	6,272	26,864	197.7	61.7	259.5
Hungary	8,420	4,975	13,395	144.3	72.6	216.9
Poland	19,843	8,888	28,731	142.4	66.1	208.5
Romania	2,977	1,206	4,183	169.8	67.9	237.6
Austria	5,163	4,291	9,454	209.3	294.2	503.5
France	3,740	2,075	5,815	178.9	91.1	270.0
Germany	28,070	15,758	43,828	165.5	81.0	246.5
Netherlands	24,946	10,553	35,499	165.4	67.2	232.7
Europe and the former USSR (other)	31,082	13,513	44,595	202.0	81.7	283.7
<i>Europe and the former USSR (total)</i>	<i>602,970</i>	<i>280,743</i>	<i>883,713</i>	<i>168.8</i>	<i>75.0</i>	<i>243.7</i>
Lebanon	24,944	4,979	29,923	302.5	52.8	355.3
Turkey	9,139	1,804	10,943	293.2	54.1	347.3
Iran	3,237	1,056	4,293	185.7	47.6	233.3
Egypt	11,187	5,273	16,460	204.6	83.3	287.9
Middle East and North Africa (other)	11,625	4,666	16,291	223.3	91.7	315.0
<i>Middle East and North Africa (total)</i>	<i>60,132</i>	<i>17,778</i>	<i>77,910</i>	<i>253.0</i>	<i>69.2</i>	<i>322.1</i>

(continued)



Table 6.8 (continued): Separations by selected country/region of birth and hospital sector, Australia, 1999-00

Country/region	Separations			Separations per 1,000 population <sup>(a)</sup>		
	Public hospitals	Private hospitals	All sectors	Public hospitals	Private hospitals	All sectors
Myanmar	2,106	1,198	3,304	122.3	64.2	186.5
Indonesia	5,949	3,575	9,524	135.6	77.4	212.9
Cambodia	4,879	904	5,783	232.2	39.4	271.6
Malaysia	8,641	6,582	15,223	138.8	91.0	229.8
Philippines	18,700	3,774	22,474	166.0	29.0	194.9
Singapore	3,471	2,672	6,143	292.3	207.8	500.1
Vietnam	26,391	5,522	31,913	155.7	29.2	184.9
Thailand	2,297	764	3,061	132.6	52.1	184.7
China	22,732	8,045	30,777	116.1	38.8	154.9
Hong Kong and Macau	5,871	4,169	10,040	220.9	157.5	378.4
Japan	2,321	2,624	4,945	210.6	224.3	434.9
Korea	3,930	1,203	5,133	109.8	32.9	142.8
India	16,468	8,127	24,595	140.8	64.7	205.5
Sri Lanka	10,107	4,128	14,235	172.8	65.1	237.8
Asia (other)	9,491	2,809	12,300	246.1	61.8	307.9
<i>Asia (total)</i>	<i>143,354</i>	<i>56,096</i>	<i>199,450</i>	<i>148.8</i>	<i>55.8</i>	<i>204.7</i>
Canada	3,812	3,207	7,019	144.7	118.5	263.2
United States of America	6,720	6,489	13,209	131.8	117.5	249.4
North America (other)	262	59	321	684.2	156.4	840.5
<i>North America (total)</i>	<i>10,794</i>	<i>9,755</i>	<i>20,549</i>	<i>137.7</i>	<i>116.1</i>	<i>253.8</i>
Argentina	1,843	812	2,655	146.0	58.2	204.2
Chile	5,237	1,744	6,981	217.3	60.7	278.0
The Caribbean	1,104	702	1,806	383.8	161.5	545.2
Other	8,129	2,479	10,608	203.1	57.6	260.6
<i>South America, Central America and The Caribbean (total)</i>	<i>16,313</i>	<i>5,737</i>	<i>22,050</i>	<i>207.3</i>	<i>64.4</i>	<i>271.7</i>
Mauritius	3,751	1,783	5,534	222.2	84.9	307.1
South Africa	8,883	7,511	16,394	128.2	101.2	229.4
Africa excluding North Africa (other)	7,853	3,594	11,447	187.4	89.4	276.8
<i>Africa excluding North Africa (total)</i>	<i>20,487</i>	<i>12,888</i>	<i>33,375</i>	<i>154.5</i>	<i>92.9</i>	<i>247.3</i>
<i>Overseas (total)</i>	<i>939,504</i>	<i>416,606</i>	<i>1,356,110</i>	<i>171.8</i>	<i>69.9</i>	<i>241.7</i>
Not stated or inadequately described	76,773	97,564	174,337	..	..	..
<b>Total</b>	<b>3,872,198</b>	<b>2,025,662</b>	<b>5,897,860</b>	<b>198.5</b>	<b>101.2</b>	<b>299.7</b>

(a) The rates were directly age and sex standardised to the Australian population at 30 June 1991. For details, see Appendix 3. Population data by country of birth are included in Appendix 6.

.. not applicable.

# 7 Principal diagnoses for admitted patients

## Introduction

The principal diagnosis is defined as the diagnosis established, after study, to be chiefly responsible for occasioning the admitted patient's episode of care in hospital. Data on principal diagnoses provide information on the diseases and conditions for which hospitalisations occur and can provide an indirect measure of community morbidity.

The principal diagnosis is usually a disease, injury or poisoning, but can also be the limited care or service provided for a current condition (for example, dialysis for renal disease), or other reasons for hospitalisation.

Principal diagnoses for 1999–00 were classified, coded and reported to the National Hospital Morbidity Database by all States and Territories except South Australia using the first edition of the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM) (National Centre for Classification in Health 1998). South Australia mapped the data collected using this classification forward to codes of the second edition of ICD-10-AM (National Centre for Classification in Health 2000). The Institute mapped these data backward to first edition codes so that national data could be presented in a single classification in this report. The mapped data are not completely equivalent to unmapped data, so this means that the South Australian data should be interpreted with these mappings in mind. Further information about the backward mapping and other information about the quality of the ICD-10-AM coded data are presented in Appendix 3.

The ICD-10-AM disease classification is hierarchical, with a small number of summary disease chapters that are divided into a large number of more specific disease groupings (represented by 3-character codes) which, in turn, can mostly be divided into an even larger number of very specific disease categories represented by 4- and 5-character codes. The tables and figures in this chapter use the codes and abbreviated descriptions of the ICD-10-AM disease classification. Full descriptions of the categories are available in the ICD-10-AM publication.

Most of the information is presented using three methods of grouping principal diagnoses based on the ICD-10-AM disease classification:

- ICD-10-AM disease chapters – these 19 groups provide information aggregated at the ICD-10-AM chapter level (Figures 7.2 and 7.3);
- ICD-10-AM disease groupings – these 73 groups were chosen to provide more detailed information than ICD-10-AM chapters, but still cover the entire disease classification at a manageable level (Tables 7.1 to 7.8); and
- 3-character ICD-10-AM groupings – 1,540 categories describe the diseases at a quite specific level. Detailed information is presented for the 30 of these groups with the highest number of separations (Tables 7.10 to Table 7.18) 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/hse/ahs99-00/index.html> (Tables S7.1 and S7.2).

In addition:

- Table 7.19 uses a mixture of ICD-10-AM chapters, 3- and 4-character categories and other groupings to present information on diagnoses reported for public psychiatric hospitals.

Tables are presented with summary separation, patient day and 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 rankings of the various disease groups (by numbers of separations or patient days) depend to some extent on the chosen groups of diagnosis codes.

Table 7.9 presents information on the number of diagnoses reported. These include the principal diagnosis and any additional diagnoses (conditions or complaints either co-existing with the principal diagnosis, or arising during the episode of care).

Although a principal diagnosis is expected to be reported for every separation, in practice it is missing for a small number of records (indicated as *Not reported* in the tables). The majority of records without a principal diagnosis were reported by Victoria (mainly for private hospitals).

Some data for private hospitals in Tasmania and the Australian Capital Territory have not been included in Tables 7.4, 7.6, 7.11, 7.13 and 7.15. These data were supplied but are not published for confidentiality reasons.

## Principal diagnosis and other data elements reported for separations

The information on principal diagnosis reported in this chapter is compiled in the National Hospital Morbidity Database with a range of other data. Figure 7.1 demonstrates this using the example of the principal diagnosis I21 *Acute myocardial infarction* (AMI).

There were 35,424 separations with a principal diagnosis of AMI, with an average length of stay of 6.4 days. The majority of separations with this principal diagnosis were in the public sector (82.5%), and 99.2% of cases had acute care. Almost 70% of separations were for public patients in comparison to 58.8% overall (Table 5.1). The majority of patients (23,937, 67.6%) with a principal diagnosis of AMI had a separation mode of *Other*, suggesting that most of these patients went home after separation from hospital. However, for 9.8% of patients the separation mode was *Died*, in comparison to 1.1% for separations overall (Table 5.14). The most common diagnosis in addition to a principal diagnosis of AMI was *Essential (primary) hypertension* (I10), while the most common procedure performed was *Coronary angiography with left heart catheterisation* (procedure code 38218-00 [Block 668]). The most commonly reported AR-DRG was *Circulatory disorders with acute myocardial infarction without invasive cardiac investigative procedure without catastrophic or severe complications or comorbidity* (AR-DRG F60B).

## ICD-10-AM chapters

Figures 7.2 and 7.3 provide a summary of the proportions of separations and patient days reported for each of the ICD-10-AM disease chapters.

Ignoring the diverse categories that make up the *Factors influencing health status and contact with health services* group, the chapter with the highest number of separations in the public sector was *Diseases of the digestive system*, followed by *Pregnancy, childbirth and the puerperium* and *Injury and poisoning and certain other consequences of external causes*. In the private sector, *Diseases of the digestive system* had the largest number of separations, followed by *Diseases of the musculoskeletal system and connective tissue* and *Neoplasms*. The highest numbers of patient days for the public sector were reported for the *Mental and behavioural disorders* and *Diseases of the circulatory system* chapters. The *Diseases of the circulatory system*, *Neoplasms* and *Diseases of the musculoskeletal system and connective tissue* chapters accounted for the highest numbers of patient days in the private sector.

For the public and private sectors combined, the two chapters with the most separations were *Diseases of the digestive system* and *Diseases of the circulatory system*. The largest numbers of patient days were reported for the *Mental disorders* and *Diseases of the circulatory system* chapters.

## Broad disease groupings

### Sector

Tables 7.1 and 7.2 summarise the principal diagnosis data. In the public sector (Table 7.1), the highest number of separations was reported for *Encounter with health service for specific procedure* (Z40–Z54), which includes three of the top four diagnoses (in 3-character groupings) of *Care involving dialysis*, *Other medical care* and *Care involving use of rehabilitation procedures* (Table 7.10). *Mental and behavioural disorders* (F00–F99) stands out as a high volume group (83.6 separations per 10,000 population), for its high use of beds (1,245.3 patient days per 10,000 population) and for the long average length of stay (14.9 days). Other high utilisation diagnosis groups included *Signs, symptoms and abnormal findings* (R00–R99), *Complications relating to labour and delivery* (O30–O82), *Diseases of musculoskeletal and connective tissue* (M00–M99), *Injuries to upper and lower limbs* (S40–S99) and *Ischaemic heart disease* (I20–I25).

In the private sector (Table 7.2), *Encounter with health service for specific procedure* (Z40–Z54) recorded the highest number of separations. High numbers of separations were also reported for *Diseases of musculoskeletal and connective tissue* (M00–M99) and *Diseases of the eye and adnexa* (H00–H59). *Diseases of musculoskeletal and connective tissue* (M00–M99), *Encounter with health service for specific procedure* (Z40–Z54) and *Mental and behavioural disorders* (F00–F99) recorded the highest numbers of patient days.

The groups with the highest proportions of separations in the public sector (rather than in the private sector) were *HIV disease* (B20–B24) (99% in the public sector, 363) and *Poisonings and toxic effects* (T36–T65) (95%, 34,763) (derived from Tables 7.1 and 7.2). The groups with the highest proportions of separations in the private sector (rather than in the public sector) were *Encounter relating to personal and family history* (Z80–Z99) (69.2% in the private sector, 17,471) and *Diseases of the oral cavity, salivary glands and jaws* (K00–K14) (65.6% in the private sector, 64,916).

Almost 88% of patients in public hospitals were public patients, in contrast to just 4.0% in private hospitals. The highest proportion of public patients in public hospitals was for *HIV disease* (B20–B24, 98.9%), while the lowest was for *Injuries to thorax, abdomen, back, spine and pelvis* (S20–S39, 70.8%). The highest proportion of public patients in private hospitals

was for *Poisoning and toxic effects* (T36–T65, 30.9%), followed by *Encounter with health service in other circumstances* (Z55–Z76, 18.9%).

## States and Territories

Tables 7.3 to 7.6 contain detail on the pattern of hospital use in the States and Territories for the diagnosis groups, in both the public and private sectors. These tables enable State by State comparisons of overall hospital use for the different diagnosis groups, and the share of separations between the private and public sectors. For example, the proportions of separations for *Intestinal infectious diseases* (A00–A09) in public hospitals (rather than private hospitals) was higher in New South Wales (92.2%, 12,437) than in Queensland (74.2%, 5,082). The proportion of total patient days for *Influenza and pneumonia* (J10–J18) that were in private hospitals (rather than public hospitals) varied markedly by State, from 13.4% in New South Wales (18,761) to 34.0% in Queensland (24,970).

## Age group and sex

In Tables 7.7 and 7.8, information on the number of separations by age group and diagnosis groups is presented for males and females. These tables show a number of different patterns in the age distributions of separations for the various disease groups. For example, patients admitted for *Intestinal infectious diseases* (A00–A09) were mostly in the younger age groups, while the opposite was the case for neoplasms. Other groups of diseases had a peak in the middle age groups, for example obstetric cases (O00–O99) for females, and *Diseases of the musculoskeletal and connective tissue* (M00–M99) for males and *Mental and behavioural disorders* (F00–F99) for both females and males.

These tables also indicate the relative importance of the disease groups as causes of hospitalisation for each sex and age group. For example, in the group of males over 75 years common diagnoses were *Diseases of the eye and adnexa* (H00–H59), *Signs, symptoms and abnormal findings* (R00–R99) and *Ischaemic heart disease* (I20–I25) groups. For females in the 1–4 years age group, *Diseases of ear and mastoid processes* (H60–H99), *Intestinal infectious diseases* (A00–A09) and *Signs, symptoms and abnormal findings* (R00–R99) were commonly reported.

## Number of diagnosis codes

The National Hospital Morbidity Database contains data on principal diagnosis and additional diagnoses. Additional diagnoses include co-morbidities (co-existing conditions) and/or complications which may contribute to longer lengths of stay, more intensive treatment or the use of greater resources. Ideally, the number of additional diagnoses recorded for a patient should be related to the person's clinical condition, and not be restricted by administrative or technical limitations.

Table 7.9 presents information on the number of diagnosis codes (principal and additional) reported to the National Hospital Morbidity Database. There were marked differences between the States and Territories in the maximum number of diagnoses reported; for example, in the public sector, 12 diagnoses for Victoria and 31 for Queensland. However, with the exception of the Australian Capital Territory public sector, the average number of diagnosis codes per separation varied little among the jurisdictions, for both the public and

private sectors. The Institute requested a maximum of 31 diagnosis codes so this may have restricted the number of codes reported by Queensland.

In the public sector 4.0% of records had five or more procedure codes, but in the private sector 2.9% 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.

Overall, the average number of diagnosis codes per separation reported for the public sector was slightly higher than for the private sector. In the public sector 19.5% of records had five or more diagnosis codes (756,795), but in the private sector only 12.1% of records fell into this category (244,395). This may have occurred if more complicated cases were treated in public hospitals.

## High volume diagnoses

Tables 7.10 to 7.19 present information on the most common principal diagnoses (at the 3-character level of the ICD-10-AM classification).

Tables 7.10 and 7.11 contain summary separation, patient day and average length of stay statistics for the 30 diagnoses with the most separations in public and private hospitals. In the public sector, the most common principal diagnosis groups were *Care involving dialysis* (Z49) and *Other medical care* (Z51, 93.3% of which, 119,096, were for chemotherapy for neoplasm, Z51.1 and other chemotherapy Z51.2). For both of these, the proportion of separations that were same day separations was over 98% (99.6% and 98.6%, respectively) and the average length of stay was relatively short. The highest numbers of patient days were reported for *Care involving use of rehabilitation procedures* (Z50) and for *Schizophrenia* (F20), for which the average length of stay was 14.6 and 36.7 days, respectively.

In the private sector, the most frequently reported principal diagnosis was *Other medical care* (Z51, 97.4% of which, 92,239, were for chemotherapy), with the second most frequent being *Care involving dialysis* (Z49). The principal diagnosis with the highest number of patient days, *Care involving use of rehabilitation procedures* (Z50), also had the longest average length of stay (9.9 days).

The highest proportion of public patients in public hospitals was for *Schizophrenia* (F20, 97.9%), while the lowest was for *Other cataract* (H26, 74.7%). The highest proportion of public patients in private hospitals was for *Care involving dialysis* (Z51, 18.5%), followed by *Chronic ischaemic heart disease* (I25, 11.3%). For the remaining diagnoses in private hospitals the proportion of public patients was less than 10%.

There was some variation between the States and Territories in the relative number of separations for the most common diagnoses (Tables 7.12 and 7.13). For example, in the public sector, while there were large numbers of separations for *Care involving use of rehabilitation procedures* (Z50) in New South Wales, Victoria and Queensland, the numbers were relatively low for the remaining jurisdictions. Similarly, in the private sector, there were large numbers of separations for *Other medical care* (Z51) and *Care involving dialysis* (Z49) in Victoria and Queensland in comparison to the other jurisdictions.

Information on the average lengths of stay by State and Territory is presented in Tables 7.14 and 7.15. The age and sex distributions of these separations are presented in Tables 7.16 and 7.17.

## Private free-standing day hospital facilities

Table 7.18 contains summary separation and public patient separation statistics for the 30 diagnoses with the most separations in private free-standing day hospital facilities. The most common principal diagnosis groups were *Other medical care* (Z51, 20,962) and *Senile cataract* (H25, 19,018). The proportion of public patient separations was highest for *Chronic ischaemic heart disease* (53.7%), with less than 10% for the remaining disease groups.

## Public psychiatric hospitals

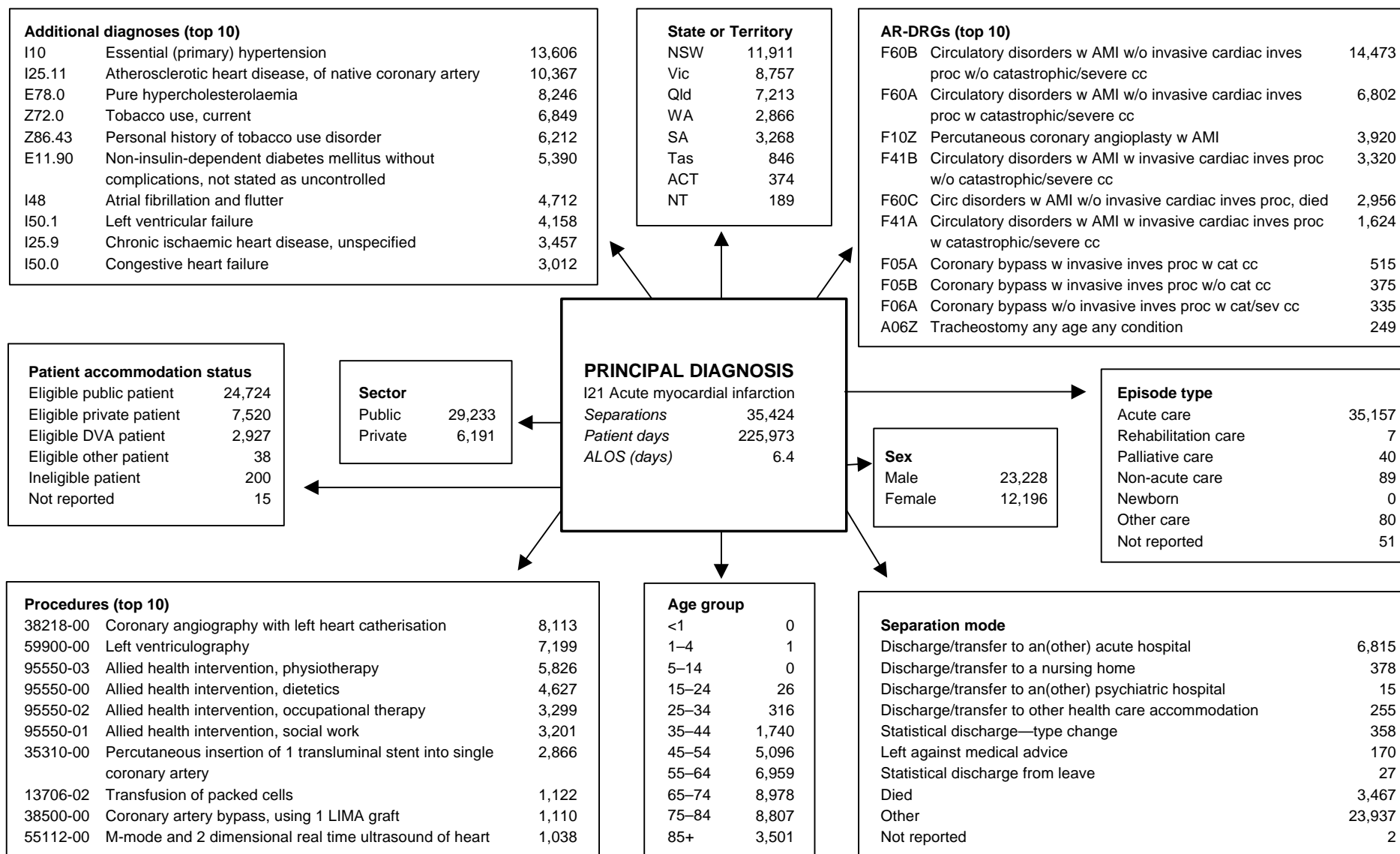
Almost 97% of separations in public psychiatric hospitals were public patients and most diagnoses were in the *Mental and behavioural disorders* chapter (F00–F99) (Table 7.19). *Schizophrenia* (F20) was the most common diagnosis reported (4,116), the next most common being *Depressive episode or disorder* (F23–F33, 2,277). *Schizophrenia* (F20) accounted for more patient days than any other group (538,269), with the next highest being *Mental and behavioural disorders due to use of alcohol* (F10, 98,095).

The average length of stay was high for most of the disease groups and only 13.3% of separations (2,379) were same day separations, compared with 45.8% in public acute hospitals. The average length of stay for *Schizophrenia* in public psychiatric hospitals (130.8 days) was markedly higher than that in public hospitals overall (Table 7.10: 36.7 days).

Separations in public psychiatric hospitals include some with extended lengths of stay, up to several years. Hence the average lengths of stay should be interpreted taking into consideration the inclusion of some very long stay and non-acute separations.

## Additional data

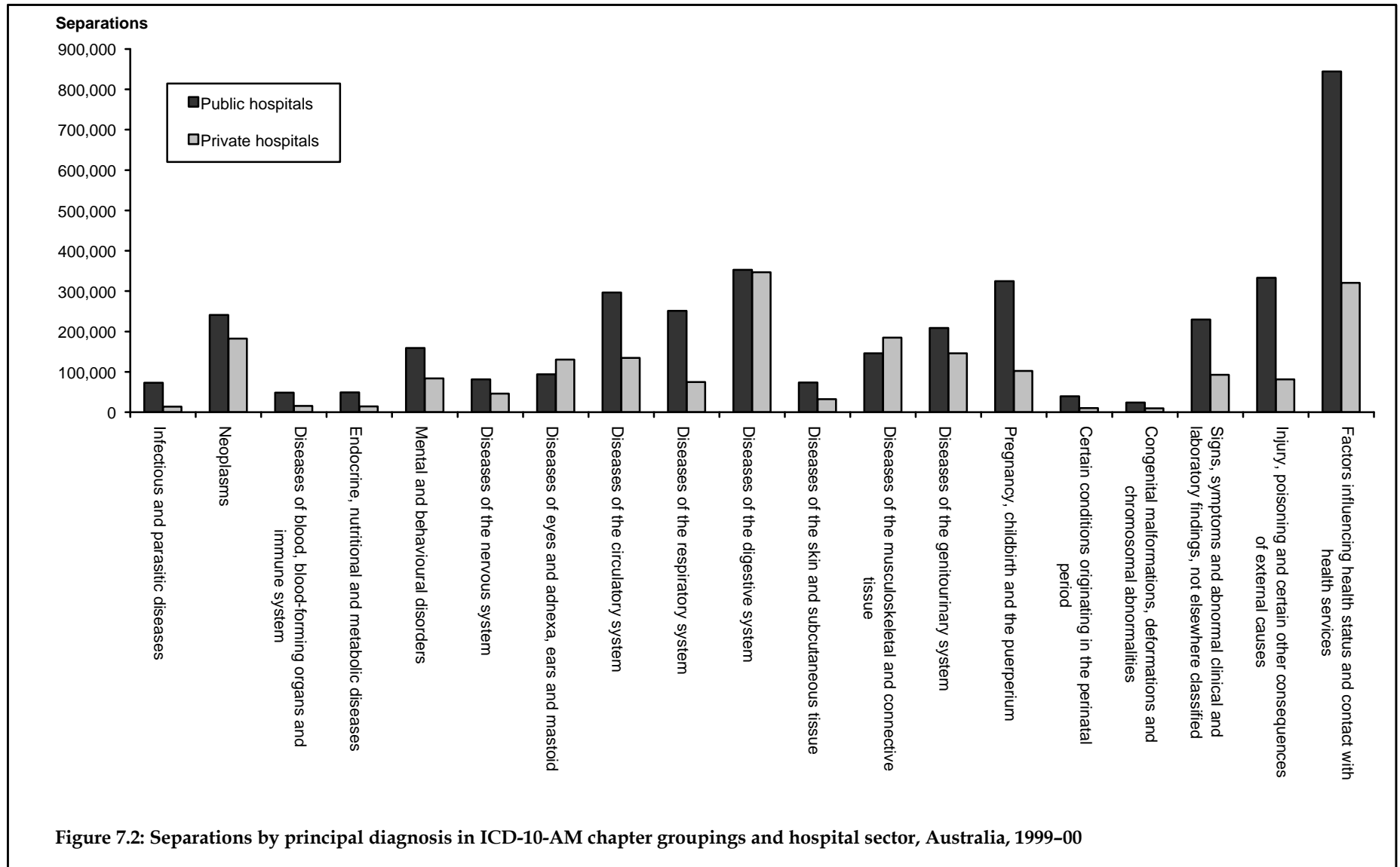
The accompanying tables on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00/index.html> provide national summary statistics for public and private hospitals for each 3-character ICD-10-AM disease code (as presented for the top 30 principal diagnosis codes in Tables 7.10 and 7.11). For confidentiality, the statistics for some codes in the private sector have been suppressed. The information was suppressed if there were fewer than 50 private hospital separations reported for the code and fewer than three reporting units (hospitals, or States where the hospitals were not individually identified), or if 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 code.

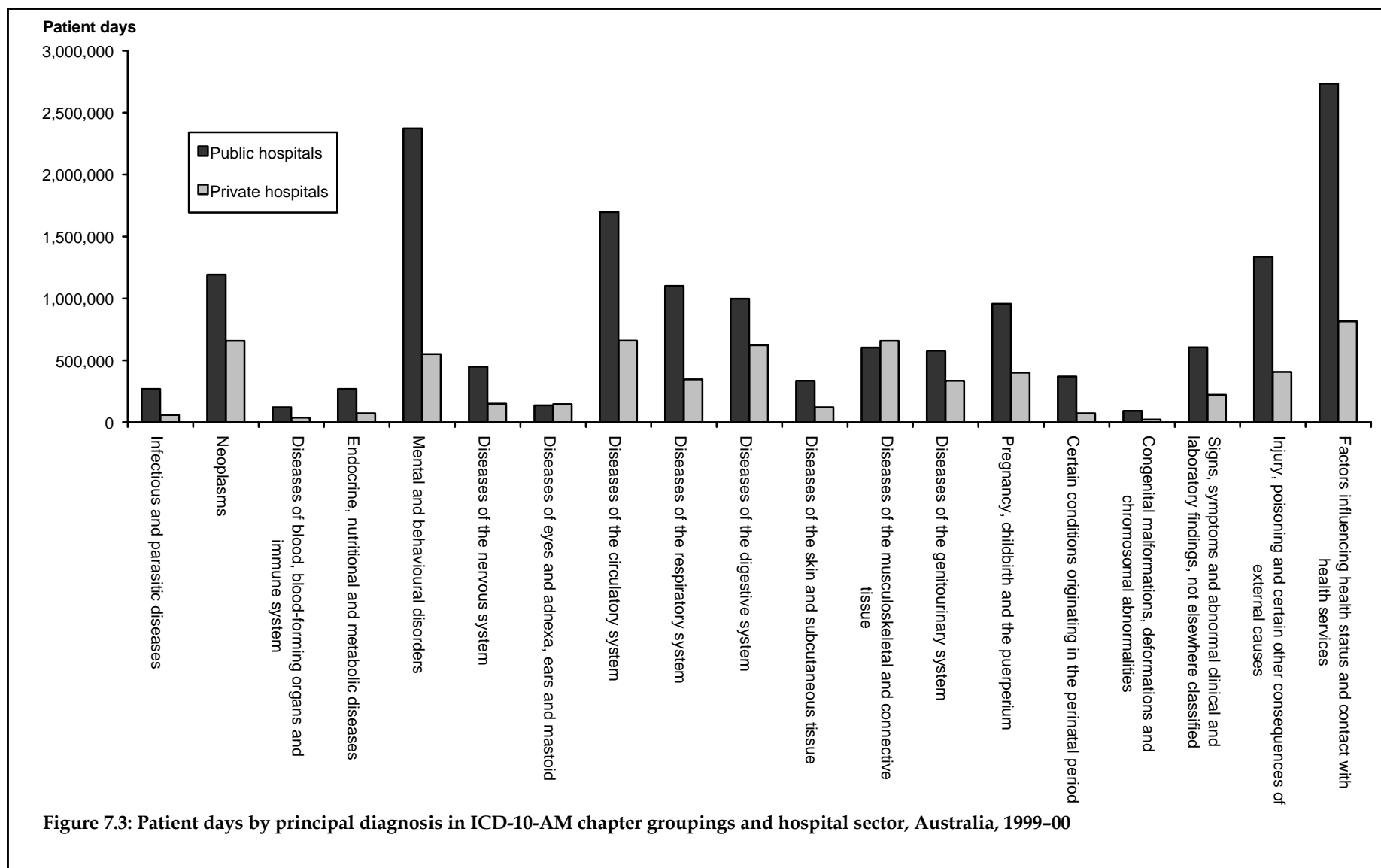


**Figure 7.1: Interrelationships of a principal diagnosis (I21 acute myocardial infarction) with other data elements, all hospitals, Australia, 1999-00**

Note: Main abbreviations: w—with, w/o—without, cc—complications and comorbidities, cat—catastrophic, inves—investigative, proc—procedure, AMI—acute myocardial infarction, sev—severe.







**Table 7.1: Separation, same day separation, public patient separation, patient day and average length of stay statistics by principal diagnosis in ICD-10-AM groupings, public hospitals, Australia, 1999-00**

Principal diagnosis	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS (days) excluding same day
A00-A09 Intestinal infectious diseases	29,517	5,011	27,052	15.5	67,107	35.2	2.3	2.5
A15-A19 Tuberculosis	839	142	683	0.4	12,138	6.4	14.5	17.2
A20-A49 Zoonotic and other bacterial diseases	11,259	1,181	9,547	5.9	95,973	50.4	8.5	9.4
A50-A64 Predominantly sexually transmitted diseases	1,304	855	1,222	0.7	3,056	1.6	2.3	4.9
A65-B19 Other spirochaetal, chlamydial, rickettsial and viral diseases	11,360	4,494	10,279	6.0	36,582	19.2	3.2	4.7
B20-B24 HIV disease	363	183	359	0.2	2,100	1.1	5.8	10.7
B25-B99 Other and unspecified infectious and parasitic diseases	18,240	4,309	16,588	9.6	51,671	27.1	2.8	3.4
C00-C14 Mal. neoplasm of lip, oral cavity and pharynx	4,370	1,281	3,830	2.3	30,514	16.0	7.0	9.5
C15-C26 Mal. neoplasm of digestive system	24,339	5,468	20,558	12.8	221,616	116.3	9.1	11.5
C30-C39 Mal. neoplasm of respiratory and intrathoracic organs	14,345	2,981	12,130	7.5	108,827	57.1	7.6	9.3
C40-C50 Mal. neoplasm of bone, connective tissue and breast	42,325	23,611	36,682	22.2	129,502	68.0	3.1	5.7
C51-C68 Mal. neoplasm of genitourinary organs	24,492	7,263	20,685	12.9	133,803	70.2	5.5	7.3
C69-C80 Other and unspecified malignant neoplasms	32,899	7,209	27,128	17.3	250,994	131.7	7.6	9.5
C81-C97 Mal. neoplasms of lymphoid and haematopoietic tissue	34,119	18,535	28,463	17.9	167,326	87.8	4.9	9.5
D00-D09 Neoplasms in situ	9,799	7,371	8,719	5.1	16,971	8.9	1.7	4.0
D10-D36 Benign neoplasms	41,894	25,395	36,668	22.0	100,291	52.6	2.4	4.5
D37-D48 Neoplasms of unknown or uncertain behaviour	12,331	8,182	10,270	6.5	32,244	16.9	2.6	5.8
D50-D89 Dis. of blood and blood-forming organs and immune mechanism	48,676	30,518	41,781	25.6	121,339	63.7	2.5	5.0
E00-E90 Diseases of thyroid and endocrine system	49,051	14,088	43,448	25.7	268,963	141.2	5.5	7.3
F00-F99 Mental and behavioural disorders	159,292	40,477	148,793	83.6	2,372,468	1,245.3	14.9	19.6
G00-G99 Diseases of the nervous system	81,078	29,138	71,439	42.6	448,729	235.5	5.5	8.1
H00-H59 Diseases of the eye and adnexa	60,695	45,168	46,659	31.9	84,717	44.5	1.4	2.5
H60-H99 Diseases of ear and mastoid process	32,955	20,387	28,321	17.3	51,623	27.1	1.6	2.5
I00-I09 Rheumatic heart disease	1,564	318	1,352	0.8	11,743	6.2	7.5	9.2
I10-I15 Hypertensive heart disease	5,770	907	4,875	3.0	23,475	12.3	4.1	4.6
I20-I25 Ischaemic heart disease	112,224	18,351	93,387	58.9	505,721	265.5	4.5	5.2
I26-I28 Pulmonary heart disease	6,608	496	5,448	3.5	49,082	25.8	7.4	7.9
I30-I52 Other heart disease	79,219	14,082	64,977	41.6	453,654	238.1	5.7	6.7
I60-I69 Cerebrovascular disease	31,785	3,056	25,954	16.7	365,301	191.7	11.5	12.6
I70-I99 Other diseases of the circulatory system	59,414	18,673	51,462	31.2	288,363	151.4	4.9	6.6
J00-J06 Acute upper respiratory infections	29,359	7,097	27,312	15.4	53,163	27.9	1.8	2.1
J10-J18 Influenza and pneumonia	51,392	3,153	44,285	27.0	323,812	170.0	6.3	6.6
J20-J22 Acute lower respiratory infections	25,875	2,517	23,232	13.6	102,886	54.0	4.0	4.3
J30-J39 Other diseases of upper respiratory tract	37,974	7,042	32,753	19.9	53,340	28.0	1.4	1.5
J40-J70 Chronic lower respiratory diseases	89,265	10,957	78,202	46.9	449,079	235.7	5.0	5.6
J80-J99 Other respiratory diseases	17,324	3,037	14,666	9.1	118,008	61.9	6.8	8.0
K00-K14 Diseases of oral cavity, salivary glands and jaws	34,011	27,679	27,002	17.9	45,685	24.0	1.3	2.8
K20-K31 Diseases of oesophagus, stomach and duodenum	83,544	61,884	73,935	43.9	163,477	85.8	2.0	4.7

(continued)

**Table 7.1 (continued): Separation, same day separation, public patient separation, patient day and average length of stay statistics by principal diagnosis in ICD-10-AM groupings, public hospitals, Australia, 1999–00**

Principal diagnosis	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS (days) excluding same day
K35–K38 Appendicitis	18,049	970	16,237	9.5	57,972	30.4	3.2	3.3
K40–K46 Hernias	37,812	12,968	32,756	19.8	79,825	41.9	2.1	2.7
K50–K52 Non-infective enteritis and colitis	25,104	11,469	22,429	13.2	75,364	39.6	3.0	4.7
K55–K67 Other diseases of intestines	71,001	31,918	61,396	37.3	250,109	131.3	3.5	5.6
K70–K87 Diseases of liver, gallbladder and pancreas	61,562	8,912	54,952	32.3	261,186	137.1	4.2	4.8
K90–K93 Other diseases of digestive system	21,951	11,447	19,232	11.5	64,720	34.0	2.9	5.1
L00–L99 Diseases of skin and subcutaneous tissue	73,259	27,244	65,300	38.5	334,059	175.3	4.6	6.7
M00–M99 Diseases of musculoskeletal and connective tissue	145,812	58,681	125,075	76.5	602,350	316.2	4.1	6.2
N00–N39 Diseases of the urinary system	84,318	27,024	74,748	44.3	326,785	171.5	3.9	5.2
N40–N51 Diseases of the male genital organs	23,446	9,419	20,613	12.3	62,410	32.8	2.7	3.8
N60–N64 Diseases of the breast	7,231	4,461	6,488	3.8	11,633	6.1	1.6	2.6
N70–N98 Diseases of the female pelvic organs and genital tract	91,190	59,383	79,253	47.9	167,016	87.7	1.8	3.4
N99 Other disorders of the genitourinary system	2,618	579	2,247	1.4	9,733	5.1	3.7	4.5
O00–O09 Pregnancy with abortive outcome	45,630	31,006	40,480	24.0	54,431	28.6	1.2	1.6
O10–O29 Complications relating to pregnancy	46,710	13,044	43,880	24.5	133,955	70.3	2.9	3.6
O30–O82 Complications relating to labour and delivery	207,914	21,986	192,654	109.1	705,154	370.1	3.4	3.7
O85–O99 Complications relating to the puerperium	24,646	7,227	23,503	12.9	62,366	32.7	2.5	3.2
P00–P96 Conditions originating in the perinatal period	39,719	2,891	37,078	20.8	368,634	193.5	9.3	9.9
Q00–Q99 Congenital abnormalities	24,163	11,303	20,086	12.7	90,471	47.5	3.7	6.2
R00–R99 Signs, symptoms and abnormal findings	229,835	91,417	203,420	120.6	604,124	317.1	2.6	3.7
S00–S19 Injuries to head and neck	61,239	25,803	50,351	32.1	175,622	92.2	2.9	4.2
S20–S39 Injuries to thorax, abdomen, back, spine and pelvis	27,371	5,263	19,370	14.4	168,573	88.5	6.2	7.4
S40–S99 Injuries to upper and lower limbs	144,778	41,051	117,127	76.0	581,811	305.4	4.0	5.2
T00–T19 Injuries to multi- or unspecified region; foreign body effects	7,658	3,855	6,653	4.0	13,836	7.3	1.8	2.6
T20–T35 Burns and frostbite	6,518	1,613	5,550	3.4	40,642	21.3	6.2	8.0
T36–T65 Poisoning and toxic effects	34,763	12,101	33,215	18.2	70,130	36.8	2.0	2.6
T66–T79 Other and unspecified effects of external causes	6,422	2,415	5,528	3.4	15,718	8.3	2.4	3.3
T80–T88 Complications of medical and surgical care	44,230	8,898	37,549	23.2	268,904	141.1	6.1	7.4
T89–T98 Other trauma complications; external cause sequelae	276	72	228	0.1	1,209	0.6	4.4	5.6
Z00–Z13 Encounter for examination and investigation	40,252	34,674	35,980	21.1	49,086	25.8	1.2	2.6
Z20–Z29 Encounter relating to communicable diseases	4,744	4,575	4,365	2.5	5,398	2.8	1.1	4.9
Z30–Z39 Encounter for services relating to reproduction	36,570	25,318	32,344	19.2	56,500	29.7	1.5	2.8
Z40–Z54 Encounter with health service for specific procedures	729,929	663,487	647,390	383.1	1,809,773	950.0	2.5	17.3
Z55–Z76 Encounter with health service in other circumstances	24,981	3,180	22,109	13.1	802,610	421.3	32.1	36.7
Z80–Z99 Encounter relating to personal and family history	7,786	7,458	7,027	4.1	10,303	5.4	1.3	8.7
Not reported	1,841	1,042	1,681	1.0	22,466	11.8	12.2	26.8
<b>Total</b>	<b>3,872,198</b>	<b>1,766,650</b>	<b>3,388,440</b>	<b>2,032.5</b>	<b>16,230,221</b>	<b>8,519.3</b>	<b>4.2</b>	<b>6.9</b>

Note: Abbreviations: ALOS—average length of stay, mal.—malignant, dis.—diseases.

**Table 7.2: Separation, same day separation, public patient separation, patient day and average length of stay statistics by principal diagnosis in ICD-10-AM groupings, private hospitals, Australia, 1999-00**

Principal diagnosis		Separations	Same day separations	Public patient separations	Separations	Patient	Patient days	ALOS (days)	ALOS (days) excluding same day
					per 10,000 population	days	per 10,000 population		
A00-A09	Intestinal infectious diseases	4,598	1,005	484	2.4	13,243	7.0	2.9	3.4
A15-A19	Tuberculosis	90	25	4	<0.1	846	0.4	9.4	12.6
A20-A49	Zoonotic and other bacterial diseases	2,166	143	133	1.1	21,163	11.2	9.8	10.4
A50-A64	Predominantly sexually transmitted diseases	612	530	33	0.3	919	0.5	1.5	4.7
A65-B19	Spirochaetal, chlamydial, rickettsial and viral diseases	2,622	1,231	168	1.4	11,021	5.8	4.2	7.0
B20-B24	HIV disease	4	0	0	<0.1	44	<0.1	11.0	11.0
B25-B99	Other and unspecified infectious and parasitic diseases	3,723	1,150	292	2.0	11,840	6.3	3.2	4.2
C00-C14	Mal. neoplasm of lip, oral cavity and pharynx	1,198	372	70	0.6	7,375	3.9	6.2	8.5
C15-C26	Mal. neoplasm of digestive system	16,306	5,532	581	8.6	124,253	65.9	7.6	11.0
C30-C39	Mal. neoplasm of respiratory and intrathoracic organs	4,686	884	342	2.5	37,079	19.7	7.9	9.5
C40-C50	Mal. neoplasm of bone, connective tissue and breast	48,696	31,731	926	25.8	112,318	59.6	2.3	4.8
C51-C68	Mal. neoplasm of genitourinary organs	19,317	6,153	706	10.2	90,795	48.1	4.7	6.4
C69-C80	Other and unspecified mal. neoplasms	14,398	3,015	644	7.6	108,901	57.8	7.6	9.3
C81-C97	Mal. neoplasms of lymphoid and haematopoietic tissue	12,929	6,859	210	6.9	48,781	25.9	3.8	6.9
D00-D09	Neoplasms in situ	7,657	5,390	227	4.1	13,547	7.2	1.8	3.6
D10-D36	Benign neoplasms	50,087	36,110	1,300	26.6	96,859	51.4	1.9	4.3
D37-D48	Neoplasms of unknown or uncertain behaviour	6,972	4,198	209	3.7	17,551	9.3	2.5	4.8
D50-D89	Dis. of blood and blood-forming organs and immune mechanism	15,414	9,384	602	8.2	37,828	20.1	2.5	4.7
E00-E90	Diseases of thyroid and endocrine system	14,555	3,788	559	7.7	71,642	38.0	4.9	6.3
F00-F99	Mental and behavioural disorders	83,929	53,460	1,519	44.5	550,899	292.1	6.6	16.3
G00-G99	Diseases of the nervous system	45,975	14,328	1,512	24.4	149,168	79.1	3.2	4.3
H00-H59	Diseases of the eye and adnexa	107,427	84,023	3,055	57.0	116,944	62.0	1.1	1.4
H60-H99	Diseases of ear and mastoid process	22,849	16,849	723	12.1	29,780	15.8	1.3	2.2
I00-I09	Rheumatic heart disease	627	164	35	0.3	4,963	2.6	7.9	10.4
I10-I15	Hypertensive heart disease	2,038	144	68	1.1	10,908	5.8	5.4	5.7
I20-I25	Ischaemic heart disease	45,723	9,178	2,881	24.2	204,092	108.2	4.5	5.3
I26-I28	Pulmonary heart disease	1,918	36	71	1.0	16,870	8.9	8.8	8.9
I30-I52	Other heart disease	28,754	4,970	1,348	15.2	171,949	91.2	6.0	7.0
I60-I69	Cerebrovascular disease	8,894	358	458	4.7	91,694	48.6	10.3	10.7
I70-I99	Other diseases of the circulatory system	46,437	19,428	1,265	24.6	158,820	84.2	3.4	5.2
J00-J06	Acute upper respiratory infections	3,393	419	519	1.8	9,903	5.3	2.9	3.2
J10-J18	Influenza and pneumonia	11,194	240	752	5.9	94,655	50.2	8.5	8.6
J20-J22	Acute lower respiratory infections	4,540	152	455	2.4	29,792	15.8	6.6	6.8
J30-J39	Other diseases of upper respiratory tract	34,883	7,111	995	18.5	44,408	23.5	1.3	1.3
J40-J70	Chronic lower respiratory diseases	16,117	866	1,528	8.5	134,480	71.3	8.3	8.8
J80-J99	Other respiratory diseases	4,577	573	210	2.4	33,572	17.8	7.3	8.2
K00-K14	Diseases of oral cavity, salivary glands and jaws	64,916	55,057	473	34.4	70,151	37.2	1.1	1.5
K20-K31	Diseases of oesophagus, stomach and duodenum	106,623	99,242	2,439	56.5	136,043	72.1	1.3	5.0

(continued)

**Table 7.2 (continued): Separation, same day separation, public patient separation, patient day and average length of stay statistics by principal diagnosis in ICD-10-AM groupings, private hospitals, Australia, 1999-00**

Principal diagnosis		Separations	Same day separations	Public patient separations	Separations	Patient	Patient days	ALOS	ALOS (days)
					per 10,000 population	days	per 10,000 population	(days)	excluding same day
K35-K38	Appendicitis	5,125	70	503	2.7	17,151	9.1	3.3	3.4
K40-K46	Hernias	38,063	12,339	1,104	20.2	76,336	40.5	2.0	2.5
K50-K52	Non-infective enteritis and colitis	15,795	11,586	449	8.4	37,123	19.7	2.4	6.1
K55-K67	Other diseases of intestines	78,538	59,520	1,852	41.6	166,427	88.3	2.1	5.6
K70-K87	Diseases of liver, gallbladder and pancreas	24,129	1,610	1,549	12.8	89,250	47.3	3.7	3.9
K90-K93	Other diseases of digestive system	13,859	10,607	331	7.3	29,606	15.7	2.1	5.8
L00-L99	Diseases of skin and subcutaneous tissue	32,191	18,635	1,465	17.1	119,691	63.5	3.7	7.5
M00-M99	Diseases of musculoskeletal and connective tissue	184,636	74,831	4,967	97.9	656,399	348.1	3.6	5.3
N00-N39	Diseases of the urinary system	41,371	18,324	1,932	21.9	121,753	64.6	2.9	4.5
N40-N51	Diseases of the male genital organs	19,389	7,842	862	10.3	51,570	27.3	2.7	3.8
N60-N64	Diseases of the breast	7,764	4,104	248	4.1	11,721	6.2	1.5	2.1
N70-N98	Diseases of the female pelvic organs and genital tract	76,094	53,461	2,661	40.4	143,192	75.9	1.9	4.0
N99	Other disorders of the genitourinary system	1,487	206	112	0.8	5,669	3.0	3.8	4.3
O00-O09	Pregnancy with abortive outcome	26,521	24,036	925	14.1	27,939	14.8	1.1	1.6
O10-O29	Complications relating to pregnancy	8,902	703	805	4.7	38,639	20.5	4.3	4.6
O30-O82	Complications relating to labour and delivery	60,947	2,839	4,517	32.3	313,927	166.5	5.2	5.4
O85-O99	Complications relating to the puerperium	6,124	1,665	562	3.2	20,073	10.6	3.3	4.1
P00-P96	Conditions originating in the perinatal period	9,949	549	861	5.3	71,598	38.0	7.2	7.6
Q00-Q99	Congenital abnormalities	9,629	4,920	359	5.1	20,456	10.8	2.1	3.3
R00-R99	Signs, symptoms and abnormal findings	92,857	52,680	4,006	49.2	221,898	117.7	2.4	4.2
S00-S19	Injuries to head and neck	6,952	2,826	592	3.7	20,283	10.8	2.9	4.2
S20-S39	Injuries to thorax, abdomen, back, spine and pelvis	5,213	233	328	2.8	48,125	25.5	9.2	9.6
S40-S99	Injuries to upper and lower limbs	43,209	11,314	2,053	22.9	184,584	97.9	4.3	5.4
T00-T19	Injuries to multi- or unspecified region; foreign body effects	1,601	777	88	0.8	4,278	2.3	2.7	4.2
T20-T35	Burns and frostbite	478	96	36	0.3	2,654	1.4	5.6	6.7
T36-T65	Poisoning and toxic effects	1,999	396	618	1.1	6,591	3.5	3.3	3.9
T66-T79	Other and unspecified effects of external causes	694	145	98	0.4	2,763	1.5	4.0	4.8
T80-T88	Complications of medical and surgical care	21,268	3,645	724	11.3	136,028	72.1	6.4	7.5
T89-T98	Other trauma complications; external cause sequelae	28	11	1	<0.1	78	<0.1	2.8	3.9
Z00-Z13	Encounter for examination and investigation	34,710	32,361	1,043	18.4	37,144	19.7	1.1	2.0
Z20-Z29	Encounter relating to communicable diseases	595	553	32	0.3	2,451	1.3	4.1	45.2
Z30-Z39	Encounter for services relating to reproduction	24,448	18,666	1,336	13.0	41,474	22.0	1.7	3.9
Z40-Z54	Encounter with health service for specific procedures	240,970	201,764	15,371	127.8	645,299	342.2	2.7	11.3
Z55-Z76	Encounter with health service in other circumstances	2,544	565	480	1.3	70,258	37.3	27.6	35.2
Z80-Z99	Encounter relating to personal and family history	17,471	17,297	246	9.3	17,609	9.3	1.0	1.8
	Not reported	3,268	2,183	2	1.7	10,692	5.7	3.3	7.8
<b>Total</b>		<b>2,025,662</b>	<b>1,137,457</b>	<b>80,914</b>	<b>1,074.2</b>	<b>6,355,825</b>	<b>3,370.5</b>	<b>3.1</b>	<b>5.9</b>

Note: Abbreviations: ALOS—average length of stay, mal.—malignant, dis.—diseases.

**Table 7.3: Separations by principal diagnosis in ICD-10-AM groupings, public hospitals, States and Territories, 1999-00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
A00-A09 Intestinal infectious diseases	12,437	4,911	5,082	2,579	2,717	443	466	882	29,517
A15-A19 Tuberculosis	336	212	92	66	51	10	12	60	839
A20-A49 Zoonotic and other bacterial diseases	4,040	2,775	2,010	927	786	272	179	270	11,259
A50-A64 Predominantly sexually transmitted diseases	350	326	271	155	103	34	14	51	1,304
A65-B19 Other spirochaetal, chlamydial, rickettsial and viral diseases	3,717	3,368	1,707	1,113	983	181	117	174	11,360
B20-B24 HIV disease	54	81	47	19	146	12	4	0	363
B25-B99 Other and unspecified infectious and parasitic diseases	6,653	3,635	3,607	2,049	1,437	286	279	294	18,240
C00-C14 Mal. neoplasm of lip, oral cavity and pharynx	1,430	1,015	890	485	293	181	47	29	4,370
C15-C26 Mal. neoplasm of digestive system	8,952	6,169	3,795	1,851	2,585	533	363	91	24,339
C30-C39 Mal. neoplasm of respiratory and intrathoracic organs	4,815	3,515	2,811	1,044	1,578	317	192	73	14,345
C40-C50 Mal. neoplasm of bone, connective tissue and breast	12,356	9,218	10,370	3,631	5,086	854	649	161	42,325
C51-C68 Mal. neoplasm of genitourinary organs	8,330	6,574	4,065	1,795	2,787	494	351	96	24,492
C69-C80 Other and unspecified mal. neoplasms	10,105	10,869	5,650	2,219	2,707	779	458	112	32,899
C81-C97 Mal. neoplasms of lymphoid and haematopoietic tissue	9,575	9,157	6,453	3,145	4,311	635	769	74	34,119
D00-D09 Neoplasms in situ	2,709	2,241	2,516	704	1,106	256	136	131	9,799
D10-D36 Benign neoplasms	13,805	10,331	7,307	4,502	4,157	807	714	271	41,894
D37-D48 Neoplasms of unknown or uncertain behaviour	4,253	3,240	2,161	1,081	1,043	250	280	23	12,331
D50-D89 Dis. of blood and blood-forming organs and immune mechanism	14,964	13,891	7,521	4,557	5,561	1,028	866	288	48,676
E00-E90 Diseases of thyroid and endocrine system	14,180	12,339	8,662	4,006	6,260	1,562	1,186	856	49,051
F00-F99 Mental and behavioural disorders	55,164	33,532	29,720	18,755	15,683	4,035	1,402	1,001	159,292
G00-G99 Diseases of the nervous system	24,453	24,774	13,715	7,204	7,999	1,420	933	580	81,078
H00-H59 Diseases of the eye and adnexa	19,475	17,478	8,834	6,732	6,429	492	572	683	60,695
H60-H99 Diseases of ear and mastoid process	9,280	8,514	6,801	3,620	3,473	406	485	376	32,955
I00-I09 Rheumatic heart disease	322	295	426	217	159	35	17	93	1,564
I10-I15 Hypertensive heart disease	2,306	1,099	1,143	512	552	80	34	44	5,770
I20-I25 Ischaemic heart disease	39,389	26,195	21,790	8,002	11,411	2,791	1,932	714	112,224
I26-I28 Pulmonary heart disease	3,227	1,229	965	442	527	78	88	52	6,608
I30-I52 Other heart disease	29,550	18,903	13,752	6,444	7,252	1,652	1,133	533	79,219
I60-I69 Cerebrovascular disease	12,166	8,474	4,829	2,401	2,657	724	346	188	31,785
I70-I99 Other diseases of the circulatory system	19,714	15,662	9,513	5,486	6,427	1,116	1,128	368	59,414
J00-J06 Acute upper respiratory infections	10,597	5,724	6,031	3,196	2,528	521	366	396	29,359
J10-J18 Influenza and pneumonia	18,735	12,946	8,194	4,599	3,851	935	583	1,549	51,392
J20-J22 Acute lower respiratory infections	9,694	5,006	4,689	3,144	2,076	347	288	631	25,875
J30-J39 Other diseases of upper respiratory tract	10,913	11,489	6,207	3,865	4,058	581	599	262	37,974
J40-J70 Chronic lower respiratory diseases	33,729	20,362	15,904	7,548	8,433	1,434	823	1,032	89,265
J80-J99 Other respiratory diseases	6,491	3,795	3,017	1,359	1,920	386	227	129	17,324
K00-K14 Diseases of oral cavity, salivary glands and jaws	8,132	8,732	7,573	3,307	4,045	1,097	573	552	34,011
K20-K31 Diseases of oesophagus, stomach and duodenum	28,452	19,353	14,231	10,003	8,307	1,234	1,215	749	83,544

(continued)

**Table 7.3 (continued): Separations by principal diagnosis in ICD-10-AM groupings, public hospitals, States and Territories, 1999–00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
K35–K38 Appendicitis	6,216	4,336	3,376	1,895	1,348	374	316	188	18,049
K40–K46 Hernias	12,759	9,870	7,117	3,133	3,451	635	557	290	37,812
K50–K52 Non-infective enteritis and colitis	8,292	6,687	4,686	2,286	2,257	418	323	155	25,104
K55–K67 Other diseases of intestines	24,564	16,700	12,672	7,675	6,870	1,195	822	503	71,001
K70–K87 Diseases of liver, gallbladder and pancreas	21,787	15,163	11,230	4,918	5,627	1,223	997	617	61,562
K90–K93 Other diseases of digestive system	7,477	5,775	3,771	2,107	1,857	410	347	207	21,951
L00–L99 Diseases of skin and subcutaneous tissue	22,281	14,839	15,194	7,077	9,437	2,089	699	1,643	73,259
M00–M99 Diseases of musculoskeletal and connective tissue	45,607	36,755	24,812	14,780	16,105	4,224	2,222	1,307	145,812
N00–N39 Diseases of the urinary system	30,233	20,780	14,856	7,626	7,223	1,729	973	898	84,318
N40–N51 Diseases of the male genital organs	8,033	6,382	3,576	2,417	1,955	600	280	203	23,446
N60–N64 Diseases of the breast	1,904	2,321	1,145	738	730	183	94	116	7,231
N70–N98 Diseases of the female pelvic organs and genital tract	27,925	26,502	16,347	7,596	9,141	1,471	1,255	953	91,190
N99 Other disorders of the genitourinary system	890	729	346	286	255	60	38	14	2,618
O00–O09 Pregnancy with abortive outcome	13,035	12,422	5,829	3,552	7,800	1,106	487	1,399	45,630
O10–O29 Complications relating to pregnancy	16,895	12,382	8,452	3,102	3,860	748	554	717	46,710
O30–O82 Complications relating to labour and delivery	72,326	49,990	40,247	17,919	16,452	4,067	3,525	3,388	207,914
O85–O99 Complications relating to the puerperium	7,268	6,391	4,424	2,084	3,164	365	315	635	24,646
P00–P96 Conditions originating in the perinatal period	13,202	10,760	6,770	2,446	3,849	864	810	1,018	39,719
Q00–Q99 Congenital abnormalities	8,284	6,734	4,081	2,155	1,893	443	371	202	24,163
R00–R99 Signs, symptoms and abnormal findings	79,667	63,474	39,924	18,621	19,865	3,720	2,342	2,222	229,835
S00–S19 Injuries to head and neck	19,885	13,084	14,628	6,212	4,816	1,049	554	1,011	61,239
S20–S39 Injuries to thorax, abdomen, back, spine and pelvis	10,123	6,295	5,161	2,493	2,140	433	316	410	27,371
S40–S99 Injuries to upper and lower limbs	51,522	32,001	31,402	12,610	10,387	2,534	2,036	2,286	144,778
T00–T19 Injuries to multi- or unspecified region; foreign body effects	2,449	1,487	2,079	626	663	146	112	96	7,658
T20–T35 Burns and frostbite	1,970	1,199	1,509	854	611	120	51	204	6,518
T36–T65 Poisoning and toxic effects	10,877	8,549	7,558	3,375	3,165	614	381	244	34,763
T66–T79 Other and unspecified effects of external causes	1,914	1,135	1,738	722	626	146	40	101	6,422
T80–T88 Complications of medical and surgical care	14,046	10,908	8,320	5,050	3,713	1,016	726	451	44,230
T89–T98 Other trauma complications; external cause sequelae	157	0	59	47	0	1	9	3	276
Z00–Z13 Encounter for examination and investigation	12,223	8,958	7,871	4,386	5,121	677	743	273	40,252
Z20–Z29 Encounter relating to communicable diseases	1,381	1,022	1,875	321	87	18	22	18	4,744
Z30–Z39 Encounter for services relating to reproduction	10,578	10,339	4,672	3,405	5,506	734	343	993	36,570
Z40–Z54 Encounter with health service for specific procedures	193,743	222,302	133,264	72,570	56,358	13,298	17,823	20,571	729,929
Z55–Z76 Encounter with health service in other circumstances	8,576	6,157	5,537	1,397	2,005	610	154	545	24,981
Z80–Z99 Encounter relating to personal and family history	2,875	2,196	1,035	1,149	199	65	193	74	7,786
Not reported	0	1,556	0	0	0	268	0	17	1,841
<b>Total</b>	<b>1,245,814</b>	<b>1,003,609</b>	<b>707,914</b>	<b>360,394</b>	<b>360,020</b>	<b>75,951</b>	<b>60,656</b>	<b>57,840</b>	<b>3,872,198</b>

Note: Abbreviations: mal.—malignant, dis.—diseases.



**Table 7.4: Separations by principal diagnosis in ICD-10-AM groupings, private hospitals, States and Territories, 1999-00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
A00-A09 Intestinal infectious diseases	1,048	748	1,770	515	281	n.p.	n.p.	n.a.	4,598
A15-A19 Tuberculosis	21	27	17	12	9	n.p.	n.p.	n.a.	90
A20-A49 Zoonotic and other bacterial diseases	395	641	611	238	184	n.p.	n.p.	n.a.	2,166
A50-A64 Predominantly sexually transmitted diseases	230	145	116	49	39	n.p.	n.p.	n.a.	612
A65-B19 Other spirochaetal, chlamydial, rickettsial and viral diseases	706	640	590	347	222	n.p.	n.p.	n.a.	2,622
B20-B24 HIV disease	0	1	3	0	0	n.p.	n.p.	n.a.	4
B25-B99 Other and unspecified infectious and parasitic diseases	826	737	1,233	491	290	n.p.	n.p.	n.a.	3,723
C00-C14 Mal. neoplasm of lip, oral cavity and pharynx	328	261	330	121	100	n.p.	n.p.	n.a.	1,198
C15-C26 Mal. neoplasm of digestive system	4,110	4,842	3,731	1,497	1,455	n.p.	n.p.	n.a.	16,306
C30-C39 Mal. neoplasm of respiratory and intrathoracic organs	929	1,351	1,145	586	512	n.p.	n.p.	n.a.	4,686
C40-C50 Mal. neoplasm of bone, connective tissue and breast	14,752	10,267	13,117	3,410	5,296	n.p.	n.p.	n.a.	48,696
C51-C68 Mal. neoplasm of genitourinary organs	5,892	5,392	3,898	1,821	1,509	n.p.	n.p.	n.a.	19,317
C69-C80 Other and unspecified mal. neoplasms	3,013	4,416	3,887	1,532	1,145	n.p.	n.p.	n.a.	14,398
C81-C97 Mal. neoplasms of lymphoid and haematopoietic tissue	1,481	4,225	5,139	1,043	724	n.p.	n.p.	n.a.	12,929
D00-D09 Neoplasms in situ	2,356	1,407	1,955	561	886	n.p.	n.p.	n.a.	7,657
D10-D36 Benign neoplasms	18,078	11,035	10,784	4,844	3,582	n.p.	n.p.	n.a.	50,087
D37-D48 Neoplasms of unknown or uncertain behaviour	1,802	1,764	2,101	612	426	n.p.	n.p.	n.a.	6,972
D50-D89 Dis. of blood and blood-forming organs and immune mechanism	3,625	3,877	4,555	1,591	1,207	n.p.	n.p.	n.a.	15,414
E00-E90 Diseases of thyroid and endocrine system	3,423	4,170	3,360	1,549	1,480	n.p.	n.p.	n.a.	14,555
F00-F99 Mental and behavioural disorders	21,041	27,869	19,359	9,619	3,032	n.p.	n.p.	n.a.	83,929
G00-G99 Diseases of the nervous system	13,694	12,063	9,867	4,788	3,700	n.p.	n.p.	n.a.	45,975
H00-H59 Diseases of the eye and adnexa	40,005	21,941	25,302	9,464	6,780	n.p.	n.p.	n.a.	107,427
H60-H99 Diseases of ear and mastoid process	6,645	5,551	4,261	2,652	2,859	n.p.	n.p.	n.a.	22,849
I00-I09 Rheumatic heart disease	226	200	126	30	31	n.p.	n.p.	n.a.	627
I10-I15 Hypertensive heart disease	362	386	836	161	194	n.p.	n.p.	n.a.	2,038
I20-I25 Ischaemic heart disease	14,774	11,774	10,009	4,273	3,380	n.p.	n.p.	n.a.	45,723
I26-I28 Pulmonary heart disease	494	472	453	209	184	n.p.	n.p.	n.a.	1,918
I30-I52 Other heart disease	7,182	7,904	6,999	2,837	2,768	n.p.	n.p.	n.a.	28,754
I60-I69 Cerebrovascular disease	1,689	2,540	2,444	782	1,018	n.p.	n.p.	n.a.	8,894
I70-I99 Other diseases of the circulatory system	14,872	12,565	8,850	4,913	3,544	n.p.	n.p.	n.a.	46,437
J00-J06 Acute upper respiratory infections	700	499	1,121	672	195	n.p.	n.p.	n.a.	3,393
J10-J18 Influenza and pneumonia	2,161	3,354	3,061	1,129	1,037	n.p.	n.p.	n.a.	11,194
J20-J22 Acute lower respiratory infections	893	1,145	1,450	583	318	n.p.	n.p.	n.a.	4,540
J30-J39 Other diseases of upper respiratory tract	12,019	7,269	6,769	3,906	3,616	n.p.	n.p.	n.a.	34,883
J40-J70 Chronic lower respiratory diseases	2,964	3,758	4,754	2,356	1,612	n.p.	n.p.	n.a.	16,117
J80-J99 Other respiratory diseases	1,097	1,120	1,186	513	438	n.p.	n.p.	n.a.	4,577
K00-K14 Diseases of oral cavity, salivary glands and jaws	18,643	17,133	12,118	9,366	5,586	n.p.	n.p.	n.a.	64,916
K20-K31 Diseases of oesophagus, stomach and duodenum	34,272	30,059	24,592	8,624	6,916	n.p.	n.p.	n.a.	106,623
K35-K38 Appendicitis	1,143	1,104	1,393	886	349	n.p.	n.p.	n.a.	5,125

(continued)

**Table 7.4 (continued): Separations by principal diagnosis in ICD-10-AM groupings, private hospitals, States and Territories, 1999-00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
K40-K46 Hernias	12,765	10,318	7,769	3,344	2,525	n.p.	n.p.	n.a.	38,063
K50-K52 Non-infective enteritis and colitis	4,828	3,999	3,594	1,561	1,293	n.p.	n.p.	n.a.	15,795
K55-K67 Other diseases of intestines	24,219	20,056	20,153	6,523	5,604	n.p.	n.p.	n.a.	78,538
K70-K87 Diseases of liver, gallbladder and pancreas	7,277	5,294	5,430	2,889	2,105	n.p.	n.p.	n.a.	24,129
K90-K93 Other diseases of digestive system	3,646	3,591	3,622	1,606	1,005	n.p.	n.p.	n.a.	13,859
L00-L99 Diseases of skin and subcutaneous tissue	10,514	7,648	6,336	3,177	3,106	n.p.	n.p.	n.a.	32,191
M00-M99 Diseases of musculoskeletal and connective tissue	55,199	45,347	28,858	26,700	19,809	n.p.	n.p.	n.a.	184,636
N00-N39 Diseases of the urinary system	12,868	9,477	9,969	4,315	3,284	n.p.	n.p.	n.a.	41,371
N40-N51 Diseases of the male genital organs	6,701	4,881	3,558	2,108	1,195	n.p.	n.p.	n.a.	19,389
N60-N64 Diseases of the breast	2,259	2,420	1,225	876	651	n.p.	n.p.	n.a.	7,764
N70-N98 Diseases of the female pelvic organs and genital tract	24,679	21,065	14,989	7,080	4,861	n.p.	n.p.	n.a.	76,094
N99 Other disorders of the genitourinary system	483	391	237	174	84	n.p.	n.p.	n.a.	1,487
O00-O09 Pregnancy with abortive outcome	14,772	3,690	2,237	4,402	810	n.p.	n.p.	n.a.	26,521
O10-O29 Complications relating to pregnancy	2,591	2,056	1,750	1,468	453	n.p.	n.p.	n.a.	8,902
O30-O82 Complications relating to labour and delivery	17,921	14,804	12,412	8,566	3,992	n.p.	n.p.	n.a.	60,947
O85-O99 Complications relating to the puerperium	1,294	2,339	896	779	338	n.p.	n.p.	n.a.	6,124
P00-P96 Conditions originating in the perinatal period	3,513	2,582	1,504	1,145	504	n.p.	n.p.	n.a.	9,949
Q00-Q99 Congenital abnormalities	3,322	2,087	1,913	991	786	n.p.	n.p.	n.a.	9,629
R00-R99 Signs, symptoms and abnormal findings	21,713	27,902	22,436	10,661	6,915	n.p.	n.p.	n.a.	92,857
S00-S19 Injuries to head and neck	1,612	1,656	1,735	863	670	n.p.	n.p.	n.a.	6,952
S20-S39 Injuries to thorax, abdomen, back, spine and pelvis	1,056	1,432	1,370	587	494	n.p.	n.p.	n.a.	5,213
S40-S99 Injuries to upper and lower limbs	11,058	10,647	9,650	5,036	4,958	n.p.	n.p.	n.a.	43,209
T00-T19 Injuries to multi- or unspecified region; foreign body effects	412	333	451	167	141	n.p.	n.p.	n.a.	1,601
T20-T35 Burns and frostbite	74	142	126	66	52	n.p.	n.p.	n.a.	478
T36-T65 Poisoning and toxic effects	285	349	572	495	176	n.p.	n.p.	n.a.	1,999
T66-T79 Other and unspecified effects of external causes	119	111	247	115	64	n.p.	n.p.	n.a.	694
T80-T88 Complications of medical and surgical care	5,967	5,300	4,447	2,642	1,963	n.p.	n.p.	n.a.	21,268
T89-T98 Other trauma complications; external cause sequelae	16	0	6	3	0	n.p.	n.p.	n.a.	28
Z00-Z13 Encounter for examination and investigation	14,004	7,382	7,194	2,885	2,340	n.p.	n.p.	n.a.	34,710
Z20-Z29 Encounter relating to communicable diseases	71	172	321	13	2	n.p.	n.p.	n.a.	595
Z30-Z39 Encounter for services relating to reproduction	10,407	4,427	4,130	2,144	1,045	n.p.	n.p.	n.a.	24,448
Z40-Z54 Encounter with health service for specific procedures	62,427	65,977	65,752	20,930	20,995	n.p.	n.p.	n.a.	240,970
Z55-Z76 Encounter with health service in other circumstances	560	303	931	521	125	n.p.	n.p.	n.a.	2,544
Z80-Z99 Encounter relating to personal and family history	7,753	3,845	3,298	1,681	545	n.p.	n.p.	n.a.	17,471
Not reported	0	3,163	0	0	0	n.p.	n.p.	n.a.	3,268
<b>Total</b>	<b>604,276</b>	<b>519,838</b>	<b>452,410</b>	<b>215,095</b>	<b>159,794</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>2,025,662</b>

Note: Abbreviations: mal.—malignant, dis.—diseases.

n.p. not published.

n.a. not available.

**Table 7.5: Patient days by principal diagnosis in ICD-10-AM groupings, public hospitals, States and Territories, 1999-00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
A00-A09 Intestinal infectious diseases	25,901	11,454	10,393	6,606	6,318	1,056	960	4,419	67,107
A15-A19 Tuberculosis	5,009	2,607	1,288	1,247	688	144	167	988	12,138
A20-A49 Zoonotic and other bacterial diseases	34,265	24,748	15,582	8,026	6,521	2,248	1,725	2,858	95,973
A50-A64 Predominantly sexually transmitted diseases	761	825	624	456	161	59	17	153	3,056
A65-B19 Other spirochaetal, chlamydial, rickettsial and viral diseases	12,962	9,586	5,334	3,607	3,066	848	552	627	36,582
B20-B24 HIV disease	489	356	471	215	406	21	142	0	2,100
B25-B99 Other and unspecified infectious and parasitic diseases	19,077	10,238	8,505	6,396	3,995	1,054	916	1,490	51,671
C00-C14 Mal. neoplasm of lip, oral cavity and pharynx	11,313	7,274	5,999	2,179	2,324	811	316	298	30,514
C15-C26 Mal. neoplasm of digestive system	84,156	55,929	33,360	15,667	22,625	5,720	3,316	843	221,616
C30-C39 Mal. neoplasm of respiratory and intrathoracic organs	40,396	26,571	17,261	7,243	12,102	2,685	1,867	702	108,827
C40-C50 Mal. neoplasm of bone, connective tissue and breast	50,292	30,263	20,966	9,509	13,715	2,388	1,886	483	129,502
C51-C68 Mal. neoplasm of genitourinary organs	52,756	32,610	19,251	8,383	14,353	3,637	2,222	591	133,803
C69-C80 Other and unspecified mal. neoplasms	90,905	73,790	38,305	16,282	19,657	6,001	5,000	1,054	250,994
C81-C97 Mal. neoplasms of lymphoid and haematopoietic tissue	63,008	40,986	28,004	13,196	16,050	2,412	3,430	240	167,326
D00-D09 Neoplasms in situ	5,483	3,870	3,703	1,301	1,718	452	244	200	16,971
D10-D36 Benign neoplasms	35,955	24,559	16,204	10,209	8,977	1,939	1,764	684	100,291
D37-D48 Neoplasms of unknown or uncertain behaviour	12,218	8,187	5,122	2,867	2,599	608	583	60	32,244
D50-D89 Dis. of blood and blood-forming organs and immune mechanism	42,551	32,318	17,772	10,301	12,663	2,493	2,177	1,064	121,339
E00-E90 Diseases of thyroid and endocrine system	81,556	69,434	49,692	23,857	27,672	6,539	3,522	6,691	268,963
F00-F99 Mental and behavioural disorders	837,975	376,802	671,700	198,872	232,414	31,277	15,871	7,557	2,372,468
G00-G99 Diseases of the nervous system	169,511	117,003	79,013	39,616	29,253	7,783	4,139	2,411	448,729
H00-H59 Diseases of the eye and adnexa	29,719	21,477	12,778	9,596	8,386	893	757	1,111	84,717
H60-H99 Diseases of ear and mastoid process	16,181	13,060	9,149	5,653	5,405	799	728	648	51,623
I00-I09 Rheumatic heart disease	2,700	2,484	3,074	1,671	883	282	77	572	11,743
I10-I15 Hypertensive heart disease	9,146	4,291	4,490	2,359	2,440	399	156	194	23,475
I20-I25 Ischaemic heart disease	190,711	115,771	92,854	35,021	47,137	13,506	7,853	2,868	505,721
I26-I28 Pulmonary heart disease	23,623	9,850	6,859	3,380	3,617	682	718	353	49,082
I30-I52 Other heart disease	181,204	105,688	73,254	35,469	38,657	10,076	5,964	3,342	453,654
I60-I69 Cerebrovascular disease	126,967	94,730	61,140	35,054	30,952	9,304	5,091	2,063	365,301
I70-I99 Other diseases of the circulatory system	104,406	73,669	46,084	24,213	26,972	5,054	5,988	1,977	288,363
J00-J06 Acute upper respiratory infections	19,872	9,882	10,123	6,242	4,529	975	693	847	53,163
J10-J18 Influenza and pneumonia	121,141	84,788	48,375	25,318	25,761	6,316	3,495	8,618	323,812
J20-J22 Acute lower respiratory infections	38,800	19,424	17,457	14,153	7,840	1,374	1,099	2,739	102,886
J30-J39 Other diseases of upper respiratory tract	16,412	15,282	8,320	5,455	5,665	959	838	409	53,340
J40-J70 Chronic lower respiratory diseases	176,569	101,232	77,950	37,160	37,398	9,513	4,066	5,191	449,079
J80-J99 Other respiratory diseases	44,404	27,763	16,840	10,116	13,302	2,831	1,920	832	118,008
K00-K14 Diseases of oral cavity, salivary glands and jaws	12,316	11,301	9,899	4,278	4,970	1,275	701	945	45,685
K20-K31 Diseases of oesophagus, stomach and duodenum	60,937	36,661	26,572	17,076	15,490	2,796	2,565	1,380	163,477

(continued)

**Table 7.5 (continued): Patient days by principal diagnosis in ICD-10-AM groupings, public hospitals, States and Territories, 1999-00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
K35-K38 Appendicitis	20,766	14,165	9,862	5,679	4,282	1,273	1,223	722	57,972
K40-K46 Hernias	29,930	19,778	12,816	6,945	7,453	1,285	940	678	79,825
K50-K52 Non-infective enteritis and colitis	26,659	21,691	11,052	6,404	6,753	1,316	1,097	392	75,364
K55-K67 Other diseases of intestines	93,334	59,914	40,059	24,410	22,292	5,137	2,969	1,994	250,109
K70-K87 Diseases of liver, gallbladder and pancreas	100,607	62,509	42,942	21,178	21,595	4,861	4,371	3,123	261,186
K90-K93 Other diseases of digestive system	23,544	16,193	10,829	5,849	5,007	1,554	901	843	64,720
L00-L99 Diseases of skin and subcutaneous tissue	112,108	83,282	59,541	30,669	30,363	6,441	3,133	8,522	334,059
M00-M99 Diseases of musculoskeletal and connective tissue	212,419	150,867	93,831	60,750	54,372	13,797	10,150	6,164	602,350
N00-N39 Diseases of the urinary system	124,265	77,995	56,741	26,592	26,530	6,312	4,001	4,349	326,785
N40-N51 Diseases of the male genital organs	23,248	15,819	9,357	5,418	5,549	1,595	798	626	62,410
N60-N64 Diseases of the breast	3,110	3,429	1,848	1,182	1,383	282	137	262	11,633
N70-N98 Diseases of the female pelvic organs and genital tract	54,660	44,359	27,882	15,646	17,272	2,868	2,594	1,735	167,016
N99 Other disorders of genitourinary system	3,839	2,336	1,042	979	1,086	187	201	63	9,733
O00-O09 Pregnancy with abortive outcome	16,028	13,750	7,557	4,487	8,987	1,287	663	1,672	54,431
O10-O29 Complications relating to pregnancy	51,110	32,499	22,754	9,729	10,711	2,225	2,059	2,868	133,955
O30-O82 Complications relating to labour and delivery	252,176	171,191	119,384	65,725	57,216	14,017	12,180	13,265	705,154
O85-O99 Complications relating to the puerperium	19,193	16,215	10,437	6,245	6,342	976	1,043	1,915	62,366
P00-P96 Conditions originating in the perinatal period	113,260	90,252	71,326	28,986	35,621	10,024	8,940	10,225	368,634
Q00-Q99 Congenital abnormalities	32,106	24,669	16,576	6,759	6,921	1,217	1,216	1,007	90,471
R00-R99 Signs, symptoms and abnormal findings	209,619	178,015	95,390	48,282	48,077	12,078	5,835	6,828	604,124
S00-S19 Injuries to head and neck	56,223	39,812	38,273	17,524	13,700	3,692	2,809	3,589	175,622
S20-S39 Injuries to abdomen, thorax, back, spine and pelvis	63,182	41,025	28,971	13,760	13,010	3,344	2,970	2,311	168,573
S40-S99 Injuries to upper and lower limbs	210,439	139,043	100,817	54,214	42,109	13,005	9,783	12,401	581,811
T00-T19 Injuries to multi- or unspecified region; foreign body effects	4,548	2,988	3,227	1,140	1,266	332	171	164	13,836
T20-T35 Burns and frostbite	11,649	9,265	7,282	5,554	4,339	596	428	1,529	40,642
T36-T65 Poisoning and toxic effects	23,058	15,745	14,701	6,830	6,712	1,374	1,215	495	70,130
T66-T79 Other and unspecified effects of external causes	4,183	3,131	4,080	1,840	1,505	325	352	302	15,718
T80-T88 Complications of medical and surgical care	90,278	68,723	48,329	28,319	20,267	5,519	4,591	2,878	268,904
T89-T98 Other trauma complications; external cause sequelae	710	0	228	207	0	3	53	8	1,209
Z00-Z13 Encounter for examination and investigation	15,048	11,812	9,347	4,978	5,719	887	892	403	49,086
Z20-Z29 Encounter relating to communicable diseases	1,520	1,392	1,969	337	98	18	29	35	5,398
Z30-Z39 Encounter for services relating to reproduction	18,428	14,378	7,497	5,212	7,311	1,090	639	1,945	56,500
Z40-Z54 Encounter with health service for specific procedures	597,425	575,077	253,569	153,601	143,168	33,303	26,517	27,113	1,809,773
Z55-Z76 Encounter with health service in other circumstances	293,590	87,964	226,314	15,487	124,991	46,113	1,792	6,359	802,610
Z80-Z99 Encounter relating to personal and family history	5,310	2,245	1,044	1,168	199	65	193	79	10,303
Not reported	0	11,438	0	0	0	10,766	0	262	22,466
<b>Total</b>	<b>5,769,219</b>	<b>3,829,729</b>	<b>3,040,641</b>	<b>1,350,334</b>	<b>1,478,887</b>	<b>356,373</b>	<b>210,410</b>	<b>194,628</b>	<b>16,230,221</b>

Note: Abbreviations: mal.—malignant, dis.—diseases.

**Table 7.6: Patient days by principal diagnosis in ICD-10-AM groupings, private hospitals, States and Territories, 1999–00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
A00–A09 Intestinal infectious diseases	2,920	2,672	4,666	1,347	1,018	n.p.	n.p.	n.a.	13,243
A15–A19 Tuberculosis	168	335	127	91	75	n.p.	n.p.	n.a.	846
A20–A49 Zoonotic and other bacterial diseases	4,119	6,194	5,923	2,062	1,911	n.p.	n.p.	n.a.	21,163
A50–A64 Predominantly sexually transmitted diseases	298	199	249	57	81	n.p.	n.p.	n.a.	919
A65–B19 Other spirochaetal, chlamydial, rickettsial and viral diseases	2,439	2,816	2,654	1,202	1,454	n.p.	n.p.	n.a.	11,021
B20–B24 HIV disease	0	5	39	0	0	n.p.	n.p.	n.a.	44
B25–B99 Other and unspecified infectious and parasitic diseases	2,234	2,408	4,141	1,497	1,005	n.p.	n.p.	n.a.	11,840
C00–C14 Mal. neoplasm of lip, oral cavity and pharynx	2,083	1,136	2,319	668	951	n.p.	n.p.	n.a.	7,375
C15–C26 Mal. neoplasm of digestive system	31,120	34,293	29,681	11,807	12,217	n.p.	n.p.	n.a.	124,253
C30–C39 Mal. neoplasm of respiratory and intrathoracic organs	8,171	9,397	10,104	4,135	3,669	n.p.	n.p.	n.a.	37,079
C40–C50 Mal. neoplasm of bone, connective tissue and breast	33,581	24,950	27,693	10,227	11,529	n.p.	n.p.	n.a.	112,318
C51–C68 Mal. neoplasm of genitourinary organs	26,845	22,388	20,768	8,510	7,749	n.p.	n.p.	n.a.	90,795
C69–C80 Other and unspecified mal. neoplasms	26,043	28,033	29,303	13,925	7,571	n.p.	n.p.	n.a.	108,901
C81–C97 Mal. neoplasms of lymphoid and haematopoietic tissue	8,053	14,359	16,089	4,808	3,944	n.p.	n.p.	n.a.	48,781
D00–D09 Neoplasms in situ	4,042	2,505	3,192	1,390	1,586	n.p.	n.p.	n.a.	13,547
D10–D36 Benign neoplasms	32,746	22,601	19,835	10,243	7,202	n.p.	n.p.	n.a.	96,859
D37–D48 Neoplasms of unknown or uncertain behaviour	4,348	3,856	5,418	2,010	1,165	n.p.	n.p.	n.a.	17,551
D50–D89 Dis. of blood and blood-forming organs and immune mechanism	8,212	9,868	10,589	3,870	3,496	n.p.	n.p.	n.a.	37,828
E00–E90 Diseases of thyroid and endocrine system	15,270	18,648	19,376	7,182	7,757	n.p.	n.p.	n.a.	71,642
F00–F99 Mental and behavioural disorders	152,205	136,255	148,373	49,423	46,740	n.p.	n.p.	n.a.	550,899
G00–G99 Diseases of the nervous system	33,247	35,353	51,651	13,595	9,865	n.p.	n.p.	n.a.	149,168
H00–H59 Diseases of the eye and adnexa	43,026	23,495	27,672	10,762	7,549	n.p.	n.p.	n.a.	116,944
H60–H99 Diseases of ear and mastoid process	8,315	7,284	5,594	3,425	3,860	n.p.	n.p.	n.a.	29,780
I00–I09 Rheumatic heart disease	1,741	1,312	1,255	288	260	n.p.	n.p.	n.a.	4,963
I10–I15 Hypertensive heart disease	2,209	2,010	4,277	993	1,058	n.p.	n.p.	n.a.	10,908
I20–I25 Ischaemic heart disease	59,085	55,668	50,624	14,893	17,773	n.p.	n.p.	n.a.	204,092
I26–I28 Pulmonary heart disease	4,260	4,083	3,815	1,562	1,949	n.p.	n.p.	n.a.	16,870
I30–I52 Other heart disease	39,283	49,106	46,568	15,658	15,213	n.p.	n.p.	n.a.	171,949
I60–I69 Cerebrovascular disease	17,026	24,068	29,055	7,369	9,688	n.p.	n.p.	n.a.	91,694
I70–I99 Other diseases of the circulatory system	43,028	43,994	36,089	17,901	12,487	n.p.	n.p.	n.a.	158,820
J00–J06 Acute upper respiratory infections	2,225	1,378	3,390	1,615	660	n.p.	n.p.	n.a.	9,903
J10–J18 Influenza and pneumonia	18,761	29,672	24,970	8,217	9,291	n.p.	n.p.	n.a.	94,655
J20–J22 Acute lower respiratory infections	6,073	7,888	9,559	3,315	2,042	n.p.	n.p.	n.a.	29,792
J30–J39 Other diseases of upper respiratory tract	14,445	9,809	8,247	5,113	5,051	n.p.	n.p.	n.a.	44,408
J40–J70 Chronic lower respiratory diseases	25,950	31,156	44,027	16,724	11,363	n.p.	n.p.	n.a.	134,480
J80–J99 Other respiratory diseases	7,498	9,196	8,712	3,197	3,024	n.p.	n.p.	n.a.	33,572
K00–K14 Diseases of oral cavity, salivary glands and jaws	20,037	18,454	13,104	10,077	6,125	n.p.	n.p.	n.a.	70,151
K20–K31 Diseases of oesophagus, stomach and duodenum	40,627	37,419	33,148	11,559	9,938	n.p.	n.p.	n.a.	136,043

(continued)

**Table 7.6 (continued): Patient days by principal diagnosis in ICD-10-AM groupings, private hospitals, States and Territories, 1999–00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
K35–K38 Appendicitis	3,932	3,942	4,346	2,645	1,360	n.p.	n.p.	n.a.	17,151
K40–K46 Hernias	25,707	19,478	14,237	7,773	6,216	n.p.	n.p.	n.a.	76,336
K50–K52 Non-infective enteritis and colitis	9,444	10,211	8,433	4,106	3,439	n.p.	n.p.	n.a.	37,123
K55–K67 Other diseases of intestines	41,908	43,367	45,548	16,765	13,649	n.p.	n.p.	n.a.	166,427
K70–K87 Diseases of liver, gallbladder and pancreas	24,167	21,091	21,210	9,940	8,288	n.p.	n.p.	n.a.	89,250
K90–K93 Other diseases of digestive system	6,875	7,629	7,979	3,359	2,568	n.p.	n.p.	n.a.	29,606
L00–L99 Diseases of skin and subcutaneous tissue	33,433	30,570	27,591	11,386	11,196	n.p.	n.p.	n.a.	119,691
M00–M99 Diseases of musculoskeletal and connective tissue	193,377	160,639	124,356	82,494	61,824	n.p.	n.p.	n.a.	656,399
N00–N39 Diseases of the urinary system	32,160	30,514	28,669	13,928	11,472	n.p.	n.p.	n.a.	121,753
N40–N51 Diseases of the male genital organs	16,684	13,186	9,553	5,220	3,933	n.p.	n.p.	n.a.	51,570
N60–N64 Diseases of the breast	3,455	3,329	1,755	1,491	1,187	n.p.	n.p.	n.a.	11,721
N70–N98 Diseases of the female pelvic organs and genital tract	42,882	36,794	27,551	16,401	12,026	n.p.	n.p.	n.a.	143,192
N99 Other disorders of genitourinary system	1,753	1,553	770	618	432	n.p.	n.p.	n.a.	5,669
O00–O09 Pregnancy with abortive outcome	15,126	3,963	2,582	4,617	940	n.p.	n.p.	n.a.	27,939
O10–O29 Complications relating to pregnancy	11,454	9,258	7,181	6,402	1,912	n.p.	n.p.	n.a.	38,639
O30–O82 Complications relating to labour and delivery	91,322	78,473	62,550	45,471	21,221	n.p.	n.p.	n.a.	313,927
O85–O99 Complications relating to the puerperium	5,009	6,381	3,048	2,581	1,202	n.p.	n.p.	n.a.	20,073
P00–P96 Conditions originating in the perinatal period	22,977	16,024	15,349	9,239	3,621	n.p.	n.p.	n.a.	71,598
Q00–Q99 Congenital abnormalities	8,381	3,738	3,895	1,759	1,432	n.p.	n.p.	n.a.	20,456
R00–R99 Signs, symptoms and abnormal findings	45,005	62,453	61,668	25,595	18,032	n.p.	n.p.	n.a.	221,898
S00–S19 Injuries to head and neck	4,628	5,089	5,928	1,881	1,583	n.p.	n.p.	n.a.	20,283
S20–S39 Injuries to abdomen, thorax, back, spine and pelvis	11,446	12,172	13,570	4,486	3,961	n.p.	n.p.	n.a.	48,125
S40–S99 Injuries to upper and lower limbs	43,031	45,031	49,197	19,922	18,911	n.p.	n.p.	n.a.	184,584
T00–T19 Injuries to multi- or unspecified region; foreign body effects	1,066	910	1,264	464	365	n.p.	n.p.	n.a.	4,278
T20–T35 Burns and frostbite	455	939	591	240	296	n.p.	n.p.	n.a.	2,654
T36–T65 Poisoning and toxic effects	995	1,185	2,334	1,237	377	n.p.	n.p.	n.a.	6,591
T66–T79 Other and unspecified effects of external causes	657	374	1,024	253	312	n.p.	n.p.	n.a.	2,763
T80–T88 Complications of medical and surgical care	38,096	33,585	28,246	16,660	12,897	n.p.	n.p.	n.a.	136,028
T89–T98 Other trauma complications; external cause sequelae	41	0	11	4	0	n.p.	n.p.	n.a.	78
Z00–Z13 Encounter for examination and investigation	14,731	7,787	7,723	3,371	2,508	n.p.	n.p.	n.a.	37,144
Z20–Z29 Encounter relating to communicable diseases	184	189	2,029	24	9	n.p.	n.p.	n.a.	2,451
Z30–Z39 Encounter for services relating to reproduction	20,223	5,467	5,034	3,334	1,471	n.p.	n.p.	n.a.	41,474
Z40–Z54 Encounter with health service for specific procedures	210,346	205,200	110,978	53,790	51,280	n.p.	n.p.	n.a.	645,299
Z55–Z76 Encounter with health service in other circumstances	4,538	16,183	38,632	5,490	4,065	n.p.	n.p.	n.a.	70,258
Z80–Z99 Encounter relating to personal and family history	7,858	3,854	3,313	1,690	545	n.p.	n.p.	n.a.	17,609
Not reported	0	10,575	0	0	0	n.p.	n.p.	n.a.	10,692
<b>Total</b>	<b>1,745,079</b>	<b>1,645,396</b>	<b>1,510,441</b>	<b>665,353</b>	<b>532,846</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>6,355,825</b>

Note: Abbreviations: mal.—malignant, dis.—diseases.

n.a. not available.

n.p. not published.

**Table 7.7: Separations for males by age group and principal diagnosis in ICD-10-AM groupings, all hospitals, Australia, 1999-00**

Principal diagnosis	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(a)</sup>
A00-A09 Intestinal infectious diseases	2,702	7,206	2,481	819	814	599	460	415	461	499	174	16,630
A15-A19 Tuberculosis	5	15	13	48	73	67	59	56	66	70	15	487
A20-A49 Zoonotic and other bacterial diseases	340	497	298	352	325	474	629	974	1,402	1,435	518	7,244
A50-A64 Predominantly sexually transmitted diseases	3	2	3	159	232	147	75	79	31	18	5	754
A65-B19 Other spirochaetal, chlamydial, rickettsial and viral diseases	245	727	1,084	767	1,123	1,442	779	396	380	322	100	7,365
B20-B24 HIV disease	0	0	1	7	95	96	74	16	9	0	0	298
B25-B99 Other and unspecified infectious and parasitic diseases	1,284	2,317	1,520	1,386	1,079	959	858	684	610	497	131	11,325
C00-C14 Mal. neoplasm of lip, oral cavity and pharynx	0	0	22	39	61	327	880	1,019	1,064	461	98	3,971
C15-C26 Mal. neoplasm of digestive system	12	29	30	40	190	774	2,677	5,367	8,003	5,396	1,324	23,842
C30-C39 Mal. neoplasm of respiratory and intrathoracic organs	3	6	4	28	62	288	1,130	2,848	4,887	3,188	503	12,947
C40-C50 Mal. neoplasm of bone, connective tissue and breast	15	141	382	418	696	2,127	4,846	7,509	11,205	11,839	3,262	42,440
C51-C68 Mal. neoplasm of genitourinary organs	28	128	117	259	464	582	1,797	4,711	9,390	8,945	2,479	28,900
C69-C80 Other and unspecified mal. neoplasms	74	452	475	311	613	1,239	2,702	4,791	6,423	4,721	920	22,721
C81-C97 Mal. neoplasms of lymphoid and haematopoietic tissue	39	853	1,231	1,062	1,284	1,972	3,706	5,207	6,348	4,053	692	26,447
D00-D09 Neoplasms in situ	0	0	1	19	57	181	440	823	1,402	1,256	263	4,442
D10-D36 Benign neoplasms	239	615	1,322	1,403	2,042	3,636	5,868	6,952	6,668	3,699	448	32,892
D37-D48 Neoplasms of unknown or uncertain behaviour.	23	38	134	142	226	418	959	1,591	3,084	3,537	1,055	11,207
D50-D89 Dis. of blood and blood-forming organs and immune mechanism	224	1,546	2,729	2,167	2,196	2,366	2,870	3,272	5,409	5,165	1,901	29,845
E00-E90 Diseases of thyroid and endocrine system	373	797	1,686	1,954	2,075	3,070	4,219	4,379	4,796	3,470	986	27,805
F00-F99 Mental and behavioural disorders	798	911	4,778	19,259	23,951	20,678	20,547	8,653	6,092	6,987	2,109	114,765
G00-G99 Diseases of the nervous system	3,537	2,841	2,943	2,653	5,555	8,673	11,126	10,048	9,515	7,787	1,891	66,569
H00-H59 Diseases of the eye and adnexa	381	1,641	1,334	984	1,694	2,684	4,862	8,639	20,010	25,627	5,451	73,307
H60-H99 Diseases of ear and mastoid process	1,093	10,447	8,757	980	1,183	1,655	1,872	1,690	1,562	966	229	30,434
I00-I09 Rheumatic heart disease	0	4	52	45	43	53	131	171	167	139	22	827
I10-I15 Hypertensive heart disease	5	20	61	65	125	310	492	610	587	504	138	2,917
I20-I25 Ischaemic heart disease	1	3	5	31	615	4,877	17,129	26,377	30,588	19,773	3,928	103,327
I26-I28 Pulmonary heart disease	16	8	9	45	202	331	543	650	885	736	175	3,600
I30-I52 Other heart disease	152	75	231	818	1,566	2,676	5,561	9,430	15,864	16,318	5,559	58,250
I60-I69 Cerebrovascular disease	14	35	48	118	276	688	1,548	3,155	6,412	6,863	2,231	21,388
I70-I99 Other diseases of the circulatory system	37	151	711	1,282	3,277	6,297	8,692	9,259	12,134	9,995	2,137	53,972
J00-J06 Acute upper respiratory infections	2,964	8,413	2,591	1,362	889	589	376	318	350	345	158	18,355
J10-J18 Influenza and pneumonia	1,248	3,964	1,667	1,023	1,653	2,061	2,288	3,205	5,701	7,115	3,233	33,158
J20-J22 Acute lower respiratory infections	7,394	2,288	394	227	281	388	546	747	1,287	1,660	796	16,008
J30-J39 Other diseases of upper respiratory tract	244	5,560	8,718	5,046	4,280	4,570	4,224	3,161	2,102	834	79	38,818
J40-J70 Chronic lower respiratory diseases	719	8,318	5,880	2,126	1,684	1,725	2,620	5,590	11,837	11,833	2,937	55,269
J80-J99 Other respiratory diseases	287	391	249	998	796	806	1,137	1,831	3,014	2,611	758	12,878
K00-K14 Diseases of oral cavity, salivary glands and jaws	58	4,603	6,949	13,455	6,832	3,910	2,779	2,117	1,404	788	120	43,015
K20-K31 Diseases of oesophagus, stomach and duodenum	1,135	665	1,009	3,607	9,086	14,195	18,207	17,361	16,650	10,331	1,900	94,146

(continued)

**Table 7.7 (continued): Separations for males by age group and principal diagnosis in ICD-10-AM groupings, all hospitals, Australia, 1999-00**

Principal diagnosis	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(a)</sup>
K35-K38 Appendicitis	6	119	3,201	3,554	2,302	1,595	911	454	286	146	27	12,601
K40-K46 Hernias	1,836	1,954	1,588	2,061	4,221	6,676	10,181	9,989	9,475	5,806	1,059	54,846
K50-K52 Non-infective enteritis and colitis	104	196	316	1,917	3,060	2,946	2,444	2,129	1,996	1,469	422	16,999
K55-K67 Other diseases of intestines	513	918	1,443	1,595	4,016	7,811	11,810	13,256	14,561	9,885	2,192	68,000
K70-K87 Diseases of liver, gallbladder and pancreas	26	60	160	705	2,301	5,075	6,590	6,275	6,460	4,204	908	32,764
K90-K93 Other diseases of digestive system	130	200	379	644	1,487	2,460	3,119	2,750	3,098	2,345	749	17,361
L00-L99 Diseases of skin and subcutaneous tissue	762	2,163	4,183	7,790	6,992	6,762	6,725	6,131	6,862	5,518	1,678	55,566
M00-M99 Diseases of musculoskeletal and connective tissue	134	1,180	3,828	14,743	21,988	27,380	28,983	26,393	24,087	15,805	3,096	167,617
N00-N39 Diseases of the urinary system	1,225	994	1,229	1,858	4,437	7,909	11,029	10,976	12,027	9,668	2,868	64,220
N40-N51 Diseases of the male genital organs	613	2,623	3,884	2,212	2,115	2,371	3,654	7,111	9,964	6,841	1,444	42,832
N60-N64 Diseases of the breast	8	7	79	504	443	184	170	132	113	86	5	1,731
N70-N98 Diseases of the female pelvic organs and genital tract	..	..	..	..	..	..	..	..	..	..	..	..
N99 Other disorders of the genitourinary system	22	96	90	31	45	52	134	301	602	450	117	1,940
O00-O99 Pregnancy, childbirth and the puerperium	..	..	..	..	..	..	..	..	..	..	..	..
P00-P96 Conditions originating in the perinatal period	27,390	194	90	8	2	0	0	0	0	0	0	27,684
Q00-Q99 Congenital abnormalities	5,424	5,038	4,320	1,384	685	616	529	355	303	162	28	18,844
R00-R99 Signs, symptoms and abnormal findings	5,536	6,321	6,357	7,404	11,372	17,003	21,547	21,702	24,430	20,312	6,452	148,436
S00-S19 Injuries to head and neck	565	3,682	6,293	12,475	8,632	5,322	3,177	1,840	1,567	1,601	839	45,994
S20-S39 Injuries to thorax, abdomen, back, spine and pelvis	17	193	1,110	3,075	3,032	2,580	2,135	1,566	1,469	1,650	942	17,769
S40-S99 Injuries to upper and lower limbs	181	3,680	18,021	23,714	20,211	14,439	10,571	6,600	5,198	5,093	2,940	110,648
T00-T19 Multi- or unspecified body region; foreign body effects	133	723	760	615	638	700	599	463	441	313	97	5,482
T20-T35 Burns and frostbite	189	856	569	921	805	630	405	261	140	102	18	4,896
T36-T65 Poisoning and toxic effects	149	1,716	750	3,331	4,134	3,094	1,786	781	522	366	132	16,761
T66-T79 Other and unspecified effects of external causes	146	361	314	589	800	545	376	317	247	206	88	3,989
T80-T88 Complications of medical and surgical care	228	812	1,197	2,011	2,723	3,139	3,892	5,396	7,024	5,510	1,316	33,248
T89-T98 Other trauma complications; external cause sequelae	0	3	31	44	36	32	24	18	6	7	1	202
Z00-Z13 Encounter for examination and investigation	1,353	900	615	741	1,269	2,671	5,651	8,729	11,224	7,495	1,122	41,770
Z20-Z29 Encounter relating to communicable diseases	54	127	87	157	322	440	562	465	253	164	9	2,640
Z30-Z39 Encounter for services relating to reproduction	2,714	2	4	51	4,086	8,084	1,833	155	12	1	0	16,942
Z40-Z54 Encounter with health service for specific procedures	5,236	5,035	7,262	17,164	35,329	54,077	77,465	100,329	135,609	76,423	7,939	521,868
Z55-Z76 Encounter with health service in other circumstances	864	223	377	226	694	589	498	748	1,629	2,994	1,949	10,791
Z80-Z99 Encounter relating to personal and family history	12	39	40	97	628	2,400	3,457	2,415	1,267	323	25	10,703
Not reported	40	77	136	295	304	246	241	270	295	228	67	2,199
<b>Total</b>	<b>81,302</b>	<b>106,199</b>	<b>128,632</b>	<b>177,421</b>	<b>226,808</b>	<b>285,760</b>	<b>360,206</b>	<b>402,408</b>	<b>498,966</b>	<b>374,956</b>	<b>87,254</b>	<b>2,729,915</b>

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

Note: Abbreviations: mal.—malignant, dis.—diseases.

.. not applicable.



**Table 7.8: Separations for females by age group and principal diagnosis in ICD-10-AM groupings, all hospitals, Australia, 1999–00**

Principal diagnosis	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75–84	85+	Total <sup>(a)</sup>
A00–A09 Intestinal infectious diseases	2,163	6,684	2,256	1,104	1,208	768	696	626	730	840	410	17,485
A15–A19 Tuberculosis	4	25	17	46	74	65	42	43	62	48	16	442
A20–A49 Zoonotic and other bacterial diseases	292	386	219	336	280	406	486	622	1,055	1,320	778	6,180
A50–A64 Predominantly sexually transmitted diseases	5	10	21	580	280	119	75	37	20	11	4	1,162
A65–B19 Other spirochaetal, chlamydial, rickettsial and viral diseases	196	677	999	840	964	876	549	371	399	504	241	6,616
B20–B24 HIV disease	0	0	0	10	10	44	2	3	0	0	0	69
B25–B99 Other and unspecified infectious and parasitic diseases	1,091	1,904	1,401	1,566	1,068	866	712	687	591	530	221	10,637
C00–C14 Mal. neoplasm of lip, oral cavity and pharynx	0	0	5	14	61	148	253	331	369	308	108	1,597
C15–C26 Mal. neoplasm of digestive system	1	5	1	33	154	594	1,761	3,193	4,831	4,593	1,637	16,803
C30–C39 Mal. neoplasm of respiratory and intrathoracic organs	7	14	0	14	23	252	763	1,416	2,027	1,359	209	6,084
C40–C50 Mal. neoplasm of bone, connective tissue and breast	11	35	279	528	1,315	5,083	9,285	9,182	9,705	9,370	3,787	48,580
C51–C68 Mal. neoplasm of genitourinary organs	13	135	82	90	507	980	1,991	2,920	3,786	3,406	999	14,909
C69–C80 Other and unspecified mal. neoplasms	93	515	285	254	928	2,365	4,603	5,008	5,515	3,917	1,093	24,576
C81–C97 Mal. neoplasms of lymphoid and haematopoietic tissue	40	668	1,041	707	940	1,287	2,724	3,538	4,546	4,075	1,034	20,600
D00–D09 Neoplasms in situ	0	0	2	1,208	2,964	2,072	1,795	1,563	1,640	1,337	433	13,014
D10–D36 Benign neoplasms	279	597	1,655	3,232	5,740	12,511	15,556	8,411	6,888	3,622	598	59,089
D37–D48 Neoplasms of unknown or uncertain behaviour	19	36	77	170	327	468	878	1,006	1,849	2,164	1,102	8,096
D50–D89 Dis. of blood and blood-forming organs and immune mechanism	139	718	1,703	2,065	2,907	3,641	4,948	3,686	5,443	6,107	2,888	34,245
E00–E90 Diseases of thyroid and endocrine system	331	693	2,118	3,093	3,849	4,592	5,068	4,395	4,741	4,790	2,131	35,801
F00–F99 Mental and behavioural disorders	664	425	2,976	21,035	25,906	26,130	21,408	10,417	7,845	7,850	3,793	128,450
G00–G99 Diseases of the nervous system	2,721	2,006	2,513	3,074	6,214	8,497	10,380	7,604	6,703	7,482	3,288	60,482
H00–H59 Diseases of the eye and adnexa	339	1,534	1,347	936	1,512	2,422	4,521	9,021	25,704	37,303	10,176	94,815
H60–H99 Diseases of ear and mastoid process	659	6,861	6,508	1,075	1,375	1,711	1,896	1,772	1,656	1,403	454	25,370
I00–I09 Rheumatic heart disease	0	5	61	45	89	101	215	253	324	223	48	1,364
I10–I15 Hypertensive heart disease	0	4	51	71	160	323	580	772	1,085	1,281	564	4,891
I20–I25 Ischaemic heart disease	1	1	4	24	167	1,311	4,908	9,183	16,084	16,447	6,489	54,619
I26–I28 Pulmonary heart disease	8	4	27	118	350	497	665	750	1,017	1,096	394	4,926
I30–I52 Other heart disease	110	62	230	531	842	1,390	2,779	4,942	11,026	17,441	10,369	49,722
I60–I69 Cerebrovascular disease	21	13	43	107	246	638	1,119	1,842	3,897	6,977	4,388	19,291
I70–I99 Other diseases of the circulatory system	18	120	546	1,102	4,008	7,565	9,191	8,352	8,868	8,760	3,349	51,879
J00–J06 Acute upper respiratory infections	1,935	4,705	1,791	1,910	1,299	684	519	390	407	443	314	14,397
J10–J18 Influenza and pneumonia	921	3,243	1,411	910	1,622	1,896	2,072	2,735	4,272	5,955	4,391	29,428
J20–J22 Acute lower respiratory infections	4,987	1,774	349	337	433	470	671	845	1,235	1,866	1,440	14,407
J30–J39 Other diseases of upper respiratory tract	159	3,603	8,708	6,734	4,052	3,330	3,145	2,215	1,414	591	88	34,039
J40–J70 Chronic lower respiratory diseases	360	4,575	4,063	3,450	2,864	3,082	4,615	6,231	9,082	8,723	3,066	50,111
J80–J99 Other respiratory diseases	173	248	156	368	550	611	866	1,231	1,817	2,021	982	9,023
K00–K14 Diseases of oral cavity, salivary glands and jaws	57	3,956	7,737	22,644	9,562	4,621	3,173	1,837	1,289	785	251	55,912
K20–K31 Diseases of oesophagus, stomach and duodenum	923	449	777	3,440	6,855	12,722	19,219	18,669	17,256	12,311	3,400	96,021

(continued)

**Table 7.8 (continued): Separations for females by age group and principal diagnosis in ICD-10-AM groupings, all hospitals, Australia, 1999-00**

Principal diagnosis	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(a)</sup>
K35-K38 Appendicitis	0	70	2,248	3,324	2,069	1,338	742	413	218	130	21	10,573
K40-K46 Hernias	438	907	650	388	1,220	2,429	3,578	3,775	3,996	2,906	742	21,029
K50-K52 Non-infective enteritis and colitis	70	163	281	2,832	4,526	3,825	3,308	2,741	2,795	2,405	954	23,900
K55-K67 Other diseases of intestines	285	636	1,209	2,478	5,189	9,039	13,951	14,971	16,243	13,035	4,503	81,539
K70-K87 Diseases of liver, gallbladder and pancreas	19	46	232	3,499	8,074	8,882	9,577	8,683	7,238	5,016	1,661	52,927
K90-K93 Other diseases of digestive system	96	198	303	958	1,636	2,549	3,247	2,783	2,732	2,607	1,339	18,448
L00-L99 Diseases of skin and subcutaneous tissue	625	1,746	3,274	4,821	4,805	5,605	6,358	5,705	6,266	6,826	3,853	49,884
M00-M99 Diseases of musculoskeletal and connective tissue	116	854	3,514	9,049	13,161	19,938	27,913	26,942	29,494	24,107	7,743	162,831
N00-N39 Diseases of the urinary system	953	1,514	1,776	4,112	5,405	7,236	9,002	8,652	9,398	8,884	4,537	61,469
N40-N51 Diseases of the male genital organs	..	..	..	..	..	..	..	..	..	..	..	..
N60-N64 Diseases of the breast	29	2	54	893	2,394	3,542	3,437	1,756	843	279	35	13,264
N70-N98 Diseases of the female pelvic organs and genital tract	28	65	563	15,925	42,056	47,266	33,264	14,420	8,899	4,134	663	167,283
N99 Other disorders of the genitourinary system	0	3	22	42	204	350	447	436	388	236	37	2,165
O00-O09 Pregnancy with abortive outcome	0	0	141	21,892	33,567	16,154	391	0	0	0	0	72,149
O10-O29 Complications relating to pregnancy	0	0	37	14,678	31,871	8,936	88	0	0	0	0	55,610
O30-O82 Complications relating to labour and delivery	0	0	135	59,401	166,134	42,960	221	1	0	0	0	268,852
O85-O99 Complications relating to the puerperium	0	0	28	8,097	18,119	4,496	30	0	0	0	0	30,770
P00-P96 Conditions originating in the perinatal period	21,915	29	15	1	5	1	0	1	0	0	0	21,967
Q00-Q99 Congenital abnormalities	3,418	2,616	2,673	1,834	1,544	1,081	711	436	316	250	67	14,946
R00-R99 Signs, symptoms and abnormal findings	4,730	5,218	6,049	14,165	18,837	21,639	25,196	22,763	22,915	22,299	10,440	174,251
S00-S19 Injuries to head and neck	504	2,524	2,828	3,689	2,923	2,306	1,490	887	1,080	2,087	1,879	22,197
S20-S39 Injuries to thorax, abdomen, back, spine and pelvis	13	188	648	1,475	1,388	1,275	1,174	937	1,576	3,249	2,891	14,814
S40-S99 Injuries to upper and lower limbs	157	2,707	9,583	5,713	6,111	5,776	5,929	6,045	8,624	14,906	11,788	77,339
T00-T19 Injuries to multi- or unspecified region; foreign body effects	114	669	461	276	305	335	375	298	319	370	255	3,777
T20-T35 Burns and frostbite	129	565	236	224	226	222	171	97	73	103	54	2,100
T36-T65 Poisoning and toxic effects	130	1,387	755	4,887	4,293	4,076	2,225	914	559	554	221	20,001
T66-T79 Other and unspecified effects of external causes	88	241	179	437	451	385	349	285	258	292	162	3,127
T80-T88 Complications of medical and surgical care	134	398	895	1,726	3,152	4,531	5,058	4,380	5,535	4,951	1,490	32,250
T89-T98 Other trauma complications; external cause sequelae	0	3	11	14	13	12	12	11	11	11	4	102
Z00-Z13 Encounter for examination and investigation	1,096	602	470	1,205	2,268	3,132	5,020	6,492	7,189	4,905	811	33,191
Z20-Z29 Encounter relating to communicable diseases	63	79	73	208	220	455	615	437	354	141	54	2,699
Z30-Z39 Encounter for services relating to reproduction	2,803	0	21	4,250	21,214	14,950	773	42	12	5	1	44,071
Z40-Z54 Encounter with health service for specific procedures	651	2,130	4,090	9,974	27,094	46,352	75,645	92,469	112,086	63,581	14,952	449,024
Z55-Z76 Encounter with health service in other circumstances	812	247	302	1,157	3,514	1,446	398	549	1,265	3,455	3,588	16,733
Z80-Z99 Encounter relating to personal and family history	13	14	46	120	703	3,093	4,832	3,365	1,810	526	32	14,555
Not reported	15	52	102	450	594	436	312	247	296	272	134	2,910
<b>Total</b>	<b>58,184</b>	<b>72,563</b>	<b>95,365</b>	<b>287,995</b>	<b>526,990</b>	<b>411,186</b>	<b>389,968</b>	<b>368,032</b>	<b>427,966</b>	<b>379,782</b>	<b>149,844</b>	<b>3,167,882</b>

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

Note: Abbreviations: mal.—malignant, dis.—diseases.

.. not applicable.

**Table 7.9: Separations by number of diagnoses<sup>(a)</sup> reported and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Hospital sector</b>									
	<b>Number</b>								
<b>Public hospitals</b>									
Separations <sup>(b)</sup>	1,245,814	1,003,609	707,914	360,394	360,020	75,951	60,656	57,840	3,872,198
One diagnosis code only	343,641	259,406	218,551	88,233	111,085	16,429	25,350	9,954	1,072,649
Two diagnosis codes only	338,163	296,151	180,227	133,242	100,008	22,442	15,312	29,224	1,114,769
Three diagnosis codes only	178,957	153,280	102,607	50,456	49,799	10,426	8,826	6,444	560,795
Four diagnosis codes only	120,174	99,693	67,285	31,227	30,127	7,989	4,502	4,351	365,348
Five or more diagnosis codes	264,879	193,522	139,244	57,236	69,001	18,397	6,666	7,850	756,795
Mean diagnosis codes per separation	3.2	3.0	3.1	2.9	3.0	3.5	2.4	2.7	3.1
Maximum number of diagnosis codes	20	12	31	30	25	29	23	27	..
<b>Private hospitals</b>									
Separations <sup>(b)</sup>	604,276	519,838	452,410	215,095	159,794	51,495	22,754	n.a.	2,025,662
One diagnosis code only	220,113	182,026	150,697	82,977	51,699	18,082	7,334	n.a.	712,928
Two diagnosis codes only	173,811	142,651	123,519	65,821	49,426	14,667	6,924	n.a.	576,819
Three diagnosis codes only	90,576	82,576	75,407	29,924	25,510	8,057	3,893	n.a.	315,943
Four diagnosis codes only	50,087	44,954	42,482	14,713	13,806	4,464	1,834	n.a.	172,340
Five or more diagnosis codes	69,689	64,468	60,305	21,660	19,353	6,152	2,768	n.a.	244,395
Mean diagnosis codes per separation	2.5	2.5	2.7	2.4	2.6	2.5	2.6	n.a.	2.5
Maximum number of diagnosis codes	20	12	31	22	22	25	22	n.a.	..
<b>Per cent</b>									
<b>Public hospitals</b>									
One diagnosis code only	27.6	25.9	30.9	24.5	30.9	21.7	41.8	17.2	27.7
Two diagnosis codes only	27.1	29.6	25.5	37.0	27.8	29.7	25.2	50.5	28.8
Three diagnosis codes only	14.4	15.3	14.5	14.0	13.8	13.8	14.6	11.1	14.5
Four diagnosis codes only	9.6	9.9	9.5	8.7	8.4	10.6	7.4	7.5	9.4
Five or more diagnosis codes	21.3	19.3	19.7	15.9	19.2	24.3	11.0	13.6	19.6
<b>Private hospitals</b>									
One diagnosis code only	36.4	35.0	33.3	38.6	32.4	35.1	32.2	n.a.	35.3
Two diagnosis codes only	28.8	27.4	27.3	30.6	30.9	28.5	30.4	n.a.	28.5
Three diagnosis codes only	15.0	15.9	16.7	13.9	16.0	15.6	17.1	n.a.	15.6
Four diagnosis codes only	8.3	8.6	9.4	6.8	8.6	8.7	8.1	n.a.	8.5
Five or more diagnosis codes	11.5	12.4	13.3	10.1	12.1	11.9	12.2	n.a.	12.1

(a) Codes reporting external causes of injury and poisoning were not included.

(b) Includes separations for which no diagnosis codes were reported.

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

.. not applicable.

n.a. not available.

**Table 7.10: Separation, same day separation, public patient separation, patient day and average length of stay statistics for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separations, public hospitals, Australia, 1999-00**

Principal diagnosis	Separations	Same day separations	Public patient separations	s per 10,000 population	Patient days	Patient days		(days) excluding same day
						per 10,000 population	ALOS (days)	
Z49 Care involving dialysis	472,545	470,675	422,155	248.0	475,491	249.6	1.0	2.6
Z51 Other medical care	127,682	125,893	113,558	67.0	140,717	73.9	1.1	8.3
Z50 Care involving use of rehabilitation procedures	67,965	26,649	58,212	35.7	989,943	519.6	14.6	23.3
I20 Angina pectoris	66,398	10,388	55,288	34.9	253,505	133.1	3.8	4.3
R10 Abdominal and pelvic pain	53,092	25,406	48,540	27.9	97,374	51.1	1.8	2.6
R07 Pain in throat and chest	47,829	16,478	42,345	25.1	89,172	46.8	1.9	2.3
J18 Pneumonia organism unspecified	42,178	2,684	36,274	22.1	259,423	136.2	6.2	6.5
O70 Perineal laceration during delivery	39,794	1,029	36,734	20.9	126,471	66.4	3.2	3.2
J44 Other chronic obstructive pulmonary disease	36,414	2,586	30,172	19.1	259,657	136.3	7.1	7.6
K80 Cholelithiasis	35,679	4,376	32,038	18.7	112,300	58.9	3.1	3.4
I50 Heart failure	32,718	2,412	26,563	17.2	259,493	136.2	7.9	8.5
H26 Other cataract	31,985	27,171	23,891	16.8	34,398	18.1	1.1	1.5
J45 Asthma	29,962	5,430	27,962	15.7	71,208	37.4	2.4	2.7
I21 Acute myocardial infarction	29,233	2,881	24,346	15.3	181,824	95.4	6.2	6.8
O80 Single spontaneous delivery	27,614	1,561	26,101	14.5	70,407	37.0	2.5	2.6
S52 Fracture of forearm	26,911	7,910	23,024	14.1	51,080	26.8	1.9	2.3
K21 Gastro-oesophageal reflux disease	26,247	20,964	23,400	13.8	40,133	21.1	1.5	3.6
C44 Other malignant neoplasms of skin	24,278	18,014	20,953	12.7	49,934	26.2	2.1	5.1
N39 Other disorders of urinary system	23,919	5,028	21,023	12.6	112,437	59.0	4.7	5.7
L03 Cellulitis	23,438	1,635	20,727	12.3	128,517	67.5	5.5	5.8
K29 Gastritis and duodenitis	23,386	17,941	21,103	12.3	35,645	18.7	1.5	3.3
F20 Schizophrenia	22,899	3,084	22,427	12.0	840,614	441.2	36.7	42.3
F32 Depressive episode	22,628	7,422	20,886	11.9	191,511	100.5	8.5	12.1
I48 Atrial fibrillation and flutter	22,196	6,123	18,244	11.7	71,701	37.6	3.2	4.1
K40 Inguinal hernia	21,341	5,614	18,154	11.2	37,828	19.9	1.8	2.0
T81 Complications of procedures, not elsewhere classified	20,007	3,212	17,135	10.5	110,690	58.1	5.5	6.4
S72 Fracture of femur	19,386	1,803	15,052	10.2	228,327	119.8	11.8	12.9
M54 Dorsalgia	19,112	8,294	15,913	10.0	61,165	32.1	3.2	4.9
O47 False labour	18,710	9,049	17,858	9.8	29,212	15.3	1.6	2.1
Z30 Contraceptive management	18,375	17,114	16,824	9.6	18,846	9.9	1.0	1.4
Other	2,396,436	906,782	2,089,857	1,257.9	10,778,732	5,657.8	4.5	6.6
Not reported	1,841	1,042	1,681	1.0	22,466	11.8	12.2	26.8
<b>Total</b>	<b>3,872,198</b>	<b>1,766,650</b>	<b>3,388,440</b>	<b>2,032.5</b>	<b>16,230,221</b>	<b>8,519.3</b>	<b>4.2</b>	<b>6.9</b>

Note: A similar listing of all principal diagnoses in 3-character ICD-10-AM groupings is provided on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00.html>.

**Table 7.11: Separation, same day separation, public patient separation, patient day and average length of stay statistics for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separations, private hospitals, Australia, 1999-00**

Principal diagnosis	Separations	Same day separations	Public patient separations	s per 10,000 population	Patient days	Patient days		(days) excluding same day
						per 10,000 population	ALOS (days)	
Z51 Other medical care	94,729	94,156	1,622	50.2	96,885	51.4	1.0	4.8
Z49 Care involving dialysis	62,906	62,727	11,610	33.4	63,239	33.5	1.0	2.9
H26 Other cataract	55,645	40,747	2,065	29.5	58,792	31.2	1.1	1.2
K01 Embedded and impacted teeth	39,068	34,089	145	20.7	39,327	20.9	1.0	1.1
Z50 Care involving use of rehabilitation procedures	36,583	18,287	979	19.4	360,732	191.3	9.9	18.7
C44 Other malignant neoplasms of skin	35,171	27,333	578	18.7	56,659	30.0	1.6	3.7
K21 Gastro-oesophageal reflux disease	34,692	32,384	922	18.4	41,801	22.2	1.2	4.1
M23 Internal derangement of knee	33,586	23,101	739	17.8	39,856	21.1	1.2	1.6
R10 Abdominal and pelvic pain	31,463	23,382	1,048	16.7	50,384	26.7	1.6	3.3
K29 Gastritis and duodenitis	28,963	27,475	576	15.4	33,690	17.9	1.2	4.2
H25 Senile cataract	28,090	25,641	402	14.9	28,702	15.2	1.0	1.2
K57 Diverticular disease of intestine	25,779	21,082	433	13.7	49,773	26.4	1.9	6.1
I20 Angina pectoris	24,570	2,819	849	13.0	111,387	59.1	4.5	5.0
M17 Gonarthrosis [arthrosis of knee]	21,786	7,253	594	11.6	121,900	64.6	5.6	7.9
K40 Inguinal hernia	20,818	2,462	619	11.0	40,542	21.5	1.9	2.1
D12 Benign neoplasm of colon, rectum, anus and anal canal	20,733	18,832	386	11.0	27,577	14.6	1.3	4.6
I84 Haemorrhoids	19,327	14,964	453	10.2	27,908	14.8	1.4	3.0
M54 Dorsalgia	18,409	10,011	903	9.8	60,192	31.9	3.3	6.0
N97 Female infertility	18,176	17,384	168	9.6	18,398	9.8	1.0	1.3
G47 Sleep disorders	17,697	1,226	282	9.4	21,400	11.3	1.2	1.2
O04 Medical abortion	17,121	16,845	279	9.1	17,255	9.2	1.0	1.5
K80 Cholelithiasis	16,323	641	1,110	8.7	52,199	27.7	3.2	3.3
F32 Depressive episode	16,322	10,916	219	8.7	104,041	55.2	6.4	17.2
Z80 Family history of malignant neoplasm	15,910	15,755	237	8.4	15,960	8.5	1.0	1.3
Z08 Follow-up examination after treatment for malignant neoplasm	15,861	14,582	536	8.4	16,742	8.9	1.1	1.7
K63 Other diseases of intestine	15,319	14,405	166	8.1	19,201	10.2	1.3	5.2
I25 Chronic ischaemic heart disease	14,565	5,980	1,641	7.7	46,476	24.6	3.2	4.7
J35 Chronic diseases of tonsils and adenoids	14,344	1,817	544	7.6	16,191	8.6	1.1	1.1
F33 Recurrent depressive disorder	14,020	9,809	82	7.4	85,597	45.4	6.1	18.0
R07 Pain in throat and chest	13,406	4,159	704	7.1	27,072	14.4	2.0	2.5
Other	1,201,012	535,010	50,021	636.9	4,595,255	2,436.9	3.8	6.1
Not reported	3,268	2,183	2	1.7	10,692	5.7	3.3	7.8
<b>Total</b>	<b>2,025,662</b>	<b>1,137,457</b>	<b>80,914</b>	<b>1,074.2</b>	<b>6,355,825</b>	<b>3,370.5</b>	<b>3.1</b>	<b>5.9</b>

Note: A similar listing of all principal diagnoses in 3-character ICD-10-AM groupings is provided on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00.html>.

**Table 7.12: Separations for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separations, public hospitals, States and Territories, 1999-00**

<b>Principal diagnosis</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Z49 Care involving dialysis	132,864	144,240	71,480	50,951	32,186	9,462	12,384	18,978	472,545
Z51 Other medical care	20,639	43,013	29,478	13,290	14,909	1,818	4,022	513	127,682
Z50 Care involving use of rehabilitation procedures	22,133	18,747	19,526	3,006	2,931	679	381	562	67,965
I20 Angina pectoris	23,733	16,466	12,722	5,126	5,101	1,769	988	493	66,398
R10 Abdominal and pelvic pain	18,043	14,978	9,701	4,454	4,122	803	524	467	53,092
R07 Pain in throat and chest	17,557	11,631	9,137	3,307	4,635	619	484	459	47,829
J18 Pneumonia organism unspecified	15,774	10,735	6,571	3,454	3,151	757	482	1,254	42,178
O70 Perineal laceration during delivery	15,381	7,847	7,468	3,634	3,524	603	671	666	39,794
J44 Other chronic obstructive pulmonary disease	14,449	8,916	6,194	2,537	2,910	677	294	437	36,414
K80 Cholelithiasis	12,165	9,105	6,687	2,791	3,380	733	539	279	35,679
I50 Heart failure	12,277	8,265	5,185	2,759	3,043	605	314	270	32,718
H26 Other cataract	9,549	10,286	4,937	3,386	2,919	136	388	384	31,985
J45 Asthma	10,449	7,747	5,893	3,156	1,518	449	358	392	29,962
I21 Acute myocardial infarction	10,496	7,002	5,616	2,236	2,705	657	332	189	29,233
O80 Single spontaneous delivery	10,312	5,185	6,850	1,887	1,957	306	595	522	27,614
S52 Fracture of forearm	10,391	5,677	5,459	2,264	1,886	399	413	422	26,911
K21 Gastro-oesophageal reflux disease	8,159	5,586	4,302	3,445	3,551	492	529	183	26,247
C44 Other malignant neoplasms of skin	6,563	4,515	6,909	2,122	3,339	426	315	89	24,278
N39 Other disorders of urinary system	8,610	5,828	4,406	2,224	1,967	459	198	227	23,919
L03 Cellulitis	8,392	5,275	4,832	2,204	1,680	345	229	481	23,438
K29 Gastritis and duodenitis	8,975	5,031	4,546	2,581	1,515	205	225	308	23,386
F20 Schizophrenia	6,692	5,872	5,339	1,781	2,103	745	214	153	22,899
F32 Depressive episode	6,872	5,233	3,817	3,332	2,377	663	215	119	22,628
I48 Atrial fibrillation and flutter	8,466	5,144	3,777	1,991	1,746	517	444	111	22,196
K40 Inguinal hernia	7,124	5,603	3,908	1,779	1,963	399	391	174	21,341
T81 Complications of procedures, not elsewhere classified	6,225	5,120	3,953	2,218	1,601	467	271	152	20,007
S72 Fracture of femur	7,656	4,637	3,046	1,617	1,583	434	312	101	19,386
M54 Dorsalgia	6,127	4,596	3,217	2,451	1,859	586	120	156	19,112
O47 False labour	5,928	4,348	4,275	1,556	1,591	317	211	484	18,710
Z30 Contraceptive management	5,476	5,230	2,227	2,374	2,284	400	174	210	18,375
Other	788,337	600,195	436,456	220,481	239,984	48,756	33,639	28,588	2,396,436
Not reported	0	1,556	0	0	0	268	0	17	1,841
<b>Total</b>	<b>1,245,814</b>	<b>1,003,609</b>	<b>707,914</b>	<b>360,394</b>	<b>360,020</b>	<b>75,951</b>	<b>60,656</b>	<b>57,840</b>	<b>3,872,198</b>

**Table 7.13: Separations for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separations, private hospitals, States and Territories, 1999-00**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Z51 Other medical care	19,286	27,913	27,284	8,278	9,247	n.p.	n.p.	n.a.	94,729
Z49 Care involving dialysis	14,345	17,822	16,897	6,240	7,597	n.p.	n.p.	n.a.	62,906
H26 Other cataract	22,960	11,605	10,042	5,992	2,898	n.p.	n.p.	n.a.	55,645
K01 Embedded and impacted teeth	11,489	10,236	7,334	5,519	3,266	n.p.	n.p.	n.a.	39,068
Z50 Care involving use of rehabilitation procedures	15,640	7,206	11,089	1,499	889	n.p.	n.p.	n.a.	36,583
C44 Other malignant neoplasms of skin	11,228	6,467	9,894	2,271	4,025	n.p.	n.p.	n.a.	35,171
K21 Gastro-oesophageal reflux disease	10,162	7,164	10,007	3,306	3,130	n.p.	n.p.	n.a.	34,692
M23 Internal derangement of knee	11,147	7,953	4,674	4,888	3,438	n.p.	n.p.	n.a.	33,586
R10 Abdominal and pelvic pain	7,180	10,340	8,016	3,314	1,693	n.p.	n.p.	n.a.	31,463
K29 Gastritis and duodenitis	10,974	8,351	5,779	2,134	1,290	n.p.	n.p.	n.a.	28,963
H25 Senile cataract	8,817	5,606	9,493	1,050	2,295	n.p.	n.p.	n.a.	28,090
K57 Diverticular disease of intestine	7,253	6,828	7,771	1,817	1,490	n.p.	n.p.	n.a.	25,779
I20 Angina pectoris	6,562	7,463	5,553	2,760	1,419	n.p.	n.p.	n.a.	24,570
M17 Gonarthrosis [arthrosis of knee]	7,696	4,622	3,473	2,545	2,558	n.p.	n.p.	n.a.	21,786
K40 Inguinal hernia	7,079	4,837	4,208	2,194	1,590	n.p.	n.p.	n.a.	20,818
D12 Benign neoplasm of colon, rectum, anus and anal canal	7,926	4,279	4,964	1,962	1,259	n.p.	n.p.	n.a.	20,733
I84 Haemorrhoids	7,689	4,421	3,476	2,086	1,088	n.p.	n.p.	n.a.	19,327
M54 Dorsalgia	4,281	3,972	2,714	3,943	1,898	n.p.	n.p.	n.a.	18,409
N97 Female infertility	5,962	6,066	3,603	1,307	606	n.p.	n.p.	n.a.	18,176
G47 Sleep disorders	6,471	4,875	3,270	1,440	1,112	n.p.	n.p.	n.a.	17,697
O04 Medical abortion	11,548	1,623	279	3,282	237	n.p.	n.p.	n.a.	17,121
K80 Cholelithiasis	5,161	3,296	3,462	2,118	1,486	n.p.	n.p.	n.a.	16,323
F32 Depressive episode	3,380	5,087	4,411	2,552	459	n.p.	n.p.	n.a.	16,322
Z80 Family history of malignant neoplasm	6,494	3,759	3,171	1,631	528	n.p.	n.p.	n.a.	15,910
Z08 Follow-up examination after treatment for malignant neoplasms	6,218	3,941	3,150	1,197	840	n.p.	n.p.	n.a.	15,861
K63 Other diseases of intestine	5,660	3,564	3,789	1,179	896	n.p.	n.p.	n.a.	15,319
I25 Chronic ischaemic heart disease	6,699	2,440	2,749	855	1,372	n.p.	n.p.	n.a.	14,565
J35 Chronic diseases of tonsils and adenoids	5,145	2,726	2,857	1,879	1,118	n.p.	n.p.	n.a.	14,344
F33 Recurrent depressive disorder	2,627	6,989	1,416	1,671	612	n.p.	n.p.	n.a.	14,020
R07 Pain in throat and chest	2,671	4,006	3,284	1,491	1,518	n.p.	n.p.	n.a.	13,406
Other	344,526	311,218	264,301	132,695	97,940	n.p.	n.p.	n.a.	1,201,012
Not reported	0	3,163	0	0	0	n.p.	n.p.	n.a.	3,268
<b>Total</b>	<b>604,276</b>	<b>519,838</b>	<b>452,410</b>	<b>215,095</b>	<b>159,794</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>2,025,662</b>

n.a. not available.

n.p. not published.

**Table 7.14: Average length of stay (days) for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separations, public hospitals, States and Territories, 1999–00**

<b>Principal diagnosis</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
Z49 Care involving dialysis	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
Z51 Other medical care	1.3	1.1	1.1	1.0	1.0	1.1	1.0	1.3	1.1
Z50 Care involving use of rehabilitation procedures	16.5	17.8	6.1	24.5	23.1	25.0	21.8	9.2	14.6
I20 Angina pectoris	4.1	3.8	3.5	3.5	3.6	4.2	4.0	3.6	3.8
R10 Abdominal and pelvic pain	1.9	1.7	1.7	1.9	1.9	2.0	2.0	2.1	1.8
R07 Pain in throat and chest	2.0	1.7	1.9	1.8	1.8	2.5	1.8	2.3	1.9
J18 Pneumonia organism unspecified	6.3	6.4	5.8	5.3	6.5	6.7	5.8	5.1	6.2
O70 Perineal laceration during delivery	3.2	3.2	2.9	3.3	3.3	3.4	2.8	4.1	3.2
J44 Other chronic obstructive pulmonary disease	7.4	7.0	6.7	7.4	6.6	8.8	7.1	6.4	7.1
K80 Cholelithiasis	3.5	3.1	2.7	3.3	2.7	2.8	2.8	4.4	3.1
I50 Heart failure	8.5	7.4	7.7	8.0	7.3	8.8	8.0	7.0	7.9
H26 Other cataract	1.1	1.1	1.1	1.1	1.1	1.0	1.1	1.3	1.1
J45 Asthma	2.4	2.3	2.3	2.4	2.7	2.9	2.6	2.5	2.4
I21 Acute myocardial infarction	6.3	6.1	6.1	6.4	6.3	6.6	6.2	5.1	6.2
O80 Single spontaneous delivery	2.6	2.6	2.3	2.8	2.6	3.1	2.2	3.0	2.5
S52 Fracture of forearm	1.9	1.9	1.6	2.1	2.3	1.9	1.7	3.5	1.9
K21 Gastro-oesophageal reflux disease	1.6	1.5	1.5	1.4	1.5	1.5	1.4	1.3	1.5
C44 Other malignant neoplasms of skin	2.8	2.1	1.5	1.9	1.8	1.6	1.8	1.5	2.1
N39 Other disorders of urinary system	5.0	4.7	4.5	4.7	4.4	3.6	3.9	4.5	4.7
L03 Cellulitis	5.6	6.3	4.8	5.0	5.1	5.5	5.5	5.0	5.5
K29 Gastritis and duodenitis	1.6	1.4	1.5	1.4	1.6	1.5	1.6	1.9	1.5
F20 Schizophrenia	45.7	21.3	52.9	28.7	30.1	10.6	15.8	11.8	36.7
F32 Depressive episode	8.4	8.6	9.5	6.5	9.8	6.2	12.1	8.4	8.5
I48 Atrial fibrillation and flutter	3.5	3.2	2.9	2.6	3.0	3.5	2.6	3.4	3.2
K40 Inguinal hernia	1.9	1.7	1.5	1.9	1.9	1.7	1.3	1.6	1.8
T81 Complications of procedures, not elsewhere classified	5.6	5.9	5.3	5.1	5.4	5.1	5.8	6.2	5.5
S72 Fracture of femur	11.1	12.5	12.5	12.4	9.5	12.7	15.2	20.1	11.8
M54 Dorsalgia	3.4	3.2	3.5	2.5	3.2	2.8	4.4	2.3	3.2
O47 False labour	1.7	1.4	1.3	1.8	1.8	1.4	2.0	1.7	1.6
Z30 Contraceptive management	1.0	1.0	1.1	1.0	1.0	1.0	1.0	1.0	1.0
Other	4.9	4.1	4.6	4.1	4.4	5.1	4.3	4.6	4.5
<b>Total<sup>(a)</sup></b>	<b>4.6</b>	<b>3.8</b>	<b>4.3</b>	<b>3.7</b>	<b>4.1</b>	<b>4.7</b>	<b>3.5</b>	<b>3.4</b>	<b>4.2</b>

(a) For all separations.



**Table 7.15: Average length of stay (days) for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separati**

Principal diagnosis	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Z51 Other medical care	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
Z49 Care involving dialysis	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
H26 Other cataract	1.1	1.0	1.1	1.1	1.0	n.p.	n.p.	n.a.	1.1
K01 Embedded and impacted teeth	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
Z50 Care involving use of rehabilitation procedures	8.5	18.1	4.3	18.8	17.4	n.p.	n.p.	n.a.	9.9
C44 Other malignant neoplasms of skin	1.5	1.7	1.5	2.2	1.4	n.p.	n.p.	n.a.	1.6
K21 Gastro-oesophageal reflux disease	1.2	1.3	1.2	1.2	1.3	n.p.	n.p.	n.a.	1.2
M23 Internal derangement of knee	1.1	1.2	1.2	1.2	1.2	n.p.	n.p.	n.a.	1.2
R10 Abdominal and pelvic pain	1.5	1.5	1.7	1.8	1.9	n.p.	n.p.	n.a.	1.6
K29 Gastritis and duodenitis	1.1	1.1	1.3	1.2	1.2	n.p.	n.p.	n.a.	1.2
H25 Senile cataract	1.0	1.0	1.0	1.1	1.0	n.p.	n.p.	n.a.	1.0
K57 Diverticular disease of intestine	1.7	1.9	1.9	2.7	2.2	n.p.	n.p.	n.a.	1.9
I20 Angina pectoris	4.8	4.5	4.8	3.6	4.6	n.p.	n.p.	n.a.	4.5
M17 Gonarthrosis [arthrosis of knee]	5.4	5.4	6.4	6.2	4.3	n.p.	n.p.	n.a.	5.6
K40 Inguinal hernia	2.0	2.0	1.6	2.0	2.3	n.p.	n.p.	n.a.	1.9
D12 Benign neoplasm of colon, rectum, anus and anal canal	1.3	1.4	1.3	1.6	1.4	n.p.	n.p.	n.a.	1.3
I84 Haemorrhoids	1.3	1.4	1.5	1.7	1.7	n.p.	n.p.	n.a.	1.4
M54 Dorsalgia	3.7	3.9	4.0	2.1	2.8	n.p.	n.p.	n.a.	3.3
N97 Female infertility	1.0	1.0	1.0	1.1	1.0	n.p.	n.p.	n.a.	1.0
G47 Sleep disorders	1.1	1.4	1.0	1.6	1.1	n.p.	n.p.	n.a.	1.2
O04 Medical abortion	1.0	1.0	1.1	1.0	1.0	n.p.	n.p.	n.a.	1.0
K80 Cholelithiasis	3.0	3.4	3.3	3.0	3.3	n.p.	n.p.	n.a.	3.2
F32 Depressive episode	8.3	4.8	6.7	4.4	15.6	n.p.	n.p.	n.a.	6.4
Z80 Family history of malignant neoplasms	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
Z08 Follow-up examination after treatment for malignant neoplasms	1.0	1.1	1.1	1.0	1.0	n.p.	n.p.	n.a.	1.1
K63 Other diseases of intestine	1.2	1.3	1.2	1.3	1.5	n.p.	n.p.	n.a.	1.3
I25 Chronic ischaemic heart disease	2.6	3.5	4.0	1.6	5.0	n.p.	n.p.	n.a.	3.2
J35 Chronic diseases of tonsils and adenoids	1.1	1.2	1.1	1.1	1.2	n.p.	n.p.	n.a.	1.1
F33 Recurrent depressive disorder	8.4	4.3	7.7	4.4	19.7	n.p.	n.p.	n.a.	6.1
R07 Pain in throat and chest	2.0	2.0	2.2	1.8	1.8	n.p.	n.p.	n.a.	2.0
Other	3.5	3.7	4.4	3.7	4.1	n.p.	n.p.	n.a.	3.8
<b>Total<sup>(a)</sup></b>	<b>2.9</b>	<b>3.2</b>	<b>3.3</b>	<b>3.1</b>	<b>3.3</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>3.1</b>

(a) For all separations.

n.a. not available.

n.p. not published.

**Table 7.16: Separations for males for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separations, by age group, all hospitals, Australia, 1999-00**

Principal diagnosis	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(a)</sup>
Z49 Care involving dialysis	1	163	630	7,141	24,314	38,846	50,877	58,780	84,839	44,832	1,328	311,751
Z51 Other medical care	140	1,212	1,882	1,951	2,886	6,083	14,852	27,906	32,865	14,656	1,048	105,481
I20 Angina pectoris	0	0	1	11	254	2,535	8,988	14,295	17,340	11,382	2,280	57,086
Z50 Care involving use of rehabilitation procedures	6	12	171	2,530	2,908	4,031	5,711	6,768	10,547	11,160	3,855	47,699
K40 Inguinal hernia	1,800	1,483	1,236	1,707	2,993	4,179	6,377	6,655	6,652	4,316	835	38,233
H26 Other cataract	2	26	52	77	142	471	1,703	4,197	11,091	15,325	3,283	36,369
C44 Other malignant neoplasms of skin	2	3	11	74	377	1,615	3,915	6,132	9,650	10,681	3,015	35,475
R07 Pain in throat and chest	2	7	107	594	1,983	5,271	7,599	6,792	5,520	3,312	696	31,883
K21 Gastro-oesophageal reflux disease	1,042	340	407	1,232	3,477	5,469	6,796	5,436	4,299	2,195	329	31,022
M23 Internal derangement of knee	1	0	277	4,664	6,457	6,689	6,012	3,995	2,050	692	36	30,873
R10 Abdominal and pelvic pain	192	367	2,418	2,813	3,989	4,660	4,582	3,794	3,495	2,221	499	29,030
J18 Pneumonia organism unspecified	867	3,091	1,329	780	1,234	1,611	1,811	2,609	4,781	6,143	2,874	27,130
J44 Other chronic obstructive pulmonary disease	2	63	108	28	46	286	1,052	3,665	9,127	9,215	2,162	25,754
K29 Gastritis and duodenitis	23	120	270	1,065	2,518	3,539	4,311	4,467	4,392	2,490	400	23,595
I21 Acute myocardial infarction	0	0	0	15	267	1,447	4,215	5,431	5,869	4,700	1,284	23,228
I25 Chronic ischaemic heart disease	1	3	4	5	84	835	3,735	6,411	7,103	3,478	322	21,981
N40 Hyperplasia of prostate	0	0	1	5	40	148	1,277	4,781	7,863	5,713	1,168	20,996
I50 Heart failure	34	6	5	55	103	311	807	2,191	5,580	8,045	3,599	20,736
G47 Sleep disorders	2,963	1,386	493	227	1,093	2,678	4,569	3,772	2,145	915	46	20,287
Z08 Follow-up examination after treatment for malignant neoplasm	0	86	45	65	189	603	1,836	4,100	7,107	5,376	873	20,280
K01 Embedded and impacted teeth	0	20	1,355	10,632	4,233	1,383	493	238	93	73	6	18,526
K57 Diverticular disease of intestine	1	0	2	23	280	1,254	3,005	4,142	5,120	3,547	555	17,929
I84 Haemorrhoids	0	17	19	384	1,874	4,072	4,948	3,361	2,053	925	108	17,761
M17 Gonarthrosis [arthrosis of knee]	0	0	6	172	666	1,680	2,767	3,905	4,801	2,974	309	17,280
N20 Calculus of kidney and ureter	3	25	23	339	1,567	3,198	4,463	3,904	2,590	941	124	17,177
F20 Schizophrenia	0	0	30	4,320	5,874	3,613	2,135	639	411	80	13	17,116
I48 Atrial fibrillation and flutter	3	0	4	139	501	976	2,266	3,687	5,138	3,615	755	17,084
S52 Fracture of forearm	9	1,055	8,607	2,578	1,456	1,102	868	566	365	232	105	16,943
D12 Benign neoplasm of colon, rectum, anus and anal canal	0	1	8	46	220	1,036	2,943	4,642	4,909	2,788	320	16,913
M54 Dorsalgia	1	15	97	526	2,017	3,762	3,469	2,549	2,121	1,770	473	16,800
Other	74,167	96,621	108,898	132,928	152,462	172,131	191,583	192,328	228,755	190,936	54,487	1,595,298
Not reported	40	77	136	295	304	246	241	270	295	228	67	2,199
<b>Total</b>	<b>81,302</b>	<b>106,199</b>	<b>128,632</b>	<b>177,421</b>	<b>226,808</b>	<b>285,760</b>	<b>360,206</b>	<b>402,408</b>	<b>498,966</b>	<b>374,956</b>	<b>87,254</b>	<b>2,729,915</b>

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

**Table 7.17: Separations for females for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separations, by age group, all hospitals, Australia, 1999-00**

Principal diagnosis	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(a)</sup>
Z49 Care involving dialysis	0	1	419	4,003	15,877	22,623	33,957	49,901	67,619	28,123	1,177	223,700
Z51 Other medical care	162	979	1,494	1,547	3,950	13,352	27,576	29,305	26,373	11,090	1,096	116,924
Z50 Care involving use of rehabilitation procedures	11	6	49	1,129	2,233	3,239	4,943	5,774	11,203	18,237	10,025	56,849
R10 Abdominal and pelvic pain	143	295	2,708	8,531	9,725	9,774	8,776	6,258	4,896	3,306	1,111	55,523
O70 Perineal laceration during delivery	0	0	22	10,778	33,242	7,960	24	0	0	0	0	52,026
H26 Other cataract	3	28	31	55	101	322	1,405	4,590	15,137	23,268	6,321	51,261
K80 Cholelithiasis	2	7	107	2,684	6,226	6,381	6,620	6,008	4,745	3,072	1,029	36,881
I20 Angina pectoris	0	0	2	11	96	817	3,204	5,783	9,879	10,254	3,836	33,882
O04 Medical abortion	0	0	113	14,319	13,336	5,822	161	0	0	0	0	33,755
O80 Single spontaneous delivery	0	0	24	9,184	20,358	4,062	9	0	0	0	0	33,637
K21 Gastro-oesophageal reflux disease	819	184	293	942	2,113	4,202	6,702	6,146	4,992	2,902	622	29,917
K01 Embedded and impacted teeth	0	14	2,093	18,678	6,408	1,655	584	219	90	54	17	29,812
R07 Pain in throat and chest	3	6	101	520	1,384	3,375	6,186	6,382	5,757	4,227	1,410	29,351
K29 Gastritis and duodenitis	52	137	297	1,203	2,313	4,012	5,768	5,506	5,217	3,470	779	28,754
N39 Other disorders of urinary system	810	968	708	1,229	1,364	2,320	3,461	3,288	3,576	4,582	3,194	25,500
F32 Depressive episode	0	0	374	3,372	4,265	5,035	4,414	2,363	1,879	1,863	533	24,099
J18 Pneumonia organism unspecified	634	2,530	1,088	667	1,193	1,507	1,666	2,175	3,507	5,113	3,969	24,049
N97 Female infertility	0	0	0	785	12,454	10,447	350	0	0	0	0	24,036
C44 Other malignant neoplasms of skin	0	4	15	81	470	1,749	3,160	3,632	5,169	6,647	3,046	23,973
K57 Diverticular disease of intestine	1	1	1	17	121	882	3,429	5,335	7,034	5,540	1,397	23,758
N92 Excessive, frequent and irregular menstruation	0	0	32	797	3,713	9,863	7,984	256	6	0	0	22,651
O47 False labour	0	0	25	7,116	11,912	2,618	13	0	0	0	0	21,684
H25 Senile cataract	0	0	3	2	20	82	472	1,586	6,620	9,783	2,528	21,096
I50 Heart failure	31	8	17	31	62	152	472	1,190	3,687	8,382	6,940	20,972
M54 Dorsalgia	1	15	101	630	1,754	3,575	4,581	3,164	3,012	2,767	1,121	20,721
C50 Malignant neoplasm of breast	0	0	3	37	484	2,776	5,399	4,772	3,685	2,003	494	19,653
O99 Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium	0	0	19	5,838	10,633	2,286	20	0	0	0	0	18,796
O68 Labour and delivery complicated by fetal stress [distress]	0	0	12	4,024	11,668	2,989	16	0	0	0	0	18,709
J44 Other chronic obstructive pulmonary disease	2	36	135	56	57	276	1,203	3,206	5,822	5,852	1,764	18,409
M17 Gonarthrosis [arthrosis of knee]	0	1	8	87	366	1,073	2,542	3,714	5,514	4,041	679	18,025
Other	55,495	67,291	84,969	189,192	348,498	275,524	244,559	207,232	222,251	214,934	96,622	2,006,569
Not reported	15	52	102	450	594	436	312	247	296	272	134	2,910
<b>Total</b>	<b>58,184</b>	<b>72,563</b>	<b>95,365</b>	<b>287,995</b>	<b>526,990</b>	<b>411,186</b>	<b>389,968</b>	<b>368,032</b>	<b>427,966</b>	<b>379,782</b>	<b>149,844</b>	<b>3,167,882</b>

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

**Table 7.18: Separation and public patient separation statistics for the 30 principal diagnoses in 3-character ICD-10-AM groupings with the highest number of separations, private free-standing day hospitals, Australia, 1999–00**

Principal diagnosis	Separations	Public patient separations	Separations per 10,000 population
Z51 Other medical care	20,962	435	11.1
H25 Senile cataract	19,081	111	10.1
O04 Medical abortion	14,134	0	7.5
H26 Other cataract	12,889	24	6.8
C44 Other malignant neoplasms of skin	10,999	14	5.8
K29 Gastritis and duodenitis	10,367	49	5.5
K21 Gastro-oesophageal reflux disease	10,343	387	5.5
R10 Abdominal and pelvic pain	9,351	30	5.0
D12 Benign neoplasm of colon, rectum, anus and anal canal	6,917	101	3.7
K57 Diverticular disease of intestine	6,722	55	3.6
K01 Embedded and impacted teeth	5,431	0	2.9
Z80 Family history of malignant neoplasm	5,272	18	2.8
N97 Female infertility	5,152	0	2.7
I84 Haemorrhoids	5,081	25	2.7
K20 Oesophagitis	4,860	0	2.6
K63 Other diseases of intestine	4,542	3	2.4
Z49 Care involving dialysis	4,185	0	2.2
K44 Diaphragmatic hernia	3,980	44	2.1
K22 Other diseases of oesophagus	3,909	36	2.1
Z31 Procreative management	3,692	3	2.0
K30 Dyspepsia	3,416	227	1.8
K59 Other functional intestinal disorders	3,147	11	1.7
I25 Chronic ischaemic heart disease	2,966	1,593	1.6
R19 Other symptoms and signs involving the digestive system and abdomen	2,860	124	1.5
H02 Other disorders of eyelid	2,855	2	1.5
Z09 Follow-up examination after treatment for conditions other than malignant neoplasm	2,815	59	1.5
K62 Other diseases of anus and rectum	2,742	72	1.5
K02 Dental caries	2,688	0	1.4
K58 Irritable bowel syndrome	2,399	57	1.3
Z41 Procedures for purposes other than remedying health state	2,212	0	1.2
Other	83,609	936	44.3
Not reported	558	0	0.3
<b>Total</b>	<b>280,136</b>	<b>4,416</b>	<b>148.6</b>

**Table 7.19: Separation, same day separation, public patient separation, patient day and average length of stay statistics by principal diagnosis in ICD-10-AM groupings, public psychiatric hospitals, Australia, 1999–00**

Principal diagnosis		Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days		ALOS (days)	ALOS (days) excluding same day
						Patient days	per 10,000 population		
A00–B99	Infectious and parasitic diseases	31	30	30	<0.1	56	<0.1	1.8	26.0
C00–D48	Neoplasms	1	0	1	<0.1	13	<0.1	13.0	13.0
D50–D89	Dis. of blood and blood-forming organs and immune mechanism	0	0	0	<0.1	0	<0.1	..	..
E00–E90	Endocrine, nutritional and metabolic diseases	3	0	3	<0.1	637	0.3	212.3	212.3
F00–F03	Dementia	465	3	404	0.2	74,176	38.9	159.5	160.5
F04–F09	Other organic mental disorders	311	52	296	0.2	72,700	38.2	233.8	280.5
F10	Mental, behavioural disorders due to use of alcohol	816	62	796	0.4	98,095	51.5	120.2	130.0
F11–F19	Mental, behav. disorders due to other psychoactive substance use	1,652	101	1,610	0.9	12,015	6.3	7.3	7.7
F20	Schizophrenia	4,116	279	3,946	2.2	538,269	282.5	130.8	140.2
F21–F29	Other schizotypal, delusional disorders	1,891	235	1,835	1.0	77,720	40.8	41.1	46.8
F30	Manic episode	158	11	148	0.1	3,512	1.8	22.2	23.8
F31	Bipolar affective disorder	1,707	218	1,672	0.9	61,251	32.2	35.9	41.0
F32–F33	Depressive episode or disorder	2,277	745	2,243	1.2	44,076	23.1	19.4	28.3
F34–F39	Other mood (affective) disorders	209	32	204	0.1	1,790	0.9	8.6	9.9
F40–F48	Neurotic, stress-related and somatoform disorders	1,924	267	1,884	1.0	13,799	7.2	7.2	8.2
F50	Eating disorders	9	0	9	<0.1	426	0.2	47.3	47.3
F51–F59	Other behav. syndromes associated with physiological disturbances, physical factors	23	0	22	<0.1	281	0.1	12.2	12.2
F60–F69	Disorders of adult personality and behaviour	1,092	48	1,060	0.6	24,165	12.7	22.1	23.1
F70–F79	Mental retardation	74	2	70	<0.1	69,497	36.5	939.1	965.2
F80–F89	Disorders of psychological development	27	0	26	<0.1	1,590	0.8	58.9	58.9
F90–F98	Disorders with onset usually occurring in childhood, adolescence	322	226	319	0.2	1,849	1.0	5.7	16.9
F99	Unspecified mental disorder	38	0	24	<0.1	854	0.4	22.5	22.5
G00–G99	Diseases of the nervous system	116	0	84	0.1	31,430	16.5	270.9	270.9
H00–H95	Diseases of eye, adnexa, ear and mastoid process	0	0	0	<0.1	0	<0.1	..	..
I00–I99	Diseases of circulatory system	3	0	3	<0.1	94	<0.1	31.3	31.3
J00–L99	Diseases of respiratory/digestive system, skin & subcutaneous tissue	1	0	0	<0.1	26	<0.1	26	26
M00–M99	Diseases of musculoskeletal and connective tissue	0	0	0	<0.1	0	<0.1	..	..
N00–N99	Diseases of genitourinary system	0	0	0	<0.1	0	<0.1	..	..
O00–O99	Pregnancy, childbirth and the puerperium	1	0	1	<0.1	10	<0.1	10.0	10.0
P00–P96	Certain diseases originating in the perinatal period	0	0	0	<0.1	0	<0.1	..	..
Q00–Q99	Congenital abnormalities	1	0	1	<0.1	572	0.3	572.0	572.0
R00–R99	Signs, symptoms and abnormal findings nec	129	51	115	0.1	1,498	0.8	11.6	18.6
S00–T98	Injury, poisoning and other consequences of external causes	14	1	14	<0.1	61	<0.1	4.4	4.6
Z03.2, Z81, Z86.5	Observation, personal, family history of mental and behav. disorder	0	0	0	<0.1	0	<0.1	..	..
Z00–Z99 <sup>(a)</sup>	Other reasons for contact with health services	342	16	340	0.2	14,289	7.5	41.8	43.8
	Not reported	193	0	192	0.1	11,479	6.0	59.5	59.5
<b>Total</b>		<b>17,946</b>	<b>2,379</b>	<b>17,352</b>	<b>9.4</b>	<b>1,156,230</b>	<b>606.9</b>	<b>63.4</b>	<b>71.4</b>

Note: Abbreviations: dis.—diseases, behav.—behavioural.

(a) Excluding Z03.2, Z81 and Z86.5.

.. not applicable.

# 8 Procedures for admitted patients

## Introduction

The *National Health Data Dictionary* Version 8.0 (NHDC 1999) 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. Procedures therefore encompass surgical procedures and also non-surgical investigative and therapeutic procedures such as X-rays and chemotherapy.

Procedures for 1999–00 were classified, coded and reported to the National Hospital Morbidity Database by all States and Territories except South Australia using the first edition of the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM) (National Centre for Classification in Health 1998). South Australia mapped the data collected using this classification forward to codes of the second edition of ICD-10-AM (National Centre for Classification in Health 2000). The Institute mapped these data backward to first edition codes so that national data could be presented in a single classification in this report. The mapped data are not completely equivalent to unmapped data, so this means that the South Australian data should be interpreted with these mappings in mind. Further information about the backward mapping and other information about the quality of the ICD-10-AM coded data are presented in Appendix 3.

One or more procedures can be reported for each separation in the National Hospital Morbidity Database, but procedures are not undertaken during all hospital admissions, so only a proportion of the separation records includes procedure data. For example, procedures were reported for only 39.5% of separations with a principal diagnosis within the *Certain infectious and parasitic diseases* chapter.

For 1999–00 the data element *Procedure* superseded the previous data elements *Principal procedure* and *Additional procedure*. Because of the discontinuation of the concept of *Principal procedure* amongst the reported procedures, the data on procedures presented in this report differ from those presented in previous reports in this series, which were mostly based on principal procedures. As more than one procedure can be reported for each separation, and all have equal 'status', there are three types of data presented:

- data on the separations for which there was one or more procedures reported within the group of procedures (an ICD-10-AM procedure block, group of blocks or chapter) being considered, regardless of whether the procedure was the first reported or another procedure. Because more than one procedure can be reported for each separation, the counts for these data are not additive, so totals in the tables will not usually equal the sum of counts in the rows.
- data on the separations for which a procedure within a group of procedures being considered was the first reported procedure. These data have been included in some tables to enable some comparison with previous reports. Although the data elements changed, the method of coding procedures remained the same, with the order of codes determined using the following hierarchy: procedures performed for the treatment of the principal diagnosis; procedures performed for treatment of additional diagnoses; diagnostic/exploratory procedures related to the principal diagnosis; and

diagnostic/exploratory procedures related to additional diagnoses. Hence, 1999–00 data on the first reported procedure will be largely comparable with data from previous years reported for principal procedures.

- data on the total number of procedures reported. For these data, all procedures within a group of procedures being considered are counted, even if there are more than one reported for a separation.

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 procedures 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 8.2 and 8.3);
- 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 8.10 and 8.11 present counts of all procedures 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 8.12 to 8.19) 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/hse/ahs99-00/index.html> (Tables S8.1 and S8.2).

In addition, Table 8.9 presents information on the number of procedures reported.

Tables are presented with summary separation, patient day and average length of stay statistics for public and private hospitals and for public patients, 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 4.6 million separations for which a procedure was reported, 78% of total separations. Seventeen million patient days were reported for separations with a procedure, 76% of the total.

## **Procedures and other data elements reported for separations**

The information on procedures reported in this chapter is compiled in the National Hospital Morbidity Database with a range of other data. Figure 8.1 demonstrates this

using the example of a procedure (Block 668 *Coronary angiography*) and other data elements in the National Hospital Morbidity Database.

There were 74,203 separations for which coronary angiography was reported, about half in the public sector (50.3%). The principal diagnosis mostly associated with this procedure was I25.11 *Atherosclerotic heart disease, of native coronary artery* (16,343 separations) and the most commonly reported AR-DRG was F42B *Circulatory disorder without acute myocardial infarction with invasive cardiac investigative procedure without complex diagnosis/procedure* (37,280 separations). Sixty-seven per cent of separations were male, compared with 46.3% of all separations. For 93.6% of separations, the patients were aged 45 years or over.

## ICD-10-AM chapters

Figures 8.2 and 8.3 provide a summary of the number of separations and patient days by sector, reported for each of the ICD-10-AM procedure chapter groupings.

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

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

For both sectors combined, the two chapters with the highest number of separations for procedures were *Allied health interventions*, followed by *Procedures on digestive system*. The two chapters with the largest numbers of patient days were *Allied health interventions* and *Imaging services*.

Procedures were reported for varying proportions of separations in the ICD-10-AM principal diagnoses groups. High proportions of separations for the *Neoplasms* (94.0%, 397,875), *Diseases of the blood and blood-forming organs* (92.7%, 59,393), *Diseases of the digestive system* (88.4%, 619,096) and *Diseases of the genitourinary system* (86.0%, 305,212) chapters had procedures reported. In contrast, procedures were reported for smaller proportions of separations with principal diagnoses in the *Mental and behavioural disorders* (35.8%, 87,124) and *Certain infectious and parasitic diseases* (49.5%, 34,283) chapters.

## Broad procedure groupings

### Sector

Public hospitals accounted for 61.1% of the separations for which a procedure was reported, although they accounted for 65.7% of the separations overall (Tables 8.1 and 8.2). Similarly, although 71.9% of overall patient days were in public hospitals, only 69.3% of patient days associated with procedures were in public hospitals. In public hospitals, 72.8% of total separations involved a procedure (2,819,986), and these separations were associated with 73.3% of total patient days (11,893,662) (Table 8.1). In contrast, 88.6% of total separations in private hospitals involved a procedure (1,749,122), and these separations were associated with 82.8% of total patient days (5,265,755) (Table 8.2).



The private sector reported a higher proportion of separations for 'same day procedures' than the public sector. About 52% (1,452,959) of separations for which a procedure was reported were same day in public hospitals compared to 60.0% (1,076,780) in private hospitals (Tables 8.1 and 8.2).

The group of procedures that accounted for a large number of separations in public hospitals was *Procedures on kidney* (Blocks 1040–1063). There were 495,117 separations for which procedures in this group were reported and a total of 499,214 procedures were reported. These were the first reported procedures for 486,865 separations.

In private hospitals the group of procedures that accounted for a large number of separations was *Other procedures on abdomen, peritoneum and hernia* (Blocks 983–1011). There were 221,941 separations for which a procedure in this group was reported and a total of 228,185 procedures reported. For 179,825 separations, procedures in this group were the first reported.

## 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 sector. 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 (82.6%, 2,970) than in Queensland (70.4%, 1,378). The proportion of total patient days for *Procedures on appendix* (Blocks 926–927) that were reported for private hospitals rather than public hospitals varied by State, from 37.6% (8,417) in Queensland to 17.6% (6,057) in New South Wales.

## Age group and sex

In Tables 8.7 and 8.8, information on the number of separations by age group and 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) and *Procedures on large intestine* (Blocks 904–925). 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 procedure reported was the 15 to 24 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 reported to the National Hospital Morbidity Database. 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 and Western Australia and 12 for Victoria); however, with the exception of the 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 Queensland and Western Australia.

In the public sector 4.0% of records had five or more procedure codes, but in the private sector 2.9% 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.

## Total procedures

Tables 8.10 and 8.11 provide counts of all the procedures reported for 1999–00, 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) (62,574), *Induction and augmentation of labour* (Blocks 1330–1335) (184,549) and *Procedures on skin and subcutaneous tissue* (Blocks 1600–1660) (391,899) are much higher than counts of first reported procedures (Tables 8.1 and 8.2), indicating that these procedures were commonly not reported as the first procedure.

The most commonly reported procedure group in public hospitals and private hospitals combined was *Allied health interventions* (Blocks 2050–2140) (1,488,116), followed by *Miscellaneous non-operative procedures* (Blocks 1820–1899) (640,109). A block which accounted for many of these was *Transfusion of blood and gamma globulin* (Block 1861), 26.4% of the group overall (169,109).

## High volume procedures

Tables 8.12 to 8.19 present information on the most common procedures (at the block level of the ICD-10-AM classification).

Tables 8.12 and 8.13 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 procedure blocks were *Generalised allied health interventions* (Block 2140) (589,549 separations) and *Haemodialysis* (Block 1059) (478,098 separations).

For *Haemodialysis* (Block 1059) the average length of stay was 1.2 days and the proportion of separations that were same day separations was 97.8% (467,435). Separations for which *Generalised allied health interventions* (Block 2140) were reported as a procedure had an average length of stay of 11.9 days. The highest number of patient days was reported for separations with procedures within the *Generalised allied health interventions* (Block 2140) group (7,015,185), followed by separations with *Transfusion of blood and gamma globulin* (Block 1861) (1,063,665) reported as a procedure.

In the private sector, the most frequently reported procedure group was *Generalised allied health interventions* (Block 2140) (203,381 separations), with the second most frequent

being *Panendoscopy with excision* (Block 1008, 125,324 separations). The procedure group reported in association with the highest number of patient days (2,173,501), *Generalised allied health interventions* (Block 2140), also had the longest average length of stay (10.7 days).

There was some variation between the States and Territories in the relative number of separations for the most common procedure blocks (Tables 8.14 and 8.15). For example, in the public sector, Western Australia had relatively low numbers of separations for *Evacuation of uterus* (Block 1267) (2,806 separations). The proportion of total separations for which *Haemodialysis* (Block 1059) was reported was greatest for the Northern Territory (33.5%).

## Age and sex

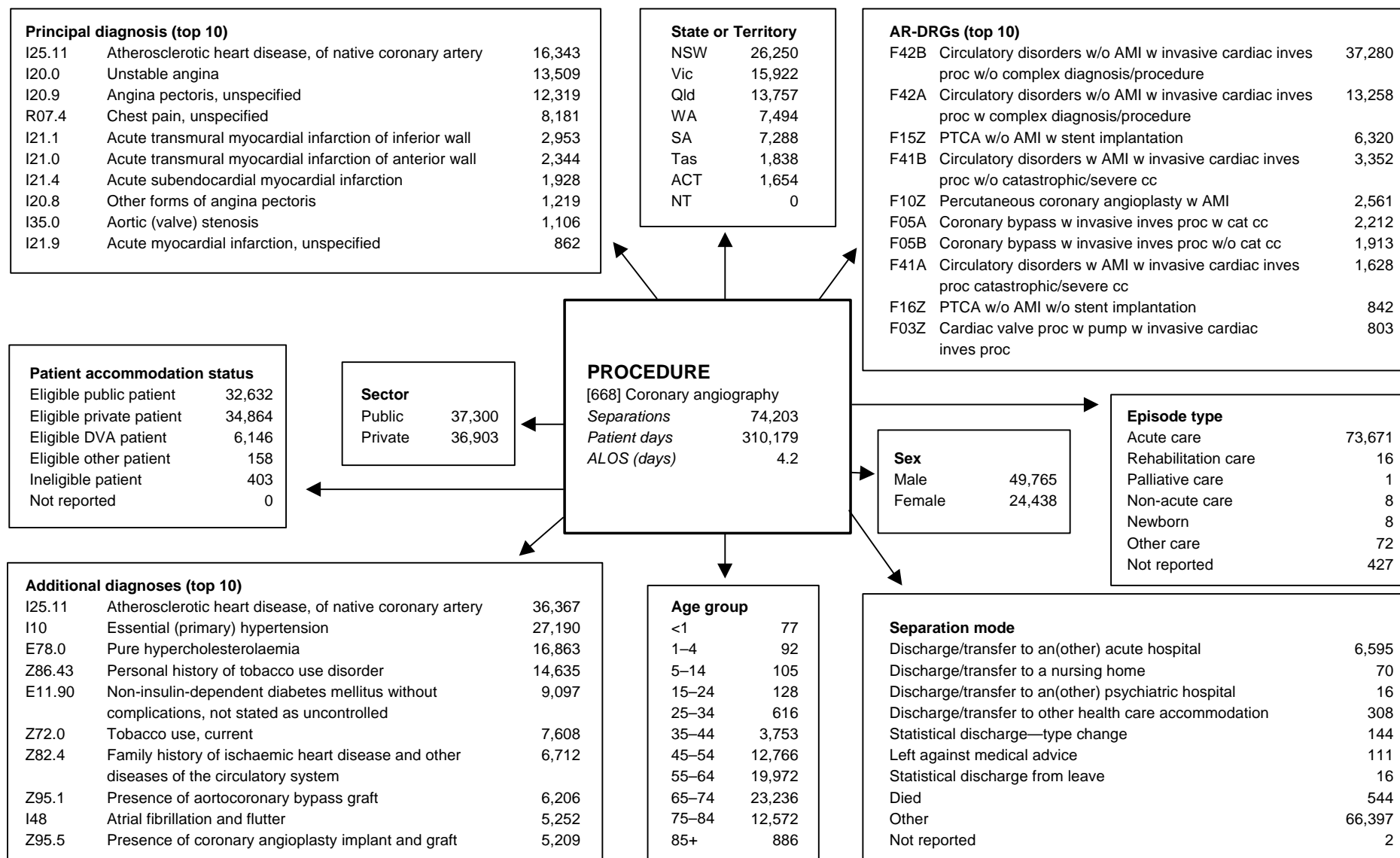
There was little difference between males and females in the proportion of separations with procedures, with males reporting 78.6% (2,136,441) and females reporting 77.8% (2,465,180) (Tables 8.18 and 8.19). For both males and females, the group of procedures with the most separations was *Generalised allied health interventions* (Block 2140).

For males, the highest number of separations with procedures was reported for the 65 to 74 years age group (424,823) (Table 8.18). 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 with *Myringotomy* (Block 309), for example. For females the age group with the highest number of separations with procedures was the 15 to 24 years age group (388,016) (Table 8.19). Older females were more frequently reported with procedure groups such as *Haemodialysis* (Block 1059), *Generalised allied health intervention* (Block 2140) and *Extracapsular crystalline lens extraction by phacoemulsification* (Block 197).

## Additional data

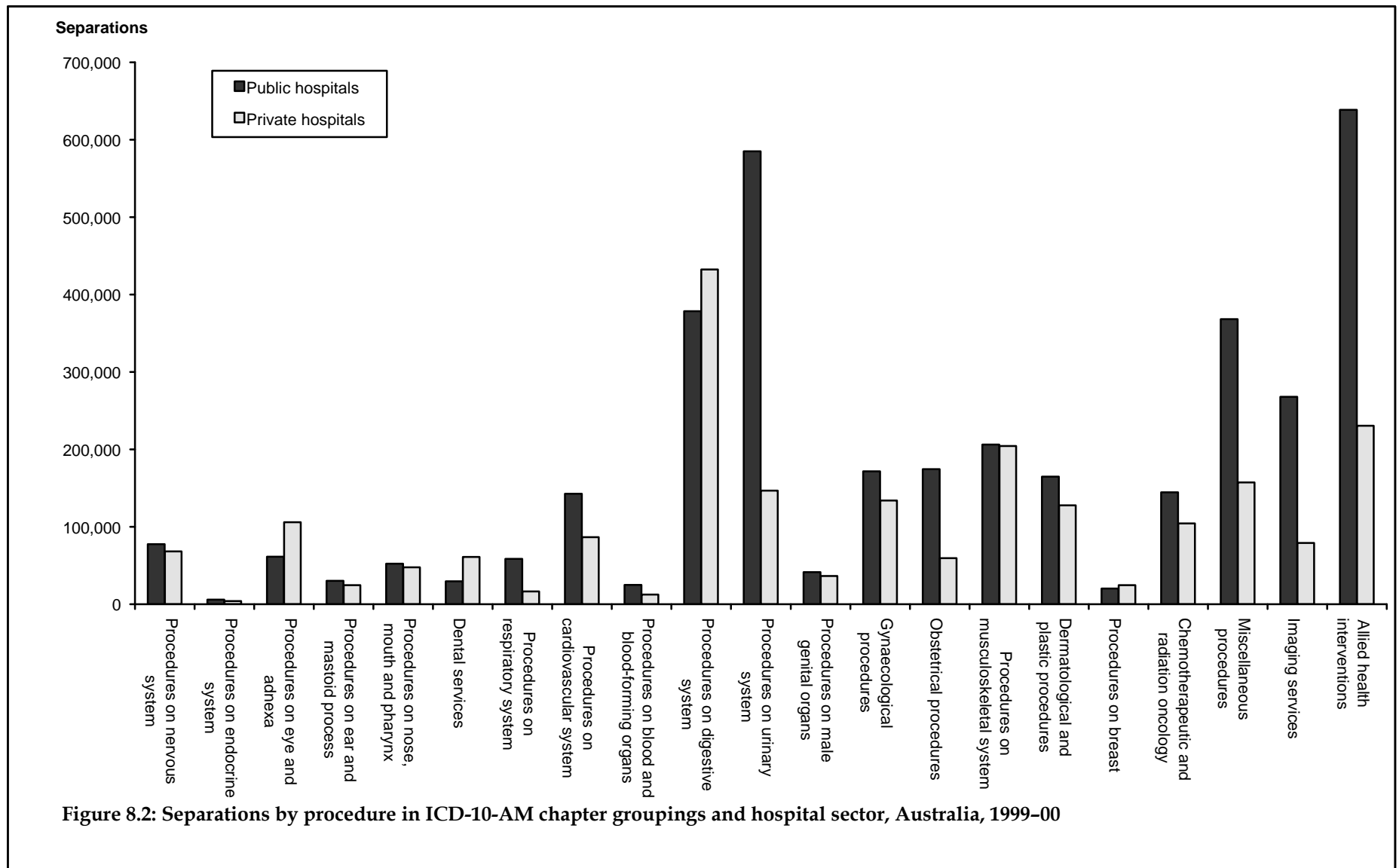
The accompanying tables on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00.html> provide national summary statistics for public and private hospitals for each procedure block (as presented for the top 30 procedure blocks in Tables 8.12 and 8.13). For confidentiality, the statistics 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.

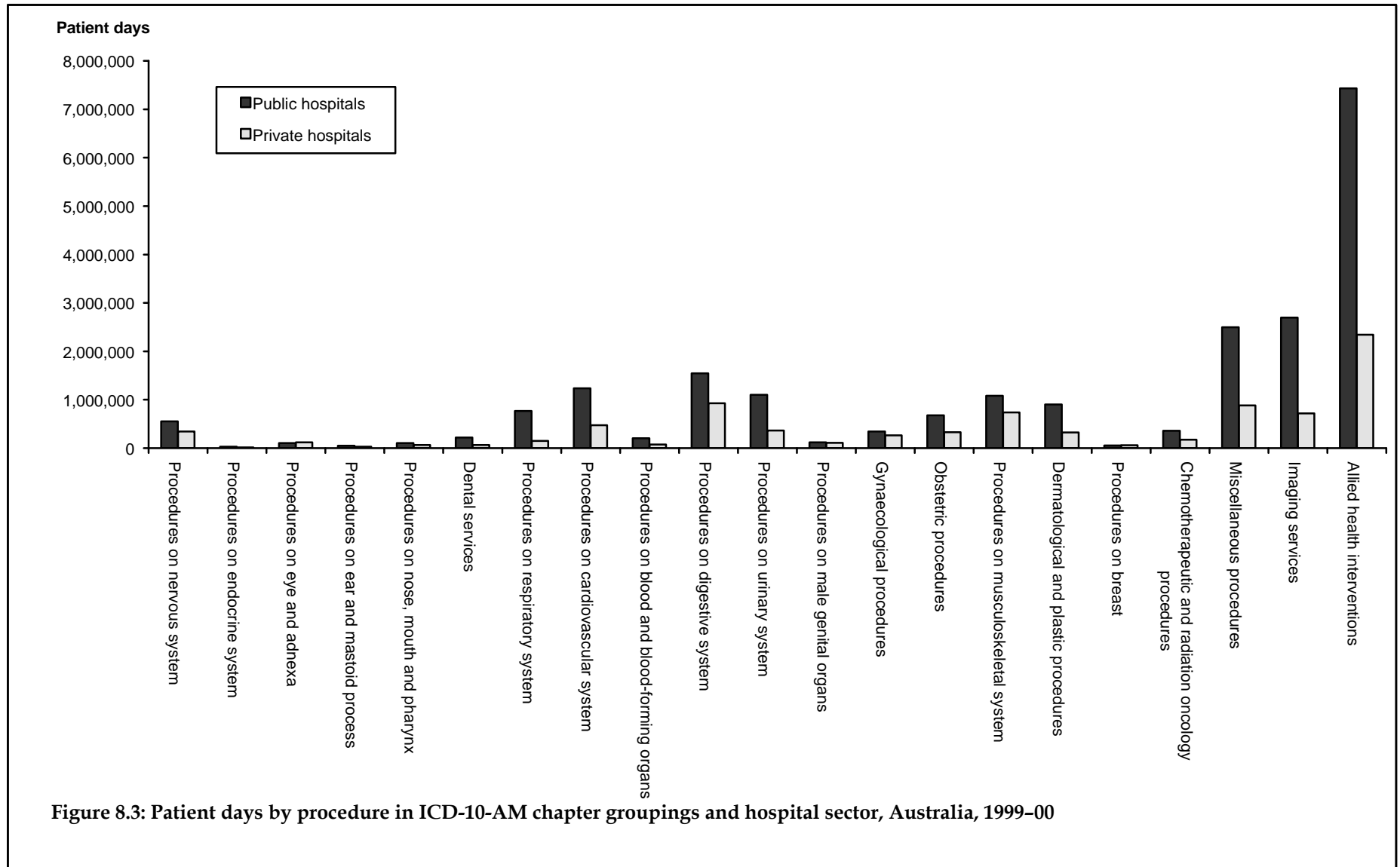
Also available on the Internet version of this publication are additional columns for Tables 8.1, 8.2, 8.12 and 8.13. These columns present information on the number of same day separations, public patient separations, patient days and ALOS for separations for which the procedure groups included the first reported procedure. Also included are counts of procedures undertaken for public patients.



**Figure 8.1: Interrelationships of a procedure (Block 668 Coronary angiography) with other data elements, all hospitals, Australia, 1999-00**

Note: Main abbreviations: w—with, w/o—without, cc—complications and comorbidities, cat—catastrophic, inves—investigative, proc—procedure, AMI—acute myocardial infarction, PTCA—percutaneous coronary angioplasty.





**Table 8.1: Separation and procedure statistics by procedure in ICD-10-AM groupings, public hospitals, Australia, 1999-00**

Procedure blocks		Separations for which the procedure was reported <sup>(a)</sup>					Separations for which this was the first procedure reported		Total procedures reported
		Separations	Same day separations	Public patient separations	Patient days	ALOS (days)	ALOS (days) excluding same day		
1-28	Procedures on skull, brain and meninges	8,595	127	6,591	131,098	15.3	15.5	7,780	13,282
29-60	Procedures on spinal cord and spinal canal structures	45,928	9,274	39,596	376,613	8.2	10.0	24,039	50,540
61-86	Procedures on nerves and ganglia	23,933	14,943	20,098	68,613	2.9	6.0	20,092	25,643
110-129	Procedures on thyroid, parathyroid and endocrine glands	5,941	167	5,153	29,391	4.9	5.1	5,648	6,569
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	8,516	5,174	6,581	22,988	2.7	5.3	7,187	9,816
193-203	Procedures on lens	40,261	33,530	30,823	47,829	1.2	2.1	39,425	40,708
204-256	Procedures on retina, conjunctiva and other areas of eye	16,937	9,466	12,505	43,225	2.6	4.5	13,432	20,205
300-306	Procedures on external ear	3,616	1,941	3,124	8,372	2.3	3.8	2,447	3,735
307-333	Procedures on middle and inner ear and mastoid	27,383	18,523	23,170	45,316	1.7	3.0	22,705	29,935
370-389	Procedures on nose and sinuses	21,657	6,307	18,417	43,113	2.0	2.4	15,848	35,893
390-399	Procedures on tongue, salivary gland and ducts	4,278	1,866	3,576	15,574	3.6	5.7	3,637	4,462
400-408	Procedures on mouth, palate or uvula	5,259	2,348	4,371	16,604	3.2	4.9	3,728	5,426
409-422	Procedures on tonsils, adenoids and pharynx	25,869	4,772	21,807	40,596	1.6	1.7	22,492	26,269
450-490	Dental and orthodontic procedures	29,453	24,527	22,803	217,172	7.4	39.1	27,240	66,150
520-542	Procedures on larynx and trachea	10,003	3,145	8,259	187,535	18.7	26.9	5,670	11,158
543-558	Procedures on bronchus, lung and pleura	22,828	8,703	18,905	212,613	9.3	14.4	18,159	25,827
559-567	Procedures on chest wall, mediastinum and diaphragm	15,836	1,162	12,944	197,993	12.5	13.4	9,009	18,243
568-569	Airway management, continuous ventilatory support	20,652	808	16,555	479,454	23.2	24.1	10,483	41,346
600-638	Procedures on atrium, ventricle, septum and valves	34,817	11,477	28,274	181,376	5.2	7.3	4,051	36,968
639-666	Other procedures on heart, myocardium and pericardium	24,794	2,443	20,292	221,911	9.0	9.8	10,359	55,245
667-693	Procedures on coronary arteries and aorta	54,217	13,479	44,848	290,071	5.4	6.8	51,028	74,012
694-767	Procedures on arteries and veins	78,370	16,560	66,433	918,078	11.7	14.6	48,580	98,119
800-817	Procedures on blood and blood-forming organs	24,858	7,708	21,055	204,434	8.2	11.5	14,597	26,569
850-869	Procedures on oesophagus	11,751	6,537	9,870	51,561	4.4	8.6	8,590	12,518
870-890	Procedures on stomach	12,669	2,481	10,714	226,393	17.9	22.0	9,769	13,779
891-903	Procedures on small intestine	6,894	155	5,772	127,430	18.5	18.9	3,396	7,848
904-925	Procedures on large intestine	123,970	92,158	109,602	419,300	3.4	10.3	97,081	128,237
926-927	Procedures on appendix	19,928	129	17,909	80,070	4.0	4.0	17,847	19,996
928-950	Procedures on rectum and anus	29,069	12,220	26,066	118,568	4.1	6.3	24,031	33,671
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	45,639	7,792	39,893	232,111	5.1	5.9	43,068	70,505
983-1011	Other procedures on abdomen, peritoneum and hernia	188,736	106,449	164,820	800,552	4.2	8.4	154,001	198,336
1040-1063	Procedures on kidney	495,117	473,190	441,471	695,422	1.4	10.1	486,865	499,214
1064-1128	Procedures on bladder, ureter and urethra	91,870	42,934	80,369	432,065	4.7	8.0	68,646	115,419
1160-1170	Procedures on prostate and seminal vesicle	11,794	1,026	10,036	68,242	5.8	6.2	10,620	12,240

(continued)

**Table 8.1 (continued): Separation and procedure statistics by procedure in ICD-10-AM groupings, public hospitals, Australia, 1999-00**

Procedure blocks	Separations for which the procedure was reported <sup>(a)</sup>						Separations for which this was the first procedure reported		Total procedures reported
	Separations	Same day separations	Public patient separations	Patient days	ALOS (days)	ALOS (days) excluding same day	procedures reported		
1171-1176	Procedures on scrotum and tunical vaginalis	2,599	745	2,264	12,753	4.9	6.5	1,923	2,658
1177-1189	Procedures on testis, vas deferens, epididymis, spermatic cord	15,883	10,938	13,649	23,273	1.5	2.5	13,620	16,757
1190-1203	Procedures on penis and other male genital organs	12,536	10,182	11,016	18,207	1.5	3.4	11,695	13,058
1230-1239	Procedures on female pelvic cavity	25,153	15,244	21,549	62,584	2.5	4.8	12,954	27,585
1240-1258	Procedures on ovaries and fallopian tubes	35,647	18,923	31,210	85,275	2.4	4.0	23,135	39,172
1259-1273	Procedures on uterus	114,545	78,660	99,697	205,116	1.8	3.5	89,327	149,598
1274-1278	Procedures on cervix	22,899	20,486	20,176	29,027	1.3	3.5	16,907	26,316
1279-1288	Procedures on vagina and pelvic floor	22,616	11,849	20,233	58,898	2.6	4.4	11,412	24,809
1289-1299	Procedures on other female genital organs	10,521	8,072	6,705	16,388	1.6	3.4	8,845	11,009
1330-1335	Induction and augmentation of labour	100,831	3,660	92,576	388,542	3.9	4.0	50,122	132,211
1336-1339	Spontaneous vertex, or forceps, vacuum or breech delivery	39,932	841	36,664	153,457	3.8	3.9	25,797	42,123
1340	Caesarean delivery	37,863	121	33,785	223,056	5.9	5.9	36,999	37,890
1341-1347	Other obstetric and postpartum procedures	99,267	6,804	90,992	351,958	3.5	3.7	59,990	114,305
1360-1372	Procedures on head, facial bones and joints	7,315	3,048	6,238	25,041	3.4	5.2	6,738	8,295
1373-1380	Procedures on neck, thorax and ribs	628	68	517	11,691	18.6	20.8	406	768
1381-1393	Procedures on spinal cord and vertebrae	2,437	79	1,842	42,002	17.2	17.8	1,842	3,356
1394-1407	Procedures on shoulder, scapula and clavicle	8,389	1,744	7,244	24,725	2.9	3.5	8,044	9,382
1408-1438	Procedures on humerus, elbow and forearm	30,443	6,013	25,426	89,476	2.9	3.4	28,939	36,573
1439-1475	Procedures on hand, wrist and phalanges	28,472	12,238	23,707	55,759	2.0	2.7	24,724	33,799
1476-1494	Procedures on hip, pelvis and femur	27,163	301	21,685	351,778	13.0	13.1	25,943	29,335
1495-1525	Procedures on knee, patella, tibia and fibula	44,895	19,812	38,356	231,837	5.2	8.5	42,700	51,042
1526-1550	Procedures on ankle, foot and toes	23,079	3,468	19,026	149,460	6.5	7.4	20,028	27,759
1551-1579	Other procedures for musculoskeletal system	51,887	18,205	42,679	333,704	6.4	9.4	35,060	60,177
1600-1660	Procedures on skin and subcutaneous tissue	155,995	75,488	133,719	868,357	5.6	9.8	124,825	214,048
1661-1718	Plastic, cosmetic and corrective procedures	11,365	3,505	9,091	66,347	5.8	8.0	7,703	13,642
1740-1759	Procedures on breast	20,402	9,170	18,173	57,253	2.8	4.3	19,981	24,243
1780-1799	Chemotherapeutic and radiation oncology procedures	144,680	117,344	127,275	360,540	2.5	8.9	136,910	152,523
1820-1899	Miscellaneous non-operative procedures	368,248	147,580	317,001	2,498,105	6.8	10.7	230,448	453,247
1940-2016	Imaging services	268,064	34,538	222,281	2,697,816	10.1	11.4	163,907	353,674
2050-2140	Allied health interventions	638,535	26,448	542,851	7,431,750	11.6	12.1	267,512	1,135,322
	No procedure or not reported	1,052,212	313,691	940,865	4,336,599	4.1	5.4	..	..
<b>Total</b>		<b>3,872,198</b>	<b>1,766,650</b>	<b>3,388,440</b>	<b>16,230,221</b>	<b>4.2</b>	<b>6.9</b>	<b>3,872,198</b>	<b>5,082,559</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: ALOS—average length of stay.

.. not applicable.



**Table 8.2: Separation and procedure statistics by procedure in ICD-10-AM groupings, private hospitals, Australia, 1999–00**

Procedure blocks		Separations for which the procedure was reported <sup>(a)</sup>					Separations for which this was the first procedure reported		Total procedures reported
		Separations	Same day separations	Public patient separations	Patient days	ALOS (days)	ALOS (days) excluding same day		
1–28	Procedures on skull, brain and meninges	2,319	57	122	26,381	11.4	11.6	2,143	3,747
29–60	Procedures on spinal cord and spinal canal structures	38,135	9,711	1,322	264,811	6.9	9.0	23,071	47,143
61–86	Procedures on nerves and ganglia	29,511	19,888	975	60,016	2.0	4.2	24,285	34,067
110–129	Procedures on thyroid, parathyroid and endocrine glands	3,991	63	68	14,448	3.6	3.7	3,872	4,432
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	10,436	8,497	238	12,379	1.2	2.0	8,108	11,765
193–203	Procedures on lens	86,165	67,945	2,430	92,625	1.1	1.4	84,858	86,650
204–256	Procedures on retina, conjunctiva and other areas of eye	15,844	11,467	449	21,352	1.3	2.3	11,925	20,785
300–306	Procedures on external ear	1,735	616	52	2,561	1.5	1.7	1,040	1,877
307–333	Procedures on middle and inner ear and mastoid	23,530	17,154	658	28,828	1.2	1.8	19,705	25,352
370–389	Procedures on nose and sinuses	24,847	6,935	524	35,100	1.4	1.6	18,098	51,720
390–399	Procedures on tongue, salivary gland and ducts	2,779	1,173	109	6,737	2.4	3.5	2,360	2,889
400–408	Procedures on mouth, palate or uvula	5,133	2,902	100	7,369	1.4	2.0	3,490	5,433
409–422	Procedures on tonsils, adenoids and pharynx	19,624	4,579	805	23,852	1.2	1.3	16,521	19,853
450–490	Dental and orthodontic procedures	60,974	53,031	357	65,259	1.1	1.5	59,366	100,049
520–542	Procedures on larynx and trachea	3,994	2,404	136	25,476	6.4	14.5	2,901	4,315
543–558	Procedures on bronchus, lung and pleura	7,791	2,903	164	60,688	7.8	11.8	6,341	9,320
559–567	Procedures on chest wall, mediastinum and diaphragm	4,377	227	127	52,214	11.9	12.5	2,177	5,123
568–569	Airway management, continuous ventilatory support	2,812	169	173	56,886	20.2	21.5	723	5,355
600–638	Procedures on atrium, ventricle, septum and valves	34,493	10,084	1,607	137,310	4.0	5.2	2,010	35,788
639–666	Other procedures on heart, myocardium and pericardium	15,003	1,248	363	129,789	8.7	9.3	6,376	31,595
667–693	Procedures on coronary arteries and aorta	45,513	11,838	2,085	190,831	4.2	5.3	26,691	65,359
694–767	Procedures on arteries and veins	35,456	6,681	1,027	267,873	7.6	9.1	43,303	48,984
800–817	Procedures on blood and blood-forming organs	12,514	3,659	246	73,301	5.9	7.9	6,310	13,039
850–869	Procedures on oesophagus	9,321	7,234	215	24,649	2.6	8.3	6,315	9,608
870–890	Procedures on stomach	5,868	634	132	56,975	9.7	10.8	4,896	6,447
891–903	Procedures on small intestine	3,611	283	66	53,458	14.8	16.0	1,752	4,053
904–925	Procedures on large intestine	214,173	189,993	3,873	365,210	1.7	7.2	180,650	217,845
926–927	Procedures on appendix	6,632	47	547	29,149	4.4	4.4	5,416	6,654
928–950	Procedures on rectum and anus	27,109	13,817	710	93,702	3.5	6.0	19,538	31,794
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	23,540	1,988	1,060	100,036	4.2	4.5	22,168	38,788
983–1011	Other procedures on abdomen, peritoneum and hernia	221,941	165,085	4,767	501,745	2.3	5.9	179,825	228,185
1040–1063	Procedures on kidney	66,791	62,649	11,239	101,492	1.5	9.4	65,440	67,485
1064–1128	Procedures on bladder, ureter and urethra	80,965	42,576	3,318	272,530	3.4	6.0	63,239	106,556
1160–1170	Procedures on prostate and seminal vesicle	16,738	2,824	410	80,583	4.8	5.6	15,046	17,706

(continued)

Table 8.2 (continued): Separation and procedure statistics by procedure in ICD-10-AM groupings, private hospitals, Australia, 1999–00

Procedure blocks	Separations for which the procedure was reported <sup>(a)</sup>						Separations for which this was the first procedure reported	Total procedures reported	
	Separations	Same day separations	Public patient separations	Patient days	ALOS (days)	ALOS (days) excluding same day			
1171–1176	Procedures on scrotum and tunical vaginalis	980	426	64	1,773	1.8	2.4	699	1,018
1177–1189	Procedures on testis, vas deferens, epididymis, spermatic cord	13,097	8,879	490	19,304	1.5	2.5	11,192	13,920
1190–1203	Procedures on penis and other male genital organs	6,396	4,774	300	10,888	1.7	3.8	5,907	6,838
1230–1239	Procedures on pelvic cavity	19,388	12,240	848	43,175	2.2	4.3	10,910	21,446
1240–1258	Procedures on ovaries and fallopian tubes	20,825	11,565	973	46,813	2.2	3.8	11,889	23,402
1259–1273	Procedures on uterus	87,577	63,618	3,303	166,179	1.9	4.3	67,251	116,695
1274–1278	Procedures on cervix	11,129	9,822	551	14,107	1.3	3.3	7,580	12,622
1279–1288	Procedures on vagina and pelvic floor	15,013	4,225	590	60,794	4.0	5.2	6,770	17,604
1289–1299	Procedures on other female genital organs	25,291	23,791	322	28,407	1.1	3.1	24,165	26,642
1330–1335	Induction and augmentation of labour	35,510	323	2,403	191,332	5.4	5.4	12,932	52,338
1336–1339	Spontaneous vertex, or forceps, vacuum or breech delivery	15,664	60	1,737	84,778	5.4	5.4	10,422	16,554
1340	Caesarean delivery	18,205	24	779	127,679	7.0	7.0	17,875	18,225
1341–1347	Other obstetric and postpartum procedures	32,740	1,395	1,704	164,027	5.0	5.2	17,917	36,088
1360–1372	Procedures on head, facial bones and joints	3,630	2,190	51	5,550	1.5	2.3	3,064	4,028
1373–1380	Procedures on neck, thorax and ribs	356	23	1	4,830	13.6	14.4	234	445
1381–1393	Procedures on spinal cord and vertebrae	3,398	293	87	32,230	9.5	10.3	2,270	5,353
1394–1407	Procedures on shoulder, scapula and clavicle	19,089	1,578	216	45,531	2.4	2.5	18,423	23,715
1408–1438	Procedures on humerus, elbow and forearm	9,479	2,214	577	25,455	2.7	3.2	8,499	11,402
1439–1475	Procedures on hand, wrist and phalanges	23,537	12,815	589	33,311	1.4	1.9	20,371	30,975
1476–1494	Procedures on hip, pelvis and femur	16,362	320	556	198,235	12.1	12.3	15,709	17,522
1495–1525	Procedures on knee, patella, tibia and fibula	79,139	41,159	1,829	242,948	3.1	5.3	77,268	92,346
1526–1550	Procedures on ankle, foot and toes	21,732	6,457	531	71,439	3.3	4.3	18,993	29,991
1551–1579	Other procedures for musculoskeletal system	51,596	20,488	1,444	191,510	3.7	5.5	29,513	60,494
1600–1660	Procedures on skin and subcutaneous tissue	106,609	72,165	2,916	280,585	2.6	6.1	88,110	177,851
1661–1718	Plastic, cosmetic and corrective procedures	26,563	10,998	432	57,041	2.1	3.0	20,277	38,523
1740–1759	Procedures on breast	24,724	9,814	550	58,007	2.3	3.2	24,043	30,333
1780–1799	Chemotherapeutic and radiation oncology procedures	104,290	92,445	1,900	176,338	1.7	7.1	101,490	106,387
1820–1899	Miscellaneous non-operative procedures	157,394	66,955	5,312	880,907	5.6	9.0	93,399	186,862
1940–2016	Imaging services	79,171	10,582	3,516	717,293	9.1	10.3	39,397	101,757
2050–2140	Allied health interventions	230,659	33,439	8,905	2,341,649	10.2	11.7	87,594	352,794
	No procedure or not reported	231,540	60,677	18,023	1,090,070	4.7	6.0	..	..
<b>Total</b>		<b>2,025,662</b>	<b>1,137,457</b>	<b>80,914</b>	<b>6,355,825</b>	<b>3.1</b>	<b>5.9</b>	<b>2,025,662</b>	<b>3,003,931</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: ALOS—average length of stay.

.. not applicable.

**Table 8.3: Separations by procedure in ICD-10-AM groupings, public hospitals, States and Territories, 1999–00**

Procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, brain and meninges	2,970	2,333	1,378	842	657	215	144	56	8,595
29–60	Procedures on spinal cord and spinal canal structures	12,829	13,043	7,528	6,195	3,482	1,283	1,102	466	45,928
61–86	Procedures on nerves and ganglia	7,282	6,227	3,641	3,195	2,398	617	340	233	23,933
110–129	Procedures on thyroid, parathyroid and endocrine glands	2,231	1,533	988	386	502	163	97	41	5,941
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	2,624	2,041	1,660	1,131	738	96	73	153	8,516
193–203	Procedures on lens	12,950	11,905	5,549	4,612	4,267	146	435	397	40,261
204–256	Procedures on retina, conjunctiva and other areas of eye	5,175	4,841	2,636	1,861	1,892	236	131	165	16,937
300–306	Procedures on external ear	846	758	1,201	337	303	65	57	49	3,616
307–333	Procedures on middle and inner ear and mastoid	6,928	7,612	5,846	3,043	2,891	321	445	297	27,383
370–389	Procedures on nose and sinuses	5,422	6,384	3,672	2,479	2,930	287	354	129	21,657
390–399	Procedures on tongue, salivary gland and ducts	1,474	1,055	844	405	333	85	58	24	4,278
400–408	Procedures on mouth, palate or uvula	1,319	1,568	1,095	539	489	124	75	50	5,259
409–422	Procedures on tonsils, adenoids and pharynx	7,316	7,365	5,263	2,488	2,457	420	396	164	25,869
450–490	Dental and orthodontic procedures	7,015	7,780	6,654	2,890	3,127	982	514	491	29,453
520–542	Procedures on larynx and trachea	3,344	2,548	2,112	762	805	203	135	94	10,003
543–558	Procedures on bronchus, lung and pleura	7,301	5,986	4,589	1,942	1,980	591	273	166	22,828
559–567	Procedures on chest wall, mediastinum and diaphragm	5,156	3,917	2,973	1,671	1,300	317	346	156	15,836
568–569	Airway management, continuous ventilatory support	6,621	5,564	3,646	1,795	1,846	445	406	329	20,652
600–638	Procedures on atrium, ventricle, septum and valves	11,555	7,022	6,098	4,390	3,969	532	1,249	2	34,817
639–666	Other procedures on heart, myocardium and pericardium	8,378	6,917	3,996	2,253	2,030	719	446	55	24,794
667–693	Procedures on coronary arteries and aorta	18,219	12,130	8,727	5,688	6,204	1,630	1,618	1	54,217
694–767	Procedures on arteries and veins	23,928	19,225	16,329	7,016	6,835	1,742	2,508	787	78,370
800–817	Procedures on blood and blood-forming organs	7,459	6,711	4,954	2,516	1,986	548	561	123	24,858
850–869	Procedures on oesophagus	4,019	2,542	2,117	1,019	1,396	353	222	83	11,751
870–890	Procedures on stomach	3,955	3,619	2,212	1,176	1,226	195	180	106	12,669
891–903	Procedures on small intestine	2,471	1,807	1,074	663	589	147	105	38	6,894
904–925	Procedures on large intestine	44,080	28,170	19,711	15,946	11,286	1,683	2,155	939	123,970
926–927	Procedures on appendix	6,636	5,030	3,748	2,071	1,438	428	390	187	19,928
928–950	Procedures on rectum and anus	11,288	6,862	4,302	2,733	2,867	489	293	235	29,069
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	15,653	11,971	7,539	4,015	4,213	1,016	899	333	45,639
983–1011	Other procedures on abdomen, peritoneum and hernia	62,571	47,916	31,912	20,123	18,782	2,846	3,039	1,547	188,736
1040–1063	Procedures on kidney	140,702	149,318	75,121	53,573	34,011	9,861	12,944	19,587	495,117
1064–1128	Procedures on bladder, ureter and urethra	30,434	22,142	16,745	9,713	8,670	2,470	1,148	548	91,870
1160–1170	Procedures on prostate and seminal vesicle	3,890	3,804	1,604	790	1,163	321	175	47	11,794

(continued)

**Table 8.3 (continued): Separations by procedure in ICD-10-AM groupings, public hospitals, States and Territories, 1999–00**

<b>Procedure blocks</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
1171–1176 Procedures on scrotum and tunical vaginalis	893	691	413	309	163	51	49	30	2,599
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	5,009	4,724	1,895	1,778	1,940	273	135	129	15,883
1190–1203 Procedures on penis and other male genital organs	4,571	3,911	1,181	1,175	1,218	159	80	241	12,536
1230–1239 Procedures on pelvic cavity	8,207	8,263	4,171	2,747	591	462	416	296	25,153
1240–1258 Procedures on ovaries and fallopian tubes	10,508	10,417	5,423	4,345	3,137	785	548	484	35,647
1259–1273 Procedures on uterus	34,403	35,157	15,473	10,183	13,823	2,129	1,528	1,849	114,545
1274–1278 Procedures on cervix	5,765	6,958	5,215	1,444	2,609	387	247	274	22,899
1279–1288 Procedures on vagina and pelvic floor	5,545	5,247	5,332	2,006	3,973	283	172	58	22,616
1289–1299 Procedures on other female genital organs	3,597	3,199	1,190	1,027	1,201	145	85	77	10,521
1330–1335 Induction and augmentation of labour	34,176	25,279	18,778	9,358	8,107	2,154	1,805	1,174	100,831
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	9,563	5,770	9,566	11,884	2,182	464	318	185	39,932
1340 Caesarean delivery	12,537	9,519	7,366	3,365	3,216	715	607	538	37,863
1341–1347 Other obstetric and postpartum procedures	32,711	22,504	20,941	8,837	8,787	2,836	1,637	1,014	99,267
1360–1372 Procedures on head, facial bones and joints	2,148	1,760	1,540	642	647	228	195	155	7,315
1373–1380 Procedures on neck, thorax and ribs	223	178	103	49	42	20	10	3	628
1381–1393 Procedures on spinal cord and vertebrae	664	598	613	251	216	36	58	1	2,437
1394–1407 Procedures on shoulder, scapula and clavicle	2,499	1,979	1,841	890	842	119	152	67	8,389
1408–1438 Procedures on humerus, elbow and forearm	11,649	6,695	5,543	2,843	2,091	570	573	479	30,443
1439–1475 Procedures on hand, wrist and phalanges	8,960	7,330	5,357	2,877	2,574	558	460	356	28,472
1476–1494 Procedures on hip, pelvis and femur	9,796	6,775	4,199	2,614	2,325	677	632	145	27,163
1495–1525 Procedures on knee, patella, tibia and fibula	13,161	11,883	7,939	4,544	4,941	857	986	584	44,895
1526–1550 Procedures on ankle, foot and toes	7,337	6,080	4,177	2,304	1,862	542	492	285	23,079
1551–1579 Other procedures for musculoskeletal system	15,156	14,426	9,398	5,716	4,311	1,142	1,047	691	51,887
1600–1660 Procedures on skin and subcutaneous tissue	42,940	33,126	38,511	15,483	18,859	3,118	1,848	2,110	155,995
1661–1718 Plastic, cosmetic and corrective procedures	2,940	3,588	1,879	1,083	1,374	237	174	90	11,365
1740–1759 Procedures on breast	6,136	5,993	3,298	2,023	1,914	481	361	196	20,402
1780–1799 Chemotherapeutic and radiation oncology procedures	26,915	49,407	30,971	14,924	15,489	2,366	4,113	495	144,680
1820–1899 Miscellaneous non-operative procedures	108,860	83,080	69,256	43,859	41,157	13,617	5,853	2,566	368,248
1940–2016 Imaging services	104,193	67,258	42,629	22,349	19,304	5,999	4,255	2,077	268,064
2050–2140 Allied health interventions	226,823	166,066	106,039	57,018	53,291	11,992	11,101	6,205	638,535
No principal procedure or not reported	373,677	247,430	213,137	79,136	96,222	17,466	8,931	16,213	1,052,212
<b>Total<sup>(a)</sup></b>	<b>1,245,814</b>	<b>1,003,609</b>	<b>707,914</b>	<b>360,394</b>	<b>360,020</b>	<b>75,951</b>	<b>60,656</b>	<b>57,840</b>	<b>3,872,198</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

**Table 8.4: Separations by procedure in ICD-10-AM groupings, private hospitals, States and Territories, 1999-00**

Procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1-28	Procedures on skull, brain and meninges	626	639	580	137	193	n.p.	n.p.	n.a.	2,319
29-60	Procedures on spinal cord and spinal canal structures	8,030	9,492	7,782	6,579	3,634	n.p.	n.p.	n.a.	38,135
61-86	Procedures on nerves and ganglia	7,251	6,841	4,975	5,447	3,364	n.p.	n.p.	n.a.	29,511
110-129	Procedures on thyroid, parathyroid and endocrine glands	1,384	883	848	409	298	n.p.	n.p.	n.a.	3,991
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	3,884	1,914	2,868	910	496	n.p.	n.p.	n.a.	10,436
193-203	Procedures on lens	32,736	17,695	20,241	7,121	5,324	n.p.	n.p.	n.a.	86,165
204-256	Procedures on retina, conjunctiva and other areas of eye	5,005	3,157	4,049	1,832	1,054	n.p.	n.p.	n.a.	15,844
300-306	Procedures on external ear	629	340	311	198	191	n.p.	n.p.	n.a.	1,735
307-333	Procedures on middle and inner ear and mastoid	7,093	5,545	4,460	2,765	2,829	n.p.	n.p.	n.a.	23,530
370-389	Procedures on nose and sinuses	8,483	5,401	4,441	2,640	3,068	n.p.	n.p.	n.a.	24,847
390-399	Procedures on tongue, salivary gland and ducts	890	604	577	339	250	n.p.	n.p.	n.a.	2,779
400-408	Procedures on mouth, palate or uvula	1,457	1,199	849	740	736	n.p.	n.p.	n.a.	5,133
409-422	Procedures on tonsils, adenoids and pharynx	6,734	3,759	4,340	2,377	1,600	n.p.	n.p.	n.a.	19,624
450-490	Dental and orthodontic procedures	17,620	15,963	11,603	8,720	5,099	n.p.	n.p.	n.a.	60,974
520-542	Procedures on larynx and trachea	1,208	1,006	819	394	425	n.p.	n.p.	n.a.	3,994
543-558	Procedures on bronchus, lung and pleura	1,686	1,947	2,364	717	773	n.p.	n.p.	n.a.	7,791
559-567	Procedures on chest wall, mediastinum and diaphragm	927	1,211	1,209	516	339	n.p.	n.p.	n.a.	4,377
568-569	Airway management, continuous ventilatory support	875	681	678	219	253	n.p.	n.p.	n.a.	2,812
600-638	Procedures on atrium, ventricle, septum and valves	11,882	8,451	7,795	3,062	2,689	n.p.	n.p.	n.a.	34,493
639-666	Other procedures on heart, myocardium and pericardium	5,767	4,053	3,040	716	1,244	n.p.	n.p.	n.a.	15,003
667-693	Procedures on coronary arteries and aorta	16,067	12,019	9,052	3,803	3,224	n.p.	n.p.	n.a.	45,513
694-767	Procedures on arteries and veins	9,240	10,284	8,489	2,917	2,772	n.p.	n.p.	n.a.	35,456
800-817	Procedures on blood and blood-forming organs	3,031	2,926	3,910	1,125	963	n.p.	n.p.	n.a.	12,514
850-869	Procedures on oesophagus	2,630	2,025	2,598	556	1,111	n.p.	n.p.	n.a.	9,321
870-890	Procedures on stomach	1,175	1,832	1,487	508	640	n.p.	n.p.	n.a.	5,868
891-903	Procedures on small intestine	975	908	809	354	429	n.p.	n.p.	n.a.	3,611
904-925	Procedures on large intestine	76,386	51,933	48,914	18,927	13,301	n.p.	n.p.	n.a.	214,173
926-927	Procedures on appendix	1,414	1,455	1,905	1,034	493	n.p.	n.p.	n.a.	6,632
928-950	Procedures on rectum and anus	10,821	5,925	5,148	2,522	1,850	n.p.	n.p.	n.a.	27,109
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	7,247	5,351	5,181	2,784	2,025	n.p.	n.p.	n.a.	23,540
983-1011	Other procedures on abdomen, peritoneum and hernia	72,150	59,980	51,121	18,391	14,971	n.p.	n.p.	n.a.	221,941
1040-1063	Procedures on kidney	15,371	18,905	18,211	6,151	7,935	n.p.	n.p.	n.a.	66,791
1064-1128	Procedures on bladder, ureter and urethra	27,081	17,537	17,966	8,590	6,616	n.p.	n.p.	n.a.	80,965
1160-1170	Procedures on prostate and seminal vesicle	5,361	5,004	2,958	1,419	1,151	n.p.	n.p.	n.a.	16,738

(continued)

**Table 8.4 (continued): Separations by procedure in ICD-10-AM groupings, private hospitals, States and Territories, 1999–00**

Procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171–1176 Procedures on scrotum and tunical vaginalis	314	195	188	145	79	n.p.	n.p.	n.a.	980
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	4,619	3,278	2,107	1,420	1,001	n.p.	n.p.	n.a.	13,097
1190–1203 Procedures on penis and other male genital organs	2,660	1,234	1,059	708	365	n.p.	n.p.	n.a.	6,396
1230–1239 Procedures on pelvic cavity	6,893	5,332	3,865	2,025	440	n.p.	n.p.	n.a.	19,388
1240–1258 Procedures on ovaries and fallopian tubes	6,370	5,576	3,946	2,460	1,491	n.p.	n.p.	n.a.	20,825
1259–1273 Procedures on uterus	35,278	20,181	13,379	10,152	5,116	n.p.	n.p.	n.a.	87,577
1274–1278 Procedures on cervix	3,954	3,071	2,181	815	529	n.p.	n.p.	n.a.	11,129
1279–1288 Procedures on vagina and pelvic floor	5,103	3,488	2,911	1,657	1,112	n.p.	n.p.	n.a.	15,013
1289–1299 Procedures on other female genital organs	9,435	6,502	5,796	1,786	717	n.p.	n.p.	n.a.	25,291
1330–1335 Induction and augmentation of labour	10,570	8,266	6,873	5,475	2,621	n.p.	n.p.	n.a.	35,510
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	3,142	2,657	3,291	5,306	801	n.p.	n.p.	n.a.	15,664
1340 Caesarean delivery	4,960	4,434	4,319	2,475	1,259	n.p.	n.p.	n.a.	18,205
1341–1347 Other obstetric and postpartum procedures	9,596	8,800	6,473	4,172	2,229	n.p.	n.p.	n.a.	32,740
1360–1372 Procedures on head, facial bones and joints	1,187	810	710	343	434	n.p.	n.p.	n.a.	3,630
1373–1380 Procedures on neck, thorax and ribs	113	80	108	24	25	n.p.	n.p.	n.a.	356
1381–1393 Procedures on spinal cord and vertebrae	986	920	672	250	378	n.p.	n.p.	n.a.	3,398
1394–1407 Procedures on shoulder, scapula and clavicle	5,870	4,490	2,832	2,979	2,204	n.p.	n.p.	n.a.	19,089
1408–1438 Procedures on humerus, elbow and forearm	2,568	2,220	2,142	1,162	932	n.p.	n.p.	n.a.	9,479
1439–1475 Procedures on hand, wrist and phalanges	6,548	6,044	4,686	2,799	2,549	n.p.	n.p.	n.a.	23,537
1476–1494 Procedures on hip, pelvis and femur	4,328	4,788	3,053	1,722	1,670	n.p.	n.p.	n.a.	16,362
1495–1525 Procedures on knee, patella, tibia and fibula	25,772	19,087	12,034	9,682	9,054	n.p.	n.p.	n.a.	79,139
1526–1550 Procedures on ankle, foot and toes	5,851	5,158	5,008	2,664	2,187	n.p.	n.p.	n.a.	21,732
1551–1579 Other procedures for musculoskeletal system	16,656	13,514	7,906	6,461	4,903	n.p.	n.p.	n.a.	51,596
1600–1660 Procedures on skin and subcutaneous tissue	33,839	22,266	25,533	9,778	10,796	n.p.	n.p.	n.a.	106,609
1661–1718 Plastic, cosmetic and corrective procedures	8,057	7,105	5,015	2,847	2,494	n.p.	n.p.	n.a.	26,563
1740–1759 Procedures on breast	7,083	6,642	5,173	2,767	2,007	n.p.	n.p.	n.a.	24,724
1780–1799 Chemotherapeutic and radiation oncology procedures	20,974	33,138	28,562	9,177	9,577	n.p.	n.p.	n.a.	104,290
1820–1899 Miscellaneous non-operative procedures	39,298	35,962	49,373	15,291	11,697	n.p.	n.p.	n.a.	157,394
1940–2016 Imaging services	17,318	21,693	20,839	8,737	7,014	n.p.	n.p.	n.a.	79,171
2050–2140 Allied health interventions	75,222	59,385	49,267	17,453	22,371	n.p.	n.p.	n.a.	230,659
No procedure or not reported	44,213	69,767	53,984	32,852	18,168	n.p.	n.p.	n.a.	231,540
<b>Total<sup>(a)</sup></b>	<b>604,276</b>	<b>519,838</b>	<b>452,410</b>	<b>215,095</b>	<b>159,794</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>2,025,662</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

n.a. not available.

n.p. not published.

**Table 8.5: Patient days by procedure in ICD-10-AM groupings, public hospitals, States and Territories, 1999-00**

Procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1-28	Procedures on skull, brain and meninges	46,964	32,572	20,744	13,692	10,006	3,786	2,730	604	131,098
29-60	Procedures on spinal cord and spinal canal structures	109,617	106,162	57,653	55,708	22,017	9,656	11,890	3,910	376,613
61-86	Procedures on nerves and ganglia	20,447	15,845	8,597	13,641	6,684	1,428	1,065	906	68,613
110-129	Procedures on thyroid, parathyroid and endocrine glands	10,943	7,747	4,195	2,429	2,334	842	595	306	29,391
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	8,354	3,891	4,761	2,958	1,864	289	330	541	22,988
193-203	Procedures on lens	15,927	12,929	6,506	6,022	5,061	178	463	743	47,829
204-256	Procedures on retina, conjunctiva and other areas of eye	13,369	10,139	9,548	4,746	4,180	609	323	311	43,225
300-306	Procedures on external ear	2,082	1,669	2,436	1,009	793	169	75	139	8,372
307-333	Procedures on middle and inner ear and mastoid	11,643	10,670	9,865	4,944	6,181	553	652	808	45,316
370-389	Procedures on nose and sinuses	11,271	11,284	6,943	5,296	6,556	786	736	241	43,113
390-399	Procedures on tongue, salivary gland and ducts	5,094	3,649	3,138	1,415	1,748	245	161	124	15,574
400-408	Procedures on mouth, palate or uvula	5,153	4,361	3,258	1,616	1,543	302	169	202	16,604
409-422	Procedures on tonsils, adenoids and pharynx	12,433	10,271	7,969	4,260	4,179	712	552	220	40,596
450-490	Dental and orthodontic procedures	14,738	11,350	176,250	4,972	6,634	1,221	706	1,301	217,172
520-542	Procedures on larynx and trachea	60,336	53,811	32,738	15,879	16,556	4,028	2,285	1,902	187,535
543-558	Procedures on bronchus, lung and pleura	67,830	58,779	38,192	21,095	16,966	4,850	3,203	1,698	212,613
559-567	Procedures on chest wall, mediastinum and diaphragm	64,773	48,460	35,268	21,692	16,635	3,965	4,863	2,337	197,993
568-569	Airway management, continuous ventilatory support	143,582	133,416	83,493	44,597	47,460	9,397	10,412	7,097	479,454
600-638	Procedures on atrium, ventricle, septum and valves	69,220	41,241	29,202	19,661	14,539	3,012	4,472	29	181,376
639-666	Other procedures on heart, myocardium and pericardium	74,638	66,560	32,831	20,731	15,387	5,961	4,719	1,084	221,911
667-693	Procedures on coronary arteries and aorta	109,286	69,130	41,965	27,117	27,199	8,640	6,733	1	290,071
694-767	Procedures on arteries and veins	309,321	203,245	187,290	86,635	77,221	17,113	24,096	13,157	918,078
800-817	Procedures on blood and blood-forming organs	76,930	48,923	34,058	19,016	15,880	3,684	4,611	1,332	204,434
850-869	Procedures on oesophagus	19,842	11,219	7,921	4,947	4,768	1,418	1,136	310	51,561
870-890	Procedures on stomach	73,159	55,703	48,907	21,195	19,027	2,729	3,075	2,598	226,393
891-903	Procedures on small intestine	48,484	33,010	17,909	11,732	10,133	2,701	2,433	1,028	127,430
904-925	Procedures on large intestine	153,893	95,467	67,386	45,618	39,406	7,769	6,525	3,236	419,300
926-927	Procedures on appendix	28,335	19,540	13,976	7,707	5,793	1,889	2,085	745	80,070
928-950	Procedures on rectum and anus	45,172	28,787	16,333	11,334	12,536	2,314	1,366	726	118,568
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	90,040	57,188	34,222	20,063	19,677	4,224	4,489	2,208	232,111
983-1011	Other procedures on abdomen, peritoneum and hernia	294,090	193,627	126,122	80,527	71,680	14,576	13,520	6,410	800,552
1040-1063	Procedures on kidney	214,164	193,358	108,034	73,726	48,771	13,622	18,194	25,553	695,422
1064-1128	Procedures on bladder, ureter and urethra	143,754	82,654	95,633	53,139	33,852	13,728	5,819	3,486	432,065
1160-1170	Procedures on prostate and seminal vesicle	25,427	19,995	7,342	4,834	6,929	1,831	1,422	462	68,242

*(continued)*

**Table 8.5 (continued): Patient days by procedure in ICD-10-AM groupings, public hospitals, States and Territories, 1999–00**

<b>Procedure blocks</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
1171–1176 Procedures on scrotum and tunical vaginalis	8,252	1,852	1,023	719	377	303	76	151	12,753
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic co	7,286	7,223	2,828	2,294	2,761	399	229	253	23,273
1190–1203 Procedures on penis and other male genital organs	6,214	5,421	1,892	1,795	1,985	313	220	367	18,207
1230–1239 Procedures on pelvic cavity	22,089	17,752	11,150	6,413	2,166	1,243	1,131	640	62,584
1240–1258 Procedures on ovaries and fallopian tubes	26,573	22,382	13,518	10,615	7,939	1,602	1,371	1,275	85,275
1259–1273 Procedures on uterus	65,594	57,862	28,968	19,989	23,088	4,028	2,909	2,678	205,116
1274–1278 Procedures on cervix	8,033	8,493	6,033	2,096	3,066	610	368	328	29,027
1279–1288 Procedures on vagina and pelvic floor	17,781	13,995	10,362	7,162	7,801	975	690	132	58,898
1289–1299 Procedures on other female genital organs	5,796	4,337	1,966	1,717	1,825	304	113	330	16,388
1330–1335 Induction and augmentation of labour	135,700	94,877	65,112	38,998	32,663	8,197	6,876	6,119	388,542
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	40,869	25,005	30,161	43,521	9,454	2,051	1,395	1,001	153,457
1340 Caesarean delivery	77,323	56,733	36,787	19,904	20,496	4,034	3,910	3,869	223,056
1341–1347 Other obstetric and postpartum procedures	120,076	81,754	65,960	35,030	28,994	9,753	5,672	4,719	351,958
1360–1372 Procedures on head, facial bones and joints	7,534	5,533	4,936	2,634	2,230	843	578	753	25,041
1373–1380 Procedures on neck, thorax and ribs	3,925	4,394	1,283	1,253	467	177	168	24	11,691
1381–1393 Procedures on spinal cord and vertebrae	10,721	13,715	10,302	3,069	2,871	469	827	28	42,002
1394–1407 Procedures on shoulder, scapula and clavicle	7,644	5,769	4,833	3,030	2,198	578	436	237	24,725
1408–1438 Procedures on humerus, elbow and forearm	33,566	19,244	13,998	9,177	7,040	2,025	1,813	2,613	89,476
1439–1475 Procedures on hand, wrist and phalanges	17,347	13,827	10,229	6,086	4,791	1,129	1,015	1,335	55,759
1476–1494 Procedures on hip, pelvis and femur	123,221	84,787	60,513	35,005	26,884	8,987	8,339	4,042	351,778
1495–1525 Procedures on knee, patella, tibia and fibula	78,953	54,109	40,703	24,471	18,007	4,624	5,278	5,692	231,837
1526–1550 Procedures on ankle, foot and toes	49,097	35,159	28,409	16,921	9,828	3,394	3,020	3,632	149,460
1551–1579 Other procedures for musculoskeletal system	102,940	89,555	55,729	42,166	23,249	7,529	5,859	6,677	333,704
1600–1660 Procedures on skin and subcutaneous tissue	257,397	191,419	187,335	93,462	93,061	16,292	10,943	18,448	868,357
1661–1718 Plastic, cosmetic and corrective procedures	19,648	19,716	11,167	6,843	6,609	1,160	594	610	66,347
1740–1759 Procedures on breast	20,251	16,524	7,727	5,344	4,630	1,100	955	722	57,253
1780–1799 Chemotherapeutic and radiation oncology procedures	103,238	107,314	64,772	34,222	32,904	8,180	9,217	693	360,540
1820–1899 Miscellaneous non-operative procedures	803,206	552,168	510,739	263,727	223,507	75,904	42,755	26,099	2,498,105
1940–2016 Imaging services	1,095,399	590,676	432,922	246,804	202,976	58,318	48,623	22,098	2,697,816
2050–2140 Allied health interventions	2,663,183	1,956,066	1,271,227	618,390	601,011	136,164	116,213	69,496	7,431,750
No procedure or not reported	1,617,174	774,700	973,854	310,848	459,017	121,102	25,013	54,891	4,336,599
<b>Total<sup>(a)</sup></b>	<b>5,769,219</b>	<b>3,829,729</b>	<b>3,040,641</b>	<b>1,350,334</b>	<b>1,478,887</b>	<b>356,373</b>	<b>210,410</b>	<b>194,628</b>	<b>16,230,221</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.



**Table 8.6: Patient days by procedure in ICD-10-AM groupings, private hospitals, States and Territories, 1999–00**

Procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, brain and meninges	6,954	6,857	7,634	1,514	2,033	n.p.	n.p.	n.a.	26,381
29–60	Procedures on spinal cord and spinal canal structures	49,757	77,504	64,839	33,313	19,882	n.p.	n.p.	n.a.	264,811
61–86	Procedures on nerves and ganglia	14,228	12,921	12,625	11,226	5,903	n.p.	n.p.	n.a.	60,016
110–129	Procedures on thyroid, parathyroid and endocrine glands	4,506	3,570	3,330	1,212	1,001	n.p.	n.p.	n.a.	14,448
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	4,521	2,225	3,378	1,088	675	n.p.	n.p.	n.a.	12,379
193–203	Procedures on lens	35,244	18,519	22,086	7,837	5,519	n.p.	n.p.	n.a.	92,625
204–256	Procedures on retina, conjunctiva and other areas of eye	6,342	4,122	5,641	2,408	1,832	n.p.	n.p.	n.a.	21,352
300–306	Procedures on external ear	838	500	461	377	257	n.p.	n.p.	n.a.	2,561
307–333	Procedures on middle and inner ear and mastoid	8,401	6,388	6,248	3,287	3,510	n.p.	n.p.	n.a.	28,828
370–389	Procedures on nose and sinuses	11,067	7,902	6,645	3,853	4,514	n.p.	n.p.	n.a.	35,100
390–399	Procedures on tongue, salivary gland and ducts	2,078	1,324	1,475	834	826	n.p.	n.p.	n.a.	6,737
400–408	Procedures on mouth, palate or uvula	1,937	1,822	1,336	951	1,101	n.p.	n.p.	n.a.	7,369
409–422	Procedures on tonsils, adenoids and pharynx	7,977	4,678	5,127	2,883	2,184	n.p.	n.p.	n.a.	23,852
450–490	Dental and orthodontic procedures	18,660	16,660	13,157	9,142	5,550	n.p.	n.p.	n.a.	65,259
520–542	Procedures on larynx and trachea	5,722	6,127	6,592	2,029	4,215	n.p.	n.p.	n.a.	25,476
543–558	Procedures on bronchus, lung and pleura	12,067	15,205	20,511	5,066	5,281	n.p.	n.p.	n.a.	60,688
559–567	Procedures on chest wall, mediastinum and diaphragm	11,231	13,520	16,140	5,236	3,612	n.p.	n.p.	n.a.	52,214
568–569	Airway management, continuous ventilatory support	13,903	13,191	16,840	4,184	6,433	n.p.	n.p.	n.a.	56,886
600–638	Procedures on atrium, ventricle, septum and valves	41,460	35,382	36,339	9,418	12,774	n.p.	n.p.	n.a.	137,310
639–666	Other procedures on heart, myocardium and pericardium	44,543	36,130	29,068	6,333	11,834	n.p.	n.p.	n.a.	129,789
667–693	Procedures on coronary arteries and aorta	60,852	53,888	43,140	12,657	15,621	n.p.	n.p.	n.a.	190,831
694–767	Procedures on arteries and veins	60,845	68,672	80,419	23,631	22,453	n.p.	n.p.	n.a.	267,873
800–817	Procedures on blood and blood-forming organs	18,356	16,698	21,386	7,532	6,214	n.p.	n.p.	n.a.	73,301
850–869	Procedures on oesophagus	5,904	5,809	6,965	1,808	3,109	n.p.	n.p.	n.a.	24,649
870–890	Procedures on stomach	11,413	17,066	14,487	5,765	6,167	n.p.	n.p.	n.a.	56,975
891–903	Procedures on small intestine	12,661	14,575	12,399	5,381	6,195	n.p.	n.p.	n.a.	53,458
904–925	Procedures on large intestine	110,879	90,342	90,451	37,185	25,985	n.p.	n.p.	n.a.	365,210
926–927	Procedures on appendix	6,057	6,709	8,417	3,987	2,498	n.p.	n.p.	n.a.	29,149
928–950	Procedures on rectum and anus	27,814	23,535	19,889	11,362	7,973	n.p.	n.p.	n.a.	93,702
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	28,204	24,007	23,791	10,889	9,103	n.p.	n.p.	n.a.	100,036
983–1011	Other procedures on abdomen, peritoneum and hernia	134,012	132,049	129,994	48,532	40,961	n.p.	n.p.	n.a.	501,745
1040–1063	Procedures on kidney	24,564	27,868	27,253	8,986	11,242	n.p.	n.p.	n.a.	101,492
1064–1128	Procedures on bladder, ureter and urethra	70,118	50,855	69,767	38,535	30,671	n.p.	n.p.	n.a.	272,530
1160–1170	Procedures on prostate and seminal vesicle	23,932	22,663	14,968	7,607	6,819	n.p.	n.p.	n.a.	80,583

(continued)

**Table 8.6 (continued): Patient days by procedure in ICD-10-AM groupings, private hospitals, States and Territories, 1999-00**

<b>Procedure blocks</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
1171-1176 Procedures on scrotum and tunical vaginalis	600	407	265	205	200	n.p.	n.p.	n.a.	1,773
1177-1189 Procedures on testis, vas deferens, epididymis, spermatic co	6,339	4,652	3,486	1,970	1,607	n.p.	n.p.	n.a.	19,304
1190-1203 Procedures on penis and other male genital organs	4,134	2,213	2,103	1,092	715	n.p.	n.p.	n.a.	10,888
1230-1239 Procedures on pelvic cavity	13,507	11,211	9,288	5,487	1,633	n.p.	n.p.	n.a.	43,175
1240-1258 Procedures on ovaries and fallopian tubes	13,309	11,872	8,916	6,483	3,843	n.p.	n.p.	n.a.	46,813
1259-1273 Procedures on uterus	57,030	39,028	28,492	20,353	13,069	n.p.	n.p.	n.a.	166,179
1274-1278 Procedures on cervix	4,808	3,800	2,746	1,355	725	n.p.	n.p.	n.a.	14,107
1279-1288 Procedures on vagina and pelvic floor	18,964	13,959	11,324	8,051	5,449	n.p.	n.p.	n.a.	60,794
1289-1299 Procedures on other female genital organs	10,148	7,408	6,375	2,348	1,012	n.p.	n.p.	n.a.	28,407
1330-1335 Induction and augmentation of labour	56,356	45,510	36,051	30,299	14,275	n.p.	n.p.	n.a.	191,332
1336-1339 Spontaneous vertex, or forceps, vacuum or breech delivery	17,702	15,000	17,938	27,044	4,354	n.p.	n.p.	n.a.	84,778
1340 Caesarean delivery	34,236	31,930	28,321	19,164	8,827	n.p.	n.p.	n.a.	127,679
1341-1347 Other obstetric and postpartum procedures	48,819	43,815	30,813	22,190	11,062	n.p.	n.p.	n.a.	164,027
1360-1372 Procedures on head, facial bones and joints	1,800	1,148	1,074	517	784	n.p.	n.p.	n.a.	5,550
1373-1380 Procedures on neck, thorax and ribs	2,066	968	1,234	161	342	n.p.	n.p.	n.a.	4,830
1381-1393 Procedures on spinal cord and vertebrae	9,019	8,851	7,639	2,111	2,929	n.p.	n.p.	n.a.	32,230
1394-1407 Procedures on shoulder, scapula and clavicle	13,941	11,082	7,577	5,940	5,147	n.p.	n.p.	n.a.	45,531
1408-1438 Procedures on humerus, elbow and forearm	5,989	6,639	6,159	2,837	2,409	n.p.	n.p.	n.a.	25,455
1439-1475 Procedures on hand, wrist and phalanges	9,010	8,422	6,704	4,212	3,445	n.p.	n.p.	n.a.	33,311
1476-1494 Procedures on hip, pelvis and femur	49,337	51,510	45,103	23,085	18,282	n.p.	n.p.	n.a.	198,235
1495-1525 Procedures on knee, patella, tibia and fibula	77,445	54,597	43,453	31,029	24,503	n.p.	n.p.	n.a.	242,948
1526-1550 Procedures on ankle, foot and toes	19,464	17,619	15,592	8,971	6,589	n.p.	n.p.	n.a.	71,439
1551-1579 Other procedures for musculoskeletal system	53,551	51,860	34,383	24,456	18,285	n.p.	n.p.	n.a.	191,510
1600-1660 Procedures on skin and subcutaneous tissue	79,837	64,814	68,230	31,220	25,127	n.p.	n.p.	n.a.	280,585
1661-1718 Plastic, cosmetic and corrective procedures	14,784	16,349	9,741	7,064	6,358	n.p.	n.p.	n.a.	57,041
1740-1759 Procedures on breast	17,019	15,420	11,118	6,853	5,235	n.p.	n.p.	n.a.	58,007
1780-1799 Chemotherapeutic and radiation oncology procedures	35,300	57,146	50,637	13,063	15,781	n.p.	n.p.	n.a.	176,338
1820-1899 Miscellaneous non-operative procedures	238,609	201,908	228,471	92,507	78,409	n.p.	n.p.	n.a.	880,907
1940-2016 Imaging services	148,050	186,668	219,245	74,061	54,967	n.p.	n.p.	n.a.	717,293
2050-2140 Allied health interventions	700,577	631,038	539,588	196,939	189,667	n.p.	n.p.	n.a.	2,341,649
No procedure or not reported	210,771	303,709	292,008	123,771	108,866	n.p.	n.p.	n.a.	1,090,070
<b>Total<sup>(a)</sup></b>	<b>1,745,079</b>	<b>1,645,396</b>	<b>1,510,441</b>	<b>665,353</b>	<b>532,846</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>6,355,825</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

n.a. not available.

n.p. not published.

**Table 8.7: Separations for males by age group and procedure in ICD-10-AM groupings, all hospitals, Australia, 1999–00**

Procedure blocks		<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75–84	85+	Total <sup>(a)</sup>
1–28	Procedures on skull, brain and meninges	162	161	344	578	579	715	896	861	938	598	107	5,939
29–60	Procedures on spinal cord and spinal canal structures	1,588	1,204	1,525	1,874	3,683	5,445	5,722	6,149	7,064	4,795	678	39,727
61–86	Procedures on nerves and ganglia	15	153	379	2,089	3,313	4,348	4,681	3,712	3,335	2,803	487	25,315
110–129	Procedures on thyroid, parathyroid and endocrine glands	16	65	84	96	218	389	539	477	482	181	11	2,558
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	210	529	381	517	1,000	1,298	1,309	1,319	1,731	1,744	378	10,416
193–203	Procedures on lens	28	47	105	142	263	715	2,385	5,857	16,057	21,910	4,673	52,182
204–256	Procedures on retina, conjunctiva and other areas of eye	362	1,571	1,183	802	1,126	1,407	1,893	2,234	3,255	3,250	631	17,714
300–306	Procedures on external ear	19	253	544	389	412	498	453	338	267	171	62	3,406
307–333	Procedures on middle and inner ear and mastoid	821	11,305	10,025	852	872	1,110	1,252	1,096	911	455	105	28,804
370–389	Procedures on nose and sinuses	68	1,686	3,977	3,228	3,656	4,159	4,049	3,017	2,110	1,056	187	27,193
390–399	Procedures on tongue, salivary gland and ducts	221	513	314	207	302	402	536	580	505	335	60	3,975
400–408	Procedures on mouth, palate or uvula	31	484	537	721	842	1,078	1,162	786	478	188	26	6,333
409–422	Procedures on tonsils, adenoids and pharynx	111	7,197	9,461	2,570	1,145	730	491	447	400	192	31	22,775
450–490	Dental and orthodontic procedures	55	4,708	6,842	13,226	6,461	3,204	1,997	1,322	857	521	108	39,301
520–542	Procedures on larynx and trachea	206	297	340	348	561	900	1,296	1,766	2,035	1,114	142	9,005
543–558	Procedures on bronchus, lung and pleura	316	429	298	669	746	1,242	2,147	3,677	5,329	3,453	471	18,777
559–567	Procedures on chest wall, mediastinum and diaphragm	238	64	113	1,099	1,038	936	1,336	1,914	2,888	2,173	606	12,405
568–569	Airway management, continuous ventilatory support	3,260	365	319	837	799	910	1,189	1,699	2,586	1,944	278	14,186
600–638	Procedures on atrium, ventricle, septum and valves	379	218	174	157	494	2,594	8,314	12,451	13,618	6,928	405	45,732
639–666	Other procedures on heart, myocardium and pericardium	280	177	223	376	553	1,099	3,221	5,830	7,783	5,469	1,000	26,011
667–693	Procedures on coronary arteries and aorta	357	220	187	151	567	3,608	12,616	19,422	20,843	10,099	594	68,664
694–767	Procedures on arteries and veins	3,014	1,329	1,569	2,254	3,121	4,912	7,662	10,671	14,657	10,082	1,420	60,691
800–817	Procedures on blood and blood-forming organs	103	537	815	870	1,001	1,477	2,480	3,420	3,691	2,384	417	17,195
850–869	Procedures on oesophagus	134	328	327	216	426	940	1,777	2,322	2,919	2,304	492	12,185
870–890	Procedures on stomach	451	326	336	360	510	812	1,176	1,333	1,939	1,690	554	9,487
891–903	Procedures on small intestine	138	46	116	257	294	441	673	1,012	1,417	843	156	5,393
904–925	Procedures on large intestine	271	206	625	2,862	8,804	19,740	32,131	34,747	34,792	20,375	3,104	157,657
926–927	Procedures on appendix	87	147	3,200	3,511	2,338	1,633	990	586	483	248	43	13,266
928–950	Procedures on rectum and anus	337	292	325	966	3,310	6,074	6,900	5,617	4,427	2,240	389	30,877
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	44	61	152	519	1,516	3,470	4,477	4,726	5,451	3,632	686	24,734
983–1011	Other procedures on abdomen, peritoneum and hernia	2,401	3,641	3,776	7,746	16,565	26,870	37,644	38,524	39,602	25,803	4,879	207,451
1040–1063	Procedures on kidney	238	379	844	7,679	25,244	40,307	53,378	61,404	88,331	46,942	1,501	326,247
1064–1128	Procedures on bladder, ureter and urethra	757	859	997	1,670	3,426	6,493	11,519	17,433	26,685	23,508	6,289	99,636
1160–1170	Procedures on prostate and seminal vesicle	0	3	1	12	34	117	1,499	6,216	10,553	8,281	1,814	28,530

(continued)

**Table 8.7 (continued): Separations for males by age group and procedure in ICD-10-AM groupings, all hospitals, Australia, 1999–00**

Procedure blocks	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75–84	85+	Total <sup>(a)</sup>
1171–1176 Procedures on scrotum and tunical vaginalis	110	220	1,060	739	452	399	243	141	110	74	31	3,579
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	448	1,615	2,108	1,197	5,511	10,109	3,563	1,609	1,466	1,103	247	28,976
1190–1203 Procedures on penis and other male genital organs	5,736	4,659	3,986	936	847	558	551	672	537	344	106	18,932
1230–1347 Procedures on female genital organs; obstetrical procedures	..	..	..	..	..	..	..	..	..	..	..	..
1360–1372 Procedures on head, facial bones and joints	1	28	613	3,335	2,054	1,022	519	228	120	65	15	8,000
1373–1380 Procedures on neck, thorax and ribs	10	9	15	34	28	38	66	129	184	117	4	634
1381–1393 Procedures on spinal cord and vertebrae	0	7	49	260	391	642	594	413	330	204	26	2,916
1394–1407 Procedures on shoulder, scapula and clavicle	0	5	73	2,628	2,492	2,533	3,241	3,380	2,067	872	73	17,364
1408–1438 Procedures on humerus, elbow and forearm	14	1,379	9,335	3,178	2,050	1,871	1,511	992	605	366	127	21,428
1439–1475 Procedures on hand, wrist and phalanges	67	449	1,669	7,457	6,782	4,904	4,275	3,452	2,901	1,483	151	33,590
1476–1494 Procedures on hip, pelvis and femur	66	281	865	870	741	888	1,544	2,624	4,213	4,131	1,814	18,037
1495–1525 Procedures on knee, patella, tibia and fibula	14	195	1,999	10,425	12,910	12,665	11,884	9,738	8,289	4,630	523	73,272
1526–1550 Procedures on ankle, foot and toes	313	470	1,441	3,420	3,699	3,540	3,282	2,508	2,050	1,227	225	22,175
1551–1579 Other procedures for musculoskeletal system	219	1,074	4,247	10,091	10,504	9,675	8,770	6,930	5,244	3,348	750	60,852
1600–1660 Procedures on skin and subcutaneous tissue	8,116	4,587	9,188	16,590	15,286	15,414	17,024	17,315	20,442	19,054	5,137	148,153
1661–1718 Plastic, cosmetic and corrective procedures	416	299	983	2,062	1,861	1,741	1,854	1,778	1,940	1,780	413	15,127
1740–1759 Procedures on breast	7	10	81	486	442	196	211	163	164	111	16	1,887
1780–1799 Chemotherapeutic and radiation oncology procedures	122	1,610	2,644	2,716	3,587	7,035	16,695	31,524	36,503	16,703	1,232	120,371
1820–1899 Miscellaneous non-operative procedures	20,951	11,648	13,062	11,504	15,131	22,179	33,585	38,170	47,893	36,684	9,756	260,563
1940–2016 Imaging services	3,312	4,006	5,353	9,875	12,570	15,984	21,386	27,564	39,586	35,024	9,648	184,308
2050–2140 Allied health interventions	7,814	6,732	10,604	22,306	27,046	31,535	42,509	54,235	80,999	80,179	28,501	392,460
No procedure or not reported	39,904	46,660	50,139	57,843	58,413	62,098	37,826	59,673	74,143	70,429	23,891	581,021
<b>Total<sup>(b)</sup></b>	<b>81,302</b>	<b>106,199</b>	<b>177,421</b>	<b>226,808</b>	<b>285,760</b>	<b>360,206</b>	<b>128,632</b>	<b>402,408</b>	<b>498,966</b>	<b>374,956</b>	<b>87,254</b>	<b>2,729,915</b>

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

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

.. not applicable.

**Table 8.8: Separations for females by age group and procedure in ICD-10-AM groupings, all hospitals, Australia, 1999-00**

Procedure blocks		<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(a)</sup>
1-28	Procedures on skull, brain and meninges	122	141	263	357	401	636	846	857	751	492	108	4,974
29-60	Procedures on spinal cord and spinal canal structures	1,175	910	1,198	2,543	5,899	5,953	6,526	5,940	7,316	5,713	1,162	44,335
61-86	Procedures on nerves and ganglia	14	60	252	1,136	2,826	4,804	6,608	4,588	3,765	3,133	943	28,129
110-129	Procedures on thyroid, parathyroid and endocrine glands	10	62	90	302	893	1,338	1,766	1,276	1,041	533	63	7,374
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	175	453	245	273	680	824	878	904	1,501	2,009	593	8,535
193-203	Procedures on lens	28	45	71	84	177	512	2,019	6,343	22,204	33,730	9,031	74,244
204-256	Procedures on retina, conjunctiva and other areas of eye	355	1,465	1,169	643	784	1,105	1,546	1,748	2,629	2,717	906	15,067
300-306	Procedures on external ear	13	204	382	198	220	263	207	195	141	90	32	1,945
307-333	Procedures on middle and inner ear and mastoid	486	7,217	7,484	835	947	1,209	1,321	1,134	832	482	162	22,109
370-389	Procedures on nose and sinuses	58	1,075	2,736	2,327	2,701	2,934	2,957	2,110	1,403	778	232	19,311
390-399	Procedures on tongue, salivary gland and ducts	91	202	221	225	232	369	490	410	475	286	81	3,082
400-408	Procedures on mouth, palate or uvula	26	343	467	484	368	529	714	468	385	225	50	4,059
409-422	Procedures on tonsils, adenoids and pharynx	45	4,717	9,583	5,099	1,606	620	309	284	260	152	43	22,718
450-490	Dental and orthodontic procedures	36	3,971	7,485	21,864	8,888	3,841	2,391	1,225	738	516	171	51,126
520-542	Procedures on larynx and trachea	151	201	188	208	389	559	826	864	962	555	89	4,992
543-558	Procedures on bronchus, lung and pleura	234	279	188	384	579	948	1,812	2,446	2,846	1,814	312	11,842
559-567	Procedures on chest wall, mediastinum and diaphragm	145	48	79	435	505	654	980	1,226	1,722	1,450	563	7,807
568-569	Airway management, continuous ventilatory support	2,207	241	228	410	453	564	805	1,075	1,675	1,369	248	9,275
600-638	Procedures on atrium, ventricle, septum and valves	294	214	166	114	232	898	3,117	5,546	7,828	4,776	393	23,578
639-666	Other procedures on heart, myocardium and pericardium	225	167	214	344	457	646	1,180	1,890	3,713	3,843	1,105	13,784
667-693	Procedures on coronary arteries and aorta	291	210	157	109	214	1,102	4,001	7,332	10,632	6,479	538	31,065
694-767	Procedures on arteries and veins	2,154	1,216	1,405	1,658	3,767	6,683	8,318	8,503	9,704	7,872	1,853	53,133
800-817	Procedures on blood and blood-forming organs	78	443	568	688	1,227	2,421	4,088	3,951	3,719	2,444	549	20,176
850-869	Procedures on oesophagus	117	233	112	129	259	633	1,072	1,502	1,979	2,047	804	8,887
870-890	Procedures on stomach	147	208	261	288	689	1,122	1,236	1,105	1,323	1,818	853	9,050
891-925	Procedures on small and large intestines	244	143	540	4,811	11,613	24,198	38,481	38,225	37,093	24,205	5,038	184,591
926-927	Procedures on appendix	44	80	2,450	3,825	2,538	1,807	1,198	647	394	260	51	13,294
928-950	Procedures on rectum and anus	187	226	210	1,063	3,194	4,430	5,181	4,109	3,526	2,472	703	25,301
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	38	47	189	2,459	6,223	7,373	8,289	7,683	6,550	4,422	1,172	44,445
983-1011	Other procedures on abdomen, peritoneum and hernia	754	1,453	2,421	9,253	17,988	28,745	38,328	35,308	35,061	26,593	7,322	203,226
1040-1063	Procedures on kidney	137	107	719	4,487	16,897	23,992	35,894	52,139	70,526	29,431	1,332	235,661
1064-1128	Procedures on bladder, ureter and urethra	413	503	733	2,472	8,140	10,216	12,532	11,636	12,791	10,585	3,178	73,199
1160-1203	Procedures on male genital organs	..	..	..	..	..	..	..	..	..	..	..	..

(continued)

**Table 8.8 (continued): Separations for females by age group and procedure in ICD-10-AM groupings, all hospitals, Australia, 1999-00**

Procedure blocks	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(a)</sup>
1230-1239 Procedures on female pelvic cavity	1	3	165	6,863	16,156	12,416	5,172	1,862	1,185	602	113	44,538
1240-1258 Procedures on ovaries and fallopian tubes	12	10	216	4,584	24,009	20,397	4,660	1,261	810	405	106	56,470
1259-1273 Procedures on uterus	4	1	195	27,079	57,247	55,988	36,788	13,545	7,508	3,258	499	202,112
1274-1278 Procedures on cervix	1	4	5	6,206	11,294	8,074	5,079	2,089	903	327	46	34,028
1279-1288 Procedures on vagina and pelvic floor	33	79	188	3,897	6,480	6,505	7,150	5,474	4,901	2,562	320	37,589
1289-1299 Procedures on other female genital organs	19	128	176	2,259	14,779	14,486	1,858	823	630	481	144	35,783
1330-1335 Induction and augmentation of labour	0	0	71	30,218	85,425	20,510	110	1	0	0	0	136,335
1336-1339 Spontaneous vertex, forceps, vacuum or breech delivery	2	0	29	11,996	35,396	8,137	35	0	0	0	0	55,595
1340 Caesarean delivery	0	0	18	7,694	35,350	12,906	100	0	0	0	0	56,068
1341-1347 Other obstetric and postpartum procedures	0	0	68	28,250	83,228	20,356	98	1	0	1	0	132,002
1360-1372 Procedures on head, facial bones and joints	0	27	272	723	635	483	358	192	138	89	28	2,945
1373-1380 Procedures on neck, thorax and ribs	10	5	24	26	42	41	42	54	69	34	3	350
1381-1393 Procedures on spinal cord and vertebrae	9	9	185	199	226	478	578	449	458	292	36	2,919
1394-1407 Procedures on shoulder, scapula and clavicle	3	4	40	540	605	1,146	2,188	2,152	2,056	1,184	196	10,114
1408-1438 Procedures on humerus, elbow and forearm	22	1,125	5,456	753	906	1,122	1,548	1,799	2,253	2,489	1,021	18,494
1439-1475 Procedures on hand, wrist and phalanges	51	348	805	1,820	2,362	2,564	3,237	3,077	2,473	1,404	278	18,419
1476-1494 Procedures on hip, pelvis and femur	219	252	493	264	319	520	1,229	2,354	5,167	8,500	6,171	25,488
1495-1525 Procedures on knee, patella, tibia and fibula	9	126	1,266	4,830	5,295	6,272	8,214	8,427	9,357	6,068	898	50,762
1526-1550 Procedures on ankle, foot and toes	180	278	1,068	1,612	1,973	2,725	4,155	4,335	3,551	2,199	560	22,636
1551-1579 Other procedures for musculoskeletal system	216	841	2,687	3,587	4,068	5,399	7,104	6,435	6,008	4,692	1,594	42,631
1600-1660 Procedures on skin and subcutaneous tissue	6,158	3,373	6,717	8,311	9,956	13,224	15,789	13,640	14,489	15,599	7,190	114,446
1661-1718 Plastic, cosmetic and corrective procedures	270	205	886	2,396	3,276	4,306	4,774	2,987	1,932	1,382	386	22,800
1740-1759 Procedures on breast	20	4	87	2,577	5,838	9,371	10,976	7,192	4,547	2,172	455	43,239
1780-1799 Chemotherapeutic and radiation oncology procedures	176	1,327	2,079	2,093	4,456	14,251	29,873	31,752	28,920	12,382	1,283	128,592
1820-1899 Miscellaneous non-operative procedures	15,991	8,560	10,193	16,392	29,634	28,511	34,155	31,807	38,517	36,111	15,195	265,066
1940-2016 Imaging services	2,598	3,235	3,785	7,547	11,933	14,103	17,418	19,861	29,319	36,480	16,645	162,924
2050-2140 Allied health interventions	6,216	4,842	8,684	29,368	59,880	42,505	41,936	47,587	74,831	101,995	58,887	476,731
No procedure or not reported	32,052	34,142	91,765	138,974	81,577	59,615	27,924	50,633	62,645	78,798	44,574	702,702
<b>Total<sup>(b)</sup></b>	<b>58,184</b>	<b>72,563</b>	<b>287,995</b>	<b>526,990</b>	<b>411,186</b>	<b>389,968</b>	<b>95,365</b>	<b>368,032</b>	<b>427,966</b>	<b>379,782</b>	<b>149,844</b>	<b>3,167,882</b>

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

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

. . . not applicable.

**Table 8.9: Separations by number of procedures reported and hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>(Number)</b>									
<b>Hospital sector</b>									
<b>Public hospitals</b>									
Separations <sup>(a)</sup>	1,245,814	1,003,609	707,914	360,394	360,020	75,951	60,656	57,840	3,872,198
No procedure reported	373,677	247,430	213,137	79,136	96,222	17,466	8,931	16,213	1,052,212
One procedure code only	528,376	493,213	317,689	177,829	179,271	36,957	34,065	32,827	1,800,227
Two procedure codes only	169,545	129,813	91,636	51,279	51,861	10,104	8,856	4,842	517,936
Three procedure codes only	78,162	59,793	37,831	23,680	17,555	4,326	3,788	1,888	227,023
Four procedure codes only	41,517	32,485	19,297	12,555	7,264	2,350	2,150	931	118,549
Five or more procedure codes	54,537	40,875	28,324	15,915	7,847	4,748	2,866	1,139	156,251
Mean procedure codes per separation <sup>(b)</sup>	1.9	1.8	1.8	1.8	1.6	2.1	1.8	1.4	1.8
Maximum number of procedure codes	20	12	31	31	25	30	25	29	..
<b>Private hospitals</b>									
Separations <sup>(a)</sup>	604,276	519,838	452,410	215,095	159,794	51,495	22,754	n.a.	2,025,662
No procedure reported	44,213	69,767	53,984	32,852	18,168	9,891	2,665	n.a.	231,540
One procedure code only	347,071	294,712	246,169	112,962	84,144	26,503	11,408	n.a.	1,122,969
Two procedure codes only	129,221	93,024	93,525	41,437	34,080	9,615	5,004	n.a.	405,906
Three procedure codes only	46,825	33,480	32,300	14,598	12,734	3,252	2,057	n.a.	145,246
Four procedure codes only	18,163	14,869	13,681	7,306	5,924	1,254	945	n.a.	62,142
Five or more procedure codes	18,783	13,986	12,751	5,940	4,744	986	675	n.a.	57,865
Mean procedure codes per separation <sup>(b)</sup>	1.7	1.6	1.7	1.7	1.7	1.6	1.8	n.a.	1.7
Maximum number of procedure codes	20	12	31	12	25	19	18	n.a.	..
<b>(Per cent)</b>									
<b>Public hospitals</b>									
No procedure reported	30.0	24.7	30.1	22.0	26.7	23.0	14.7	28.0	27.2
One procedure code only	42.4	49.1	44.9	49.3	49.8	48.7	56.2	56.8	46.5
Two procedure codes only	13.6	12.9	12.9	14.2	14.4	13.3	14.6	8.4	13.4
Three procedure codes only	6.3	6.0	5.3	6.6	4.9	5.7	6.2	3.3	5.9
Four procedure codes only	3.3	3.2	2.7	3.5	2.0	3.1	3.5	1.6	3.1
Five or more procedure codes	4.4	4.1	4.0	4.4	2.2	6.3	4.7	2.0	4.0
<b>Private hospitals</b>									
No procedure reported	7.3	13.4	11.9	15.3	11.4	19.2	11.7	n.a.	11.4
One procedure code only	57.4	56.7	54.4	52.5	52.7	51.5	50.1	n.a.	55.4
Two procedure codes only	21.4	17.9	20.7	19.3	21.3	18.7	22.0	n.a.	20.0
Three procedure codes only	7.7	6.4	7.1	6.8	8.0	6.3	9.0	n.a.	7.2
Four procedure codes only	3.0	2.9	3.0	3.4	3.7	2.4	4.2	n.a.	3.1
Five or more procedure codes	3.1	2.7	2.8	2.8	3.0	1.9	3.0	n.a.	2.9

(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: Procedures in ICD-10-AM groupings, public hospitals, States and Territories, 1999–00**

Procedure block number	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28 Procedures on skull, brain and meninges	4,578	3,531	2,070	1,479	904	402	234	84	13,282
29–60 Procedures on spinal cord and spinal canal structures	13,598	14,644	8,318	7,116	3,699	1,492	1,200	473	50,540
61–86 Procedures on nerves and ganglia	7,719	6,640	4,006	3,469	2,533	659	366	251	25,643
110–129 Procedures on thyroid, parathyroid and endocrine glands	2,442	1,631	1,081	504	563	173	128	47	6,569
160–192 Procedures on eyeball, cornea, sclera, iris and ciliary body	3,175	2,329	1,879	1,286	795	103	86	163	9,816
193–203 Procedures on lens	13,012	11,962	5,589	4,655	4,507	146	437	400	40,708
204–256 Procedures on retina, conjunctiva and other areas of eye	6,335	5,914	3,083	2,147	2,145	257	144	180	20,205
300–306 Procedures on external ear	874	785	1,221	348	327	70	60	50	3,735
307–333 Procedures on middle and inner ear and mastoid	7,812	8,163	6,267	3,308	3,194	351	523	317	29,935
370–389 Procedures on nose and sinuses	8,940	10,691	5,513	4,477	4,999	405	661	207	35,893
390–399 Procedures on tongue, salivary gland and ducts	1,529	1,103	876	434	344	88	63	25	4,462
400–408 Procedures on mouth, palate or uvula	1,356	1,604	1,136	557	510	128	78	57	5,426
409–422 Procedures on tonsils, adenoids and pharynx	7,412	7,450	5,342	2,543	2,522	430	401	169	26,269
450–490 Dental and orthodontic procedures	12,517	13,541	17,225	12,843	6,713	1,577	817	917	66,150
520–542 Procedures on larynx and trachea	3,734	2,796	2,370	877	900	219	163	99	11,158
543–558 Procedures on bronchus, lung and pleura	8,327	6,825	5,015	2,229	2,262	637	332	200	25,827
559–567 Procedures on chest wall, mediastinum and diaphragm	5,837	4,385	3,544	2,035	1,514	351	408	169	18,243
568–569 Airway management, continuous ventilatory support	13,173	10,985	7,574	3,626	3,567	849	873	699	41,346
600–638 Procedures on atrium, ventricle, septum and valves	12,219	7,824	6,547	4,522	4,030	556	1,268	2	36,968
639–666 Other procedures on heart, myocardium and pericardium	13,380	19,400	10,700	4,227	3,972	2,405	1,098	63	55,245
667–693 Procedures on coronary arteries and aorta	25,114	17,057	11,766	7,718	7,916	2,420	2,020	1	74,012
694–767 Procedures on arteries and veins	29,812	23,882	20,917	8,770	8,433	2,147	3,143	1,015	98,119
800–817 Procedures on blood and blood-forming organs	7,992	7,022	5,300	2,727	2,206	597	599	126	26,569
850–869 Procedures on oesophagus	4,249	2,727	2,209	1,125	1,504	375	240	89	12,518
870–890 Procedures on stomach	4,278	3,924	2,391	1,329	1,329	213	199	116	13,779
891–903 Procedures on small intestine	2,796	2,054	1,188	797	658	181	131	43	7,848
904–925 Procedures on large intestine	45,656	29,092	20,331	16,499	11,724	1,756	2,212	967	128,237
926–927 Procedures on appendix	6,662	5,044	3,762	2,071	1,444	430	395	188	19,996
928–950 Procedures on rectum and anus	13,155	7,881	4,927	3,366	3,230	533	328	251	33,671
951–982 Procedures on liver, gallbladder, biliary tract and pancreas	24,991	17,011	12,211	6,332	6,594	1,382	1,472	512	70,505
983–1011 Other procedures on abdomen, peritoneum and hernia	65,859	49,963	33,534	21,185	19,989	3,002	3,195	1,609	198,336
1040–1063 Procedures on kidney	141,887	150,214	75,684	54,605	34,245	9,903	13,039	19,637	499,214
1064–1128 Procedures on bladder, ureter and urethra	39,513	26,768	20,693	12,238	10,723	3,182	1,620	682	115,419
1160–1170 Procedures on prostate and seminal vesicle	4,057	3,896	1,647	828	1,200	338	227	47	12,240

(continued)



**Table 8.10 (continued): Procedures in ICD-10-AM groupings, public hospitals, States and Territories, 1999–00**

<b>Procedure block number</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
1171–1176 Procedures on scrotum and tunical vaginalis	913	704	424	317	167	53	49	31	2,658
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	5,255	4,959	2,016	1,898	2,047	295	150	137	16,757
1190–1203 Procedures on penis and other male genital organs	4,746	4,060	1,228	1,266	1,254	167	87	250	13,058
1230–1239 Procedures on pelvic cavity	9,116	8,968	4,567	3,028	612	508	479	307	27,585
1240–1258 Procedures on ovaries and fallopian tubes	11,409	11,455	5,969	4,890	3,485	842	597	525	39,172
1259–1273 Procedures on uterus	45,234	45,772	21,903	12,857	16,987	2,536	2,112	2,197	149,598
1274–1278 Procedures on cervix	7,017	7,868	5,859	1,592	2,839	517	321	303	26,316
1279–1288 Procedures on vagina and pelvic floor	6,300	5,808	5,717	2,229	4,176	322	198	59	24,809
1289–1299 Procedures on other female genital organs	3,709	3,437	1,226	1,065	1,251	149	91	81	11,009
1330–1335 Induction and augmentation of labour	43,146	32,680	24,810	13,067	11,667	2,888	2,478	1,475	132,211
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	10,238	6,381	9,801	12,283	2,344	532	348	196	42,123
1340 Caesarean delivery	12,551	9,525	7,371	3,366	3,217	715	607	538	37,890
1341–1347 Other obstetric and postpartum procedures	35,972	25,870	25,248	10,157	10,399	3,717	1,804	1,138	114,305
1360–1372 Procedures on head, facial bones and joints	2,445	1,932	1,756	764	730	255	211	202	8,295
1373–1380 Procedures on neck, thorax and ribs	284	211	123	67	47	22	11	3	768
1381–1393 Procedures on spinal cord and vertebrae	905	857	841	313	313	43	83	1	3,356
1394–1407 Procedures on shoulder, scapula and clavicle	2,680	2,225	2,053	1,077	979	126	170	72	9,382
1408–1438 Procedures on humerus, elbow and forearm	13,845	7,976	6,633	3,522	2,546	708	749	594	36,573
1439–1475 Procedures on hand, wrist and phalanges	10,362	8,835	6,169	3,653	3,145	665	549	421	33,799
1476–1494 Procedures on hip, pelvis and femur	10,479	7,305	4,601	2,867	2,471	732	698	182	29,335
1495–1525 Procedures on knee, patella, tibia and fibula	14,641	13,483	9,045	5,281	5,746	968	1,148	730	51,042
1526–1550 Procedures on ankle, foot and toes	8,504	7,524	4,920	2,915	2,317	635	597	347	27,759
1551–1579 Other procedures for musculoskeletal system	17,068	17,178	10,740	6,923	4,891	1,343	1,188	846	60,177
1600–1660 Procedures on skin and subcutaneous tissue	58,977	45,486	51,968	22,037	25,711	4,243	2,577	3,049	214,048
1661–1718 Plastic, cosmetic and corrective procedures	3,480	4,225	2,294	1,321	1,724	283	209	106	13,642
1740–1759 Procedures on breast	7,275	7,038	3,997	2,640	2,103	571	401	218	24,243
1780–1799 Chemotherapeutic and radiation oncology procedures	28,107	52,504	32,422	15,405	16,936	2,494	4,157	498	152,523
1820–1899 Miscellaneous nonoperative procedures	136,667	101,105	88,210	52,615	47,138	16,227	7,633	3,652	453,247
1940–2016 Imaging services	141,278	87,820	54,933	29,337	24,059	7,925	5,803	2,519	353,674
2050–2140 Allied health interventions	423,629	322,232	180,859	94,464	53,331	32,086	19,011	9,710	1,135,322
<b>Total</b>	<b>1,640,222</b>	<b>1,344,161</b>	<b>893,619</b>	<b>515,488</b>	<b>415,827</b>	<b>120,324</b>	<b>92,676</b>	<b>60,242</b>	<b>5,082,559</b>

**Table 8.11: Procedures in ICD-10-AM groupings, private hospitals, States and Territories, 1999–00**

Procedure block number		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, brain and meninges	1,101	971	974	174	299	n.p.	n.p.	n.a.	3,747
29–60	Procedures on spinal cord and spinal canal structures	10,141	12,249	9,132	8,091	4,658	n.p.	n.p.	n.a.	47,143
61–86	Procedures on nerves and ganglia	8,265	7,963	6,612	5,887	3,574	n.p.	n.p.	n.a.	34,067
110–129	Procedures on thyroid, parathyroid and endocrine glands	1,560	946	916	498	332	n.p.	n.p.	n.a.	4,432
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	4,451	2,009	3,262	981	669	n.p.	n.p.	n.a.	11,765
193–203	Procedures on lens	32,815	17,798	20,348	7,136	5,494	n.p.	n.p.	n.a.	86,650
204–256	Procedures on retina, conjunctiva and other areas of eye	6,398	4,144	5,830	2,160	1,315	n.p.	n.p.	n.a.	20,785
300–306	Procedures on external ear	697	358	333	210	208	n.p.	n.p.	n.a.	1,877
307–333	Procedures on middle and inner ear and mastoid	7,736	5,865	4,860	2,917	3,083	n.p.	n.p.	n.a.	25,352
370–389	Procedures on nose and sinuses	18,368	9,610	9,759	4,974	7,297	n.p.	n.p.	n.a.	51,720
390–399	Procedures on tongue, salivary gland and ducts	941	616	594	356	259	n.p.	n.p.	n.a.	2,889
400–408	Procedures on mouth, palate or uvula	1,533	1,234	926	772	810	n.p.	n.p.	n.a.	5,433
409–422	Procedures on tonsils, adenoids and pharynx	6,821	3,808	4,383	2,397	1,616	n.p.	n.p.	n.a.	19,853
450–490	Dental and orthodontic procedures	29,778	25,087	17,365	16,140	7,883	n.p.	n.p.	n.a.	100,049
520–542	Procedures on larynx and trachea	1,292	1,128	878	406	464	n.p.	n.p.	n.a.	4,315
543–558	Procedures on bronchus, lung and pleura	2,102	2,382	2,767	781	941	n.p.	n.p.	n.a.	9,320
559–567	Procedures on chest wall, mediastinum and diaphragm	1,039	1,413	1,482	594	395	n.p.	n.p.	n.a.	5,123
568–569	Airway management, continuous ventilatory support	1,569	1,326	1,404	381	481	n.p.	n.p.	n.a.	5,355
600–638	Procedures on atrium, ventricle, septum and valves	12,297	8,886	8,142	3,089	2,748	n.p.	n.p.	n.a.	35,788
639–666	Other procedures on heart, myocardium and pericardium	9,636	11,227	6,708	1,350	2,342	n.p.	n.p.	n.a.	31,595
667–693	Procedures on coronary arteries and aorta	25,130	16,740	12,871	4,486	4,568	n.p.	n.p.	n.a.	65,359
694–767	Procedures on arteries and veins	13,173	14,255	11,584	3,805	3,895	n.p.	n.p.	n.a.	48,984
800–817	Procedures on blood and blood-forming organs	3,161	3,044	4,037	1,171	1,027	n.p.	n.p.	n.a.	13,039
850–869	Procedures on oesophagus	2,691	2,111	2,670	578	1,150	n.p.	n.p.	n.a.	9,608
870–890	Procedures on stomach	1,251	2,016	1,665	562	707	n.p.	n.p.	n.a.	6,447
891–903	Procedures on small intestine	1,082	1,016	907	403	493	n.p.	n.p.	n.a.	4,053
904–925	Procedures on large intestine	77,643	52,587	49,903	19,294	13,587	n.p.	n.p.	n.a.	217,845
926–927	Procedures on appendix	1,418	1,457	1,916	1,034	497	n.p.	n.p.	n.a.	6,654
928–950	Procedures on rectum and anus	12,829	6,739	6,048	3,099	2,100	n.p.	n.p.	n.a.	31,794
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	12,417	8,073	8,898	4,621	3,388	n.p.	n.p.	n.a.	38,788
983–1011	Other procedures on abdomen, peritoneum and hernia	73,830	61,361	52,953	18,992	15,539	n.p.	n.p.	n.a.	228,185
1040–1063	Procedures on kidney	15,509	19,049	18,373	6,223	8,080	n.p.	n.p.	n.a.	67,485
1064–1128	Procedures on bladder, ureter and urethra	36,487	22,381	22,712	11,764	8,881	n.p.	n.p.	n.a.	106,556
1160–1170	Procedures on prostate and seminal vesicle	5,697	5,241	3,060	1,511	1,233	n.p.	n.p.	n.a.	17,706

(continued)

**Table 8.11 (continued): Procedures in ICD-10-AM groupings, private hospitals, States and Territories, 1999-00**

Procedure block number	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171-1176 Procedures on scrotum and tunical vaginalis	336	198	189	152	82	n.p.	n.p.	n.a.	1,018
1177-1189 Procedures on testis, vas deferens, epididymis, spermatic co	4,903	3,436	2,255	1,520	1,054	n.p.	n.p.	n.a.	13,920
1190-1203 Procedures on penis and other male genital organs	2,840	1,313	1,111	799	383	n.p.	n.p.	n.a.	6,838
1230-1239 Procedures on pelvic cavity	7,614	5,765	4,366	2,343	470	n.p.	n.p.	n.a.	21,446
1240-1258 Procedures on ovaries and fallopian tubes	7,120	6,254	4,457	2,833	1,647	n.p.	n.p.	n.a.	23,402
1259-1273 Procedures on uterus	45,003	29,298	17,738	12,820	7,049	n.p.	n.p.	n.a.	116,695
1274-1278 Procedures on cervix	4,593	3,512	2,354	874	587	n.p.	n.p.	n.a.	12,622
1279-1288 Procedures on vagina and pelvic floor	6,122	4,079	3,316	1,909	1,338	n.p.	n.p.	n.a.	17,604
1289-1299 Procedures on other female genital organs	9,697	6,560	6,374	2,174	762	n.p.	n.p.	n.a.	26,642
1330-1335 Induction and augmentation of labour	14,868	12,503	10,118	8,395	4,216	n.p.	n.p.	n.a.	52,338
1336-1339 Spontaneous vertex, or forceps, vacuum or breech delivery	3,438	2,890	3,425	5,443	854	n.p.	n.p.	n.a.	16,554
1340 Caesarean delivery	4,965	4,434	4,334	2,475	1,259	n.p.	n.p.	n.a.	18,225
1341-1347 Other obstetric and postpartum procedures	10,331	9,891	7,197	4,636	2,444	n.p.	n.p.	n.a.	36,088
1360-1372 Procedures on head, facial bones and joints	1,375	856	802	369	467	n.p.	n.p.	n.a.	4,028
1373-1380 Procedures on neck, thorax and ribs	165	95	124	27	28	n.p.	n.p.	n.a.	445
1381-1393 Procedures on spinal cord and vertebrae	1,534	1,434	1,075	365	633	n.p.	n.p.	n.a.	5,353
1394-1407 Procedures on shoulder, scapula and clavicle	7,039	5,609	3,475	3,486	3,295	n.p.	n.p.	n.a.	23,715
1408-1438 Procedures on humerus, elbow and forearm	3,085	2,686	2,494	1,382	1,212	n.p.	n.p.	n.a.	11,402
1439-1475 Procedures on hand, wrist and phalanges	8,312	8,387	5,955	3,662	3,409	n.p.	n.p.	n.a.	30,975
1476-1494 Procedures on hip, pelvis and femur	4,713	5,084	3,265	1,817	1,801	n.p.	n.p.	n.a.	17,522
1495-1525 Procedures on knee, patella, tibia and fibula	29,763	22,041	13,668	11,487	11,360	n.p.	n.p.	n.a.	92,346
1526-1550 Procedures on ankle, foot and toes	8,201	7,390	5,913	3,929	3,418	n.p.	n.p.	n.a.	29,991
1551-1579 Other procedures for musculoskeletal system	19,491	15,977	9,109	7,567	5,875	n.p.	n.p.	n.a.	60,494
1600-1660 Procedures on skin and subcutaneous tissue	54,924	35,725	45,515	15,180	19,701	n.p.	n.p.	n.a.	177,851
1661-1718 Plastic, cosmetic and corrective procedures	11,591	10,208	7,326	4,450	3,413	n.p.	n.p.	n.a.	38,523
1740-1759 Procedures on breast	8,760	8,078	6,287	3,608	2,349	n.p.	n.p.	n.a.	30,333
1780-1799 Chemotherapeutic and radiation oncology procedures	21,188	33,734	29,163	9,244	10,182	n.p.	n.p.	n.a.	106,387
1820-1899 Miscellaneous non-operative procedures	44,441	39,671	66,317	16,777	13,279	n.p.	n.p.	n.a.	186,862
1940-2016 Imaging services	22,586	27,263	28,035	10,882	8,636	n.p.	n.p.	n.a.	101,757
2050-2140 Allied health interventions	142,355	82,176	69,704	27,168	22,372	n.p.	n.p.	n.a.	352,794
<b>Total</b>	<b>952,211</b>	<b>731,637</b>	<b>669,733</b>	<b>304,610</b>	<b>243,588</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>3,003,931</b>

n.a. not available.

n.p. not published.

**Table 8.12: Separation and procedure statistics for the 30 ICD-10-AM procedure blocks with the highest number of separations, public hospitals, Australia, 1999–00**

Procedure block	Separations for which the procedure was reported <sup>(a)</sup>						Separations for which this was the first procedure reported	Total procedures reported
	Separations	Same day separations	Public patient separations	Patient days	ALOS (days)	ALOS (days) excluding same day		
2140 Generalised allied health interventions	589,549	24,558	501,672	7,015,185	11.9	12.4	244,635	982,817
1059 Haemodialysis	478,098	467,435	426,579	599,260	1.3	12.4	471,196	478,316
1892 Injection or infusion of therapeutic or prophylactic substance	125,299	55,078	109,209	842,553	6.7	11.2	75,860	143,247
1781 Intravenous chemotherapy	123,064	104,124	109,034	253,645	2.1	7.9	117,270	123,182
1861 Transfusion of blood and gamma globulin	111,704	33,086	93,066	1,063,665	9.5	13.1	56,541	125,377
1952 Computerised tomography of brain	94,173	11,962	77,920	1,045,300	11.1	12.6	61,931	96,613
1008 Panendoscopy with excision	83,094	64,049	73,188	254,801	3.1	10.0	73,734	83,528
905 Fibreoptic colonoscopy	68,695	55,206	60,786	178,648	2.6	9.2	51,040	69,019
1344 Postpartum suture	56,806	1,153	52,128	200,664	3.5	3.6	39,337	57,213
1265 Curettage of uterus	50,087	43,720	43,759	59,937	1.2	2.5	16,128	50,116
1334 Medical or surgical induction of labour	48,014	1,743	43,845	202,299	4.2	4.3	27,247	49,704
1335 Medical or surgical augmentation of labour	45,972	955	42,544	162,471	3.5	3.6	19,460	46,111
911 Fibreoptic colonoscopy with excision	44,540	35,742	39,529	117,398	2.6	9.3	37,025	45,665
1005 Panendoscopy	42,303	27,369	37,070	207,778	4.9	12.1	33,212	42,841
1340 Caesarean section	37,863	121	33,785	223,056	5.9	5.9	36,999	37,890
668 Coronary angiography	37,300	12,955	30,599	172,517	4.6	6.6	29,349	37,552
1267 Evacuation of uterus	37,135	28,381	32,527	40,524	1.1	1.4	36,460	38,128
738 Procedures for venous access	34,331	3,128	28,917	639,706	18.6	20.4	10,231	36,576
197 Extracapsular crystalline lens extraction by phacoemulsification	34,233	29,224	26,424	38,711	1.1	1.9	33,749	34,247
1333 Epidural injection during labour	33,478	236	30,248	149,499	4.5	4.5	2,491	34,328
1259 Examination procedures on uterus	32,536	29,186	27,773	37,923	1.2	2.6	12,290	32,569
1088 Examination procedures on bladder	31,405	23,807	27,685	82,024	2.6	7.7	24,617	31,461
607 Examination procedures on ventricle	30,531	11,444	24,776	130,313	4.3	6.2	176	30,601
1635 Repair of wound of skin and subcutaneous tissue	27,624	10,509	22,316	126,232	4.6	6.8	17,071	29,294
965 Cholecystectomy	26,692	314	24,235	109,585	4.1	4.1	25,460	26,747
1343 Other procedures associated with delivery	26,203	454	23,287	105,117	4.0	4.1	8,198	26,342
1962 Computerised tomography of abdomen	25,815	1,716	21,471	295,240	11.4	12.2	10,978	26,355
1849 Other nonoperative procedures on respiratory system	25,779	1,838	22,688	331,637	12.9	13.8	15,427	29,177
1858 Other cardiovascular tests or nonsurgical procedures	25,683	13,668	21,933	105,873	4.1	7.7	17,074	26,359
1620 Excision of benign lesion of skin and subcutaneous tissue	23,671	19,859	21,339	47,278	2.0	7.2	18,136	26,400
Other	1,346,998	489,104	1,152,160	15,526,071	11.5	17.5	1,196,664	2,184,772
No procedure or not reported	1,052,212	313,691	940,865	4,336,599	4.1	5.4	..	..
<b>Total</b>	<b>3,872,198</b>	<b>1,766,650</b>	<b>3,388,440</b>	<b>16,230,221</b>	<b>4.2</b>	<b>6.9</b>	<b>3,872,198</b>	<b>5,082,547</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: A similar listing of all procedures in ICD-10-AM blocks is provided on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00.html>.

.. not applicable.

**Table 8.13: Separation and procedure statistics for the 30 ICD-10-AM procedure blocks with the highest number of separations, private hospitals, Australia, 1999-00**

Procedure block	Separations for which the procedure was reported <sup>(a)</sup>					ALOS (days) excluding same day	Separations for which this was the first procedure reported	Total procedures reported
	Separations	Same day separations	Public patient separations	Patient days	ALOS (days)			
2140 Generalised allied health interventions	203,381	16,171	8,112	2,173,501	10.7	11.5	65,543	270,964
1008 Panendoscopy with excision	125,324	114,848	2,171	200,071	1.6	8.1	104,238	125,958
905 Fiberoptic colonoscopy	123,962	112,776	2,315	179,371	1.4	6.0	101,470	124,166
1781 Intravenous chemotherapy	91,328	82,505	1,702	134,945	1.5	5.9	89,500	91,533
911 Fiberoptic colonoscopy with excision	84,332	76,606	1,365	125,937	1.5	6.4	73,930	85,953
197 Extracapsular crystalline lens extraction by phacoemulsification	74,725	58,515	2,350	80,101	1.1	1.3	73,785	74,750
1059 Haemodialysis	63,346	62,257	11,132	76,501	1.2	13.1	62,554	63,491
458 Surgical removal of tooth	49,889	42,715	203	52,351	1.0	1.3	47,570	58,730
1005 Panendoscopy	49,620	42,933	1,151	112,219	2.3	10.4	40,254	49,797
1892 Injection or infusion of therapeutic or prophylactic substance	46,529	30,881	1,612	188,394	4.0	10.1	17,967	52,989
1861 Transfusion of blood and gamma globulin	40,416	9,366	1,567	369,133	9.1	11.6	17,490	43,732
1265 Curettage of uterus	37,021	31,433	1,736	43,609	1.2	2.2	11,740	37,049
668 Coronary angiography	36,903	11,641	2,033	129,514	3.5	4.7	28,445	39,636
607 Examination procedures on ventricle	32,593	10,021	1,575	114,385	3.5	4.6	122	32,759
1088 Examination procedures on bladder	31,560	23,512	1,369	65,326	2.1	5.2	23,990	31,615
1622 Excision of basal cell or squamous cell carcinoma of skin	30,991	23,448	491	58,170	1.9	4.6	25,852	39,729
1620 Excision of benign lesion of skin and subcutaneous tissue	29,290	23,796	777	41,579	1.4	3.2	19,050	35,653
1259 Examination procedures on uterus	28,043	24,566	840	30,874	1.1	1.8	8,809	28,071
1267 Evacuation of uterus	25,406	23,837	793	25,917	1.0	1.3	25,166	25,547
1517 Arthroscopic meniscectomy knee with repair	23,491	17,043	486	28,173	1.2	1.7	22,738	24,110
1297 Procedures for reproductive medicine	21,812	21,386	151	21,900	1.0	1.2	21,796	22,991
990 Repair of inguinal hernia	20,698	2,623	607	41,361	2.0	2.1	20,011	20,757
1334 Medical or surgical induction of labour	18,882	113	1,265	104,533	5.5	5.6	8,314	19,814
412 Tonsillectomy or adenoidectomy	18,778	4,307	757	21,021	1.1	1.2	15,904	18,789
1344 Postpartum suture	18,490	44	1,161	93,153	5.0	5.0	12,104	18,562
1340 Caesarean section	18,205	24	779	127,679	7.0	7.0	17,875	18,225
309 Myringotomy	18,168	15,046	529	19,741	1.1	1.5	14,660	18,301
1333 Epidural injection during labour	18,119	19	854	104,541	5.8	5.8	873	19,133
965 Cholecystectomy	17,779	89	925	68,075	3.8	3.8	16,869	17,824
1858 Other cardiovascular tests or nonsurgical procedures	17,272	11,924	455	53,062	3.1	7.7	7,891	17,590
Other	1,010,953	474,905	29,771	7,010,522	6.9	12.2	797,612	1,475,713
No procedure or not reported	231,540	60,677	18,023	109,070	0.5	0.3	..	..
<b>Total</b>	<b>2,025,662</b>	<b>1,137,457</b>	<b>80,914</b>	<b>6,355,825</b>	<b>3.1</b>	<b>5.9</b>	<b>2,025,662</b>	<b>3,003,931</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: A similar listing of all procedures in ICD-10-AM blocks is provided on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00.html>.

.. not applicable.

**Table 8.14: Separations for the 30 ICD-10-AM procedure blocks with the highest number of separations, public hospitals, States and Territories, 1999-00**

Procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
2140 Generalised allied health interventions	206,520	164,270	96,447	43,191	53,286	8,609	11,029	6,197	589,549
1059 Haemodialysis	135,280	145,300	71,476	51,812	32,714	9,631	12,482	19,403	478,098
1892 Injection or infusion of therapeutic or prophylactic substance	37,799	26,716	26,952	11,083	14,537	5,351	2,123	738	125,299
1781 Intravenous chemotherapy	21,829	41,491	27,490	13,231	12,844	1,896	3,793	490	123,064
1861 Transfusion of blood and gamma globulin	37,371	32,059	15,707	11,965	9,308	2,562	1,915	817	111,704
1952 Computerised tomography of brain	33,179	27,337	15,146	7,724	6,529	2,046	1,415	797	94,173
1008 Panendoscopy with excision	30,320	20,244	13,404	9,931	5,643	1,011	1,713	828	83,094
905 Fibreoptic colonoscopy	24,547	15,816	11,266	8,079	6,528	865	1,118	476	68,695
1344 Postpartum suture	22,769	13,386	9,093	4,694	3,850	1,061	1,252	701	56,806
1265 Curettage of uterus	16,009	16,843	7,350	4,827	3,311	534	809	404	50,087
1334 Medical or surgical induction of labour	15,229	13,095	8,775	4,813	3,814	993	768	527	48,014
1335 Medical or surgical augmentation of labour	16,225	10,718	9,654	3,446	3,416	982	925	606	45,972
911 Fibreoptic colonoscopy with excision	16,011	9,719	6,568	6,982	3,391	603	874	392	44,540
1005 Panendoscopy	11,836	11,558	7,325	4,531	5,688	794	310	261	42,303
1340 Caesarean section	12,537	9,519	7,366	3,365	3,216	715	607	538	37,863
668 Coronary angiography	12,777	7,037	6,045	4,431	4,626	1,129	1,255	0	37,300
1267 Evacuation of uterus	10,255	10,618	3,886	2,806	6,993	962	359	1,256	37,135
738 Procedures for venous access	10,858	6,751	9,142	2,950	2,474	792	916	448	34,331
197 Extracapsular crystalline lens extraction by phacoemulsificati	11,202	9,793	4,709	4,091	3,679	92	398	269	34,233
1333 Epidural injection during labour	10,685	7,385	5,872	4,418	3,449	745	675	249	33,478
1259 Examination procedures on uterus	9,896	9,891	5,740	2,325	3,418	400	507	359	32,536
1088 Examination procedures on bladder	8,904	9,224	4,218	3,772	3,809	943	383	152	31,405
607 Examination procedures on ventricle	10,250	5,895	5,021	4,045	3,683	432	1,204	1	30,531
1635 Repair of wound of skin and subcutaneous tissue	6,456	5,567	10,200	2,982	1,593	391	246	189	27,624
965 Cholecystectomy	8,943	7,290	4,809	2,022	2,536	515	389	188	26,692
1343 Other procedures associated with delivery	8,793	7,860	3,477	2,470	2,534	512	303	254	26,203
1962 Computerised tomography of abdomen	9,487	4,919	5,258	2,635	2,401	486	405	224	25,815
1849 Other nonoperative procedures on respiratory system	9,038	4,917	5,808	2,781	1,965	321	439	510	25,779
1858 Other cardiovascular tests or nonsurgical procedures	7,094	5,769	7,442	2,374	1,271	1,062	608	63	25,683
1620 Excision of benign lesion of skin and subcutaneous tissue	6,306	5,543	5,460	2,407	2,859	542	427	127	23,671
Other	421,619	331,857	249,824	145,070	133,083	32,410	20,719	12,416	1,345,267
No procedure or not reported	373,677	247,430	213,137	79,136	96,222	17,466	8,931	16,213	1,052,212
<b>Total<sup>(a)</sup></b>	<b>1,245,814</b>	<b>1,003,609</b>	<b>707,914</b>	<b>360,394</b>	<b>360,020</b>	<b>75,951</b>	<b>60,656</b>	<b>57,840</b>	<b>3,872,198</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

**Table 8.15: Separations for the 30 ICD-10-AM procedure blocks with the highest number of separations, private hospitals, States and Territories, 1999-00**

Procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
2140 Generalised allied health interventions	65,480	59,180	34,707	15,074	22,370	n.p.	n.p.	n.a.	203,381
1008 Panendoscopy with excision	47,134	28,000	31,154	10,504	6,112	n.p.	n.p.	n.a.	125,324
905 Fibreoptic colonoscopy	44,452	31,638	28,228	8,735	7,977	n.p.	n.p.	n.a.	123,962
1781 Intravenous chemotherapy	18,785	27,365	25,872	8,164	8,520	n.p.	n.p.	n.a.	91,328
911 Fibreoptic colonoscopy with excision	30,426	18,889	19,353	9,444	4,706	n.p.	n.p.	n.a.	84,332
197 Extracapsular crystalline lens extraction by phacoemulsification	29,646	15,024	17,126	5,206	4,817	n.p.	n.p.	n.a.	74,725
1059 Haemodialysis	14,503	18,039	17,339	5,766	7,688	n.p.	n.p.	n.a.	63,346
458 Surgical removal of tooth	14,657	12,995	9,939	6,651	4,250	n.p.	n.p.	n.a.	49,889
1005 Panendoscopy	11,139	20,961	9,208	3,018	4,295	n.p.	n.p.	n.a.	49,620
1892 Injection or infusion of therapeutic or prophylactic substance	5,709	8,893	21,961	4,798	3,129	n.p.	n.p.	n.a.	46,529
1861 Transfusion of blood and gamma globulin	7,952	12,352	11,018	4,182	3,159	n.p.	n.p.	n.a.	40,416
1265 Curettage of uterus	13,066	11,173	5,477	3,309	2,253	n.p.	n.p.	n.a.	37,021
668 Coronary angiography	13,473	8,885	7,712	3,063	2,662	n.p.	n.p.	n.a.	36,903
607 Examination procedures on ventricle	11,221	7,899	7,393	2,948	2,540	n.p.	n.p.	n.a.	32,593
1088 Examination procedures on bladder	10,776	7,926	6,774	2,966	1,891	n.p.	n.p.	n.a.	31,560
1622 Excision of basal cell or squamous cell carcinoma of skin	9,371	5,855	9,143	2,219	3,164	n.p.	n.p.	n.a.	30,991
1620 Excision of benign lesion of skin and subcutaneous tissue	9,650	6,695	6,379	2,585	2,606	n.p.	n.p.	n.a.	29,290
1259 Examination procedures on uterus	8,997	8,349	5,031	2,412	2,056	n.p.	n.p.	n.a.	28,043
1267 Evacuation of uterus	14,518	3,476	1,948	4,200	723	n.p.	n.p.	n.a.	25,406
1517 Arthroscopic meniscectomy knee with repair	7,582	5,355	3,224	2,758	3,608	n.p.	n.p.	n.a.	23,491
1297 Procedures for reproductive medicine	8,286	5,646	5,123	1,397	438	n.p.	n.p.	n.a.	21,812
990 Repair of inguinal hernia	6,968	4,766	4,210	2,246	1,627	n.p.	n.p.	n.a.	20,698
1334 Medical or surgical induction of labour	5,263	4,747	3,831	2,783	1,363	n.p.	n.p.	n.a.	18,882
412 Tonsillectomy or adenoidectomy	6,523	3,589	4,166	2,265	1,469	n.p.	n.p.	n.a.	18,778
1344 Postpartum suture	5,970	4,749	3,551	2,150	1,209	n.p.	n.p.	n.a.	18,490
1340 Caesarean section	4,960	4,434	4,319	2,475	1,259	n.p.	n.p.	n.a.	18,205
309 Myringotomy	5,398	4,476	3,317	2,155	2,147	n.p.	n.p.	n.a.	18,168
1333 Epidural injection during labour	4,768	4,087	3,459	3,422	1,821	n.p.	n.p.	n.a.	18,119
965 Cholecystectomy	5,815	3,854	3,755	2,120	1,449	n.p.	n.p.	n.a.	17,779
1858 Other cardiovascular tests or nonsurgical procedures	1,954	3,357	9,465	1,435	615	n.p.	n.p.	n.a.	17,272
Other	316,807	238,274	217,993	113,234	85,019	n.p.	n.p.	n.a.	1,010,953
No procedure or not reported	44,213	69,767	53,984	32,852	18,168	n.p.	n.p.	n.a.	231,540
<b>Total<sup>(a)</sup></b>	<b>604,276</b>	<b>519,838</b>	<b>452,410</b>	<b>215,095</b>	<b>159,794</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>2,025,662</b>

(a) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

n.a. not available.

n.p. not published.

**Table 8.16: Average length of stay (days) for the 30 ICD-10-AM procedure blocks with the highest number of separations, public hospitals, States and Territories, 1999-00**

<b>Procedure block</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
2140 Generalised allied health interventions	11.9	11.7	12.6	12.3	11.3	11.7	10.3	11.2	11.9
1059 Haemodialysis	1.3	1.2	1.3	1.3	1.3	1.2	1.2	1.3	1.3
1892 Injection or infusion of therapeutic or prophylactic substance	6.8	6.8	6.8	7.4	5.2	7.1	7.3	13.9	6.7
1781 Intravenous chemotherapy	3.2	1.8	1.7	1.9	1.8	2.5	1.8	1.4	2.1
1861 Transfusion of blood and gamma globulin	9.9	8.8	10.2	10.7	7.2	9.5	12.0	13.3	9.5
1952 Computerised tomography of brain	11.1	9.4	11.2	14.7	13.5	11.2	13.4	10.6	11.1
1008 Panendoscopy with excision	3.3	2.9	2.9	2.9	3.1	4.3	3.2	2.9	3.1
905 Fiberoptic colonoscopy	2.7	2.4	2.8	2.4	2.6	3.2	2.1	3.1	2.6
1344 Postpartum suture	3.6	3.5	3.3	3.8	3.6	3.6	3.4	4.5	3.5
1265 Curettage of uterus	1.2	1.2	1.2	1.3	1.2	1.2	1.2	1.4	1.2
1334 Medical or surgical induction of labour	4.4	4.0	3.9	4.4	4.6	4.2	4.2	5.6	4.2
1335 Medical or surgical augmentation of labour	3.6	3.5	3.2	3.9	3.8	3.8	3.5	5.0	3.5
911 Fiberoptic colonoscopy with excision	2.8	2.6	2.4	2.4	2.9	3.4	2.1	2.0	2.6
1005 Panendoscopy	5.9	4.8	4.6	4.5	3.6	4.8	7.1	5.5	4.9
1340 Caesarean section	6.2	6.0	5.0	5.9	6.4	5.6	6.4	7.2	5.9
668 Coronary angiography	5.7	4.9	3.8	4.0	3.4	4.4	3.2	0.0	4.6
1267 Evacuation of uterus	1.1	1.0	1.2	1.1	1.0	1.1	1.1	1.1	1.1
738 Procedures for venous access	19.6	19.7	15.9	20.5	19.1	16.2	19.5	22.4	18.6
197 Extracapsular crystalline lens extraction by phacoemulsification	1.1	1.1	1.1	1.2	1.1	1.3	1.1	1.2	1.1
1333 Epidural injection during labour	4.6	4.5	4.0	4.6	4.5	4.5	4.3	5.9	4.5
1259 Examination procedures on uterus	1.2	1.1	1.1	1.2	1.3	1.3	1.2	1.5	1.2
1088 Examination procedures on bladder	2.7	2.3	2.6	3.4	2.2	3.3	3.0	2.8	2.6
607 Examination procedures on ventricle	5.2	4.6	3.5	3.7	3.2	4.8	3.1	4.0	4.3
1635 Repair of wound of skin and subcutaneous tissue	6.0	4.4	3.3	5.3	4.8	4.8	7.8	10.6	4.6
965 Cholecystectomy	4.5	4.0	3.6	4.4	3.6	3.8	4.2	6.2	4.1
1343 Other procedures associated with delivery	4.1	3.9	3.7	4.3	3.9	4.0	3.9	5.0	4.0
1962 Computerised tomography of abdomen	11.8	9.0	11.5	12.9	12.2	12.3	14.6	11.8	11.4
1849 Other nonoperative procedures on respiratory system	11.2	13.5	12.3	15.1	14.4	21.1	19.1	14.6	12.9
1858 Other cardiovascular tests or nonsurgical procedures	5.7	3.2	3.3	5.2	4.1	3.5	2.4	5.0	4.1
1620 Excision of benign lesion of skin and subcutaneous tissue	1.8	1.6	3.2	1.7	1.3	1.6	1.4	1.3	2.0
<b>Total<sup>(a)</sup></b>	<b>4.6</b>	<b>3.8</b>	<b>4.3</b>	<b>3.7</b>	<b>4.1</b>	<b>4.7</b>	<b>3.5</b>	<b>3.4</b>	<b>4.2</b>

(a) For all separations.



**Table 8.17: Average length of stay (days) for the 30 ICD-10-AM procedure blocks with the highest number of separations, private hospitals, States and Territories, 1999–00**

Procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
2140 Generalised allied health interventions	9.4	10.6	13.7	12.2	8.5	n.p.	n.p.	n.a.	10.7
1008 Panendoscopy with excision	1.3	1.7	1.8	1.9	1.8	n.p.	n.p.	n.a.	1.6
905 Fiberoptic colonoscopy	1.3	1.4	1.6	1.7	1.6	n.p.	n.p.	n.a.	1.4
1781 Intravenous chemotherapy	1.4	1.5	1.5	1.4	1.4	n.p.	n.p.	n.a.	1.5
911 Fiberoptic colonoscopy with excision	1.3	1.5	1.6	1.7	1.7	n.p.	n.p.	n.a.	1.5
197 Extracapsular crystalline lens extraction by phacoemulsification	1.1	1.0	1.1	1.1	1.0	n.p.	n.p.	n.a.	1.1
1059 Haemodialysis	1.2	1.2	1.2	1.1	1.2	n.p.	n.p.	n.a.	1.2
458 Surgical removal of tooth	1.0	1.0	1.1	1.0	1.1	n.p.	n.p.	n.a.	1.0
1005 Panendoscopy	2.1	1.8	3.1	3.0	2.4	n.p.	n.p.	n.a.	2.3
1892 Injection or infusion of therapeutic or prophylactic substance	5.7	4.0	3.3	4.3	4.8	n.p.	n.p.	n.a.	4.0
1861 Transfusion of blood and gamma globulin	9.5	9.3	7.9	10.6	8.9	n.p.	n.p.	n.a.	9.1
1265 Curettage of uterus	1.1	1.1	1.3	1.2	1.3	n.p.	n.p.	n.a.	1.2
668 Coronary angiography	2.9	3.8	4.2	2.8	4.3	n.p.	n.p.	n.a.	3.5
607 Examination procedures on ventricle	3.0	3.7	4.2	2.7	4.3	n.p.	n.p.	n.a.	3.5
1088 Examination procedures on bladder	1.7	2.1	2.1	2.7	2.4	n.p.	n.p.	n.a.	2.1
1622 Excision of basal cell or squamous cell carcinoma of skin	1.7	2.1	1.8	2.7	1.6	n.p.	n.p.	n.a.	1.9
1620 Excision of benign lesion of skin and subcutaneous tissue	1.4	1.5	1.4	1.6	1.3	n.p.	n.p.	n.a.	1.4
1259 Examination procedures on uterus	1.1	1.1	1.1	1.2	1.2	n.p.	n.p.	n.a.	1.1
1267 Evacuation of uterus	1.0	1.0	1.0	1.0	1.1	n.p.	n.p.	n.a.	1.0
1517 Arthroscopic meniscectomy knee with repair	1.1	1.2	1.2	1.2	1.3	n.p.	n.p.	n.a.	1.2
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	2.0	2.0	1.7	2.1	2.3	n.p.	n.p.	n.a.	2.0
1334 Medical or surgical induction of labour	5.5	5.6	5.3	5.8	5.6	n.p.	n.p.	n.a.	5.5
412 Tonsillectomy or adenoidectomy	1.1	1.2	1.1	1.1	1.2	n.p.	n.p.	n.a.	1.1
1344 Postpartum suture	5.0	5.1	5.0	5.1	5.0	n.p.	n.p.	n.a.	5.0
1340 Caesarean section	6.9	7.2	6.6	7.7	7.0	n.p.	n.p.	n.a.	7.0
309 Myringotomy	1.1	1.1	1.2	1.1	1.1	n.p.	n.p.	n.a.	1.1
1333 Epidural injection during labour	5.6	5.8	5.6	6.1	5.6	n.p.	n.p.	n.a.	5.8
965 Cholecystectomy	3.5	4.1	4.1	3.6	4.1	n.p.	n.p.	n.a.	3.8
1858 Other cardiovascular tests or nonsurgical procedures	4.4	3.0	2.4	5.7	3.3	n.p.	n.p.	n.a.	3.1
<b>Total<sup>(a)</sup></b>	<b>2.9</b>	<b>3.2</b>	<b>3.3</b>	<b>3.1</b>	<b>3.3</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>3.1</b>

(a) For all separations.

n.a. not available.

n.p. not published.

**Table 8.18: Separations for males for the 30 ICD-10-AM procedure blocks with the highest number of separations, by age group, all hospitals, Australia, 1999–00**

Procedure block	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75–84	85+	Total <sup>(a)</sup>
2140 Generalised allied health interventions	5,649	4,766	8,323	20,169	24,540	28,505	37,660	50,594	76,130	75,454	26,967	358,757
1059 Haemodialysis	8	135	624	7,210	24,559	39,226	51,495	59,454	85,735	45,498	1,386	315,330
1781 Intravenous chemotherapy	111	1,264	2,255	2,441	3,069	5,937	14,143	26,977	30,772	13,428	712	101,109
1008 Panendoscopy with excision	246	567	1,204	3,595	8,155	13,574	18,764	18,512	18,856	11,727	2,097	97,297
905 Fibreoptic colonoscopy	10	47	142	1,216	4,903	11,884	18,517	17,930	17,576	10,454	1,635	84,314
1892 Injection or infusion of therapeutic or prophylactic substance	11,367	4,359	5,314	3,282	4,305	6,059	9,010	11,448	13,242	8,792	1,637	78,815
1861 Transfusion of blood and gamma globulin	1,625	1,566	2,380	2,846	3,108	4,083	6,859	10,927	18,995	18,720	6,368	77,477
911 Fibreoptic colonoscopy with excision	27	88	344	1,414	3,428	7,084	12,501	15,231	15,076	8,516	1,155	64,864
1952 Computerised tomography of brain	919	1,453	2,138	4,745	4,736	4,733	5,477	6,715	10,879	12,237	4,381	58,413
668 Coronary angiography	45	58	56	77	466	2,827	9,351	13,976	14,927	7,531	451	49,765
197 Extracapsular crystalline lens extraction by phacoemulsificatic	3	6	16	75	141	516	1,888	4,945	13,816	19,037	4,020	44,463
1005 Panendoscopy	54	116	199	1,511	3,637	5,741	7,385	7,798	8,854	6,763	1,516	43,574
607 Examination procedures on ventricle	94	89	67	67	401	2,406	7,931	11,848	12,665	6,264	345	42,177
1088 Examination procedures on bladder	133	240	363	614	1,228	2,356	4,327	6,754	10,655	9,063	2,084	37,817
990 Repair of inguinal hernia	1,778	2,208	1,550	1,600	2,876	4,027	6,205	6,432	6,338	4,005	723	37,742
1622 Excision of basal cell or squamous cell carcinoma of skin	1	0	7	43	297	1,315	3,332	5,394	8,463	9,464	2,714	31,030
458 Surgical removal of tooth	3	522	2,555	12,342	5,546	2,390	1,327	901	572	370	63	26,591
1620 Excision of benign lesion of skin and subcutaneous tissue	184	611	1,295	1,577	2,267	3,428	4,335	4,069	3,796	2,894	582	25,038
738 Procedures for venous access	2,408	836	949	1,072	1,272	1,702	2,697	3,891	4,944	3,313	516	23,600
1858 Other cardiovascular tests or nonsurgical procedures	111	139	220	660	958	1,682	3,725	5,343	6,215	3,705	638	23,396
1849 Other nonoperative procedures on respiratory system	8,674	1,634	1,076	351	476	1,176	2,058	2,299	2,366	1,591	337	22,038
309 Myringotomy	793	10,626	7,931	280	217	280	332	370	340	187	35	21,391
1635 Repair of wound of skin and subcutaneous tissue	60	1,296	2,408	4,764	4,079	2,818	1,959	1,225	991	797	409	20,806
412 Tonsillectomy or adenoidectomy	74	7,108	9,347	2,283	895	453	174	92	47	14	1	20,488
1165 Transurethral prostatectomy	0	0	0	0	2	31	644	3,671	7,665	6,839	1,536	20,388
1554 Other application, insertion or removal procedures on other musculoskeletal sites	59	336	1,963	4,322	4,093	3,071	2,177	1,418	874	478	129	18,920
1517 Arthroscopic meniscectomy knee with repair	1	1	63	1,159	2,260	3,582	4,610	3,518	1,911	734	40	17,879
1962 Computerised tomography of abdomen	33	122	390	1,048	1,334	1,904	2,389	2,706	3,746	2,936	762	17,370
1503 Arthroscopic excision of knee	0	1	192	2,593	3,543	3,796	3,188	2,181	1,266	429	39	17,228
1089 Urinary catheterisation	123	84	90	282	343	547	1,060	2,289	4,165	5,060	2,000	16,043
Other	29,978	34,383	75,565	89,364	111,452	131,775	59,752	138,567	159,499	118,309	26,114	974,759
No procedure or not reported	39,904	46,660	50,139	57,843	58,413	62,098	37,826	59,673	74,143	70,429	23,891	581,021
<b>Total<sup>(b)</sup></b>	<b>81,302</b>	<b>106,199</b>	<b>177,421</b>	<b>226,808</b>	<b>285,760</b>	<b>360,206</b>	<b>128,632</b>	<b>402,408</b>	<b>498,966</b>	<b>374,956</b>	<b>87,254</b>	<b>2,717,462</b>

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

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

**Table 8.19: Separations for females for the 30 ICD-10-AM procedure blocks with the highest number of separations, by age group, all hospitals, Australia, 1999–00**

Procedure block	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75–84	85+	Total <sup>(a)</sup>
2140 Generalised allied health interventions	4,545	3,465	6,692	25,556	51,815	37,642	37,813	43,901	70,465	96,402	55,874	434,170
1059 Haemodialysis	1	5	460	4,073	15,942	22,861	34,245	50,573	68,423	28,305	1,226	226,114
1781 Intravenous chemotherapy	166	1,110	1,840	1,833	3,814	12,682	26,386	28,540	25,540	10,490	875	113,276
1008 Panendoscopy with excision	183	414	1,229	4,787	8,479	15,245	22,351	20,816	19,759	14,290	3,568	111,121
905 Fiberoptic colonoscopy	10	13	110	2,195	6,236	15,135	24,760	22,791	20,748	13,509	2,835	108,342
1892 Injection or infusion of therapeutic or prophylactic substance	8,440	3,596	4,402	5,068	9,764	9,903	13,528	12,544	13,340	9,501	2,923	93,009
1265 Curettage of uterus	1	1	44	6,396	20,807	24,739	20,819	8,483	4,037	1,548	232	87,107
1344 Postpartum suture	0	0	32	15,068	48,370	11,768	54	1	0	0	0	75,293
1861 Transfusion of blood and gamma globulin	1,114	926	1,745	3,371	5,271	5,180	6,834	8,446	14,615	17,764	9,373	74,642
1334 Medical or surgical induction of labour	0	0	25	13,661	42,476	10,670	61	0	0	0	0	66,894
197 Extracapsular crystalline lens extraction by phacoemulsificati	0	4	13	47	99	383	1,610	5,483	19,506	29,551	7,799	64,495
911 Fiberoptic colonoscopy with excision	15	65	300	2,237	4,603	7,834	12,005	13,369	13,639	8,397	1,544	64,008
1267 Evacuation of uterus	0	0	128	19,460	28,470	14,077	385	12	1	2	0	62,535
1259 Examination procedures on uterus	0	0	36	3,313	13,024	16,796	16,414	6,580	3,075	1,156	185	60,579
1335 Medical or surgical augmentation of labour	0	0	38	14,741	36,277	7,973	31	0	0	0	0	59,060
1340 Caesarean section	0	0	18	7,694	35,350	12,906	100	0	0	0	0	56,069
1952 Computerised tomography of brain	672	1,051	1,337	2,746	3,255	3,660	4,243	4,889	8,164	13,776	8,029	51,822
1333 Epidural injection during labour	0	0	17	10,352	33,546	7,648	32	1	0	0	0	51,596
1005 Panendoscopy	32	55	206	1,748	3,327	5,822	8,595	8,623	9,354	7,940	2,647	48,351
1343 Other procedures associated with delivery	0	0	16	7,645	24,976	5,727	21	0	0	1	0	38,386
458 Surgical removal of tooth	0	458	3,197	20,789	7,864	2,768	1,532	781	484	360	128	38,361
965 Cholecystectomy	3	6	94	2,023	5,180	5,830	6,415	5,480	4,160	2,302	410	31,903
1620 Excision of benign lesion of skin and subcutaneous tissue	165	524	1,605	1,966	3,339	4,638	5,382	3,842	3,299	2,406	757	27,923
1297 Procedures for reproductive medicine	0	0	1	398	12,391	12,536	381	2	0	0	1	25,710
1341 Fetal monitoring	0	0	18	7,706	14,269	3,331	12	0	0	0	0	25,336
1088 Examination procedures on bladder	56	205	369	563	1,395	3,176	4,690	4,650	5,155	4,018	871	25,148
1336 Spontaneous vertex delivery	1	0	18	6,392	15,087	3,360	14	0	0	0	0	24,872
957 Examination of gall bladder or biliary tract	12	8	66	1,409	3,561	4,045	4,615	4,334	3,467	2,413	659	24,589
668 Coronary angiography	32	34	49	51	150	926	3,415	5,996	8,309	5,041	435	24,438
1275 Destruction procedures on cervix	1	3	2	5,106	8,326	5,232	2,689	856	292	66	9	22,582
Other	21,530	32,076	88,197	164,833	166,224	166,859	54,172	142,175	152,128	132,229	46,344	1,166,767
No procedure or not reported	32,052	34,142	91,765	138,974	81,577	59,615	27,924	50,633	62,645	78,798	44,574	702,702
<b>Total<sup>(b)</sup></b>	<b>58,184</b>	<b>72,563</b>	<b>287,995</b>	<b>526,990</b>	<b>411,186</b>	<b>389,968</b>	<b>95,365</b>	<b>368,032</b>	<b>427,966</b>	<b>379,782</b>	<b>149,844</b>	<b>3,167,882</b>

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

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

# 9 External causes for admitted patients

## Introduction

An external cause is defined in the *National Health Data Dictionary* Version 8 (NHDC 1999) as the event, circumstance or condition associated with the occurrence of injury, poisoning or violence. Whenever a patient has a principal or additional diagnosis of an injury or poisoning, an external cause should be recorded. A place of occurrence code is also usually recorded and a code recording the activity of the injured person at the time of the event.

External causes for 1999–00 were classified, coded and reported to the National Hospital Morbidity Database by all States and Territories except South Australia using the first edition of the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM) (National Centre for Classification in Health 1998). South Australia mapped the data collected using this classification forward to codes of the second edition of ICD-10-AM (National Centre for Classification in Health 2000). The Institute mapped these data backward to first edition codes so that national data could be presented in a single classification in this report. The mapped data are not completely equivalent to unmapped data, so this means that the South Australian data should be interpreted with these mappings in mind. Further information about the backward mapping and other information about the quality of the ICD-10-AM coded data are presented in Appendix 3.

As indicated above, one or more external causes of injury or poisoning can be reported for each separation in the National Hospital Morbidity Database. In previous reports in this series, data were presented only on first reported external causes for separations for which the principal diagnosis was an injury or poisoning. However, external causes can be reported for principal diagnoses other than those in the ICD-10-AM injury and poisoning chapter, and for additional diagnoses in the injury and poisoning chapter and elsewhere. In addition, although, in the past, only some States and Territories had the capacity to report more than one external cause for each separation, they all now have this capability, so State and Territory data on external causes are more comparable than in the past. Hence, the reporting of external causes for this report has been revised, with three types of data presented:

- data on the separations for which there was one or more external causes reported within the group of external causes (an ICD-10-AM block or chapter) being considered, regardless of whether the external cause was the first reported or another external cause. Because more than one external cause can be reported for each separation, the counts for these data are not additive, so totals in the tables will not usually equal the sum of counts in the rows.
- data on the separations for which an external cause within a group of external causes being considered was the first reported external cause, and the number of those separations for which an injury and poisoning was reported as the principal diagnosis. Both these types of data have been included in some tables to enable some comparison with previous reports.

- data on the total number of external causes reported. For these data, all external causes within a group of external causes being considered are counted, even if there are more than one reported for a separation.

The external cause classification (chapter XX of ICD-10-AM) is hierarchical, consisting of 229 3-character categories. The information in this chapter is presented by grouping the ICD-10-AM external cause codes into 16 groups to provide an overview of the reported external causes. The tables and figures in this chapter use the codes and abbreviated descriptions of the ICD-10-AM external cause classification. Full descriptions of the categories are available in the ICD-10-AM publication.

Tables are presented with summary national separation, patient day and average length of stay statistics for public and private hospitals and for public patients. Also provided are summary separation and patient day data by State and Territory, national information on age group and sex distributions and summary information on the reported places of occurrence of the external cause, and on the reported activity of the patient while injured. The data on relative rankings of the various external cause groups (by numbers of separations or patient days) depend to some extent on the chosen groups of external cause codes.

## Sector

There were 706,693 separations in 1999–00 with an external cause and these separations accounted for 4,992,402 patient days (Table 9.1). This represented 12.0% of all separations and 22.1% of all patient days. The majority of separations (541,918, 76.7%) and patient days (3,777,628, 75.7%) were reported for the public sector. Overall, the average length of stay was similar in the public sector (7.0 days) and the private sector (7.4 days).

The most frequently reported external cause group in both the public sector and the private sector was *Complications of medical and surgical care* (Y40–Y84), with a total of 271,978 separations (4.6% of total separations). These figures are markedly higher than the counts of separations with these external causes reported in *Australian Hospital Statistics 1998–99*, because they are based on counts of any separations with these external causes reported, not just those with a principal diagnosis of an injury or poisoning, and for which these were the first reported external causes. The figures are similar to the 4.4% of separations with the ICD-9-CM equivalents of these external causes reported for Australia for 1997–98 (AIHW: Hargreaves 2001). Further information about the use of hospital morbidity data for recording information on adverse events in health care is presented elsewhere (AIHW: Hargreaves 2001).

The second most frequently reported type of external cause of injury and poisoning in both sectors was *Falls* (W00–W19, 160,524). The next most frequently reported external cause group in the public sector was *Exposure to mechanical forces* (W20–W64, 64,942) and in the private sector it was *Other external causes of accidental injury* (X50–X59, 24,183).

*Transport accidents* (V01–V99) accounted for a further 9.6% of external cause separations from public hospitals (51,936), but only 4.2% from private hospitals (6,896). *Intentional self-harm* (X60–X84) and *Assault* (X85–Y09) each accounted for 4.7% and 4.0% of external cause separations from public hospitals (25,620 and 21,912 respectively) but less than 1% of external cause separations from private hospitals (1,477 and 745 respectively).

Average length of stay was highest for *Complications of medical and surgical care* (Y40–Y84) in the public sector (10.1 days) and for *Other accidental threats to breathing* (W75–W84) in the private sector (11.6 days).

## States and Territories

External causes were reported for between 9.8 and 13.1% of separations for all States and Territories. In the past, the capacity to report more than one external cause has varied among the jurisdictions. For 1999–00, States and Territories each reported a maximum of between 3 and 7 external cause codes, indicating that capacity to report may not have markedly affected data comparability. However, other differences in coding and data recording practices among the jurisdictions and between the public and private sectors may have affected the comparability of the reported external cause data.

The distributions of separations amongst the external cause groups were generally similar across the States and Territories (Table 9.2), with *Falls* (W00–W19), *Complications of medical and surgical care* (Y40–Y84), *Exposure to mechanical forces* (W20–W64) and *Transport accidents* (V01–V99) being among the most common in nearly every State. The distributions of patient days amongst the external cause groups were also similar across the States and Territories (Table 9.3).

## Age group and sex

For females, 10.1% of separations overall had an external cause (320,240) compared with 14.2% of separations for males (386,452).

The numbers of separations with an external cause varied by age group and sex (Tables 9.4 and 9.5). The most common external cause group for females was *Complications of medical and surgical care* (Y40–Y84) (42.9% of the total for females, 137,247), followed by *Falls* (W01–W19) (28.0%, 89,646). For males, *Complications of medical and surgical care* (Y40–Y84, 34.9% of the total for males, 134,731) and *Falls* were also the most commonly reported groups (18.3% 70,878). *Transport accidents* (V01–V99) accounted for 10.1% of male external cause separations (39,185) and 6.1% of female separations (19,646).

For females, the highest number of separations for external causes was in the 75 to 84 years age group (17.6%), whereas for males highest numbers were reported in the 15 to 24 (14.7%) and 25 to 34 (13.8%) years age groups.

In the age groups under 14 years, *Falls* and *Exposure to mechanical forces* were the most commonly reported external causes for both males and females. These causes also dominated in most adult age groups. However, in the 15 to 24 years age group, *Transport accidents* were also a common external cause for both sexes, and *Intentional self-harm* was common for females; in the 35 to 64 years age group, *Complications of surgical and medical care* was common; and in the age groups over 65 years, *Falls* were reported for large proportions of external cause separations, especially for females.

## Place of occurrence

In ICD-10-AM the place of occurrence of the external cause is required to be reported accompanying all external cause codes for accidental injury (W00–Y34), except for *Neglect and abandonment* (Y06) and *Other maltreatment syndromes* (Y07). It is also not required for codes V01–V99 (*Transport accidents*), nor codes Y35–Y98, which comprise *Legal intervention and operations of war* (Y35–Y36), *Complications of medical and surgical care* (Y40–Y84) and *Sequelae and supplementary factors* (Y85–Y98). Place of occurrence was, however, reported for some separations for which it was not required.

*Home and School, other public area* accounted for the majority of separations with an external cause with *Home* the most commonly reported place of occurrence for most of the external cause groups. Some of the exceptions were *Transport accidents*, for which *Street and highway* (3,143) was most frequently reported, and *Complications of medical and surgical care* for which *School, other public area* (which includes hospital) (14,920) was the most common place of occurrence. *Home* was the most frequently reported place of occurrence for *Accidental poisoning* (8,042) and for *Intentional self-harm* (14,888).

*Falls* was the most common external cause group in the *Home* category, accounting for 52.0% of these separations (59,440), and in the *Residential institution* category (14,546, 79.5% of these separations).

## Activity while injured

The activity of the injured person at the time of occurrence of the external cause is required to be reported for external causes codes V01–Y34; that is *Accidents* (V01–X59), *Intentional self-harm* (X60–X84), *Assault* (X85–Y09) and *Events of undetermined intent* (Y10–Y34). The two categories that were most commonly reported for activity were *Other specified* and *Unspecified*, accounting for 48.4% (342,106) of separations for which an external cause was reported (Table 9.7). Ignoring these categories, the most commonly reported activity at the time of injury was *Working for income*, accounting for 4.0% (30,562) of all external cause separations, followed by *Sports activity* (26,932, 3.5%), and *Resting, sleeping, eating and other vital activities* (25,668, 3.1%).

## Principal diagnosis

Table 9.8 presents data showing the first reported external cause for separations with an injury or poisoning as the principal diagnosis, and would be largely comparable with the equivalent table in *Australian Hospital Statistics 1998–99*. Although data reported on external causes and data reported on diagnoses cannot generally be unequivocally linked, it is likely that the first reported external cause would be related to the principal diagnosis when the latter is an injury or poisoning. In contrast, if the principal diagnosis is not an injury or poisoning, the first reported external cause is relatively less likely to relate to it, and relatively more likely to relate to an additional diagnosis.

*Injuries to upper and lower limbs* (S40–S99) (187,483, 45.3%) and *Injuries to head and neck* (S00–S19) (68,086, 16.5%) were the most common types of injuries associated with external causes. The most common causes of these injuries were *Falls* (W00–W19) and *Exposure to mechanical forces* (W20–W64). The most common injuries resulting from *Falls* (W00–W19) were *Injuries to upper and lower limbs* (S40–S99) (84,441, 70.0%) and *Injuries to head and neck* (S00–S19) (21,434, 17.8%). These were also the most common injuries associated with *Exposure to mechanical forces* (W20–W64) and *Transport accidents* (V01–V99). The most common injuries caused by *Assault* (X85–Y09) were *Injuries to head and neck* (S00–S19) (12,812, 65.6%), while the most common injuries caused by *Intentional self-harm* (X60–X84) were *Poisoning and toxic effects* (T36–T65) (17,963, 85.8%).

## **Additional data**

Available on the Internet version of this publication are additional columns for Table 9.1. These columns present information on the number of same day separations, public patient separations, patient days and ALOS for separations for which the procedure groups included the first reported procedure, and for separations of that type for which the principal diagnosis was an injury or poisoning. Also included are counts of external causes for public patients.



**Table 9.1: Separation, same day separation, public patient separation, patient day and average length of stay statistics by external cause in ICD-10-A groupings and hospital sector, Australia, 1999–00**

External cause	Separations for which the external cause was reported <sup>(a)</sup>							Separations for first-reported external cause		
	Separations	Same day separations	Public patient separations	Patient days	ALOS (days)	ALOS (days) excluding same day	Total external causes	Separations	Separations with injury or poisoning principal diagnosis	
<b>Public hospitals</b>										
V01–V99	Transport accidents	51,936	14,318	30,894	257,531	5.0	6.5	52,644	51,422	47,153
W00–W19	Falls	127,620	27,308	107,365	1,129,857	8.9	11.0	128,399	124,019	99,976
W20–W64	Exposure to mechanical forces	64,942	23,817	53,885	208,392	3.2	4.5	65,523	63,808	58,051
W65–W74	Accidental drowning and submersion	602	144	543	1,629	2.7	3.2	604	586	542
W75–W84	Other accidental threats to breathing	1,299	250	1,151	12,266	9.4	11.5	1,301	1,176	695
W85–W99	Exp. electricity, radiation, extreme temperature/pressure	1,563	983	1,024	4,584	2.9	6.2	1,567	1,426	1,309
X00–X19	Exp. smoke, fire, flames, hot substances	7,421	2,566	6,570	46,668	6.3	9.1	7,542	7,193	5,624
X20–X39	Exp. venomous plants, animals, forces of nature	5,095	1,902	4,542	15,490	3.0	4.3	5,102	4,919	3,920
X40–X49	Accidental poisoning	15,506	5,671	14,588	54,474	3.5	5.0	18,077	14,841	12,980
X50–X59	Other external causes of accidental injury	25,680	9,297	22,189	157,218	6.1	9.0	25,775	24,708	18,742
X60–X84	Intentional self-harm	25,620	6,821	24,813	129,554	5.1	6.5	34,312	24,360	20,931
X85–Y09	Assault	21,912	8,411	21,105	64,533	2.9	4.2	22,376	21,350	19,442
Y10–Y34	Events of undetermined intent	3,073	1,026	2,960	20,703	6.7	9.6	3,853	2,951	2,476
Y35–Y36	Legal intervention and operations of war	77	28	71	533	6.9	10.3	79	65	52
Y40–Y84	Complications of medical and surgical care	194,506	28,024	164,877	1,959,022	10.1	11.6	209,319	184,221	54,043
Y85–Y98	Sequelae and supplementary factors	16,859	5,525	13,943	130,688	7.8	11.0	16,926	14,873	1,770
<b>Total<sup>(a)</sup></b>		<b>541,918</b>	<b>133,913</b>	<b>452,841</b>	<b>3,777,628</b>	<b>7.0</b>	<b>8.9</b>	<b>593,399</b>	<b>541,918</b>	<b>333,220</b>
<b>Private hospitals</b>										
V01–V99	Transport accidents	6,896	1,508	556	52,272	7.6	9.4	6,961	6,780	4,742
W00–W19	Falls	32,904	4,481	1,854	321,993	9.8	11.2	33,072	32,056	22,647
W20–W64	Exposure to mechanical forces	13,671	6,311	664	34,317	2.5	3.8	13,789	13,514	9,993
W65–W74	Accidental drowning and submersion	36	2	10	87	2.4	2.5	36	36	31
W75–W84	Other accidental threats to breathing	279	34	12	3,237	11.6	13.1	279	252	108
W85–W99	Exp. electricity, radiation, extreme temperature/pressure	158	59	23	606	3.8	5.5	159	149	94
X00–X19	Exp. smoke, fire, flames, hot substances	623	128	41	5,209	8.4	10.3	630	589	414
X20–X39	Exp. venomous plants, animals, forces of nature	417	113	76	1,782	4.3	5.5	417	407	271
X40–X49	Accidental poisoning	911	156	155	4,346	4.8	5.5	1,001	865	595
X50–X59	Other external causes of accidental injury	24,183	10,232	431	75,842	3.1	4.7	24,277	23,862	18,520
X60–X84	Intentional self-harm	1,477	315	511	11,268	7.6	9.4	1,918	1,428	993
X85–Y09	Assault	745	282	178	2,684	3.6	5.2	762	736	540
Y10–Y34	Events of undetermined intent	638	232	73	3,464	5.4	8.0	664	619	460
Y35–Y36	Legal intervention and operations of war	11	0	0	122	11.1	11.1	11	11	4
Y40–Y84	Complications of medical and surgical care	77,472	8,992	3,130	726,232	9.4	10.5	81,997	74,977	23,191
Y85–Y98	Sequelae and supplementary factors	8,791	3,240	174	50,497	5.7	8.5	8,811	8,494	429
<b>Total<sup>(a)</sup></b>		<b>164,775</b>	<b>71,748</b>	<b>7,609</b>	<b>1,214,774</b>	<b>7.4</b>	<b>12.3</b>	<b>174,784</b>	<b>164,775</b>	<b>80,515</b>

(a) As more than one external cause can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviations: ALOS—average length of stay, exp.—exposure to.

**Table 9.2: Separations by external cause in ICD-10-AM groupings and hospital sector, States and Territories, 1999–00**

		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>External cause</b>		<b>Public hospitals</b>								
V01–V99	Transport accidents	17,819	11,315	11,465	4,973	3,967	999	642	756	51,936
W00–W19	Falls	50,750	28,446	23,619	10,954	9,193	2,086	1,478	1,094	127,620
W20–W64	Exposure to mechanical forces	20,275	13,463	17,109	6,308	4,618	1,171	795	1,203	64,942
W65–W74	Accidental drowning and submersion	177	90	187	91	27	13	4	13	602
W75–W84	Other accidental threats to breathing	275	491	256	62	170	21	10	14	1,299
W85–W99	Exp. electricity, radiation, extreme temperature/pressure	352	173	576	213	163	64	2	20	1,563
X00–X19	Exp. smoke, fire, flames, hot substances	2,645	1,229	1,653	864	660	111	57	202	7,421
X20–X39	Exp. venomous plants, animals, forces of nature	1,461	779	1,499	609	569	85	19	74	5,095
X40–X49	Accidental poisoning	4,594	3,458	3,939	1,402	1,672	197	124	120	15,506
X50–X59	Other external causes of accidental injury	8,301	6,140	5,506	2,465	2,107	469	362	330	25,680
X60–X84	Intentional self-harm	8,140	5,583	5,300	2,653	2,721	597	374	252	25,620
X85–Y09	Assault	6,724	3,557	5,559	2,785	1,675	340	56	1,216	21,912
Y10–Y34	Events of undetermined intent	655	1,316	352	387	158	43	54	108	3,073
Y35–Y36	Legal intervention and operations of war	25	19	18	6	4	1	2	2	77
Y40–Y84	Complications of medical and surgical care	58,604	54,007	33,113	20,864	18,409	5,090	3,135	1,284	194,506
Y85–Y98	Sequelae and supplementary factors	4,896	2,714	5,216	1,658	1,169	612	291	303	16,859
<b>Total<sup>(a)</sup></b>		<b>178,947</b>	<b>128,247</b>	<b>111,413</b>	<b>52,958</b>	<b>45,027</b>	<b>11,414</b>	<b>7,236</b>	<b>6,676</b>	<b>541,918</b>
		<b>Private hospitals</b>								
V01–V99	Transport accidents	1,783	1,976	1,589	743	448	331	26	n.a.	6,896
W00–W19	Falls	7,913	7,979	9,307	3,416	3,092	1,041	156	n.a.	32,904
W20–W64	Exposure to mechanical forces	2,632	2,607	4,854	1,836	1,228	460	54	n.a.	13,671
W65–W74	Accidental drowning and submersion	5	1	14	10	2	3	1	n.a.	36
W75–W84	Other accidental threats to breathing	41	58	58	72	35	14	1	n.a.	279
W85–W99	Exp. electricity, radiation, extreme temperature/pressure	18	31	67	18	18	6	0	n.a.	158
X00–X19	Exp. smoke, fire, flames, hot substances	111	166	186	68	64	25	3	n.a.	623
X20–X39	Exp. venomous plants, animals, forces of nature	73	82	113	70	48	29	2	n.a.	417
X40–X49	Accidental poisoning	184	160	298	125	90	49	5	n.a.	911
X50–X59	Other external causes of accidental injury	7,572	5,508	5,991	2,147	2,489	366	110	n.a.	24,183
X60–X84	Intentional self-harm	202	241	331	544	92	54	13	n.a.	1,477
X85–Y09	Assault	176	95	141	247	47	38	1	n.a.	745
Y10–Y34	Events of undetermined intent	145	134	245	55	38	17	4	n.a.	638
Y35–Y36	Legal intervention and operations of war	2	1	1	6	0	1	0	n.a.	11
Y40–Y84	Complications of medical and surgical care	21,153	20,928	16,240	9,643	6,925	2,064	519	n.a.	77,472
Y85–Y98	Sequelae and supplementary factors	2,881	2,244	1,943	551	747	396	29	n.a.	8,791
<b>Total<sup>(a)</sup></b>		<b>43,822</b>	<b>41,092</b>	<b>40,367</b>	<b>18,704</b>	<b>15,151</b>	<b>4,731</b>	<b>908</b>	<b>n.a.</b>	<b>164,775</b>

(a) As more than one external cause can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: exp.—exposure to.

n.a. not available.

**Table 9.3: Patient days by external cause in ICD-10-AM groupings and hospital sector, States and Territories, 1999-00**

External cause	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
	Public hospitals								
V01-V99 Transport accidents	90,950	51,858	51,346	28,148	18,722	5,985	4,972	5,550	257,531
W00-W19 Falls	452,912	236,516	237,548	100,142	63,960	18,512	11,845	8,422	1,129,857
W20-W64 Exposure to mechanical forces	64,100	35,466	67,923	18,854	11,604	3,475	2,087	4,883	208,392
W65-W74 Accidental drowning and submersion	432	294	429	256	60	24	98	36	1,629
W75-W84 Other accidental threats to breathing	1,569	5,899	2,304	918	1,329	170	27	50	12,266
W85-W99 Exp. electricity, radiation, extreme temperature/pressure	1,037	1,042	1,447	544	310	107	11	86	4,584
X00-X19 Exp. smoke, fire, flames, hot substances	14,706	10,013	8,111	6,962	4,295	557	351	1,673	46,668
X20-X39 Exp. venomous plants, animals, forces of nature	4,485	3,216	3,678	1,234	2,045	548	44	240	15,490
X40-X49 Accidental poisoning	12,925	9,093	22,831	3,987	4,033	596	566	443	54,474
X50-X59 Other external causes of accidental injury	52,421	33,387	32,944	18,363	12,129	4,405	1,438	2,131	157,218
X60-X84 Intentional self-harm	54,920	18,340	29,230	12,329	9,903	1,816	2,168	848	129,554
X85-Y09 Assault	18,506	8,538	18,394	8,113	4,680	1,266	379	4,657	64,533
Y10-Y34 Events of undetermined intent	9,799	3,688	2,862	1,900	1,575	198	292	389	20,703
Y35-Y36 Legal intervention and operations of war	136	30	105	127	31	30	70	4	533
Y40-Y84 Complications of medical and surgical care	624,110	529,799	326,422	213,158	172,535	45,252	32,463	15,283	1,959,022
Y85-Y98 Sequelae and supplementary factors	56,199	15,117	31,108	11,487	9,359	3,155	1,390	2,873	130,688
<b>Total<sup>(a)</sup></b>	<b>1,331,183</b>	<b>891,492</b>	<b>726,216</b>	<b>362,324</b>	<b>292,209</b>	<b>78,440</b>	<b>53,584</b>	<b>42,180</b>	<b>3,777,628</b>
Private hospitals									
V01-V99 Transport accidents	9,647	29,570	6,395	3,022	1,732	1,745	161	n.a.	52,272
W00-W19 Falls	81,406	74,557	95,121	35,336	24,325	9,821	1,427	n.a.	321,993
W20-W64 Exposure to mechanical forces	7,060	7,346	10,121	4,867	3,183	1,560	180	n.a.	34,317
W65-W74 Accidental drowning and submersion	22	2	26	19	10	6	2	n.a.	87
W75-W84 Other accidental threats to breathing	370	767	363	1,346	345	42	4	n.a.	3,237
W85-W99 Exp. electricity, radiation, extreme temperature/pressure	64	185	143	153	41	20	0	n.a.	606
X00-X19 Exp. smoke, fire, flames, hot substances	1,133	1,575	1,289	434	534	141	103	n.a.	5,209
X20-X39 Exp. venomous plants, animals, forces of nature	334	345	639	86	197	176	5	n.a.	1,782
X40-X49 Accidental poisoning	1,194	829	1,273	562	245	170	73	n.a.	4,346
X50-X59 Other external causes of accidental injury	22,171	18,998	17,194	8,217	7,066	1,952	244	n.a.	75,842
X60-X84 Intentional self-harm	1,944	2,519	3,570	2,622	203	189	221	n.a.	11,268
X85-Y09 Assault	771	436	429	785	116	146	1	n.a.	2,684
Y10-Y34 Events of undetermined intent	555	1,335	869	422	136	112	35	n.a.	3,464
Y35-Y36 Legal intervention and operations of war	37	3	28	53	0	1	0	n.a.	122
Y40-Y84 Complications of medical and surgical care	194,449	191,431	165,376	90,291	60,757	19,570	4,358	n.a.	726,232
Y85-Y98 Sequelae and supplementary factors	14,779	17,067	11,431	2,009	3,938	1,205	68	n.a.	50,497
<b>Total<sup>(a)</sup></b>	<b>319,390</b>	<b>328,016</b>	<b>293,884</b>	<b>133,235</b>	<b>100,074</b>	<b>33,718</b>	<b>6,457</b>	<b>n.a.</b>	<b>1,214,774</b>

(a) As more than one external cause can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: exp.—exposure to.

n.a. not available.

**Table 9.4: Separations for males by external cause in ICD-10-AM groupings and age group, all hospitals, Australia, 1999-00**

External cause	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(a)</sup>
V01-V99 Transport accidents	61	803	5,983	11,048	8,006	5,193	3,404	1,943	1,449	959	335	39,185
W00-W19 Falls	491	4,024	12,188	7,340	5,585	5,389	5,485	5,171	7,208	11,003	6,994	70,878
W20-W64 Exposure to mechanical forces	222	3,387	6,796	12,856	11,779	8,766	6,501	3,796	2,301	1,230	313	57,947
W65-W74 Accidental drowning and submersion	32	166	56	44	43	39	21	9	10	4	2	426
W75-W84 Other accidental threats to breathing	95	90	54	50	31	44	66	79	147	205	71	932
W85-W99 Exp. electricity, radiation, extreme temperature/pressur	1	17	42	208	405	233	91	110	45	53	7	1,212
X00-X19 Exp. smoke, fire, flames, hot substances	245	1,208	718	820	664	515	349	258	183	183	66	5,209
X20-X39 Exp. venomous plants, animals, forces of nature	13	185	506	495	580	498	402	230	214	184	106	3,413
X40-X49 Accidental poisoning	170	1,707	340	1,559	1,792	1,140	691	393	346	317	109	8,564
X50-X59 Other external causes of accidental injury	151	698	2,290	6,911	6,341	5,002	3,523	2,211	1,548	1,478	571	30,724
X60-X84 Intentional self-harm	0	4	130	2,654	3,527	2,677	1,365	543	259	152	48	11,359
X85-Y09 Assault	163	150	383	5,494	4,669	3,039	1,275	503	203	87	39	16,005
Y10-Y34 Events of undetermined intent	14	41	95	478	504	357	218	82	61	36	25	1,911
Y35-Y36 Legal intervention and operations of war	0	0	0	17	34	9	9	2	2	1	2	76
Y40-Y84 Complications of medical and surgical care	1,156	2,245	3,517	5,755	7,695	9,884	14,679	22,171	33,405	27,396	6,827	134,731
Y85-Y98 Sequelae and supplementary factors	21	213	640	2,782	3,434	3,509	2,775	1,687	1,128	603	139	16,931
<b>Total<sup>(b)</sup></b>	<b>2,802</b>	<b>14,730</b>	<b>33,300</b>	<b>56,884</b>	<b>53,261</b>	<b>44,544</b>	<b>39,551</b>	<b>37,994</b>	<b>47,056</b>	<b>41,830</b>	<b>14,499</b>	<b>386,452</b>

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

(b) As more than one external cause can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: exp.—exposure to.

**Table 9.5: Separations for females by external cause in ICD-10-AM groupings and age group, all hospitals, Australia, 1999-00**

<b>External cause</b>	<b>&lt;1</b>	<b>1-4</b>	<b>5-14</b>	<b>15-24</b>	<b>25-34</b>	<b>35-44</b>	<b>45-54</b>	<b>55-64</b>	<b>65-74</b>	<b>75-84</b>	<b>85+</b>	<b>Total<sup>(a)</sup></b>
V01-V99 Transport accidents	50	536	2,726	4,473	3,188	2,362	1,940	1,370	1,290	1,310	401	19,646
W00-W19 Falls	464	3,097	7,096	2,405	3,032	3,401	4,801	5,984	11,520	25,301	22,545	89,646
W20-W64 Exposure to mechanical forces	207	2,449	3,087	2,755	2,693	2,562	2,035	1,379	1,300	1,354	845	20,666
W65-W74 Accidental drowning and submersion	17	107	27	15	17	5	8	7	6	1	2	212
W75-W84 Other accidental threats to breathing	78	71	33	19	23	34	48	55	72	121	92	646
W85-W99 Exp. electricity, radiation, extreme temperature/pressur	1	6	36	118	147	86	39	19	24	22	11	509
X00-X19 Exp. smoke, fire, flames, hot substances	194	851	318	240	237	231	171	115	135	228	115	2,835
X20-X39 Exp. venomous plants, animals, forces of nature	17	114	251	234	299	252	232	175	134	213	178	2,099
X40-X49 Accidental poisoning	156	1,386	277	1,551	1,320	1,127	665	404	407	389	171	7,853
X50-X59 Other external causes of accidental injury	107	475	1,238	2,095	2,339	2,429	2,085	1,589	1,888	2,829	2,065	19,139
X60-X84 Intentional self-harm	1	3	436	4,442	4,041	3,787	1,920	539	274	223	72	15,738
X85-Y09 Assault	123	133	173	1,614	2,201	1,497	521	153	85	93	59	6,652
Y10-Y34 Events of undetermined intent	6	33	56	430	454	365	180	86	74	79	37	1,800
Y35-Y36 Legal intervention and operations of war	0	0	1	3	4	3	0	0	1	0	0	12
Y40-Y84 Complications of medical and surgical care	739	1,378	2,740	5,947	11,132	15,185	18,056	18,611	25,992	26,862	10,605	137,247
Y85-Y98 Sequelae and supplementary factors	9	142	361	904	1,629	1,596	1,519	877	750	639	293	8,719
<b>Total<sup>(b)</sup></b>	<b>2,142</b>	<b>10,635</b>	<b>18,603</b>	<b>26,428</b>	<b>31,667</b>	<b>33,902</b>	<b>33,305</b>	<b>30,500</b>	<b>42,344</b>	<b>56,249</b>	<b>34,465</b>	<b>320,240</b>

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

(b) As more than one external cause can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: exp.—exposure to.

**Table 9.6: Separations by external cause in ICD-10-AM groupings and place of occurrence, all hospitals, Australia, 1999-00**

External cause	Home	Residential institutions	School, public area	Sports & athletic area	Street & highway	Trade & service area	al & constru- c-tion area	Farm	Other specifi- ed places	Unspecifi- ed place	Not report- ed	Total
	V01-V99 Transport accidents	147	10	30	133	3,143	47	48	123	575	1,535	53,041
W00-W19 Falls	59,440	14,546	13,286	9,223	5,150	5,385	2,235	543	6,143	44,512	61	160,524
W20-W64 Exposure to mechanical forces	16,909	817	2,439	6,502	758	2,915	8,655	1,797	3,600	34,166	55	78,613
W65-W74 Accidental drowning and submersion	261	3	5	61	1	4	2	5	242	53	1	638
W75-W84 Other accidental threats to breathing	495	138	336	6	12	24	10	4	27	524	2	1,578
W85-W99 Exp. electricity, radiation, extreme temperature/press	281	75	134	9	17	54	195	13	634	307	2	1,721
X00-X19 Exp. smoke, fire, flames, hot substances	4,017	119	260	33	74	201	286	80	319	2,653	2	8,044
X20-X39 Exp. venomous plants, animals, forces of nature	1,644	100	104	79	82	44	96	123	664	2,574	2	5,512
X40-X49 Accidental poisoning	8,042	363	555	39	184	425	356	67	382	5,996	8	16,417
X50-X59 Other external causes of accidental injury	3,783	720	1,616	5,450	292	1,083	1,415	246	1,094	34,148	16	49,863
X60-X84 Intentional self-harm	14,888	777	941	56	358	345	59	45	677	8,943	8	27,097
X85-Y09 Assault	3,467	403	410	194	1,590	2,073	131	13	989	11,719	1,668	22,657
Y10-Y34 Events of undetermined intent	1,177	65	136	38	64	84	19	16	97	2,012	3	3,711
Y35-Y36 Legal intervention and operations of war	0	0	2	0	0	1	0	0	4	5	76	88
Y40-Y84 Complications of medical and surgical care	639	305	14,920	10	13	19	3	5	236	14,870	240,958	271,978
Y85-Y98 Sequelae and supplementary factors	117	6	23	30	278	29	56	15	79	1,636	23,381	25,650
<b>Total<sup>(a)</sup></b>	<b>114,373</b>	<b>18,296</b>	<b>34,704</b>	<b>21,837</b>	<b>11,941</b>	<b>12,672</b>	<b>13,506</b>	<b>3,080</b>	<b>15,591</b>	<b>164,219</b>	<b>315,768</b>	<b>706,693</b>

(a) As more than one external cause can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: exp.—exposure to.

**Table 9.7: Separations by external cause in ICD-10-AM groupings and activity when injured, all hospitals, Australia, 1999–00**

External cause		Sports activity	Leisure activity	Working for income	Other types of work	Resting, sleeping, eating, other vital activities		Unspecified activity	Not reported	Total
						Other specified activities	Other			
V01–V99	Transport accidents	2,919	5,372	2,831	407	1,511	13,755	31,899	138	58,832
W00–W19	Falls	9,893	10,865	5,056	5,479	16,004	24,430	88,736	61	160,524
W20–W64	Exposure to mechanical forces	7,216	3,470	15,180	4,990	3,435	10,465	33,802	55	78,613
W65–W74	Accidental drowning and submersion	54	170	4	2	55	119	233	1	638
W75–W84	Other accidental threats to breathing	5	22	7	5	617	217	703	2	1,578
W85–W99	Exp. electricity, radiation, extreme temperature/press	113	345	480	105	71	251	354	2	1,721
X00–X19	Exp. smoke, fire, flames, hot substances	19	240	536	576	1,003	1,364	4,304	2	8,044
X20–X39	Exp. venomous plants, animals, forces of nature	100	397	318	297	246	623	3,529	2	5,512
X40–X49	Accidental poisoning	23	466	561	186	945	4,625	9,603	8	16,417
X50–X59	Other external causes of accidental injury	6,385	1,050	4,967	799	1,279	2,390	32,977	16	49,863
X60–X84	Intentional self-harm	25	151	29	43	213	17,079	9,549	8	27,097
X85–Y09	Assault	131	1,453	443	92	262	3,911	16,279	86	22,657
Y10–Y34	Events of undetermined intent	57	51	78	26	36	1,164	2,296	3	3,711
Y35–Y36	Legal intervention and operations of war	0	0	4	0	0	4	4	76	88
Y40–Y84	Complications of medical and surgical care	8	14	30	17	202	18,854	11,630	241,223	271,978
Y85–Y98	Sequelae and supplementary factors	32	44	163	12	6	284	1,686	23,423	25,650
<b>Total<sup>(a)</sup></b>		<b>26,932</b>	<b>23,955</b>	<b>30,562</b>	<b>12,974</b>	<b>25,668</b>	<b>97,629</b>	<b>244,477</b>	<b>263,561</b>	<b>706,693</b>

(a) As more than one external cause can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: exp.—exposure to.

Table 9.8: Separations by first-reported external cause and principal diagnosis in ICD-10-AM groupings, all hospitals, Australia, 1999-00

First reported external cause		Injuries to head & neck (S00-S19)	Injuries to thorax, abdomen, back, spine & pelvis (S20-S39)	Injuries to upper & lower limbs (S40-S99)	Injuries to multi- or unspecified region; foreign body effects (T00-T19)	Burns & frostbite (T20-T35)	Poisoning & toxic effects (T36-T65)	Other & unspecified effects of external causes (T66-T79)	Complications of medical & surgical care (T80-T88)	Other trauma complications; external cause sequelae (T89-T98)	Total
V01-V99	Transport accidents	16,103	10,667	23,718	621	137	8	160	13	33	51,460
W00-W19	Falls	21,434	13,685	84,441	648	18	11	173	155	13	120,578
W20-W64	Exposure to mechanical forces	11,734	2,723	45,270	6,294	363	92	449	60	163	67,148
W65-W74	Accidental drowning and submersion	27	5	14	1	0	2	511	0	0	560
W75-W84	Other accidental threats to breathing	16	6	10	653	1	1	45	3	0	735
W85-W99	Exp. electricity, radiation, extremes <sup>(a)</sup>	8	3	26	3	218	0	1,048	3	0	1,309
X00-X19	Exp. smoke, fire, flames, hot substances	20	5	72	4	5,422	293	53	5	1	5,875
X20-X39	Exp. venomous plants, animals <sup>(b)</sup>	27	10	167	22	7	3,108	728	6	4	4,079
X40-X49	Accidental poisoning	42	4	17	26	421	12,212	305	23	0	13,050
X50-X59	Other external causes of accidental injury	5,023	2,628	26,327	538	40	67	1,836	139	20	36,618
X60-X84	Intentional self-harm	366	385	1,697	92	161	17,963	255	5	3	20,927
X85-Y09	Assault	12,812	1,972	4,009	206	79	54	359	7	15	19,513
Y10-Y34	Events of undetermined intent	169	74	677	26	18	1,835	32	2	6	2,839
Y35-Y36	Legal intervention and operations of war	13	7	26	0	0	2	0	0	0	48
Y40-Y84	Complications of medical and surgical care	204	314	742	79	96	1,088	1,103	64,632	7	68,265
Y85-Y98	Sequelae and supplementary factors	88	47	270	24	8	17	50	190	37	731
<b>Total</b>		<b>68,086</b>	<b>32,535</b>	<b>187,483</b>	<b>9,237</b>	<b>6,989</b>	<b>36,753</b>	<b>7,107</b>	<b>65,243</b>	<b>302</b>	<b>413,735</b>

(a) Extreme temperature/pressure.

(b) Or forces of nature.

Note: Abbreviation: exp.—exposure to.



# 10 Australian Refined Diagnosis Related Groups for admitted patients

## Introduction

Australian Refined Diagnosis Related Groups (AR-DRGs) is an Australian admitted patient classification system which provides a clinically meaningful way of relating the number and type of patients treated in a hospital (that is, its casemix) to the resources required by the hospital. The classification categorises acute admitted patient episodes of care into groups with similar conditions and similar usage of hospital resources, using information in the hospital morbidity record such as the diagnoses, procedures and demographic characteristics of the patient. This report uses AR-DRG version 4.1 (Department of Health and Aged Care 1998).

The AR-DRG classification is partly hierarchical, with 23 Major Diagnostic Categories (MDCs) into which the 661 AR-DRGs can be grouped. The MDCs are mostly defined by body system or disease type, and correspond with particular medical specialities.

In general, episodes are assigned to MDCs on the basis of the principal diagnosis. Some episodes involving procedures that are particularly resource intensive can also be assigned to the Pre-MDC category (AR-DRGs A01Z–A41Z), irrespective of the MDC assigned on the basis of principal diagnosis. Records for these episodes have been categorised separately in tables and figures based on MDCs in this chapter. Episodes with Error-DRGs (AR-DRGs 901Z–903Z, 961Z–963Z and 960Z, see Glossary) have been similarly categorised separately, even if they were assigned to an MDC.

Episodes are assigned to AR-DRGs within MDCs, primarily on the basis of the procedure codes (in the surgical partition) or the diagnosis codes (in the medical partition). When more than one AR-DRG is associated with a cluster of closely-related procedures or diagnoses, other variables, such as the patient's age, complicating diagnoses/procedures and/or patient clinical complexity level, and the mode of separation, are used for AR-DRG assignment.

The data were regrouped by the Institute, in consultation with the States and Territories, and the AR-DRGs that resulted from this regrouping are reported here. They may differ from AR-DRGs derived at the State or Territory level because of differences in coding and mapping conventions.

The information in this chapter is presented using both levels of the AR-DRG classification:

- MDCs – these 23 groups are used to provide information aggregated at a high level (Figures 10.2 and 10.3, Tables 10.1 to 10.6);
- AR-DRGs – detailed information is presented for the 30 of the 661 AR-DRGs with the highest number of separations (Tables 10.7 to 10.16).

All tables in this chapter include separations for which the type of episode of care was reported as *Acute, Newborn* (for separations with at least one qualified day) or was not

reported. That is, separations for episode of care types *Rehabilitation, Palliative care, Non-acute care, Other care* and *Newborn* (for separations with unqualified days only) are excluded where they were able to be identified (see Table 5.11). Of the separations for which the type of episode of care was reported, 93% were reported as *Acute* (92%, 3,707,377 of 4,030,176 in the public sector and 94%, 1,926,275 of 2,058,005 in the private sector). For public psychiatric hospitals 89% of separations for which the type of episode of care was reported were *Acute*.

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 average length of stay figures were calculated using all separations. That is, the data were not trimmed of separations with unusually long or short lengths of stay.

Some data for private hospitals in Tasmania and the Australian Capital Territory have not been included in Tables 10.4, 10.10 and 10.12. These data were supplied but are not published, for confidentiality reasons.

## **Cost weights and costs by volume**

For each AR-DRG 1998–99 cost weights were used for the public and private sectors. These had been estimated by the Department of Health and Aged Care, through the National Hospital Cost Data Collection (Department of Health and Aged Care 2000). Cost weights for 1999–00 were not available at the time of printing.

The cost weights represent the costliness of an AR-DRG relative to all other AR-DRGs, such that the average cost weight for all separations is 1.00. The data collection also provided estimates of average costs for each separation for an AR-DRG with a cost weight of 1.00: \$2,488 in the public sector and \$1,903 in the private sector. Separate cost weights are estimated for the public and private sectors because of the differences in the range of costs recorded in public and private hospitals.

The *Cost by volume* figures in this chapter were derived for each AR-DRG by multiplying the estimated average cost for the AR-DRG by the number of separations for the AR-DRG. For MDCs, the cost estimates for all the AR-DRGs within the MDC were then summed to produce an estimated cost for the MDC.

The *Cost by volume* figures in this chapter are estimates only, intended for use as a guide to the approximate relative costs of hospital services during 1999–00. They should be used with caution in any comparisons of the States and Territories or the public and private sectors. They are not derived from, or comparable with, the expenditure and cost per casemix-adjusted separation information presented in Chapters 2 and 3.

Information based on the average cost weights of separations is also included in Chapters 2, 4 and 5. Updated information will be included on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00/index.html>, once 1999–00 cost weights become available.

Appendix 8 includes further information on the National Hospital Cost Data Collection.

## **AR-DRGs and other data elements reported for separations**

The information on AR-DRG reported in this chapter is compiled in the National Hospital Morbidity Database with a range of other data. Figure 10.1 demonstrates this using the

example of the AR-DRG F42B *Circulatory disorders without AMI with invasive cardiac investigative procedure without complex diagnosis/procedure*.

There were 41,050 separations with an AR-DRG of F42B, with an average length of stay of 1.6 days. The majority of separations were in the private sector (54.5%), and 52.6% of separations were for private patients (in comparison to 33.8% overall, Table 5.1). Sixty-three per cent of patients were males and the most common age group reported was 65 to 74 years (12,307, 30.0%). The majority of patients (38,474, 93.2%) had a separation mode of *Other*, suggesting that most of these persons went home after separation from hospital. The most common principal diagnosis reported in conjunction with an AR-DRG of F42B was *Atherosclerotic heart disease, of native coronary artery* (I25.11), while the most common additional diagnosis was *Essential (primary) hypertension* (I10). The most common procedure performed was *Coronary angiography with left heart catheterisation* (procedure code 38218-00 [Block 668]).

## Major Diagnostic Categories

### Sector

Figures 10.2 and 10.3 provide a summary of the numbers of separations and patient days reported for each of the MDCs by sector.

The MDC with the highest number of separations in the public sector was *Diseases and disorders of the kidney and urinary tract* (MDC 11), followed by *Diseases and disorders of the digestive system* (MDC 06). In the private sector, *Diseases and disorders of the digestive system* (MDC 06) had the largest number of separations, followed by *Diseases and disorders of the musculoskeletal system and connective tissue* (MDC 08). For the public sector the highest numbers of patient days were reported for the *Diseases and disorders of the circulatory system* (MDC 05) and *Mental diseases and disorders* (MDC 19) MDCs. The *Diseases and disorders of the musculoskeletal system and connective tissue* (MDC 08) and *Diseases and disorders of the digestive system* (MDC 06) MDCs accounted for the highest numbers of patient days in the private sector. For the public and private sectors combined, the two MDCs with the most separations were *Diseases and disorders of the digestive system* (MDC 06) and *Diseases and disorders of the kidney and urinary tract* (MDC 11). The largest numbers of patient days were reported for the *Diseases and disorders of the musculoskeletal system and connective tissue* (MDC 08) and *Diseases and disorders of the circulatory system* (MDC 05) MDCs.

The average lengths of stay varied by MDC and hospital sector (Tables 10.1 and 10.2). In the public sector, they ranged from 28.7 days for the *Pre-MDC* group to 1.5 days for *Diseases and disorders of the kidney and urinary tract* (MDC 11) and *Diseases and disorders of the eye* (MDC 02). In the private sector, the longest average length of stay was 27.0 days for the *Pre-MDC* group, and the shortest was 1.1 days, for *Diseases and disorders of the eye* (MDC 02).

Notable differences between hospital sectors were for *Pregnancy, childbirth and puerperium* (MDC 14), where the average length of stay was higher for private hospitals (3.9 days) than public hospitals (2.9 days), *Newborns and other neonates* (MDC 15), where the average length of stay was higher in public hospitals (8.2 days) than private hospitals (6.1 days), *Infectious and parasitic diseases* (MDC 18), where the average length of stay was higher for private hospitals (6.1 days) than public hospitals (4.8 days), *Mental diseases and disorders*

(MDC 19), where the average length of stay was higher for public hospitals (10.5 days) than private hospitals (5.6 days), and *Alcohol/drug use and alcohol/drug induced organic mental disorders* (MDC 20), where the average length of stay was higher for private hospitals (5.7 days) than public hospitals (4.2 days). A variety of factors could be responsible for such discrepancies, for example different patient populations (and numbers of separations for AR-DRGs within the MDCs), patterns of service provision, facilities available, treatment regimes and reporting practices.

Almost 88% of patients in public hospitals were public patients, in contrast to just 3.7% in private hospitals. The highest proportion of public patients in public hospitals was for *Alcohol/drug use and alcohol/drug induced organic mental disorders* (MDC 20, 96.2%), while the lowest was for *Diseases and disorders of the eye* (MDC 02, 77.6%). The highest proportion of public patients in private hospitals was for *Diseases and disorders of the kidney and urinary tract* (MDC 11, 12%), followed by *Newborns and other neonates* (MDC 15, 9.4%).

The cost by volume data for MDCs in Tables 10.1 and 10.2 show that the costliest MDC in the public sector was estimated to be *Diseases and disorders of the circulatory system* (MDC 05). In the private sector it was *Diseases and disorders of the musculoskeletal system and connective tissue* (MDC 08).

## States and Territories

Tables 10.3 to 10.6 contain detail on the number of separations and patient days by MDC in the States and Territories. These tables enable State by State comparisons of overall hospital use for the different MDCs, and the share of separations between the public and private sectors. For example, the proportion of total separations for *Diseases and disorders of the respiratory system* (MDC 04) in private hospitals (rather than public hospitals) was higher in Queensland (28.6%, 16,481) than in the other jurisdictions, for example New South Wales (15.6%, 15,368). The proportion of total patient days for *Pregnancy, childbirth and the puerperium* (MDC 14) that was in private hospitals (rather than public hospitals) was 29.5% overall (411,476), but varied between States and Territories, for example 23.0% in South Australia (25,443), 27.1% in New South Wales (128,933) and 40.4% in Western Australia (59,703).

The distributions of separations and patient days by MDC within the States and Territories were broadly consistent with those at the national level. Notable exceptions in the public sector included *Neoplastic disorders* (MDC 17) in the Northern Territory (1.0% of separations, 588, compared with a national average of 4.4%, 164,925) and *Diseases and disorders of the kidney and urinary tract* (MDC 11) in the Australian Capital Territory (23.1%, 13,850, compared with 15.8%, 591,545). In the private sector, South Australia and Western Australia reported fewer separations for *Diseases and disorders of the digestive system* (MDC 06) (15.4% of separations, 24,262, and 15.8% of separations, 33,333, compared with 18.7%, 366,061, nationally).

## Australian Refined Diagnosis Related Groups

### Sector

Tables 10.7 to 10.16 present information on the most commonly reported AR-DRGs. Tables 10.7 and 10.8 contain summary separation, patient day and average length of stay statistics for the 30 AR-DRGs with the most separations in public and private hospitals.

In the public sector in 1999–00 *Admit for renal dialysis* (AR-DRG L61Z) was the most common AR-DRG, accounting for 12.4% (466,701) of total separations (Table 10.7). Other leading AR-DRGs included *Chemotherapy* (AR-DRG R63Z) with 3.1% (116,662), and *Vaginal delivery without complicating diagnosis* (AR-DRG O60D) with 3.0% (111,129) of total public sector separations. The corresponding top three AR-DRGs in the private sector were *Other colonoscopy, same day* (AR-DRG G44C) with 6.9% (135,901) of total separations, *Other gastroscopy for non-major digestive disease, same day* (AR-DRG G45B) with 4.9% (95,098), and *Chemotherapy* (AR-DRG R63Z) with 4.6% (90,512) (Table 10.8).

Of the 10 AR-DRGs with the most separations for the public sector, three were not included in the top 30 for the private sector, namely *Chest pain* (AR-DRG F74Z), *Oesophagitis, Gastroenteritis and miscellaneous digestive system disorders age >9 without catastrophic severe complication or comorbidity* (AR-DRG G67B) and *Other antenatal admission with moderate or no complicating disorder* (AR-DRG O65B). On the other hand, none of the leading 10 AR-DRGs in the private sector was missing from the top 30 for the public sector.

Within the top 30, average lengths of stay ranged from 5.9 days for *Heart failure and shock without catastrophic complication or comorbidity* (AR-DRG F62B) to one day for six different AR-DRGs in the public sector and from 6.5 days for *Caesarean delivery without complicating diagnosis* to one day for twelve different AR-DRGs in the private sector.

The highest proportion of public patients in public hospitals was for *Poisoning/toxic effects of drugs and other substances age <60 without catastrophic complication or comorbidity* (AR-DRG X62B, 95.9%), while the lowest was for *Dental extraction and restorations* (AR-DRG D40Z, 75%). The highest proportion of public patients in private hospitals was for *Admit for renal dialysis* (AR-DRG L61Z, 18.6%), with less than 10% for each of the remaining AR-DRGs.

The highest costs in public hospitals were estimated to be for *Vaginal delivery without complicating diagnosis* (AR-DRG O60D) followed by *Admit for renal dialysis* (AR-DRG L61Z). In the private sector, the costliest AR-DRGs in the top 30 were estimated to be *Major lens procedures* (AR-DRG C08Z) and *Other colonoscopy, same day* (AR-DRG G44C).

## States and Territories

There was some variation between the States and Territories in the relative number of separations for the most common AR-DRGs (Tables 10.9 and 10.10). For example, in the public sector in the Northern Territory and the Australian Capital Territory, *Admit for renal dialysis* (AR-DRG L61Z) accounted for a markedly greater proportion of separations than the national average (33.2%, 18,899, and 20.3%, 12,175, respectively, compared with 12.4%, 466,701).

In the private sector, examples of differences include separations in the Australian Capital Territory: *Other gastroscopy for non-major digestive disease, same day* (AR-DRG G45B) which accounted for a lower proportion of total separations than the national average (0.4%, 94, compared with 4.9%, 95,098), and *Other colonoscopy, same day* (AR-DRG G44C) (1.0%, 227, compared with 6.9%, 135,901). This is likely to reflect the fact that private free-standing day hospital facilities in the Australian Capital Territory are not included in the National Hospital Morbidity Database. In Western Australia, *Non-surgical neck and back conditions with pain management procedure/myelogram* (AR-DRG I68C) accounted for 2.1% of separations (4,457), compared with the national average of 0.7% (14,187).

The average lengths of stay were mainly similar among the States and Territories (Tables 10.11 and 10.12). However, there was some variation. In the public sector, *Other factors influencing health status age <80 without complication or comorbidity* (AR-DRG Z64B) ranged

from 4.8 days in the Northern Territory to 1.6 days in the Australian Capital Territory and *Heart failure and shock without catastrophic complication and comorbidity* (AR-DRG F62B) ranged from 5.3 days in Victoria to 7.7 days in Tasmania. In the private sector, variation in lengths of stay was evident for AR-DRGs such as *Non-surgical neck and back conditions with pain management procedure/myelogram* (AR-DRG I68C), *Other skin graft and/or debridement procedures* (AR-DRG J08B) and *Caesarean delivery without complicating diagnosis* (AR-DRG O01D)

## Age group and sex

Tables 10.13 and 10.14 summarise separations by age group and sex for the 30 leading AR-DRGs. Fifteen of the top 30 AR-DRGs were common to both sexes, while some others were more sex-specific (for example, *Vaginal delivery without complicating diagnosis* (AR-DRG O60D). *Admit for renal dialysis* (AR-DRG L61Z) was the most commonly reported AR-DRG for both sexes, with the most separations in the 65 to 74 years age group.

The age distributions varied by AR-DRG. For example, *Tonsillectomy or adenoidectomy* (AR-DRG D11Z) was most commonly reported for males and females in the 5 to 14 years age group. *Knee procedures* (AR-DRG I18Z) was most commonly reported for males in the 35 to 44 years age group and for females in the 45 to 54 years age group, and 55% of separations (58,086) for *Major lens procedure* (AR-DRG C08Z) were for persons over the age of 75 years.

## Private free-standing day hospitals

Table 10.15 contains summary separation, public patient separation and patient day statistics for the 30 AR-DRGs with the most separations in private free-standing day hospital facilities. *Other colonoscopy, same day* (AR-DRG G44C) was the most common AR-DRG, accounting for 16.9% (47,222) of total separations. Other leading AR-DRGs included *Other gastroscopy for non-major digestive disease, same day* (AR-DRG G45B) with 14.0% (39,083), and *Major lens procedures* (AR-DRG C08Z) with 9.4% (26,268) of total separations. The proportion of public patient separations was highest for *Circulatory disorders without acute myocardial infarction with invasive cardiac investigative procedure without complex diagnosis or procedure* (AR-DRG F42B, 51.1%), with less than each of the 10% for the remaining AR-DRGs.

## Public psychiatric hospitals

In public psychiatric hospitals, most of the separations had AR-DRGs reported that were within the mental diseases and disorders, and alcohol/drug use and alcohol/drug induced organic mental disorders MDCs (AR-DRGs beginning with U or V, respectively) (Table 10.16). *Personality disorders and acute reactions* (AR-DRG U67Z) accounted for the most separations, while *Schizophrenia disorders with mental health legal status* (AR-DRG U61A) accounted for the most patient days. *Major affective disorders age <70 without catastrophic or severe complication or comorbidity* (AR-DRG U63B) ranked second for separations and *Dementia and other chronic disturbances of cerebral function* (AR-DRG B63Z) for patient days.

The average length of stay was long for most of these AR-DRGs and only 14.2% (2,275) of separations were same day separations, compared with 46% in public hospitals overall. The average length of stay for *Personality disorders and acute reactions* (AR-DRG U67Z) in public psychiatric hospitals was 9.7 days and the average length of stay for *Major affective disorders age <70 without catastrophic or severe comorbidity or complication* (AR-DRG U63B) was 20.0 days.

Separations in public psychiatric hospitals include some with very long lengths of stay, up to several years. Hence the average lengths of stay should be interpreted taking into consideration the inclusion of some very long stay separations. The median lengths of stay were markedly shorter than the average lengths of stay for *Schizophrenia disorders with mental health legal status* (AR-DRG U61A) (18 days, compared with the average length of stay of 54.9 days), *Major affective disorders age <70 without catastrophic or severe comorbidity or complication* (AR-DRG U63B) (13 days, compared with the average length of stay of 20.0 days) and *Dementia and other chronic disturbances of cerebral function* (AR-DRG B63Z) (27 days, compared with the average length of stay of 203.4 days). (By definition, half the separations have a shorter length of stay and half have a longer length of stay than the median.)

## Additional data

The accompanying tables on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00/index.html> provide national and State and Territory summary statistics for public and private hospitals for each AR-DRG (as presented for the top 30 AR-DRGs in Tables 10.7 and 10.8). For confidentiality, data for some AR-DRGs in the private sector have been suppressed. The information was suppressed if there were fewer than 50 private hospital separations reported for the AR-DRG and 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 AR-DRG.

## Error DRGs

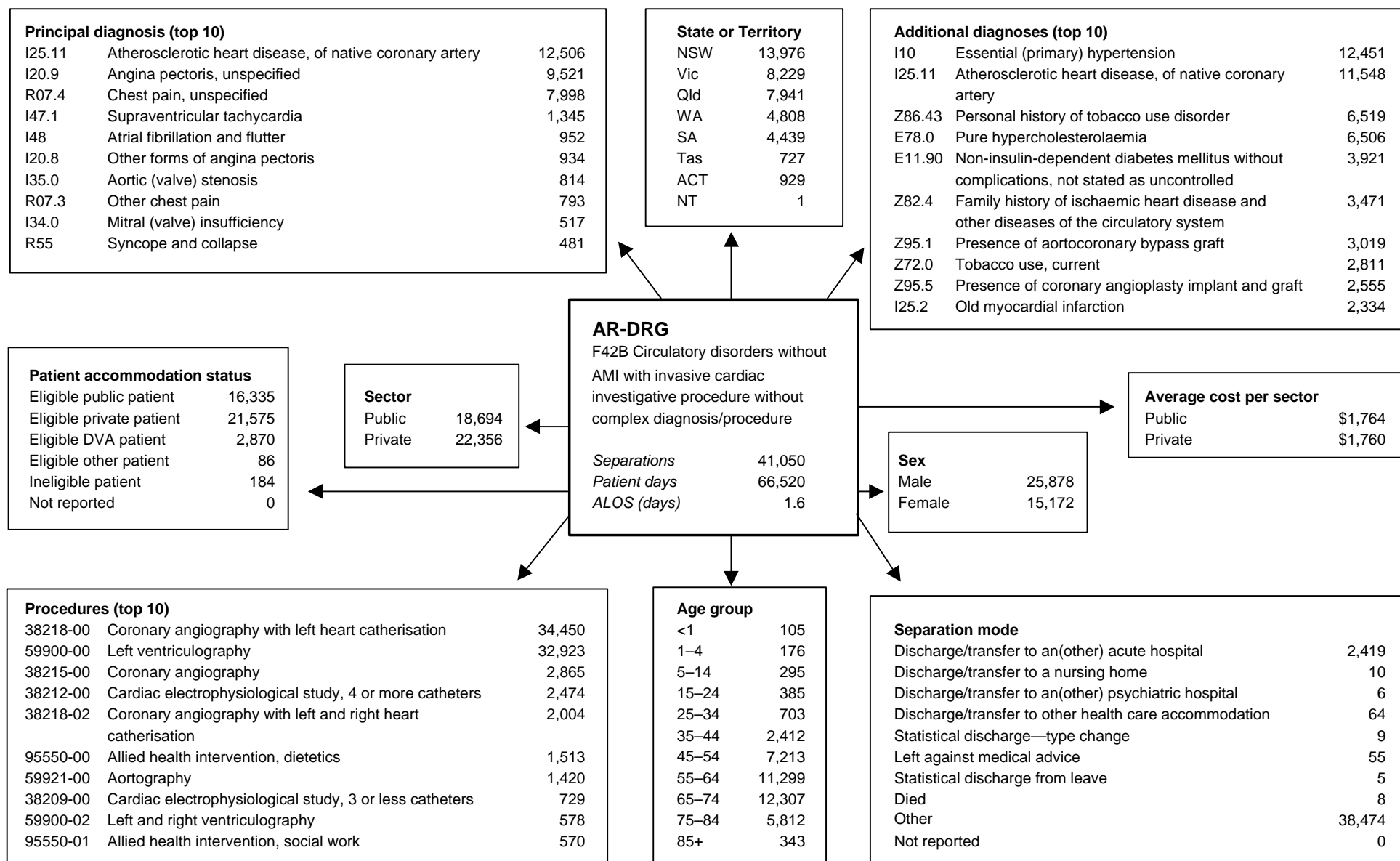
Error DRGs are the groups to which records containing clinically inconsistent or invalid information are assigned. Group 1 Error DRGs, 901Z, 902Z and 903Z, are assigned when all the operating room procedures are unrelated to the MDC of the patient's principal diagnosis. Group 2 Error DRGs, 961Z, 962Z and 963Z, are assigned when a principal diagnosis is coded which will not allow the patient to be assigned to a clinically coherent DRG. Group 3 Error DRG, 960Z, is assigned when the principal diagnosis is invalid, or when other necessary information is incorrect or missing (Department of Health and Aged Care 1998).

Table 10.17 provides information on Group 1 Error DRGs for the 10 procedures with the highest number of separations, by hospital sector and State and Territory. Table 10.18 provides information on Group 2 Error DRGs, for the 10 principal diagnoses with the highest number of separations, by hospital sector and State and Territory. A higher number of separations was assigned to Error DRGs for public hospitals (57.9%, 7,939 for Group 1 and 41.2%, 1,623 for Group 2) than for private hospitals (42.1%, 5,766 for Group 1, and 58.1% 2,252 for Group 2).

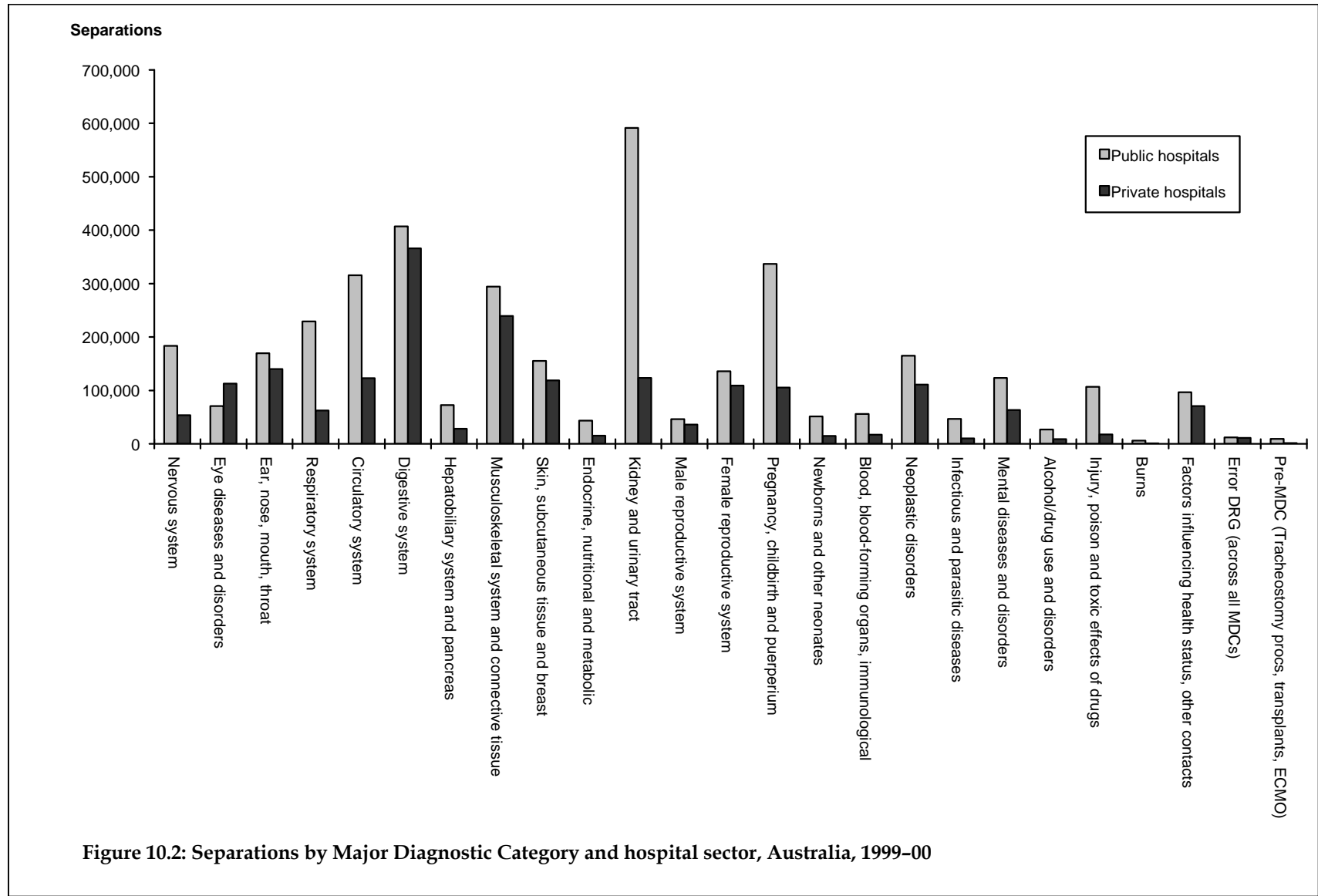
Variation in the assignment of separations to Error DRGs is evident between the States and Territories. In public hospitals the number of Group 1 Error DRGs ranged from 140 in Tasmania to 2,532 in New South Wales. In private hospitals, the number of Group 1 Error DRGs ranged from 67 in the Australian Capital Territory to 1,814 in New South Wales. The number of Group 2 Error DRGs in public hospitals ranged from 3 in Queensland to 1,220 in New South Wales, while in private hospitals, the number of Group 2 Error DRGs ranged from 5 in Western Australia to 1,706 in New South Wales.

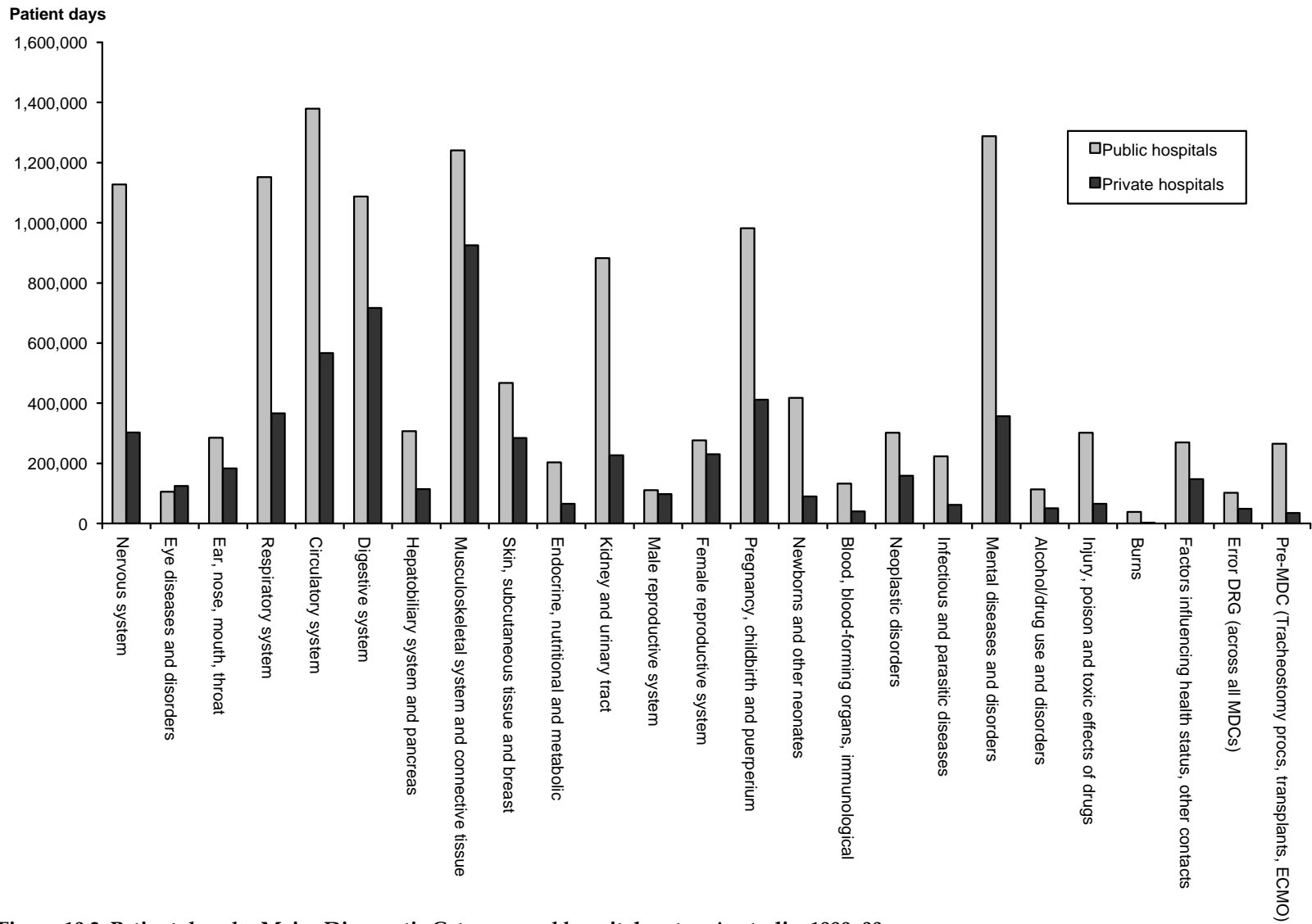
Figure 10.4 shows Error DRGs as a percentage of all separations, by State and Territory. Group 2 Error DRGs accounted for the lowest proportion of separations assigned to Error DRGs, while Group 1 Error DRGs accounted for the highest proportion.





**Figure 10.1: Interrelationships of an AR-DRG (F42B Circulatory disorders without AMI with invasive cardiac investigative procedure without complex diagnosis/procedure) with other data elements, all hospitals, Australia, 1999-00**





**Figure 10.3: Patient days by Major Diagnostic Category and hospital sector, Australia, 1999-00**

**Table 10.1: Separation, same day separation, public patient separation, patient day, average length of stay and cost statistics by Major Diagnostic Category, public hospitals,<sup>(a)</sup> Australia, 1999–00**

Major Diagnostic Category	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS excluding same day	Cost by volume (\$'000)
01 Diseases and disorders of the nervous system	183,571	55,839	156,645	96.4	1,127,528	591.8	6.1	8.4	637,004
02 Diseases and disorders of the eye	70,842	51,033	55,004	37.2	105,744	55.5	1.5	2.8	135,453
03 Diseases and disorders of the ear, nose, mouth and throat	169,503	76,553	145,751	89.0	285,210	149.7	1.7	2.2	260,377
04 Diseases and disorders of the respiratory system	229,051	31,612	198,127	120.2	1,151,436	604.4	5.0	5.7	712,435
05 Diseases and disorders of the circulatory system	315,580	67,208	264,927	165.6	1,379,763	724.2	4.4	5.3	1,207,737
06 Diseases and disorders of the digestive system	407,101	194,775	360,416	213.7	1,087,079	570.6	2.7	4.2	808,574
07 Diseases and disorders of the hepatobiliary system and pancreas	72,441	12,752	64,234	38.0	307,181	161.2	4.2	4.9	252,798
08 Diseases and disorders of the musculoskeletal system and connective tissue	294,487	102,892	245,994	154.6	1,240,583	651.2	4.2	5.9	1,040,069
09 Diseases and disorders of the skin, subcutaneous tissue and breast	155,130	78,836	136,244	81.4	467,792	245.5	3.0	5.1	326,290
10 Endocrine, nutritional and metabolic diseases and disorders	43,484	9,329	38,352	22.8	203,321	106.7	4.7	5.7	133,711
11 Diseases and disorders of the kidney and urinary tract	591,545	516,635	527,213	310.5	882,579	463.3	1.5	4.9	512,128
12 Diseases and disorders of the male reproductive system	46,113	25,096	39,827	24.2	111,058	58.3	2.4	4.1	93,282
13 Diseases and disorders of the female reproductive system	135,654	84,440	117,214	71.2	276,809	145.3	2.0	3.8	242,658
14 Pregnancy, childbirth and puerperium	336,991	78,746	312,213	176.9	982,211	515.6	2.9	3.5	731,861
15 Newborns and other neonates	51,220	4,804	47,849	26.9	417,567	219.2	8.2	8.9	281,688
16 Diseases and disorders of the blood and blood-forming organs, and immunological disorders	55,816	35,813	48,201	29.3	132,122	69.4	2.4	4.8	88,509
17 Neoplastic disorders (haematological and solid neoplasms)	164,925	144,285	144,127	86.6	301,313	158.2	1.8	7.6	225,277
18 Infectious and parasitic diseases	46,467	8,495	41,029	24.4	222,795	116.9	4.8	5.6	152,255
19 Mental diseases and disorders	123,142	33,593	115,492	64.6	1,288,109	676.1	10.5	14.0	427,869
20 Alcohol/drug use and alcohol/drug induced organic mental disorders	26,826	5,851	25,796	14.1	113,393	59.5	4.2	5.1	53,030
21 Injuries, poisoning and toxic effects of drugs	106,907	39,468	90,904	56.1	301,921	158.5	2.8	3.9	256,256
22 Burns	6,108	1,501	5,226	3.2	38,236	20.1	6.3	8.0	37,377
23 Factors influencing health status and other contacts with health services	96,352	68,504	85,849	50.6	269,535	141.5	2.8	7.2	148,832
ED Error DRGs	11,795	3,583	10,183	6.2	102,430	53.8	8.7	12.0	72,417
PR Pre-MDC (tracheostomies, transplants, ECMO)	9,229	245	7,579	4.8	265,325	139.3	28.7	29.5	418,059
<b>Total</b>	<b>3,750,280</b>	<b>1,731,888</b>	<b>3,284,396</b>	<b>1,968.5</b>	<b>13,061,040</b>	<b>6,855.8</b>	<b>3.5</b>	<b>5.6</b>	<b>9,255,946</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Abbreviations: ALOS—average length of stay, MDC—Major Diagnostic Category, DRG—Diagnosis Related Group, ECMO—extracorporeal membrane oxygenation.

**Table 10.2: Separation, same day separation, public patient separation, patient day, average length of stay and cost statistics by Major Diagnostic Category, private hospitals,<sup>(a)</sup> Australia, 1999–00**

Major Diagnostic Category	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS excluding same day	Cost by volume (\$'000)
01 Diseases and disorders of the nervous system	53,788	17,865	2,708	28.2	302,327	160.3	5.6	7.9	137,029
02 Diseases and disorders of the eye	112,755	88,243	3,021	59.2	124,799	66.2	1.1	1.5	164,172
03 Diseases and disorders of the ear, nose, mouth and throat	139,966	85,099	2,642	73.5	183,097	97.1	1.3	1.8	167,748
04 Diseases and disorders of the respiratory system	62,308	4,542	3,428	32.7	365,800	194.0	5.9	6.3	133,293
05 Diseases and disorders of the circulatory system	122,841	23,345	5,985	64.5	567,175	300.8	4.6	5.5	400,801
06 Diseases and disorders of the digestive system	366,061	270,308	9,367	192.1	717,050	380.3	2.0	4.7	409,766
07 Diseases and disorders of the hepatobiliary system and pancreas	28,171	2,667	1,571	14.8	113,834	60.4	4.0	4.4	74,284
08 Diseases and disorders of the musculoskeletal system and connective tissue	239,274	90,698	6,447	125.6	925,330	490.7	3.9	5.6	685,770
09 Diseases and disorders of the skin, subcutaneous tissue and breast	118,972	73,718	3,154	62.4	284,543	150.9	2.4	4.7	193,546
10 Endocrine, nutritional and metabolic diseases and disorders	15,022	3,143	523	7.9	65,570	34.8	4.4	5.3	37,531
11 Diseases and disorders of the kidney and urinary tract	123,317	93,173	14,385	64.7	226,940	120.3	1.8	4.4	112,783
12 Diseases and disorders of the male reproductive system	36,261	18,211	1,206	19.0	97,970	52.0	2.7	4.4	56,136
13 Diseases and disorders of the female reproductive system	109,069	72,044	3,345	57.3	230,439	122.2	2.1	4.3	164,735
14 Pregnancy, childbirth and puerperium	105,466	30,485	6,617	55.4	411,476	218.2	3.9	5.1	218,039
15 Newborns and other neonates	14,582	1,602	1,371	7.7	89,385	47.4	6.1	6.8	39,619
16 Diseases and disorders of the blood and blood-forming organs, and immunological disorders	17,211	10,820	628	9.0	40,081	21.3	2.3	4.6	18,436
17 Neoplastic disorders (haematological and solid neoplasms)	110,702	101,168	1,862	58.1	158,881	84.3	1.4	6.1	89,085
18 Infectious and parasitic diseases	10,035	1,164	660	5.3	61,680	32.7	6.1	6.8	22,450
19 Mental diseases and disorders	63,451	42,356	850	33.3	356,579	189.1	5.6	14.9	67,859
20 Alcohol/drug use and alcohol/drug induced organic mental disorders	8,892	4,287	244	4.7	51,001	27.0	5.7	10.1	10,500
21 Injuries, poisoning and toxic effects of drugs	17,553	4,718	1,384	9.2	65,794	34.9	3.7	4.8	33,699
22 Burns	436	87	35	0.2	2,384	1.3	5.5	6.6	1,127
23 Factors influencing health status and other contacts with health services	70,905	58,660	1,679	37.2	147,553	78.2	2.1	7.3	75,590
ED Error DRGs	11,232	6,653	274	5.9	49,260	26.1	4.4	9.3	31,282
PR Pre-MDC (tracheostomies, transplants, ECMO)	1,294	58	58	0.7	34,936	18.5	27.0	28.2	48,273
<b>Total</b>	<b>1,959,564</b>	<b>1,105,114</b>	<b>73,444</b>	<b>1,039.2</b>	<b>5,673,884</b>	<b>3,008.9</b>	<b>2.9</b>	<b>5.3</b>	<b>3,393,554</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Abbreviations: ALOS—average length of stay, MDC—Major Diagnostic Category, DRG—Diagnosis Related Group, ECMO—extracorporeal membrane oxygenation.

**Table 10.2: Separation, same day separation, public patient separation, patient day, average length of stay and cost statistics by Major Diagnostic Category, private hospitals,<sup>(a)</sup> Australia, 1999–00**

Major Diagnostic Category	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS excluding same day	Cost by volume (\$'000)
01 Diseases and disorders of the nervous system	53,788	17,865	2,708	28.2	302,327	160.3	5.6	7.9	137,029
02 Diseases and disorders of the eye	112,755	88,243	3,021	59.2	124,799	66.2	1.1	1.5	164,172
03 Diseases and disorders of the ear, nose, mouth and throat	139,966	85,099	2,642	73.5	183,097	97.1	1.3	1.8	167,748
04 Diseases and disorders of the respiratory system	62,308	4,542	3,428	32.7	365,800	194.0	5.9	6.3	133,293
05 Diseases and disorders of the circulatory system	122,841	23,345	5,985	64.5	567,175	300.8	4.6	5.5	400,801
06 Diseases and disorders of the digestive system	366,061	270,308	9,367	192.1	717,050	380.3	2.0	4.7	409,766
07 Diseases and disorders of the hepatobiliary system and pancreas	28,171	2,667	1,571	14.8	113,834	60.4	4.0	4.4	74,284
08 Diseases and disorders of the musculoskeletal system and connective tissue	239,274	90,698	6,447	125.6	925,330	490.7	3.9	5.6	685,770
09 Diseases and disorders of the skin, subcutaneous tissue and breast	118,972	73,718	3,154	62.4	284,543	150.9	2.4	4.7	193,546
10 Endocrine, nutritional and metabolic diseases and disorders	15,022	3,143	523	7.9	65,570	34.8	4.4	5.3	37,531
11 Diseases and disorders of the kidney and urinary tract	123,317	93,173	14,385	64.7	226,940	120.3	1.8	4.4	112,783
12 Diseases and disorders of the male reproductive system	36,261	18,211	1,206	19.0	97,970	52.0	2.7	4.4	56,136
13 Diseases and disorders of the female reproductive system	109,069	72,044	3,345	57.3	230,439	122.2	2.1	4.3	164,735
14 Pregnancy, childbirth and puerperium	105,466	30,485	6,617	55.4	411,476	218.2	3.9	5.1	218,039
15 Newborns and other neonates	14,582	1,602	1,371	7.7	89,385	47.4	6.1	6.8	39,619
16 Diseases and disorders of the blood and blood-forming organs, and immunological disorders	17,211	10,820	628	9.0	40,081	21.3	2.3	4.6	18,436
17 Neoplastic disorders (haematological and solid neoplasms)	110,702	101,168	1,862	58.1	158,881	84.3	1.4	6.1	89,085
18 Infectious and parasitic diseases	10,035	1,164	660	5.3	61,680	32.7	6.1	6.8	22,450
19 Mental diseases and disorders	63,451	42,356	850	33.3	356,579	189.1	5.6	14.9	67,859
20 Alcohol/drug use and alcohol/drug induced organic mental disorders	8,892	4,287	244	4.7	51,001	27.0	5.7	10.1	10,500
21 Injuries, poisoning and toxic effects of drugs	17,553	4,718	1,384	9.2	65,794	34.9	3.7	4.8	33,699
22 Burns	436	87	35	0.2	2,384	1.3	5.5	6.6	1,127
23 Factors influencing health status and other contacts with health services	70,905	58,660	1,679	37.2	147,553	78.2	2.1	7.3	75,590
ED Error DRGs	11,232	6,653	274	5.9	49,260	26.1	4.4	9.3	31,282
PR Pre-MDC (tracheostomies, transplants, ECMO)	1,294	58	58	0.7	34,936	18.5	27.0	28.2	48,273
<b>Total</b>	<b>1,959,564</b>	<b>1,105,114</b>	<b>73,444</b>	<b>1,039.2</b>	<b>5,673,884</b>	<b>3,008.9</b>	<b>2.9</b>	<b>5.3</b>	<b>3,393,554</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Abbreviations: ALOS—average length of stay, MDC—Major Diagnostic Category, DRG—Diagnosis Related Group, ECMO—extracorporeal membrane oxygenation.

**Table 10.3: Separations by Major Diagnostic Category, public hospitals,<sup>(a)</sup> States and Territories, 1999–00**

<b>Major Diagnostic Category</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
01 Diseases and disorders of the nervous system	62,923	48,287	30,876	17,082	16,510	3,697	2,446	1,750	183,571
02 Diseases and disorders of the eye	22,337	19,651	11,243	7,685	7,796	625	694	811	70,842
03 Diseases and disorders of the ear, nose, mouth and throat	49,579	43,460	33,635	17,754	17,086	3,472	2,511	2,006	169,503
04 Diseases and disorders of the respiratory system	83,388	53,421	41,099	19,607	21,475	3,941	2,418	3,702	229,051
05 Diseases and disorders of the circulatory system	112,174	77,019	57,983	24,097	30,659	6,633	4,677	2,338	315,580
06 Diseases and disorders of the digestive system	142,410	98,246	71,547	41,317	37,542	6,562	5,604	3,873	407,101
07 Diseases and disorders of the hepatobiliary system and	25,505	18,186	12,920	5,983	6,593	1,425	1,120	709	72,441
08 Diseases and disorders of the musculoskeletal system									
and connective tissue	98,950	70,734	54,519	28,049	27,302	7,111	4,636	3,186	294,487
09 Diseases and disorders of the skin, subcutaneous tissue									
and breast	46,846	34,034	33,309	14,772	18,339	3,757	1,816	2,257	155,130
10 Endocrine, nutritional and metabolic diseases and disorders	13,546	11,497	8,075	3,531	4,323	1,268	578	666	43,484
11 Diseases and disorders of the kidney and urinary tract	174,106	174,653	91,921	61,984	43,056	11,833	13,850	20,142	591,545
12 Diseases and disorders of the male reproductive system	15,901	13,263	6,028	4,458	4,533	967	477	486	46,113
13 Diseases and disorders of the female reproductive system	40,639	39,228	24,055	12,102	13,948	2,490	1,759	1,433	135,654
14 Pregnancy, childbirth and puerperium	112,864	84,787	60,687	27,233	33,232	6,594	4,941	6,653	336,991
15 Newborns and other neonates	17,864	13,268	8,732	3,191	5,145	994	1,020	1,006	51,220
16 Diseases and disorders of the blood and blood-forming									
organs, and immunological disorders	16,758	15,834	8,605	5,275	6,239	1,265	1,466	374	55,816
17 Neoplastic disorders (haematological and solid neoplasms)	31,946	54,132	35,553	16,997	18,299	2,677	4,733	588	164,925
18 Infectious and parasitic diseases	16,638	10,745	8,814	4,632	3,470	813	600	755	46,467
19 Mental diseases and disorders	37,597	30,415	22,428	14,662	12,565	3,513	1,206	756	123,142
20 Alcohol/drug use and alcohol/drug induced organic mental									
disorders	11,237	4,251	5,839	2,991	1,877	267	145	219	26,826
21 Injuries, poisoning and toxic effects of drugs	33,973	24,547	25,928	9,980	8,090	1,866	1,088	1,435	106,907
22 Burns	1,870	1,108	1,407	800	569	113	48	193	6,108
23 Factors influencing health status and other contacts with									
health services	27,583	25,694	19,672	9,102	9,989	1,814	1,738	760	96,352
ED Error DRGs	3,765	3,721	988	945	1,189	389	158	640	11,795
PR Pre-MDC (tracheostomies, transplants, ECMO)	3,098	2,523	1,570	753	773	212	173	127	9,229
<b>Total</b>	<b>1,203,497</b>	<b>972,704</b>	<b>677,433</b>	<b>354,982</b>	<b>350,599</b>	<b>74,298</b>	<b>59,902</b>	<b>56,865</b>	<b>3,750,280</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Abbreviations: MDC—Major Diagnostic Category, DRG—Diagnosis Related Group, ECMO—extracorporeal membrane oxygenation.

**Table 10.4: Separations by Major Diagnostic Category, private hospitals,<sup>(a)</sup> States and Territories, 1999–00**

Major Diagnostic Category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
01 Diseases and disorders of the nervous system	12,470	14,095	13,449	6,235	5,212	n.p.	n.p.	n.a.	53,788
02 Diseases and disorders of the eye	41,769	22,976	27,021	9,893	7,197	n.p.	n.p.	n.a.	112,755
03 Diseases and disorders of the ear, nose, mouth and throat	42,063	34,267	27,247	18,251	13,782	n.p.	n.p.	n.a.	139,966
04 Diseases and disorders of the respiratory system	15,368	16,390	16,481	6,204	5,593	n.p.	n.p.	n.a.	62,308
05 Diseases and disorders of the circulatory system	33,448	34,179	27,972	11,892	10,997	n.p.	n.p.	n.a.	122,841
06 Diseases and disorders of the digestive system	113,275	99,285	87,409	33,333	24,262	n.p.	n.p.	n.a.	366,061
07 Diseases and disorders of the hepatobiliary system and	8,121	6,729	6,403	3,312	2,459	n.p.	n.p.	n.a.	28,171
08 Diseases and disorders of the musculoskeletal system and connective tissue	70,067	59,071	41,616	32,552	25,606	n.p.	n.p.	n.a.	239,274
09 Diseases and disorders of the skin, subcutaneous tissue and breast	36,474	27,531	27,643	10,812	11,583	n.p.	n.p.	n.a.	118,972
10 Endocrine, nutritional and metabolic diseases and disorders	3,665	4,157	3,456	1,711	1,510	n.p.	n.p.	n.a.	15,022
11 Diseases and disorders of the kidney and urinary tract	33,311	32,290	30,481	12,669	12,332	n.p.	n.p.	n.a.	123,317
12 Diseases and disorders of the male reproductive system	12,658	9,542	6,298	3,790	2,406	n.p.	n.p.	n.a.	36,261
13 Diseases and disorders of the female reproductive system	36,809	28,076	22,658	10,324	6,798	n.p.	n.p.	n.a.	109,069
14 Pregnancy, childbirth and puerperium	37,397	23,963	18,262	15,421	5,628	n.p.	n.p.	n.a.	105,466
15 Newborns and other neonates	5,809	2,988	2,046	1,451	528	n.p.	n.p.	n.a.	14,582
16 Diseases and disorders of the blood and blood forming organs, and immunological disorders	4,046	4,669	4,987	1,741	1,273	n.p.	n.p.	n.a.	17,211
17 Neoplastic disorders (haematological and solid neoplasms)	21,843	33,678	32,248	9,782	10,542	n.p.	n.p.	n.a.	110,702
18 Infectious and parasitic diseases	2,359	2,324	2,839	1,319	809	n.p.	n.p.	n.a.	10,035
19 Mental diseases and disorders	12,089	25,020	12,626	9,526	1,544	n.p.	n.p.	n.a.	63,451
20 Alcohol/drug use and alcohol/drug induced organic mental disorders	1,835	3,410	2,424	624	295	n.p.	n.p.	n.a.	8,892
21 Injuries, poisoning and toxic effects of drugs	3,676	4,401	4,173	2,724	1,734	n.p.	n.p.	n.a.	17,553
22 Burns	71	127	114	58	50	n.p.	n.p.	n.a.	436
23 Factors influencing health status and other contacts with health services	24,900	18,204	14,480	6,854	4,643	n.p.	n.p.	n.a.	70,905
ED Error DRGs	3,547	4,732	1,316	587	711	n.p.	n.p.	n.a.	11,232
PR Pre-MDC (tracheostomies, transplants, ECMO)	305	307	384	92	154	n.p.	n.p.	n.a.	1,294
<b>Total</b>	<b>577,375</b>	<b>512,411</b>	<b>434,033</b>	<b>211,157</b>	<b>157,648</b>	<b>n.p.</b>	<b>n.p.</b>	<b>n.a.</b>	<b>1,959,564</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Abbreviations: MDC—Major Diagnostic Category, DRG—Diagnosis Related Group, ECMO—extracorporeal membrane oxygenation.

n.a. not available.

n.p. not published.



**Table 10.5: Patient days by Major Diagnostic Category, public hospitals, <sup>(a)</sup> States and Territories, 1999–00**

Major Diagnostic Category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
01 Diseases and disorders of the nervous system	438,692	267,919	159,222	123,485	94,173	22,828	13,195	8,014	1,127,528
02 Diseases and disorders of the eye	37,030	25,367	16,979	11,794	10,801	1,221	1,072	1,480	105,744
03 Diseases and disorders of the ear, nose, mouth and throat	93,383	66,928	51,637	30,225	28,350	6,372	4,163	4,152	285,210
04 Diseases and disorders of the respiratory system	440,112	264,457	188,843	98,501	103,081	24,204	13,220	19,018	1,151,436
05 Diseases and disorders of the circulatory system	526,152	318,382	238,123	106,686	126,323	31,833	20,994	11,270	1,379,763
06 Diseases and disorders of the digestive system	404,437	257,539	174,689	103,173	98,777	20,875	15,091	12,498	1,087,079
07 Diseases and disorders of the hepatobiliary system and	118,548	73,244	49,745	25,119	25,558	6,288	5,105	3,574	307,181
08 Diseases and disorders of the musculoskeletal system and connective tissue	457,519	287,233	199,958	121,592	104,477	29,754	23,028	17,022	1,240,583
09 Diseases and disorders of the skin, subcutaneous tissue and breast	163,101	109,837	82,210	43,392	44,583	9,711	5,055	9,903	467,792
10 Endocrine, nutritional and metabolic diseases and disorders	67,034	51,035	35,815	17,910	18,533	4,931	2,257	5,806	203,321
11 Diseases and disorders of the kidney and urinary tract	286,725	240,649	140,616	86,491	67,861	17,943	18,241	24,053	882,579
12 Diseases and disorders of the male reproductive system	42,029	28,424	14,529	9,378	11,271	2,816	1,529	1,082	111,058
13 Diseases and disorders of the female reproductive system	90,036	73,880	46,202	26,852	27,577	5,614	3,882	2,766	276,809
14 Pregnancy, childbirth and puerperium	346,833	242,284	163,703	88,045	85,315	19,096	16,147	20,788	982,211
15 Newborns and other neonates	128,382	106,594	79,918	32,439	40,073	10,591	9,803	9,767	417,567
16 Diseases and disorders of the blood and blood-forming organs, and immunological disorders	45,300	34,821	19,576	11,613	13,486	2,963	2,883	1,480	132,122
17 Neoplastic disorders (haematological and solid neoplasms)	88,088	84,732	56,517	27,710	30,895	5,216	7,310	845	301,313
18 Infectious and parasitic diseases	79,342	56,010	38,672	21,212	15,391	4,467	3,106	4,595	222,795
19 Mental diseases and disorders	477,535	279,065	220,446	147,052	117,753	26,087	14,196	5,975	1,288,109
20 Alcohol/drug use and alcohol/drug induced organic mental disorders	48,126	17,436	23,423	14,336	7,386	1,194	703	789	113,393
21 Injuries, poisoning and toxic effects of drugs	98,156	70,451	62,730	29,975	24,524	6,022	4,726	5,337	301,921
22 Burns	11,097	8,496	6,972	5,283	4,041	579	424	1,344	38,236
23 Factors influencing health status and other contacts with health services	86,628	72,329	41,922	18,919	31,374	10,704	3,843	3,816	269,535
ED Error DRGs	28,951	28,956	8,135	9,577	9,064	12,305	1,697	3,745	102,430
PR Pre-MDC (tracheostomies, transplants, ECMO)	89,526	74,875	42,516	22,159	23,347	5,261	4,463	3,178	265,325
<b>Total</b>	<b>4,692,762</b>	<b>3,140,943</b>	<b>2,163,098</b>	<b>1,232,918</b>	<b>1,164,014</b>	<b>288,875</b>	<b>196,133</b>	<b>182,297</b>	<b>13,061,040</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Abbreviations: MDC—Major Diagnostic Category, DRG—Diagnosis Related Group, ECMO—extracorporeal membrane oxygenation.

**Table 10.6: Patient days by Major Diagnostic Category, private hospitals,<sup>(a)</sup> States and Territories, 1999–00**

Major Diagnostic Category	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
01 Diseases and disorders of the nervous system	67,117	81,276	83,997	26,926	29,312	9,637	4,062	n.a.	302,327
02 Diseases and disorders of the eye	45,361	25,265	29,892	11,500	8,218	3,300	1,263	n.a.	124,799
03 Diseases and disorders of the ear, nose, mouth and throat	53,131	44,373	37,101	23,424	18,889	3,713	2,466	n.a.	183,097
04 Diseases and disorders of the respiratory system	79,052	99,513	103,208	36,825	33,028	9,571	4,603	n.a.	365,800
05 Diseases and disorders of the circulatory system	144,920	158,713	144,753	49,782	50,065	13,147	5,795	n.a.	567,175
06 Diseases and disorders of the digestive system	196,471	192,542	176,135	71,979	57,705	15,991	6,227	n.a.	717,050
07 Diseases and disorders of the hepatobiliary system and	30,424	29,139	27,177	12,004	10,232	3,053	1,805	n.a.	113,834
08 Diseases and disorders of the musculoskeletal system and connective tissue	262,967	227,462	189,808	111,399	90,333	28,679	14,682	n.a.	925,330
09 Diseases and disorders of the skin, subcutaneous tissue and breast	82,194	70,663	65,288	27,885	27,118	7,310	4,085	n.a.	284,543
10 Endocrine, nutritional and metabolic diseases and disorders	14,751	18,843	16,022	6,286	7,079	1,835	754	n.a.	65,570
11 Diseases and disorders of the kidney and urinary tract	58,249	60,407	55,318	23,974	22,062	4,046	2,884	n.a.	226,940
12 Diseases and disorders of the male reproductive system	32,773	25,150	18,414	9,081	7,517	2,589	2,446	n.a.	97,970
13 Diseases and disorders of the female reproductive system	71,953	57,232	45,639	26,557	18,655	5,791	4,612	n.a.	230,439
14 Pregnancy, childbirth and puerperium	128,933	101,001	77,154	59,703	25,443	11,292	7,950	n.a.	411,476
15 Newborns and other neonates	31,826	17,127	17,285	10,811	3,808	3,941	4,587	n.a.	89,385
16 Diseases and disorders of the blood and blood-forming organs, and immunological disorders	8,783	10,828	11,243	3,967	3,652	1,091	517	n.a.	40,081
17 Neoplastic disorders (haematological and solid neoplasms)	32,370	47,792	45,520	14,390	14,635	1,275	2,899	n.a.	158,881
18 Infectious and parasitic diseases	13,462	15,801	17,415	7,066	5,549	1,669	718	n.a.	61,680
19 Mental diseases and disorders	83,431	106,022	88,102	43,516	20,538	9,966	5,004	n.a.	356,579
20 Alcohol/drug use and alcohol/drug induced organic mental disorders	13,943	19,201	9,537	4,274	2,729	1,164	153	n.a.	51,001
21 Injuries, poisoning and toxic effects of drugs	14,043	18,320	15,718	8,566	6,065	2,220	862	n.a.	65,794
22 Burns	450	812	514	225	294	23	66	n.a.	2,384
23 Factors influencing health status and other contacts with health services	50,714	36,025	22,754	11,691	19,716	4,358	2,295	n.a.	147,553
ED Error DRGs	10,225	18,573	10,926	4,462	3,394	1,071	609	n.a.	49,260
PR Pre-MDC (tracheostomies, transplants, ECMO)	7,822	8,178	9,564	2,486	5,278	1,257	351	n.a.	34,936
<b>Total</b>	<b>1,535,365</b>	<b>1,490,258</b>	<b>1,318,484</b>	<b>608,779</b>	<b>491,314</b>	<b>147,989</b>	<b>81,695</b>	<b>n.a.</b>	<b>5,673,884</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Abbreviations: MDC—Major Diagnostic Category, DRG—Diagnosis Related Group, ECMO—extracorporeal membrane oxygenation.

n.a. not available.

**Table 10.7: Separation, same day separation, public patient separation, patient day, average length of stay and cost statistics for the 30 AR-DRGs version 4.1 with the highest number of separations, public hospitals,<sup>(a)</sup> Australia, 1999–00**

AR-DRG	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	Cost by volume (\$'000)
L61Z Admit for Renal Dialysis	466,701	466,368	416,921	245.0	467,076	245.2	1.0	206,282
R63Z Chemotherapy	116,662	116,348	103,793	61.2	117,172	61.5	1.0	70,697
O60D Vaginal Delivery W/O Complicating Diagnosis	111,129	4,024	103,092	58.3	334,114	175.4	3.0	254,708
G44C Other Colonoscopy, Sameday	61,141	61,141	54,499	32.1	61,141	32.1	1.0	48,852
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	59,905	59,905	53,649	31.4	59,905	31.4	1.0	41,814
F74Z Chest Pain	42,730	14,174	38,067	22.4	77,697	40.8	1.8	57,515
G67B Oesophagitis, Gastroent & Misc Digestive System Disorders Age>9 W/O Cat/Sev CC	41,509	13,380	37,086	21.8	87,482	45.9	2.1	48,981
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	37,444	32,673	33,556	19.7	48,180	25.3	1.3	49,651
O65B Other Antenatal Admission W Moderate or No Complicating Diagnosis	36,899	16,996	35,225	19.4	61,040	32.0	1.7	39,371
O40Z Abortion W D&C, Aspiration Curettage or Hysterotomy	36,476	28,155	31,916	19.1	38,835	20.4	1.1	32,938
E69C Bronchitis and Asthma Age<50 W/O CC	33,133	5,982	31,162	17.4	63,001	33.1	1.9	43,007
C08Z Major Lens Procedures	32,952	28,461	25,433	17.3	34,752	18.2	1.1	64,718
Z40Z Follow Up After Completed Treatment W Endoscopy	31,151	30,187	28,013	16.4	31,795	16.7	1.0	25,824
G66B Abdominal Pain or Mesenteric Adenitis W/O CC	30,336	10,832	27,804	15.9	49,847	26.2	1.6	30,821
Z64B Other Factors Influencing Health Status Age<80	30,335	18,934	27,589	15.9	91,464	48.0	3.0	3,088
U60Z Mental Health Treatment, Sameday, W/O ECT	28,140	28,140	24,877	14.8	28,140	14.8	1.0	14,211
X60C Injuries Age<65	28,014	15,581	23,604	14.7	39,424	20.7	1.4	27,818
J64B Cellulitis (Age>59 W/O Catastrophic or Severe CC) or Age<60	27,368	3,046	24,930	14.4	105,701	55.5	3.9	60,045
Q61C Red Blood Cell Disorders W/O Catastrophic or Severe CC	26,643	20,379	23,415	14.0	39,633	20.8	1.5	25,124
F72B Unstable Angina W/O Catastrophic or Severe CC	25,015	3,018	20,854	13.1	77,037	40.4	3.1	55,458
X62B Poisoning/Toxic Effects of Drugs & Other Substances Age<60 W/O CC	24,400	9,876	23,406	12.8	34,126	17.9	1.4	25,254
F62B Heart Failure and Shock W/O Catastrophic CC	24,280	2,259	19,590	12.7	144,211	75.7	5.9	78,910
N09Z Conisation, Vagina, Cervix and Vulva Procedures	24,261	21,014	21,377	12.7	28,648	15.0	1.2	23,460
D40Z Dental Extraction and Restorations	23,959	22,113	18,036	12.6	25,409	13.3	1.1	32,656
O65A Other Antenatal Admission W Severe Complicating Diagnosis	23,938	10,001	22,612	12.6	53,542	28.1	2.2	29,851
I74C Injury to Forearm, Wrist, Hand or Foot Age<75 W/O CC	23,213	10,569	20,490	12.2	27,279	14.3	1.2	25,627
E62C Respiratory Infection/Inflammations W/O CC	23,176	1,913	20,608	12.2	87,545	46.0	3.8	51,219
O60B Vaginal Delivery W Severe Complicating Diagnosis	22,846	563	21,318	12.0	91,650	48.1	4.0	68,766
I18Z Knee Procedures	22,681	15,521	19,802	11.9	32,358	17.0	1.4	42,822
O01D Caesarean Delivery W/O Complicating Diagnosis	22,610	58	20,263	11.9	110,643	58.1	4.9	94,645
Other	2,211,233	660,277	1,911,409	1,160.7	10,512,193	5,517.9	4.8	7,581,813
<b>Total</b>	<b>3,750,280</b>	<b>1,731,888</b>	<b>3,284,396</b>	<b>1,968.5</b>	<b>13,061,040</b>	<b>6,855.8</b>	<b>3.5</b>	<b>9,255,946</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Notes: 1. Main abbreviations: ALOS—average length of stay, W—with, W/O—without, CC—complications and comorbidities.

2. Similar tables for all AR-DRGs are provided on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00.html> for Australia and each State and Territory.

**Table 10.8: Separation, same day separation, public patient separation, patient day, average length of stay and cost statistics for the 30 AR-DRGs version 4.1 with the highest number of separations, private hospitals,<sup>(a)</sup> Australia, 1999-00**

AR-DRG	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	Cost by volume (\$'000)
G44C Other Colonoscopy, Same day	135,901	135,901	2,109	71.3	135,901	72.1	1.0	90,102
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	95,098	95,098	1,744	49.9	95,098	50.4	1.0	54,776
R63Z Chemotherapy	90,512	90,297	1,560	47.5	90,778	48.1	1.0	57,023
C08Z Major Lens Procedures	72,113	56,733	2,158	37.9	75,036	39.8	1.0	104,852
L61Z Admit for Renal Dialysis	62,454	62,444	11,603	32.8	62,478	33.1	1.0	22,483
I18Z Knee Procedures	57,107	37,117	926	30.0	72,806	38.6	1.3	79,436
D40Z Dental Extraction and Restorations	55,971	49,524	196	29.4	56,544	30.0	1.0	58,770
Z40Z Follow Up After Completed Treatment W Endoscopy	43,845	42,420	891	23.0	44,497	23.6	1.0	28,455
U60Z Mental Health Treatment, Sameday, W/O ECT	41,319	41,319	82	21.7	41,319	21.9	1.0	9,875
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	34,436	30,500	951	18.1	40,696	21.6	1.2	37,053
O60D Vaginal Delivery W/O Complicating Diagnosis	33,241	167	2,574	17.4	158,796	84.2	4.8	76,886
N07Z Other Uterine and Adnexa Procedures for Non-Malignancy	29,716	24,651	401	15.6	35,188	18.7	1.2	37,442
O40Z Abortion W D&C, Aspiration Curettage or Hysterotomy	24,858	23,348	716	13.0	25,217	13.4	1.0	22,944
F42B Circulatory Disorders W/O AMI W Invasive Cardiac Inves Proc W/O Complex DX/Pr	22,356	9,682	1,575	11.7	34,060	18.1	1.5	39,347
G09Z Inguinal and Femoral Hernia Procedures Age>0	19,295	2,155	496	10.1	36,715	19.5	1.9	31,837
G42B Other Gastroscopy for Major Digestive Disease, Sameday	17,738	17,738	288	9.3	17,738	9.4	1.0	10,731
J10Z Skin, Subcutaneous Tissue and Breast Plastic O.R. Procedures	17,698	11,416	276	9.3	24,221	12.8	1.4	30,334
D11Z Tonsillectomy or Adenoidectomy	17,583	4,154	608	9.2	19,527	10.4	1.1	18,198
L41Z Cystourethroscopy W/O CC	16,887	13,634	880	8.9	20,143	10.7	1.2	15,587
I16Z Other Shoulder Procedures	16,624	1,329	134	8.7	34,863	18.5	2.1	34,162
N10Z Diagnostic Curettage or Diagnostic Hysteroscopy	16,284	15,201	527	8.5	16,708	8.9	1.0	12,246
G11B Anal and Stomal Procedures W/O Catastrophic or Severe CC	15,818	8,659	413	8.3	26,976	14.3	1.7	18,744
I26Z Other Wrist and Hand Procedures	15,514	9,784	367	8.1	18,277	9.7	1.2	20,323
J08B Other Skin Graft and/or Debridement Procedures W/O Catastrophic or Severe CC	14,640	10,550	131	7.7	21,868	11.6	1.5	20,525
H04B Cholecystectomy W/O Closed CDE W/O Catastrophic or Severe CC	14,628	78	771	7.7	38,037	20.2	2.6	36,687
E63Z Sleep Apnoea	14,283	70	197	7.5	14,939	7.9	1.0	9,541
I68C Non-surgical Neck & Back Conditions W Pain Management Proc/Myelogram	14,187	10,149	602	7.4	26,423	14.0	1.9	16,272
N04Z Hysterectomy for Non-Malignancy	13,506	54	546	7.1	71,788	38.1	5.3	41,882
O01D Caesarean Delivery W/O Complicating Diagnosis	13,008	10	535	6.8	84,198	44.7	6.5	45,749
B05Z Carpal Tunnel Release	11,882	9,712	323	6.2	13,154	7.0	1.1	11,288
Other	911,062	291,220	38,864	478.2	4,219,895	2,237.8	4.6	2,300,000
<b>Total</b>	<b>1,959,564</b>	<b>1,105,114</b>	<b>73,444</b>	<b>1,039.2</b>	<b>5,673,884</b>	<b>3,008.9</b>	<b>2.9</b>	<b>3,393,554</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Notes: 1. Main abbreviations: ALOS—average length of stay, W—with, W/O—without, CC—complications and comorbidities.

2. Similar tables for all AR-DRGs for Australia and each State and Territory are provided on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00.html>

**Table 10.9: Separations for the 30 AR-DRGs version 4.1 with the highest number of separations,<sup>(a)</sup> public hospitals, States and Territories, 1999–00**

AR-DRG	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
L61Z Admit for Renal Dialysis	131,215	142,755	69,883	50,465	31,887	9,422	12,175	18,899	466,701
R63Z Chemotherapy	18,146	40,589	26,686	12,758	12,578	1,727	3,694	484	116,662
O60D Vaginal Delivery W/O Complicating Diagnosis	40,648	26,868	21,712	8,967	7,241	2,153	1,946	1,594	111,129
G44C Other Colonoscopy, Sameday	21,197	13,236	10,314	8,740	5,312	726	1,182	434	61,141
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	17,971	15,711	10,791	7,590	5,571	833	948	490	59,905
F74Z Chest Pain	16,014	10,792	8,291	2,405	3,866	521	392	449	42,730
G67B Oesophagitis, Gastroent & Misc Digestive System Disorders Age>9 W/O Cat/Sev	14,960	9,185	8,066	3,678	4,400	689	241	290	41,509
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	9,753	7,677	10,035	3,426	4,992	822	502	237	37,444
O65B Other Antenatal Admission W Moderate or No Complicating Diagnosis	10,905	9,733	7,405	2,443	4,337	676	343	1,057	36,899
O40Z Abortion W D&C, Aspiration Curettage or Hysterotomy	10,015	10,401	3,790	2,717	7,027	930	357	1,239	36,476
E69C Bronchitis and Asthma Age<50 W/O CC	12,145	7,009	6,246	3,237	3,491	360	325	320	33,133
C08Z Major Lens Procedures	10,682	9,491	4,536	3,947	3,569	88	375	264	32,952
Z40Z Follow Up After Completed Treatment W Endoscopy	9,230	8,106	5,596	3,715	3,296	486	553	169	31,151
G66B Abdominal Pain or Mesenteric Adenitis W/O CC	11,746	7,826	5,353	2,245	2,219	463	230	254	30,336
Z64B Other Factors Influencing Health Status Age<80	7,703	8,770	7,241	2,406	2,708	574	620	313	30,335
U60Z Mental Health Treatment, Sameday, W/O ECT	10,348	5,505	4,020	5,127	2,780	217	71	72	28,140
X60C Injuries Age<65	8,518	5,152	9,782	2,054	1,409	328	113	658	28,014
J64B Cellulitis (Age>59 W/O Catastrophic or Severe CC) or Age<60	9,164	5,237	6,379	2,995	1,840	405	251	1,097	27,368
Q61C Red Blood Cell Disorders W/O Catastrophic or Severe CC	7,912	8,573	3,331	2,263	2,906	606	925	127	26,643
F72B Unstable Angina W/O Catastrophic or Severe CC	9,253	6,341	5,207	1,287	1,863	524	261	279	25,015
X62B Poisoning/Toxic Effects of Drugs & Other Substances Age<60 W/O CC	7,656	5,894	5,532	2,540	1,923	411	263	181	24,400
F62B Heart Failure and Shock W/O Catastrophic CC	9,231	5,972	3,896	2,052	2,232	436	241	220	24,280
N09Z Conisation, Vagina, Cervix and Vulva Procedures	6,350	7,285	5,442	1,527	2,657	431	266	303	24,261
D40Z Dental Extraction and Restorations	5,024	6,810	5,410	2,361	2,645	901	452	356	23,959
O65A Other Antenatal Admission W Severe Complicating Diagnosis	8,183	6,356	3,898	1,707	2,764	349	230	451	23,938
I74C Injury to Forearm, Wrist, Hand or Foot Age<75 W/O CC	8,448	4,609	6,210	1,742	1,229	302	329	344	23,213
E62C Respiratory Infection/Inflammations W/O CC	8,854	5,064	4,037	2,316	1,449	400	346	710	23,176
O60B Vaginal Delivery W Severe Complicating Diagnosis	8,736	5,584	3,900	1,931	1,510	411	403	371	22,846
I18Z Knee Procedures	5,574	6,675	3,729	2,548	3,019	369	427	340	22,681
O01D Caesarean Delivery W/O Complicating Diagnosis	7,483	5,632	4,616	1,919	1,893	414	356	297	22,610
Other	740,433	553,866	396,099	201,874	215,986	47,324	31,085	24,566	2,211,233
<b>Total</b>	<b>1,203,497</b>	<b>972,704</b>	<b>677,433</b>	<b>354,982</b>	<b>350,599</b>	<b>74,298</b>	<b>59,902</b>	<b>56,865</b>	<b>3,750,280</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Main abbreviations: W—with, W/O—without, CC—complications and comorbidities.

**Table 10.10: Separations for the 30 AR-DRGs version 4.1 with the highest number of separations,<sup>(a)</sup> private hospitals, States and Territories, 1999–00**

AR-DRG	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
G44C Other Colonoscopy, Same day	46,793	35,212	32,096	11,583	7,966	2,024	227	n.a.	135,901
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	28,721	30,551	21,656	6,835	5,647	1,594	94	n.a.	95,098
R63Z Chemotherapy	18,865	27,297	24,920	8,122	9,143	282	1,883	n.a.	90,512
C08Z Major Lens Procedures	28,402	14,449	16,736	5,096	4,762	n.p.	n.p.	n.a.	72,113
L61Z Admit for Renal Dialysis	14,205	17,757	16,683	6,219	7,590	0	0	n.a.	62,454
I18Z Knee Procedures	18,276	14,035	8,253	7,244	7,090	1,116	1,093	n.a.	57,107
D40Z Dental Extraction and Restorations	16,085	15,004	10,579	8,179	4,497	n.p.	n.p.	n.a.	55,971
Z40Z Follow Up After Completed Treatment W Endoscopy	17,764	9,810	9,004	4,207	2,157	768	135	n.a.	43,845
U60Z Mental Health Treatment, Sameday, W/O ECT	7,618	18,328	7,044	6,619	63	n.p.	n.p.	n.a.	41,319
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	11,054	7,286	8,350	3,038	3,025	1,108	575	n.a.	34,436
O60D Vaginal Delivery W/O Complicating Diagnosis	10,231	8,262	6,411	4,391	2,103	n.p.	n.p.	n.a.	33,241
N07Z Other Uterine and Adnexa Procedures for Non-Malignancy	10,567	8,108	6,474	2,145	1,359	564	499	n.a.	29,716
O40Z Abortion W D&C, Aspiration Curettage or Hysterotomy	14,095	3,426	1,950	4,185	734	318	150	n.a.	24,858
F42B Circulatory Disorders W/O AMI W Invasive Cardiac Inves Proc W/O Complex DX/Pr	8,371	5,120	4,414	2,085	1,726	n.p.	n.p.	n.a.	22,356
G09Z Inguinal and Femoral Hernia Procedures Age>0	6,608	4,524	3,801	2,076	1,513	440	333	n.a.	19,295
G42B Other Gastroscopy for Major Digestive Disease, Same day	6,087	5,080	3,954	1,390	1,025	n.p.	n.p.	n.a.	17,738
J10Z Skin, Subcutaneous Tissue and Breast Plastic O.R. Procedures	5,329	3,789	4,702	1,645	1,527	322	384	n.a.	17,698
D11Z Tonsillectomy or Adenoidectomy	6,106	3,396	3,928	2,184	1,359	318	292	n.a.	17,583
L41Z Cystourethroscopy W/O CC	6,349	3,754	3,181	1,974	1,041	283	305	n.a.	16,887
I16Z Other Shoulder Procedures	5,108	3,833	2,426	2,687	2,016	257	297	n.a.	16,624
N10Z Diagnostic Curettage or Diagnostic Hysteroscopy	5,433	4,494	2,866	1,478	1,338	329	346	n.a.	16,284
G11B Anal and Stomal Procedures W/O Catastrophic or Severe CC	6,199	3,537	2,982	1,565	1,117	270	148	n.a.	15,818
I26Z Other Wrist and Hand Procedures	4,304	4,107	3,157	1,773	1,628	343	202	n.a.	15,514
J08B Other Skin Graft and/or Debridement Procedures W/O Catastrophic or Severe CC	5,180	2,540	3,453	689	2,395	195	188	n.a.	14,640
H04B Cholecystectomy W/O Closed CDE W/O Catastrophic or Severe CC	4,850	3,142	3,035	1,789	1,191	379	242	n.a.	14,628
E63Z Sleep Apnoea	5,906	3,485	3,029	469	976	n.p.	n.p.	n.a.	14,283
I68C Non-surgical Neck & Back Conditions W Pain Management Proc/Myelogram	2,990	2,845	1,415	4,457	1,513	n.p.	n.p.	n.a.	14,187
N04Z Hysterectomy for Non-Malignancy	4,104	2,795	2,844	1,662	1,316	434	351	n.a.	13,506
O01D Caesarean Delivery W/O Complicating Diagnosis	3,636	3,056	3,133	1,711	928	323	221	n.a.	13,008
B05Z Carpal Tunnel Release	3,433	3,043	2,569	1,366	1,041	247	183	n.a.	11,882
Other	244,706	240,346	208,988	102,294	77,862	24,660	12,206	n.a.	911,062
<b>Total</b>	<b>577,375</b>	<b>512,411</b>	<b>434,033</b>	<b>211,157</b>	<b>157,648</b>	<b>44,220</b>	<b>22,720</b>	<b>n.a.</b>	<b>1,959,564</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Main abbreviations: W—with, W/O—without, CC—complications and comorbidities.

n.a. not available.

n.p. not published.

**Table 10.11: Average length of stay (days) for the 30 AR-DRGs version 4.1 with the highest number of separations, public hospitals,<sup>(a)</sup> States and Territories, 1999–00**

AR-DRG	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
L61Z Admit for Renal Dialysis	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
R63Z Chemotherapy	1.0	1.0	1.0	1.0	1.0	1.1	1.0	1.0	1.0
O60D Vaginal Delivery W/O Complicating Diagnosis	3.0	3.1	2.7	3.2	3.0	3.2	2.8	3.7	3.0
G44C Other Colonoscopy, Same day	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
F74Z Chest Pain	1.9	1.6	1.9	1.9	1.8	2.3	1.8	2.2	1.8
G67B Oesophagitis, Gastroent & Misc Digestive System Disorders Age>9 W/O Cat/Sev CC	2.2	2.0	2.0	2.2	1.9	2.7	3.0	2.5	2.1
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	1.4	1.3	1.2	1.3	1.2	1.2	1.2	1.9	1.3
O65B Other Antenatal Admission W Moderate or No Complicating Diagnosis	1.8	1.5	1.6	2.0	1.5	1.7	2.2	1.6	1.7
O40Z Abortion W D&C, Aspiration Curettage or Hysterotomy	1.1	1.0	1.1	1.1	1.0	1.1	1.1	1.1	1.1
E69C Bronchitis and Asthma Age<50 W/O CC	1.9	1.8	1.9	2.1	2.0	2.1	2.0	2.2	1.9
C08Z Major Lens Procedures	1.0	1.1	1.1	1.1	1.0	1.0	1.1	1.1	1.1
Z40Z Follow Up After Completed Treatment W Endoscopy	1.0	1.0	1.0	1.0	1.0	1.0	1.1	1.0	1.0
G66B Abdominal Pain or Mesenteric Adenitis W/O CC	1.7	1.5	1.7	1.8	1.7	1.7	1.8	2.0	1.6
Z64B Other Factors Influencing Health Status Age<80	4.4	2.5	2.0	2.2	3.8	4.7	1.6	4.8	3.0
U60Z Mental Health Treatment, Same day, W/O ECT	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
X60C Injuries Age<65	1.5	1.3	1.3	1.6	1.6	1.7	1.8	2.3	1.4
J64B Cellulitis (Age>59 W/O Catastrophic or Severe CC) or Age<60	4.1	4.5	3.2	3.6	3.4	4.3	4.8	4.1	3.9
Q61C Red Blood Cell Disorders W/O Catastrophic or Severe CC	1.7	1.3	1.5	1.5	1.3	1.6	1.3	2.3	1.5
F72B Unstable Angina W/O Catastrophic or Severe CC	3.3	2.7	3.2	2.6	3.2	3.4	3.3	3.4	3.1
X62B Poisoning/Toxic Effects of Drugs & Other Substances Age<60 W/O CC	1.4	1.3	1.4	1.5	1.4	1.6	1.8	1.6	1.4
F62B Heart Failure and Shock W/O Catastrophic CC	6.5	5.3	5.5	6.2	5.8	7.7	6.3	6.1	5.9
N09Z Conisation, Vagina, Cervix and Vulva Procedures	1.3	1.1	1.1	1.2	1.2	1.5	1.1	1.3	1.2
D40Z Dental Extraction and Restorations	1.1	1.0	1.1	1.0	1.0	1.0	1.0	1.1	1.1
O65A Other Antenatal Admission W Severe Complicating Diagnosis	2.3	2.0	2.2	2.6	2.0	2.3	3.2	2.9	2.2
I74C Injury to Forearm, Wrist, Hand or Foot Age<75 W/O CC	1.2	1.1	1.1	1.2	1.2	1.2	1.2	2.0	1.2
E62C Respiratory Infection/Inflammations W/O CC	4.0	3.6	3.4	3.7	3.6	4.4	3.9	4.2	3.8
O60B Vaginal Delivery W Severe Complicating Diagnosis	4.1	3.9	3.7	4.2	4.2	4.0	3.7	5.3	4.0
I18Z Knee Procedures	1.6	1.4	1.4	1.5	1.3	1.6	1.4	1.7	1.4
O01D Caesarean Delivery W/O Complicating Diagnosis	5.1	5.0	4.3	5.0	5.1	4.5	4.9	6.1	4.9
Other	5.2	4.5	4.3	4.9	4.4	5.1	4.9	5.2	4.8
<b>Total</b>	<b>3.9</b>	<b>3.2</b>	<b>3.2</b>	<b>3.5</b>	<b>3.3</b>	<b>3.9</b>	<b>3.3</b>	<b>3.2</b>	<b>3.5</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Main abbreviations: W—with, W/O—without, CC—complications and comorbidities.

**Table 10.12: Average length of stay (days) for the 30 AR-DRGs version 4.1 with the highest number of separations, private hospitals,<sup>(a)</sup> Territories, 1999–00**

AR-DRG	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
G44C Other Colonoscopy, Same day	1.0	1.0	1.0	1.0	1.0	1.0	1.0	n.a.	1.0
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	1.0	1.0	1.0	1.0	1.0	1.0	1.0	n.a.	1.0
R63Z Chemotherapy	1.0	1.0	1.0	1.0	1.0	1.2	1.0	n.a.	1.0
C08Z Major Lens Procedures	1.0	1.0	1.0	1.1	1.0	n.p.	n.p.	n.a.	1.0
L61Z Admit for Renal Dialysis	1.0	1.0	1.0	1.0	1.0	..	..	n.a.	1.0
I18Z Knee Procedures	1.2	1.3	1.3	1.4	1.3	1.3	1.2	n.a.	1.3
D40Z Dental Extraction and Restorations	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
Z40Z Follow Up After Completed Treatment W Endoscopy	1.0	1.0	1.0	1.0	1.0	1.0	1.1	n.a.	1.0
U60Z Mental Health Treatment, Sameday, W/O ECT	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	1.1	1.2	1.2	1.3	1.1	1.2	1.2	n.a.	1.2
O60D Vaginal Delivery W/O Complicating Diagnosis	4.8	4.9	4.7	4.7	4.9	n.p.	n.p.	n.a.	4.8
N07Z Other Uterine and Adnexa Procedures for Non-Malignancy	1.1	1.2	1.1	1.4	1.3	1.2	1.3	n.a.	1.2
O40Z Abortion W D&C, Aspiration Curettage or Hysterotomy	1.0	1.0	1.0	1.0	1.1	1.1	1.0	n.a.	1.0
F42B Circulatory Disorders W/O AMI W Invasive Cardiac Inves Proc W/O Complex DX/Pr	1.4	1.8	1.7	1.3	1.6	n.p.	n.p.	n.a.	1.5
G09Z Inguinal and Femoral Hernia Procedures Age>0	2.0	1.9	1.6	1.9	2.2	1.9	1.9	n.a.	1.9
G42B Other Gastroscopy for Major Digestive Disease, Same day	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.a.	1.0
J10Z Skin, Subcutaneous Tissue and Breast Plastic O.R. Procedures	1.3	1.5	1.3	1.6	1.4	1.5	1.5	n.a.	1.4
D11Z Tonsillectomy or Adenoidectomy	1.1	1.2	1.1	1.1	1.2	1.2	1.2	n.a.	1.1
L41Z Cystourethroscopy W/O CC	1.1	1.2	1.2	1.3	1.3	1.5	1.2	n.a.	1.2
I16Z Other Shoulder Procedures	2.1	2.1	2.2	1.8	2.1	2.8	2.0	n.a.	2.1
N10Z Diagnostic Curettage or Diagnostic Hysteroscopy	1.0	1.0	1.0	1.0	1.0	1.0	1.0	n.a.	1.0
G11B Anal and Stomal Procedures W/O Catastrophic or Severe CC	1.5	1.7	1.8	2.1	1.9	2.2	2.2	n.a.	1.7
I26Z Other Wrist and Hand Procedures	1.2	1.2	1.2	1.2	1.1	1.2	1.2	n.a.	1.2
J08B Other Skin Graft and/or Debridement Procedures W/O Catastrophic or Severe CC	1.4	1.8	1.4	2.4	1.3	2.0	1.5	n.a.	1.5
H04B Cholecystectomy W/O Closed CDE W/O Catastrophic or Severe CC	2.5	2.8	2.5	2.5	2.8	2.5	2.7	n.a.	2.6
E63Z Sleep Apnoea	1.0	1.0	1.0	1.2	1.0	n.p.	n.p.	n.a.	1.0
I68C Non-surgical Neck & Back Conditions W Pain Management Proc/Myelogram	2.0	2.2	2.1	1.6	1.7	n.p.	n.p.	n.a.	1.9
N04Z Hysterectomy for Non-Malignancy	5.1	5.8	4.8	5.6	5.5	5.2	6.1	n.a.	5.3
O01D Caesarean Delivery W/O Complicating Diagnosis	6.5	6.6	6.1	7.0	6.6	5.8	7.1	n.a.	6.5
B05Z Carpal Tunnel Release	1.1	1.1	1.1	1.1	1.1	1.2	1.0	n.a.	1.1
Other	4.4	4.6	4.9	4.4	4.8	4.8	5.2	n.a.	4.6
<b>Total</b>	<b>2.7</b>	<b>2.9</b>	<b>3.0</b>	<b>2.9</b>	<b>3.1</b>	<b>3.3</b>	<b>3.6</b>	<b>n.a.</b>	<b>2.9</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Main abbreviations: W—with, W/O—without, CC—complications and comorbidities.

.. not applicable.

n.a. not available.

n.p. not published.



**Table 10.13: Separations for males for the 30 AR-DRGs version 4.1 with the highest number of separations, by age group, all hospitals,<sup>(a)</sup>  
Australia, 1999-00**

AR-DRG	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total <sup>(b)</sup>
L61Z Admit for Renal Dialysis	0	112	600	7,046	24,153	38,583	50,345	58,234	83,903	44,311	1,324	308,611
R63Z Chemotherapy	53	893	1,549	1,722	2,476	5,196	13,509	26,156	31,062	14,080	874	97,570
G44C Other Colonoscopy, Same day	14	75	249	1,831	5,761	12,048	19,584	20,846	19,662	9,762	903	90,735
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	169	537	980	3,273	7,787	11,599	13,890	12,872	12,047	6,641	920	70,715
I18Z Knee Procedures	2	15	603	7,547	10,014	10,232	9,410	6,395	3,454	1,260	104	49,036
C08Z Major Lens Procedures	1	5	14	68	130	496	1,836	4,807	13,330	18,284	3,844	42,815
Z40Z Follow Up After Completed Treatment W Endoscopy	9	52	53	245	1,090	3,837	7,227	8,747	10,341	6,424	946	38,971
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	183	764	1,729	1,750	2,605	4,116	5,571	5,809	6,583	5,743	1,317	36,170
D40Z Dental Extraction and Restorations	6	4,326	6,007	11,963	5,552	2,546	1,426	829	523	346	63	33,587
G09Z Inguinal and Femoral Hernia Procedures Age>0	0	1,320	1,169	1,560	2,799	3,875	5,884	6,071	5,984	3,803	686	33,151
U60Z Mental Health Treatment, Sameday, W/O ECT	1,583	613	2,032	4,216	4,068	4,151	6,995	2,171	1,027	2,304	353	29,513
F74Z Chest Pain	2	5	98	560	1,791	4,498	6,191	5,494	4,593	2,964	673	26,869
F42B Circulatory Disorders W/O AMI W Invasive Cardiac Inves Proc W/O Complex DX/Pr	53	103	150	197	415	1,648	4,792	7,308	7,617	3,432	163	25,878
I26Z Other Wrist and Hand Procedures	58	382	863	4946	4494	3140	2894	2502	2292	1110	102	22,783
L41Z Cystourethroscopy W/O CC	140	170	274	550	1,270	2,378	3,692	4,007	4,547	3,050	617	20,695
G67B Oesophagitis, Gastroent & Misc Digestive System Disorders Age>9 W/O Cat/Sev CC	0	0	1,258	2,555	3,167	2,777	2,488	2,397	2,667	2,447	830	20,586
X60C Injuries Age<65	57	1,234	2,616	5,019	4,601	3,341	2,193	1,289	0	0	0	20,350
D11Z Tonsillectomy or Adenoidectomy	61	6,470	8,729	2,225	896	450	171	86	47	20	3	19,158
G11B Anal and Stomal Procedures W/O Catastrophic or Severe CC	175	85	131	637	2,352	4,407	4,625	3,251	2,012	843	129	18,647
E69C Bronchitis and Asthma Age<50 W/O CC	832	7,924	5,433	1,813	1,274	915	429	0	0	0	0	18,620
J64B Cellulitis (Age>59 W/O Catastrophic or Severe CC) or Age<60	257	1,127	1,502	2,579	3,070	2,885	2,551	1,875	1,396	953	302	18,497
Z64B Other Factors Influencing Health Status Age<80	668	932	844	1,027	1,624	1,864	2,556	3,437	3,180	1,346	0	17,478
F72B Unstable Angina W/O Catastrophic or Severe CC	0	0	0	2	102	995	2,762	4,072	4,698	3,480	816	16,927
Q61C Red Blood Cell Disorders W/O Catastrophic or Severe CC	81	333	782	1,184	1,321	1,561	1,947	2,247	3,318	3,024	1,067	16,865
I74C Injury to Forearm, Wrist, Hand or Foot Age<75 W/O CC	15	1,028	8,495	2,866	1,596	1,062	706	392	260	0	0	16,420
G42B Other Gastroscopy for Major Digestive Disease, Same day	10	4	60	417	1,056	1,943	3,029	3,321	3,658	2,291	339	16,128
R61C Lymphoma and Non-Acute Leukaemia, Same day	8	169	123	168	503	927	2,209	3,212	4,654	3,399	690	16,062
F71B Non-Major Arrhythmia and Conduction Disorders W/O Catastrophic or Severe CC	33	24	54	214	583	1,047	2,272	3,458	4,594	3,167	602	16,048
F62B Heart Failure and Shock W/O Catastrophic CC	27	7	8	42	77	240	612	1,639	4,219	6,057	2,620	15,548
L64Z Urinary Stones and Obstruction	13	30	37	450	1,804	3,301	4,020	2,978	1,850	707	128	15,318
Other	76,607	77,081	79,983	104,463	123,550	142,970	164,414	184,885	236,579	203,489	58,834	1,452,858
<b>Total</b>	<b>81,117</b>	<b>105,820</b>	<b>126,425</b>	<b>173,135</b>	<b>221,981</b>	<b>279,028</b>	<b>350,230</b>	<b>390,787</b>	<b>480,097</b>	<b>354,737</b>	<b>79,249</b>	<b>2,642,609</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

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

Note: Main abbreviations: W—with, W/O—without, CC—complications and comorbidities.

**Table 10.14: Separations for females for the 30 AR-DRGs version 4.1 with the highest number of separations, by age group, all hospitals,<sup>(a)</sup> Australia, 1999–00**

AR-DRG	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75–84	85+	Total <sup>(b)</sup>
L61Z Admit for Renal Dialysis	0	1	393	3,901	15,562	22,287	33,391	49,430	66,767	27,640	1,172	220,544
O60D Vaginal Delivery W/O Complicating Diagnosis	0	0	61	32,631	91,051	20,555	72	0	0	0	0	144,370
R63Z Chemotherapy	94	796	1,320	1,324	3,512	12,194	26,167	27,788	25,098	10,448	857	109,598
G44C Other Colonoscopy, Same day	13	32	228	3,330	7,766	14,600	23,162	23,619	21,413	10,885	1,258	106,306
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	128	388	911	4,075	7,394	12,584	17,561	16,449	14,344	8,753	1,701	84,288
C08Z Major Lens Procedures	0	3	10	43	94	372	1,561	5,334	18,875	28,480	7,478	62,250
O40Z Abortion W D&C, Aspiration Curettage or Hysterotomy	0	0	125	19,136	27,914	13,817	342	0	0	0	0	61,334
N07Z Other Uterine and Adnexa Procedures for Non-Malignancy	4	3	151	4,101	17,379	17,811	6,236	2,126	927	330	45	49,113
D40Z Dental Extraction and Restorations	2	3,671	6,623	20,773	8,214	3,273	1,882	919	507	360	119	46,343
O65B Other Antenatal Admission W Moderate or No Complicating Diagnosis	0	0	47	13,784	23,806	5,371	41	0	0	0	0	43,049
U60Z Mental Health Treatment, Same day, W/O ECT	1,291	265	1,119	7,622	7,274	8,271	8,052	3,601	1,624	748	76	39,943
N10Z Diagnostic Curettage or Diagnostic Hysteroscopy	0	0	16	1,051	4,802	9,468	13,040	5,554	2,668	1,009	166	37,774
Z40Z Follow Up After Completed Treatment W Endoscopy	7	29	55	544	1,773	4,764	8,072	8,022	7,591	4,528	640	36,025
N09Z Conisation, Vagina, Cervix and Vulva Procedures	16	108	178	6,626	10,841	7,737	5,673	2,636	1,352	694	128	35,989
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	166	835	2,136	2,537	3,560	5,119	5,983	4,911	4,750	4,149	1,563	35,709
O01D Caesarean Delivery W/O Complicating Diagnosis	0	0	9	4,682	22,954	7,933	40	0	0	0	0	35,618
N08Z Endoscopic Procedures for Female Reproductive System	1	0	63	4,011	13,844	12,099	2,210	394	138	49	6	32,815
I18Z Knee Procedures	2	9	577	3,564	4,060	4,949	6,117	5,270	4,150	1,856	198	30,752
N04Z Hysterectomy for Non-Malignancy	0	0	5	67	2,366	10,633	11,015	2,943	2,199	1,035	126	30,389
G67B Oesophagitis, Gastroent & Misc Digestive System Disorders Age>9 W/O Cat/Sev CC	0	0	1,369	3,762	4,366	3,443	3,710	3,442	3,873	4,115	1,891	29,971
O60B Vaginal Delivery W Severe Complicating Diagnosis	0	0	21	6,658	16,720	4,548	23	0	0	0	0	27,970
O65A Other Antenatal Admission W Severe Complicating Diagnosis	0	0	5	6,616	15,796	4,879	51	1	0	0	0	27,348
H04B Cholecystectomy W/O Closed CDE W/O Catastrophic or Severe CC	2	4	78	1,798	4,576	5,153	5,670	4,588	3,113	1,417	188	26,587
F74Z Chest Pain	2	5	91	475	1,291	2,956	4,971	4,729	4,511	3,765	1,348	24,144
Z64B Other Factors Influencing Health Status Age<80	501	676	738	1,987	4,461	3,256	3,420	3,325	3,171	1,365	0	22,900
G66B Abdominal Pain or Mesenteric Adenitis W/O CC	106	277	2,348	4,713	4,407	3,503	2,595	1,647	1,451	1,124	435	22,606
O64Z False Labour	0	0	25	7,104	11,886	2,617	13	0	0	0	0	21,645
O61Z Postpartum and Post Abortion W/O O.R. Procedure	1	0	18	4,018	13,404	4,069	22	0	0	0	0	21,532
D11Z Tonsillectomy or Adenoidectomy	9	4,281	8,980	4,762	1,393	430	136	88	56	10	3	20,148
Q61C Red Blood Cell Disorders W/O Catastrophic or Severe CC Other	82	206	648	1,298	1,786	2,499	3,194	2,155	3,093	3,526	1,557	20,044
<b>Total</b>	<b>58,057</b>	<b>72,272</b>	<b>94,453</b>	<b>284,708</b>	<b>521,580</b>	<b>404,111</b>	<b>380,581</b>	<b>357,774</b>	<b>410,229</b>	<b>351,238</b>	<b>132,163</b>	<b>3,067,172</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

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

Note: Main abbreviations: W—with, W/O—without, CC—complications and comorbidities.

**Table 10.15: Separation, public patient separation, patient day and cost statistics for the 30 AR-DRGs version 4.1 with the highest number of separations, private free-standing day hospitals,<sup>(a)</sup> Australia, 1999–00**

AR-DRG	Separations	Public patient separations	Separations per 10,000 population	Patient days	Cost by volume (\$'000)
G44C Other Colonoscopy, Same day	47,222	640	25.0	47,222	31,308
G45B Other Gastroscopy for Non-Major Digestive Disease, Same day	39,083	587	20.7	39,083	22,512
C08Z Major Lens Procedures	26,268	122	13.9	26,268	38,194
R63Z Chemotherapy	20,046	435	10.6	20,046	12,629
O40Z Abortion W D&C, Aspiration Curettage or Hysterotomy	14,675	1	7.8	14,675	13,545
Z40Z Follow Up After Completed Treatment W Endoscopy	10,410	88	5.5	10,410	6,756
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures	10,389	14	5.5	10,389	11,179
D40Z Dental Extraction and Restorations	9,401	0	5.0	9,401	9,871
N07Z Other Uterine and Adnexa Procedures for Non-Malignancy	6,724	1	3.6	6,724	8,472
G42B Other Gastroscopy for Major Digestive Disease, Same day	6,698	56	3.6	6,698	4,052
C09Z Other Lens Procedures	5,226	4	2.8	5,226	7,917
J08B Other Skin Graft and/or Debridement Procedures W/O Catastrophic or Severe CC	5,099	3	2.7	5,099	7,149
J10Z Skin, Subcutaneous Tissue and Breast Plastic O.R. Procedures	4,486	7	2.4	4,486	7,689
L61Z Admit for Renal Dialysis	4,183	0	2.2	4,183	1,506
R61C Lymphoma and Non-Acute Leukaemia, Same day	3,072	5	1.6	3,072	1,687
C11Z Eyelid Procedures	3,059	4	1.6	3,059	4,408
N11B Other Female Reproductive System O.R. Procs Age<65 W/O Malignancy W/O CC	2,891	0	1.5	2,891	3,197
F42B Circulatory Disorders W/O AMI W Invasive Cardiac Inves Proc W/O Complex DX/Pr	2,641	1,349	1.4	2,641	4,648
C14Z Other Eye Procedures	2,559	0	1.4	2,559	2,403
Q61C Red Blood Cell Disorders W/O Catastrophic or Severe CC	2,066	43	1.1	2,066	1,580
G11B Anal and Stomal Procedures W/O Catastrophic or Severe CC	1,998	16	1.1	1,998	2,368
E63Z Sleep Apnoea	1,959	0	1.0	1,959	1,309
I18Z Knee Procedures	1,929	0	1.0	1,929	2,683
961Z Unacceptable Principal Diagnosis	1,904	135	1.0	1,904	2,075
C12Z Other Corneal, Scleral and Conjunctival Procedures	1,808	1	1.0	1,808	2,229
J67B Minor Skin Disorders W/O CC	1,798	2	1.0	1,798	1,573
N10Z Diagnostic Curettage or Diagnostic Hysteroscopy	1,567	3	0.8	1,567	1,178
C04Z Major Corneal, Scleral and Conjunctival Procedures	1,514	2	0.8	1,514	3,558
J06B Major Procedures for Non-Malignant Breast Conditions	1,481	1	0.8	1,481	3,449
N09Z Conisation, Vagina, Cervix and Vulva Procedures	1,433	0	0.8	1,433	1,198
--- Other	35,647	897	18.9	35,647	56,118
<b>Total</b>	<b>279,236</b>	<b>4,416</b>	<b>148.1</b>	<b>279,236</b>	<b>278,442</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Main abbreviations: W—with, W/O—without, CC—complications and comorbidities.

**Table 10.16: Separation, same day separation, public patient separation, patient day, average length of stay and cost statistics for the 30 AR-DRGs version 4.1 with the highest number of separations, public psychiatric hospitals,<sup>(a)</sup> Australia, 1999–00**

AR-DRG	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	days per 10,000 population	ALOS (days)	Cost by volume (\$'000)
U67Z Personality Disorders and Acute Reactions	2,492	0	2,423	1.3	24,250	12.7	9.7	6,474
U63B Major Affective Disorders Age<70 W/O Catastrophic or Severe CC	2,348	0	2,288	1.2	46,976	24.7	20.0	12,271
U61B Schizophrenia Disorders W/O Mental Health Legal Status	2,335	0	2,251	1.2	175,703	92.2	75.2	12,319
U60Z Mental Health Treatment, Same day, W/O ECT	1,967	1,967	1,964	1.0	1,967	1.0	1.0	993
U61A Schizophrenia Disorders W Mental Health Legal Status	1,756	0	1,655	0.9	96,492	50.6	54.9	14,315
V63Z Opioid Use Disorder and Dependence	593	53	591	0.3	1,984	1.0	3.3	1,252
B63Z Dementia and Other Chronic Disturbances of Cerebral Function	524	48	436	0.3	106,575	55.9	203.4	3,200
V61B Drug Intoxication and Withdrawal WO CC	516	25	503	0.3	4,174	2.2	8.1	1,418
U64Z Other Affective and Somatoform Disorders	449	0	426	0.2	6,179	3.2	13.8	1,263
V60Z Alcohol Intoxication and Withdrawal	404	50	388	0.2	9,239	4.8	22.9	538
U63A Major Affective Disorders W Cat or Sev CC or (Age>69 W/O Cat or Sev	357	0	347	0.2	22,537	11.8	63.1	3,288
V64Z Other Drug Use Disorder and Dependence	355	17	328	0.2	2,837	1.5	8.0	745
U62A Paranoia, acute psych disorder W Cat/Sev CC or Mental Hlth Legal Status	335	0	313	0.2	7,071	3.7	21.1	2,114
U62B Paranoia, acute psych disorder W/O Cat/Sev CC or Mental Hlth Legal	309	0	302	0.2	7,674	4.0	24.8	1,294
V62A Alcohol Use Disorder and Dependence	306	0	302	0.2	2,670	1.4	8.7	748
960Z Ungroupable	177	0	176	0.1	10,793	5.7	61.0	770
V61A Drug Intoxication and Withdrawal W CC	158	3	158	0.1	1,463	0.8	9.3	561
Z64B Other Factors Influencing Health Status Age<80	158	19	143	0.1	2,452	1.3	15.5	0
U65Z Anxiety Disorders	101	0	100	0.1	1,395	0.7	13.8	214
B64Z Delirium	97	5	87	0.1	2,731	1.4	28.2	418
B81B Other Disorders of the Nervous System W/O Catastrophic or Severe CC	37	2	32	<0.1	22,109	11.6	597.5	77
U40Z Mental Health Treatment, Same day, W ECT	37	37	37	<0.1	37	<0.1	1.0	23
U66Z Eating and Obsessive-Compulsive Disorders	33	0	33	<0.1	590	0.3	17.9	199
U68Z Childhood Mental Disorders	32	0	31	<0.1	1,024	0.5	32.0	174
T60B Septicaemia W/O Catastrophic or Severe CC	30	30	30	<0.1	30	<0.1	1.0	102
O61Z Postpartum and Post Abortion W/O O.R. Procedure	15	0	14	<0.1	260	0.1	17.3	21
961Z Unacceptable Principal Diagnosis	14	4	14	<0.1	51	<0.1	3.6	19
B60B Non Acute Paraplegia/Quadriplegia W or W/O O.R. Procedures W/O Cat	12	1	12	<0.1	1,070	0.6	89.2	62
V62B Alcohol Use Disorder and Dependence, Sameday	12	12	12	<0.1	12	<0.1	1.0	6
B67B Degenerative Nervous System Disorders W/O Catastrophic or Severe CC	10	0	9	<0.1	482	0.3	48.2	31
Other	59	2	57	<0.1	1,520	0.8	25.8	440
<b>Total</b>	<b>16,028</b>	<b>2,275</b>	<b>15,462</b>	<b>8.4</b>	<b>562,347</b>	<b>295.2</b>	<b>35.1</b>	<b>65,351</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

Note: Main abbreviations: W—with, W/O—without, CC—complications and comorbidities.

**Table 10.17: Separations for Group 1 Error DRGs for the 10 procedures with the highest number of separations,<sup>(a)</sup> by hospital sector, States and Territories, 1999–00**

Procedure	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
	Public hospitals								
95550-03 Allied health intervention, physiotherapy	528	550	212	185	166	25	45	33	1,744
95550-00 Allied health intervention, dietetics	326	288	102	76	63	4	44	28	931
95550-01 Allied health intervention, social work	303	306	95	113	60	8	26	14	925
34509-01 Arteriovenous anastomosis of upper limb	256	182	116	92	64	18	12	65	805
95550-02 Allied health intervention, occupational therapy	198	238	79	91	6	11	17	9	649
13706-02 Transfusion of packed cells	167	175	60	68	38	9	18	12	547
13100-00 Haemodialysis	182	91	57	47	33	7	38	23	478
56001-00 Computerised tomography of brain	102	126	44	63	46	8	8	3	400
41892-00 Bronchoscopy with biopsy	97	128	76	17	39	9	3	2	371
35309-00 Percutaneous insertion of one stent into single visceral artery or vein	154	75	18	31	0	1	8	1	288
Other procedures	2,280	1,900	872	837	917	119	139	96	7,160
<b>Total<sup>(b)</sup></b>	<b>2,532</b>	<b>2,095</b>	<b>984</b>	<b>904</b>	<b>984</b>	<b>140</b>	<b>151</b>	<b>149</b>	<b>7,939</b>
Private hospitals									
95550-03 Allied health intervention, physiotherapy	150	233	200	65	73	9	9	n.a.	739
95550-00 Allied health intervention, dietetics	49	102	79	25	10	1	4	n.a.	270
34509-01 Arteriovenous anastomosis of upper limb	72	76	63	19	14	6	1	n.a.	251
13706-02 Transfusion of packed cells	43	66	75	21	20	3	8	n.a.	236
95550-01 Allied health intervention, social work	71	62	27	35	17	0	0	n.a.	212
35640-00 Dilation & curettage of uterus	72	45	27	16	7	2	3	n.a.	172
30473-01 Panendoscopy with biopsy	55	33	51	13	9	0	0	n.a.	161
41892-00 Bronchoscopy with biopsy	29	47	55	15	9	6	0	n.a.	161
36812-00 Cystoscopy	54	27	32	23	12	0	1	n.a.	149
38218-00 Coronary angiography with left heart catheterisation	92	21	19	5	3	1	0	n.a.	141
Other procedures	1,730	1,212	1,232	561	548	136	66	n.a.	5,485
<b>Total<sup>(b)</sup></b>	<b>1,814</b>	<b>1,294</b>	<b>1,306</b>	<b>582</b>	<b>565</b>	<b>138</b>	<b>67</b>	<b>n.a.</b>	<b>5,766</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of rows of the table.

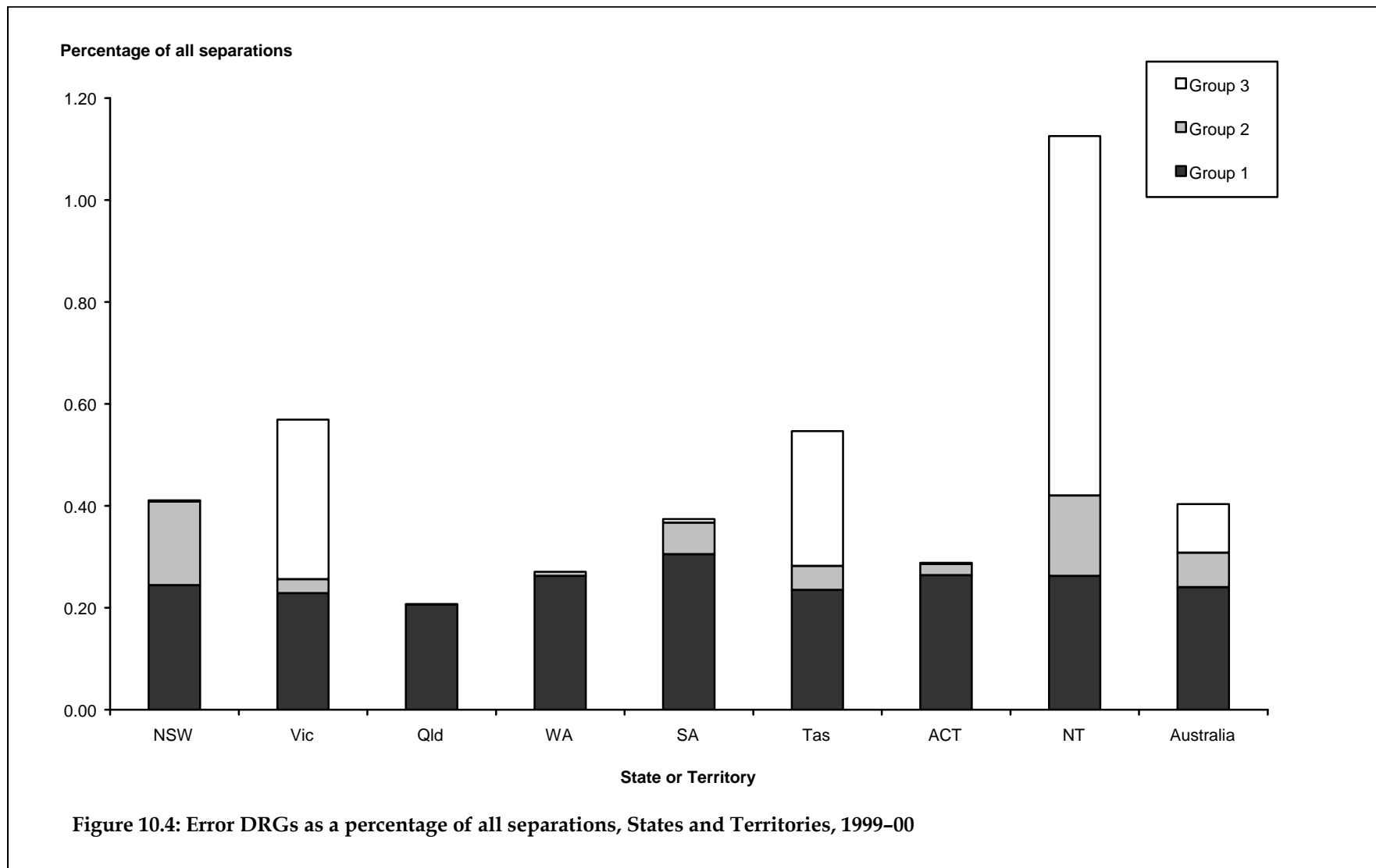
n.a. not available.

**Table 10.18: Separations for Group 2 Error DRGs for the 10 principal diagnoses with the highest number of separations,<sup>(a)</sup> by hospital sector, States and Territories, 1999–00**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Public hospitals</b>									
<b>Principal diagnosis</b>									
Z91.5 Personal history of self-harm	151	0	0	0	0	0	0	3	154
O80 Single spontaneous delivery	13	48	0	0	86	2	0	2	151
P07.3 Other preterm infants	96	7	0	17	12	6	4	0	142
Z94.1 Heart transplant status	137	0	0	0	0	0	0	0	137
Z87.12 Personal history of colonic polyps	84	0	0	0	0	0	0	2	86
Z34.8 Supervision of other normal pregnancy	37	0	0	0	2	0	0	47	86
Z34.9 Supervision of normal pregnancy, unspecified	77	0	0	0	0	0	0	2	79
Z12.1 Special screening examination for neoplasm of intestinal tract	57	1	0	0	11	1	0	0	70
P07.2 Extreme immaturity	37	0	0	8	0	3	0	0	48
Z85.0 Personal history of malignant neoplasm of digestive organs	47	0	0	0	0	0	0	0	47
Other	484	8	3	16	76	0	2	34	623
<b>Total</b>	<b>1,220</b>	<b>64</b>	<b>3</b>	<b>41</b>	<b>187</b>	<b>12</b>	<b>6</b>	<b>90</b>	<b>1,623</b>
<b>Private hospitals</b>									
Z12.1 Special screening examination for neoplasm of intestinal tract	622	273	1	0	89	2	0	n.a.	987
Z87.12 Personal history of colonic polyps	393	0	1	0	0	6	0	n.a.	400
O09.1 Duration of pregnancy 5–13 completed weeks	296	0	0	0	0	0	0	n.a.	296
Z85.0 Personal history of malignant neoplasm of digestive organs	117	0	8	0	0	4	0	n.a.	129
O80 Single spontaneous delivery	4	24	0	0	2	8	9	n.a.	47
Z87.18 Personal history of other digestive system disease	43	0	0	0	0	2	0	n.a.	45
Z13.8 Special screening examination for other specified diseases and disorders	8	0	0	0	34	0	0	n.a.	42
Z87.11 Personal history of peptic ulcer disease	32	0	0	0	0	0	0	n.a.	32
Z12.6 Special screening examination for neoplasm of bladder	2	28	0	0	0	1	0	n.a.	31
P07.3 Other preterm infants	13	1	0	4	0	9	0	n.a.	27
Other	176	21	0	1	3	12	3	n.a.	216
<b>Total</b>	<b>1,706</b>	<b>347</b>	<b>10</b>	<b>5</b>	<b>128</b>	<b>44</b>	<b>12</b>	<b>n.a.</b>	<b>2,252</b>

(a) Separations for which the type of episode of care was reported as acute, or newborn with qualified patient days, or was not reported.

n.a. not available.



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# Appendix 3: Technical notes

## Definitions

If not otherwise indicated, data elements were defined according to the 1999–00 definitions in the *National Health Data Dictionary* Version 8.0 (summarised in the Glossary).

Unless otherwise specified:

- public acute hospitals and public psychiatric hospitals are included in the public hospital (public sector) category, and all public hospitals other than public psychiatric hospitals are included in the public acute hospital category.
- private psychiatric hospitals, private free-standing day hospital facilities and other private hospitals are included in the private hospital (private sector) category.

Data presented by State or Territory refer to the State or Territory of the hospital, not to the State or Territory of the usual residence of the patient. The exceptions are Tables 5.7, 5.8, 5.9 and 5.10, in which the State or Territory of usual residence of the patient is reported against the State or Territory of hospitalisation. Data presented in Table 2.7 are presented by State or Territory of usual residence. The maps in Chapter 5 are also based on data on the State or Territory and Statistical Division of usual residence of the patient (see below).

## Data presentation

Except as noted, where totals are provided in the tables, they include data only for those States and Territories for which data were available, as indicated in the tables. The exceptions are Table 2.5 and some tables for private hospitals in Chapters 7, 8 and 10. Although available, some data in these tables were not published, for confidentiality reasons. The abbreviation 'n.p.' has been used in these tables to denote this.

Throughout the publication, percentages may not add up to 100.0 due to rounding. Percentages and population rates printed as 0.0 or 0 may denote less than 0.05 or 0.5, respectively.

## Population rates

Population rates presented in Chapters 2, 4, 5 and 6 are age-standardised, calculated using the direct standardisation method and 5-year age groups. The total Australian population for 30 June 1991 was used as the population for which expected rates were calculated. The Australian Bureau of Statistics' population estimates for 31 December 1999 (Appendix 6) were used for the observed rates. The exceptions were Tables 6.7 and 6.8, for which the population estimates for the Aboriginal and Torres Strait Islander population (and the remainder of the population) and for the population for selected countries of birth for 30 June 1999, respectively, were used for the observed rates (Appendix 6). Rates in Table 2.7 and 6.8 were standardised by sex as well as by age.

Crude population rates in Chapters 7, 8 and 10 and age group-specific rates in Chapter 6 were calculated using Australian Bureau of Statistics' population estimates for 31 December 1999 (Appendix 6). For Figure 6.7, 30 June 1999 estimates for the Aboriginal and Torres Strait Islander population and for the remainder of the population were used for age group-specific rates for the Aboriginal and Torres Strait Islander population and others.

## **Newborn episodes of care and the reporting of separations for patients aged less than 10 days**

The *Newborn* type of episode of care was introduced in 1998–99 to report a single episode of care for all patients aged 9 days or less at admission, regardless of their qualification status and whether they changed qualification status during their hospital stay. Thus these episodes can include qualified days only, a mixture of qualified days and unqualified days, or only unqualified days. Qualified days are considered to be the equivalent of acute care days and *Newborn* episodes with qualified days only are considered to be equivalent to *Acute care* episodes. *Newborn* episodes with no qualified days are considered to be equivalent to the previous category, *Unqualified neonate*. In this report, *Newborn* episodes with at least one qualified day have been included in all the tables reporting separations.

Three jurisdictions did not implement this *Newborn* definition in 1998–99 or 1999–00; therefore, for these States and Territories, there are no *Newborn* separations with a mixture of qualified and unqualified days reported (see Table 5.11). New South Wales, Queensland and public hospitals in South Australia and Victoria implemented the new definition in 1998–99, and the Australian Capital Territory implemented it in 1999–00. For the remaining jurisdictions, separations reported as *Acute care* separations for patients aged less than 10 days are included in the National Hospital Morbidity Database and this report as *Newborn* episodes with qualified days only. Separations reported to the Database as *Unqualified neonates* are included as *Newborn* episodes with no qualified days.

Prior to 1998–99, New South Wales, Queensland and South Australia (public hospitals) had counted separate episodes of care within a hospital stay as individual separations. With the implementation of the *Newborn* definition, they began to count each hospitalisation of a patient admitted under the age of 10 days as one separation. This change is likely to have resulted in a slight reduction in the number of separations for these States in 1998–99 and 1999–00 compared with 1997–98, and a slight increase in their average lengths of stay. Victoria had been reporting separations for these patients according to the *Newborn* definition (that is, using a single episode for these patients) prior to 1998–99 so this implementation is not likely to have markedly affected Victorian separation or average length of stay data.

In 1998–99 and 1999–00 Western Australia counted separations for patients aged 10 days or less on admission as qualified (*Acute care*) if at least one day was qualified. Tasmania and the Northern Territory continued to report a new episode of care for patients aged less than 10 days at admission with each change in qualification status. The reporting method used in Tasmania and the Northern Territory may mean that there were more separations for patients under the age of 10 days for these jurisdictions, relative to others, and that they had a lower average length of stay.

## Hospital in the home care

Most States and Territories have hospital in the home programs in which admitted patients are provided with hospital care in their (permanent or temporary) place of residence as a substitute for hospital accommodation. This care has been defined in the *National Health Data Dictionary* version 10 (NHDC 2001) as occurring within an episode of care for an admitted patient, and days of hospital in the home care for each separation will be reported to the National Hospital Morbidity Database in 2001–02 data.

In 1999–00, there were no national definitions relating to hospital in the home care, and there was variation in the way in which States and Territories reported it. In Victoria, Queensland, Tasmania, the Australian Capital Territory and the Northern Territory, hospital in the home care was provided in 1999–00 as defined above, and separations including this care were included in the National Hospital Morbidity Database. In New South Wales, periods of hospital in the home care were not considered part of admitted patient episodes in 1999–00, with patients being either discharged when they physically separated from hospital or recorded as being on leave. In South Australia, hospital in the home care was defined as separate episodes of care, and reported as having *Other care* as the care type (see Chapter 5). Western Australia did not operate hospital in the home programs for admitted patients in 1999–00. This variation may have had the effect of slightly increasing the relative numbers of separations and reducing the average lengths of stay reported by South Australia, and of reducing the average lengths of stay for New South Wales compared with other States and Territories.

## Private hospitals in the National Hospital Morbidity Database

The Internet tables for Appendix 5 include details of the private hospitals included in the National Hospital Morbidity Database. Data were not provided for 1999–00 for 15 free-standing day hospital facilities and one other private hospital in Victoria, all private free-standing day hospital facilities in the Australian Capital Territory, and the one private hospital in the Northern Territory. For South Australia, data were not available for three private free-standing day hospital facilities (one of which commenced operation in September 1999) and data were missing for March to June 2000, for May to June 2000 and for June 2000, respectively, for three others. For Tasmania, data were not available for one private free-standing day hospital facility and one other private hospital, and were missing for April to June 2000, December 1999 to June 2000, January and February 2000 and June 2000, respectively, for four other private hospitals.

As not all private hospital separations are included in the National Hospital Morbidity Database, the counts of private hospital separations presented in this report are likely to be underestimates of the actual counts. In 1998–99, the National Hospital Morbidity Database reported 110,941 (5.6%) fewer separations than the Australian Bureau of Statistics' Private Health Establishments Collection, which includes all private acute and psychiatric hospitals licensed by State and Territory health authorities and all private free-standing day hospital facilities approved by the Department of Health and Aged Care. However, the discrepancy may have also been affected by the use of differing definitions or different interpretations of definitions, or differences in the quality of the data provided for different purposes.

At the time of publication of this report, data for 1999–00 from the Private Health Establishments Collection were not available. When they become available, an estimate

will be made of the underenumeration of separations in the National Hospital Morbidity Database for 1999–00, by comparing it with the 1999–00 Private Health Establishments Collection data, and included with *Australian Hospital Statistics 1999–00* on the Internet.

## **ICD-10-AM coded data**

Diagnosis, procedure and external cause data for 1999–00 were reported to the National Hospital Morbidity Database by all States and Territories except South Australia using the first edition of the *International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification* (ICD-10-AM) (National Centre for Classification in Health 1998).

## **Quality of ICD-10-AM coded data**

The quality of coded diagnosis, procedure and external cause data can be assessed using coding audits in which, in general terms, selected records are independently recoded, and the resulting codes compared with the codes originally assigned for the separation. There are no national standards for this auditing, so it is not possible to use information on coding audits to make quantitative assessments of data quality on a national basis. The following information has, however, been provided by the States and Territories to provide some insight into the quality of the coded data in the National Hospital Morbidity Database.

Most States and Territories were unable to make specific comments on the quality of their 1999–00 ICD-10-AM coded data as there had been no formal audits of the data conducted, and instead provided some general comments on data quality. Several indicated that formal audits were planned for 2000–01 or 2001–02.

There was no formal statewide audit of ICD-10-AM coded data in New South Wales for 1999–00. However, there were no major quality issues in coded data detected in routine input processing and output editing of data. There are plans to introduce a formal measurement of coded data quality through a system of statewide audits for the year 2001–02. The methodology for these audits is currently being developed.

An audit of ICD-10-AM coded data in Victoria for 1999–00 indicated that the data were of high quality.

No audit was conducted in Queensland in the 1999–00 period, which was the first year in which this classification was used in Queensland. However, an audit of hospital morbidity data for separations for the 2000–01 financial year is scheduled to begin shortly, and will target several areas including coding quality.

The Health Department of Western Australia has an audit program which aims, over a period of two years, to assess different aspects of all public hospitals' records and procedures. The audit considers adherence to the admission policy, accuracy and completeness of source information and the subsequent coding of the information. When there is a change of DRG between the audited and the original data, the episode data (including the codes used) are analysed to explain the differences. The audit program has not completed sufficient checking to make a full assessment of data quality for 1999–00, which was the first year in which ICD-10-AM was used in Western Australia.

While no audits were conducted in 1999–00 (which was the first year in which ICD-10-AM was used in South Australia), an assessment of coding quality will be undertaken



during 2001–02 using the National Centre for Classification in Health’s Performance Indicators for Coding Quality (PICQ) software.

There was no formal statewide audit of ICD-10-AM coded data in Tasmania for 1999–00 which was the first year in which ICD-10-AM was used in that State. An audit of coding quality will be conducted in the 2001–02 financial year.

The Australian Capital Territory has undertaken a program of constant quality improvement in relation to admitted patient care data and during 1999–00 participated in the Performance Indicators for Quality Coding (PICQ) trial. Hospitals in the Territory also undertake regular internal coding audits and meet accreditation requirements.

A number of audits of ICD-10-AM coded data were undertaken in the Northern Territory for 1999–00. During 1999–00, Alice Springs, Katherine and Tennant Creek Hospitals carried out coding audits, which ranged in complexity. Alice Springs conducted ‘a number of in-house mini-audits’ which were based on the National Centre for Classification in Health’s Australian Coding Benchmark Audit (ACBA) tool, adjusted to the hospital’s circumstances. Katherine and Tennant Creek Hospitals pooled their efforts and coding staff to conduct one audit on allied health coding. In most instances the coding was identical or had acceptable differences. In the minority of cases, some incorrect coding was identified and became the focus of a review of coding cases of this kind. The need to improve documentation on the part of clinicians was highlighted, in particular as an ongoing educational requirement on the part of coders. It is noted with regret by Northern Territory Health Services that time constraints prevent more regular auditing.

## **Data mapping for South Australia**

In this report, ‘mapping’ refers to the process of finding an ‘equivalent’ code between two classifications, for example, to enable national data to be presented in a single classification.

South Australia mapped the data collected using the 1st Edition of ICD-10-AM forward to codes of the 2nd edition of ICD-10-AM (National Centre for Classification in Health 2000) before providing them to the Institute. Where mapped codes could be identified (because they were invalid 1st Edition codes), the Institute mapped the South Australian data backward to 1st Edition codes so that national data could be presented in a single classification in this report. The mapped data are not completely equivalent to unmapped data, so this means that the South Australian data should be interpreted with these mappings in mind. The maps are available from the Institute if required.

The South Australian forward mapping tables were developed by selecting the most clinically appropriate code in 2nd Edition ICD-10-AM based on the description of the code in 1st Edition ICD-10-AM. The majority of diagnosis code maps were one-to-one maps, meaning that a diagnosis code in 1st Edition ICD-10-AM was mapped to one diagnosis code only in 2nd Edition ICD-10-AM. Others were many-to-one maps, where more than one diagnosis code in 1st Edition ICD-10-AM was mapped to only one diagnosis code in 2nd Edition ICD-10-AM.

Where there was a one-to-one relationship between 1st Edition and 2nd Edition diagnosis codes (and the 2nd Edition code was invalid as a 1st Edition code), the Institute reversed the South Australian forward map. Where there was a many (1st Edition) to one (2nd Edition) relationship, the 2nd Edition diagnosis code was mapped back to the most general 1st Edition diagnosis code (based on the description). In this instance specificity of the data was lost.

There were very few changes between ICD-10-AM 1st Edition and ICD-10-AM 2nd Edition for external cause codes, with changes between the two editions mainly to place of occurrence and activity codes. There were also some changes in relation to the detail recorded on the type of firearms involved in causing injury, on contact with hornets, wasps and bees, and for some transport accidents. In many of these cases the ICD-10-AM 2nd Edition provided more detailed categories than the 1st Edition, so the South Australian maps were to non-specific 2nd Edition codes. In these cases, the Institute was able to simply reverse the South Australian forward map.

There were significant changes in procedure codes between ICD-10-AM 1st Edition and ICD-10-AM 2nd Edition. As for diagnosis codes, where there was a one-to-one relationship between 1st Edition and 2nd Edition procedure codes (and the 2nd Edition code was invalid as a 1st Edition code) the Institute reversed the South Australian forward map. Similarly, if there was a many (1st Edition) to one (2nd Edition) relationship, then the 2nd Edition procedure code was mapped back to the most general 1st Edition procedure code (where there was one available). Where there was not a general procedure code available, the 2nd Edition procedure code was mapped back to the 1st Edition procedure code in the group that was most commonly reported (by the other States and Territories for 1999–00 and by New South Wales, Victoria, the Australian Capital Territory and the Northern Territory for 1998–99).

The South Australian forward maps for procedure codes included combination maps for *Allied health interventions* (blocks 2050–2140). These combinations allowed forward mapping of the type of intervention and the type of clinician. As most States and Territories provide data for generalised allied health interventions (e.g. dietetics, social work), rather than detailed information on the type of intervention (e.g. assessment, counselling), where a 2nd Edition code (providing detail on the type of intervention) was used in combination with a generalised allied health intervention code (95550-00–95550-11), the Institute deleted the 2nd Edition (type of intervention) code from the record. In some cases a 2nd Edition intervention-specific code was used in a record without a code specifying the type of clinician. In that case the 2nd Edition code was mapped to a selected 1st Edition code using the procedures outlined above.

## Patient days

Patient days provide information on the length of stay of patients and are calculated as the difference between the separation date and admission date, less any leave days. Same day patients are allocated a length of stay of one day.

As the databases contain records for patients separating from hospital during the year, this definition means that not all patient days reported will have occurred in the reporting period (1 July 1999 to 30 June 2000) and, therefore, cannot be used to calculate accurate financial year-based activity estimates. It is expected, however, that in acute hospitals, patient days for patients who separated in 1999–00, but who were admitted in 1998–99, would be counterbalanced by the patient days for patients in hospital on 30 June 2000 who will separate in the following reporting period, and for whom data will be reported in the data collection for the 2000–01 year. Because of the more variable lengths of stay in long-stay establishments (such as public psychiatric hospitals), the numbers of separations and patient days can be a less accurate measure of the activity of these establishments.

## Codes used for selected procedures

Table 2.7 presents separation rates for selected procedures. The table was originally defined as a performance indicator of the National Health Ministers' Benchmarking Working Group (NHMBWG) to provide comparative data between jurisdictions for a defined set of procedures. The procedures were chosen largely on the basis of the frequency with which they were undertaken and because they were often elective and discretionary, and there are often treatment alternatives available (NHMBWG 1998). The additional procedures in the table were included after consultation with the States and Territories.

The selected procedures were originally specified using ICD-9-CM codes. With the introduction of ICD-10-AM, they were respecified using ICD-10-AM codes (Table A3.1), as described in Appendix 6 of *Australian Hospital Statistics 1998–99*.

**Table A3.1: ICD-10-AM codes for the selected procedures in Table 2.7**

Procedure	ICD-10-AM codes
Appendicectomy	Block 926
Angioplasty	Blocks 669, 671, codes 35304-00, 35305-00
Caesarean section	Block 1340
Cholecystectomy	Block [965]
Coronary artery bypass graft	Blocks 672–679
Myringotomy (with insertion of tube)	Codes 41632-00, 41632-01
Knee replacement	Blocks 1518, 1519, 1523, code 49527-00
Prostatectomy	Blocks 1165, 1167, codes 37200-06, 37207-00, 37207-01, 90407-00, 36839-01, 36839-03
Arthroscopic procedures (includes arthroscopies)	Codes 48945-00, 48945-01, 48948-00, 48948-01, 48948-02, 48951-00, 48954-00, 48957-00, 48960-00, 49109-00, 49118-00, 49118-01, 49121-00, 49121-01, 49121-02, 49121-03, 49121-04, 49218-00, 49218-01, 49221-00, 49221-01, 49221-02, 49224-00, 49224-01, 49224-02, 49227-00, 49360-00, 49363-00, 49366-00, 49366-01, 49539-00, 49542-00, 49557-00, 49557-01, 49557-02, 49558-00, 49558-01, 49558-02, 49559-00, 49560-00, 49560-01, 49560-02, 49560-03, 49561-00, 49561-01, 49561-02, 49562-00, 49562-01, 49562-02, 49563-00, 49566-00, 49700-00, 49700-01, 49703-00, 49703-01, 49703-02, 49703-03, 49703-04, 50100-00, 50100-01, 50102-00, 53215-00, 53218-00, 53218-01, 53218-02, 90600-00

## Data on geographical location of hospital

Data on the number of public acute and psychiatric hospitals and available beds per 1,000 population by metropolitan, rural and remote region are presented in Table 3.4.

Information on the Rural, Remote and Metropolitan Area (RRMA) of hospital is derived from data supplied by the States and Territories for the National Public Hospital Establishments Database on the geographical location of the establishment. The *National Health Data Dictionary* specifies that these data should be provided as the State or Territory and the Statistical Local Area (SLA) of the establishment. SLAs are small units within the Australian Bureau of Statistics' Australian Standard Geographical Classification (ASGC). The Rural, Remote and Metropolitan Areas Classification allocates each SLA to a category based primarily on population numbers and an index of remoteness. The classification is as follows:

- Capital cities: capital city statistical divisions

- Other metropolitan centres: urban centres with a population greater than or equal to 100,000
- Large rural centres (index of remoteness <10.5): urban centres with a population between 25,000 and 99,000
- Small rural centres (index of remoteness <10.5): urban centres with a population between 10,000 and 24,999
- Other rural areas (index of remoteness <10.5): urban centres with a population less than 10,000
- Remote centres (index of remoteness >10.5): urban centres with a population greater than 4,999
- Other remote areas (index of remoteness >10.5): urban centres with a population less than 5,000.

For more information see Rural, Remote and Metropolitan Areas Classification, 1991 Census edition (DPIE & DSHS 1994).

## Data on Statistical Division of usual residence

Data on the Statistical Division of usual residence of admitted patients are presented in maps in Chapter 5 (Figures 5.1 and 5.2). The data used for these maps were derived from data supplied for each separation by the States and Territories for the National Hospital Morbidity Database on the area of usual residence of the patients. The *National Health Data Dictionary* specifies that these data should be provided as the State or Territory and the SLAs of usual residence. SLAs can be aggregated to Statistical Divisions for reporting, as in the maps in this publication. The data on the State or Territory of usual residence are reported in Chapter 5 (Tables 5.7, 5.8, 5.9 and 5.10).

Although most separations included data on the State or Territory of usual residence, not all States and Territories were able to provide information on the area of usual residence in the form of an SLA code, using the 1999 edition of the ASGC. If SLA information was unavailable for a patient then postcode was requested. The Institute then mapped the supplied data to 1999 and 1996 SLAs, as far as possible. SLAs were derived from postcodes based on the probabilities that persons for whom a postcode was reported were resident in each SLA. Similarly, 1999 and 1996 SLA codes were derived from SLA codes from earlier and later editions of the ASGC on a probabilistic basis. The standardised 1996 SLA data were then aggregated to Statistical Division data for presentation in maps.

New South Wales, Victoria, the Australian Capital Territory and the Northern Territory were able to provide SLA codes for both patients usually resident in the jurisdiction and patients not usually resident in the jurisdiction. Queensland, South Australia and Tasmania provided SLA codes (or Local Government Area codes) for patients usually resident in the jurisdiction and postcodes for patients usually resident elsewhere. Western Australia provided postcodes for both patients usually resident in the jurisdiction and patients not usually resident in the jurisdiction.

The mapping process identified missing, invalid and superseded codes, but resulted in 98.2% of records being assigned SLA codes. Data for the two Statistical Divisions in the Australian Capital Territory were combined for mapping purposes because of the very small population of one of the Statistical Divisions.

# Appendix 4: Cost per casemix-adjusted separation methodology

## Introduction

Table 2.1 presents a measure of the average cost of providing care for an admitted patient (whether an overnight-stay patient or a same day patient), adjusted for the relative complexity of the patient’s clinical condition and of the hospital services provided. This is an important efficiency performance indicator. The cost per casemix-adjusted separation does not, however, take account of the quality of care delivered within a hospital nor the health outcomes achieved.

The methodology used to calculate the cost per casemix-adjusted separation for this report uses the method agreed by the National Health Ministers’ Benchmarking Working Group (NHMBWG 1998).

The scope of hospitals included in this benchmarking efficiency indicator has been agreed between the States and Territories, and has progressively narrowed in the last few years by excluding atypical hospitals. In 1999–00 the following types of hospitals were excluded – psychiatric, drug and alcohol services, mothercraft hospitals, hospices, rehabilitation facilities, small non-acute and multi-purpose services and ‘unpeered and other’ hospitals (defined on p. 17). These accounted for 96% of total separations and 84% of total bed days.

The methodology includes all admitted patient separations and their associated costs. It is appropriate to include the 97% of separations, which are acute in this calculation, as cost weights are available for each of the acute separations. However the 3% of separations which are not acute (Table A4.1) are also included and, as there are no cost weights for the non-acute separations, the cost weight for the acute separations is used. This means the overall cost per separation is decreased, and it is decreased by a different amount in each State according to the proportion of non-acute separations in that State. To improve this situation, every State would need to estimate the cost of acute admitted patient separations, separately from the cost of all separations. Data provided by some jurisdictions on acute separation expenditures will be published later in the year.

The Institute hopes that all jurisdictions will soon be in a position to provide data on the costs of treating acute admitted patients that are separated in a year. In addition, if the States are able to provided cost weights, e.g. AN-SNAP weights for the admitted patient episodes which are not acute, then it will be possible to publish a cost per palliative care separation, a cost per rehabilitation care separation, a cost per maintenance care separation, etc., as well as a more accurate cost per total separation.

## Definitions

Cost per casemix-adjusted separation is calculated as:

$$\frac{\text{Recurrent expenditure} \times \text{IFRAC}}{\text{Total separations} \times \text{Average cost weight}}$$

where IFRAC (admitted patient fraction) is the estimated proportion of total hospital costs related to admitted patients and the average cost weight is a single number representing the relative costliness of cases for a particular provider (or a group of providers, for example teaching hospitals). Calculation of the average cost weight is described below.

Recurrent expenditure for this indicator is defined by the recurrent expenditure data elements in the *National Health Data Dictionary*.

Total separations excludes *Newborns* with no qualified days, and boarders, as defined in the Glossary. A separation is counted when a patient completes an episode of hospital care, whereas an admission is counted when a patient commences an episode of care.

As there is inconsistency between States and Territories in the recording of depreciation, it has been excluded from this analysis. It is anticipated that as accrual accounting becomes universally adopted by health authorities, comparable data on depreciation will become available and it will be included in these analyses (see Table 3.7 for available data on depreciation).

The cost per casemix-adjusted separation can not be used as the sole measure of the efficiency of the different jurisdictions in providing hospital services, as some of the costs incurred are costs beyond the control of a jurisdiction. For example, the Northern Territory has high staffing and transport costs, and treats a greater proportion of Aboriginal and Torres Strait Islander patients than other jurisdictions. Because of factors such as these, cost disabilities associated with providing the same level and standard of hospital services available elsewhere in Australia are recognised by the Commonwealth Grants Commission (CGC). Cost disability refers to variables such as remoteness, high input costs and socioeconomic factors that increase the cost of providing services. Other jurisdictions suffer cost disabilities for other reasons. Factors such as these should be taken into account when making comparisons.

## Further work

It has been proposed that further work should be undertaken to refine the methodology so as to enhance the usefulness of these data. This report splits the hospitals into peer groups to enable comparison at a more appropriate level (Chapter 2).

There are a number of alternatives which could improve the analysis which are being considered including:

- Calculating the casemix adjustments by estimating cost weights for patients other than Acute (using AN-SNAP cost weights for example)
- Estimating costs at other levels such as peer group (Chapter 2), program or diagnostic groupings.
- Broadening the analysis to include non-admitted patient care and other hospital outputs such as teaching, research and preventive services. If relative cost weights for each of these outputs can be calculated, then eventually there can be an indicator of overall cost per adjusted output unit for all hospital outputs. Inconsistency in definitions between jurisdictions in this area need to be overcome to enable these analyses to be undertaken.

## Scope

For the purposes of improving the comparability of data across jurisdictions and increasing the accuracy of the analysis, the scope for Table 2.1 has been restricted to those hospitals, which mainly provide acute care. The hospitals excluded are: multi-purpose services; hospices; rehabilitation hospitals; mothercraft hospitals; other sub-acute hospitals (e.g. geriatric care centres providing a mix of rehabilitation and nursing home type care); small non-acute hospitals and psychiatric hospitals; and 'Unpeered and other' group. The 'Unpeered and other' group contains hospitals with fewer than 200 separations; acute metropolitan hospitals with less than 2,000 separations (mainly small specialised hospitals such as dental hospitals, pregnancy advisory centres etc); and hospitals that cannot be classified due to atypical events such as being closed, major flood or fire. The selected hospitals in Table 2.1 account for 96% of separations in public acute and psychiatric hospitals, and 84% of bed days.

The scope of public hospital establishments included in the calculation of the cost per casemix-adjusted separation figures is different from the scope of the data reported in all other tables. It is very similar to the scope for the cost per casemix adjusted separation figures in 1998-99 but different to the 1995-96 to 1997-98 data (AIHW 1997b, 1998, 1999a, 2000f, SCRCSSP 2000).

## Determining costs for admitted patients

The efficiency indicator published in Table 2.1 covers the costs of all admitted patients. Ideally, costs for acute admitted patients only would be used in this indicator. At present the only cost weights available for all of Australia are the Australian Refined Diagnosis Related Groups cost weights which only apply to acute admitted patients.

To determine the costs associated with admitted patients, an admitted patient fraction (IFRAC) is used. The IFRAC is an expression of the ratio of admitted patient costs to total hospital costs. The IFRAC is generally estimated at a hospital level from the results of patient costing data, or from surveys of each department.

$$\text{IFRAC} = \frac{\text{Admitted patient cost}}{\text{Total cost}}$$

Teaching and research costs should not be included in admitted patient costs, but often parts of these costs are.

For hospitals where the IFRAC was not available or clearly inconsistent with the data, the admitted patient costs were estimated using the Health and Allied Services Advisory Council (HASAC) ratio (see AIHW: Cooper-Stanbury et al. 1994). The HASAC IFRAC is calculated using the following formula:

$$\text{IFRAC}_H = \frac{\text{Patient days}}{\text{Patient days} + \left( \frac{\text{NAPOOS}}{\text{Ratio}} \right)}$$

Where NAPOOS = Non-admitted patient occasions of service;

IFRAC<sub>H</sub> = the IFRAC calculated; and

Ratio = the ratio of non-admitted patient cost to admitted patient cost per service.

The ratio used in this report equates the cost of 5.753 non-admitted patient services to the cost of one admitted patient bed day. The HASAC method is used in this report to

estimate IFRACs for small hospitals only, and none of these hospitals are in the benchmarking group of hospitals in Table 2.1.

Ideally, different IFRACs would be used for different cost categories; so that categories like food and pharmaceuticals which were almost exclusively for admitted patients would have a very high IFRAC. In the absence of comprehensive sets of IFRACs, a single hospital-wide IFRAC was applied to all cost categories.

## **Admitted patients other than acute patients**

It was not possible for all jurisdictions to isolate the costs of acute admitted patients from all admitted patient costs (as defined by the *National Health Data Dictionary* data element *Type of episode of care*). Because costs are being estimated per separation and not per patient day most of the non-acute admitted patients (including rehabilitation and non-acute patients) will have higher costs per separation, as these patients typically have longer lengths of stay, even though their daily costs are lower. These patients make up less than 3% of total admitted patient episodes in the selected hospitals and account for approximately 15% of patient days in the selected hospitals (Table A4.1).

There is also variation in the application of the episodes of care and type of episode of care between States and Territories. In States or Territories where there is a clear delineation in funding arrangements between acute and non-acute services, the split between acute and other types of patients may be different from where this is done purely on a statistical basis.

Care needs to be taken when the comparison is done that allowance is made for uncertainty introduced by these episodes for which the cost weights are invalid. Table A4.1 shows that there is significant variation in the number and length of stay for the separations other than acute between jurisdictions

## **Adjusting for casemix**

The average cost weight is used in this report to adjust for differences in the relative costliness of all acute admitted patients treated in a hospital compared with another hospital or group. The value for a group of hospitals is multiplied by the total number of separations for that group to produce the number of casemix-adjusted separations. The term 'cost per casemix-adjusted separation' derives from this use of the number of separations adjusted by relative costliness.

Casemix refers to the numbers and types of admitted patients a hospital treats. Hospitals collect data that allow admitted patient episodes to be classified using the Australian National Diagnosis Related Groups (AR-DRG) version 4 casemix classification system. This system groups episodes of similar clinical condition and resource use into 661 categories or AR-DRGs. The National Hospital Cost Data Collection has collected data to produce a cost weight for each AR-DRG (see Appendix 8). The set of cost weights is a relative value scale for all AR-DRGs, calculated so that the average cost weight across all episodes used to produce the set of weights is 1.00. Once a set of cost weights has been produced, it is possible to determine the average cost weight for a hospital or group of hospitals. The average cost weight is calculated as follows:



$$\text{Average cost weight} = \frac{\sum_{i=1}^n (CW_i \times \text{separations}_i)}{\text{Total no. of acute separations}}$$

where  $i$  represents each of the 661 AR-DRGs and  $CW_i$  is the cost weight for the  $i$ th AR-DRG (the different versions of the classification system released to date have different numbers of AR-DRGs).

The average cost weight for a hospital is useful because it represents in a single number the overall complexity of cases treated by a hospital. If the national cost weights are used in the calculation of an average cost weight, then the resultant weight is an indicator of the relative costliness of the hospital's casemix with respect to the national average. For example, a hospital with an average cost weight of 1.08 has an 8% more costly casemix than the national average (by design equal to 1.00).

Hospital morbidity data provided to the National Hospital Morbidity Database were used to estimate average cost weights for the groups of hospitals reported in this analysis. In 1998–99 Version 4.0/4.1 cost weights were supplied by the Department of Health and Aged Care, from the 1998–99 NHCDC. The 1998–99 cost weights were applied to 1999–00 hospital data as the NHCDC 1999–00 weights were not available.

The complexity of cases treated as admitted patients can differ regionally. Some jurisdictions admit patients who might be treated as non-admitted patients in other jurisdictions. Age structures are less of a concern in comparing States and Territories, and the AR-DRG adjustment is deemed to compensate for the differences in costs due to the higher proportion of older patients in some jurisdictions (Gillett & O'Connor-Cox 1996; Duckett & Jackson 1998).

The validity of comparisons of average cost weights is limited by differences in the extent to which each jurisdiction's psychiatric services are integrated into its public hospital system as service delivery changes under the National Mental Health Strategy. For example, in Victoria, almost all public psychiatric hospitals are now mainstreamed into acute hospital services and psychiatric patient data are therefore included in the acute hospital reports. Cost weights are not as useful as measures of resource requirements for acute psychiatric services because the relevant AR-DRGs are less homogeneous than for other acute services.

## Estimating total medical costs

For the medical labour cost category, data are readily available only for public patients, as private patients are charged directly by their doctor for medical services. Private patients are those patients who are treated by a doctor of their choice (as opposed to a hospital-nominated doctor) or choose to be accommodated in a single room. Charges for such private medical services are not included in the recurrent expenditure figures. Although Medicare data on in-hospital services are available, they are not sufficiently detailed to allow the allocation of costs to the groups of hospitals reported. The cost of private patients is therefore estimated by assuming that a patient day of care by a medical practitioner costs the same, whether the patient is public or not. The private patient medical costs are then estimated by pro-rating the sum of salary/sessional and VMO payments according to the number of public patient days and the number of private patient days. This is equivalent to multiplying by one minus the public patient day proportion and dividing by the public patient day proportion. The underlying assumption ignores a number of factors including the propensity for junior medical staff to provide

care to private patients and for doctors with private patients to charge at higher rates than they would charge the public system under a contract for public patients.

## **Payroll tax**

Only Tasmanian hospitals are liable for a significant proportion of payroll tax. The Institute has worked with the Department of Human Services Tasmania to remove payroll tax costs from the cost per casemix-adjusted separation table. While New South Wales hospitals are payroll tax exempt, payroll tax is paid for central office and some other support service staff. The amount is insignificant with respect to the New South Wales total. While Queensland hospitals pay payroll tax it is reimbursed and in theory should not be included in any accounts as reported to the National Public Hospital Establishments Database. In practice there is a very small amount reported due to administrative lags and other inconsistencies. No action has been taken to remove this small amount of payroll tax from Queensland or New South Wales data.

**Table A4.1: Summary of all episodes of care in public acute hospitals selected for Table 2.1 Cost per casemix-adjusted separation<sup>(a)</sup> States and Territories, 1999–00**

<b>Variable</b>	<b>NSW</b>	<b>Vic</b>	<b>Qld</b>	<b>WA</b>	<b>SA</b>	<b>Tas</b>	<b>ACT</b>	<b>NT</b>	<b>Total</b>
<b>Total separations ('000)</b>	1,186	977	668	346	337	72	61	58	3,705
<b>Total patient days ('000)</b>	4,550	3,670	2,280	1,222	1,163	297	210	195	13,588
<b>Acute separations<sup>(b)</sup></b>	1,160	948	640	341	330	71	60	57	3,607
Separations ('000)	1,160	948	640	341	330	71	60	57	3,607
Proportion of all separations	98%	97%	96%	99%	98%	98%	99%	98%	97%
Patient days ('000)	4,148	3,053	1,987	1,118	1,056	250	196	182	11,991
Proportion of all patient days	91%	83%	87%	92%	91%	84%	93%	94%	88%
<b>Acute psychiatric care separations<sup>(b)</sup></b>									
Separations ('000)	22	19	20	11	6	2	2	2	85
Proportion of all separations	2%	2%	3%	3%	2%	3%	3%	4%	2%
Patient days ('000)	205	279	180	95	66	17	14	14	871
Proportion of all patient days	4.5%	7.6%	7.9%	7.8%	5.7%	5.9%	6.6%	7.2%	6.4%
<b>Acute non-psychiatric care separations</b>									
Separations ('000)	1,138	929	620	331	324	69	58	55	3,523
Proportion of all separations	96%	95%	93%	96%	96%	95%	96%	95%	95%
Patient days ('000)	3,943	2,774	1,806	1,023	990	232	182	168	11,120
Proportion of all patient days	87%	76%	79%	84%	85%	78%	87%	86%	82%
<b>Separations other than acute</b>									
Rehabilitation separations ('000)	15.3	17.9	21.0	3.2	1.6	0.6	0.3	0.6	60.5
Proportion of all separations	1.3%	1.8%	3.1%	0.9%	0.5%	0.8%	0.5%	1.0%	1.6%
Patient days ('000)	217	315	122	80	24	14	7	5	783
Proportion of all patient days	4.8%	8.6%	5.4%	6.5%	2.0%	4.7%	3.1%	2.4%	5.8%
Palliative care separations ('000)	3.3	2.8	2.9	0.4	1.0	0.1	0.3	0.0	11.0
Proportion of all separations	0.3%	0.3%	0.4%	0.1%	0.3%	0.2%	0.6%	0.1%	0.3%
Patient days ('000)	33	37	24	5	12	1	5	1	119
Proportion of all patient days	0.7%	1.0%	1.1%	0.4%	1.1%	0.5%	2.6%	0.3%	0.9%
Non-acute separations ('000)	4.5	8.2	3.9	1.1	0.4	0.4	0.1	0.4	18.9
Proportion of all separations	0.4%	0.8%	0.6%	0.3%	0.1%	0.6%	0.1%	0.6%	0.5%
Patient days ('000)	142	265	145	19	52	30	2	7	663
Proportion of all patient days	3.1%	7.2%	6.4%	1.6%	4.4%	10.2%	1.1%	3.6%	4.9%
Other separations ('000)	3.7	0.0	0.3	0.0	3.6	0.1	0.0	0.0	7.7
Proportion of all separations	0.3%	0.0%	0.0%	0.0%	1.1%	0.2%	0.0%	0.0%	0.2%
Patient days ('000)	11	0	2	0	19	2	0	0	34
Proportion of all patient days	0.2%	0.0%	0.1%	0.0%	1.7%	0.5%	0.0%	0.0%	0.2%
<b>Psychiatric care separations<sup>(c)</sup></b>									
Separations ('000)	24	19	21	11	6	2	2	2	87
Proportion of all separations	2%	2%	3%	3%	2%	3%	3%	4%	2%
Patient days ('000)	220	279	188	99	69	17	14	15	901
Proportion of all patient days	5%	8%	8%	8%	6%	6%	7%	8%	7%
<b>Total separations other than acute</b>									
<b>Separations ('000)</b>	<b>26.8</b>	<b>28.8</b>	<b>28.1</b>	<b>4.8</b>	<b>6.6</b>	<b>1.2</b>	<b>0.8</b>	<b>1.0</b>	<b>98.0</b>
<b>Proportion of all separations</b>	<b>2.3%</b>	<b>2.9%</b>	<b>4.2%</b>	<b>1.4%</b>	<b>2.0%</b>	<b>1.7%</b>	<b>1.2%</b>	<b>1.7%</b>	<b>2.6%</b>
<b>Patient days</b>	<b>402.2</b>	<b>617.4</b>	<b>293.5</b>	<b>103.7</b>	<b>106.9</b>	<b>47.3</b>	<b>14.3</b>	<b>12.3</b>	<b>1,597.5</b>
<b>Proportion of all patient days</b>	<b>8.8%</b>	<b>16.8%</b>	<b>12.9%</b>	<b>8.5%</b>	<b>9.2%</b>	<b>15.9%</b>	<b>6.8%</b>	<b>6.3%</b>	<b>11.8%</b>

(a) From the National Hospital Morbidity Database, including same day separations and newborns with qualified days.

(b) Includes acute and unspecified separations and newborn episodes of care with qualified days.

(c) Patients with total days of psychiatric care equal to the total length of stay.

# Appendix 5: Hospitals contributing to this report

Tables accompanying this report on the Internet at <http://www.aihw.gov.au/publications/hse/ahs99-00/index.html> list the public hospitals that contributed to the National Public Hospital Establishments Database for 1999-00 and the public and private hospitals that contributed to the National Hospital Morbidity Database for 1999-00.

Table A5.1 lists the public hospitals included in one or both databases, with information on their average available bed numbers, their peer group (see Chapter 2) and the Statistical Local Area and RRMA category of their location. Those that were not included in the National Hospital Morbidity Database are annotated as such, as are hospitals not included in the cost per casemix-adjusted separation analysis presented in Chapter 2.

Table A5.2 lists the private hospitals that contributed to the National Hospital Morbidity Database, and whether each was a private free-standing day hospital facility.

# Appendix 6: Population estimates

Table A6.1: Estimated resident population by age group and sex, States and Territories, 31 December 1999

Sex	Age group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Australia <sup>(a)</sup>
Females	0	43,264	28,651	22,486	12,096	8,839	2,957	2,027	1,628	121,965
	1-4	168,738	119,681	94,958	49,403	36,743	12,161	8,303	6,784	496,863
	5-14	431,469	313,687	247,764	131,731	97,034	33,430	21,386	15,931	1,292,782
	15-24	434,787	326,675	251,527	134,708	97,777	31,675	24,455	14,817	1,316,589
	25-34	488,087	369,131	266,088	141,207	104,665	31,921	25,392	18,097	1,444,851
	35-44	493,915	365,483	271,874	146,752	114,594	36,338	24,991	15,130	1,469,384
	45-54	423,850	316,409	236,115	124,826	103,520	32,167	22,750	10,921	1,270,729
	55-64	290,076	213,405	153,206	78,089	70,848	22,379	12,168	4,802	845,048
	65-74	237,930	175,584	115,357	57,955	60,765	18,206	7,709	2,032	675,560
	75-84	165,931	120,553	78,447	37,512	44,522	12,950	5,016	861	465,799
85 and over	58,824	44,475	28,018	14,487	16,543	4,574	1,495	285	168,707	
	<i>Total</i>	<i>3,236,871</i>	<i>2,393,734</i>	<i>1,765,840</i>	<i>928,766</i>	<i>755,850</i>	<i>238,758</i>	<i>155,692</i>	<i>91,288</i>	<i>9,568,277</i>
Males	0	45,419	30,570	23,571	12,755	9,165	3,107	2,125	1,778	128,507
	1-4	177,480	126,938	99,624	52,477	38,512	12,820	8,584	7,247	523,778
	5-14	453,351	329,193	261,273	139,001	102,394	35,039	22,132	17,167	1,359,890
	15-24	453,177	340,024	262,827	142,055	102,616	32,685	27,126	16,680	1,377,410
	25-34	486,452	366,761	267,008	146,215	107,615	30,406	24,893	20,012	1,449,665
	35-44	496,907	360,732	268,847	148,400	113,399	35,292	23,801	16,844	1,464,512
	45-54	432,779	313,307	243,148	130,373	102,233	32,188	22,413	13,071	1,289,793
	55-64	294,895	213,140	160,710	81,969	69,654	22,454	12,393	6,573	861,903
	65-74	217,565	159,117	109,683	54,729	55,401	16,818	7,083	2,490	622,911
	75-84	116,369	83,397	58,087	27,128	31,088	8,845	3,416	760	329,106
85 and over	25,416	19,972	13,398	6,544	7,237	2,000	653	200	75,423	
	<i>Total</i>	<i>3,199,810</i>	<i>2,343,151</i>	<i>1,768,176</i>	<i>941,646</i>	<i>739,314</i>	<i>231,654</i>	<i>154,619</i>	<i>102,822</i>	<i>9,482,898</i>
Persons	0	88,683	59,221	46,057	24,851	18,004	6,064	4,152	3,406	250,472
	1-4	346,218	246,619	194,582	101,880	75,255	24,981	16,887	14,031	1,020,641
	5-14	884,820	642,880	509,037	270,732	199,428	68,469	43,518	33,098	2,652,672
	15-24	887,964	666,699	514,354	276,763	200,393	64,360	51,581	31,497	2,693,999
	25-34	974,539	735,892	533,096	287,422	212,280	62,327	50,285	38,109	2,894,516
	35-44	990,822	726,215	540,721	295,152	227,993	71,630	48,792	31,974	2,933,896
	45-54	856,629	629,716	479,263	255,199	205,753	64,355	45,163	23,992	2,560,522
	55-64	584,971	426,545	313,916	160,058	140,502	44,833	24,561	11,375	1,706,951
	65-74	455,495	334,701	225,040	112,684	116,166	35,024	14,792	4,522	1,298,471
	75-84	282,300	203,950	136,534	64,640	75,610	21,795	8,432	1,621	794,905
85 and over	84,240	64,447	41,416	21,031	23,780	6,574	2,148	485	244,130	
<b>Total</b>		<b>6,436,681</b>	<b>4,736,885</b>	<b>3,534,016</b>	<b>1,870,412</b>	<b>1,495,164</b>	<b>470,412</b>	<b>310,311</b>	<b>194,110</b>	<b>19,051,175</b>

(a) Includes Other Territories.

Source: Australian Bureau of Statistics unpublished data.

**Table A6.2: Projected Aboriginal and Torres Strait Islander population by age group and sex, States and Territories, 30 June 1999**

Sex	Age group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Australia <sup>(a)</sup>
Females	0	1,653	325	1,605	764	308	219	46	688	5,609
	1-4	6,545	1,309	6,394	3,001	1,241	850	172	2,677	22,191
	5-14	14,694	2,856	14,308	7,565	2,919	1,948	404	6,223	50,935
	15-24	10,797	2,097	10,846	5,677	2,302	1,710	353	5,568	39,365
	25-34	9,574	2,018	9,565	5,087	2,120	1,207	333	4,815	34,738
	35-44	7,339	1,577	6,840	3,806	1,477	1,078	253	3,289	25,671
	45-54	4,519	867	4,256	2,141	836	605	117	2,064	15,418
	55-64	2,366	449	2,076	1,048	463	280	30	1,122	7,837
	65-74	1,154	281	1,104	626	234	128	13	554	4,097
	75 and over	527	154	536	297	108	75	5	245	1,951
	<i>Total</i>	<i>59,168</i>	<i>11,933</i>	<i>57,530</i>	<i>30,012</i>	<i>12,008</i>	<i>8,100</i>	<i>1,726</i>	<i>27,245</i>	<i>207,812</i>
Males	0	1,737	344	1,687	808	320	228	51	726	5,902
	1-4	6,734	1,388	6,562	3,192	1,223	884	207	2,931	23,126
	5-14	15,246	2,958	14,701	7,737	3,067	2,094	391	6,849	53,063
	15-24	11,183	2,201	11,096	5,762	2,135	1,654	348	5,644	40,052
	25-34	8,483	1,947	8,653	4,764	1,841	1,062	300	4,828	31,895
	35-44	6,470	1,427	6,194	3,487	1,358	973	232	3,028	23,184
	45-54	4,213	880	3,708	1,935	792	694	87	1,768	14,090
	55-64	2,185	437	1,740	981	415	263	18	977	7,023
	65-74	941	198	864	492	161	121	11	399	3,189
	75 and over	292	88	376	212	85	33	1	192	1,279
	<i>Total</i>	<i>57,484</i>	<i>11,868</i>	<i>55,581</i>	<i>29,370</i>	<i>11,397</i>	<i>8,006</i>	<i>1,646</i>	<i>27,342</i>	<i>202,803</i>
Persons	0	3,390	669	3,292	1,572	628	447	97	1,414	11,511
	1-4	13,279	2,697	12,956	6,193	2,464	1,734	379	5,608	45,317
	5-14	29,940	5,814	29,009	15,302	5,986	4,042	795	13,072	103,998
	15-24	21,980	4,298	21,942	11,439	4,437	3,364	701	11,212	79,417
	25-34	18,057	3,965	18,218	9,851	3,961	2,269	633	9,643	66,633
	35-44	13,809	3,004	13,034	7,293	2,835	2,051	485	6,317	48,855
	45-54	8,732	1,747	7,964	4,076	1,628	1,299	204	3,832	29,508
	55-64	4,551	886	3,816	2,029	878	543	48	2,099	14,860
	65-74	2,095	479	1,968	1,118	395	249	24	953	7,286
	75 and over	819	242	912	509	193	108	6	437	3,230
<b>Total</b>		<b>116,652</b>	<b>23,801</b>	<b>113,111</b>	<b>59,382</b>	<b>23,405</b>	<b>16,106</b>	<b>3,372</b>	<b>54,587</b>	<b>410,615</b>

(a) Includes Other Territories.

Source: ABS (1998).

**Table A6.3: Estimated resident population by country/region of birth, Australia 30, June 1999**

Country/region of birth	Population	Country/region of birth	Population
Australia	14,518,164	Myanmar	13,080
New Zealand	356,961	Indonesia	61,851
Papua New Guinea	27,251	Cambodia	23,711
Fiji	38,801	Malaysia & Brunei	92,347
Oceania (other)	38,471	Philippines	120,816
<i>Oceania (total)</i>	<i>14,979,648</i>	Singapore	25,141
		Vietnam	173,567
United Kingdom & Ireland	1,214,992	Thailand	22,327
Greece	142,211	China	159,421
Italy	245,159	Hong Kong & Macau	50,800
Malta	55,408	Japan	24,281
Former Yugoslavia	207,628	Korea	40,199
Former USSR & Baltic States	54,992	India	103,932
Hungary	28,442	Sri Lanka	54,800
Poland	69,521	Asia (other)	57,275
Romania	14,057	<i>Asia (total)</i>	<i>1,023,548</i>
Austria	20,980		
France	18,584	Canada	27,323
Germany	119,941	United States of America	59,669
Netherlands	90,826	North America (other)	457
Europe (other)	120,329	<i>North America (total)</i>	<i>87,449</i>
<i>Europe &amp; the former USSR (total)</i>	<i>2,403,070</i>		
		Argentina	12,129
Lebanon	78,901	Chile	25,335
Turkey	31,108	The Caribbean	3,671
Iran	19,766	Central & South America (other)	40,388
Egypt	37,766	<i>South America, Central America &amp; The Caribbean (total)</i>	<i>81,523</i>
Middle East & North Africa (other)	56,915		
<i>Middle East &amp; North Africa (total)</i>	<i>224,456</i>	Mauritius	18,286
		South Africa	73,077
		Africa excluding North Africa (other)	46,109
		<i>Africa excluding North Africa (total)</i>	<i>137,472</i>
		<i>Overseas (total)</i>	<i>4,419,002</i>
		<b>Total</b>	<b>18,937,166</b>

Source: ABS (2000a).

# Appendix 7: Further information

*Australian Hospital Statistics 1999–00* is complemented by other recent national publications related to hospital statistics:

- Previous years' data in the National Hospital Morbidity Database and the National Public Hospital Establishments Database were summarised in *Australian Hospital Statistics 1998–99* (AIHW 2000a), *Australian Hospital Statistics 1997–98* (AIHW 1999a), *Australian Hospital Statistics 1996–97* (AIHW 1998), *Australian Hospital Statistics 1995–96* (AIHW 1997b) and *Australian Hospital Statistics 1993–95: An Overview* (AIHW 1997a).
- Information on patterns of health and illness, use of health services and health services costs and performance was published in *Australia's Health 2000* (AIHW 2000e).
- *The Burden of Disease and Injury in Australia* provides a comprehensive assessment of the health status of Australians which measured mortality, disability, impairment, illness and injury arising from 176 diseases and injuries, and 10 risk factors using a common metric, the disability-adjusted life year or DALY (AIHW: Mathers et al. 1999).
- *Health Expenditure Bulletin No. 16* provides estimates of total expenditure on health services in Australia from 1989–90 to 1998–99. Expenditure estimates are presented at the aggregate level, as a proportion of gross domestic product (GDP), on a per person basis and by source of funding—Commonwealth, other governments and non-government.  
Experimental health expenditure matrices for all States and Territories cover the years 1996–97 and 1997–98.
- *Institutional Mental Health Services in Australia 1998–99* contains detailed statistics on the characteristics and hospital care of admitted patients with a mental health-related diagnosis and/or who were treated in specialised psychiatric services during 1998–99. Statistics on psychiatric hospitals, specialised services in acute hospitals and public community mental health services are also included (AIHW 2001).
- Summary information on public hospital elective surgery waiting times was published in *Waiting Times for Elective Surgery in Australia 1997–98* (AIHW 2000f).
- Statistics on the hospital-based pharmaceutical, nursing and medical workforces are respectively included in *Nursing Labour Force 1998*, *Pharmacy Labour Force 1998* and *Medical Labour Force 1998* (AIHW 1999b, 2000c, 2000d).
- *Reporting of Adverse Events in Routinely Collected Data Sets in Australia* describes the nature and frequency of adverse events reported in the routinely compiled national mortality and hospital morbidity data collections, and gauges the usefulness of these data collections as sources of data on adverse events in Australia (AIHW: Hargreaves 2001).
- Establishment-level data on the resources and activities of private hospitals are compiled and published annually by the Australian Bureau of Statistics. Data for 1998–99 are presented in *Private Hospitals, Australia 1998–99* (ABS 2000b).
- The first, second and third national reports on health sector performance indicators reported a range of indicators of hospital performance (National Health Ministers' Benchmarking Working Group 1996, 1998, 1999). *The Fourth National Report on Health Sector Performance Indicators* provides information on the performance of the health sector and also promotes performance measurement activities in Australia (National Health Performance Committee 2000).



- Hospital performance indicator data have been released in the *Report on Government Services 1999*, the *Report on Government Services 2000* and the *Report on Government Services 2001* (Steering Committee for the Review of Commonwealth/State Service Provision 1999, 2000, 2001).
- Further information on the derivation of AR-DRG cost weights and average costs was published in the *National Hospital Cost Data Collection 1998–99 Final Report on the Development of AR-DRG 4.1 cost weights and analysis tables* (Department of Health and Aged Care 2000).
- The Department of Health and Aged Care’s Internet site includes tables of data from the department’s National Hospital Morbidity (Casemix) Database at <http://www.health.gov.au>. The scope of the department’s tables may differ from the scope of the tables presented in this report, so data in the department’s tables may not correspond exactly to data presented in this report.
- The National Public Hospital Establishments Database and the National Hospital Morbidity Database include data additional to those published in this report. These data can be made available to interested readers. The Institute can provide further information on data availability.

# Appendix 8: The National Hospital Cost Data Collection

The National Hospital Cost Data Collection (NHCDC) was established to produce annual updates of Diagnosis Related Group (DRG) cost weights, as incorporated into tables in Chapters 2, 4, 5 and 10. It is a voluntary collection of hospital cost and activity data covering the financial year prior to the collection period, undertaken by the Department of Health and Aged Care (DHAC). Both public and private hospital data are included, with the results being separately reported for the two sectors. The latest data available at the time of publication of this report were for the 1998–99 financial year (Department of Health and Aged Care 2000).

In the 1998–99 collection, cost data were obtained for the following products: acute admitted patients, outpatients, rehabilitation, palliative care, non-acute admitted patients, outreach/community, staff education, research and other. Data for emergency departments and outpatient clinics were also captured by most jurisdictions for this collection. However, this report uses the cost data for acute admitted patients only, that is, for Australian Refined Diagnosis Related Groups (AR-DRG) version 4.0/4.1. For this collection, the cost weights were defined as ‘Combined’ due to the mix of jurisdictions in their coding (ICD-9-CM and ICD-10-AM) and their grouping (AR-DRGs version 4.0 and 4.1) of hospital cost and activity data.

The NHCDC involves arrangements whereby the hospital data are collected by the individual hospitals, and checked and validated by State/Territory/private sector coordinators before being passed onto DHAC. Further checks are conducted by DHAC in processing the data to produce the final cost weights and associated tables.

The participating hospitals include both patient costing and cost modelling sites. Cost modelling generally refers to a process where estimates of costs are produced at the level of each DRG. The approach is ‘top down’ where costs from the hospitals’ general ledgers are allocated down to acute admitted patients, using a series of allocation statistics. Patient costing or clinical costing is a ‘bottom up’ approach where the costs of each service provided to an individual patient are measured or estimated so that the total cost of treating individual patients is obtained. The majority of participating hospitals are cost modelled sites.

The number of public hospitals included in the collection was 173. Whilst the coverage of public hospitals was approximately 33% of total hospitals, the total number of separations was approximately 75% of the estimated total population of separations, because of the significant number of large teaching hospitals in the sample. A total of 52 private hospitals contributed to the collection.

The results for 1998–99 were summarised in Appendix 10 of *Australian Hospital Statistics 1998–99*. The average cost per separation was \$2,488 for public hospitals and \$1,870 for private hospitals.

Further detailed information is available in the full report of the NHCDC for 1998–99 (Department of Health and Aged Care 2000). Cost weights and associated tables for this round and the previous two rounds can be obtained from the Costing and Ambulatory Section, Acute and Co-ordinated Care Branch, Commonwealth Department of Health and Aged Care (phone 02 6289 8272).

# Glossary

For further information on the terms used in this report, refer to the definitions in use in the 1999–00 collection from the *National Health Data Dictionary* Version 8.0 (NHDC 1999). Each definition contains an identification number (ID) given in the Knowledgebase or Australia's Health and Community Services Data Registry. The Knowledgebase is an electronic storage site for Australian health, community services, housing and related data definitions and standards. It provides definitions for data and performance indicators for health- and community services-related topics, and specifications for related National Minimum Data Sets (NMDSs), such as the NMDS for Institutional Health Care, which forms a major basis of this report. The Knowledgebase can be viewed on the Internet at <http://www.aihw.gov.au/knowledgebase/index.html>

<i>Aboriginal or Torres Strait Islander status</i>	Aboriginal or Torres Strait Islander status of the person according to the following definition:  An Aboriginal or Torres Strait Islander is a person of Aboriginal or Torres Strait Islander descent who identifies as an Aboriginal or Torres Strait Islander and is accepted as such by the community with which he or she lives.  Knowledgebase ID: 000001
<i>Activity while injured</i>	The type of activity being undertaken by the person when injured. Knowledgebase ID: 000002
<i>Acute</i>	Having a short and relatively severe course.
<i>Acute care</i>	See <i>Type of episode of care</i> .
<i>Acute care hospitals</i>	See <i>Establishment type</i> .
<i>Additional diagnosis</i>	Conditions or complaints either coexisting with the principal diagnosis or arising during the episode of care. Additional diagnoses give information on factors that result in increased length of stay, more intensive treatment or the use of greater resources. Knowledgebase ID: 000005
<i>Administrative and clerical staff</i>	See <i>Full time equivalent staff</i> .
<i>Administrative expenditure</i>	All expenditure incurred by establishments (but not central administrations) of a management expense/administrative support nature, such as any rates and taxes, printing, telephone, stationery and insurance expenses (including workers' compensation). Knowledgebase ID: 000244
<i>Admitted patient</i>	A patient who undergoes a hospital's formal admission process. Knowledgebase ID: 000011
<i>Admitted patient cost proportion</i>	The ratio of admitted patient costs to total hospital costs, also known as the in-patient fraction or IFRAC.
<i>Alcohol and drug treatment centre</i>	See <i>Establishment type</i> .

<i>Australian Refined Diagnosis Related Groups (AR-DRGs)</i>	An Australian system of Diagnosis Related Groups (DRGs). DRGs provide a clinically meaningful way of relating the number and type of patients treated in a hospital (that is, its casemix) to the resources required by the hospital. Each AR-DRG represents a class of patients with similar clinical conditions requiring similar hospital services.
<i>Available beds</i>	Beds immediately available for use by admitted patients as required. Knowledgebase ID: 000255
<i>Average length of stay</i>	The average number of patient days for admitted patient episodes. Patients admitted and separated on the same day are allocated a length of stay of one day. Knowledgebase ID: 000119
<i>Boarder</i>	A person who is receiving food and/or accommodation but for whom the hospital does not accept responsibility for treatment and/or care. A boarder is not admitted to the hospital, although a hospital may register a boarder. Knowledgebase ID: 000065
<i>Compensable patients</i>	Those patients entitled to, or who have been paid, compensation, damages, or other benefits in respect of the injury, illness or disease for which they have received care or treatment. Knowledgebase ID: 000026
<i>Cost weights</i>	Cost weights represent the costliness of an AR-DRG relative to all other AR-DRGs such that the average cost weight for all separations is 1.00. A separation for an AR-DRG with a cost weight of 5.0 therefore, on average, costs 10 times as much as a separation with a cost weight of 0.5. There are separate cost weights for AR-DRGs in the public and private sectors, reflecting the differences in the range of costs in the different sectors. The cost weights used in this report are 1998–99 national public and private cost weights for AR-DRGs v4.0/4.1.
<i>Diagnostic and health professionals</i>	See <i>Full time equivalent staff</i> .
<i>Domestic and other staff</i>	See <i>Full time equivalent staff</i> .
<i>Domestic services expenditure</i>	The costs of all domestic services, including electricity, other fuel and power, domestic services for staff, accommodation and kitchen expenses but not including salaries and wages, food costs or equipment replacement and repair costs. Knowledgebase ID: 000241
<i>Drug supplies expenditure</i>	The cost of all drugs, including the cost of containers. Knowledgebase ID: 000238
<i>Eligible Department of Veterans' Affairs patient</i>	An eligible person whose charges for the hospital admission are met by the Department of Veterans' Affairs. These data are as supplied by the States and Territories and the eligibility to receive hospital treatment as a Department of Veterans' Affairs patient may not necessarily have been confirmed by the department. Knowledgebase ID: 000118
<i>Eligible other patient</i>	An eligible person who does not meet the criteria to be an eligible public, private or Department of Veterans' Affairs patient. This category includes compensable patients, patients with Australian Defence Force personnel entitlements, and common law cases. Knowledgebase ID: 000118

<i>Eligible person</i>	<p>Under the Australian Health Care Agreements, an eligible person means a person who resides in Australia and whose stay in Australia is not subject to any limitation as to time imposed by law. Except where they are covered by reciprocal health care agreements, foreign diplomats and their families and persons visiting Australia are excluded.</p> <p>Knowledgebase ID: 000118</p>
<i>Eligible private patient</i>	<p>An eligible person who:</p> <ul style="list-style-type: none"> <li>• on admission to a public hospital or soon after, elects to be a private patient treated by a medical practitioner of his or her choice, or elects to occupy a bed in a single room. Such a private patient is responsible for meeting certain hospital charges as well as the professional charges raised by any treating medical or dental practitioner; or</li> <li>• chooses to be admitted to a private hospital. Such a private patient is responsible for meeting all hospital charges as well as the professional charges raised by any treating medical or dental practitioner.</li> </ul> <p>Knowledgebase ID: 000118</p>
<i>Eligible public patient</i>	<p>An eligible person who, on admission to a public hospital or soon after, elects to be a public patient, or an eligible public patient whose treatment is contracted to a private hospital. A public patient is entitled to receive care and treatment without charge.</p> <p>Knowledgebase ID: 000118</p>
<i>Enrolled nurses</i>	<p>See <i>Full time equivalent staff</i>.</p>
<i>Episode of care</i>	<p>An episode of care is a phase of treatment for an admitted patient. It may correspond to a patient's entire hospital stay, or the hospital stay may be divided into separate episodes of care of different types, such as acute care, palliative care and rehabilitation care (see <i>Type of episode of care</i> and <i>Separation</i>).</p> <p>Knowledgebase ID: 000168</p>
<i>Error DRGs</i>	<p>Seven AR-DRGs to which separations are grouped if their records contain clinically inconsistent or invalid information.</p>
<i>Establishment type</i>	<p>Type of establishment (defined in terms of legislative approval, service provided and patients treated) for each separately administered establishment.</p> <p>Knowledgebase ID: 000327</p> <p>Establishment types include:</p> <p><i>Acute care hospitals</i> – Establishments which provide at least minimal medical, surgical or obstetric services for admitted patient treatment and/or care, and which provide round-the-clock comprehensive qualified nursing service as well as other necessary professional services. They must be licensed by the State or Territory health department, or controlled by government departments. Most of the patients have acute conditions or temporary ailments and the average stay per admission is relatively short. Public acute care hospitals are funded and controlled by the State or Territory health authority. Private acute care hospitals are not controlled by the State or Territory health authority.</p> <p>Knowledgebase ID: 000327 (R1)</p>

*Psychiatric hospitals* – Institutions which provide treatment and care for patients with psychiatric, mental or behavioural disorders. Public psychiatric hospitals are funded and controlled by the State or Territory health authority. Private psychiatric hospitals are not controlled by the State or Territory health authority.

Knowledgebase ID: 000327 (R2)

*Alcohol and drug treatment centres* – Free-standing centres for the treatment of drug dependence on an in-patient basis.

Knowledgebase ID: 000327 (R4)

*Hospices* – Establishments providing palliative care to terminally ill patients.

Knowledgebase ID: 000327 (R6)

*Multi-purpose service* – Based on a legal definition rather than an operational one. The hospitals in this category are classified as such because they are part of a multi-purpose service health program. As a result some of the hospitals are whole MPSs, some are only the hospital part of an MPS and some are hospitals that are part of networks that are MPSs. This leads to some inconsistencies across jurisdictions.

*Public acute and psychiatric hospitals* – This category (Tables 3.2, 3.3, 3.4, 3.6, 3.7 and 3.8) includes public acute hospitals, public psychiatric hospitals, public alcohol and drug treatment centre, public hospice and public MPSs. The environmental event, circumstance or condition as the cause of injury, poisoning and other adverse effect.

*External cause*

Knowledgebase ID: 000053

*Full time equivalent staff*

Full time equivalent staff units are on-job hours worked and hours of paid leave (sick, recreation, long service, workers' compensation) by/for a staff member (or contract employee where applicable) divided by the number of hours normally worked by a full time staff member when on the job (or contract employee where applicable) under the relevant award or agreement.

Knowledgebase ID: 000252

Staffing categories include:

*Salaried medical officers* – Medical officers engaged by the hospital on a full time or part time salaried basis.

Knowledgebase ID: 000252 (C1.1)

*Registered nurses* – Nurses with at least a 3-year training certificate and nurses holding postgraduate qualifications. Registered nurses must be registered with a State or Territory registration board.

Knowledgebase ID: 000252 (C1.2)

*Enrolled nurses* – Second-level nurses who are enrolled in all States and Territories except Victoria where they are registered by the State registration board to practise in this capacity. Includes general enrolled nurses and specialist enrolled nurses (e.g. mothercraft nurses in some States and Territories).

Knowledgebase ID: 000252 (C1.3)

*Student nurses* – Nurses employed by the establishment currently studying in years 1 to 3 of a 3-year certificate course. This includes any person commencing or undertaking a 3-year course of training leading to registration as a nurse by the State or Territory registration board. This

includes full time general student nurses and specialist student nurses, such as mental deficiency nurses, but excludes practising nurses enrolled in post-basic training courses.

Knowledgebase ID: 000252 (C1.4)

*Trainee/pupil nurses* – Nurses that are commencing or undertaking a 1-year course of training leading to registration as an enrolled nurse on the State or Territory registration board (includes all trainee nurses).

Knowledgebase ID: 000252 (C1.5)

*Other personal care staff* – This category includes attendants, assistants or home assistants, home companions, family aides, ward helpers, wards persons, orderlies, ward assistants and nursing assistants, engaged primarily in the provision of personal care to patients or residents, who are not formally qualified or undergoing training in nursing or allied health professions.

Knowledgebase ID: 000252 (C1.6)

*Diagnostic and health professionals* – Qualified staff (other than qualified medical and nursing staff) engaged in duties of a diagnostic, professional or technical nature (but also including diagnostic and health professionals whose duties are primarily or partly of an administrative nature). This category includes all allied health professionals and laboratory technicians but excludes civil engineers and computing staff.

Knowledgebase ID: 000252 (C1.7)

*Administrative and clerical staff* – Staff engaged in administrative and clerical duties. Civil engineers and computing staff are included in this category. Medical staff and nursing staff, diagnostic and health professionals, and any domestic staff primarily or partly engaged in administrative and clerical duties are excluded.

Knowledgebase ID: 000252 (C1.8)

*Domestic and other staff* – Staff engaged in the provision of food and cleaning services. They include domestic staff, such as food services managers, primarily engaged in administrative duties. This category also includes all staff not elsewhere included (primarily maintenance staff, trades-persons and gardening staff).

Knowledgebase ID: 000252 (C1.9)

*HASAC* For hospitals where the IFRAC was not available or was clearly inconsistent with the data, the admitted patient costs are estimated by the Health and Allied Services Advisory Council (HASAC) ratio (see Appendix 4).

*Hospice* See *Establishment type*.

*IFRAC* The ratio of admitted patient costs to total hospital costs, also known as the admitted patient cost proportion.

*Ineligible patient* A patient who is not eligible under the Australian Health Care Agreements.  
Knowledgebase ID: 000118

*Interest payments* Payments made by or on behalf of the establishment in respect of borrowings (e.g. interest on bank overdraft), provided the establishment is permitted to borrow.

Knowledgebase ID: 000245

<i>Length of stay</i>	The length of stay of a patient is calculated by subtracting the date the patient is admitted from the date of separation. All leave days, including the day the patient went on leave, are excluded. A same day patient is allocated a length of stay of one day. Knowledgebase ID: 000119
<i>Major Diagnostic Categories (MDCs)</i>	A high level of groupings of patients used in the AR-DRG classification. Knowledgebase ID: 000088
<i>Medical and surgical supplies expenditure</i>	The cost of all consumables of a medical or surgical nature (excluding drug supplies) but not including expenditure on equipment repairs. Knowledgebase ID: 000239
<i>Multi-purpose service</i>	See <i>Establishment type</i> .
<i>Newborn care</i>	See <i>Type of episode of care</i> .
<i>Non-admitted patient occasion of service</i>	Occurs when a patient attends a functional unit of the hospital for the purpose of receiving some form of service, but is not admitted. A visit for administrative purposes is not an occasion of service. Knowledgebase ID: 000209
<i>Non-admitted patients</i>	Patients who receive care from a recognised non-admitted patient service/ clinic of a hospital. Knowledgebase ID: 000104
<i>Not published (n.p.)</i>	Not available for separate publication but included in the totals where applicable.
<i>Other personal care staff</i>	See <i>Full time equivalent staff</i> .
<i>Other recurrent expenditure</i>	Recurrent expenditure not included elsewhere in any of the recurrent expenditure categories. Knowledgebase ID: 000247
<i>Other revenue</i>	All other revenue received by the establishment that is not included under patient revenue or recoveries (but not including revenue payments received from State or Territory Governments). This would include revenue such as investment income from temporarily surplus funds and income from charities, bequests and accommodation provided to visitors. Knowledgebase ID: 000323
<i>Palliative care</i>	See <i>Type of episode of care</i> .
<i>Patient days</i>	The number of full or partial days' stay for patients who were admitted for an episode of care and who underwent separation during the reporting period. A patient who is admitted and separated on the same day is allocated one patient day. Further information on patient days is included in Appendix 3. Knowledgebase ID: 000206
<i>Patient revenue</i>	Revenue received by, and due to, an establishment in respect of individual patient liability for accommodation and other establishment charges. Knowledgebase ID: 000296
<i>Patient transport</i>	The direct cost of transporting patients, excluding salaries and wages of transport staff. Knowledgebase ID: 000243
<i>Payments to visiting medical officers</i>	All payments made to visiting medical officers for medical services provided to hospital (public patients) on a sessionally paid or fee-for-service basis. Knowledgebase ID: 000236
<i>Place of occurrence of external cause</i>	The place where the external cause of injury, poisoning or violence occurred. Knowledgebase ID: 000128



<i>Pre-MDC</i>	Eight AR-DRGs to which separations are grouped, regardless of their principal diagnoses, if they involved procedures that are particularly resource intensive (transplants, tracheostomies or extra-corporeal membrane oxygenation without cardiac surgery).
<i>Principal diagnosis</i>	The diagnosis established after study to be chiefly responsible for occasioning the patient's episode of care in hospital. Knowledgebase ID: 000136
<i>Private hospital</i>	A privately owned and operated institution, catering for patients who are treated by a doctor of their own choice. Patients are charged fees for accommodation and other services provided by the hospital and relevant medical and paramedical practitioners. Acute care and psychiatric hospitals are included. See <i>Establishment type</i> .
<i>Procedure</i>	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 the acute care setting. Knowledgebase ID: 000137
<i>Psychiatric hospitals</i>	See <i>Establishment type</i> .
<i>Qualified days</i>	Days within <i>Newborn</i> episodes of care are either qualified or unqualified. Days are qualified if the patient is the second or subsequent live-born infant of a multiple birth, whose mother is an admitted patient; is admitted to an intensive care facility in a hospital; or is admitted to, or remains in hospital without its mother.
<i>Recoveries</i>	All revenue received that is in the nature of a recovery of expenditure incurred. This would include: <ul style="list-style-type: none"> <li>• income received from the use of hospital facilities by salaried medical officers exercising their rights of private practice and by private practitioners treating private patients in hospital; and</li> <li>• other recoveries such as those relating to inter-hospital services where the revenue relates to a range of different costs and cannot be clearly offset against any particular cost.</li> </ul> Knowledgebase ID: 000295
<i>Recurrent expenditure</i>	Expenditure which is not capital expenditure. Includes salaries and wages expenditure and non-salary expenditure such as payments to visiting medical officers. Knowledgebase ID: 000533
<i>Registered nurses</i>	See <i>Full time equivalent staff</i> .
<i>Rehabilitation care</i>	See <i>Type of episode of care</i> .
<i>Repairs and maintenance expenditure</i>	The costs incurred in maintaining, repairing, replacing and providing additional equipment, maintaining and renovating building and minor additional works. Knowledgebase ID: 000242
<i>Salaried medical officers</i>	See <i>Full time equivalent staff</i> .
<i>Same day patients</i>	Same day patients are admitted patients who are admitted and separate on the same date. Knowledgebase ID: 000146

<i>Separation</i>	<p>The term used to refer to the episode of care, which can be a total hospital stay (from admission to discharge, transfer or death), or a portion of a hospital stay beginning or ending in a change of type of care (for example, from acute to rehabilitation). 'Separation' also means the process by which an admitted patient completes an episode of care by being discharged, dying, transferring to another hospital or changing type of care.</p> <p>Knowledgebase ID: 000205</p>
<i>Specialised service</i>	<p>A facility or unit dedicated to the treatment or care of patients with particular conditions or characteristics.</p> <p>Knowledgebase ID: 000321</p>
<i>Statistical Division</i>	<p>A general purpose spatial unit, it is the largest and most stable unit within the Australian Standard Geographical Classification (ASGC). This classification has been developed by the Australian Bureau of Statistics and covers all of Australia without gaps or overlaps or crossing of State or Territory boundaries.</p> <p>Knowledgebase ID: 000260</p>
<i>Student nurses</i>	<p>See <i>Full time equivalent staff</i>.</p>
<i>Superannuation payments</i>	<p>Contributions paid or (for an emerging cost scheme) that should be paid (as determined by an actuary) on behalf of establishment employees either by the establishment or a central administration such as a State or Territory health authority, to a superannuation fund providing retirement and related benefits to establishment employees.</p> <p>Knowledgebase ID: 000237</p>
<i>Trainee/pupil nurses</i>	<p>See <i>Full time equivalent staff</i>.</p>
<i>Type of episode of care</i>	<p>The care type defines the overall nature of the clinical service provided to an admitted patient during an episode of care.</p> <p>Knowledgebase ID: 000168</p> <p><i>Acute care</i> is care in which the clinical intent or treatment goal is to manage labour (obstetric); cure illness or provide definitive treatment of injury; perform surgery; relieve symptoms of illness or injury (excluding palliative care); reduce severity of an illness or injury; protect against exacerbation and/or complication of an illness and/or injury which could threaten life or normal function; and/or perform diagnostic or therapeutic procedures.</p> <p><i>Rehabilitation care</i> occurs when a person with a disability is participating in a multidisciplinary program aimed at an improvement in functional capacity, retraining in lost skills and/or change in psychosocial adaptation.</p> <p><i>Palliative care</i> occurs when a person's condition has progressed beyond the stage where curative treatment is effective and attainable or, where the person chooses not to pursue curative treatment. Palliation provides relief of suffering and enhancement of quality of life for such a person. Interventions such as radiotherapy, chemotherapy and surgery are considered to be part of the palliative episode if they are undertaken specifically to provide symptomatic relief.</p> <p><i>Non-acute care</i> includes care provided to persons who are Nursing Home Type Patients; to patients who would normally not require hospital treatment but where there are factors in the home environment which make it inappropriate for the person to be discharged in the short term; to patients in receipt of respite care; and to patients in psychiatric units for whom the principal function is provision of care over an indefinite period.</p>

*Newborn care* is initiated when the patient is 9 days old or less at the time of admission. Newborn episodes of care comprise qualified days only, separations with a mixture of qualified and unqualified days and separations with unqualified days only. Separations comprising only qualified days are considered to be the equivalent of episodes of acute care. *Other care* is where the principal clinical intent does not meet the criteria for any of the above.

*Type of non-admitted patient occasion of service*

A broad classification of services provided to non-admitted patients. See data element 231 in the *National Health Data Dictionary* Version 8.0 for further details.

*Visiting medical officer*

A medical practitioner appointed by the hospital board to provide medical services for hospital (public) patients on an honorary, sessionally paid, or fee-for-service basis.

Knowledgebase ID: 000236

# References

- Australian Bureau of Statistics (ABS) 1998. Experimental projections of the Aboriginal and Torres Strait Islander population, 30 June 1996 to 30 June 2006 Cat. No. 3231.0. Canberra: ABS.
- Australian Bureau of Statistics (ABS) 2000a. Migration Australia 1998–99. Cat. No. 3412.0. Canberra: ABS.
- Australian Bureau of Statistics (ABS) 2000b. Private hospitals Australia 1998–99. Cat. No. 4390.0. Canberra: ABS.
- AIHW 1997a. Australian hospital statistics, 1993–95: an overview. Health Services Series No. 9. Canberra: AIHW.
- AIHW 1997b. Australian hospital statistics, 1995–96. Health Services Series No. 10. Canberra: AIHW.
- AIHW 1998. Australian hospital statistics, 1996–97. Health Services Series No. 11. Canberra: AIHW.
- AIHW 1999a. Australian hospital statistics, 1997–98. Health Services Series No. 12. Canberra: AIHW.
- AIHW 1999b. Nursing labour force 1998. National Health Labour Force Series No. 15. Canberra: AIHW.
- AIHW 2000a. Australian hospital statistics, 1998–99. Health Services Series No. 15. Canberra: AIHW.
- AIHW 2000b. Australia's health services expenditure to 1998–99. Health Expenditure Bulletin No. 16. Health and Welfare Expenditure Series. Canberra: AIHW.
- AIHW 2000c. Pharmacy labour force 1998. National Health Labour Force Series No. 17. Canberra: AIHW.
- AIHW 2000d. Medical labour force 1998. National Health Labour Force Series No. 16. Canberra: AIHW.
- AIHW 2000e. Australia's health 2000: the seventh biennial health report of the Australian Institute of Health and Welfare. Canberra: AIHW.
- AIHW 2000f. Waiting times for elective surgery in Australia 1997–98. Health Services Series No. 14. Canberra: AIHW.
- AIHW 2001. Mental Health Services in Australia 1998–99: National Minimum Data Sets – Mental Health Care. AIHW Cat. No. HSE 7. Mental Health Series no. 2. Canberra: AIHW.
- AIHW: Cooper-Stanbury M, Solon R, Cook M 1994. Hospital utilisation and costs study 1991–92. Volume 1, a survey of public hospitals and related data. Health Services Series No. 5. Canberra: AGPS.
- AIHW: Hargreaves J 2001. Reporting of adverse events in routinely collected data sets in Australia. Health Division Working Paper No. 3. Canberra: AIHW.
- AIHW: Mathers C, Vos T, Stevenson C 1999. The burden of disease and injury in Australia. AIHW Cat. No. PHE 17. Canberra: AIHW.
- AIHW NPSU: Nassar A, Sullivan E, Lancaster P, Day P 2001. Australia's mothers and babies 1998. Perinatal Statistics Series No. 10. Sydney: AIHW National Perinatal Statistics Unit.

- Department of Health and Aged Care 1998. Australian Refined Diagnosis Related Groups, version 4.1. Definitions manual. Canberra: Department of Health and Aged Care.
- Department of Health and Aged Care 2000. National Hospital Cost Data Collection 1998–99 Final Report on the Development of AR-DRG 4.1 cost weights and analysis tables. Canberra: DHAC.
- Department of Primary Industries and Energy (DPIE) & Department of Human Services and Health (DHS) 1994. Rural, remote and metropolitan areas classification, 1991 Census edition. Canberra: AGPS.
- Duckett SJ, Jackson TJ 1998. Do the elderly cost more? Casemix funding for elderly patients in acute patient settings. *Nursing Older People: Issues and Innovations*. MacLennan and Petty.
- Gillett S, O'Connor-Cox D 1996. Exceptional case policy and paying for long stay patients in acute hospitals. Eighth Casemix Conference in Australia, Conference Proceedings. Canberra: Commonwealth Department of Human Services and Health.
- Hindle D 1999. Product costing in Australia hospitals. A background guide to national costing work. Canberra: DHAC.
- National Centre for Classification in Health (NCCH) 1998. The international statistical classification of diseases and related health problems, 10th revision, Australian modification (IDC-10-AM). First edition. Sydney: University of Sydney.
- National Centre for Classification in Health (NCCH) 2000. The international statistical classification of diseases and related health problems, 10th revision, Australian modification (IDC-10-AM). Second edition. Sydney: University of Sydney.
- National Health Data Committee (NHDC) 1999. National health data dictionary, Version 8.0. AIHW Cat. No. HWI 18. Canberra: AIHW.
- National Health Data Committee (NHDC) 2001. National health data dictionary, Version 10.0. AIHW Cat. No. HWI 30. Canberra: AIHW.
- National Health Ministers' Benchmarking Working Group (NHMBWG) 1996. First national report on health sector performance indicators: public hospitals – the state of play. Canberra: AIHW.
- National Health Ministers' Benchmarking Working Group (NHMBWG) 1998. Second national report on health sector performance indicators. Canberra: Department of Health and Family Services.
- National Health Ministers' Benchmarking Working Group (NHMBWG) 1999. Third national report on health sector performance indicators. Canberra: Department of Health and Aged Care.
- National Health Performance Committee (NHPC) 2000. Fourth national report on health sector performance indicators. A report to the Australian Health Ministers' Conference. Sydney: NSW Health Department.
- Organisation for Economic Cooperation and Development (OECD) 2000. OECD health data 2000: a software for the comparative analysis of 29 Countries (CD-ROM). Paris: OECD.
- Steering Committee for the Review of Commonwealth/State Service Provision (SCRCSSP) 1999. Report on government services, volume 1. Canberra: AusInfo.
- Steering Committee for the Review of Commonwealth/State Service Provision (SCRCSSP) 2000. Report on government services, volume 1. Canberra: AusInfo.

Steering Committee for the Review of Commonwealth/State Service Provision (SCRCSSP) 2001. Report on government services, volume 1. Canberra: AusInfo.

AIHW: Strong K, Trickett P, Titulaer I, Bhatia K 1998. Health in rural and remote Australia. Canberra: AIHW.

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