# ABSTRACT

This material provides documentation for users of the public use micro-data file for Community Health Center (CHC) data from the 2012 National Ambulatory Medical Care Survey (NAMCS). NAMCS is a national probability sample survey of visits to officebased physicians and CHC-based physicians and non-physician clinicians. Conducted by the National Center for Health Statistics, NAMCS is a component of the National Health Care Surveys which measure health care utilization across a variety of health care providers.

The CHC public use file includes visits to CHC physicians, physician assistants, nurse practitioners, and nurse midwives. Although visits to CHC physicians were included in the 2006-2011 NAMCS public use files, access to NAMCS data on visits to non-physician clinicians was only available through NCHS's Research Data Center. This documentation describes the first public use micro-data file for all visits to CHC physicians and non-physician clinicians.

In 2012, the NAMCS sampling design was changed to provide both national estimates and estimates for the 34 most populous states. To support state-specific estimates, the 2012 CHC sampling unit changed from CHC grantees and 'look-alikes' (CHCs that applied for Section 330 funding but were not funded) to CHC service delivery sites. The sample of CHCs increased from 104 CHC grantees and 'look-alikes' to 2,008 service delivery sites.

Section I, "Description of the National Ambulatory Medical Care Survey," includes information on the scope of the survey, the sample, field activities, data collection procedures, medical coding procedures, population estimates, and sampling errors. Section II provides a detailed description of the contents of each data record by location, and a list of physician specialties represented in the survey. Section III contains marginal data for selected items on the CHC visit file. The appendixes contain information on relative standard errors, instructions and definitions for completing the Patient Record form, and lists of codes used in the survey.

# **SUMMARY OF CHANGES FOR 2012**

Since 2006, national samples of community health center (CHC) physicians and non-physician clinicians (physician assistants, nurse practitioners, and nurse midwives) have provided data on CHC visits. Although visits to CHC physicians were included in the 2006-2011 NAMCS public use files, access to NAMCS data on visits to non-physician clinicians was only available through NCHS's Research Data Center.

The NAMCS CHC public use micro-data file marks the first release of CHC physician and non-physician clinician visit data from the 2012 NAMCS. There have been important changes to the 2012 survey which must be understood in order to correctly use and interpret the survey data. These include a new sampling design which, for the first time, makes it possible to produce estimates for 34 states, and the switch from a paper-and-pencil mode of data collection to a computer-assisted method. A number of survey questions were added or modified as well. Highlights are summarized below and explained in more detail in Section I.

## A. New sample design for CHC component of NAMCS

Starting in 2012, the traditional office-based component of NAMCS has been split from the CHC component. As a result, 2012 NAMCS web tables, Research Data Center files, and public use files only include visits to office-based physicians who were sampled from the master files of the American Medical Association and the American Osteopathic Association. If any of them saw patients in CHC locations, the CHC visits were excluded.

Although the CHC component of the 2012 NAMCS is a stand-alone sample survey of CHC providers, it was designed to complement the 2012 "traditional" sample of NAMCS office-based physicians. Similar to the office-based component of NAMCS, the CHC component provides estimates of CHC visits for the nation, as well as for the 34 most populous states. In the 2012 design, the sample of CHC grantees and 'look-alikes' (CHCs that applied for Section 330 funding but were not funded) which had been clustered in NAMCS geographic primary sampling units (PSUs) in the 2006-2011 design was replaced with a stratified list sample of CHC service delivery sites. The sampling strata were defined by 39 geographic areas consisting of the 34 most populous states and five Census division "remainders", or aggregates of the remaining states within their Census division. The sample size expanded 20-fold; from 104 CHC grantees and 'look-alikes' in 2011, to 2,008 CHC service delivery sites whose addresses could be verified. At each participating CHC service site, a sample of up to three clinicians (including any of the following types: physicians, nurse practitioners, physician assistants, and nurse midwives) was selected, and a sample of their scheduled visits during a randomly assigned week was selected.

While the overall number of CHC providers responding to the 2012 survey has increased substantially for the nation in general, the number of providers responding in each state/census division stratum can be low. NCHS considers an estimate to be reliable only if it is based on at least 30 sample records and the standard error is no more than 30 percent of the estimate. This is described in more detail in Section I and Appendix I.

## B. Comparability of 2012 NAMCS CHC Estimates with Previous Years

Prior to the 2006 survey year, NAMCS public use files include traditional NAMCS physicians only (that is, physicians sampled from the master files of the American Medical Association and the American Osteopathic Association), but if the physician saw patients in a CHC setting, those visits were also included in the file. For survey years 2006-2011, in addition to the 'traditional' physician sample, NAMCS included a panel of Community Health Centers (CHCs), with up to three providers (including physicians, physician assistants, nurse practitioners and nurse midwives) being sampled per CHC grantee or 'look-alike'. Data for visits to CHC-sampled physicians were included in NAMCS web tables, Research Data

Center files, and public use data files. Data for visits to CHC-sampled non-physician clinicians in 2006-2011 are available only in the NCHS Research Data Center.

Starting in 2012, the office-based component of NAMCS was split from the Community Health Center component. As a result, 2012 NAMCS web tables, Research Data Center files, and public use files only include visits to office-based physicians who were sampled from the master files of the American Medical Association and the American Osteopathic Association. If any of them saw patients in CHC locations, the CHC visits were excluded.

The new CHC public use micro-data file includes visits to CHC physicians and non-physician clinicians. Separating NAMCS data into files of office-based (i.e., no CHC panel physicians and no CHC visits) and CHC (CHC panel physicians and non-physician providers) data without any overlap allows NCHS to make more of the data available to researchers and allows for combination of files without duplication. But, for this reason, it is important to recognize two important points.

First, data from the 2012 office-based component of NAMCS are not strictly comparable with data from 2006-2011, when physicians who were sampled in the CHC stratum were included in the public files. Also, prior to 2006, (i.e. before CHCs were sampled as a separate stratum), physicians who were sampled from the master files of the American Medical Association or American Osteopathic Association but who saw patients in CHCs were not excluded nor were their CHC visits excluded from survey eligibility. For that reason, in all previous years, it is possible to have at least some (albeit generally a very small percentage of) CHC visits in the data. This is not the case beginning in 2012 when there are no CHC visits on the NAMCS public use file. To compare 2012 data with previous years of NAMCS data, it is necessary to restrict one's analysis to non-CHC visits prior to 2012. This is explained more fully in the 2012 NAMCS Public Use Data File Documentation.

But more importantly for users of the NAMCS CHC data file, the 2012 CHC data are not directly comparable with CHC data included in the 2006-2011 NAMCS public use files. The most obvious reason for that is the 2006-2011 NAMCS data only include physician visits at CHCs; if non-physician clinicians were also sampled, those visits were not included on the public use file. To include them, one must submit a proposal to the NCHS Research Data Center and fees are charged. Also to be kept in mind is the change in sampling design for 2012, both geographically and administratively, as described elsewhere in this documentation,

For example, the estimated number of CHC visits from the 2012 NAMCS CHC Public Use File is 65.3 million. Of this number, 40.7 million visits were to physicians, the rest were to non-physician clinicians. But non-physician clinicians were not included in the 2011 NAMCS Public Use File. The total number of CHC visits to physicians in 2011 was estimated at 25.5 million. Adding the estimate for non-physician clinician visits in 2011, the total rises to 39.7 million. Since researchers using public data only have access to CHC physician visits prior to 2012, the better comparison for them when trending is to select the physician visits from the 2012 file.

One difference noted between 2011 and 2012 was the increase in CHC visits in non-metropolitan statistical areas (MSA). Looking at the full file across both years (physicians and non-physician clinicians), the number of non-MSA visits increased from 16.8% in 2011 to 26.7% in 2012. Using physician visits only, the corresponding figures were 18.8% and 22.9%. The difference is even more striking when comparing non-physician clinician visits across the two years (from 13.2% to 32.8%). These changes may be related to the shift in sampling design from a sample clustered in geographic PSUs to a list sample of CHC facilities. The potential differences between CHC visits to physicians and to non-physician clinicians should be taken into account when analyzing CHC data in general. Combining the data may mask important differences between the two provider groups.

For 2012, estimates of visits to all physicians (traditional NAMCS physicians and physicians sampled within the stratum of CHCs) can be derived by combining physician data from the 2012 NAMCS CHC

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public use micro-data file with the traditional 2012 NAMCS public use micro-data file available at: <a href="http://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Datasets/NAMCS">http://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Datasets/NAMCS</a>. Physician visits can be selected from the NAMCS CHC file by using a conditional statement which limits records to those where SPECR< 96. Values of SPECR of 96, 97, or 98 indicate that a physician assistant, nurse practitioner, or nurse midwife was sampled, respectively.

Combining the 2012 NAMCS file with the 2012 NAMCS CHC file is made easier because both files are similar in file layout and variable list. Because the same automated Patient Record forms were used in both settings, most of the data items are also the same. Several variables pertaining to type of provider retain variable names from the 2012 traditional NAMCS file, but include additional information on type of sampled non-physician clinician (i.e., PHYSWT, SPECR\_14, SPECCAT, and MDDO). New items available only on the CHC public use file are included at the end of the file and include type of CHC sampled provider (SMPROV), imputed time spent with non-physician clinician (TIMECHC), and the impute flag for time spent with non-physician clinician (TIMECHCFL).

#### C. Mode of Data Collection

As mentioned above, NAMCS implemented computer-assisted data collection starting in 2012. This replaced the traditional pen-and-paper mode of data collection used since 1973. With the new method, Field Representatives (FRs) from the U.S. Census Bureau used laptops containing an automated version of each survey instrument to 1) select a sample of CHC providers (up to 3 of any of the following: physician, physician assistant, nurse practitioner, or nurse midwife), 2) conduct the induction interview with the sampled provider or his/her representative; 3) determine which visits to sample; and 4) abstract and record data from medical charts. The automated survey instruments were operationalized for field use by the Census Bureau, based on specifications provided by NCHS.

The U.S. Census Bureau has acted as the NAMCS data collection field agent since 1989 and the geographic areas (primary sampling units) in which they collected NAMCS data had remained the same through 2011. With the adoption of the state-based list sample, many geographic areas were sampled for the first time.

While the proportion of records obtained through abstraction by Census FRs had been increasing over the years, the data collection mode in 2012 relied heavily (97.3 percent of records collected) on Census FR abstraction rather than office staff. While a similar web-based tool or a laptop containing the automated survey instrument was available for physicians who requested it, this was seldom used (2.7 percent of records). Sampling and abstraction conducted by Census FRs had become, for the first time, the preferred mode of data collection.

Because of the important changes in sampling design and data collection for the 2012 NAMCS, extensive work had been done to compare 2012 NAMCS estimates with data from previous years. These efforts are described in detail in the 2012 NAMCS Public Use Data File Documentation. Researchers using the CHC data may wish to take note of these findings as they analyze the CHC data, as both components (traditional and CHC) shared similar survey instruments and may have been impacted in similar ways.

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# I. DESCRIPTION OF THE NATIONAL AMBULATORY MEDICAL CARE SURVEY COMMUNITY HEALTH CENTER COMPONENT

## A. INTRODUCTION

This micro-data file contains the first publically available data on visits to community health centers (CHCs) as part of the 2012 National Ambulatory Medical Care Survey (NAMCS). NAMCS is a national probability sample survey of visits to office-based physicians and community health center providers conducted by the Division of Health Care Statistics, National Center for Health Statistics (NCHS). Data in this file must be weighted to produce national and state estimates that describe the utilization of CHC medical care services in the United States.

In 2012, a total of 34,698 Patient Record forms (PRFs) were received from CHC physicians and nonphysician clinicians who participated in the CHC component of NAMCS. For a brief description of the survey design and data collection procedures pertaining to this component in particular, see below. A more detailed description of the overall 2012 NAMCS design, data collection procedures, and estimation process is <u>available</u>. Information on the origin of NAMCS and the previous design has been published (1,2).

Please note the following important points concerning analysis of NAMCS CHC data on this micro-data file:

#### ► PATIENT VISIT WEIGHTS

Micro-data file users should be fully aware of the importance and proper use of the two "patient visit weights" – one for producing national, regional, and divisional estimates, and one for producing state-based estimates. These should not be used interchangeably, and state-based estimates will not sum to national estimates because only the 34 most populous states were sampled in 2012. Information about the patient visit weights is presented on page 21. If more information is needed, the staff of the Ambulatory and Hospital Care Statistics Branch can be consulted by calling (301) 458-4600 during regular working hours.

#### ► RELIABILITY OF ESTIMATES

Users should also be aware of the reliability or unreliability of survey estimates, particularly smaller estimates. The National Center for Health Statistics considers an estimate to be reliable if it meets TWO conditions: it is based on at least 30 sample records and it has a relative standard error of 30 percent or less (i.e., the standard error is no more than 30 percent of the estimate). For more information, see Appendix I or contact the staff of the Ambulatory and Hospital Care Statistics Branch.

#### B. SCOPE OF THE SURVEY

The basic sampling unit for NAMCS CHCs is the provider-patient encounter or visit. In 2012, NAMCS included, in addition to the traditional sample of office-based physicians, a separate sample of CHC service delivery sites, based on information from the Health Resources and Services Administration and the Indian Health Service. From each sampled service delivery site, an additional sample of health care providers scheduled to see patients during the sample week was selected. Health care providers could include physicians as well as non-physician clinicians -- physician assistants, nurse practitioners, and nurse midwives. Visits to CHC physicians and non-physician clinicians are included in this 2012 public use micro-data file.

Types of contacts not included in the 2012 NAMCS CHC component were those made by telephone, those made outside the CHC site (for example, house calls), visits made in hospital settings, visits made in institutional settings by patients for whom the institution has primary responsibility over time (for example, nursing homes), and visits to CHCs made for administrative purposes only (for example, to leave a specimen, pay a bill, or pick up insurance forms).

## C. SAMPLING FRAME AND SIZE OF SAMPLE

The 2012 NAMCS CHC sampling frame was a list of Federally Qualified Health Center (FQHC) service delivery sites from the Health Resources and Services Administration's Bureau of Primary Health Care and the Indian Health Service. Three types of CHCs were eligible for NAMCS: CHCs that received Public Health Service Act, Section 330 funding, CHCs that applied for Section 330 funding but were not funded (also called "Look-alikes"), and urban Indian Health service outpatient clinics. Each participating CHC site provided a list of physicians and non-physician clinicians scheduled to see patients during the reporting period. This list became the frame for the selection of physicians and non-physician clinicians were eligible to be sampled.

The 2012 NAMCS sample included 2,008 CHC service delivery sites. Of the 1,300 in-scope CHC service delivery sites, 1,057 participated, yielding an unweighted response rate of 81.3 percent (80.5 percent, weighted). A total of 2,279 providers who were scheduled to see patients during the sample week were selected from the CHC service delivery sites. Of these, 1,570 participated. Data were collected for 34,698 visits, either by Census Field Representative abstraction (33,772 visits) or by providers/CHC staff (926 visits). In either case, an automated tool was used which replaced the traditional paper Patient Record Form (PRF). For the sake of simplicity, the abstracted records will continue to be described as PRFs in the survey documentation.

A total of 171 providers saw no patients during their assigned reporting period because of vacations, illness, or other reasons for being temporarily not in practice and hence did not provide any PRFs. Of the 1,752 providers for whom PRFs were abstracted, 1,399 participated fully or adequately (i.e. at least half of the PRFs expected, based on the total number of visits during the reporting week, were submitted), and 353 participated minimally (i.e., fewer than half of the expected PRFs were submitted). The unweighted provider visit response rate was 68.9 percent (69.9 percent, weighted), based on the number of full responders and those who saw no patients during their sample week. The overall unweighted two-stage sampling response rate was 56.0 percent (56.2 percent, weighted). Response rates are shown in Table 1.

## D. SAMPLE DESIGN

For the first stage, sampling (hard) strata were defined by Census division, and the 34 most populous states. The 34 most populous states were targeted for individual visit estimation. These include California, Texas, New York, Florida, Illinois, Pennsylvania, Ohio, Michigan, New Jersey, Georgia, North Carolina, Virginia, Washington, Massachusetts, Indiana, Arizona, Tennessee, Missouri, Maryland, Wisconsin, Minnesota, Colorado, Alabama, South Carolina, Louisiana, Kentucky, Oregon, Oklahoma, Connecticut, Iowa, Mississippi, Arkansas, Kansas, and Utah. The remaining 16 states and the District of Columbia were grouped according to their U.S. Census Bureau divisions into five larger areas called 'division remainders'. These are composed of Maine, New Hampshire, Rhode Island, and Vermont from the New England Division; Nebraska, North Dakota, and South Dakota from the West North Central Division; Delaware, the District of Columbia, and West Virginia from the South Atlantic Division; Idaho, New Mexico, Montana, Nevada, and Wyoming from the Mountain Division; and Alaska and Hawaii from the Pacific Division. There are nine Census Bureau Divisions in all. All states were included separately

Table 1. Number of in-scope sample of community health center (CHC) service delivery sites in total sample, CHC response rates, number of sampled CHC providers and provider response rate, number of participating providers and participation rate by division and selected states: National Ambulatory Medical Care Survey, 2012

Division/State	CHC service delivery sites sampled(1)	In-scope CHC service delivery sites	Partici- pating CHC service delivery sites	CHC service delivery site response rate: unweighted (weighted)	In-scope CHC providers	Responding CHC providers(2)	CHC provider response rate: unweighted (weighted)	Two-stage sample response rate: unweighted (weighted) (3)	Partici- pating CHC providers(4)	Two-stage sample participation rate: unweighted(5)
Total	2,008	1,300		81.3(80.5)	2,279	1,570		56.0(56.2)	1,923	68.6
New England										
CT MA	54 54	25	18	72.0(72.0) 80.0(80.0)	36	23	63.9(71.3) 78.8(84.8)	46.0(51.4) 63.0(67.8)	31	62.0 70.3
ME, NH, RI, VT	27	20	15		33		75.0(74.8)	53.6(53.4)	23	60.3
Middle Atlantic										
NJ	54	37	32	86.5(86.5)	73	51	69.9(72.9)	60.4(63.0)	65	77.0
NY	54	33	21	63.6(63.6)	47	28	59.6(58.2)	37.9(37.0)	38	51.5
PA	54	45	35	77.8(77.8)	79	49	62.0(57.3)	48.2(44.5)	63	62.0
East North Central										
IL	55	25	20	80.0(80.9)	36	31	86.1(73.0)	68.9(59.0)	32	71.1
IN	54	32	30		78			64.9(73.3)	73	87.7
МІ	54	33	28	84.8(84.8)	67	48	71.6(73.3)	60.8(62.2)	62	78.5
ОН	54	41	33	80.5(80.5)	81	60	74.1(76.8)	59.6(61.8)	73	72.5
WI	54	21	17	81.0(81.0)	42	23	54.8(27.5)	44.3(22.3)	31	59.8
West North Central										
IA	54	26	26	0)	54			94.4(95.6)	53	98.1
KS	46	31	31	0)	65	47	72.3(78.5)	72.3(78.5)	55	84.6
MN MO	54 54	40	34	85.0(85.0) 70.0(70.0)	62 46	50	80.6(85.7) 71.7(77.2)	68.5(72.9) 50.2(54.1)	56	76.8
NE, SD, ND	19	12	11		26	1		59.9(67.2)	22	77.6
South Atlantic										
FL	54	28	24	85.7(85.7)	58	45	77.6(76.5)	66.5(65.5)	51	75.4
GA	54	38	31	81.6(81.6)	53		75.5(79.2)	61.6(64.6)	44	67.7
MD	54	42	36	85.7(85.7)	63	35	55.6(49.2)	47.6(42.2)	48	65.3
NC	54	35	27	77.1(77.1)	61	36	59.0(70.4)	45.5(54.3)	55	69.6
SC	54	35	28	80.0(80.0)	55	46	83.6(76.3)	66.9(61.0)	51	74.2
VA	54	33	30		75	1	65.3(60.9)	59.4(55.4)	60	72.7
WV, DE, DC	54	28	20	71.4(71.4)	42	19	45.2(61.1)	32.3(43.7)	29	49.3
East South Central										
AL	54	39		00.1/00.1)	51		F1 0/64 4)	41.0(50.0)	40	64.4
KY KY	54	39	26	82.1(82.1) 68.4(68.4)	51	18	51.0(64.4) 32.7(27.9)	41.8(52.9) 22.4(19.1)	26	32.3
MS	54	37	31	83.8(83.8)	54		96.3(98.0)	80.7(82.1)	53	82.2
TN	54	34	27	79.4(79.4)	53	30	56.6(61.6)	45.0(48.9)	46	68.9
West South Central										
AR	54	47	28	59.6(59.6)	50	35	70.0(71.7)	41.7(42.7)	41	48.9
LA	54	44	37		80		63.8(56.4)	53.6(47.4)	59	62
ОК	54	36	35	97.2(97.2)	74	54	73.0(77.1)	70.9(75.0)	60	78.8
TX	54	43	38	88.4(88.4)	89	62	69.7(72.4)	61.6(64.0)	72	71.5
Mountain										
27				76.9(76.9)			71 4/50 53	E4 0/50 01		
AZ CO	54 54	39 24		79.2(79.2)	77	1	71.4(68.0) 82.9(83.4)		66	65.9
UT	34	24		90.5(90.5)	41		85.4(90.0)		39	
NV,NM,ID,MT,WY	43	32		81.3(86.6)	58		65.5(58.8)		48	67.2
Pacific										
LUCITIC										
	53	43	36	83.7(83.7)	87	57	65.5(70.7)	54.9(59.2)	75	72.2
CA OR	54	30		86.7(86.7)	64		42.2(50.8)		44	59.6

NOTE: Division and State represent location of sampled CHC delivery site. A total of 34 states were targeted for separate estimation. States not targeted for separate estimation were grouped into 'division remainders' and sampled accordingly.

 The survey sampling frame consists of Federally Qualified Health Center (FQHC) service delivery sites included in lists obtained from the Health Resources and Services Administration's Bureau of Primary Health Care and the Indian Health Service.
 Responding CHC providers are providers for whom at least one-half of their expected number of Patient Record forms were completed (full responders) and also include providers who saw no patients at their sample CHC site during their that site's sample week.
 The two-stage sample response rate is the product of the CHC service delivery site response rate multiplied by the CHC provider

(3) The two-stage sample response rate is the product of the the service derivery site response rate.
(4) Participating CHC providers are providers for whom at least one Patient Record form was completed (full and minimal responders) and also include providers who saw no patients at their sample CHC site during their that site's sample week.
(5) Two-stage sample participation rate is the number of participating CHC providers divided by number of in-scope CHC providers, multiplied by the CHC delivery site response rate.

from the remaining four Divisions (Middle Atlantic, East North Central, East South Central, and West South Central). Therefore, there are a total of 39 geographical areas composed of states and division remainders which make up the United States.

For the first stage sample, CHC sites were given a random number and assigned to their respective sampling strata. Within each sampling stratum, a systematic random sample of sites was selected from lists in which the sites were sorted by CHC type (urban Indian Health Service outpatient clinics, 330 grantees, and "look-alikes") and within CHC type, by the random numbers assigned to them. Sampled sites that were known in advance to be "migrant" (sites that were open only in harvest season to serve migrants who work in the harvests) were randomly assigned to weeks in the seasons (primarily July through September) when they were scheduled to be open for business. The remaining sampled CHC sites were divided into 52 random subsamples of approximately equal size, and each subsample was randomly assigned to 1 of the 52 weeks in the survey year. Within each sampled site, a systematic random sample of up to three providers (physicians, physician assistants, nurse practitioners, or nurse midwives) was selected from among those who were expected to see visits at the site during the site's assigned week,

The final stage consisted of selecting a systematic random sample of patient visits seen by the sampled provider at the site during the assigned week. For the first time, this sampling was mainly conducted by Census Field Representatives, although providers or their service sites could select the samples, if desired. The sampling rate varied for this final step from a 100-percent sample for providers expected to see few visits to a 10-percent sample for providers expected to see very large numbers of visits during the CHC site's assigned survey week as determined in a presurvey interview. The method by which the sampling rate was determined is available (4).

## E. POPULATION FIGURES

The base population used in computing annual visit rates is presented in <u>tables 2-5</u> of the 2012 NAMCS Public Use Data File Documentation. The denominators used in calculating 2012 visit rates for age, sex, race, ethnicity, and geographic region are Census 2010-based postcensal estimates of the civilian noninstitutional population of the United States. The population estimates are special tabulations developed by the Population Division, U.S. Census Bureau, from the July 1, 2012 set of state population estimates by age, sex, race, and ethnicity.

Population estimates by metropolitan statistical area (MSA) status are based on estimates of the civilian noninstitutionalized population from the 2012 National Health Interview Survey (NHIS), National Center for Health Statistics, compiled according to the December 2009 Office of Management and Budget definition of core-based statistical areas. See <a href="https://www.census.gov/programs-surveys/metro-micro.html">https://www.census.gov/programs-surveys/metro-micro.html</a> for more information about MSA definitions.

Estimates of visit rates for metropolitan and non-metropolitan statistical areas from 2003-2012 may differ somewhat from those reported in 2002 and previous years because of methodological differences in how the denominators were calculated. In survey years 1995-2005, the NHIS used metropolitan areas as defined by the Office of Management and Budget, June 30, 1993. In survey years 1994-2002, the NHIS used 1990-based Census estimates as controls. Because NAMCS used Census 2000-based population estimates beginning in 2001, adjustments needed to be made to the MSA figures obtained from the NHIS in 2001 and 2002. For 2010, 2011, and 2012, special tabulations were obtained from the Office of Analysis and Epidemiology, NCHS, where each year of data was compiled according to the December 2009 OMB definition of core-based statistical areas. The 2010 NHIS estimates were further adjusted based on the 2010 population estimates obtained from the Census Bureau (which were based on Census 2000). For 2011 and 2012, the NHIS estimates were adjusted based on the 2011 and 2012 population estimates were adjusted based on the 2011 and 2012 population estimates were adjusted based on the 2011 and 2012 population estimates were adjusted based on the 2011 and 2012 population estimates were adjusted based on the 2011 and 2012 population estimates were adjusted based on the 2011 and 2012 population estimates were adjusted based on the 2011 and 2012 population estimates were adjusted based on the 2011 and 2012 population estimates were adjusted based on Census 2000).

Population estimates for race groups in the 2012 NAMCS are based on the 2010 U.S. Census in which respondents were able to indicate more than one race category. Since 2001, the denominators used for calculating race-specific visit rates in NAMCS reports reflect multiple-race reporting. Specific race denominators reflect persons with a single race identification, and a separate denominator is available for persons with more than one race designation.

Data indicate that multiple races are recorded for a patient less frequently in medical records compared to their numbers in the general population. The 2012 population estimates indicate that 2.4 percent of the total population identify themselves as being of multiple races. In contrast, multiple race patients account for just 0.5 percent of weighted NAMCS CHC visits (based on known race data only). (REMINDER: Since the 2009 NAMCS, NAMCS data only include imputed values for the race categories White, Black, and Other; see 2009 or 2010 NAMCS Public Use File Documentation Summary of Changes for more information.) This is roughly the same percentage reported in the 2010 NAMCS and earlier years. The difference may exist because abstractors are less likely to know and record the multiple race preference of the patient. It suggests that the race population rates calculated for 2012 may be slight overestimates for the single race categories and slight underestimates for the multiple race category, but it should be kept in mind that race data are missing for approximately one-fifth of 2012 NAMCS CHC records overall.

## F. FIELD ACTIVITIES

The first contact with the sampled CHC service delivery site is through a letter from the Director, NCHS. After the CHC site administrator receives the introductory letter (along with letters from professional medical societies that endorse NAMCS), the Field Representative (FR) telephones the CHC site administrator to establish basic eligibility and to schedule an appointment. At the appointment, the FR explains the survey to the CHC site administrator and to any staff who may be involved in creating a frame of the CHC site's providers, and selecting a sample of providers. The decision is also made regarding who will perform the visit sampling and data abstraction. Also at the initial visit, the FR obtains the practice characteristics of the CHC service delivery site, including identifying physicians, physician assistants, nurse practitioners, and nurse midwives. If the CHC staff are performing data abstraction, the FR contacts the CHC site office just before, during and after the reporting week to remind them about the survey and to answer any questions that may arise. After abstraction has been completed, the provider is given a certificate of appreciation for her or his participation.

## G. DATA COLLECTION

In 2012, NAMCS switched from its traditional paper and pencil mode of data collection to an automated survey tool. The adoption of computer-assisted data collection meant that most of the data collection and data processing systems developed over the years had to be redesigned. One of the first steps was the development of specifications, in conjunction with the U.S. Census Bureau, which detailed how each survey item would appear in the automated tool. This included wording, answer choices, variable length, skip patterns, and range checks. Numerous help screens were also created to provide field representatives with additional information to aid in data abstraction. Hard and soft edits were incorporated into the automated tool. Soft edits prompted field staff to double check a questionable entry but allowed them to proceed if the entry was thought to be correct, whereas hard edits resulted in strict range restrictions. Nevertheless, the first year of automated data collection was challenging as unforeseen problems arose related to various aspects of data collection and processing.

The automated survey tool was accessible either by Census laptop or by web portal. In past years, data collection for NAMCS was expected to be carried out by the physician (or in the case of CHCs, it could also be non-physician clinicians) or the health care provider's staff, but, over time, abstraction from medical charts by Census field representatives became the predominant mode. For 2012, Census FR abstraction using laptop computers and the automated instrument became the preferred mode for data collection. For providers who preferred to do their own data collection, a web portal containing a modified version of the automated tool was available, or a Census laptop could be left behind for provider use. In

2012, 97.3 percent of CHC sample records were obtained through Census FR abstraction, and 2.7 percent were obtained by physician/medical staff reporting.

CHC site staff were instructed to keep a daily listing of all patient visits for sample providers during the assigned reporting week using an arrival log, optional worksheet, or similar method. This list was the sampling frame to indicate the visits for which data were to be recorded. It was to include both scheduled and unscheduled patients, but not cancellations or no-shows. Visits were selected from the list either by Census FRs or medical staff using a random start and a predetermined sampling interval based on the provider's estimated visits for the week and the number of days the provider was expected to see patients that week. In this way, a systematic random sample of visits was obtained. The sampling procedures were designed so that about 30 electronic Patient Records would be completed during the assigned reporting week. This was intended to minimize the data collection workload and maintain equal reporting levels among sample providers regardless of the CHC site's visit volume.

Data for sampled visits were recorded on laptops using the automated survey tool which emulated the traditional survey instrument, the Patient Record form. The 2012 Patient Record "Sample Card" showing the data items included in the survey is available at the Ambulatory Health Care Data website: <a href="http://www.cdc.gov/nchs/ahcd/ahcd\_survey\_instruments.htm#namcs">http://www.cdc.gov/nchs/ahcd/ahcd\_survey\_instruments.htm#namcs</a>. Terms and definitions relating to the automated Patient Record are included in Appendix I.

## H. CONFIDENTIALITY

In April 2003, the Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA) was implemented to establish minimum Federal standards for safeguarding the privacy of individually identifiable health information. No personally identifying information, such as patient's name or address or Social Security number, is collected in NAMCS. Data collection is authorized by Section 306 of the Public Health Service Act (Title 42, U.S. Code, 242k). All information collected is held in the strictest confidence according to law [Section 308(d) of the Public Health Service Act (42, U.S. Code, 242k)] and the Confidential Information Protection and Statistical Efficiency Act (Title 5 of PL 107-347). The NAMCS protocol has been approved by the NCHS Research Ethics Review Board annually starting in February 2003. Waivers of the requirements to obtain informed consent of patients and patient authorization for release of patient medical record data by health care providers were granted.

In the Spring of 2003, NAMCS implemented additional data collection procedures to help providers assure patient confidentiality. Census Bureau Field Representatives were trained on how the Privacy Rule allows providers to make disclosures of protected health information without patient authorization for public health purposes and for research that has been approved by a Research Ethics Review Board. Providers were encouraged to accept a data use agreement between themselves and CDC/NCHS, since the Privacy Rule allows providers to disclose limited data sets (i.e., data sets with no direct patient identifiers) for research and public health purposes if such an agreement exists.

Assurance of confidentiality was provided to all community health center providers according to Section 308 (d) of the Public Health Service Act (42 USC 242m). Strict procedures were utilized to prevent disclosure of NAMCS data. All information which could identify the physician was confidential and was seen only by persons engaged in NAMCS, and was not disclosed or released to others for any other purpose. Names or other identifying information for individual patients were not removed from the physician's office.

Prior to release of the public use data file, NCHS conducts extensive disclosure risk analysis to minimize the chance of any inadvertent disclosure. Based on research conducted by NCHS for 2012 NAMCS CHC sites, and because of the availability for the first time of state-level estimates, certain variables were either removed from the file altogether (urban-rural status of patient's ZIP code) or subject to masking in some cases (metropolitan statistical area status, and provider's diagnosis). Furthermore, outlier values for

certain variables (age, age of pregnant patient, height, weight, and number of past visits in last 12 months) were top coded in accordance with NCHS confidentiality requirements. Masking was performed in such a way to cause minimal impact on the data; data users who wish to use unmasked data can apply to the NCHS Research Data Center.

#### I. DATA PROCESSING

#### 1. Edits

Once electronic data were collected by the Census Bureau, a number of steps were required for data processing. Specifications for checking, configuring, and transmitting the data files were developed by NCHS and applied by the Census Bureau. Data files were transmitted either to NCHS for further processing, or to SRA International, Durham, North Carolina. At NCHS, the data underwent multiple consistency checks and review of verbatim entries. SRA edited and coded verbatim entries which required medical coding (patient's reason for visit, provider's diagnosis, and procedures). For the first time, medication editing and coding were performed entirely at NCHS by the NAMCS Drug Database Coordinator.

#### 2. Quality Control

All SRA medical coding and keying operations were subject to quality control procedures. The contractor randomly selected a 10 percent sample of records which were independently recoded and compared. Differences were adjudicated by a quality control supervisor with error rates reported to NCHS. Coding error rates for the 10 percent sample ranged between 0.3 and 1.0 percent. (It should be noted that the method of calculating error rates changed in 2012; in previous years, the error rate was calculated against the entire database rather than the 10 percent sample.)

#### 3. Adjustments for Item Nonresponse

Unweighted item nonresponse rates exceeded 5.0 percent for the following data items:

Ethnicity - 17.9 percent

Race - 21.0 percent

Is female patient pregnant? – 15.3 percent of visits by females of childbearing age If pregnant, what is gestation week? – 23.9 percent of visits where pregnancy was reported Expected primary source of payment for this visit - recoded variable based on hierarchy - 8.6 percent Does patient use tobacco? – 17.7 percent

Is this injury/poisoning intentional or unintentional? – 34.9 percent of injury/poisoning related visits Are you the patient's primary care provider? – 15.6 percent

Was patient referred for this visit? – 24.6 percent of visits not made to patient's primary care provider How many past visits in last 12 months? – 12.8 percent of visits, 14.7 percent of visits by established patients

[Note: "Have your or anyone in your practice seen patient before?" (SENBEFOR) is imputed when missing, and, when this occurs, "Number of visits in past 12 months" (PASTVIS) is imputed together with it; this means that records can be imputed as SENBEFOR=No, in which case PASTVIS would be imputed to -7 or Not Applicable],

Asthma severity - 8.0 percent of visits where asthma was reported as a chronic condition Asthma control – 8.9 percent of visits where asthma was reported as a chronic condition Stage of patient's cancer – 82.1 percent of visits where cancer was reported Was biopsy provided? – 25.0 percent of visits with biopsy reported as either ordered or provided Was colonoscopy provided? – 25.3 percent of visits with colonoscopy reported as either ordered or provided PAGE 14

Was excision provided? -67.1 percent of visits where excision was reported as either ordered or provided Was sigmoidoscopy provided? -44.4 percent of visits where sigmoidoscopy was reported as either ordered or provided

Time spent with physician – 46.2 percent of visits where a physician was seen

Time spent with non-physician clinician (physician assistant nurse practitioner/nurse midwife) – 40.7 percent

When do you intend to first apply for 'Meaningful Use of Health IT' incentives – 15.7 percent of visits where plans to apply were reported

Does your practice have this computerized capability and how often is it used: providing standard order sets related to a particular condition or procedure? – 5.3 percent

If practice has computerized capability for viewing lab results, can the EHR/EMR automatically graph a specific patient's lab results over time – 11.7 percent

Does your practice have this computerized capability and how often is it used: viewing data on quality of care measures? – 8.8 percent

Does your practice have this computerized capability and how often is it used: reporting clinical quality measures to federal or state agencies (such as CMS or Medicaid)? – 11.8 percent

Does your practice have this computerized capability and how often is it used: generating lists of patients with particular health conditions? - 5.9 percent

Does your practice have this computerized capability and how often is it used: electronic reporting to immunization registries? - 6.1 percent

If practice shares any patient health information electronically (not fax) with other providers, including hospitals, ambulatory providers, or electronically (not fax) labs, do you share any of the previously mentioned types of information (lab results, imaging reports, patient problem lists, medication lists, medication allergy lists) using a Summary Care Record? – 13.7 percent

Roughly, what percent of your patient care revenue comes from:

Medicare – 20.1 percent Medicaid – 19.7 percent Private Insurance – 19.9 percent Patient Payments – 19.9 percent Other – 20.0 percent

Roughly, what percentage of the patient care revenue received by this practice comes from managed care payments? - 25.9 percent

Roughly, what percent of your patient care revenue comes from each of the following methods of payment:

Fee-for-service – 32.8 percent Capitation – 36.1 percent Case rates – 36.2 percent Other – 36.1 percent

If currently accepting new patients into practice, which of the following types of payment do you accept: Capitated private insurance – 8.4 percent Non-capitated private insurance – 6.9 percent Private insurance – 6.5 percent Workers compensation – 6.3 percent No charge - 7.2 percent

Denominators for the above rates were adjusted to account for skip patterns on the data collection forms. For example, only visits to physicians who accepted new patients were included in the calculation of whether the physician accepted new patients with Medicaid, etc. If there is physician nonresponse to the initial item and this is also taken into account, nonresponse rates for the secondary item will be somewhat higher.

Some missing data items were imputed by randomly assigning a value from a Patient Record form with similar characteristics. Imputations, in general, were based on physician specialty, geographic region, and 3-digit ICD-9-CM codes for primary diagnosis. Race and ethnicity were imputed using a model-based, single, sequential regression imputation method. The model for imputing race and ethnicity included the following: Census variables for ZIP code level race and ethnicity population estimates, duration of visit, patient age, patient sex, whether the visit occurred in an MSA, physician specialty recode, whether the visit included hypertension as a current diagnosis/chronic condition, diagnosis group, major reason for visit, and an indicator for patient ZIP code or provider ZIP (the latter was used for the Census variables if patient ZIP was not available). Also in 2012, time spent with physician and time spent with non-physician clinicians were each imputed using a similar model-based, single, sequential regression imputation method.

The following variables were imputed: birth year (0.1 percent), sex (0.7 percent), ethnicity (17.9 percent), race (21.0 percent), have you or anyone in your practice seen patient before? (1.5 percent), if yes, how many past visits in last 12 months? (14.7 percent of visits by established patients), time spent with physician (40.7 percent of visits where a physician was seen), and time spent with non-physician clinician (46.2 percent of visits seen by a physician assistant, nurse practitioner, or nurse midwife). Blank or otherwise missing responses are so noted in the data.

## J. MEDICAL CODING

The Patient Record form contains several medical items which use three separate coding systems. As stated previously, the following items -- patient's reason for visit, physician's diagnosis, and procedures -- were transmitted to SRA International, Inc., Durham, North Carolina for processing. The medication item was coded by the NAMCS Drug Database Coordinator. These items and their coding systems are described briefly below.

1. <u>Patient's Complaint(s), Symptoms(s) or Other Reason(s) for this Visit</u>: Information on patient's reason for visit was collected in the automated Patient Record and coded according to <u>A Reason for Visit Classification for Ambulatory Care</u> (RVC) (5). The updated classification is available (6), and the list of codes is shown in Appendix II. The classification was updated to incorporate several new codes as well as changes to existing codes. The system continues to utilize a modular structure. The digits 1 through 8 precede the 3-digit RVC codes to identify the various modules as follows:

#### Prefix Module

- "1" = Symptom module
- "2" = Disease module
- "3" = Diagnostic, screening, and preventive module
- "4" = Treatment module
- "5" = Injuries and adverse effects module
- "6" = Test results module
- "7" = Administrative module
- "8" = Uncodable entries
- "-9" = Special code = blank

Up to three reasons for visit were coded from the reason for visit item in sequence; coding instructions for this item are contained in the Reason for Visit Classification and Coding Manual (6).

2. <u>Provider's Diagnosis for this Visit</u>: Diagnostic information on the automated Patient Record was coded according to the <u>International Classification of Diseases</u>, <u>9th Revision</u>, <u>Clinical Modification</u> (ICD-9-CM) (7). The ICD-9-CM codes are provided in two formats, character and numeric. Please see page 34 in the Codebook section for information on the background, purpose, and appearance of the numeric recodes. The rest of this paragraph describes the format of the character version.

The character version ICD-9-CM codes are not prefixed or zerofilled on the data file. For example, 38100 = 381.00 = Acute nonsuppurative otitis media, unspecified.

There is an implied decimal between the third and fourth digits. For inapplicable fourth or fifth digits, a dash has been inserted.

For example, 4011- = 401.1 = Essential hypertension, benign.

Supplementary classification codes are not prefixed or zerofilled.

For example, V700- = V70.0 = Routine general medical examination at a health care facility

In addition to the diagnostic codes from the ICD-9-CM the following unique codes in the diagnostic fields were developed by AHCSB staff:

- V990- = noncodable diagnosis, insufficient information for coding, illegible diagnosis
- V991- = left before being seen, patient walked out, not seen by doctor, left against medical advice
- V992- = transferred to another facility, sent to see specialist
- V993- = HMO will not authorize treatment
- V997- = entry of "none," "no diagnosis," "no disease," "healthy"
- -9 = blank

A maximum of three diagnoses were coded in sequence. Coding instructions concerning diagnoses are contained in the NAMCS Coding Notebook, updated annually (8).

3. <u>Services</u>: The "Services" item allowed for the coding of up to 9 open-ended fields for procedures, which were classified and coded by SRA International, Durham, NC, according to the <u>International</u> <u>Classification of Diseases</u> (ICD-9-CM), using the procedure codes in Volume III.

NOTE: The "Services" item in the automated Patient Record combines the previously separate NAMCS items of "Diagnostic/Screening Services", "Non-Medication Treatment" and "Health Education". As stated earlier, it uses a checkbox format under the sub-headings of Examinations, Blood Tests, Imaging, Other Tests and Procedures, Non-Medication Treatment, and Health Education/Counseling. It also allows for the coding of up to 9 open-ended fields in the last section, Other Services Not Listed. The combined format for all of these items was already being used in the data files beginning with 2009 data, achieved through data processing methods as explained in the 2009 public use file documentation. The 2012 instrument reflects the combined format, which should eliminate much of the ambiguity found during data processing in past years where the same procedure was sometimes reported by survey participants under different items.

Character format codes have an implied decimal between the second and third position and do not use prefixes or zerofills. Codes without an applicable 4th digit have a dash inserted. Please note that, as with the diagnosis codes described above, the file also contains numeric recodes for procedures. These are described in the Record Format section.

For 2012, new checkboxes were added to the computerized tool, based on commonly reported writein procedures from previous years of data. This measure was intended to facilitate reporting and reduce costs associated with medical coding of text entries. The result of this change is a decrease in the number of visits with write-in procedures, with a resulting loss of detail.

4. <u>Medications & Immunizations</u>: The NAMCS drug data collected in item 10 have been classified and coded using the entry name (the entry made on the Patient Record form) according to a unique classification scheme developed at NCHS (9). The medical classification system of drugs by entry name uses a five-digit coding scheme which is updated regularly to include new products. It includes the following special codes:

-9 = blank 99980 = unknown entry, other 99999 = illegible entry

For 2012, up to 10 medications could be recorded for each visit. A list of drug codes by entry name is included in Appendix III.

In addition to drugs coded by entry name, this file contains the following drug information:

a. Generic drug code: Beginning with the 2006 data release, drugs are coded in terms of their generic components and therapeutic classifications using Lexicon Plus<sup>®</sup>, a proprietary database of Cerner Multum, Inc., also used by the National Health and Nutrition Examination Survey, NCHS. The Lexicon Plus is a comprehensive database of all prescription and some nonprescription drug products available in the U.S. drug market.

In accordance with the license agreement, NCHS publications, tabulations, and software applications should cite the Multum Lexicon as the source and basis for the coding and classification of NAMCS drug data. For additional information on the Multum Lexicon Drug Database, please refer to the following Web site: <u>http://www.multum.com/Lexicon.htm</u>.

Beginning with the 2006 data release, all drug codes based on entry name (using NCHS' classification system as cited above) were also assigned a unique generic drug code from Multum's Lexicon Drug Database, whenever possible. The structure of the Multum database is such that multiple ingredient drugs are assigned a single generic drug code encompassing all of a drug's ingredients rather than being assigned generic drug codes for each ingredient, as in past years of NAMCS drug data.

For example, prior to 2006, if Tylenol No. 3 was reported in NAMCS, it was assigned a drug entry code of 32920 to reflect the entry of Tylenol No. 3. Using the NCHS generic classification, it was also given a code of 51380 in the generic code field to represent a combination product, and then received separate ingredient codes for acetaminophen and codeine. Under Multum, there is a single generic code that reflects the combination of acetaminophen with codeine. The format of the generic drug code (now called DRUGID rather than GEN) also changed starting in 2006. Rather than the 5 digit numeric code used prior to 2006, the generic drug code is 6 digits, beginning with the letters "a", "c" or "d". Codes beginning with the letter "n" were also used, starting with 2009 data. All Multum codes begin with the letter "d", but there were some drug names reported by NAMCS participants that were not found in the Lexicon Drug Database. These were assigned unique drug codes beginning with an "a" where a drug's ingredients could be determined, or a "c" in the case where a drug's ingredients could not be determined for 2006-2007. Beginning with 2008 data, "n" codes have been used to code all drugs newly appearing in the NAMCS data for which a code could not be found in Multum. The variables DRUGID1 through DRUGID10 reflect the generic codes for each drug reported.

b. Prescription status code: A code designed to identify the legal status (prescription or nonprescription) of the drug entry.

c. Controlled substance status code: A code used to denote the degree of potential abuse and federal control of a drug entry.

d. Composition status code: A code used to distinguish between single-ingredient and combination drugs.

e. Therapeutic category code: In data years prior to 2006, a 4-digit code was used to identify up to three therapeutic classes to which the drug entry might belong. These were based on the standard drug classifications used in the National Drug Code Directory, 1995 edition (10).

However, as mentioned above, Multum's therapeutic classification system is now being used. The Multum Lexicon provides a 3-level nested category system that assigns a therapeutic classification to each drug and each ingredient of the drug (e.g., for naproxen: the broadest category is central nervous system agents [level 1]; the more detailed category is analgesics [level 2]; and the most detailed category is nonsteroidal anti-inflammatory agents [level 3]). Not all drugs have three classification levels; some may only have two [e.g. for digoxin: cardiovascular agents [level 1]; inotropic agents [level 2]), others only have one. See Appendix III for the complete Multum category scheme.

Each drug may have up to four therapeutic categories on the data file. The variables RX1CAT1 through RX10CAT4 reflect the unique Multum drug categories for a particular drug; these are character values with codes from '001' through '341'. **This variable will always show the most detailed therapeutic level available of a particular drug.** For example, psychotherapeutic agents in Multum are further classified into a second more detailed level as antidepressants or antipsychotics. Antidepressants are further classified into seven subcategories (miscellaneous antidepressants, SSRI antidepressants, tricyclic antidepressants, and SSNRI antidepressants); antipsychotics are further classified into five subcategories. For a drug categorized as a tricyclic antidepressant, it would have a drug category code of '209', reflecting the Level 3 code. Other drugs may have only two levels available, such as immunologic agents. There are seven level 2 categories of immunologic agents, and no further breakdowns into a third level in the Multum system. Therefore, RX1CAT1 would reflect only a second level code in that case. So, using RX1CAT1-RX10CAT4 will allow one to identify the most specific level of a drug, but **will not, by itself, identify whether that code reflects the first, second, or third level**.

In order to understand each level in terms of the Multum hierarchy, we have also placed on the file additional variables that show the full first, second, and third levels, if applicable, for each drug category for each drug. For example, in the case of the tricyclic antidepressant mentioned earlier, RX1CAT1='307'. But there are three additional variables corresponding to that drug's first therapeutic category. RX1V1C1 (meaning Drug 1, Level 1 of Therapeutic Category 1) would be '242' (psychotherapeutic agents), RX1V2C1 (Drug 1, Level 2 of Therapeutic Category 1) would be '249' (antidepressants), and RX1V3C1 (Drug 1, Level 3 of Therapeutic Category 1) would be '307' (tricyclic antidepressants). If there were no second or third level for a particular category, the entry would be blank (' '). This is repeated for each of the drug's maximum of four therapeutic categories.

The three levels can easily be concatenated by data users if they wish to obtain a complete code showing the full level structure applicable to each drug's therapeutic categories. An advantage of having separate levels is that it allows data users to aggregate drugs at any level desired. SAS code is provided at the website for micro-data users who wish to group therapeutic categories in various ways.

All drugs were coded using Multum drug categories, even those drugs not found in Multum's drug database. "Unspecified" drugs were assigned to their respective therapeutic category (e.g., hormones – unspecified: category id=97, category name=hormones). Drugs that could not be assigned to any drug entry name (MED1-10 = 99980, 99999) were not assigned a therapeutic drug category.

In some cases, NCHS was able to categorize a drug's therapeutic class at the first or second Multum level, but not at the more detailed level. When this occurred, the undetermined levels are designated as '999' in the data.

Multum uses a "combination" category for some multiple ingredient drugs. These include antihypertensive combinations, antiasthmatic combinations, upper respiratory combinations, psychotherapeutic combinations, bronchodilator combinations, sex hormone combinations, skeletal muscle relaxant combinations, and narcotic analgesic combinations. This categorization may be sufficient for certain analyses but not for others because it lacks information about the therapeutic effect of the individual ingredients that make up the combination. For example, the drug HYDROCHLOROTHIAZIDE; LOSARTAN is identified as an antihypertensive combination. Therefore, we know that this drug has an antihypertensive drug effect. However, based on this combination category we do not know that the drug's single ingredients have the therapeutic effects of a diuretic and angiotensin II inhibitor, which is relevant for some analyses.

As a result, NCHS decided that, in addition to assigning therapeutic categories to each drug, a separate file would be provided listing the ingredients for each drug along with the therapeutic classes for each ingredient. In the case of single ingredient drugs, the ingredient therapeutic categories would be the same as the drug therapeutic categories. This separate downloadable file (the current version is DRUG\_INGREDIENTS\_2012 and can be found under the "DRUGS" folder in the Downloadable Documentation section of the website:

<u>ftp://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Dataset\_Documentation/NAMCS/drugs/</u>) can be matched to the main file using the DRUGID code. For each DRUGID on the main file, the supplemental file contains up to 5 ingredients and up to 3 therapeutic category codes for each ingredient. In past years, codes used to identify the active generic ingredients of combination drugs were included on the data file.

**IMPORTANT**: In 2012, we have continued to update and revise the drug characteristics in our ambulatory care drug database, which underwent substantial revision in 2002. From 2002-2005, each drug entry had up to three therapeutic classes associated with it, compared with a single therapeutic class in prior years. These factors made trend analysis more problematic, and the solution was to provide researchers with a Drug Characteristics file, which was updated annually, at our website. The characteristics from this file (prior to Multum adoption) could be applied by matching on drug codes to previous years of data in order to get the most accurate results when doing analysis of drug trends. A SAS program for applying drug characteristics from the then-current drug database to previous years of NAMCS data was also made available for downloading. These files are all still available on the NAMCS website, but are mainly of use only if the researcher is limiting analysis to years of data prior to 2006 and wishes to retain the old National Drug Code Directory therapeutic categories.

Starting with the 2006 survey, however, with the adoption of the Multum Lexicon for coding drugs according to generic ingredients and therapeutic categories, a new solution for trend analysis was necessary. Therefore, along with the 2006 data file release, we provided a separate downloadable mapping file (MEDCODE\_DRUGID\_MAP\_2006), which allows data users to match all of the drug codes used in previous years (for example, MED1-MED8 in 2005) with the corresponding Multum DRUGID code for generic composition of the drug and its corresponding therapeutic categories. Once that has been accomplished, users can also, if they wish, match to the drug ingredient file as described above. **The mapping file is updated for each new year.** Researchers should keep in mind, however, that in cases where drug characteristics have legitimately changed over the years (e.g., moving from prescription to

non-prescription status), using the current updated version of the drug characteristics will overwrite all of the previous characteristics with current ones.

For users who are interested in analyzing drug data, one method involves the isolation of those records with drugs, or drug mentions, and the creation of a separate data file of drug mentions. Each automated Patient Record for 2012 can have up to ten drug mentions recorded, so whatever file is created would need to include all of them. This method can be used for obtaining estimates of drug mentions, but is not recommended for variance estimation. Rather, the structure of the visit file should be kept intact when estimating variance. In order to do this, estimates of drug mentions can be obtained by creating a new weight variable (called DRUGWT in this example). This variable is created by multiplying PATWT (the patient visit weight) by NUMMED (the number of medications recorded at the sampled visit) or DRUGWT=PATWT\*NUMMED. DRUGWT can then be used in place of PATWT to weight one's data; it produces the estimated number of drug mentions rather than visits. (See Record Format for more on PATWT and NUMMED.)

This documentation contains some marginal data for drug mentions. Also provided are drug coding lists in Appendix III. To facilitate searching for drugs in Appendix III, it is recommended that researchers utilize the online search function in Adobe Acrobat with the pdf document, or visit the survey website and use the online drug database under Research Tools (<u>http://www.cdc.gov/nchs/ahcd/ahcd\_database.htm</u>). Should the data user need additional assistance in analyzing data on drug mentions, the staff of the Ambulatory and Hospital Care Statistics Branch is available by calling (301) 458-4600. Our website can be accessed at: <u>https://www.cdc.gov/nchs/ahcd/index.htm</u>

## K. ESTIMATION PROCEDURES

CHC statistics produced from the 2012 NAMCS were derived by a multistage estimation procedure. The procedure produces essentially unbiased estimates and has three components: 1) inflation by reciprocals of the probabilities of selection, 2) adjustment for nonresponse, and 3) weight smoothing. Each of these components is described below.

#### 1. Inflation of Reciprocals by Sampling Probabilities

Because the survey utilized a three-stage sample design, there were three probabilities:

- a) the probability of selecting the CHC site within sample stratum (state/census division);
- b) the probability of selecting a provider within the CHC site; and
- c) the probability of selecting a patient visit within the provider's scheduled visits.

The last probability was defined to be the exact number of visits seen by the provider at the CHC site during the site's specified reporting week divided by the number of Patient Record forms completed. All weekly estimates were inflated by a factor of 52 to derive annual estimates.

#### 2. Adjustment for Nonresponse

Estimates from NAMCS CHC data were adjusted to account for in-scope providers who failed to provide PRFs for visits by patients they did see at the sampled CHC site during their sample week. For 2012, these adjustments account for nonresponse by provider type, Census division, and metropolitan statistical area status. In addition, adjustments for state-level estimates also account for nonresponse within state.

#### 3. Weight Smoothing

Occasionally there are a few sample providers whose final visit weights are large relative to those for the rest of the sample. When this happens, the weights for visits are smoothed within groups defined by provider type (physician, non-physician clinician), state/Census division, and CHC type. The "excess" in

the extreme weights for a smoothing group was shifted to the providers and visits with smaller weights within the same group so that the estimated total providers and visits within that group after weight smoothing are the same as they were before the weight smoothing.

## L. SAMPLING ERRORS

Procedures for calculating sampling errors as well as estimates of standard errors of statistics derived from NAMCS are described elsewhere (2, 11) as well as in Appendix I of this document.

## M. PATIENT VISIT WEIGHT

The 2012 NAMCS CHC data file contains two "patient visit weights" – one (PATWT) for producing national, regional and divisional estimates from sample data, and the other (PATWTST) for producing state estimates from sample data. These are vital components of the survey data and micro-data file users should understand how to use them correctly.

The statistics contained on the micro-data file reflect data concerning only a sample of CHC patient visits, not a complete count of all of the CHC visits that occurred in the United States. Each record on the data file represents one CHC visit in the sample of 34,698 visits. In order to obtain visit estimates from sample data, each record is assigned an inflation factor called the "patient visit weight." By aggregating the patient visit weights contained in the PATWT variable on the 34,698 sample records for 2012, the user can obtain the estimated sum of 65,332,722 CHC visits made in the United States during 2012. By aggregating the patient visit weights contained in the PATWTST variable within each of the 34 individual states targeted for separate estimates, data users can obtain the estimated totals of office visits made in those states.

The traditional weighting variable (PATWT) and the state weighting variable (PATWTST) are not interchangeable. That is, the state weighting variable is only to be used for individual state estimates and will not sum to national estimates because only 34 states were targeted for state-level estimation. Furthermore, PATWTST should not be used to make divisional estimates, even within the additional 5 'division remainders', which contain the smallest 16 states and the District of Columbia, grouped within their Census divisions. PATWT should be used to produce those estimates.

Users may notice that the PATWTST variable contains miniscule weights (0.00001) for visits that were sampled within division remainders rather than by state. These include the New England, West North Central, South Atlantic, Mountain and Pacific Division Remainders. This was done to ensure that such visits were not dropped from analysis due to having non-positive weights. If these visits were dropped, as occurs with SUDAAN software, variance estimation would be affected.

The marginal tables on pages 105-111 contain data on numbers of records for selected variables as well as the corresponding national estimated average number of CHC visits and drug mentions during 2012 obtained by aggregating the "patient visit weights" on those records. Similar tables are also provided for provider-level estimates.

## N. PROVIDER CODE and PATIENT CODE

The purpose of these codes is to allow for greater analytical depth by permitting the user to link individual Patient Record forms on the NAMCS-CHC public use file with individual CHC providers. This linkage will enable users to conduct more comprehensive analysis without violating the confidentiality of patients or providers.

To uniquely identify a record, both the provider code and the patient code must be used. Patient codes are merely a sequential numbering of the visits recorded by the provider and alone will not uniquely identify visit records. In order to do so, both the unique 4-digit provider code and the 3-digit patient code must be used.

## O. USE OF THE PROVIDER-LEVEL WEIGHT

A provider-level weight (PHYSWT) is included on the public use file. This weight allows users to calculate provider-level estimates for CHC physicians, nurse practitioners, physician assistants, and nurse midwives by using the SMPROV variable to identify type of provider. There is one weight for each provider type which appears on the first visit record only for that provider. When running an analysis of provider-level characteristics using PHYSWT, it is recommended to select only those records where PHYSWT is greater than 0. This will result in correct sample counts of providers with visit records, which is useful for assessing reliability. Weighted estimates will be correct either way, because of the one weight per provider format.

It should be kept in mind, however, that estimates at the provider level generated using PHYSWT only reflect those CHC providers who saw patients in their sample week. A total of 171 CHC providers participated in the 2012 NAMCS but did not see any patients at the CHC site where they were selected during that site's assigned week due to being on vacation or other reasons. While estimates made with PHYSWT are unbiased for total numbers of providers, the estimated distributions by provider characteristics may be biased due to the omission of such providers, if such providers differ from those who provided visit records. Provider-level estimates from the NAMCS CHC visit-level file are better for analyzing visit characteristics at the provider level, because such characteristics would not be biased by the omission of physicians who didn't see patients. For example, one could examine average time spent with providers across provider type rather than simply across visits. This type of analysis is slightly complicated; a description along with sample SAS code is available at the Ambulatory Health Care Data website.

For more information, contact the Ambulatory and Hospital Care Statistics Branch at 301-458-4600.

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## II. CODEBOOK AND PHYSICIAN SPECIALTY LIST

## A. CODEBOOK

Number of records = 34,698

This section consists of a detailed breakdown of each data record. For each item on the record, the user is provided with a sequential item number, field length, file location, and brief description of the item, along with valid codes. Most data are from the automated Patient Record form (PRF). Some information is obtained by recoding selected data from this source.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DATE OF VISIT
1	2	1-2	[VMONTH] MONTH OF VISIT
			01-12: January-December
2	1	3	[VDAYR] DAY OF WEEK OF VISIT
			1 = Sunday 2 = Monday 3 = Tuesday 4 = Wednesday 5 = Thursday 6 = Friday 7 = Saturday
3	3	4-6	[AGE] PATIENT AGE (reported in years or derived from date of visit and date of birth)
			This variable has been top coded in accordance with NCHS confidentiality requirements.
			000 = Under 1 year 001-086 = 1-86 years 087 = 87 years or older
4	1	7	[AGER] AGE RECODE
			1 = Under 15 years 2 = 15-24 years 3 = 25-44 years 4 = 45-64 years 5 = 65-74 years 6 = 75 years and over

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
5	3	8-10	[AGEDAYS] AGE IN DAYS FOR PATIENTS LESS THAN ONE YEAR OF AGE (derived from date of visit and date of birth)
			-7 = Not applicable 0-364 (0 = Less than one day old)
6	1	11	[SEX] SEX
			1 = Female 2 = Male
7	2	12-13	[PREGNANT] IF FEMALE. IS PATIENT PREGNANT?
			-9 = Blank -8 = Unknown -7 = Not Applicable 1 = Yes 2 = No
8	2	14-15	[GESTWK] IF PATIENT IS PREGNANT, SPECIFY GESTATION WEEK
			-9 = Blank -8 = Unknown -7 = Not Applicable 2-42
9	2	16-17	[ETHUN] UNIMPUTED ETHNICITY
			This variable is NOT imputed. Ethnicity data were missing for 17.9 percent of NAMCS CHC visit records. -9 = Blank 1 = Hispanic or Latino 2 = Not Hispanic or Latino
10	1	18	[ETHIM] IMPUTED ETHNICITY
			Missing data for ethnicity were imputed for this variable. Ethnicity data were missing for 17.9 percent of NAMCS CHC visit records. 1 = Hispanic 2 = Not Hispanic

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PAGE 26	6		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
11	2	19-20	[RACEUN] UNIMPUTED RACE
			This variable is NOT imputed. Race data were missing for 21.0 percent of NAMCS CHC visit records. -9 = Blank 1 = White 2 = Black or African American 3 = Asian 4 = Native Hawaiian or Other Pacific Islander 5 = American Indian or Alaska Native 6 = More than one race reported
12	1	21	[RACER] IMPUTED RACE
			Missing data for race were imputed for this variable. Race data were missing for 21.0 percent of NAMCS CHC visit records. 1 = White 2 = Black 3 = Other
13	1	22	[RACERETH] IMPUTED RACE/ETHNICITY
			Missing race and ethnicity data were imputed for this variable. Both race and ethnicity were missing for 10.9 percent of records. Race alone was missing for an additional 10.1 percent, and ethnicity alone was missing for an additional 7.1 percent of records.
			NOTE: In survey years prior to 2009, the categories were Non- Hispanic White, Non-Hispanic Black, Hispanic, Asian, Native Hawaiian/Other Pacific Islander, American Indian or Alaska Native, and Multiple Races. Starting in 2009, the decision was made to reformulate this item. Hispanic can now be of any race.
			1 = White Only, Non-Hispanic 2 = Black Only, Non-Hispanic 3 = Hispanic 4 = Other Race/Multiple Race, Non-Hispanic
14	1	23	[NOPAY] NO RESPONSE TO EXPECTED SOURCE(S) OF PAYMENT FOR THIS VISIT
			0 = At least one source of payment was reported 1 = All expected source of payment boxes are blank
15	1	24	[PAYPRIV] EXPECTED SOURCE OF PAYMENT: PRIVATE INSURANCE
			0 = No 1 = Yes

ITEM NO.	FIELD LENGTH	FILE H LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
16	1	25	[PAYMCARE] EXPECTED SOURCE OF PAYMENT: MEDICARE
			0 = No 1 = Yes
17	1	26	[PAYMCAID] EXPECTED SOURCE OF PAYMENT: MEDICAID or CHIP
			0 = No 1 = Yes
18	1	27	[PAYWKCMP] EXPECTED SOURCE OF PAYMENT: WORKER'S COMPENSATION
			0 = No 1 = Yes
19	1	28	[PAYSELF] EXPECTED SOURCE OF PAYMENT: SELF-PAY
			0 = No 1 = Yes
20	1	29	[PAYNOCHG] EXPECTED SOURCE OF PAYMENT: NO CHARGE/CHARITY
			0 = No 1 = Yes
21	1	30	[PAYOTH] EXPECTED SOURCE OF PAYMENT: OTHER
			0 = No 1 = Yes
22	1	31	[PAYDK] EXPECTED SOURCE OF PAYMENT: UNKNOWN
			0 = No 1 = Yes

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PAGE 28	3		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
23	2	32-33	[PAYTYPER] RECODED PRIMARY EXPECTED SOURCE OF PAYMENT FOR THIS VISIT (Recoded from 'Expected Sources of Payment for this Visit' using this hierarchy of payment categories: Medicare, Medicaid or CHIP, Private Insurance, Worker's Compensation, Self-Pay, No Charge/Charity, Other, Unknown)

IMPORTANT: For more information about earlier versions of the variable PAYTYPE, and variable PAYTYPER which used a different hierarchy of payment categories, please see the 2009 NAMCS Public Use Data File Documentation.

-9 = Blank	
-8 = Unknown	
1 = Private insurance	

- 2 = Medicare
- 3 = Medicaid or CHIP
- 4 = Worker's Compensation
- 5 = Self-pay
- 6 = No charge/charity
- 7 = Other

24 2 34-35 [USETOBAC] TOBACCO USE

- -9 = Blank
- -8 = Unknown
- 1 = Not current
- 2 = Current

INJURY VARIABLES

The collection of injury data changed in 2012, as described in more detail in the 2012 NAMCS Public Use <u>File Documentation</u>. There are now two separate injury-related variables, one which asks if the visit was related to injury/trauma, poisoning, or adverse effects of medical care. The second item asks about intentionality. This format is different than previous years when one item was used, which combined whether the visit was related to injury/poisoning/adverse effect and what the intent was. Also, in past years, 'poisoning' was not listed as a separate category.

For trending purposes, the variables INJURY, INJR1, and INJR2 are still available in 2012. The differences between these variables are explained in more detail in the 2010 NAMCS Public Use Data File Documentation. Briefly, INJURY reflects the broad definition of injury used traditionally in NAMCS. INJR1 has been recoded from INJURY and uses a narrower definition of injury which was recommended by subject matter experts in the NCHS Office of Analysis and Epidemiology (OAE). It is based mainly on first-listed reason for visit and first-listed diagnosis and does not include adverse effects of medical treatment. INJR2 is based on the narrower NCHS OAE definition, but includes second- and third-listed reasons and diagnoses, not just first-listed.

The INJDET variable from previous years, as already mentioned, is no longer collected. However, a similar item (INJDET\_TRD) was created during data processing using data from the new injury items (INJPOISAD and INTENTO), as well as Reason for Visit and Diagnosis. In addition, each record contained verbatim entries which are not included in the public use file but which were used to evaluate

2012 NA	2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION				
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES		
				_	

whether a visit was injury related. INJDET\_TRD can be compared with INJDET from previous years. Similarly, two recoded variables INJDETR1\_TRD and INJDETR2\_TRD were created, which can be trended with INJDETR1 and INJDETR2 from previous years. INJDETR1\_TRD uses the narrower OAE definition, comparable to INJR1, and INJDETR2\_TRD uses the OAE definition used with INJR2.

As mentioned previously, INJPOISAD and INTENTO replaced the previous INJDET variable on the survey instrument. INJPOISAD is provided here in three versions for consistency with the other injury items. The first version (INJPOISAD) is edited according to the broad injury definition used with NAMCS data and is comparable with INJURY and INJDET\_TRD. INJPOISADR1 uses the narrower OAE definition comparable to INJR1 and INJDETR1\_TRD. INJPOISADR2 uses the same definition as INJR2 and INJDETR2\_TRD.

25	2	36-37	[INJURY] Is this visit related to an injury, poisoning, or adverse effect of medical treatment? – Based on Injury, Reason for Visit, and Diagnosis items, using the broad definition of injury traditionally used with NAMCS data.
			-9 = Blank -8 = Unknown 0 = No 1 = Yes
26	1	38	[INJR1] Is this visit related to an injury or poisoning? Recoded version #1 (recoded from Injury, Reason for Visit, and Diagnosis items).
			0 = No (includes blank and unknown; can be crossed with INJURY to see where those occur) 1 = Yes

This variable uses a definition of injury developed in conjunction with NCHS' Office of Analysis and Epidemiology and is based on **first-listed reason for visit and first-listed diagnosis** only. Note that adverse effects of medicinal drugs and adverse effects or complications of medical and surgical care are not included in this definition. However, that information, based on **first-listed reason for visit and first-listed diagnosis**, can be found in category 4 of the INJDETR1\_TRD item.

27	1	39	[INJR2] Is this visit related to an injury or poisoning? Recoded version #2 (recoded from Injury, Reason for Visit, and Diagnosis items).
			0 = No (includes blank and unknown; can be crossed with INJURY to see where these occur) 1 = Yes

This variable uses a definition of injury developed in conjunction with NCHS' Office of Analysis and Epidemiology and is based on **any-listed reason for visit and any-listed diagnosis**. Note that adverse effects of medicinal drugs and adverse effects or complications of medical and surgical care are not included in this definition. However, that information, based on **any-listed reason for visit and any-listed diagnosis**, can be found in category 4 of the INJDETR2\_TRD item.

PAGE 30	)		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION	
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES	
28	2	40-41	[INJPOISAD] Is this visit related to an injury/trauma, poisoning, or adverse effect of medical treatment? (2012 is the first year for this format on the automated Patient Record form.)	
			-9 = Blank -8 = Unknown 1 = Yes, injury/trauma 2 = Yes, poisoning 3 = Yes, adverse effect of medical treatment 4 = No	
29	1	42	[INJPOISADR1] Is this visit related to an injury/trauma, poisoning, or adverse effect of medical treatment? (Recoded version #1, based on first-listed Reason for Visit and Diagnosis.)	
			<ul> <li>1 = Yes, injury/trauma</li> <li>2 = Yes, poisoning</li> <li>3 = Yes, adverse effect of medical treatment</li> <li>4 = No (includes blank and unknown; can be crossed with INJURY to see where those occur)</li> </ul>	
INJPOISADR1 uses a definition of injury developed in conjunction with NCHS' Office of Analysis and Epidemiology and is based on first-listed reason for visit and first-listed diagnosis only. In addition, first-listed reason for visit and first-listed diagnosis codes were used to edit checkbox 3.				
30	1	43	[INJPOISADR2] Is this visit related to an injury/trauma, poisoning, or adverse effect of medical treatment? (Recoded version #2, based on any-listed (first, second, or third) Reason for Visit and Diagnosis.)	
			1 = Yes, injury/trauma	

- 2 = Yes, poisoning
- 3 = Yes, adverse effect of medical treatment
- 4 = No (includes blank and unknown; can be crossed with INJURY to see where those occur)

INJPOISADR2 uses a definition of injury developed in conjunction with NCHS' Office of Analysis and Epidemiology and is based on any-listed reason for visit and any-listed diagnosis. In addition, any-listed reason for visit and any-listed diagnosis codes were used to edit checkbox 3.

- 31 2 44-45 [INTENT] Is this injury/poisoning unintentional or intentional?
  - -9 = Blank -8 = Unknown
  - 1 = Unintentional
  - 2 = Intentional

ITEM	FIELD LENGTH	FILE		
NO.	LENGIH	LOCATION	[ITEM NAME], DESCRIPTION, AND CODES	
32	2	46-47	[INJDET_TRD] Is this visit related to any of the following:	
			ata processing using INJURY, INTENT, Reason for Visit, and verbatim entries on the record.	
			<ul> <li>-9 = Blank</li> <li>-8 = Unknown</li> <li>-5 = Intentionality does not apply</li> <li>1 = Unintentional injury/poisoning</li> <li>2 = Intentional injury/poisoning</li> <li>3 = Injury/poisoning – unknown intent</li> <li>4 = Adverse effect of medical/surgical care or adverse effect of medicinal drug</li> <li>5 = None of the above</li> <li>8 = More than one box is marked</li> </ul>	
33	1	48	[INJDETR1_TRD] (INJURY/POISONING/ADVERSE EFFECT – Recoded version #1).	
			Is this visit related to any of the following:	
This variable uses a definition of injury developed in conjunction with NCHS' Office of Analysis and Epidemiology and is based on first-listed reason for visit and first-listed diagnosis only. In addition, first-listed reason for visit and first-listed diagnosis codes were used to edit checkbox 4.				
			<ul> <li>1 = Unintentional injury/poisoning</li> <li>2 = Intentional injury/poisoning</li> <li>3 = Injury/poisoning – unknown intent</li> <li>4 = Adverse effect of medical/surgical care or adverse effect of medicinal drug</li> <li>5 = None of the above</li> </ul>	

 
 34
 1
 49
 [INJDETR2\_TRD] (INJURY/POISONING/ADVERSE EFFECT – Recoded version #2).

Is this visit related to any of the following:

This variable uses a definition of injury developed in conjunction with NCHS' Office of Analysis and Epidemiology and is based on **any-listed reason for visit and any-listed diagnosis**. In addition, **any-listed reason for visit and any-listed diagnosis** codes were used to edit checkbox 4.

- 1 = Unintentional injury/poisoning
- 2 = Intentional injury/poisoning
- 3 = Injury/poisoning unknown intent
- 4 = Adverse effect of medical/surgical care or adverse effect of medicinal drug
- 5 = None of the above

PAGE 32			2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			PATIENT'S REASON(S) FOR VISIT (See page 15 in Section I and Coding List in Appendix II.)
35	5	50-54	[RFV1] REASON # 1
			-9 = Blank 10050-89990 = 1005.0-8999.0
36	5	55-59	[RFV2] REASON # 2
			-9 = Blank 10050-89990 = 10050.0-8999.0
37	5	60-64	[RFV3] REASON # 3
			-9 = Blank 10050-89980 = 1005.0-8998.0
38	2	65-66	[PRIMCARE] ARE YOU THE PATIENT'S PRIMARY CARE PHYSICIAN/PROVIDER?
			-9 = Blank -8 = Unknown 1 = Yes 2 = No
39	2	67-68	[REFER] WAS PATIENT REFERRED FOR THIS VISIT?
			-9 = Blank -8 = Unknown -7 = Not applicable 1 = Yes 2 = No
40	1	69	[SENBEFOR] HAS THE PATIENT BEEN SEEN IN YOUR PRACTICE BEFORE?
			1 = Yes, established patient 2 = No, new patient

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
41	3	70-72	[PASTVIS] HOW MANY PAST VISITS IN THE LAST 12 MONTHS?
			Top code values for each specialty group are the following:
			SPECR_14 = 1 (General and family practice) primary care - 30 SPECR_14 = 3 (Internal Medicine) - 30 SPECR_14 = 4 (Pediatrics) - 25 SPECR_14 = 5 (General surgery) - 8 SPECR_14 = 6 (Obstetrics-Gynecology) - 31 SPECR_14 = 11 (Psychiatry) - 58 SPECR_14 = 13 (Ophthalmology) - 31 SPECR_14 = 15 ("All other" specialty group) - 83 SPECR_14 = 96 (Nurse practitioner) - 42 SPECR_14 = 97 (Physician assistant) - 32 SPECR_14 = 98 (Nurse midwife) - 27
			-7 = Not applicable (new patient)
42	3	73-74	[MAJOR] MAJOR REASON FOR THIS VISIT
			<ul> <li>-9 = Blank</li> <li>1 = New problem (&lt;3 mos. onset)</li> <li>2 = Chronic problem, routine</li> <li>3 = Chronic problem, flare-up</li> <li>4 = Pre-/Post-surgery</li> <li>5 = Preventive care (e.g. routine prenatal, well-baby, screening, insurance, general exams)</li> </ul>
43			PROVIDER'S DIAGNOSES (See page 16, Section 1 for explanation of coding.)
			Note: Provider's diagnosis was modified slightly on 0.6 percent of records due to confidentiality requirements.
43	5	75-79	[DIAG1] DIAGNOSIS # 1 (ICD-9-CM) There is an implied decimal between the third and fourth digits; for inapplicable fourth or fifth digits, a dash is inserted.
			-9 = Blank 0010[-] - V829[-] = 001.0[0]-V82.9[0] V990- = Noncodable, insufficient information for coding, illegible V991- = Left before being seen; patient walked out; not seen by doctor; left against medical advice V992- = Transferred to another facility; sent to see specialist V993- = HMO will not authorize treatment V997- = Entry of "none," "no diagnosis," "no disease," or "healthy"

PAGE 34			2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
44	2	80-81	[PRDIAG1] IS DIAGNOSIS #1 PROBABLE, QUESTIONABLE, OR RULE OUT?
			-7 = Not applicable 1 = Yes 2 = No
45	5	82-86	[DIAG2] DIAGNOSIS # 2 (ICD-9-CM) There is an implied decimal between the third and fourth digits; for inapplicable fourth or fifth digits, a dash is inserted. See DIAGNOSIS #1 for details.
46	2	87-88	[PRDIAG2] IS DIAGNOSIS #2 PROBABLE, QUESTIONABLE, OR RULE OUT?
			-7 = Not applicable 1 = Yes 2 = No
47	5	89-93	[DIAG3] DIAGNOSIS # 3 (ICD-9-CM) There is an implied decimal between the third and fourth digits; for inapplicable fourth or fifth digits, a dash is inserted. See DIAGNOSIS #1 for details.
48	2	94-95	[PRDIAG3] IS DIAGNOSIS #3 PROBABLE, QUESTIONABLE, OR RULE OUT?
			-7 = Not applicable 1 = Yes 2 = No
			NUMERIC RECODES FOR DIAGNOSES

The following items were included on the public use file to facilitate analysis of visits using ICD-9-CM codes. Prior to the 1995 public use file, all ICD-9-CM diagnosis codes on the NAMCS micro-data file were converted from alphanumeric to numeric fields according to the following coding conventions: A prefix of '1' was added to ICD-9-CM codes in the range of 001.0[-] through 999.9[-]. A prefix of '20' was substituted for the letter 'V' for codes in the range of V01.0[-] through V82.9[-]. Inapplicable fourth or fifth digits were zerofilled. This conversion was done to facilitate analysis of ICD-9-CM data using Ambulatory Care Statistics software systems. Specific coding conventions are discussed in the public use documentation for each data year.

In 1995, however, the decision was made to use actual ICD-9-CM codes on the public use data file. Codes were not prefixed, and a dash was inserted for inapplicable fourth or fifth digits. This had the advantage of preserving actual codes and avoiding possible confusion over the creation of some artificial codes due to zerofilling.

It had come to our attention in the past that some users of NAMCS data find it preferable to use the numeric field recodes rather than the alphanumeric fields in certain data applications. Therefore, since data year 1997, we have included numeric recodes for ICD-9-CM diagnosis codes on our datasets. These are in addition to the actual codes for these diagnoses which appear earlier on the public use file. Users can make their own choice about which format best suits their needs.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
49	6	96-101	[DIAG1R] DIAGNOSIS # 1 (Recode to Numeric Field)
			-9 = Blank 100200-208290 = 001.0[0]-V82.9[0] 209980 = Noncodable, insufficient information for coding, Illegible 209910 = Left before being seen; patient walked out; not seen by doctor; left against medical advice 209920 = Transferred to another facility; sent to see specialist 209930 = HMO will not authorize treatment 209970 = Entry of "none," "no diagnosis," "no disease," or "healthy"
50	6	102-107	[DIAG2R] DIAGNOSIS # 2 (Recode to Numeric Field) Same as DIAG1R.
51	6	108-113	[DIAG3R] DIAGNOSIS # 3 (Recode to Numeric Field) Same as DIAG1R.
			REGARDLESS OF THE DIAGNOSES WRITTEN ABOVE, DOES THE PATIENT NOW HAVE:
			0 = No 1 = Yes
52 53	1 1	114 115	[ARTHRTIS] Arthritis [ASTHMA] Asthma
54	2	116-117	[ASTH_SEV] Asthma severity -9 = Blank -7 = Not applicable 1 = Intermittent 2 = Mild persistent 3 = Moderate persistent 4 = Severe persistent 5 = Other, specify 6 = None recorded
55	2	118-119	[ASTH_CON] Asthma control -9=Blank -7=Not applicable 1=Well-controlled 2=Not well controlled 3=Very poorly controlled 4=Other, specify 5=None recorded
56	1	120	[CANCER] Cancer

PAGE 36			2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
57	2	121-122	[CASTAGE] Stage of patient's cancer
			-9 = Blank -8 = Unknown stage -7 = Not applicable 0 = In situ 1 = Stage I 2 = Stage III 3 = Stage III 4 = Stage IV
58 59 60 61 62 63 64 65 66 67 68	1 1 1 1 1 1 1 1 1	123 124 125 126 127 128 129 130 131 132 133	[CEBVD] Cerebrovascular disease [COPD] Chronic obstructive pulmonary disease [CRF] Chronic renal failure [CHF] Congestive heart failure [DEPRN] Depression [DIABETES] Diabetes [HYPLIPID] Hyperlipidemia [HTN] Hypertension [IHD] Ischemic heart disease [OBESITY] Obesity [OSTPRSIS] Osteoporosis
69	1	134	[NOCHRON] None of the above
			0 = "None" not checked 1 = "None" checked 2 = Entire item blank
70	2	135-136	[TOTCHRON] TOTAL NUMBER OF CHRONIC CONDITIONS
			-9 = Entire item blank 0-14
			VITAL SIGNS
71	1	137	[HTTAKE] Was height measurement reported? (Created during data processing based on reported data.)
			0 = No 1= Yes
72	2	138-139	[HTIN] PATIENT'S HEIGHT (inches) Height has been top coded in accordance with NCHS confidentiality requirements.
			-9 = Blank 72 = 72 inches or more (top code for females) 77 = 77 inches or more (top code for males)

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
73	1	140	[WTTAKE] Was weight measurement reported? (Created during data processing based on reported data.)
			0 = No 1= Yes
74	3	141-143	[WTLB] PATIENT'S WEIGHT (pounds) Weight has been top coded in accordance with NCHS confidentiality requirements.
			-9 = Blank 4-369 370 = 370 lbs. or more
75	8	144-151	[BMI] Body-Mass Index This was calculated from Patient's Height and Weight during data processing. It contains a decimal point and up to 2 decimal places. BMI was not calculated for pregnant females or patients under age 2. Also, BMI was recalculated to reflect topcoded values for height and weight.
			-9 = Missing data -7 = Not calculated 8.36-87.59
76	1	152	[TEMPTAKE] Was temperature reported? (Created during data processing based on reported data.)
			0 = No 1= Yes
77	4	153-156	[TEMPF] Temperature (Fahrenheit) There is an implied decimal between the third and fourth digits.
			-9 = Blank 900 – 1070 = 90.0-107.0 Fahrenheit
78	1	157	[BLODPRES] Was blood pressure reported? (Created during data processing based on reported data.)
			0 = No 1= Yes
79	3	158-160	[BPSYS] Blood pressure – systolic
			-9 = Blank 62 - 241

PAGE 3	8		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
80	3	161-163	[BPDIAS] Blood pressure – diastolic -9 = Blank 22-109 998 = P, Palp, DOP, or DOPPLER
			SERVICES
81	1	164	[SERVICES] Were any examinations, blood tests, imaging, other tests, non-medication treatment or health education ordered or provided at this visit?
			NOTE: In previous years, diagnostic and screening services were collected in one question on the Patient Record Form, non- medication services in another, and health education in a third. As described in the annual public use file documentation since 2009, the diagnostic and screening services item was combined with the non-medication services item to create a combined services item during data processing. For 2012, all services were combined into one item on the automated Patient Record Form.
			0 = No services were reported 1 = At least one service was reported
			0 = No, 1 = Yes for each category below
			Examinations:
82 83 84 85 86 87 88 89 90	1 1 1 1 1 1 1 1	165 166 167 168 169 170 171 172 173	[BREAST] Breast exam [DEPRESS] Depression screening exam [FOOT] Foot exam [PHYSICAL] General physical exam [NEURO] Neurologic exam [PELVIC] Pelvic exam [RECTAL] Rectal exam [RETINAL] Retinal exam [SKIN] Skin exam
			Blood Tests:
91 92 93 94 95	1 1 1 1	174 175 176 177 178	[CBC] CBC (Complete blood count) [GLUCOSE] Glucose [HGBA] HgbA1C (Glycohemoglobin) [CHOLEST] Lipid profile [PSA] PSA (Prostate specific antigen)
			Imaging:
96	1	179	[ANYIMAGE] This item was created during data processing and indicates whether any of the imaging boxes were checked.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
97 98 99 100 101 102 103	1 1 1 1 1 1	180 181 182 183 184 185 186	[BONEDENS] Bone mineral density [CATSCAN] CT Scan [ECHOCARD] Echocardiogram [OTHULTRA] Other ultrasound [MAMMO] Mammography [MRI] MRI [XRAY] X-ray and procedures
	1	187	[OTHIMAGE] Other imaging NOTE: This was not a checkbox category on the survey. It was created during data processing based on responses to the "other services not listed" items, in which data respondents could enter names of procedures which were later coded using ICD-9-CM procedure codes.
			Other tests:
105 106	1 1	188 189	[AUDIO] Audiometry [BIOPSY] Biopsy
107	2	190-191	[BIOPROV] Biopsy provided -9 = Blank -8 = Unknown -7 = Not applicable 1 = Yes 2 = No
108 109 110 111 112 113 114	1 1 1 1 1 1	192 193 194 195 196 197 198	[CARDIAC] Cardiac stress test [CHLAMYD] Chlamydia test [COLON] Colonoscopy [EKG] EKG/ECG [EEG] Electroencephalogram (EEG) [EMG] Electromyogram (EMG) [EXCISION] Excision of tissue
115	2	199-200	[EXCIPROV] Excision of tissue provided -9 = Blank -8 = Unknown -7 = Not applicable 1 = Yes 2 = No
116 117 118 119 120 121 122	1 1 1 1 1 1	201 202 203 204 205 206 207	[FETAL] Fetal monitoring [HIVTEST] HIV test [HPVDNA] HPV DNA test [PAP] PAP test [PEAK] Peak flow [PREGTEST] Pregnancy test/HCG test [SIGMOID] Sigmoidoscopy

PAGE 40			2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
123	2	208-209	[SIGPROV] Sigmoidoscopy provided -9 = Blank -8 = Unknown -7 = Not applicable 1 = Yes 2 = No
124 125 126	1 1 1	210 211 212	[SPIRO] Spirometry [TONO] Tonometry [URINE] Urinalysis (UA)
127	1	213	[SIGCOLON] Sigmoidoscopy/Colonoscopy This item was created during data processing and indicates whether any type of sigmoidoscopy or colonoscopy was ordered or provided, as reported in the checkbox data or write-in procedures. This estimate will be slightly greater than just combining data from SIGMOID and COLON because of the addition of overlapping ICD-9- CM procedure codes that couldn't be assigned to either SIGMOID or COLON. This is a summary variable only and should not be added to results from the checkbox or write-in procedure fields.
128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232	[CSW] Cast/Splint/Wrap [CAM] Complementary alternative medicine [DME] Durable medical equipment [HOMEHLTH] Home health care [MENTAL] Mental health counseling, excluding psychotherapy [PT] Physical therapy [PSYCHOTH] Psychotherapy [RADTHER] Radiation therapy [WOUND] Wound care [ASTHMAED] Asthma education [DIETNUTR] Diet/Nutrition [EXERCISE] Exercise [FAMPLAN] Family planning/Contraception [GRWTHDEV] Growth/Development [INJPREV] Injury prevention [STRESMGT] Stress management [TOBACED] Tobacco use/Exposure [WTREDUC] Weight reduction [OTHSERV] Other services not listed

## ITEM FIELD FILE NO. LENGTH LOCATION [ITEM NAME], DESCRIPTION, AND CODES

#### PROCEDURES

Procedures 1-9 are derived from the write-in fields under "Other Services Not Listed" on the automated Patient Record Form. To get a complete picture of the number and type of procedures reported at a visit, data users should include results from all of the procedure fields.

147	4	233-236	[PROC1] Write-in procedure #1
			ICD-9-CM Vol.3, Procedure Classification) A left-justified alphanumeric code with an implied decimal after the
			first two digits; inapplicable fourth digits have a dash inserted. -9 = Blank
			0392-999 = 03.92-99.99
148	4	237-240	[PROC2] Write-in procedure #2: see PROC1 for details
149	4	241-244	[PROC3] Write-in procedure #3: see PROC1 for details
150	4	245-248	[PROC4] Write-in procedure #4: see PROC1 for details
151	4	249-252	[PROC5] Write-in procedure #5: see PROC1 for details
152	4	253-256	[PROC6] Write-in procedure #6: see PROC1 for details
153	4	257-260	[PROC7] Write-in procedure #7: see PROC1 for details
154	4	261-264	[PROC8] Write-in procedure #8: see PROC1 for details
155	4	265-268	[PROC9] Write-in procedure #9: see PROC1 for details

NUMERIC RECODES FOR PROCEDURES 1-9

The following recodes are included on the public use file to facilitate analysis of visits using ICD-9-CM codes. It had come to our attention in the past that some users of NAMCS data find it preferable to use the numeric field recodes rather than the alphanumeric fields in certain data applications. Users can make their own choice about which format best suits their needs.

156	4	269-272	[PROC1R] Write-in procedure #1 A left-justified numeric code with an implied decimal after the first two digits; inapplicable fourth digits are zero-filled. -9 = Blank 0392-999 = 03.92-99.99
157 158 159 160 161 162 163 164	4 4 4 4 4 4 4 4	273-276 277-280 281-284 285-288 289-292 293-296 297-300 301-304	[PROC2R] Write-in procedure #2: see PROC1R for details [PROC3R] Write-in procedure #3: see PROC1R for details [PROC4R] Write-in procedure #4: see PROC1R for details [PROC5R] Write-in procedure #5: see PROC1R for details [PROC6R] Write-in procedure #6: see PROC1R for details [PROC7R] Write-in procedure #7: see PROC1R for details [PROC8R] Write-in procedure #8: see PROC1R for details [PROC9R] Write-in procedure #9: see PROC1R for details
165	1	305	[EXAM] Examination This item was created during data processing and indicates whether any of the write-in procedures reflect an ICD-9-CM code indexed specifically to Examinations. It is a summary variable only and should not be added to results from the write- in procedure fields.

PAGE 4	2		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
166	2	306-307	[SERVCNT] Total number of services reported as ordered or provided at the visit. Includes all services and vital sign determinations, including write-in entries for procedures (adjusted to avoid double counting between procedures that could be reported as both a checkbox and with more detail in the write-in field). 0-58 (23 was the highest number reported in 2012)
167	1	308	[ALLSERV] Were any services ordered or provided at the visit, including vital sign determinations? 0 = No services were ordered or provided at the visit 1 = At least one service was ordered or provided at the visit
			MEDICATIONS & IMMUNIZATIONS (See page 17 for more information. See Appendix III for Code List.)
168	1	309	[MED] WERE ANY PRESCRIPTION OR NON-PRESCRIPTION DRUGS ORDERED OR PROVIDED (BY ANY ROUTE OF ADMINISTRATION) AT THIS VISIT? 0 = No 1 = Yes 2 = Entire item blank, including "None" box
169	5	310-314	[MED1] MEDICATION #1 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
170	5	315-319	[MED2] MEDICATION #2 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
171	5	320-324	[MED3] MEDICATION #3 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
172	5	325-329	[MED4] MEDICATION #4 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
173	5	330-334	[MED5] MEDICATION #5 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
174	5	335-339	[MED6] MEDICATION #6 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
175	5	340-344	[MED7] MEDICATION #7 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
176	5	345-349	[MED8] MEDICATION #8 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
177	5	350-354	[MED9] MEDICATION #9 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
178	5	355-359	[MED10] MEDICATION #10 -9 = Blank 00001-99227 = 00001-99227 99980 = Unknown Entry; Other 99999 = Illegible Entry
179	2	360-361	[NCMED1] Was medication #1 new or continued? -9 = Blank -7 = Not applicable (no drug listed) 1 = New 2 = Continued 3 = Both "New" and "Continued" were checked
180 181 182 183 184 185 186 187 188	2 2 2 2 2 2 2 2 2 2 2 2 2	362-363 364-365 366-367 368-369 370-371 372-373 374-375 376-377 378-379	[NCMED2] Was medication #2 new or continued? See NCMED1. [NCMED3] Was medication #3 new or continued? See NCMED1. [NCMED4] Was medication #4 new or continued? See NCMED1. [NCMED5] Was medication #5 new or continued? See NCMED1. [NCMED6] Was medication #6 new or continued? See NCMED1. [NCMED7] Was medication #7 new or continued? See NCMED1. [NCMED8] Was medication #8 new or continued? See NCMED1. [NCMED9] Was medication #9 new or continued? See NCMED1. [NCMED9] Was medication #10 new or continued? See NCMED1.

PAGE 4	4		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
189	2	380-381	[NUMMED] NUMBER OF MEDICATIONS CODED 0 – 10
190	2	382-383	[NUMNEW] NUMBER OF NEW MEDICATIONS CODED 0 – 10
191	2	384-385	[NUMCONT] NUMBER OF CONTINUED MEDICATIONS CODED 0 – 10
			NOTE: For NUMNEW and NUMCONT, the value '0' can reflect the following situations: for NUMNEW, a) no drug listed; b) drug listed as continued medication only; or c) drug listed but unknown whether new or continued; for NUMCONT, a) no drug listed; b) drug listed as new medication only, or c) drug listed but unknown whether new or continued
			PROVIDERS SEEN
			0 = No, 1 = Yes
192 193 194 195 196 197 198 199	1 1 1 1 1 1 1	386 387 388 389 390 391 392 393	[NOPROVID] No answer to item [PHYS] Physician [PHYSASST] Physician assistant [NPNMW] Nurse practitioner/Midwife [RNLPN] RN/LPN [MHP] Mental health provider [OTHPROV] Other provider [PROVNONE] None; no providers seen
200	3	394-396	[TIMEMD] TIME SPENT WITH MD (in minutes) (See also TIMECHC) -7 = Not applicable (Sampled provider was non-physician clinician) 0-240
			VISIT DISPOSITION
			0 = No, 1 = Yes
201 202 203 204 205	1 1 1 1	397 398 399 400 401	[NODISP] No answer to item [REFOTHMD] Refer to other physician [RETAPPT] Return at specified time [ERADMHOS] Refer to emergency department/Admit to hospital [OTHDISP] Other visit disposition
			TESTS

NOTE: These data were only collected for visits to selected specialties. Specialties not included were the following: general surgery, orthopedic surgery, dermatology, urology, neurology, psychiatry, ophthalmology, and otolaryngology.

### ITEM FIELD FILE NO. LENGTH LOCATION [ITEM NAME], DESCRIPTION, AND CODES

Valid ranges for lab values were hardcoded into the automated Patient Record form; in some cases, these ranges were later found to be questionable. For example, the top value allowed to be entered for TGS was 400; 1.4% of 2012 NAMCS records reporting a TGS value were at this level, suggesting that the top range should have been higher.

206	2	402-403	[CHOL] WAS BLOOD FOR TOTAL CHOLESTEROL TEST DRAWN ON THE DAY OF THE SAMPLED VIIST OR DURING THE 12 MONTHS PRIOR TO THE VISIT? -9 = Blank -7 = Not applicable, provider not sampled 1 = Yes 2 = None found within 12 months
207	3	404-406	[CHOLRES] MOST RECENT RESULT FOR TOTAL CHOLESTEROL -9 = Blank -7 = Not applicable, provider not sampled 50-349 mg/dL 350 = 350 mg/dL or higher
208	4	407-410	[DAYDCHOL] DIFFERENCE IN DAYS BETWEEN VISIT DATE AND DATE OF CHOLESTEROL LAB RESULT -900 = Blank -800 = Unknown -700 = Not applicable, provider not sampled -365 to 365 = Up to 365 days before to 365 days after the sampled visit
209	2	411-412	<ul> <li>[HDL] WAS BLOOD FOR HIGH DENSITY LIPOPROTEIN (HDL) TEST DRAWN ON THE DAY OF THE SAMPLED VIIST OR DURING THE 12 MONTHS PRIOR TO THE VISIT?</li> <li>-9 = Blank</li> <li>-7 = Not applicable, provider not sampled</li> <li>1 = Yes</li> <li>2 = None found within 12 months</li> </ul>
210	3	413-415	[HDLRES] MOST RECENT RESULT FOR HIGH DENSITY LIPOPROTEIN -9 = Blank -7 = Not applicable, provider not sampled 20-99 mg/dL 100 = 100 mg/dL or higher
211	4	416-419	[DAYDHDL] DIFFERENCE IN DAYS BETWEEN VISIT DATE AND DATE OF HDL LAB RESULT -900 = Blank -800 = Unknown -700 = Not applicable, provider not sampled -365 to 365 = Up to 365 days before to 365 days after the sampled visit

PAGE 46			2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
212	2	420-421	<ul> <li>[LDL] WAS BLOOD FOR LOW DENSITY LIPOPROTEIN (LDL) TEST DRAWN ON THE DAY OF THE SAMPLED VISIT OR DURING THE 12 MONTHS PRIOR TO THE VISIT?</li> <li>-9 = Blank</li> <li>-7 = Not applicable, provider not sampled</li> <li>1 = Yes</li> <li>2 = None found within 12 months</li> </ul>
213	3	422-424	[LDLRES] MOST RECENT RESULT FOR LOW DENSITY LIPOPROTEIN (LDL) -9 = Blank -7 = Not applicable, provider not sampled 40-299 mg/dL 300 = 300 mg/dL or higher
214	4	425-428	[DAYDLDL] DIFFERENCE IN DAYS BETWEEN VISIT DATE AND DATE OF LOW DENSITY LIPOPROTEIN (LDL) LAB RESULT -900 = Blank -800 = Unknown -700 = Not applicable, provider not sampled -365 to 365 = Up to 365 days before to 365 days after the sampled visit
215	4	429-432	[LIPIDERR] CALCULATED LDL RESULT. NOT TO BE USED FOR ANALYSIS. This variable is to be used for comparison to the LDLRES value to point out possible errors in the lipid test reporting. -9999 = Blank -15 - 285

Note: LIPIDERR was calculated for records with non-negative values for ALL lipid numbers (cholesterol, HDL, LDL, and TGS) and only when all of these tests dated from the same day. The following formula was used: LIPIDERR=(CHOLRES-HDLRES-(TGSRES/5)). The value was then rounded. Some lab values were capped during data collection, which should be considered when interpreting LIPIDERR.

216	4	433-436	[LDLDIFF] DIFFERENCE BETWEEN REPORTED LDL RESULT (LDLRES) AND CALCULATED LDL (LIPIDERR). NOT TO BE USED FOR ANALYSIS. This variable is to be used for comparison to the LDLRES value in order to point out possible errors that may exist in the lipid test reporting. -9999 = Blank -113 - 213
217	2	437-438	[TGS] WAS BLOOD FOR TRIGLYCERIDES TEST DRAWN ON THE DAY OF THE SAMPLED VISIT OR DURING THE 12 MONTHS PRIOR TO THE VISIT? -9 = Blank -7 = Not applicable, provider not sampled 1 = Yes 2 = None found within 12 months

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
218	3	439-441	[TGSRES] MOST RECENT RESULT FOR TRIGLYCERIDES -9 = Blank -7 = Not applicable, provider not sampled 30-399 mg/dL 400 = 400 mg/dL or higher
219	4	442-445	[DAYDTGS] DIFFERENCE IN DAYS BETWEEN VISIT DATE AND DATE OF TRIGLYCERIDES LAB RESULT -900 = Blank -800 = Unknown -700 = Not applicable, provider not sampled -365 to 365 = Up to 365 days before to 365 days after the sampled visit
220	2	446-447	<ul> <li>[A1C] WAS BLOOD FOR GLYCOHEMOGLOBIN (HbA1c) TEST DRAWN ON THE DAY OF THE SAMPLED VISIT OR DURING THE 12 MONTHS PRIOR TO THE VISIT?</li> <li>-9 = Blank</li> <li>-7 = Not applicable, provider not sampled</li> <li>1 = Yes</li> <li>2 = None found within 12 months</li> </ul>
221	4	448-451	[A1CRES] MOST RECENT RESULT FOR GLYCOHEMOGLOBIN (HbA1c)TRIGLYCERIDES TEST -9 = Blank -7 = Not applicable, provider not sampled 3.0 - 12.8% 12.9 % = 12.9 % or higher
222	4	452-455	[DAYDA1C] DIFFERENCE IN DAYS BETWEEN VISIT DATE AND DATE OF GLYCOHEMOGLOBIN (HbA1c) LAB RESULT -900 = Blank -800 = Unknown -700 = Not applicable, provider not sampled -365 to 365 = Up to 365 days before to 365 days after the sampled visit
223	2	456-457	<ul> <li>[FBG] WAS BLOOD FOR FASTING BLOOD GUCOSE (FBG) TEST DRAWN ON THE DAY OF THE SAMPLED VISIT OR DURING THE 12 MONTHS PRIOR TO THE VISIT?</li> <li>-9 = Blank</li> <li>-7 = Not applicable, provider not sampled</li> <li>1 = Yes</li> <li>2 = None found within 12 months</li> </ul>
224	3	458-460	[FBGRES] MOST RECENT RESULT FOR FASTING BLOOD GLUCOSE (FBG) TEST -9 = Blank -7 = Not applicable, provider not sampled 50-499 mg/dL 500 = 500 mg/dL or higher

PAGE 48	3		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
25	4	461-464	[DAYDFBG] DIFFERENCE IN DAYS BETWEEN VISIT DATE AND DATE OF FASTING BLOOD GLUCOSE (FBG) LAB RESULT -900 = Blank -800 = Unknown -700 = Not applicable, provider not sampled -365 to 365 = Up to 365 days before to 365 days after the sampled visit
PATIEN	T RECORD I		HOW WHETHER DATA WERE REPORTED ON THE AUTOMATED ALCULATED DURING DATA PROCESSING, OR WHETHER DATA BLANKS ****
226	2	465-466	[AGEFLAG] Was patient age reported on the automated Patient Record Form or calculated during data processing based on date of visit and date of birth?
			-9 = Birth date imputed 0 = Calculated by NCHS 1 = Entered by respondent
227	1	467	[GESTFL] Was gestation week calculated by NCHS during data processing based on date of visit and date of last menstrual period? 0 = Calculated by NCHS 1 = Not calculated by NCHS
			IMPUTED ITEMS
			0 = Not imputed 1 = Imputed
228 229 230 231 232 233	1 1 1 1 1	468 469 470 471 472 473	[BDATEFL] Patient birth year [SEXFL] Patient sex [ETHNICFL] Patient ethnicity [RACERFL] Patient race [SENBEFL] Has patient been seen in your practice before? [PASTFL] If yes, how many past visits in last 12 months?
234	2	474-475	[TIMEMDFL] Time spent with physician (minutes) -7 = Not applicable (Sampled provider was non-physician clinician) 0 = Not imputed 1 = Imputed
235	6	476-481	[PHYCODE] PHYSICIAN/ NON-PHYSICIAN CLINICIAN CODE - A unique code assigned to all records from a particular physician, nurse practitioner, physician assistant, or nurse midwife. 600059-621721

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AN	ND CODES
236	2	482-483	[PATCODE] PATIENT CODE - A r identify each individual record from practitioner, physician assistant, or 1-52	n a particular physician, nurse
237	2	484-485	[SPECR_14] PHYSICIAN SPECIA RECODE This is a 14-group specialty variab variable in previous NAMCS surve sampled. Because of the nature of appear in the data. Type of non-pl	eys when similar groups were f CHCs, not all of the 14 groups
			<ul> <li>01 = General and family practice</li> <li>03 = Internal medicine</li> <li>04 = Pediatrics</li> <li>05 = General surgery</li> <li>06 = Obstetrics and gynecology</li> <li>11 =Psychiatry</li> </ul>	<ul> <li>13 = Ophthalmology</li> <li>15 = All other</li> <li>96 = Nurse practitioner</li> <li>97 = Physician assistant</li> <li>98 = Nurse midwife</li> </ul>

(Note: Some CHC physicians identified themselves as doctors of osteopathy. For SPECR\_14, doctors of osteopathy (formerly stratum 02 in NAMCS) have been aggregated with doctors of medicine according to their self-designated practice specialty, and therefore are not differentiated in the variable range. To isolate doctors of osteopathy from medical doctors using the Physician Specialty Recode variable, it is necessary to crosstabulate it with Type of Doctor located in position 492.

238	2	486-487	RECODE This variable appears on the 2012 continued here for consistency, ev	
			On the NAMCS (non-CHC) file, thi that reflects the previous NAMCS s (with doctors of osteopathy aggreg according to their self-designated p separates out 3 special panels self NAMCS sample The CHC sample panels.	samples of 14 specialty groups pated with doctors of medicine practice specialty), but also ected for the traditional 2012
			<ul> <li>01 = General and family practice</li> <li>03 = Internal medicine</li> <li>04 = Pediatrics</li> <li>05 = General surgery</li> <li>06 = Obstetrics and gynecology</li> <li>11 = Psychiatry</li> </ul>	<ul> <li>13 = Ophthalmology</li> <li>15 = All other</li> <li>96 = Nurse practitioner</li> <li>97 = Physician assistant</li> <li>98 = Nurse midwife</li> </ul>

PAGE 50		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM FIELD NO. LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
239 4	488-491	[SPECR17_SPECCAT] PHYSICIAN SPECIALTY RECODE, 17 GROUPS, WITH DETAIL ON TYPE OF SPECIALTY
		This is the 17-group specialty variable from SPECR_17, with the addition of information on primary, medical or surgical specialty The SPECR_17 code appears in the first two columns followed by a decimal. To the right of the decimal is the code for primary, medical or surgical specialty. Please see page 8 for more information about the sample design in 2012. As mentioned earlier, not all 17 groups appear in the CHC file, just those described below.
		<ul> <li>1.1 = General/Family practice/Primary care specialty</li> <li>3.1 = Internal medicine/Primary care specialty</li> <li>4.1 = Pediatrics/Primary care specialty</li> <li>4.3 = Pediatrics/Medical care specialty</li> <li>5.2 = General surgery/Surgical care specialty</li> <li>6.1 = OB-GYN/Primary care specialty</li> <li>13.2 = Ophthalmology/Surgical care specialty</li> <li>15.2 = Other specialty/Surgical care specialty</li> <li>15.3 = Other specialty/Medical care specialty</li> <li>96 = Nurse practitioner</li> <li>97 = Physician assistant</li> <li>98 = Nurse midwife</li> </ul>
240 1	492	[SPECCAT] PHYSICIAN SPECIALTY GROUP (Recoded from internal data using categories on page 102.) 1 = Primary care specialty 2 = Surgical care specialty 3 = Medical care specialty 4 = Non-physician clinician
241 1	493	[MDDO] TYPE OF DOCTOR 1 = M.D Doctor of Medicine 2 = D.O Doctor of Osteopathy 3 = Non-physician clinician
242 1	494	[RETYPOFFR] TYPE OF OFFICE SETTING FOR THIS VISIT This is a variable used in the 2012 NAMCS Public Use Data File, but that file has no values of 3 because no CHC visits are included. In contrast, the 2012 NAMCS CHC file only contains CHC visits. Therefore, only one category is applicable to this file and can serve as a marker for CHC data when combining data for both files. 3 = Community Health Center

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
243	2	495-496	[SOLO] DO YOU HAVE A SOLO PRACTICE, OR ARE YOU ASSOCIATED WITH OTHER PHYSICIANS IN A PARTNERSHIP, A GROUP PRACTICE, OR SOME OTHER WAY AT THIS VISIT LOCATION? -9 = Blank -8 = Unknown -6 = Refused to answer question 1 = Solo 2 = Non-solo
244	2	497-498	[EMPSTAT] ARE YOU A FULL OR PART OWNER, EMPLOYEE, OR INDEPENDENT CONTRACTOR AT THIS VISIT LOCATION?
			NOTE: In the 2011 NAMCS, only 3 categories were used (Owner, Employee, Contractor). For 2012 NAMCS, 'Owner' was split into Full Owner and Part Owner (categories 1 and 2). These categories were not applicable to the CHC data and are not included below.
			-9 = Blank -8 = Unknown -6 = Refused to answer question 3 = Employee 4 = Contractor
245	2	499-500	[OWNS_CHC] WHO OWNS THE PRACTICE AT THIS VISIT LOCATION? (Recoded)
			This variable is similar to the OWNS variable in the 2012 NAMCS Public Use File. Data users should note the difference in categories.
			-9 = Blank -8 = Unknown -6 = Refused to answer question 4 = Community Health Center 5 = Other
246	2	501-502	[PATEVEN] DO YOU SEE PATIENTS IN THE OFFICE DURING THE EVENING OR ON WEEKENDS? -9 = Blank -8 = Unknown -6 = Refused to answer question 1 = Yes 2 = No

PAGE 5	2		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DURING LAST NORMAL WEEK OF PRACTICE, DID YOU MAKE ENCOUNTERS OF THE FOLLOWING TYPES WITH PATIENTS:
247	2	503-504	[NHVISR] NURSING HOME VISITS -9 = Blank -8 = Unknown -6 = Refused to answer question 0 = No 1 = Yes
248	2	505-506	[HOMVISR] OTHER HOME VISITS -9 = Blank -8 = Unknown -6 = Refused to answer question 0 = No 1 = Yes
249	2	507-508	[HOSVISR] HOSPITAL VISITS -9 = Blank -8 = Unknown -6 = Refused to answer question 0 = No 1 = Yes
250	2	509-510	[TELCONR] TELEPHONE CONSULTS -9 = Blank -8 = Unknown -6 = Refused to answer question 0 = No 1 = Yes
251	2	511-512	[ECONR] INTERNET/EMAIL CONSULTS -9 = Blank -8 = Unknown -6 = Refused to answer question 0 = No 1 = Yes
252	2	513-514	[EBILLREC] DOES YOUR PRACTICE SUBMIT ANY CLAIMS ELECTRONICALLY (ELECTRONIC BILLING)? -9 = Blank -8 = Unknown -6 = Refused to answer question 1 = Yes 2 = No

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
253	2	515-516	[EINS] DO YOU OR YOUR STAFF VERIFY AN INDIVIDUAL PATIENT'S INSURANCE ELIGIBLITY REQUIREMENTS? -9 = Blank -8 = Unknown -6 = Refused to answer question 1 = Yes 2 = No
254	2	517-518	[EINSHOW] HOW DO YOU OR YOUR STAFF ELECTRONICALLY VERIFY AN INDIVIDUAL PATIENT'S INSURANCE ELIGIBILITY? IS IT THROUGH AN EHR/EMR SYSTEM, A STAND-ALONE PRACTICE MANAGEMENT SYSTEM, OR SOME OTHER ELECTRONIC SYSTEM? -9 = Blank -8 = Unknown -7 = Not applicable -6 = Refused to answer question 1 = Yes, with a stand-alone practice management system 2 = Yes, with a EMR/EHR system 3 = Yes, using another electronic system
255	2	519-520	[EINSFAST] WHEN YOU ELECTRONICALLY VERIFY A PATIENT'S INSURANCE ELIGIBILITY, DO YOU USUALLY GET RESULTS BACK BEFORE THE PATIENT LEAVES THE OFFICE? -9 = Blank -8 = Unknown -7 = Not applicable -6 = Refused to answer question 1 = Yes 2 = No
256	2	521-522	[EMEDREC] DOES YOUR PRACTICE USE AN ELECTRONIC HEALTH RECORD (EHR) OR ELECTRONIC MEDICAL RECORD (EMR) SYSTEM? Do not include billing records systems. -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, all electronic 2 = Yes, part paper and part electronic 3 = No
257	2	523-524	[EMRINS] AT YOUR PRACTICE, ARE THERE PLANS FOR INSTALLING A NEW EMR SYSTEM OR REPLACING THE CURRENT SYSTEM WITHIN THE NEXT 18 MONTHS? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No 3 = Maybe

PAGE 54	1		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
258	2	525-526	[MUINC] MEDICARE AND MEDICAID OFFER INCENTIVES TO PRACTICES THAT DEMONSTRATE, MEANINGFUL USE OF HEALTH IT. AT YOUR PRACTICE, ARE THERE PLANS TO APPLY FOR THESE INCENTIVE PAYMENTS? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, we already applied 2 = Yes, we intend to apply 3 = Uncertain if we will apply 4 = No, we will not apply
259	2	527-528	[INTENDYR] WHEN DO YOU INTEND TO FIRST APPLY? [for meaningful use payments] -9 = Blank -8 = Unknown -7 = Not applicable 1 = 2012 2 = 2013 or later
the years. In the following section,			n features of a practice's computerized capabilities have changed over , items with an "R" suffix have been recoded in each year since 2010 to I in the 2009 Physician Induction Interview, to make trending easier. the current format.
			PLEASE INDICATE WHETHER YOUR PRACTICE HAS EACH OF

			THE FOLLOWING COMPUTERIZED CAPABILITIES AND HOW OFTEN THESE CAPABILITIES ARE USED (APPLIES TO ITEMS 260-315)
260	2	529-530	[EDEMOG] RECORDING PATIENT HISTORY AND DEMOGRAPHIC INFORMATION -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
261	2	531-532	[EDEMOGR] RECORDING PATIENT HISTORY AND DEMOGRAPHIC INFORMATION (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
262	2	533-534	[EPROLST] IF YES TO RECORDING PATIENT HISTORY AND DEMOGRAPHIC INFORMATION, DOES THIS INCLUDE A PATIENT PROBLEM LIST -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
263	2	535-536	[EPROLSTR] IF YES TO RECORDING PATIENT HISTORY AND DEMOGRAPHIC INFORMATION, DOES THIS INCLUDE A PATIENT PROBLEM LIST (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
264	2	537-538	[EVITALS] RECORDING AND CHARTING VITAL SIGNS -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
265	2	539-540	[EVITALSR] RECORDING AND CHARTING VITAL SIGNS (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
266	2	541-542	[ESMOKE] RECORDING PATIENT SMOKING STATUS -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No

PAGE 56	6		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
267	2	543-544	[ESMOKER] RECORDING PATIENT SMOKING STATUS (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
268	2	545-546	[EPNOTES] RECORDING CLINICAL NOTES -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
269	2	547-548	[EPNOTESR] RECORDING CLINICAL NOTES (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
270	2	549-550	[EMEDALG] IF YES TO RECORDING CLINICAL NOTES, DO THE NOTES INCLUDE A LIST OF PATIENT'S MEDICATIONS AND ALLERGIES? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
271	2	551-552	[EMEDALGR] IF YES TO RECORDING CLINICAL NOTES, DO THE NOTES INCLUDE A LIST OF PATIENT'S MEDICATIONS AND ALLERGIES? (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
272	2	553-554	[ECPOE] ORDERING PRESCRIPTIONS -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
273	2	555-556	[ECPOER] ORDERING PRESCRIPTIONS (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
274	2	557-558	[ESCRIP] IF YES TO ORDERING PRESCRIPTIONS, ARE PRESCRIPTIONS SENT ELECTRONICALLY TO THE PHARMACY? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
275	2	559-560	[ESCRIPR] IF YES TO ORDERING PRESCRIPTIONS, ARE PRESCRIPTIONS SENT ELECTRONICALLY TO THE PHARMACY? -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
			WHEN ORDERS FOR PRESCRIPTIONS ARE SUBMITTED ELECTRONICALLY ARE THEY SUBMITTED BY (check all that apply):
276 277 278 279	2 2 2 2	561-562 563-564 565-566 567-568	[EWHOPRACP] Prescribing practitioner [EWHOOTHP] Someone else [EWHOUNKP] Unknown [EWHOREFP] Refused to answer
			-9 = Entire item (22.e(2) on Physician Induction Interview) blank -7 = Not applicable 0 = Box is not marked 1= Box is marked

PAGE 58			2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
280	2	569-570	[EWARN] IF YES TO ORDERING PRESCRIPTIONS, ARE WARNINGS OF DRUG INTERACTIONS OR CONTRAINDICATIONS PROVIDED? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
281	2	571-572	[EWARNR] IF YES TO ORDERING PRESCRIPTIONS, ARE WARNINGS OF DRUG INTERACTIONS OR CONTRAINDICATIONS PROVIDED? (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
282	2	573-574	[EREMIND] REMINDERS FOR GUIDELINE-BASED INTERVENTIONS AND/OR SCREENING TESTS -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
283	2	575-576	[EREMINDR] REMINDERS FOR GUIDELINE-BASED INTERVENTIONS AND/OR SCREENING TESTS (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
284	2	577-578	<ul> <li>[ESETS] PROVIDING STANDARD ORDER SETS RELATED TO A PARTICULAR CONDITION OR PROCEDURE</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Yes, used routinely</li> <li>2 = Yes, but NOT used routinely</li> <li>3 = Yes, but turned off or not used</li> <li>4=No</li> </ul>
285	2	579-580	[ESETSR] PROVIDING STANDARD ORDER SETS RELATED TO A PARTICULAR CONDITION OR PROCEDURE (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
286	2	581-582	[ECTOE] ORDERING LAB TESTS -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
287	2	583-584	[ECTOER] ORDERING LAB TESTS (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
288	2	585-586	[EORDER] IF YES TO ORDERING LAB TESTS, ARE ORDERS SENT ELECTRONICALLY? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No

PAGE 60	)		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
289	2	587-588	[EORDERR] IF YES TO ORDERING LAB TESTS, ARE ORDERS SENG ELECTRONICALLY? (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
			WHEN ORDERS FOR TESTS ARE SUBMITTED ELECTRONICALLY ARE THEY SUBMITTED BY (check all that
290 291 292 293	2 2 2 2	589-590 591-592 593-594 595-596	apply): [EWHOPRACL] Prescribing practitioner [EWHOOTHL] Someone else [EWHOUNKL] Unknown [EWHOREFL] Refused to answer
			<ul> <li>-9 = Entire item (22.h(2) on Physician Induction Interview) blank</li> <li>-7 = Not applicable</li> <li>0 = Box is not marked</li> <li>1= Box is marked</li> </ul>
294	2	597-598	[ERESULT] VIEWING LAB RESULTS -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
295	2	599-600	[ERESULT] VIEWING LAB RESULTS (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
296	2	601-602	[EGRAPH] IF YES TO VIEWING LAB RESULTS, CAN THE EHR/EMR AUTOMATICALLY GRAPH A SPECIFIC PATIENT'S LAB RESULTS OVER TIME? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
297	2	603-604	[EGRAPHR] IF YES TO VIEWING LAB RESULTS, CAN THE EHR/EMR AUTOMATICALLY GRAPH A SPECIFIC PATIENT'S LAB RESULTS OVER TIME? (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
298	2	605-606	[EIMGRES] VIEWING IMAGING RESULTS -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
299	2	607-608	[EIMGRESR] VIEWING IMAGING RESULTS (recoded for trending) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
300	2	609-610	<ul> <li>[EQOC] VIEWING DATA ON QUALITY OF CARE MEASURES</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Yes, used routinely</li> <li>2 = Yes, but NOT used routinely</li> <li>3 = Yes, but turned off or not used</li> <li>4 = No</li> </ul>
301	2	611-612	[EQOCR] VIEWING DATA ON QUALITY OF CARE MEASURES (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off

PAGE 62	2		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
302	2	613-614	<ul> <li>[ECQM] REPORTING CLINICAL QUALITY MEASURES TO FEDERAL OR STATE AGENCIES (SUCH AS CMS OR MEDICAID)</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Yes, used routinely</li> <li>2 = Yes, but NOT used routinely</li> <li>3 = Yes, but turned off or not used</li> <li>4 = No</li> </ul>
303	2	615-616	[ECQMR] REPORTING CLINICAL QUALITY MEASURES TO FEDERAL OR STATE AGENCIES (SUCH AS CMS OR MEDICAID) (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
304	2	617-618	[EGENLIST] GENERATING LISTS OF PATIENTS WITH PARTICULAR HEALTH CONDITIONS -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
305	2	619-620	[EGENLISTR] GENERATING LISTS OF PATIENTS WITH PARTICULAR HEALTH CONDITIONS (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
306	2	621-622	[EIMMREG] ELECTRONIC REPORTING TO IMMUNIZATION REGISTRIES -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
307	2	623-624	[EIMMREGR] ELECTRONIC REPORTING TO IMMUNIZATION REGISTRIES (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
308	2	625-626	[EMUREP] IF YES TO ELECTRONIC REPORTING TO IMMUNIZATION REGISTRIES, ARE THEY REPORTED IN STANDARDS SPECIFIED BY MEANINGFUL USE CRITERIA? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
309	2	627-628	[EMUREPR] IF YES TO ELECTRONIC REPORTING TO IMMUNIZATION REGISTRIES, ARE THEY REPORTED IN STANDARDS SPECIFIED BY MEANINGFUL USE CRITERIA? (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
310	2	629-630	[ESUM] PROVIDING PATIENTS WITH CLINICAL SUMMARIES FOR EACH VISIT -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No

PAGE 64	1		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
311	2	631-632	[ESUMR] PROVIDING PATIENTS WITH CLINICAL SUMMARIES FOR EACH VISIT (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
312	2	633-634	<ul> <li>[EMSG] EXCHANGING SECURE MESSAGES WITH PATIENTS</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Yes, used routinely</li> <li>2 = Yes, but NOT used routinely</li> <li>3 = Yes, but turned off or not used</li> <li>4 = No</li> </ul>
313	2	635-636	[EMSGR] EXCHANGING SECURE MESSAGES WITH PATIENTS (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off
314	2	637-638	[EHLTHINFO] PROVIDING PATIENTS WITH AN ELECTRONIC COPY OF THEIR HEALTH INFORMATION -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes, used routinely 2 = Yes, but NOT used routinely 3 = Yes, but turned off or not used 4 = No
315	2	639-640	[EHLTHINFOR] PROVIDING PATIENTS WITH AN ELECTRONIC COPY OF THEIR HEALTH INFORMATION (recoded) -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No 4= Turned off

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
316	2	641-642	[ESHARE] DO YOU SHARE ANY PATIENT HEALTH INFORMATION ELECTRONICALLY (NOT FAX) WITH OTHER PROVIDERS, INCLUDING HOSPITALS, AMBULATORY PROVIDERS, OR ELECTRONICALLY (NOT FAX) LABS? -9 = Blank -8 = Don't know -6 = Refused to answer question 1= Yes 2= No
			HOW DO YOU ELECTRONICALLY SHARE PATIENT HEALTH INFORMATION?
317 318 319 320 321	2 2 2 2 2	643-644 645-646 647-648 649-650 651-652	[ESHAREEHR] EHR/EMR [ESHAREWEB]Web portal (separate from EHR/EMR) [ESHAREOTH] Other electronic method [ESHAREUNK] Unknown [ESHAREREF] Refused to answer question
			-9 = Entire item (23.b on Physician Induction Interview) blank -7 = Not applicable 0 = Box is not marked 1= Box is marked
			DO YOU SHARE LAB RESULTS ELECTRONICALLY (NOT FAX) WITH:
322 323	2 2	653-654 655-656	[LABRES1] HOSPITALS WITH WHICH YOU ARE AFFILIATED? [LABRES2] AMBULATORY PROVIDERS INSIDE YOUR
324	2	657-658	OFFICE/GROUP? [LABRES3] HOSPITALS WITH WHICH YOU ARE NOT
325	2	659-660	AFFILIATED? [LABRES4] AMBULATORY PROVIDERS OUTSIDE YOUR OFFICE/GROUP?
326 327	2 2	661-662 663-664	[LABRESUNK] UNKNOWN [LABRESREF] REFUSED TO ANSWER QUESTION
			-9 = Entire item (24.a on Physician Induction Interview) blank -7 = Not applicable 0 = Box is not marked 1= Box is marked

1= Box is marked

PAGE 66	3		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DO YOU SHARE IMAGING REPORTS ELECTRONICALLY (NOT FAX) WITH:
328 329	2 2	665-666 667-668	[IMAGREP1] HOSPITALS WITH WHICH YOU ARE AFFILIATED? [IMAGREP2] AMBULATORY PROVIDERS INSIDE YOUR OFFICE/GROUP?
330	2	669-670	[IMAGREP3] HOSPITALS WITH WHICH YOU ARE NOT AFFILIATED?
331	2	671-672	[IMAGREP4] AMBULATORY PROVIDERS OUTSIDE YOUR OFFICE/GROUP?
332 333	2 2	673-674 675-676	[IMAGREPUNK] UNKNOWN [IMAGREPREF] REFUSED TO ANSWER QUESTION
			<ul> <li>-9 = Entire item (24.b on Physician Induction Interview) blank</li> <li>-7 = Not applicable</li> <li>0 = Box is not marked</li> <li>1= Box is marked</li> </ul>
			DO YOU SHARE PATIENT PROBLEM LISTS ELECTRONICALLY (NOT FAX) WITH:
334 335	2 2	677-678 679-680	[PTPROB1] HOSPITALS WITH WHICH YOU ARE AFFILIATED? [PTPROB2] AMBULATORY PROVIDERS INSIDE YOUR OFFICE/GROUP?
336	2	681-682	[PTPROB3] HOSPITALS WITH WHICH YOU ARE NOT AFFILIATED?
337	2	683-684	[PTPROB4] AMBULATORY PROVIDERS OUTSIDE YOUR OFFICE/GROUP?
338 339	2 2	685-686 687-688	[PTPROBUNK] UNKNOWN [PTPROBREF] REFUSED TO ANSWER QUESTION -9 = Entire item (24.c on Physician Induction Interview) blank -7 = Not applicable 0 = Box is not marked 1= Box is marked
			DO YOU SHARE MEDICATIONS LISTS ELECTRONICALLY (NOT FAX) WITH:
340 341	2 2	689-690 691-692	[MEDLIST1] HOSPITALS WITH WHICH YOU ARE AFFILIATED? [MEDLIST2] AMBULATORY PROVIDERS INSIDE YOUR OFFICE/GROUP?
342	2	693-694	[MEDLIST3] HOSPITALS WITH WHICH YOU ARE NOT AFFILIATED?
343	2	695-696	[MEDLIST4] AMBULATORY PROVIDERS OUTSIDE YOUR OFFICE/GROUP?
344 345	2 2	697-698 699-700	[MEDLISTUNK] UNKNOWN [MEDLISTREF] REFUSED TO ANSWER QUESTION -9 = Entire item (24.d on Physician Induction Interview) blank -7 = Not applicable 0 = Box is not marked 1= Box is marked

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DO YOU SHARE MEDICATION ALLERGY LISTS ELECTRONICALLY (NOT FAX) WITH:
346 347	2 2	701-702 703-704	[ALGLIST1] HOSPITALS WITH WHICH YOU ARE AFFILIATED? [ALGLIST2] AMBULATORY PROVIDERS INSIDE YOUR OFFICE/GROUP?
348	2	705-706	[ALGLIST3] HOSPITALS WITH WHICH YOU ARE NOT AFFILIATED?
349	2	707-708	[ALGLIST4] AMBULATORY PROVIDERS OUTSIDE YOUR OFFICE/GROUP?
350 351	2 2	709-710 711-712	[ALGLISTUNK] UNKNOWN [ALGLISTREF] REFUSED TO ANSWER QUESTION
			-9 = Entire item (24.e on Physician Induction Interview) blank -7 = Not applicable 0 = Box is not marked 1= Box is marked
352	2	713-714	[SUMREC] DO YOU SHARE ANY OF THE PREVIOUSLY MENTIONED TYPES OF INFORMATION USING A SUMMARY CARE RECORD? (A Summary Record is an electronic file that contains the previously mentioned health data in a standardized format.)
			-9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1= Yes 2= No
353	2	715-716	[CONSULTOUT] WHEN YOU REFER A PATIENT TO A PROVIDER OUTSIDE OF YOUR OFFICE OR GROUP, DO YOU RECEIVE A REPORT BACK FROM THE OTHER PROVIDER WITH RESULTS OF THE CONSULTATION? -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1 = Yes, routinely 2 = Yes, but NOT routinely 3 = No

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ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
354	2	717-718	[CONSULTOUTE] IF YES TO "WHEN YOU REFER A PATIENT TO PROVIDER OUTSIDE OF YOUR OFFICE OR GROUP, DO YOU RECEIVE A REPORT BACK FROM THE OTHER PROVIDER WITH RESULTS OF THE CONSULTATION?", DO YOU RECEIVE IT ELECTRONICALLY (NOT FAX)? -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1 = Yes, routinely 2 = Yes, but NOT routinely 3 = No
355	2	719-720	[CONSULTIN] WHEN YOU SEE A PATIENT REFERRED TO YOU BY A PROVIDER OUTSIDE OF YOUR OFFICE OR GROUP, DO YOU RECEIVE NOTIFICATION OF BOTH THE PATIENT'S HISTORY AND REASON FOR CONSULTATION? -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1 = Yes, routinely 2 = Yes, but NOT routinely 3 = No
356	2	721-722	[CONSULTINE] IF YES TO "WHEN YOU SEE A PATIENT REFERRED TO YOU BY A PROVIDER OUTSIDE OF YOUR OFFICE OR GROUP, DO YOU RECEIVE NOTIFICATION OF BOTH THE PATIENT'S HISTORY AND REASON FOR CONSULTATION?", DO YOU RECEIVE THAT NOTIFICATION ELECTRONICALLY (NOT FAX)? -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1 = Yes, routinely 2 = Yes, but NOT routinely 3 = No
357	2	723-724	[INPTINFO] WHEN YOUR PATIENT IS DISCHARGED FROM AN INPATIENT SETTING, DO YOU RECEIVE ALL OF THE INFORMATION YOU NEED TO CONTINUE MANAGING THE PATIENT? -9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1 = Yes, routinely 2 = Yes, but NOT routinely 3 = No

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
358	2	725-726	[INPTINFOT] IF YES TO "WHEN YOUR PATIENT IS DISCHARGED FROM AN INPATIENT SETTING, DO YOU RECEIVE ALL OF THE INFORMATION YOU NEED TO CONTINUE MANAGING THE PATIENT?", IS THE INFORMATION TIMELY, AVAILABLE WHEN NEEDED?
			-9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1 = Yes, routinely 2 = Yes, but NOT routinely 3 = No
359	2	727-728	[INPTINFOE] IF YES TO "WHEN YOUR PATIENT IS DISCHARGED FROM AN INPATIENT SETTING, DO YOU RECEIVE ALL OF THE INFORMATION YOU NEED TO CONTINUE MANAGING THE PATIENT?", IS THE INFORMATION RECEIVED ELECTRONICALLY (NOT FAX)?
			-9 = Blank -8 = Don't know -7 = Not applicable -6 = Refused to answer question 1 = Yes, routinely 2 = Yes, but NOT routinely 3 = No
360	2	729-730	[PRMCARER] Roughly, what percent of your patient care revenue comes from Medicare? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Less than or equal to 25 percent 2 = 26-50 percent 3 = 51-75 percent 4 = More than 75 percent
361	2	731-732	[PRMAIDR] Roughly, what percent of your patient care revenue comes from Medicaid? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Less than or equal to 25 percent 2 = 26-50 percent 3 = 51-75 percent 4 = More than 75 percent

PAGE 70	)	2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION		
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES	
362	2	733-734	<ul> <li>[PRPRVTR] Roughly, what percent of your patient care revenue comes from private insurance?</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Less than or equal to 25 percent</li> <li>2 = 26-50 percent</li> <li>3 = 51-75 percent</li> <li>4 = More than 75 percent</li> </ul>	
363	2	735-736	<ul> <li>[PRPATR] Roughly, what percent of your patient care revenue comes from patient payments?</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Less than or equal to 25 percent</li> <li>2 = 26-50 percent</li> <li>3 = 51-75 percent</li> <li>4 = More than 75 percent</li> </ul>	
364	2	737-738	[PROTHR] Roughly, what percent of your patient care revenue comes from other sources? (including charity, research, Champus, VA, etc.) -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Less than or equal to 25 percent 2 = 26-50 percent 3 = 51-75 percent 4 = More than 75 percent	
365	2	739-740	[PRMANR] Roughly, what percentage of the patient care revenue received by this practice comes from (these) managed care contracts? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Less than or equal to 25 percent 2 = 26-50 percent 3 = 51-75 percent 4 = More than 75 percent	

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
366	2	741-742	<ul> <li>[REVFFSR] Roughly, what percent of your patient care revenue comes from usual, customary, and reasonable fee-for-service?</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Less than or equal to 25 percent</li> <li>2 = 26-50 percent</li> <li>3 = 51-75 percent</li> <li>4 = More than 75 percent</li> </ul>
367	2	743-744	<ul> <li>[REVCAPR] Roughly, what percent of your patient care revenue comes from capitation?</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Less than or equal to 25 percent</li> <li>2 = 26-50 percent</li> <li>3 = 51-75 percent</li> <li>4 = More than 75 percent</li> </ul>
368	2	745-746	<ul> <li>[REVCASER] Roughly, what percent of your patient care revenue comes from case rates (e.g. package pricing/episode of care)?</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Less than or equal to 25 percent</li> <li>2 = 26-50 percent</li> <li>3 = 51-75 percent</li> <li>4 = More than 75 percent</li> </ul>
369	2	747-748	[REVOTHR] Roughly, what percent of your patient care revenue comes from other sources? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Less than or equal to 25 percent 2 = 26-50 percent 3 = 51-75 percent 4 = More than 75 percent
370	2	749-750	[ACEPTNEW] Are you currently accepting "new" patients into your practice? -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No

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ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
371	2	751-752	[CAPITATE] From those "new" patients, which of the following types of payment do you accept? - Capitated private insurance -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No
72	2	753-754	[NOCAP] From those "new" patients, which of the following types of payment do you accept? – Non-capitated private insurance -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No
373	2	755-756	<ul> <li>[PRIVATE] (Derived from responses to CAPITATE and NOCAP)</li> <li>From those "new" patients, which of the following types of payment do you accept? – Private insurance (capitated or non-capitated)</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Yes</li> <li>2 = No</li> </ul>
374	2	757-758	[NMEDCARE] From those "new" patients, which of the following types of payment do you accept? – Medicare -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No
375	2	759-760	[NMEDCAID] From those "new" patients, which of the following types of payment do you accept? – Medicaid -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No
376	2	761-762	[NWORKCMP] From those "new" patients, which of the following types of payment do you accept? – Workers compensation -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
377	2	763-764	[NSELFPAY] From those "new" patients, which of the following types of payment do you accept? – Self-pay -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No
378	2	765-766	[NNOCHRGE] From those "new" patients, which of the following types of payment do you accept? – No charge -9 = Blank -8 = Don't know -6 = Refused to answer question 1 = Yes 2 = No
379	2	767-768	<ul> <li>[PHYSCOMP] WHICH OF THE FOLLOWING METHODS BEST DESCRIBES YOUR BASIC COMPENSATION?</li> <li>-9 = Blank</li> <li>-8 = Don't know</li> <li>-6 = Refused to answer question</li> <li>1 = Fixed salary</li> <li>2 = Share of practice billings or workload</li> <li>3 = Mix of salary and share of billings or other measures of performance(e.g., your own billings, practice financial performance, quality measures, practice profiling)</li> <li>4 = Shift, hourly or other time-based payment</li> <li>5 = Other</li> </ul>
			CLINICAL PRACTICES MAY TAKE VARIOUS FACTORS INTO ACCOUNT WHEN DETERMINING THE COMPENSATION (SALARY, BONUS, PAY RATE, ETC.) PAID TO THE PHYSICIANS IN THE PRACTICE. PLEASE INDICATE WHETHER THE PRACTICE EXPLICITLY CONSIDERS EACH OF THE FOLLOWING FACTORS IN DETERMINING YOUR COMPENSATION:
380	2	769-770	[COMPPROD] FACTORS THAT REFLECT YOUR OWN PRODUCTIVITY -9 = Entire item 32 on Physician Induction Interview blank 0 = Box is not marked 1 = Box is marked
381	2	771-772	[COMPSAT] RESULTS OF SATISFACTION SURVEYS FROM YOUR OWN PATIENTS -9 = Entire item 32 on Physician Induction Interview blank 0 = Box is not marked 1 = Box is marked

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ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
382	2	773-774	[COMPQUAL] SPECIFIC MEASURES OF QUALITY, SUCH AS RATES OF PREVENTIVE SERVICES FOR YOUR PATIENTS -9 = Entire item 32 on Physician Induction Interview blank 0 = Box is not marked 1 = Box is marked
383	2	775-776	[COMPDROF] RESULTS OF PRACTICE PROFILING, THAT IS, COMPARING YOUR PATTERN OF USING MEDICAL RESOURCES WITH THAT OF OTHER PHYSICIANS -9 = Entire item 32 on Physician Induction Interview blank 0 = Box is not marked 1 = Box is marked
384	2	777-778	[COMPFIN] THE OVERALL FINANCIAL PERFORMANCE OF THE PRACTICE -9 = Entire item 32 on Physician Induction Interview blank 0 = Box is not marked 1 = Box is marked
385	2	779-780	[COMPUNK] UNKNOWN -9 = Entire item 32 on Physician Induction Interview blank 0 = Box is not marked 1 = Box is marked
386	2	781-782	[COMPREF] REFUSED TO ANSWER -9 = Entire item 32 on Physician Induction Interview blank 0 = Box is not marked 1 = Box is marked
387	3	783-785	[SDAPPT] Roughly, what percent of your daily visits are same day appointments? -9 = Blank -6 = Refused to answer question 0-100
388	2	786-787	[SASDAPPT] Does your practice set time aside for same day appointments? -9 = Blank -8 = Unknown -6 = Refused to answer question 1 = Yes 2 = No

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
389	2	788-789	[APPTTIME] On average, about how long does it take to get an appointment for a routine medical exam? -9 = Blank -8 = Unknown -6 = Refused to answer question 1 = Within 1 week 2 = 1-2 weeks 3 = 3-4 weeks 4 = 1-2 months 5 = 3 or more months 6 = Do not provide routine exams
390	1	790	[REGIONOFF] GEOGRAPHIC REGION (Based on location where majority of visit records were sampled) 1= Northeast 2= Midwest 3= South 4= West
391	1	791	<ul> <li>[DIVISIONOFF] CENSUS CIVIL DIVISION</li> <li>(Based on location where majority of visit records were sampled)</li> <li>1 = New England (Northeast Region)</li> <li>2 = Middle Atlantic (Northeast Region)</li> <li>3 = East North Central (Midwest Region)</li> <li>4 = West North Central (Midwest Region)</li> <li>5 = South Atlantic (South Region)</li> <li>6 = East South Central (South Region)</li> <li>7 = West South Central (South Region)</li> <li>8 = Mountain (West Region)</li> <li>9 = Pacific (West Region)</li> </ul>

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PAGE 7	6		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
<u>NO.</u> 392	2	<u>10CATION</u> 792-793	[ITEM NAME], DESCRIPTION, AND CODES         [FIPSSTOFF] STATE/DIVISION REMAINDER (Based on location where majority of visit records were sampled)         NOTE: The 34 most populous states were targeted for sampling. The remaining states were grouped within their Census division and sampled as 'division remainders'. Records in division remainders should only be weighted using the PATWT variable; records in targeted states should only be weighted using the PATWTST variable.         01=Alabama       02=Alaska         04=Arizona       05=Arkansas         06=California       08=Colorado         09=Connecticut       0         10=Delaware       11=District of Columbia         11=District of Columbia       12=Florida         13=Georgia       15=Hawaii         16=Idaho       17=Illinois         18=Indiana       19=Iowa         20=Kansas       21=Kentucky         22=Louisiana       23=Maine         24=Maryland       25=Massispipi         29=Missouri       30=Montana         31=Nebraska       32=New Hampshire         34=New Jersey       35=New Mexico         36=New York       37=North Carolina         38=Notth Dakota       39=Ohio         40=Oklahoma       41=Oregon         41=Pregon       42=Pennsylvania         44=Rhode Island       45=South Carolina </td

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			47=Tennessee 48=Texas 49=Utah 50=Vermont 51=Virginia 53=Washington 54=West Virginia 55=Wisconsin 56=Wyoming 91=New England Division Remainder 92=West North Central Division Remainder 93=South Atlantic Division Remainder 94=Mountain Division Remainder 95=Pacific Division Remainder
393	1	794	[MSA] METROPOLITAN/NON-METROPOLITAN STATUS (Based on physician location in conjunction with the definition of the Bureau of the Census and the U.S. Office of Management and Budget.)
			1 = MSA (Metropolitan Statistical Area) 2 = Not MSA (includes micropolitan statistical areas)

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ITEM	FIELD	FILE
NO.	LENGTH	LOCATION [ITEM NAME], DESCRIPTION, AND CODES

# DRUG-RELATED INFO FOR MEDICATION #1

NOTE: Starting with the 2006 data release, all drug codes based on entry name (using NCHS' standard classification system) were also assigned a unique generic drug code from Multum's Lexicon Drug Database, where possible. The structure of the Multum database is such that multiple ingredient drugs are assigned a single generic drug code encompassing all of a drug's ingredients rather than being assigned generic drug codes for each ingredient, as in past years of NAMCS drug data. All Multum codes start with the letter "d" but there were some drugs reported in NAMCS that could not be assigned a code in Multum. For 2006 and 2007, these received a prefix of either "a" (when ingredients could be determined) or "c" (when ingredients could not be determined). Beginning with 2008, the use of "a" and "c" codes was replaced with "n" codes. For more on the structure of the drug data (including information on therapeutic class and drug ingredients, please see page 17.)

394	6	795-800	[DRUGID1] DRUG ID (See p. 118 for more information.)
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)
395	1	801	[PRESCR1] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the-3 = UndeterminedCounter
396	1	802	[CONTSUB1] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined
397	1	803	[COMSTAT1] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined
398	3	804-806	[RX1CAT1] MULTUM DRUG CATEGORY # 1

Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multum Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority can be coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.

" " = Blank/Not applicable 001 - 899 = Drug category 999 = Undetermined category

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
399	3	807-809	[RX1CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.
400	3	810-812	[RX1CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.
401	3	813-815	[RX1CAT4] MULTUM DRUG CATEGORY # 4 See RX1CAT1.
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply to all Multum drug categories. Complete Multum classification scheme is shown in Appendix III.
402 403 404 405	3 3 3 3	816-818 819-821 822-824 825-827	[RX1V1C1] Level 1 of MULTUM DRUG CATEGORY # 1 [RX1V1C2] Level 1 of MULTUM DRUG CATEGORY # 2 [RX1V1C3] Level 1 of MULTUM DRUG CATEGORY # 3 [RX1V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
406 407 408 409	3 3 3 3	828-830 831-833 834-836 837-839	[RX1V2C1] Level 2 of MULTUM DRUG CATEGORY # 1 [RX1V2C2] Level 2 of MULTUM DRUG CATEGORY # 2 [RX1V2C3] Level 2 of MULTUM DRUG CATEGORY # 3 [RX1V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
410 411 412 413	3 3 3 3	840-842 843-845 846-848 849-851	[RX1V3C1] Level 3 of MULTUM DRUG CATEGORY # 1 [RX1V3C2] Level 3 of MULTUM DRUG CATEGORY # 2 [RX1V3C3] Level 3 of MULTUM DRUG CATEGORY # 3 [RX1V3C4] Level 3 of MULTUM DRUG CATEGORY # 4

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ITEM NO.	FIELD LENGTH	FILE LOCATION	I [ITEM NAME], DESCRIPTION, AND CODES	
			DRUG-RELATED INFO FOR MEDICATION #2	
414	6	852-857	[DRUGID2] DRUG ID (See p. 118 for more information.)	
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)	
415	1	858	[PRESCR2] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the- Counter3 = UndeterminedCounter	
416	1	859	[CONTSUB2] CONTROLLED SUBSTANCE STATUS CODE4171 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined	
417	1	860	[COMSTAT2] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined	
418	3	861-863	[RX2CAT1] MULTUM DRUG CATEGORY # 1	
Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multum Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority can be coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.				
			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>	
419	3	864-866	[RX2CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.	
420	3	867-869	[RX2CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.	

421	3	870-872	[RX2CAT4] MULTUM DRUG CATEGORY # 4
			See RX1CAT1.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply to all
			Multum drug categories. Complete Multum classification
			scheme is shown in Appendix III.
422	3	873-875	[RX2V1C1] Level 1 of MULTUM DRUG CATEGORY # 1
422	3	876-878	[RX2V1C1] Level 1 of MULTUM DRUG CATEGORY # 2
	3		
424	3	879-881	[RX2V1C3] Level 1 of MULTUM DRUG CATEGORY # 3
425	3	882-884	[RX2V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
400	<u> </u>	005 007	
426	3	885-887	[RX2V2C1] Level 2 of MULTUM DRUG CATEGORY # 1
427	3	888-890	[RX2V2C2] Level 2 of MULTUM DRUG CATEGORY # 2
428	3	891-893	[RX2V2C3] Level 2 of MULTUM DRUG CATEGORY # 3
429	3	894-896	[RX2V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
430	3	897-899	[RX2V3C1] Level 3 of MULTUM DRUG CATEGORY # 1
431	3	900-902	[RX2V3C2] Level 3 of MULTUM DRUG CATEGORY # 2
432	3	903-905	[RX2V3C3] Level 3 of MULTUM DRUG CATEGORY # 3
433	3	906-908	[RX2V3C4] Level 3 of MULTUM DRUG CATEGORY # 4
100	5		

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ITEM NO.	FIELD LENGTH	FILE LOCATION	I [ITEM NAME], DESCRIPTION, AND CODES
			DRUG-RELATED INFO FOR MEDICATION #3
434	6	909-914	[DRUGID3] DRUG ID (See p. 118 for more information.)
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)
435	1	915	[PRESCR3] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the-3 = UndeterminedCounter
436	1	916	[CONTSUB3] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined
437	1	917	[COMSTAT3] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined
438	3	918-920	[RX3CAT1] MULTUM DRUG CATEGORY # 1
Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multum Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority can be coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.			
			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>
439	3	921-923	[RX3CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.

440	3	924-926	[RX3CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.
441	3	927-929	[RX3CAT4] MULTUM DRUG CATEGORY # 4 See RX1CAT1.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
	_		
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply to all Multum drug categories. Complete Multum classification scheme is shown in Appendix III.
442	3	930-932	[RX3V1C1] Level 1 of MULTUM DRUG CATEGORY # 1
443	3	933-935	[RX3V1C2] Level 1 of MULTUM DRUG CATEGORY # 2
444	3	936-938	[RX3V1C3] Level 1 of MULTUM DRUG CATEGORY # 3
445	3	939-941	[RX3V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
446	3	942-944	[RX3V2C1] Level 2 of MULTUM DRUG CATEGORY # 1
447	3	945-947	[RX3V2C2] Level 2 of MULTUM DRUG CATEGORY # 2
448	3	948-950	[RX3V2C3] Level 2 of MULTUM DRUG CATEGORY # 3
449	3	951-953	[RX3V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
450	3	954-956	[RX3V3C1] Level 3 of MULTUM DRUG CATEGORY # 1
451	3	957-959	[RX3V3C2] Level 3 of MULTUM DRUG CATEGORY # 2
452	3	960-962	[RX3V3C3] Level 3 of MULTUM DRUG CATEGORY # 3
453	3	963-965	[RX3V3C4] Level 3 of MULTUM DRUG CATEGORY # 4

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PAGE 84	4		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION	
ITEM NO.	FIELD LENGTH	FILE LOCATION	I [ITEM NAME], DESCRIPTION, AND CODES	
			DRUG-RELATED INFO FOR MEDICATION #4	
454	6	966-971	[DRUGID4] DRUG ID (See p. 118 for more information.)	
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)	
455	1	972	[PRESCR4] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the- Counter	
456	1	973	[CONTSUB4] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined	
457	1	974	[COMSTAT4] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined	
458	3	975-977	[RX4CAT1] MULTUM DRUG CATEGORY # 1	
Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multum Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority can be coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.				
			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>	
459	3	978-980	[RX4CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.	
460	3	981-983	[RX4CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.	

461	3	984-986	[RX4CAT4] MULTUM DRUG CATEGORY # 4
			See RX1CAT1.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply to all
			Multum drug categories. Complete Multum classification
			scheme is shown in Appendix III.
460	2	007 000	
462	3	987-989	[RX4V1C1] Level 1 of MULTUM DRUG CATEGORY # 1
463	3	990-992	[RX4V1C2] Level 1 of MULTUM DRUG CATEGORY # 2
464	3	993-995	[RX4V1C3] Level 1 of MULTUM DRUG CATEGORY # 3
465	3	996-998	[RX4V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
466	3	999-1001	[RX4V2C1] Level 2 of MULTUM DRUG CATEGORY # 1
467	3	1002-1004	[RX4V2C2] Level 2 of MULTUM DRUG CATEGORY # 2
468	3	1005-1007	[RX4V2C3] Level 2 of MULTUM DRUG CATEGORY # 3
469	3	1008-1010	[RX4V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
470	3	1011-1013	[RX4V3C1] Level 3 of MULTUM DRUG CATEGORY # 1
471	3	1014-1016	[RX4V3C2] Level 3 of MULTUM DRUG CATEGORY # 2
472	3	1017-1019	[RX4V3C3] Level 3 of MULTUM DRUG CATEGORY # 3
473	3	1020-1022	[RX4V3C4] Level 3 of MULTUM DRUG CATEGORY # 4
-	-		

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PAGE 86	6		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION	
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES	
			DRUG-RELATED INFO FOR MEDICATION #5	
474	6	1023-1028	[DRUGID5] DRUG ID (See p. 118 for more information.)	
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)	
475	1	1029	[PRESCR5] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the- Counter3 = UndeterminedCounter	
476	1	1030	[CONTSUB5] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined	
477	1	1031	[COMSTAT5] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined	
478	3	1032-1034	[RX5CAT1] MULTUM DRUG CATEGORY # 1	
Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multum Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority can be coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.				
			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>	
479	3	1035-1037	[RX5CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.	
480	3	1038-1040	[RX5CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.	

481	3	1041-1043	[RX5CAT4] MULTUM DRUG CATEGORY # 4 See RX1CAT1.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply to all Multum drug categories. Complete Multum classification scheme is shown in Appendix III.
482	3	1044-1046	[RX5V1C1] Level 1 of MULTUM DRUG CATEGORY # 1
483	3	1047-1049	[RX5V1C2] Level 1 of MULTUM DRUG CATEGORY # 2
484	3	1050-1052	[RX5V1C3] Level 1 of MULTUM DRUG CATEGORY # 3
485	3	1053-1055	[RX5V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
486	3	1056-1058	[RX5V2C1] Level 2 of MULTUM DRUG CATEGORY # 1
487	3	1059-1061	[RX5V2C2] Level 2 of MULTUM DRUG CATEGORY # 2
488	3	1062-1064	[RX5V2C3] Level 2 of MULTUM DRUG CATEGORY # 3
489	3	1065-1067	[RX5V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
490	3	1068-1070	[RX5V3C1] Level 3 of MULTUM DRUG CATEGORY # 1
491	3	1071-1073	[RX5V3C2] Level 3 of MULTUM DRUG CATEGORY # 2
492	3	1074-1076	[RX5V3C3] Level 3 of MULTUM DRUG CATEGORY # 3
493	3	1077-1079	[RX5V3C4] Level 3 of MULTUM DRUG CATEGORY # 4

PAGE 88	3		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION	
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES	
			DRUG-RELATED INFO FOR MEDICATION #6	
494	6	1080-1085	[DRUGID6] DRUG ID (See p. 118 for more information.)	
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)	
495	1	1086	[PRESCR6] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the- Counter3 = UndeterminedCounter	
496	1	1087	[CONTSUB6] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined	
497	1	1088	[COMSTAT6] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined	
498	3	1089-1091	[RX6CAT1] MULTUM DRUG CATEGORY # 1	
Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multum Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority can be coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.				
			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>	
499	3	1092-1094	[RX6CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.	
500	3	1095-1097	[RX6CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.	
501	3	1098-1100	[RX6CAT4] MULTUM DRUG CATEGORY # 4 See RX1CAT1.	

ITEM	FIELD	FILE	[ITEM NAME], DESCRIPTION, AND CODES
NO.	LENGTH	LOCATION	
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply Multum drug categories. Complete Multum classification scheme is shown in Appendix III.
502	3	1101-1103	[RX6V1C1] Level 1 of MULTUM DRUG CATEGORY # 1
503	3	1104-1106	[RX6V1C2] Level 1 of MULTUM DRUG CATEGORY # 2
504	3	1107-1109	[RX6V1C3] Level 1 of MULTUM DRUG CATEGORY # 3
505	3	1110-1112	[RX6V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
506	3	1113-1115	[RX6V2C1] Level 2 of MULTUM DRUG CATEGORY # 1
507	3	1116-1118	[RX6V2C2] Level 2 of MULTUM DRUG CATEGORY # 2
508	3	1119-1121	[RX6V2C3] Level 2 of MULTUM DRUG CATEGORY # 3
509	3	1122-1124	[RX6V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
510	3	1125-1127	[RX6V3C1] Level 3 of MULTUM DRUG CATEGORY # 1
511	3	1128-1130	[RX6V3C2] Level 3 of MULTUM DRUG CATEGORY # 2
512	3	1131-1133	[RX6V3C3] Level 3 of MULTUM DRUG CATEGORY # 3
513	3	1134-1136	[RX6V3C4] Level 3 of MULTUM DRUG CATEGORY # 4

PAGE 90	)		2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DRUG-RELATED INFO FOR MEDICATION #7
514	6	1137-1142	[DRUGID7] DRUG ID (See p. 118 for more information.)
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)
515	1	1143	[PRESCR7] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the- Counter3 = UndeterminedCounter
516	1	1144	[CONTSUB7] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined
517	1	1145	[COMSTAT7] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined
518	3	1146-1148	[RX7CAT1] MULTUM DRUG CATEGORY # 1
Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multu Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority car coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.			
			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>
519	3	1149-1151	[RX7CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.

520	3	1152-1154	[RX7CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.
521	3	1155-1157	[RX7CAT4] MULTUM DRUG CATEGORY # 4 See RX1CAT1.

ITEM	FIELD	FILE	[ITEM NAME], DESCRIPTION, AND CODES
NO.	LENGTH	LOCATION	
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply Multum drug categories. Complete Multum classification scheme is shown in Appendix III.
522	3	1158-1160	[RX7V1C1] Level 1 of MULTUM DRUG CATEGORY # 1
523	3	1161-1163	[RX7V1C2] Level 1 of MULTUM DRUG CATEGORY # 2
524	3	1164-1166	[RX7V1C3] Level 1 of MULTUM DRUG CATEGORY # 3
525	3	1167-1169	[RX7V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
526	3	1170-1172	[RX7V2C1] Level 2 of MULTUM DRUG CATEGORY # 1
527	3	1173-1175	[RX7V2C2] Level 2 of MULTUM DRUG CATEGORY # 2
528	3	1176-1178	[RX7V2C3] Level 2 of MULTUM DRUG CATEGORY # 3
529	3	1179-1181	[RX7V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
530	3	1182-1184	[RX7V3C1] Level 3 of MULTUM DRUG CATEGORY # 1
531	3	1185-1187	[RX7V3C2] Level 3 of MULTUM DRUG CATEGORY # 2
532	3	1188-1190	[RX7V3C3] Level 3 of MULTUM DRUG CATEGORY # 3
533	3	1191-1193	[RX7V3C4] Level 3 of MULTUM DRUG CATEGORY # 4

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ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DRUG-RELATED INFO FOR MEDICATION #8
534	6	1194-1199	[DRUGID8] DRUG ID (See p. 118 for more information.)
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)
535	1	1200	[PRESCR8] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the- Counter
536	1	1201	[CONTSUB8] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined
537	1	1202	[COMSTAT8] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined
538	3	1203-1205	[RX8CAT1] MULTUM DRUG CATEGORY # 1
Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multum Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority can be coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.			
			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>
539	3	1206-1208	[RX8CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.

540	3	1209-1211	[RX8CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.
541	3	1212-1214	[RX8CAT4] MULTUM DRUG CATEGORY # 4 See RX1CAT1.

ITEM	FIELD	FILE	[ITEM NAME], DESCRIPTION, AND CODES
NO.	LENGTH	LOCATION	
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply Multum drug categories. Complete Multum classification scheme is shown in Appendix III.
542	3	1215-1217	[RX8V1C1] Level 1 of MULTUM DRUG CATEGORY # 1
543	3	1218-1220	[RX8V1C2] Level 1 of MULTUM DRUG CATEGORY # 2
544	3	1221-1223	[RX8V1C3] Level 1 of MULTUM DRUG CATEGORY # 3
545	3	1224-1226	[RX8V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
546	3	1227-1229	[RX8V2C1] Level 2 of MULTUM DRUG CATEGORY # 1
547	3	1230-1232	[RX8V2C2] Level 2 of MULTUM DRUG CATEGORY # 2
548	3	1233-1235	[RX8V2C3] Level 2 of MULTUM DRUG CATEGORY # 3
549	3	1236-1238	[RX8V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
550	3	1239-1241	[RX8V3C1] Level 3 of MULTUM DRUG CATEGORY # 1
551	3	1242-1244	[RX8V3C2] Level 3 of MULTUM DRUG CATEGORY # 2
552	3	1245-1247	[RX8V3C3] Level 3 of MULTUM DRUG CATEGORY # 3
553	3	1248-1250	[RX8V3C4] Level 3 of MULTUM DRUG CATEGORY # 4

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ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DRUG-RELATED INFO FOR MEDICATION #9
554	6	1251-1256	[DRUGID9] DRUG ID (See p. 118 for more information.)
			a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)
555	1	1257	[PRESCR9] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the- Counter3 = UndeterminedCounter
556	1	1258	[CONTSUB9] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined
557	1	1259	[COMSTAT9] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined
558	3	1260-1262	[RX9CAT1] MULTUM DRUG CATEGORY # 1
Level 1 coded to	(broadest lev b Level 3 (mo	rel) is the mos	utic level to which the drug can be classified. For some drugs, Multum t detailed, while others can be coded to Level 2, but the majority can be vel). For more on the Multum classification system, please see page cation is shown in Appendix III.
			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>
559	3	1263-1265	[RX9CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.
560	3	1266-1268	[RX9CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.
561	3	1269-1271	[RX9CAT4] MULTUM DRUG CATEGORY # 4 See RX1CAT1.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DRUG CATEGORY LEVELS
			See RX1CAT1 for general coding conventions that apply Multum drug categories. Complete Multum classification scheme is shown in Appendix III.
562 563	3 3	1272-1274 1275-1277	[RX9V1C1] Level 1 of MULTUM DRUG CATEGORY # 1 [RX9V1C2] Level 1 of MULTUM DRUG CATEGORY # 2
564	3	1278-1280	[RX9V1C3] Level 1 of MULTUM DRUG CATEGORY # 3
565	3	1281-1283	[RX9V1C4] Level 1 of MULTUM DRUG CATEGORY # 4
566 567	3 3	1284-1286 1287-1289	[RX9V2C1] Level 2 of MULTUM DRUG CATEGORY # 1 [RX9V2C2] Level 2 of MULTUM DRUG CATEGORY # 2
568	3	1290-1292	[RX9V2C3] Level 2 of MULTUM DRUG CATEGORY # 3
569	3	1293-1295	[RX9V2C4] Level 2 of MULTUM DRUG CATEGORY # 4
570 571 572	3 3 3	1296-1298 1299-1301 1302-1304	[RX9V3C1] Level 3 of MULTUM DRUG CATEGORY # 1 [RX9V3C2] Level 3 of MULTUM DRUG CATEGORY # 2 [RX9V3C3] Level 3 of MULTUM DRUG CATEGORY # 3
573	3	1305-1307	[RX9V3C4] Level 3 of MULTUM DRUG CATEGORY # 4

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ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
			DRUG-RELATED INFO FOR MEDICATION #10
574	6	1308-1313	[DRUGID10] DRUG ID (See p. 118 for more information.) a07001-a96067 = NCHS code (for drugs not found in Multum but for which ingredients could be determined, for drugs added to the database for survey years 2006 and 2007) c00001-c00898, c00900-c92511 = NCHS code (for drugs not found in Multum and with undetermined ingredients) c00899 – Undetermined pharmaceutical aid d00001-d07899 = Multum code n0000-n12008 = NCHS code (for drugs not found in Multum that were added to the database beginning with survey year 2008)
575	1	1314	[PRESCR10] PRESCRIPTION STATUS CODE1 = Prescription Drug4 = Illicit [not used in NAMCS]2 = Nonprescription Drug5 = Both Prescription and Over-the-3 = UndeterminedCounter
576	1	1315	[CONTSUB10] CONTROLLED SUBSTANCE STATUS CODE1 = Schedule I (Research Only)2 = Schedule II5 = Schedule V3 = Schedule III6 = No Control4 = Schedule IV7 = Undetermined
577	1	1316	[COMSTAT10] COMPOSITION STATUS CODE 1 = Single Entity Drug 2 = Combination Drug 3 = Undetermined
578	3	1317-1319	[RX10CAT1] MULTUM DRUG CATEGORY # 1

Reflects the most detailed therapeutic level to which the drug can be classified. For some drugs, Multum Level 1 (broadest level) is the most detailed, while others can be coded to Level 2, but the majority can be coded to Level 3 (most detailed level). For more on the Multum classification system, please see page 17. The complete Multum classification is shown in Appendix III.

			<ul> <li>" = Blank/Not applicable</li> <li>001 - 899 = Drug category</li> <li>999 = Undetermined category</li> </ul>
579	3	1320-1322	[RX10CAT2] MULTUM DRUG CATEGORY # 2 See RX1CAT1.
580	3	1323-1325	[RX10CAT3] MULTUM DRUG CATEGORY # 3 See RX1CAT1.
581	3	1326-1328	[RX10CAT4] MULTUM DRUG CATEGORY # 4 See RX1CAT1.

DRUG CATEGORY LEVELS See RX1CAT1 for general coding conventions that apply to al Multum drug categories. Complete Multum classification scheme is shown in Appendix III. 582 3 1329-1331 [RX10V1C1] Level 1 of MULTUM DRUG CATEGORY # 1	ION, AND CODES	[ITEM NAME], DESCRIPTION, AI	FILE LOCATION	FIELD LENGTH	ITEM NO.
<ul> <li>See RX1CAT1 for general coding conventions that apply to a Multum drug categories. Complete Multum classification scheme is shown in Appendix III.</li> <li>3 1329-1331 [RX10V1C1] Level 1 of MULTUM DRUG CATEGORY # 1</li> </ul>					
Multum drug categories. Complete Multum classificationscheme is shown in Appendix III.58231329-1331[RX10V1C1] Level 1 of MULTUM DRUG CATEGORY # 1	_S	DRUG CATEGORY LEVELS			
	complete Multum classification	Multum drug categories. Complete			
	ILTUM DRUG CATEGORY # 1	[RX10V1C1] Level 1 of MULTUM	1329-1331	3	582
583 3 1332-1334 [RX10V1C2] Level 1 of MULTUM DRUG CATEGORY # 2			1332-1334	3	
584 3 1335-1337 [RX10V1C3] Level 1 of MULTUM DRUG CATEGORY # 3			1335-1337	3	584
585 3 1338-1340 [RX10V1C4] Level 1 of MULTUM DRUG CATEGORY # 4	ILTUM DRUG CATEGORY # 4	[RX10V1C4] Level 1 of MULTUM	1338-1340		585
586 3 1341-1343 [RX10V2C1] Level 2 of MULTUM DRUG CATEGORY # 1			1341-1343	3	586
587 3 1344-1346 [RX10V2C2] Level 2 of MULTUM DRUG CATEGORY # 2	ILTUM DRUG CATEGORY # 2	[RX10V2C2] Level 2 of MULTUM	1344-1346	3	587
588 3 1347-1349 [RX10V2C3] Level 2 of MULTUM DRUG CATEGORY # 3	ILTUM DRUG CATEGORY # 3	[RX10V2C3] Level 2 of MULTUM	1347-1349	3	588
589 3 1350-1352 [RX10V2C4] Level 2 of MULTUM DRUG CATEGORY # 4	ILTUM DRUG CATEGORY # 4	[RX10V2C4] Level 2 of MULTUM	1350-1352	3	589
590 3 1353-1355 [RX10V3C1] Level 3 of MULTUM DRUG CATEGORY # 1	ILTUM DRUG CATEGORY # 1	[RX10V3C1] Level 3 of MULTUM	1353-1355	3	590
591 3 1356-1358 [RX10V3C2] Level 3 of MULTUM DRUG CATEGORY # 2	ILTUM DRUG CATEGORY # 2	[RX10V3C2] Level 3 of MULTUM	1356-1358	3	591
592 3 1359-1361 [RX10V3C3] Level 3 of MULTUM DRUG CATEGORY # 3			1359-1361		592
593 3 1362-1364 [RX10V3C4] Level 3 of MULTUM DRUG CATEGORY # 4	ILTUM DRUG CATEGORY # 4	[RX10V3C4] Level 3 of MULTUM	1362-1364	3	593

NAMCS SAMPLE DESIGN VARIABLES

NAMCS sampling design variables (in masked format) were first added to the 2000 public use file, and data years from 1993-1999 were re-released to include them. These variables were for use with statistical software such as SUDAAN that takes into account the complex sampling design of the survey. However, for those running versions of SAS, Stata, SPSS and other software that assumes a single stage of sampling, the multi-stage design variables provided on the public use files could not be used without modification. Therefore, in 2002, two new variables, CSTRATM and CPSUM, were developed, that could be used in such programs instead of the multi-stage variables. In 2003, the decision was made to include on the public use file just these two variables and not the multi-stage design variables that appeared in the past.

Until such time as the older public use files may be re-released to include these variables, data users wishing to combine data from 2003 and later years with data from earlier years will find it necessary to create CSTRATM and CPSUM for the earlier files. A technical paper, *Using Ultimate Cluster Models with NAMCS and NHAMCS Public Use Files,* is available for downloading at the Ambulatory Health Care Data website: <a href="http://www.cdc.gov/nchs/ahcd/ahcd\_questionnaires.htm">http://www.cdc.gov/nchs/ahcd/ahcd\_questionnaires.htm</a>. This paper gives instructions on how to configure data files prior to 2002 for variance estimation based on 1-stage sampling models, such as those used in SAS proc surveymeans, Stata, SPSS, and the SUDAAN with-replacement option, and how to handle instances of single-case strata in the data on the older files. Please also see the section on Relative Standard Errors in the current document for more information on these variables and how to use them. PSU is primary sampling unit.

In 2012, NAMCS utilized a list sample, as described in more detail on page 8. For consistency with previous years, the same names used in earlier years have been used for the two new sample design variables. For additional information on combining data across years with the old and new sample designs, please see p. 112.

PAGE 98			2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION
ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
594	8	1365-1372	[CSTRATM] Masked clustered stratum marker 10112101-20912121
595	6	1373-1378	[CPSUM] Sampled provider marker 23-40395
596	4	1379-1382	[YEAR] SURVEY YEAR 2012
597	1	1383	[SETTYPE] SETTING TYPE This item is intended for use when combining data from NAMCS and NHAMCS.
			<ul> <li>1 = NAMCS (only CHC visits included in CHC file)</li> <li>2 = Hospital outpatient department (NHAMCS)</li> <li>3 = Hospital emergency department (NHAMCS)</li> </ul>
File, cate designat	egory 1 alone e NAMCS da	e will not distir ata in general	012 NAMCS Public Use File with the 2012 NAMCS CHC Public Use nguish the records from each component because it is used to in both files. The RETYPOFFR variable in column 494 can be used to d fine, as all of the CHC records have a REYTPOFFR value of 3.
598	11	1384-1394	[PATWT] PATIENT VISIT WEIGHT (NOT FOR STATE ESTIMATES) (See page 21 for more information.)
			This variable has been produced as an unrounded integer in 2012, which will make estimates slightly more precise. It is ONLY for use in producing national, regional, division, and MSA-level estimates, NOT state estimates.
			168.792 – 82313.10758
599	12	1395-1406	[PATWTST] PATIENT VISIT WEIGHT FOR STATE ESTIMATES (See page 21 for more information.)
			This variable has been produced as an unrounded integer in 2012, which will make estimates slightly more precise. It is ONLY for use in producing state estimates, NOT national, regional, division, or MSA- lavel actimates

NOTE: Records sampled in 'division remainders' (that is, not part of the 34 most populous states, but in states aggregated within their division) were given miniscule values for PATWTST (.00016826). State estimates cannot be produced from these records (a total of 6,826 records), but assigning some value for PATWTST was necessary to avoid the records being dropped from statistical software when calculating variances.

0.00016826 - 114499.13409

level estimates.

ITEM NO.	FIELD LENGTH	FILE LOCATION	[ITEM NAME], DESCRIPTION, AND CODES
600	9	1407-1415	[PHYSWT] PROVIDER WEIGHT
			Provider weight enables data users to make provider-level estimates, based on type of sampled provider (SMPROV). See also "Description of the NAMCS," Marginal Data, and Appendix I.
			3.52556 - 849.86677
601	1	1416	[SMPROV] SAMPLED PROVIDER TYPE
			1 = Physician 2 = Nurse practitioner 3 = Physician assistant 4 = Nurse midwife
602	3	1417-1419	[TIMECHC] TIME SPENT WITH NON-PHYSICIAN CLINICIAN (in minutes) (See also TIMEMD)
			-7 = Not applicable (Sampled provider was a physician) 0-240
603	2	1420-1421	[TIMECHCFL] Imputation indicator for TIMECHC
			<ul> <li>-7 = Not applicable (Sampled provider was a physician)</li> <li>0 = Not imputed</li> <li>1 = Imputed</li> </ul>

# **B. PHYSICIAN SPECIALTY LIST**

Physicians within each CHC self-identified their specialty during the NAMCS induction interview. Below is a list of the broad specialty groupings used in the CHC file, along with the American Medical Association physician specialties used to define them, for survey tabulation purposes. The specialties within each broader group are the same as those in the 2012 NAMCS public use file.

# **GENERAL AND FAMILY PRACTICE**

- AMF Adolescent Medicine (Family Practice)
- EFM Emergency Medicine/Family Medicine
- FP Family Practice
- FPG Family Practice, Geriatric Medicine
- GP General Practice
- HPF Hospice & Palliative Medicine (Family Medicine)
- AMI Adolescent Medicine (Internal Medicine)
- IFP Internal Medicine Family Practice
- IMG Geriatric Medicine (Internal Medicine)
- IPM Internal Medicine/Preventive Medicine

### **INTERNAL MEDICINE**

IM - Internal Medicine

# PEDIATRICS

- ADL Adolescent Medicine (Pediatrics)
- CAP Child Abuse Pediatrics
- CCP Pediatric Critical Care Medicine
- DBP Developmental Behavioral Pediatrics
- EMP Pediatrics Emergency Medicine
- MPD Internal Medicine/Pediatrics
- NDN Neurodevelopmental Disabilities (Psychiatry & Neurology)
- NDP Neurodevelopmental Disabilities (Pediatrics)
- NPM Neonatal-Perinatal Medicine
- **PD** Pediatrics
- PDA Pediatric Allergy
- PDC Pediatric Cardiology
- PDE Pediatric Endocrinology
- PDI Pediatric Infectious Diseases
- PDP Pediatric Pulmonology
- PDT Medical Toxicology (Pediatrics)
- PEM Pediatric Emergency Medicine (Pediatrics)
- PG Pediatric Gastroenterology
- PHO Pediatric Hematology/Oncology
- PMG Pediatrics Medical Genetics
- PN Pediatric Nephrology
- PPR Pediatric Rheumatology
- PSM Pediatric Sports Medicine

# **GENERAL SURGERY**

GS - General Surgery

# **OBSTETRICS AND GYNECOLOGY**

- GO Gynecological Oncology
- GYN Gynecology
- HPO -- Hospice & Palliative Med (Obstetrics & Gynecology)
- MFM Maternal & Fetal Medicine
- OBG Obstetrics & Gynecology
- **OBS** Obstetrics
- OCC Critical Care Medicine (Obstetrics & Gynecology)

# PSYCHIATRY

- ADP Addiction Psychiatry
- CHP Child and Adolescent Psychiatry
- CPP Pediatrics/Psychiatry/Child & Adolescent Psychiatry
- NUP Neuropsychiatry
- P Psychiatry
- PFP Forensic Psychiatry
- PYA Psychoanalysis
- PYG Geriatric Psychiatry
- PYM Psychosomatic Medicine

# OPHTHALMOLOGY

- OPH Ophthalmology
- PO Pediatric Ophthalmology

# ALL OTHER

- A Allergy
- ADM Addiction Medicine
- AI Allergy and Immunology
- ALI Clinical Laboratory Immunology (Allergy & immunology)
- AM Aerospace Medicine
- AS Abdominal Surgery
- **CBG** Clinical Biochemical Genetics
- CCG Clinical Cytogenetics
- CCM Critical Care Medicine (Internal medicine)
- CCS Surgical Critical Care (Surgery)
- CFS Craniofacial Surgery
- CG Clinical Genetics

ALL OTHER (cont.)
CHS Congenital Cardiac Surgery (Thoracic Surgery)
CMG - Clinical Molecular Genetics
CRS - Colon & Rectal Surgery
CS – Cosmetic Surgery
DDL – Clinical and Lab Derm Immunology
DIA - Diabetes
DS - Dermatologic Surgery
EM - Emergency Medicine
END – Endocrinology, diabetes and metabolism
EP - Epidemiology
ESM - Sports Medicine (Emergency Medicine)
ETX - Medical Toxicology (Emergency Medicine)
FPP – Psychiatry/Family Practice
FPS - Facial Plastic Surgery
FSM – Family Practice/Sports Medicine
GE - Gastroenterology
GPM - General Preventive Medicine
HEM – Hematology (Internal medicine)
HEP - Hepatology
HNS - Head & Neck Surgery
HO - Hematology/Oncology
HPE – Hospice & Palliative Medicine
(Emergency Medicine)
HPI – Hospice & Palliative Medicine (Internal
Medicine)
HPM - Hospice & Palliative Medicine
HPR Hospice & Palliative Med (Physical Med & Rehab)
HS - Hand Surgery
HSP - Hand Surgery (Plastic Surgery)
HSS - Hand Surgery (Surgery)
IC - Interventional Cardiology
ICE – Clinical Cardiac Electrophysiology
ID - Infectious Diseases
IEC – Internal Medicine Emergency
Medicine/Critical Care Medicine
IG - Immunology
ILI – Clinical and Laboratory Immunology
(Internal Medicine)
IMD – Internal Medicine/Dermatology
ISM - Internal Medicine - Sports Medicine
LM - Legal Medicine
MDM - Medical Management
MEM – Internal Medicine/Emergency Medicine MG - Medical Genetics
MN – Internal Medicine/Neurology
MP – Internal Medicine/Psychiatry
MPM – Internal Medicine/Physical Medicine and
Rehabilitation
NC – Nuclear Cardiology
NEP – Nephrology
NMN – Neuromuscular medicine
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# ALL OTHER (cont.)

NS - Neurological Surgery
NTR - Nutrition
OM - Occupational Medicine
OMF – Oral & Maxillofacial Surgery
OMM - Osteopathic Manipulative Medicine
ON - Medical Oncology
PA - Clinical Pharmacology PCC - Pulmonary
Critical Care Medicine
PCS - Pediatric Cardiothoracic Surgery
PDD – Pediatric Dermatology
PDM – Pediatrics/Dermatology
PDS - Pediatric Surgery (Surgery)
PE - Pediatric Emergency Medicine
(Emergency Medicine)
PHL - Phlebology
PHM - Pharmaceutical Medicine
PHP - Public Health and General Preventive
Medicine
PLI – Clinical and Laboratory Immunology
(Pediatrics) Immunology
PLM - Palliative Medicine
PM - Physical Medicine and Rehabilitation
PMM – Pain Medicine
PMN – Pain Management (Neurology)
PMP – Pain Medicine (Physical Medicine and
Rehabilitation)
PPM - Pediatrics/Physical Medicine & Rehabilitation
PPN – Pain Medicine (Psychiatry)
PRD – Procedural Dermatology
PRO – Proctology
PRS – Sports Medicine (Physical Medicine and
Rehabilitation)
PS Plastic Surgery
PSH Plastic Surgery within the Head & Neck
PSP Plastic Surgery within the Head & Neck
(Plastic Surgery)
PTX - Medical Toxicology (Preventive Medicine)
PUD - Pulmonary Diseases
PYN – Psychiatry (Neurology)
REN - Reproductive Endocrinology
RHU - Rheumatology
RPM – Pediatric Rehabilitation Medicine
SCI - Spinal Cord Injury Medicine
SME - Sleep Medicine
SMI – Sleep Medicine (Internal Medicine)
SMN – Sleep Medicine (Psychiatry & Neurology)
SO - Surgical Oncology
THP – Transplant Hepatology (Internal
Medicine)
TRS - Traumatic Surgery
TS - Thoracic Surgery
TTS - Transplant Surgery
UCM – Urgent Care Medicine

# ALL OTHER (cont.)

UM - Underseas Medicine (Preventive Medicine)

- UME Underseas Medicine (Emergency Medicine)
- VM Vascular Medicine

# ALL OTHER (cont.)

- VS Vascular Surgery OS - Other Specialty US – Unspecified
- C. AMA SPECIALTIES REGROUPED INTO PRIMARY CARE, SURGICAL, AND MEDICAL SPECIALTIES

Below is a list of the AMA physician specialties regrouped into primary care, surgical, and medical specialties for analytic purposes (see SPECCAT variable on file layout).

# PRIMARY CARE SPECIALTIES

- ADL Adolescent Medicine (Pediatrics)
- AMF Adolescent Medicine (Family Practice)
- AMI Adolescent Medicine (Internal Medicine)
- EFM Emergency Medicine/Family Medicine
- FP Family Practice
- FPG Geriatric medicine (Family Practice)
- GP General Practice
- GYN Gynecology
- HPF Hospice & Palliative Medicine (Family Medicine)
- IFP Internal Medicine/Family Practice
- IM Internal Medicine
- IMG Geriatric Medicine (Internal Medicine)
- IPM Internal Medicine/Preventive Medicine
- MPD Internal Medicine/Pediatrics
- OBG Obstetrics & Gynecology
- OBS Obstetrics
- PD Pediatrics
- PSM Pediatric Sports Medicine

### SURGICAL SPECIALTIES

- AS Abdominal Surgery
- CCS Surgical Critical Care (Surgery)
- CFS Craniofacial Surgery
- CHS Congenital Cardiac Surgery (Thoracic Surgery)
- CRS Colon & Rectal Surgery
- CS Cosmetic Surgery
- DS Dermatologic Surgery
- FPS Facial Plastic Surgery
- GO Gynecological Oncology
- GS General Surgery
- HO Hematology/Oncology
- HNS Head & Neck Surgery
- HS Hand Surgery
- HSO Hand Surgery (Orthopedics)
- HSP Hand Surgery (Plastic Surgery)
- HSS Hand Surgery (Surgery)
- MFM Maternal & Fetal Medicine
- NO Neurotology (Otolaryngology)
- NS Neurological Surgery

### SURGICAL SPECIALTIES (cont.)

- NSP Pediatric Surgery (Neurology)
- OAR Adult Reconstructive Orthopedics
- OCC Critical Care Medicine (Obstetrics & Gynecology)
- OFA Foot And Ankle, Orthopedics
- OMF Oral and Maxillofacial Surgery
- OMO- Musculoskeletal Oncology
- ON Medical Oncology
- OP Pediatric Orthopedics
- OPH Ophthalmology
- **ORS Orthopedic Surgery**
- OSM Sports Medicine (Orthopedic Surgery)
- OSS Orthopedic Surgery Of The Spine
- OTO Otolaryngology
- OTR Orthopedic Trauma
- PCS Pediatric Cardiothoracic Surgery
- PDO Pediatric Otolaryngology
- PDS Pediatric Surgery (Surgery)
- PO Pediatric Ophthalmology
- PRD Procedural Dermatology
- PS Plastic Surgery
- PSH Plastic Surgery Within the Head & Neck
- SO Surgical Oncology
- TRS Trauma Surgery
- TS Thoracic Surgery
- TTS Transplant Surgery
- U Urology
- UP Pediatric Urology
- VS Vascular Surgery

### **MEDICAL SPECIALTIES**

- A Allergy
- ADM Addiction Medicine
- ADP Addiction Psychiatry
- AI Allergy & Immunology
- ALI Clinical Laboratory Immunology (Allergy & Immunology)
- AM Aerospace Medicine
- CAP Child Abuse Pediatrics
- **CBG** Clinical Biochemical Genetics
- CCG -Clinical Cytogenetics
- CCM -Critical Care Medicine (Internal Medicine)

- CCP Pediatric Critical Care Medicine
- CD Cardiovascular Disease
- CG Clinical Genetics
- CHN Child Neurology
- CHP Child and Adolescent Psychiatry
- CMG -Clinical Molecular Genetics
- CN Clinical Neurophysiology
- CPP Pediatrics/Psychiatry/Child & Adolescent Psychiatry
- D Dermatology
- **DBP** Developmental-Behavioral Pediatrics
- DDL Clinical And Lab Derm Immunology
- DIA Diabetes
- EM Emergency Medicine
- EMP Pediatrics/Emergency Medicine
- END Endocrinology, Diabetes and Metabolism
- EP Epidemiology
- ESM Sports Medicine (Emergency Medicine)
- ETX Medical Toxicology (Emergency Medicine)
- FPP Psychiatry/Family Practice
- FSM Family Practice/Sports Medicine
- GE Gastroenterology
- **GPM** -General Preventive Medicine
- HEM Hematology (Internal Medicine)
- HEP Hepatology
- HO Hematology/Oncology
- HPE Hospice & Palliative Medicine (Emergency Medicine)
- HPI Hospice & Palliative Medicine (Internal Medicine)
- HPM Hospice & Palliative Medicine
- HPR Hospice & Palliative Medicine (Physical Medicine)
- IC Interventional Cardiology
- ICE Clinical Cardiac Electrophysiology
- ID Infectious Disease
- IEC Internal Medicine/Emergency Medicine/ Critical Care Medicine
- IG Immunology
- ILI Clinical and Laboratory Immunology (Internal Medicine)
- IMD Internal Medicine/Dermatology
- ISM Internal Medicine Sports Medicine
- LM Legal Medicine
- MDM -Medical Management
- MEM- Internal Medicine/Emergency Medicine
- MG Medical Genetics
- MN Internal Medicine/Neurology
- MP Internal Medicine/Psychiatry
- MPM Internal Medicine/Physical Medicine And Rehabilitation

#### MEDICAL SPECIALTIES (cont.)

- N Neurology
- NC Nuclear Cardiology
- NDN Neurodevelopmental Disabilities (Psychiatry & Neurology)
- NDP Neurodevelopmental Disabilities (Pediatrics)
- NEP Nephrology
- NMN Neuromuscular Medicine
- NMP Neuromuscular Medicine (Physician Medicine and Rehabilitation)
- NPM -Neonatal-Perinatal Medicine
- NRN Neurology/Diagnostic
  - Radiology/Neuroradiology
- NTR Nutrition
- NUP Neuropsychiatry
- OM Occupational Medicine
- OMM Osteopathic Manipulative Medicine
- ON Medical Oncology
- P Psychiatry
- PA Clinical Pharmacology
- PCC Pulmonary Critical Care Medicine
- PDA Pediatric Allergy
- PDC Pediatric Cardiology
- PDD Pediatric Dermatology
- PDE Pediatric Endocrinology
- PDI Pediatric Infectious Diseases
- PDM Pediatrics/Dermatology
- PDP Pediatric Pulmonology
- PDT Medical Toxicology (Pediatrics)
- PE Pediatric Emergency Medicine (Emergency Medicine)
- PEM Pediatric Emergency Medicine (Pediatrics)
- PFP Forensic Psychiatry
- PG Pediatric Gastroenterology
- PHL Phlebology
- PHM Pharmaceutical Medicine
- PHO Pediatric Hematology/Oncology
- PHP Public Health and General Preventive Medicine
- PLI Clinical and Laboratory Immunology (Pediatrics)
- PLM Palliative Medicine
- PM Physical Medicine & Rehabilitation
- PMM Pain Medicine
- PMN Pain Medicine (Neurology)
- PMP Pain Management (Physical Medicine & Rehabilitation)
- PN Pediatric Nephrology
- PPM Pediatrics/Physical Medicine & Rehabilitation
- PPN Pain Medicine (Psychiatry)

#### MEDICAL SPECIALTIES (cont.)

- PPR Pediatric Rheumatology
- PRO Proctology
- PRS Sports Medicine (Physical Medicine & Rehabilitation)
- PTX Medical Toxicology (Preventive Medicine)
- PUD Pulmonary Disease
- PYA Psychoanalysis
- PYG Geriatric Psychiatry
- PYM Psychosomatic Medicine
- PYN Psychiatry/Neurology
- **REN Reproductive Endocrinology**
- RHU Rheumatology
- **RPM** Pediatric Rehabilitation Medicine
- SCI Spinal Cord Injury Medicine

#### MEDICAL SPECIALTIES (cont.)

- SME Sleep Medicine
- SMI Sleep Medicine (Internal Medicine)
- SMN Sleep Medicine (Psychiatry & Neurology)
- THP Transplant Hepatology (Internal Medicine)
- UCM Urgent Care Medicine
- UCM Urgent Care Medicine
- UM Underseas Medicine (Preventive Medicine)
- UME -Underseas Medicine (Emergency Medicine)
- VM Vascular Medicine
- VN Vascular Neurology
- OS Other Specialty
- US Unspecified Specialty

# III. MARGINAL DATA

#### A. PATIENT VISITS

PATIENT AGE

CATEGORY	RECORDS	WEIGHTED VISITS	PERCENT
Total	34,698	65,332,722	100.000
1 - Under 15 years	7,844	14,690,679	22.486
2 - 15-24 years	4,149	7,929,870	12.138
3 - 25-44 year	9,096	17,369,404	26.586
4 - 45-64 years	10,168	19,179,479	29.357
5 - 65-74 years	2,129	3,925,599	6.009
6 - 75 years and over	1,312	2,237,691	3.425

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PATIENT SEX

CATEGORY	RECORDS	WEIGHTED VISITS	PERCENT
Total	34,698	65,332,722	100.000
1 - Female	21,554	40,746,810	62.368
2 - Male	13,144	24,585,911	37.632

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# PATIENT RACE RECODE (WITH MISSING DATA IMPUTED)

CATEGORY	RECORDS	WEIGHTED VISITS	PERCENT	
Total	34,698	65,332,722	100.000	
1 - White	25,089	51,857,257	79.374	
2 - Black	7,409	9,982,561	15.280	
3 - Other	2,200	3,492,904	5.346	

EXPECTED PRIMARY SOURCE OF PAYMENT [based on PAYTYPER, a recoded variable, see more about this variable on page 28]

CATEGORY	RECORDS	WEIGHTED VISITS	PERCENT
Total	34,698	65,332,722	100.000
-9 - All sources of payment are blank	811	1,784,157	2.731
-8 - Unknown	2,164	2,808,101	4.298
1 - Private insurance	6,012	10,876,895	16.648
2 - Medicare	4,418	7,856,609	12.026
3 - Medicaid	12,393	26,668,663	40.820
4 - Worker's compensation	57	78,605	0.120
5 - Self-pay	6,226	9,303,353	14.240
6 - No charge	575	976,910	1.495
7 - Other	2,042	4,979,429	7.622

MAJOR REASON FOR VISIT

CATEGORY	RECORDS	WEIGHTED VISITS	PERCENT
Total	34,698	65,332,722	100.000
-9 - Blank	168	396,952	0.608
1 - New problem (less than 3 mos.			
onset)	14,292	25,951,758	39.722
2 - Chronic problem, routine	8,580	16,646,534	25.480
3 - Chronic problem, flare-up	2,087	4,129,886	6.321
4 - Pre-/Post-surgery	368	877,908	1.344
5 - Preventive care	9,203	17,329,683	26.525

HAS THE PATIENT BEEN SEEN IN YOUR PRACTICE BEFORE?

CATEGORY	RECORDS	WEIGHTED VISITS	PERCENT
Total	34,698	65,332,722	100.000
1 - Yes, established patient	29,590	56,050,935	85.793
2 - No, new patient	5,108	9,281,786	14.207

CATEGORY	RECORDS	WEIGHTED VISITS	PERCENT
Total	34,698	65,332,722	100.000
0	7,791	16,476,015	25.219
1	7,037	13,347,130	20.429
2	5,555	9,214,992	14.105
3	3,810	7,083,365	10.842
4	2,661	4,795,283	7.340
5	1,904	3,714,178	5.685
6	1,358	2,530,401	3.873
7	1,037	1,940,274	2.970
8	820	1,511,621	2.314
9	817	1,456,716	2.230
10	1,908	3,262,747	4.994

# NUMBER OF MEDICATION CODES THIS VISIT

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PHYSICIAN SPECIALTY - 14 SPECIALTY GROUPS/NON-PHYSICIAN CLINICIANS

CATEGORY	RECORDS	WEIGHTED VISITS	PERCENT
Total	34,698	65,332,722	100.000
1 - General/family practice	11,343	20,450,300	31.302
3 - Internal medicine	2,346	6,495,130	9.942
4 - Pediatrics	3,812	7,728,395	11.829
5 - General surgery	10	151,839	0.232
6 - Obstetrics and gynecology	1,254	3,645,261	5.580
11 - Psychiatry	305	1,043,973	1.598
13 - Ophthalmology	8	81,320	0.124
15 - Other specialties	422	1,058,078	1.620
96 - Nurse practitioner	9,876	12,932,590	19.795
97 - Physician assistant	4,795	10,720,856	16.410
98 - Nurse midwife	527	1,024,979	1.569

#### **B. DRUG MENTIONS**

PATIENT AGE

CATEGORY	RECORDS	WEIGHTED MENTIONS	PERCENT	
Total	98,141	177,374,433	100.000	
1 - Under 15 years	12,933	23,680,847	13.351	
2 - 15-24 years	6,757	12,782,031	7.206	
3 - 25-44 years	22,608	40,078,871	22.596	
4 - 45-64 years	39,597	72,308,408	40.766	
5 - 65-74 years	9,972	18,425,252	10.388	
6 - 75 years and over	6,274	10,099,024	5.694	

PATIENT SEX

CATEGORY	RECORDS	WEIGHTED MENTIONS	PERCENT
Total	98,141	177,374,433	100.000
1 - Female	61,085	110,415,663	62.250
2 - Male	37,056	66,958,770	37.750

PHYSICIAN SPECIALTY - 14 SPECIALTY GROUPS/NON-PHYSICIAN CLINICIAN

CATEGORY	RECORDS	WEIGHTED MENTIONS	PERCENT
Total	98,141	177,374,433	100.000
1 - General/family practice	36,700	61,494,565	34.669
3 - Internal medicine	7,907	23,468,719	13.231
4 - Pediatrics	7,142	13,376,508	7.541
5 - General surgery	62	941,404	0.531
6 - Obstetrics and gynecology	1,889	5,575,725	3.143
11 - Psychiatry	835	2,550,077	1.438
13 - Ophthalmology	6	60,990	0.034
15 - Other specialties	1,262	5,603,459	3.159
96 - Nurse practitioner	28,520	35,217,661	19.855
97 - Physician assistant	13,062	27,560,027	15.538
98 - Nurse midwife	756	1,525,298	0.860

#### DRUG THERAPEUTIC CATEGORIES (USING LEVEL 1 CODES)

CATEGORY	RECORDS	WEIGHTED MENTIONS	PERCENT
Total	104,826	190,213,720	100.000
'OO1'=Anti-infectives	7,753	12,734,730	6.695
'020'=Antineoplastics	581	1,151,810	0.606
'O28'=Biologicals	70	259,681	0.137
'040'=Cardiovascular agents	14,554	24,695,054	12.983
'057'=Central nervous system agents	21,492	39,779,253	20.913
'081'=Coagulation modifiers	2,798	5,299,095	2.786
'087'=Gastrointestinal agents	5,389	9,897,520	5.203
'097'=Hormones	4,909	8,817,217	4.635
'105'=Miscellaneous agents	1,448	2,835,486	1.491
'113'=Genitourinary tract agents	635	1,035,271	0.544
<pre>'115'=Nutritional products</pre>	5,491	10,750,199	5.652
'122'=Respiratory agents	11,289	19,185,874	10.086
'133'=Topical agents	5,887	10,770,397	5.662
'153'=Plasma expanders	3	4,689	0.002
'218'=Alternative medicines	1,338	2,283,035	1.200
'242'=Psychotherapeutic agents	6,551	12,538,098	6.592
'254'=Immunological agents	4,935	9,887,009	5.198
'331'=Radiologic agents	10	31,867	0.017
'358'=Metabolic agents	9,630	18,155,576	9.545
'365'=Medical gases	34	48,928	0.026
'899'=Pharmaceutical aids	29	52,930	0.028

Therapeutic categories are based on Lexicon Plus®, a proprietary database of Cerner Multum, Inc. The Lexicon Plus is a comprehensive database of all prescription and some nonprescription drug products available in the U.S. drug market. For additional information on the Multum Lexicon Drug Database, please refer to the following Web site: <u>http://www.multum.com/Lexicon.htm</u>. For more information on coding therapeutic categories in NAMCS, see page 17.

#### C. PHYSICIAN/NON-PHYSICIAN CLINICIAN ESTIMATES

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### PHYSICIAN SPECIALTY/NON-PHYSICIAN CLINICIAN

CATE	TEGORY RECORDS WEIGHTED PROVIDERS		PERCENT	
	Total	1,752	26,308	100.000
1 -	General/family practice	553	7,053	26.810
3	Internal medicine	119	2,037	7.741
4	Pediatrics	173	2,933	11.147
5	General surgery	1	435	1.652
6	Obstetrics and gynecology	70	2,264	8.604
11	Psychiatry	16	517	1.964
13	Ophthalmology	1	96	0.365
15	Other specialties	22	837	3.180
96	Nurse practitioner	528	5,719	21.740
97	Physician assistant	239	3,838	14.590
98	Nurse midwife	30	580	2.206

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IS THIS A SOLO PRACTICE?

CATEGORY	RECORDS	WEIGHTED PROVIDER	RS PERCENT
Total	1,752	26,308	100.000
-9 - Blank	1	2	0.008
1 - Yes	175	1,909	7.257
2 - No	1,576	24,397	92.736

SPECIALTY TYPE/NON-PHYSICIAN CLINICIAN

CATEGORY

#### RECORDS WEIGHTED PHYSICIANS PERCENT

Total	1,752	26,308	100.000
1 - Primary care specialty	914	14,265	54.223
2 - Surgical care specialty	3	541	2.056
3 - Medical care specialty	38	1,364	5.185
4 - Non-physician clinician	797	10.138	38.536

#### D. STATE ESTIMATES

# -----

STATE WHERE MAJORITY OF PROVIDER'S VISITS WERE SAMPLED

Total (34 most populous states)	31,737	54,272,922	100.000
Alabama	586	466,495	0.860
Arizona	1,528	1,606,944	2.961
Arkansas	899	406,893	0.750
California	1,463	17,177,225	31.650
Colorado	, 643	719,867	1.326
Connecticut	533	971,927	1.791
Florida	1,030	2,364,505	4.357
Georgia	777	540,857	0.997
Illinois	641	3,458,852	6.373
Indiana	1,622	879,899	1.621
Iowa	1,164	545,551	1.005
Kansas	1,059	218,663	0.403
Kentucky	396	408,121	0.752
Louisiana	954	666,816	1.229
Maryland	834	780,411	1.438
Massachusetts	589	1,483,821	2.734
Michigan	1,163	2,265,147	4.174
Minnesota	880	404,702	0.746
Mississippi	936	692,451	1.276
Missouri	630	1,793,789	3.305
New Jersey	1,039	915,880	1.688
New York	441	3,032,530	5.588
North Carolina	770	695,599	1.282
Ohio	1,387	1,701,532	3.135
Oklahoma	1,094	413,005	0.761
Oregon	550	773,153	1.425
Pennsylvania	903	1,304,292	2.403
South Carolina	1,157	943,240	1.738
Tennessee	694	729,715	1.345
Texas	1,283	2,368,547	4.364
Utah	753	177,114	0.326
Virginia	1,175	857,566	1.580
Washington	1,713	2,131,758	3.928
Wisconsin	451	376,055	0.693
NOTE: Figures in this table refle			
additional 2,961 records were sam	•		
division. To produce estimates H	by division, o	one must use the	patient visit

weight PATWT, not the state-based patient visit weight PATWTST.

### APPENDIX I

#### A. STANDARD ERRORS AND VARIANCE ESTIMATION

The standard error is primarily a measure of the sampling variability that occurs by chance because only a sample is surveyed, rather than the entire universe. The relative standard error (RSE) of an estimate is obtained by dividing the standard error of the estimate by the estimate itself and is expressed as a percentage of the estimate.

In the past, NAMCS micro-data file documentation contained formulas for approximating relative standard errors based on generalized variance curves as well as tables showing lowest reliable estimates based on curve coefficients. This was provided as an alternative for data users who lacked analytic software to produce standard errors and other measures of sampling variability. However, it has long been recognized that such approximations are less accurate than those produced using a statistical software package that takes into account the complex sample designs of surveys. As more data users have obtained access to sophisticated computer software over time, and as recent efforts by NCHS research staff to refine the generalized variance curves did not yield significant improvements, the decision was made starting with 2011 NAMCS data to discontinue the provision of these approximate methods of variance estimation.

Using computer software like SUDAAN to produce standard errors will, in general, yield results that are more accurate than those produced using generalized variance curves. This is especially true for clustered variables like race, provider seen, or expected source of payment. However, standard errors produced with such software using masked design variables, while improving substantially over generalized variance curve results, will not always be as accurate as those produced using unmasked data. Data files containing unmasked variables are confidential and are only available through the NCHS Research Data Center.

Starting with the 2012 NAMCS, a new sampling methodology was employed that used a list sample rather than a clustered sample. The design variables reflect the new sampling methodology. Examples of SUDAAN, SAS, Stata, and SPSS statements which incorporate these new design variables for variance estimation purposes are presented below.

The following example is for use with the 2012 NAMCS public use file and the 2012 NAMCS CHC public use file. It can also be used to approximate variances for visit estimates when 2012 NAMCS data are combined with data from the National Hospital Ambulatory Medical Care Survey, which still uses the pre-2012 NAMCS clustered PSU sample design, or with previous years of NAMCS data.

#### SUDAAN 1-stage WR (With-Replacement) Option

This code provides a with-replacement ultimate cluster (1-stage) estimate of standard errors for a crosstabulation with a dataset called TEST.

PROC CROSSTAB DATA = TEST DESIGN=WR; NEST CSTRATM CPSUM /MISSUNIT;

It is important to keep the following in mind when trying to combine or analyze data across years:

NAMCS public use files from 2003-2011 only include first-stage design variables in their masked form, CSTRATM and CPSUM, for use in WR design options. From 1993-2002, a full set of masked design variables was provided. The decision to switch to ultimate cluster variables was initially made because many popular software products could not make use of the full set of design variables. Instructions are provided for public use file data users on the survey website regarding how to create CSTRATM and

#### 2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION

CPSUM for data years prior to 2002, in order to have a consistent set of design variables for analysis. See the technical paper, *Using Ultimate Cluster Models with NAMCS and NHAMCS Public Use Files*, for more information: <u>http://www.cdc.gov/nchs/namcs.htm</u>.

If software other than SUDAAN is used to approximate estimate variances, other statements will be required by that software. The variance variables required by that software are the same as those defined above for SUDAAN software.

### **SAS - PROC SURVEYMEANS**

PROC SURVEYMEANS DATA=TEST; CLUSTER CPSUM; STRATA CSTRATM;

### Stata - For use with ultimate cluster design option:

The pweight (PATWT), strata (CSTRATM), and PSU (CPSUM) are set with the svyset command as follows:

<u>Stata 8:</u> svyset [pweight=patwt], psu(cpsum) strata(cstratm)

<u>Stata 9 and later:</u> svyset cpsum [pweight=patwt], strata(cstratm)

# <u>SPSS</u>

To obtain variance estimates which take the sample design into account, IBM SPSS Inc.'s Complex Samples module can be used. This description applies to version 21.0. From the main menu, first click on 'Analyze', then 'Complex Samples', then 'Prepare for Analysis'. The 'Analysis Preparation Wizard' can be used to set CSTRATM as the stratum variable, CPSUM as the cluster variable, and PATWT as the weighting variable. The WR design option may be chosen. This will create the PLAN FILE syntax, which should resemble the code below, where PLAN FILE reflects the location you have selected to store the file on your computer:

CSPLAN ANALYSIS /PLAN FILE='DIRECTORY\PLANNAME.CSAPLAN' /PLAN VARS ANALYSISWEIGHT=PATWT /PRINT PLAN /DESIGN STAGELABEL= 'ANY LABEL' STRATA=CSTRATM CLUSTER=CPSUM /ESTIMATOR TYPE=WR. After creating the plan file, various analyses can be selected from the 'Complex Samples' menu. This is an example of a crosstabulation with options selected for counts, percents, and standard errors, with missing data (if any) included:

CSTABULATE /PLAN FILE='DIRECTORY\PLANNAME.CSAPLAN' /TABLES VARIABLES = AGER BY SEX /CELLS POPSIZE ROWPCT COLPCT /STATISTICS SE COUNT /MISSING SCOPE = TABLE CLASSMISSING = INCLUDE.

Results using IBM SPSS with the WR option were found to be the same as those obtained using SUDAAN Release 11.0.1 with the WR option.

**IMPORTANT NOTE REGARDING CHC PROVIDER-LEVEL ESTIMATES:** The examples above can be used when producing visit or drug estimates. For provider-level estimates, the statements are the same, but replace PATWT with PHYSWT.

The PHYSWT variable itself should only be used to make estimates at the provider level. For this reason, it is only placed on the first record for each provider on the public use file. When running purely provider-level analysis, it is recommended that only records with PHYSWT > 0 be selected; this will give the correct sample counts and will not affect estimation of variance. Weighted estimates will be correct either way. For RDC researchers, please be sure to specify if PHYSWT is required and how it will be used, so that files can be constructed properly.

In addition to generating estimates for provider characteristics at the provider level, the addition of PHYSWT also means that one can link visit data with provider data. For example, one could examine average time spent with physicians across physicians rather than simply across visits. This type of analysis is slightly complicated; a description along with sample SAS code is available at the Ambulatory Health Care Data website. For more information, contact the Ambulatory and Hospital Care Statistics Branch at 301-458-4600.

### B. 2012 NAMCS PATIENT RECORD FORM - INSTRUCTIONS AND DEFINITIONS

NOTE: The 2012 NAMCS Patient Record Form was used to collect visit data from both office-based physicians and CHC service delivery sites. The instructions are <u>available</u> in the 2012 NAMCS Public Use File Documentation.

### C. DEFINITIONS OF CERTAIN TERMS USED IN NAMCS CHC COMPONENT

Many of the definitions used in the NAMCS office-based component also apply to the CHC component. The following includes common terms and those with changes that are specific to the CHC component.

Ambulatory patient -- An individual presenting for personal health services, neither bedridden nor currently admitted to any health care institution on the premises.

Community health center – Community health centers are medical facilities that serve low-income and medically underserved communities. The CHC structure is similar to group practices. CHCs are operated from a central office that may support multiple satellite offices and/or mobile health care units. Eligible types of CHCs include:

- Federally-funded Community Health Center (as authorized by Section 330 of the Public Health Service Act)
  - Community Health Center (CHC)
  - Migrant Health Center (MHC)
  - Health Care for the Homeless (HCH)
  - Public Housing Primary Care (PHPC) grant program
- Federally Qualified Health Center, but not federally funded (330 look-alike)
- Urban Indian Health Centers (funded under Title V of the Indian Health Care Improvement Act, PL 94-437, as amended)

Continuity of care -- Continuity of care is a goal of health care achieved through an interdisciplinary process involving patients, families, health care professionals, and providers in the management of a coordinated plan of care. Based on changing needs and available resources, the process optimizes quality outcomes in the health status of patients. It may involve professionals from many different disciplines within multiple systems.

Drug mention(s) --The provider's entry of a pharmaceutical agent ordered or provided--by any route of administration--for prevention, diagnosis, or treatment. Generic as well as brand-name drugs are included. Along with all new drugs, the provider also records continued medications if the patient was specifically instructed or expected to continue the medication.

Drug visit -- A drug visit is a visit at which medication was prescribed or provided by the provider.

Visit --A direct, personal exchange between ambulatory patient and the sampled CHC provider (or members of his/her staff) for the purpose of seeking care and rendering health services.

### PATIENTS

In-scope -- All patients seen by the sampled CHC provider at the sampled CHC service delivery site during the site's sample (reporting) week.

Out-of-scope -- Patients seen by the provider outside of the sampled CHC service delivery site, for example in a different CHC service delivery site, a private practice, a hospital, nursing home, or other extended care institution, or the patient's home. The following types of patients are also considered out-of-scope:

• patients seen by the provider in any institution (including outpatient clinics of hospitals) for which the institution has the primary responsibility for the care of the patient over time;

• patients who telephone and receive advice from the provider;

• patients who come to the CHC service delivery site only to leave a specimen, pick up insurance forms, or pay their bills;

• patients who come to the CHC service delivery site only to pick up medications previously prescribed by the provider.

### PHYSICIANS/PROVIDERS

In-Scope -- All duly licensed doctors of medicine and doctors of osteopathy currently in practice who see ambulatory patients at the sampled CHC service delivery site. Also in-scope are CHC providers who are physician assistants (PAs), nurse practitioners (NPs), and nurse-midwives (NMWs) who care for patients at the sampled CHC service delivery site. Physicians and eligible providers may be employed part-time by a federal or institutional facility or work in private practice, but must provide services at least part time in the sampled CHC.

Out-of-Scope – The survey medical specialty eligibility criteria for CHC physicians are the same as for office-based physicians. PAs, NPs, and NMWs do not list a specialty. For physicians, out-of-scope specialties include anesthesiology, pathology, forensic pathology, radiology, therapeutic radiology, and diagnostic radiology. Ineligible specialty providers in CHCs also include dentists, hygienists, optometrists, podiatrists, psychologists, therapists (physical, speech, occupational), and social workers.

Physician specialty -- Principal specialty (including general practice) as designated by the physician at the time of the survey. Those physicians for whom a specialty was not obtained were assigned the specialty recorded for the physician in the provider sampling frame from which the physician was selected at the CHC.

Metropolitan status — CHC service delivery sites are classified by their location in metropolitan statistical area as follows:

Metropolitan statistical area (MSA)—As defined by the U.S. Office of Management and Budget, the definition of an individual MSA involves two considerations: first, a city or cities of specified population, that constitute the central city and identify the county in which it is located as the central county; second, economic and social relationships with "contiguous" counties that are metropolitan in character so that the periphery of the specific metropolitan area may be determined. MSAs may cross state lines. In New England, MSAs consist of cities and towns rather than counties.

Non-MSA—Non-MSA areas are those not defined as MSAs, including rural and micropolitan areas.

### 2012 NAMCS CHC MICRO-DATA FILE DOCUMENTATION

Region of CHC service delivery site location -- The four geographic regions which correspond to those used by the U.S. Bureau of the Census, are as follows:

<u>Region</u>	States Included
Northeast	Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont
Midwest	Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, Wisconsin
South	Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia
West	Arizona, California, Colorado, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, Wyoming, Alaska, Hawaii
<u>Division</u>	States Included
<ul> <li>1 - New England</li></ul>	

# APPENDIX II REASON FOR VISIT CLASSIFICATION

**NOTE:** The Reason for Visit Classification used for the 2012 NAMCS Community Health Center Public Use Micro-Data File is the same as that used for the 2012 National Ambulatory Medical Care Survey Public Use Micro-Data File and is available <u>here</u>.

# APPENDIX III

# A. GENERIC CODES AND NAMES IN NUMERIC ORDER

NOTE: This list of drugs only includes those found in the 2012 NAMCS CHC data.

- a07001 FOLIC ACID;NIACIN;VITAMIN E;PYRIDOXINE;CYANOCOBALAMIN
- a07002 CHOLECALCIFEROL-CALCIUM CITRATE
- a07027 CALCIUM;MAGNESIUM;CHOLECALCIFEROL
- a07035 ANALGESICS; DIETARY SUPPLEMENT; ANTIOXIDANTS
- a07050 ANGIOTENSIN II RECEPTOR BLOCKERS
- a07069 CYANOACRYLATE
- a07071 TYROSINE
- a10001 ACACIA GUM;HYDROCORTISONE;LEVONORGESTREL;NEOMYCIN;POLYMYXIN B SULFATE
- a10051 BENZYL ALCOHOL; SOYBEAN OIL; STARCH TOPICAL
- a10068 ASCORBIC ACID; BIOTIN; VITAMIN B COMPLEX
- a10096 ASPIRIN-BUFFERS
- a10127 CALCIUM REPLACEMENT-CHOLECALCIFEROL
- a10133 CALCIUM ION;CHLORIDE ION;MAGNESIUM ANTACIDS;POTASSIUM ION;SODIUM ION
- a10136 CALCIUM ION;CHOLECALCIFEROL;IRON PREPARATIONS;VITAMIN A;VITAMIN B COMPLEX
- a10155 CARMELLOSE;GELATIN;MINERAL OIL;PECTIN
- a10160 CASEIN;COCONUT OIL;MAGNESIUM AMINO ACIDS CHELATE;SUCROSE;TAPIOCA
- a10163 CASEIN;MULTIVITAMIN;SAFFLOWER OIL;SOYBEAN OIL;SUCROSE
- a10166 CERESIN WAX; MINERAL OIL; PETROLATUM TOPICAL; WOOLWAX ALCOHOL
- a10172 CETEARETH; PETROLATUM TOPICAL; PROPYLENE GLYCOL; SORBITOL
- a10176 AMMONIUM LACTATE TOPICAL;CETYL ALCOHOL;GLYCERYL;MINERAL OIL;PARABENS
- a10192 CHLORIDE ION;POTASSIUM CITRATE;SODIUM ION
- a10205 CHROMIUN;COPPER GLUCONATE;MANGANESE GLUCONATE;ZINC SULFATE
- a10224 COLLODION;ETHANOL;ETHER;SALICYLIC ACID TOPICAL;ZINC TOPICAL AGENTS, EXTERNAL USE
- a10242 DEXTROSE;FRUCTOSE;PHOSPHORIC ACID
- a10300 ASCORBIC ACID; ELECTROLYTES; MINERALS; VITAMIN B COMPLEX
- a10312 ETHANOL;EUCALYPTUS OIL;MENTHOL TOPICAL;METHYL SALICYLATE TOPICAL;THYMOL
- a10327 FIBRINOLYSIN-FIBRINOLYSIN AND DESOXYRIBONUCLEASE TOPICAL
- a10362 HYDROCORTISONE TOPICAL;IODOCHLORHYDROXYQUIN;PRAMOXINE TOPICAL
- a10379 IRON PREPARATIONS-VITAMIN B COMPLEX
- a10383 IRON PREPARATIONS-VITAMINS
- a10385 ETHINYL ESTRADIOL; IRON PREPARATIONS; NORETHINDRONE
- a10387 CALCIUM CARBONATE;FOLIC ACID;IRON PREPARATIONS;MULTIVITAMIN;NIACIN
- a10399 FOLIC ACID; IRON PREPARATIONS; MULTIVITAMIN
- a10414 ASCORBIC ACID; CHOLECALCIFEROL; IRON PREPARATIONS; VITAMIN A; VITAMIN E
- a10419 ASCORBIC ACID; ERGOCALCIFEROL; IRON PREPARATIONS; VITAMIN A
- a10421 CYANOCOBALAMIN; IRON PREPARATIONS; PYRIDOXINE; RIBOFLAVIN; THIAMINE

a10435 ASCORBIC ACID-IRON PREPARATIONS a10438 FLUORIDE: IRON PREPARATIONS: MULTIVITAMIN a10442 IRON PREPARATIONS-MULTIVITAMIN a10452 LACTOSE-NORETHINDRONE a10453 LACTOSE-MOMETASONE NASAL a10454 EPLERENONE-LACTOSE a10455 LACTOSE-TROSPIUM a10456 LEMON OIL; MENTHOL; PEPPERMINT; THYME a10460 MAGNESIUM ANTACIDS;STARCH TOPICAL;TALC a10461 ALUMINUM HYDROXIDE; ASPIRIN; CODEINE; MAGNESIUM ANTACIDS a10463 ALUMINUM HYDROXIDE: DIPHENHYDRAMINE TOPICAL: LIDOCAINE: MAGNESIUM ANTACIDS a10464 ASPIRIN;CALCIUM CARBONATE;MAGNESIUM ANTACIDS a10465 ALUMINUM HYDROXIDE; ASPIRIN; MAGNESIUM ANTACIDS a10471 CALCIUM CARBONATE-MAGNESIUM ANTACIDS a10472 ALUMINUM HYDROXIDE;CALCIUM CARBONATE;MAGNESIUM ANTACIDS a10474 ALUMINUM HYDROXIDE-MAGNESIUM ANTACIDS a10475 ALUMINUM HYDROXIDE; MAGNESIUM ANTACIDS; SIMETHICONE a10482 GUAIFENESIN; MENTHOL; PARABENS; PHENYLALANINE a10497 ASPARTAME; DEXTROMETHORPHAN; GUAIFENESIN; METHYLPARABEN: PHENYLALANINE a10500 ALLANTOIN TOPICAL: ALLIUM CEPA: METHYLPARABEN: POLYETHYLENE GLYCOL 3350;SORBIC ACID a10502 GLYCERIN TOPICAL; METHYLPARABEN; MINERAL OIL; STERILE WATER a10530 MINERALS-MULTIVITAMIN a10579 NIACIN; PANTOTHENIC ACID; PYRIDOXINE; RIBOFLAVIN; THIAMINE a10588 MINERAL OIL-PEANUT OIL a10597 DIMENHYDRINATE;NIACIN;PENTYLENETETRAZOL a10623 ASPARTAME; MANNITOL; NICOTINE; PHENYLALANINE a10625 LIVE YEAST CELL:PHENYLMERCURIC NITRATE;SHARK LIVER OIL a10664 HP GUAR; POLYETHYLENE GLYCOL 3350; PROPYLENE GLYCOL; SODIUM BORATE TOPICAL a10675 GLYCERIN TOPICAL-PROPYLENE GLYCOL a10678 CARBOHYDRATES; MULTIVITAMIN; PROTEIN SUPPLEMENT a10697 GINSENG;MEADOWFOAM OIL;PETROLATUM TOPICAL;SAFFLOWER OIL;SESAME OIL a10707 SOAP-WATER a10715 MULTIVITAMIN-SODIUM FLUORIDE a10716 ERTAPENEM;SODIUM BICARBONATE;SODIUM HYDROXIDE a10726 POLYETHYLENE GLYCOL 3350; POTASSIUM CHLORIDE; SODIUM BICARBONATE; SODIUM CHLORIDE; SODIUM SULFATE a10730 HORSETAIL; MANGANESE SULFATE; STEARIC ACID a10732 CORN STARCH TOPICAL:LANOLIN TOPICAL:PETROLEUM:STEARYL ALCOHOL:ZINC **OXIDE TOPICAL** a10749 TALC-ZINC TOPICAL AGENTS, EXTERNAL USE a10785 CALCIUM CARBONATE; CHOLECALCIFEROL; VITAMIN K a10834 CYANOCOBALAMIN; FOLIC ACID; VITAMIN B a10840 ASCORBIC ACID;FOLIC ACID;VITAMIN B COMPLEX;VITAMIN E;ZINC a10842 ASCORBIC ACID; D-BIOTIN; FOLIC ACID; VITAMIN B COMPLEX a10849 ASCORBIC ACID;FOLIC ACID;VITAMIN B COMPLEX

- a10851 ASCORBIC ACID;CHOLECALCIFEROL;VITAMIN A;VITAMIN B COMPLEX;VITAMIN E
- a10864 CARBOHYDRATES;FAT SUPPLEMENT, ORAL;MAGNESIUM AMINO ACIDS CHELATE;MULTIVITAMIN;PROTEIN
- a10879 PENICILLIN (OBSOLETE)-PENICILLIN G BENZATHINE

a10884 ASPARTIC ACID: MANGANESE SULFATE: POTASSIUM ACETATE a10890 CLINDAMYCIN TOPICAL-METHYL PARABEN a10897 HOMATROPINE METHYL BROMIDE-HYDROCODONE a10899 ESTRADIOL; ESTRIOL; ESTRONE a10900 ESTRADIOL-ESTRIOL a10903 ASCORBIC ACID; COPPER GLUCONATE; LUTEIN; VITAMIN E; ZINC a10904 BETA-CAROTENE; BILBERRY; LUTEIN; LYCOPENE; VITAMIN E a10915 CALCIUM ACETATE; CHOLECALCIFEROL; COPPER GLUCONATE; MAGNESIUM; ZINC a10916 CALCIUM ACETATE;COPPER GLUCONATE;IRON;MULTIVITAMIN;ZINC a10927 EDETATE DISODIUM:METRONIDAZOLE TOPICAL:PARABENS a10928 BENZONATATE-PARABENS a10947 BIFIDOBACTERIUM BIFIDUM:LACTOBACILLUS ACIDOPHILUS:LACTOBACILLUS BULGARICUS:LACTOBACILLUS CASEI:LACTOBACILLUS RHAMNOSUS a10956 CHLORPHENIRAMINE-HYDROCODONE POLISTIREX a10961 BUROW'S SOLUTION; CAMPHOR TOPICAL; MENTHOL TOPICAL; PHENOL TOPICAL a10963 ALOE VERA TOPICAL; MENTHOL TOPICAL; SALICYLIC ACID TOPICAL; TEA TREE **OIL; VITAMIN E TOPICAL** a10968 MINERAL OIL; MINERAL WAX; PETROLATUM TOPICAL; WOOLWAX ALCOHOL a10971 ACETIC ACID TOPICAL; PROPYLENE GLYCOL DIACETATE; SODIUM ACETATE a10972 ACETIC ACID TOPICAL; HYDROCORTISONE OTIC; PROPYLENE GLYCOL DIACETATE;SODIUM ACETATE a10978 DIPHTHERIA TOXOID; FILAMENTOUS HEMAGGLUTININ; PERTACTIN; PERTUSSIS, ACELLULAR; TETANUS TOXOID a10988 L-METHYLFOLATE; METHYLCOBALAMIN; PYRIDOXINE a10991 CHICORY ROOT EXTRACT-LACTOBACILLUS GG a10995 CALCIUM ACETATE-MAGNESIUM a11004 ALOE VERA TOPICAL; BLACK WALNUT; CASCARA SAGRADA; RHUBARB; SENNA a11013 IRON-MULTIVITAMIN a11020 ASCORBIC ACID;CALCIUM SULFATE;CHOLECALCIFEROL;VITAMIN A;VITAMIN E a11027 ACETAMINOPHEN-MISCELLANEOUS ANALGESICS a11030 CONTRACEPTIVES-NORETHINDRONE a11041 CIPROFLOXACIN-DEXAMETHASONE a11042 CIPROFLOXACIN-HYDROCORTISONE a11076 BUTALBITAL-CODEINE a11087 CYCLOPHOSPHAMIDE;DOXORUBICIN;MITOMYCIN a11092 ERYTHROMYCIN-NEOMYCIN a11114 ACETAMINOPHEN-PHENYLPROPANOLAMINE a11126 BUPIVACAINE-LIDOCAINE a11134 LIDOCAINE-TRIAMCINOLONE a11135 LIDOCAINE-METHYLPREDNISOLONE TOPICAL a11156 HYOSCYAMINE;METHENAMINE;METHYLENE BLUE;PHENYL SALICYLATE;SODIUM PHOSPHATE a11159 HYOSCYAMINE:METHENAMINE:METHYLENE BLUE:PHENYL SALICYLATE:SODIUM **BIPHOSPHATE** a11163 POLYMYXIN B SULFATE-TRIMETHOPRIM a11166 DORZOLAMIDE OPHTHALMIC-TIMOLOL a11190 ASPIRIN;CAFFEINE;CINNAMEDRINE a11206 ALUMINUM HYDROXIDE;ATROPINE;HYOSCYAMINE;PHENOBARBITAL;SCOPOLAMINE a11216 BUPIVACAINE-TRIAMCINOLONE a11256 CHLORPHENIRAMINE; METHSCOPOLAMINE; PHENYLEPHRINE NASAL a11259 AMMONIUM CHLORIDE-DEXTROMETHORPHAN a11271 BROMPHENIRAMINE; DEXTROMETHORPHAN; GUAIFENESIN a11273 DEXTROMETHORPHAN-IODINATED GLYCEROL a11284 ETHINYL ESTRADIOL: FERROUS FUMARATE: NORETHINDRONE

a11292 ARGININE:CYANOCOBALAMIN:FOLIC ACID:PYRIDOXINE a11294 CYANOCOBALAMIN-FOLIC ACID a11300 FOLIC ACID-MULTIVITAMIN a11315 INSULIN-INSULIN ISOPHANE a11325 NEOMYCIN-POLYMYXIN B SULFATE a11327 HYDROCORTISONE TOPICAL;NEOMYCIN;POLYMYXIN B SULFATE a11328 BACITRACIN TOPICAL; NEOMYCIN; POLYMYXIN B SULFATE a11330 BACITRACIN OPHTHALMIC; HYDROCORTISONE OPHTHALMIC; NEOMYCIN; POLYMYXIN B SULFATE a11331 DEXAMETHASONE OPHTHALMIC:NEOMYCIN:POLYMYXIN B SULFATE a11332 HYDROCORTISONE OTIC:NEOMYCIN:POLYMYXIN B SULFATE a11334 GRAMICIDIN OPHTHALMIC:NEOMYCIN:POLYMYXIN B SULFATE a11344 HYDROCORTISONE OTIC:NEOMYCIN:POLYMYXIN B OPHTHALMIC a11345 NEOMYCIN-POLYMYXIN B OPHTHALMIC a11351 ASCORBIC ACID; ERGOCALCIFEROL; NIACIN; PYRIDOXINE; VITAMIN A a11354 ASCORBIC ACID;NIACIN;RIBOFLAVIN;THIAMINE;VITAMIN E a11357 CYANOCOBALAMIN;NIACIN;PYRIDOXINE;RIBOFLAVIN;THIAMINE a11360 DEXPANTHENOL;NIACIN;PYRIDOXINE;RIBOFLAVIN;THIAMINE a11370 MULTIVITAMIN-NIACIN a11394 BACITRACIN TOPICAL-POLYMYXIN B SULFATE a11396 DEXAMETHASONE OPHTHALMIC:NEOMYCIN OPHTHALMIC:POLYMYXIN B SULFATE a11403 DEXTRAN, HIGH MOLECULAR WEIGHT; HYDROXYPROPYL METHYLCELLULOSE OPHTHALMIC; POTASSIUM CHLORIDE; SODIUM BORATE TOPICAL; SODIUM CHLORIDE a11415 ERGOCALCIFEROL; RIBOFLAVIN; THIAMINE; VITAMIN A; VITAMIN E a11419 ASCORBIC ACID; COPPER GLUCONATE; VITAMIN A; VITAMIN E; ZINC OXIDE TOPICAL a11420 CYANOCOBALAMIN; PYRIDOXINE; RIBOFLAVIN; VITAMIN A a11421 CYANOCOBALAMIN; PYRIDOXINE; RIBOFLAVIN; THIAMINE; VITAMIN A a11424 ERGOCALCIFEROL; PYRIDOXINE; RIBOFLAVIN; THIAMINE; VITAMIN A a11429 ASCORBIC ACID; ERGOCALCIFEROL; RIBOFLAVIN; THIAMINE; VITAMIN A a11431 ASCORBIC ACID; CHOLECALCIFEROL; FLUORIDE; VITAMIN A a11432 ASCORBIC ACID; ERGOCALCIFEROL; VITAMIN A a11436 CHOLECALCIFEROL-VITAMIN A a11440 ASCORBIC ACID-VITAMIN E a11445 ASCORBIC ACID;CYANOCOBALAMIN;PYRIDOXINE;RIBOFLAVIN a11447 CYANOCOBALAMIN;L-METHYLFOLATE;PYRIDOXINE;RIBOFLAVIN a11449 CYANOCOBALAMIN:LIVER DERIVATIVE COMPLEX:RIBOFLAVIN a11458 PANCREATIN-PYRIDOXINE a11465 CYANOCOBALAMIN-THIAMINE a11471 CALCIUM CARBONATE;CALCIUM CITRATE;MAGNESIUM CITRATE;MAGNESIUM OXIDE a11472 CALCIUM CARBONATE-CHOLECALCIFEROL a11473 CALCIUM CARBONATE; MAGNESIUM GLUCONATE; MAGNESIUM OXIDE a11477 FLUORIDE-MULTIVITAMIN a11490 POTASSIUM CITRATE-SODIUM CHLORIDE a11493 SODIUM CHLORIDE-STERILE WATER a11501 SODIUM BICARBONATE-SODIUM CHLORIDE NASAL a11518 CONJUGATED ESTROGENS-PROGESTERONE a11520 NYSTATIN-TRIAMCINOLONE a11523 NYSTATIN TOPICAL-TRIAMCINOLONE a11549 EDETATE DISODIUM-RIFAXIMIN a11558 NAPHAZOLINE OPHTHALMIC-PHENIRAMINE a11576 ANTIPYRINE OTIC-BENZOCAINE TOPICAL a11585 BENZOCAINE TOPICAL-RESORCINOL TOPICAL a11608 BALSAM PERU TOPICAL; BORIC ACID TOPICAL; CASTOR OIL; PETROLATUM

TOPICAL;ZINC OXIDE TOPICAL
a11614 MINERAL OIL-PETROLATUM TOPICAL
a11615 LANOLIN TOPICAL; MINERAL OIL; PETROLATUM TOPICAL
a11620 COLLOIDAL OATMEAL TOPICAL-MINERAL OIL
a11621 AMMONIUM LACTATE TOPICAL-MINERAL OIL
a11631 DIPHTHERIA TOXOID;HAEMOPHILUS B CONJUGATE VACCINE
(OBSOLETE); PERTUSSIS, ACELLULAR; TETANUS TOXOID
a11632 HEPATITIS A VACCINE (OBSOLETE)-HEPATITIS B VACCINE
a11657 BENZALKONIUM CHLORIDE TOPICAL;CHLOROXYLENOL TOPICAL;HYDROCORTISONE
TOPICAL; PRAMOXINE TOPICAL
a11664 ALUMINUM SULFATE TOPICAL;CAMPHOR TOPICAL;LACTOBACILLUS
ACIDOPHILUS; MENTHOL TOPICAL; SALICYLIC ACID TOPICAL
a11671 LACTIC ACID TOPICAL-SALICYLIC ACID TOPICAL
a11684 BENZALKONIUM CHLORIDE TOPICAL-BROMFENAC
a11685 BENZALKONIUM CHLORIDE TOPICAL-CYANOCOBALAMIN NASAL
a11689 DEXTRAN 1-METHYLCELLULOSE
a11702 CHOLECALCIFEROL-MULTIVITAMIN
a11703 CALCIUM ACETATE-CHOLECALCIFEROL
a11705 CALCIUM ACETATE-MULTIVITAMIN
a11706 CETYLPYRIDINIUM TOPICAL-ETHANOL
a11715 MENTHOL TOPICAL-ZINC OXIDE TOPICAL
a11717 BETAMETHASONE TOPICAL-CLOTRIMAZOLE TOPICAL
a11724 BACITRACIN TOPICAL; NEOMYCIN TOPICAL; POLYMYXIN B OPHTHALMIC
a11730 BUDESONIDE NASAL-FORMOTEROL
a11732 LANOLIN TOPICAL-PETROLATUM TOPICAL
a11741 CAMPHOR TOPICAL;MENTHOL TOPICAL;METHYL SALICYLATE TOPICAL
a11748 BACITRACIN TOPICAL-POLYMYXIN B OPHTHALMIC
a11759 CETEARETH; DIMETHICONE; GLYCERIN TOPICAL; HYALURONIC ACID
a50770 CALCIUM REPLACEMENT
a50860 CANTHARIDIN
a51209 CHROMIUM
a51325 COCOA BUTTER
a51330 COCONUT OIL
a51675 DEXTROSE
a51740 DIETARY SUPPLEMENT
a51865 DIPHENIDOL
a52023 ELECTROLYTES
a52535 HAMAMELIS WATER
a52775 INFANT FORMULA
a52885 IRON PREPARATIONS
a52965 KARAYA GUM
a52968 KELP
a52990 LACTOSE
a53175 MAGNESIUM ANTACIDS
a53315 MENINGOCOCCAL VACCINE
a53940 NITROGEN
a54015 OINTMENT HYDROPHILIC
a54030 OLIVE OIL
a54175 PANTOTHENIC ACID
a54193 PARAFFIN
a54325 PERTUSSIS IMMUNE GLOBULIN
a54535 PLACEBO
a54555 PNEUMOCOCCAL VACCINE
a54575 POLIO VACCINE

a54650 POTASSIUM CARBONATE a54655 POTASSIUM REPLACEMENT SOLUTIONS a54760 PRAZEPAM a54922 PROTEIN SUPPLEMENT a55115 RINGERS LACTATED a55330 SODIUM FLUORIDE a55645 TALC a56198 VITAMIN K a56214 WHEAT GERM a56265 ZINC TOPICAL AGENTS, EXTERNAL USE a56345 VITAMIN B COMPLEX a56740 INTERFERON BETA a57001 BLOOD SUGAR DIAGNOSTIC a57024 MAGNESIUM ION a57034 PHOSPHORUS a57092 RECOMBINANT HUMAN DEOXYRIBONUCLEASE a57144 GLIBENCLAMIDE a57158 TECHNETIUM a57204 HEPATITIS C VACCINE a57210 QUERCETIN a59603 HEPATITIS VACCINE a59611 THYROID STIMULATING HORMONE a59632 DEHYDROEPIANDROSTERENE a59717 ANDROGENS a59812 DOMPERIDONE a59841 GRAPESEED a70009 HYALURONIC ACID a70048 OIL OF EVENING PRIMROSE a70071 DOCOSAHEXAENOIC ACID a70105 HAWTHORN a70116 SOY a70123 BISMUTH a70159 SILVER a70271 SPIRULINA a70294 RED CLOVER a70327 ISOFLAVONES a70385 SILYBUM a70479 BORAGE OIL a70480 ALPHA LIPOICACID a70491 HYOSCYNAMINE SULFATE a70521 GRIFFONIA SIMPLICIFOLIA a70699 LYCOPENE a70759 ALFALFA a70886 IRON a70892 SILICONE (LIQUID) a70960 TEMOCAPRIL c00007 ANTIVIRAL AGENTS c00012 MISCELLANEOUS ANTIBIOTICS c00014 QUINOLONES c00025 MISCELLANEOUS ANTINEOPLASTICS c00027 RADIOPHARMACEUTICALS c00033 IMMUNE GLOBULINS c00039 MISCELLANEOUS BIOLOGICALS

c00042 ANGIOTENSIN CONVERTING ENZYME INHIBITORS c00048 CALCIUM CHANNEL BLOCKING AGENTS c00051 MISCELLANEOUS CARDIOVASCULAR AGENTS c00055 ANTIHYPERTENSIVE COMBINATIONS c00058 ANALGESICS c00059 MISCELLANEOUS ANALGESICS c00060 NARCOTIC ANALGESICS c00061 NONSTEROIDAL ANTI-INFLAMMATORY AGENTS c00070 MISCELLANEOUS ANXIOLYTICS, SEDATIVES AND HYPNOTICS c00072 GENERAL ANESTHETICS c00080 MISCELLANEOUS CENTRAL NERVOUS SYSTEM AGENTS c00087 GASTROINTESTINAL AGENTS c00088 ANTACIDS c00090 ANTIDIARRHEALS c00095 LAXATIVES c00096 MISCELLANEOUS GI AGENTS c00099 ANTIDIABETIC AGENTS c00100 MISCELLANEOUS HORMONES c00102 CONTRACEPTIVES c00105 MISCELLANEOUS AGENTS c00109 LOCAL INJECTABLE ANESTHETICS c00110 MISCELLANEOUS UNCATEGORIZED AGENTS c00115 NUTRITIONAL PRODUCTS c00117 MINERALS AND ELECTROLYTES c00118 ORAL NUTRITIONAL SUPPLEMENTS c00119 VITAMINS c00123 ANTIHISTAMINES c00124 ANTITUSSIVES c00127 DECONGESTANTS c00129 MISCELLANEOUS RESPIRATORY AGENTS c00131 ANTIASTHMATIC COMBINATIONS c00132 UPPER RESPIRATORY COMBINATIONS c00135 ANTISEPTIC AND GERMICIDES c00138 TOPICAL STEROIDS c00140 MISCELLANEOUS TOPICAL AGENTS c00169 MISCELLANEOUS OPHTHALMIC AGENTS c00172 MISCELLANEOUS OTIC AGENTS c00174 MISCELLANEOUS ANTIHYPERLIPIDEMIC AGENTS c00178 SKELETAL MUSCLE RELAXANTS c00187 MISCELLANEOUS SEX HORMONES c00194 ANTIGOUT AGENTS c00198 MISCELLANEOUS ANTIEMETICS c00208 SSRI ANTIDEPRESSANTS c00209 TRICYCLIC ANTIDEPRESSANTS c00219 NUTRACEUTICAL PRODUCTS c00220 HERBAL PRODUCTS c00248 TOPICAL EMOLLIENTS c00269 MISCELLANEOUS VAGINAL AGENTS c00292 TOPICAL ANTIFUNGALS c00301 GLUCOCORTICOIDS c00320 SMOKING CESSATION AGENTS c00361 MISCELLANEOUS METABOLIC AGENTS c00363 PROBIOTICS c00899 PHARMACEUTICAL AID

c07002 ANTIFUNGALS-ANTISEPTIC AND GERMICIDES d00001 ACYCLOVIR d00002 AMIODARONE d00003 AMPICILLIN d00004 ATENOLOL d00006 CAPTOPRIL d00007 CEFAZOLIN d00009 CEFTAZIDIME d00011 CIPROFLOXACIN d00012 CODEINE d00013 ENALAPRIL d00014 GENTAMICIN d00015 IBUPROFEN d00016 LABETALOL d00017 MEPERIDINE d00018 NADOLOL d00019 NAPROXEN d00020 QUINIDINE d00021 RANITIDINE d00022 WARFARIN d00023 ALLOPURINOL d00024 AZATHIOPRINE d00027 HALOPERIDOL d00028 KETOPROFEN d00031 PROBENECID d00032 PROPRANOLOL d00033 SULINDAC d00034 ZIDOVUDINE d00035 CHLOROQUINE d00036 CYCLOPHOSPHAMIDE d00037 DOXYCYCLINE d00039 INDOMETHACIN d00040 OXAZEPAM d00041 TETRACYCLINE d00042 CHLORPROPAMIDE d00043 CLINDAMYCIN d00044 CLONIDINE d00045 DILTIAZEM d00046 ERYTHROMYCIN d00047 RIFAMPIN d00048 VERAPAMIL d00049 ACETAMINOPHEN d00050 METHADONE d00051 NIFEDIPINE d00052 CEFTRIAXONE d00054 TOLMETIN d00056 CEFUROXIME d00058 CARBAMAZEPINE d00059 LIDOCAINE d00060 METHOTREXATE d00061 LITHIUM d00064 CHLORPROMAZINE d00067 AZTREONAM

d00069 TOBRAMYCIN d00070 FUROSEMIDE d00071 FLUCONAZOLE d00072 CEFIXIME d00073 CEFPROZIL d00077 AMPHOTERICIN B d00078 DIDANOSINE d00079 CYCLOSPORINE d00080 CEFADROXIL d00081 CEFACLOR d00083 VALPROIC ACID d00084 PREDNISOLONE d00085 RIBAVIRIN d00086 AMANTADINE d00088 AMOXICILLIN d00089 AMOXICILLIN-CLAVULANATE d00091 AZITHROMYCIN d00095 CEFPODOXIME d00096 CEPHALEXIN d00097 CLARITHROMYCIN d00098 DAPSONE d00100 GRISEOFULVIN d00101 ISONIAZID d00102 ITRACONAZOLE d00103 KETOCONAZOLE d00104 LOMEFLOXACIN d00106 METHENAMINE d00108 METRONIDAZOLE d00110 MINOCYCLINE d00112 NITROFURANTOIN d00114 OFLOXACIN d00116 PENICILLIN d00117 PYRAZINAMIDE d00118 SULFADIAZINE d00119 SULFAMETHOXAZOLE d00123 TRIMETHOPRIM d00124 SULFAMETHOXAZOLE-TRIMETHOPRIM d00125 VANCOMYCIN d00128 ACEBUTOLOL d00132 HYDRALAZINE d00133 METHYLDOPA d00134 METOPROLOL d00135 MINOXIDIL d00137 PINDOLOL d00138 PRAZOSIN d00139 TIMOLOL d00140 CIMETIDINE d00141 FAMOTIDINE d00142 THEOPHYLLINE d00143 PHENYTOIN d00144 NORTRIPTYLINE d00145 DESIPRAMINE d00146 AMITRIPTYLINE d00148 DIAZEPAM

d00149 LORAZEPAM d00150 COLCHICINE d00153 DICLOXACILLIN d00154 MEBENDAZOLE d00155 MICONAZOLE d00157 NALIDIXIC ACID d00161 ACETAZOLAMIDE d00168 ALPRAZOLAM d00170 ASPIRIN d00174 ATROPINE d00175 BENZTROPINE d00178 BROMOCRIPTINE d00179 BUMETANIDE d00180 BUPIVACAINE d00181 BUPROPION d00182 BUSPIRONE d00189 CHLORDIAZEPOXIDE d00191 CHLORPHENIRAMINE d00192 CHLORTHALIDONE d00193 CHOLESTYRAMINE d00197 CLONAZEPAM d00198 CLORAZEPATE d00199 CLOZAPINE d00200 CROMOLYN d00206 DEXAMETHASONE d00207 DEXTROMETHORPHAN d00208 DIFLUNISAL d00210 DIGOXIN d00212 DIPHENHYDRAMINE d00213 DIPYRIDAMOLE d00214 DISOPYRAMIDE d00217 DOXEPIN d00218 DOXORUBICIN d00223 EPOETIN ALFA d00227 ETHOSUXIMIDE d00231 FELODIPINE d00233 FENTANYL d00234 FLECAINIDE d00235 FLUOROURACIL d00236 FLUOXETINE d00237 FLUPHENAZINE d00238 FLURAZEPAM d00241 FOLIC ACID d00242 FOSINOPRIL d00245 GEMFIBROZIL d00246 GLIPIZIDE d00248 GLYBURIDE d00252 HEPARIN d00253 HYDROCHLOROTHIAZIDE d00254 HYDROCORTISONE d00255 HYDROMORPHONE d00259 IMIPRAMINE d00260 INDAPAMIDE

d00262 INSULIN d00265 IPRATROPIUM d00268 ISOSORBIDE DINITRATE d00269 ISOSORBIDE MONONITRATE d00270 ISRADIPINE d00273 KETOROLAC d00277 LEVODOPA d00278 LEVOTHYROXINE d00279 LINCOMYCIN d00280 LOVASTATIN d00284 MEDROXYPROGESTERONE d00285 MEFENAMIC ACID d00286 MEFLOQUINE d00290 METHIMAZOLE d00293 METHYLPREDNISOLONE d00295 METHYLTESTOSTERONE d00298 METOCLOPRAMIDE d00299 METOLAZONE d00301 MIDAZOLAM d00303 MISOPROSTOL d00308 MORPHINE d00310 NABUMETONE d00312 NEOMYCIN d00314 NIACIN d00316 NICOTINE d00321 NITROGLYCERIN d00322 NIZATIDINE d00325 OMEPRAZOLE d00328 OXYBUTYNIN d00329 OXYCODONE d00336 PENTOXIFYLLINE d00337 PHENAZOPYRIDINE d00340 PHENOBARBITAL d00343 PIROXICAM d00344 POLYMYXIN B SULFATE d00345 POTASSIUM CHLORIDE d00346 POVIDONE IODINE TOPICAL d00348 PRAVASTATIN d00349 PRAZIQUANTEL d00350 PREDNISONE d00352 PRIMIDONE d00355 PROCHLORPERAZINE d00358 PROPAFENONE d00360 PROPOXYPHENE d00361 PROPYLTHIOURACIL d00363 PYRIDOSTIGMINE d00364 PYRIMETHAMINE d00365 QUINAPRIL d00366 QUININE d00371 SOTALOL d00373 SPIRONOLACTONE d00377 SUCRALFATE d00379 SULFASALAZINE d00381 TAMOXIFEN

d00384 TEMAZEPAM d00386 TERAZOSIN d00389 THIORIDAZINE d00391 THIOTHIXENE d00393 TOLAZAMIDE d00395 TRAZODONE d00396 TRIAMTERENE d00397 TRIAZOLAM d00400 VINBLASTINE d00402 VITAMIN A d00405 VITAMIN E d00409 RIBOFLAVIN d00412 PYRIDOXINE d00413 CYANOCOBALAMIN d00425 CALCIUM CARBONATE d00426 ASCORBIC ACID d00427 POTASSIUM PHOSPHATE-SODIUM PHOSPHATE d00428 FLUORIDE d00438 SODIUM CHLORIDE d00440 SODIUM BICARBONATE d00468 MAGNESIUM SULFATE d00485 IODINE TOPICAL d00488 LYSINE d00491 LEVOCARNITINE d00497 OMEGA-3 POLYUNSATURATED FATTY ACIDS d00512 FILGRASTIM d00529 TRANEXAMIC ACID d00537 ESTRADIOL d00541 CONJUGATED ESTROGENS d00543 ESTROPIPATE d00550 PROGESTERONE d00554 HYDROXYPROGESTERONE d00555 NORETHINDRONE d00557 LEVONORGESTREL d00558 TESTOSTERONE d00563 FINASTERIDE d00568 NANDROLONE d00569 CLOMIPHENE d00572 CHORIONIC GONADOTROPIN (HCG) d00578 ARGININE d00583 DESMOPRESSIN d00584 OXYTOCIN d00587 METHYLERGONOVINE d00593 GLUCAGON d00595 GLUCOSE d00598 CALCITONIN d00601 PAMIDRONATE d00604 CORTICOTROPIN d00608 FLUDROCORTISONE d00609 CORTISONE d00620 TRIAMCINOLONE d00626 DEXAMETHASONE TOPICAL d00628 BETAMETHASONE

d00651 UREA TOPICAL d00652 GLYCERIN d00653 ISOSORBIDE d00655 THYROID DESICCATED d00658 LIOTHYRONINE d00689 AMLODIPINE d00699 EPINEPHRINE d00704 PHENYLEPHRINE d00709 BISOPROLOL d00717 GUANFACINE d00726 DOXAZOSIN d00728 RAMIPRIL d00730 BENAZEPRIL d00732 LISINOPRIL d00743 SODIUM POLYSTYRENE SULFONATE d00744 COLESTIPOL d00746 SIMVASTATIN d00749 ALBUTEROL d00750 METAPROTERENOL d00755 PIRBUTEROL d00758 AMINOPHYLLINE d00760 BECLOMETHASONE d00769 PSEUDOEPHEDRINE d00771 NAPHAZOLINE OPHTHALMIC d00772 OXYMETAZOLINE NASAL d00773 TETRAHYDROZOLINE OPHTHALMIC d00780 CLEMASTINE d00785 BROMPHENIRAMINE d00787 PROMETHAZINE d00790 CYPROHEPTADINE d00796 BENZONATATE d00797 GUAIFENESIN d00799 IODINATED GLYCEROL d00801 CAFFEINE d00803 AMPHETAMINE d00804 DEXTROAMPHETAMINE d00806 PHENTERMINE d00807 BENZPHETAMINE d00809 PHENDIMETRAZINE d00813 BENZOCAINE TOPICAL d00817 HYDROXYCHLOROQUINE d00833 OXYMORPHONE d00838 BUTORPHANOL d00839 NALBUPHINE d00840 BUPRENORPHINE d00842 SALSALATE d00848 DICLOFENAC d00851 ETODOLAC d00853 OXAPROZIN d00855 PERPHENAZINE d00859 MECLIZINE d00861 DIMENHYDRINATE d00862 TRIMETHOBENZAMIDE d00866 DRONABINOL

d00867 ONDANSETRON d00876 CLOMIPRAMINE d00880 SERTRALINE d00884 TRANYLCYPROMINE d00890 TRIFLUOPERAZINE d00897 LOXAPINE d00898 PIMOZIDE d00900 METHYLPHENIDATE d00902 ERGOLOID MESYLATES d00907 HYDROXYZINE d00910 ZOLPIDEM d00960 CARISOPRODOL d00962 CHLORZOXAZONE d00963 CYCLOBENZAPRINE d00964 METAXALONE d00965 METHOCARBAMOL d00966 ORPHENADRINE d00967 BACLOFEN d00968 DANTROLENE d00970 TRIHEXYPHENIDYL d00982 MAGNESIUM HYDROXIDE d00985 HYOSCYAMINE d00986 SCOPOLAMINE d00988 BELLADONNA d00992 GLYCOPYRROLATE d00999 DICYCLOMINE d01002 PANCRELIPASE d01003 PANCREATIN d01005 URSODIOL d01008 MAGNESIUM CITRATE d01013 SENNA d01015 BISACODYL d01017 POLYCARBOPHIL d01018 PSYLLIUM d01019 MINERAL OIL d01021 DOCUSATE d01024 LACTULOSE d01025 LOPERAMIDE d01026 BISMUTH SUBSALICYLATE d01027 SIMETHICONE d01028 CHARCOAL d01031 MESALAMINE d01115 BACITRACIN d01120 ATOVAQUONE d01123 PYRANTEL d01137 TETANUS IMMUNE GLOBULIN d01138 VARICELLA ZOSTER IMMUNE GLOBULIN d01139 RHO (D) IMMUNE GLOBULIN d01156 TYPHOID VACCINE, INACTIVATED d01158 HAEMOPHILUS B CONJUGATE VACCINE (OBSOLETE) d01159 MEASLES VIRUS VACCINE d01160 RUBELLA VIRUS VACCINE d01163 POLIOVIRUS VACCINE, INACTIVATED

d01164 INFLUENZA VIRUS VACCINE, INACTIVATED d01165 YELLOW FEVER VACCINE d01166 HEPATITIS B VACCINE (OBSOLETE) d01168 TETANUS TOXOID d01171 TUBERCULIN PURIFIED PROTEIN DERIVATIVE d01187 LEVOBUNOLOL OPHTHALMIC d01191 PILOCARPINE OPHTHALMIC d01201 CYCLOPENTOLATE OPHTHALMIC d01208 SULFACETAMIDE SODIUM OPHTHALMIC d01219 FLUORESCEIN OPHTHALMIC d01231 CHLORHEXIDINE TOPICAL d01232 CARBAMIDE PEROXIDE TOPICAL d01233 NYSTATIN d01236 CLOTRIMAZOLE d01238 TERCONAZOLE TOPICAL d01239 GENTIAN VIOLET TOPICAL d01240 SULFANILAMIDE TOPICAL d01241 CLINDAMYCIN TOPICAL d01242 NONOXYNOL 9 TOPICAL d01244 TRETINOIN TOPICAL d01246 BENZOYL PEROXIDE TOPICAL d01259 SILVER SULFADIAZINE TOPICAL d01263 PYRITHIONE ZINC TOPICAL d01265 SULFACETAMIDE SODIUM TOPICAL d01267 MUPIROCIN TOPICAL d01271 ECONAZOLE TOPICAL d01272 CICLOPIROX TOPICAL d01274 TOLNAFTATE TOPICAL d01277 NAFTIFINE TOPICAL d01278 LINDANE TOPICAL d01279 PERMETHRIN TOPICAL d01280 CROTAMITON TOPICAL d01282 ALCLOMETASONE TOPICAL d01283 AMCINONIDE TOPICAL d01288 CLOBETASOL TOPICAL d01290 DESONIDE TOPICAL d01291 DESOXIMETASONE TOPICAL d01293 FLUOCINOLONE TOPICAL d01294 FLUOCINONIDE TOPICAL d01296 FLUTICASONE d01298 HALOBETASOL TOPICAL d01303 PRAMOXINE TOPICAL d01307 SALICYLIC ACID TOPICAL d01308 PODOPHYLLUM RESIN TOPICAL d01309 PODOFILOX TOPICAL d01313 TRICHLOROACETIC ACID TOPICAL d01319 HYDROQUINONE TOPICAL d01321 CAPSAICIN TOPICAL d01322 ALUMINUM CHLORIDE HEXAHYDRATE TOPICAL d01325 ARNICA TOPICAL d01332 HEXACHLOROPHENE TOPICAL d01333 BENZALKONIUM CHLORIDE TOPICAL d01335 SODIUM HYPOCHLORITE TOPICAL d01348 MEGESTROL

d01353 LEUPROLIDE d01373 HYDROXYUREA d01385 BETA-CAROTENE d01387 ALPROSTADIL d01389 DISULFIRAM d01395 CHLOROPROCAINE d01402 DEFEROXAMINE d01406 NALTREXONE d01423 POTASSIUM CITRATE d01427 BETHANECHOL d01445 BARIUM SULFATE d02376 ALBUMIN HUMAN d03007 MEASLES; MUMPS; RUBELLA VIRUS VACCINE d03034 NORGESTREL d03041 ENOXAPARIN d03050 LORATADINE d03052 HYDROCHLOROTHIAZIDE-TRIAMTERENE d03054 AMYLASE d03061 BUTALBITAL d03075 HYDROCODONE d03077 ISOMETHEPTENE MUCATE d03080 LIPASE d03094 SALICYLAMIDE d03096 SODIUM BENZOATE d03098 SODIUM CITRATE d03110 DIPHTH; PERTUSSIS, ACEL; TETANUS (OBSOLETE) d03126 CALCITRIOL d03128 ERGOCALCIFEROL d03129 CHOLECALCIFEROL d03130 THIAMINE d03137 CALCIUM-VITAMIN D d03140 MULTIVITAMIN d03141 MULTIVITAMIN WITH IRON d03145 MULTIVITAMIN WITH MINERALS d03148 MULTIVITAMIN, PRENATAL d03154 DOXYLAMINE d03157 PAROXETINE d03159 CHOLINE d03160 SUMATRIPTAN d03162 ETHANOL d03169 TRIMETREXATE d03170 FELBAMATE d03180 RISPERIDONE d03181 VENLAFAXINE d03182 GABAPENTIN d03183 FLUVASTATIN d03189 TORSEMIDE d03190 OXICONAZOLE TOPICAL d03191 TERBINAFINE TOPICAL d03192 ZINC OXIDE TOPICAL d03193 AMILORIDE-HYDROCHLOROTHIAZIDE d03195 MICONAZOLE TOPICAL d03197 BETAMETHASONE TOPICAL

d03200 ERYTHROMYCIN TOPICAL d03202 KETOCONAZOLE TOPICAL d03203 MINOXIDIL TOPICAL d03205 HYDROCORTISONE TOPICAL d03206 TRIAMCINOLONE TOPICAL d03208 METRONIDAZOLE TOPICAL d03210 SELENIUM SULFIDE TOPICAL d03211 CIPROFLOXACIN OPHTHALMIC d03214 KETOROLAC OPHTHALMIC d03220 FLURBIPROFEN OPHTHALMIC d03221 PREDNISOLONE OPHTHALMIC d03222 TOBRAMYCIN OPHTHALMIC d03228 LODOXAMIDE OPHTHALMIC d03238 ETHINYL ESTRADIOL-NORETHINDRONE d03241 ETHINYL ESTRADIOL-NORGESTREL d03242 ETHINYL ESTRADIOL-LEVONORGESTREL d03244 CONJUGATED ESTROGENS-METHYLTESTOSTERONE d03245 ESTERIFIED ESTROGENS-METHYLTESTOSTERONE d03247 HYDROCHLOROTHIAZIDE-SPIRONOLACTONE d03251 HYDROCHLOROTHIAZIDE-RESERPINE d03257 HYDRALAZINE-HYDROCHLOROTHIAZIDE d03258 ATENOLOL-CHLORTHALIDONE d03261 HYDROCHLOROTHIAZIDE-PROPRANOLOL d03264 HYDROCHLOROTHIAZIDE-METOPROLOL d03265 BENAZEPRIL-HYDROCHLOROTHIAZIDE d03266 HYDROCHLOROTHIAZIDE-LISINOPRIL d03267 CHLORTHALIDONE-CLONIDINE d03276 DYPHYLLINE-GUAIFENESIN d03280 EPHEDRINE; PHENOBARBITAL; THEOPHYLLINE d03289 ACETAMINOPHEN-PSEUDOEPHEDRINE d03292 IBUPROFEN-PSEUDOEPHEDRINE d03296 ACETAMINOPHEN-CHLORPHENIRAMINE d03297 ACETAMINOPHEN-PHENYLTOLOXAMINE d03298 CHLORPHENIRAMINE-PSEUDOEPHEDRINE d03299 CHLORPHENIRAMINE-PHENYLPROPANOLAMINE d03300 CHLORPHENIRAMINE-PHENYLEPHRINE d03301 BROMPHENIRAMINE-PSEUDOEPHEDRINE d03302 BROMPHENIRAMINE-PHENYLPROPANOLAMINE d03313 CHLORPHENIRAMINE; PHENYLEPHRINE; PYRILAMINE d03314 CHLORPHENIRAMINE; PHENYLEPHRINE; PPA d03316 PSEUDOEPHEDRINE-TRIPROLIDINE d03317 PHENYLEPHRINE-PROMETHAZINE d03318 PHENIRAMINE; PPA; PYRILAMINE d03320 ACETAMINOPHEN:CHLORPHENIRAMINE:PSE d03338 CHLORPHENIRAMINE;METHSCOPOLAMINE;PE d03347 ACETAMINOPHEN;CHLORPHENIRAMINE;DM;PSE d03352 HYDROCODONE-PSEUDOEPHEDRINE d03353 HYDROCODONE-PHENYLPROPANOLAMINE d03356 CHLORPHENIRAMINE-HYDROCODONE d03357 CODEINE-PROMETHAZINE d03359 CHLORPHENIRAMINE-DEXTROMETHORPHAN d03360 DEXTROMETHORPHAN-PROMETHAZINE d03361 CHLORPHENIRAMINE;HYDROCODONE;PHENYLEPHRINE d03364 CODEINE; PHENYLEPHRINE; PROMETHAZINE

d03368 BROMPHENIRAMINE; DEXTROMETHORPHAN; PSE d03369 CHLORPHENIRAMINE:DEXTROMETHORP:PHENYLEPHRINE d03370 CHLORPHENIRAMINE; DEXTROMETHORPHAN; PSE d03372 BROMPHENIRAMINE; DEXTROMETHORPHAN; PPA d03379 GUAIFENESIN-PSEUDOEPHEDRINE d03381 GUAIFENESIN-PHENYLEPHRINE d03382 GUAIFENESIN-PHENYLPROPANOLAMINE d03388 ETHINYL ESTRADIOL-ETHYNODIOL d03389 ESTRADIOL-TESTOSTERONE d03393 CODEINE-GUAIFENESIN d03394 CODEINE-IODINATED GLYCEROL d03396 GUAIFENESIN-HYDROCODONE d03398 CODEINE; GUAIFENESIN; PSEUDOEPHEDRINE d03400 DEXTROMETHORPHAN-GUAIFENESIN d03409 DEXTROMETHORPHAN; GUAIFENESIN; PSEUDOEPHEDRINE d03411 DEXTROMETHORPHAN; GUAIFENESIN; PPA d03416 CHLORPHENIRAMINE;HYDROCODONE;PSE d03423 ACETAMINOPHEN-CODEINE d03424 ASPIRIN-CODEINE d03425 ACETAMINOPHEN; BUTALBITAL; CAFFEINE; CODEINE d03428 ACETAMINOPHEN-HYDROCODONE d03429 ASPIRIN-HYDROCODONE d03431 ACETAMINOPHEN-OXYCODONE d03434 ACETAMINOPHEN-PROPOXYPHENE d03437 ACETAMINOPHEN; ASPIRIN; CAFFEINE; SALICYLAMIDE d03439 ACETAMINOPHEN; ASPIRIN; CAFFEINE d03445 ACETAMINOPHEN-DIPHENHYDRAMINE d03447 ASPIRIN;CAFFEINE;SALICYLAMIDE d03449 ASPIRIN-CAFFEINE d03455 ACETAMINOPHEN; BUTALBITAL; CAFFEINE d03456 ACETAMINOPHEN-BUTALBITAL d03457 ASPIRIN; BUTALBITAL; CAFFEINE d03459 APAP; DICHLORALPHENAZONE; ISOMETHEPTENE d03462 AMITRIPTYLINE-CHLORDIAZEPOXIDE d03463 AMITRIPTYLINE-PERPHENAZINE d03473 CARBIDOPA-LEVODOPA d03474 ALUMINUM HYDROXIDE-MAGNESIUM HYDROXIDE d03478 AL HYDROXIDE;MG HYDROXIDE;SIMETHICONE d03485 ATROPINE;HYOSCYAMINE;PB;SCOPOLAMINE d03492 CHLORDIAZEPOXIDE-CLIDINIUM d03496 DOCUSATE-SENNA d03498 CASANTHRANOL-DOCUSATE d03506 ATROPINE-DIPHENOXYLATE d03525 GRAMICIDIN:NEOMYCIN:POLYMYXIN B OPHTHALMIC d03536 DEXAMETHASONE-TOBRAMYCIN OPHTHALMIC d03546 HYDROCORTISONE-PRAMOXINE TOPICAL d03561 BETAMETHASONE-CLOTRIMAZOLE TOPICAL d03562 NYSTATIN-TRIAMCINOLONE TOPICAL d03569 CARBINOXAMINE d03570 CARBINOXAMINE-PSEUDOEPHEDRINE d03618 HYOSCYAMINE; METHENAM; M-BLUE; PHENYL SALICYL d03623 ACETIC ACID TOPICAL d03624 ANTIPYRINE OTIC

d03627 ANTIPYRINE-BENZOCAINE OTIC d03634 BENZOCAINE-CETYLPYRIDINIUM TOPICAL d03640 BUDESONIDE NASAL d03641 PETROLATUM TOPICAL d03644 LACTOBACILLUS ACIDOPHILUS d03646 LACTOBACILLUS ACIDOPHILUS AND BULGARICUS d03647 ISOPROPYL ALCOHOL TOPICAL d03650 CANDIDA ALBICANS EXTRACT d03653 CALAMINE TOPICAL d03655 LIDOCAINE-PRILOCAINE TOPICAL d03656 ETHYL CHLORIDE TOPICAL d03660 MULTIVITAMIN WITH IRON AND FLUORIDE d03664 PHENOL TOPICAL d03665 MENTHOL TOPICAL d03666 MENTHOL-PHENOL TOPICAL d03667 METHACHOLINE d03669 METHYL SALICYLATE-MENTHOL TOPICAL d03684 THROMBIN TOPICAL d03687 ALUMINUM ACETATE TOPICAL d03689 CALCIUM ACETATE d03690 ALUMINUM SULFATE-CALCIUM ACETATE TOPICAL d03692 BENZYLPENICILLOYL-POLYLYSINE d03703 COAL TAR TOPICAL d03707 ALOE VERA TOPICAL d03735 TRIETHANOLAMINE POLYPEPTIDE OLEATE OTIC d03740 ENALAPRIL-HYDROCHLOROTHIAZIDE d03744 BISOPROLOL-HYDROCHLOROTHIAZIDE d03752 TACROLIMUS d03756 BACITRACIN TOPICAL d03759 SALMETEROL d03761 LANOLIN TOPICAL d03768 OCULAR LUBRICANT d03770 EMOLLIENTS, TOPICAL d03773 STAVUDINE d03775 FAMCICLOVIR d03780 DESOGESTREL d03781 ETHINYL ESTRADIOL-NORGESTIMATE d03782 DESOGESTREL-ETHINYL ESTRADIOL d03784 EPINEPHRINE-LIDOCAINE d03788 CALCIPOTRIENE TOPICAL d03796 MAGNESIUM CHLORIDE d03797 MAGNESIUM OXIDE d03804 FLUVOXAMINE d03805 DORZOLAMIDE OPHTHALMIC d03807 METFORMIN d03808 NEFAZODONE d03809 LAMOTRIGINE d03818 LORATADINE-PSEUDOEPHEDRINE d03819 CONJUGATED ESTROGENS-MEDROXYPROGESTERONE d03820 HEPATITIS A VACCINE (OBSOLETE) d03821 LOSARTAN d03822 FERROUS GLUCONATE d03823 IRON POLYSACCHARIDE d03824 FERROUS SULFATE

d03825 NISOLDIPINE d03826 TRAMADOL d03827 CETIRIZINE d03828 LANSOPRAZOLE d03829 AMLODIPINE-BENAZEPRIL d03830 HYDROCHLOROTHIAZIDE-LOSARTAN d03832 VARICELLA VIRUS VACCINE d03833 DIVALPROEX SODIUM d03835 MOEXIPRIL d03838 VALACYCLOVIR d03839 MYCOPHENOLATE MOFETIL d03846 ACARBOSE d03847 CARVEDILOL d03848 AZELAIC ACID TOPICAL d03849 ALENDRONATE d03850 BICALUTAMIDE d03857 BENZOYL PEROXIDE-ERYTHROMYCIN TOPICAL d03858 LAMIVUDINE d03864 GLIMEPIRIDE d03866 CALCIUM CITRATE d03873 ANASTROZOLE d03874 CEFTIBUTEN d03882 CEFEPIME d03884 TROLAMINE SALICYLATE TOPICAL d03894 KAOLIN-PECTIN d03897 LACTASE d03898 SODIUM CHLORIDE, HYPERTONIC, OPHTHALMIC d03908 APAP;CHLORPHENIRAMINE;DEXTROMETHORPHAN;PPA d03927 BACITRACIN OPHTHALMIC d03940 BENZOCAINE-DEXTROMETHORPHAN d03973 ERYTHROMYCIN OPHTHALMIC d03974 GENTAMICIN OPHTHALMIC d03977 OFLOXACIN OPHTHALMIC d03984 RITONAVIR d03990 CARBAMIDE PEROXIDE OTIC d03994 COLLOIDAL OATMEAL TOPICAL d04002 PIPERONYL BUTOXIDE-PYRETHRINS TOPICAL d04003 HYDROGEN PEROXIDE TOPICAL d04008 TRANDOLAPRIL d04011 INTERFERON BETA-1A d04012 TERBINAFINE d04015 ADAPALENE TOPICAL d04017 LATANOPROST OPHTHALMIC d04021 BENZOIC ACID-SALICYLIC ACID TOPICAL d04025 MIRTAZAPINE d04029 NEVIRAPINE d04032 SULFACETAMIDE SODIUM-SULFUR TOPICAL d04035 AMPHETAMINE-DEXTROAMPHETAMINE d04037 TIMOLOL OPHTHALMIC d04038 BETAXOLOL OPHTHALMIC d04040 FEXOFENADINE d04047 MIDODRINE d04048 BRIMONIDINE OPHTHALMIC

d04049 AMMONIUM LACTATE TOPICAL d04050 OLANZAPINE d04051 ROPIVACAINE d04052 PENTOSAN POLYSULFATE SODIUM d04054 PENCICLOVIR TOPICAL d04057 ZINC SULFATE d04058 MELATONIN d04061 BISMUTH SUBSALICYLATE; METRONIDAZOLE; TCN d04063 BUTENAFINE TOPICAL d04065 TRANDOLAPRIL-VERAPAMIL d04066 ALBUTEROL-IPRATROPIUM d04068 AZELASTINE NASAL d04090 LACTIC ACID TOPICAL d04099 DONEPEZIL d04101 IVERMECTIN d04102 TIZANIDINE d04103 ZILEUTON d04105 ATORVASTATIN d04107 AMLEXANOX TOPICAL d04109 LEVOFLOXACIN d04110 MIGLITOL d04111 GLATIRAMER d04112 CABERGOLINE d04113 VALSARTAN d04115 TOPIRAMATE d04117 OLOPATADINE OPHTHALMIC d04118 NELFINAVIR d04120 CAFFEINE-ERGOTAMINE d04121 TAMSULOSIN d04125 IMIQUIMOD TOPICAL d04134 POLYMYXIN B OPHTHALMIC d04138 TAZAROTENE TOPICAL d04141 HYDROCHLOROTHIAZIDE-MOEXIPRIL d04142 CHROMIUM PICOLINATE d04145 PRAMIPEXOLE d04155 ASPIRIN-DIPHENHYDRAMINE d04156 LETROZOLE d04159 SORBITOL d04160 SODIUM BIPHOSPHATE-SODIUM PHOSPHATE d04166 ACETAMINOPHEN;DM;GUAIFENESIN;PSEUDOEPHEDRINE d04168 ACETAMINOPHEN; DIPHENHYDRAMINE; PSEUDOEPHEDRINE d04172 CALAMINE-PRAMOXINE TOPICAL d04186 PHENYLEPHRINE NASAL d04192 COLISTIN;HC;NEOMYCIN;THONZONIUM OTIC d04196 BACITRACIN;HC;NEOMYCIN;POLYMYXIN B TOPICAL d04197 HYDROCORTISONE;NEOMYCIN;POLYMYXIN B TOPICAL d04208 SILVER NITRATE TOPICAL d04215 ROPINIROLE d04219 LAMIVUDINE-ZIDOVUDINE d04220 QUETIAPINE d04221 TIAGABINE d04222 IRBESARTAN d04223 MOMETASONE NASAL d04225 HYDROCODONE-IBUPROFEN

	ACETIC ACID OTIC
	TRIAMCINOLONE NASAL
	SODIUM CHLORIDE NASAL
	HYDROCHLOROTHIAZIDE-IRBESARTAN
	METHYLCELLULOSE
	ZOLMITRIPTAN
	CEFDINIR
	CLOPIDOGREL
	RALOXIFENE
	REPAGLINIDE
	FEXOFENADINE-PSEUDOEPHEDRINE
	DICLOFENAC-MISOPROSTOL
	AMOXICILLIN;CLARITHROMYCIN;LANSOPRAZOLE
	BECLOMETHASONE NASAL
	BUDESONIDE
	FLUNISOLIDE NASAL
	EMEDASTINE OPHTHALMIC
	FLUTICASONE NASAL
	FLUTICASONE TOPICAL
	NARATRIPTAN
	HYDROCHLOROTHIAZIDE-VALSARTAN
	TOLTERODINE PHENYLEPHRINE TOPICAL
	SILDENAFIL
	RISEDRONATE
	BRINZOLAMIDE OPHTHALMIC
	PARICALCITOL
	DIPHTHERIA TOXOID
	CANDESARTAN
	PALIVIZUMAB
	RIFAPENTINE
	RIZATRIPTAN
	CITALOPRAM
	INFLIXIMAB
	ROTAVIRUS VACCINE
	LEFLUNOMIDE
	EFAVIRENZ
	HEMIN
	COPPER GLUCONATE
	SEVELAMER
d04364	TELMISARTAN
d04365	ETANERCEPT
d04369	INSULIN REGULAR
	INSULIN ISOPHANE
d04375	ESTRADIOL-NORETHINDRONE
d04376	ABACAVIR
d04377	THYROTROPIN ALFA
d04378	MODAFINIL
	CELECOXIB
d04382	CILOSTAZOL

d04395 CLOTRIMAZOLE TOPICAL d04397 FLUORIDE TOPICAL d04399 NYSTATIN TOPICAL d04411 GARLIC d04412 GINSENG d04413 GINKGO d04414 GINGER d04416 VALERIAN d04418 GLUCOSAMINE d04419 CHONDROITIN d04420 CHONDROITIN-GLUCOSAMINE d04427 LEVALBUTEROL d04429 ORLISTAT d04432 CARBONYL IRON d04434 ROSIGLITAZONE d04435 DOXERCALCIFEROL d04436 MALATHION TOPICAL d04441 KETOTIFEN OPHTHALMIC d04442 PIOGLITAZONE d04446 PHENYLEPHRINE-PYRILAMINE d04448 RABEPRAZOLE d04452 ZALEPLON d04459 DOFETILIDE d04461 EXEMESTANE d04462 OSELTAMIVIR d04469 BEE POLLEN d04472 BLACK COHOSH d04481 ROYAL JELLY d04483 DANDELION d04497 ASPIRIN-DIPYRIDAMOLE d04499 LEVETIRACETAM d04500 MOXIFLOXACIN d04509 HYDROCHLOROTHIAZIDE-QUINAPRIL d04510 INSULIN LISPRO-INSULIN LISPRO PROTAMINE d04511 INSULIN LISPRO PROTAMINE d04513 OXCARBAZEPINE d04514 PANTOPRAZOLE d04521 NETTLES d04523 UBIQUINONE d04527 ZONISAMIDE d04532 MELOXICAM d04537 RIVASTIGMINE d04538 INSULIN GLARGINE d04539 FOSINOPRIL-HYDROCHLOROTHIAZIDE d04541 AZELASTINE OPHTHALMIC d04557 CLOBAZAM d04572 FORMOTEROL d04611 FLUTICASONE-SALMETEROL d04674 DIPHTH;HAEMOPHILUS;PERTUSSIS;TETANUS;POLIO d04675 DIPHTHERIA; PERTUSSIS, ACEL; TETANUS; POLIO d04685 HEPATITIS A-HEPATITIS B VACCINE d04695 COLESEVELAM d04697 INSULIN ASPART d04700 BALSALAZIDE

d04703 GLYBURIDE-METFORMIN
d04704 EFLORNITHINE TOPICAL
d04706 CETRORELIX
d04708 ZOLEDRONIC ACID
d04711 CANDESARTAN-HYDROCHLOROTHIAZIDE
d04717 LOPINAVIR-RITONAVIR
d04722 DICLOFENAC TOPICAL
d04726 5-HYDROXYTRYPTOPHAN
d04727 ABACAVIR;LAMIVUDINE;ZIDOVUDINE
d04732 TRYPTOPHAN
d04737 HYDROCHLOROTHIAZIDE-TELMISARTAN
d04742 BENZOYL PEROXIDE-CLINDAMYCIN TOPICAL
d04743 NATEGLINIDE
d04746 PEGINTERFERON ALFA-2B
d04747 ZIPRASIDONE
d04749 ESOMEPRAZOLE
d04750 GALANTAMINE
d04753 TRAVOPROST OPHTHALMIC
d04754 BIMATOPROST OPHTHALMIC
d04757 ALMOTRIPTAN
d04758 IMATINIB
d04760 DROSPIRENONE-ETHINYL ESTRADIOL
d04764 CETIRIZINE-PSEUDOEPHEDRINE
d04766 ACETAMINOPHEN-TRAMADOL
d04771 DARBEPOETIN ALFA
d04772 ETONOGESTREL
d04773 ETHINYL ESTRADIOL-ETONOGESTREL
d04774 TENOFOVIR
d04776 FROVATRIPTAN
d04777 DEXMETHYLPHENIDATE
d04779 ETHINYL ESTRADIOL-NORELGESTROMIN
d04782 BOSENTAN
d04784 PIMECROLIMUS TOPICAL
d04785 DESLORATADINE
d04786 FONDAPARINUX
d04788 DUTASTERIDE
d04790 PEGFILGRASTIM
d04797 ALFUZOSIN
d04801 OLMESARTAN
d04802 TREPROSTINIL
d04803 VORICONAZOLE
d04812 ESCITALOPRAM
d04813 HORSE CHESTNUT
d04815 EPLERENONE
d04823 GLIPIZIDE-METFORMIN
d04825 ARIPIPRAZOLE
d04826 NITAZOXANIDE
d04832 DIPHTHERIA;HEPB;PERTUSSIS,ACEL;POLIO;TETANUS

d04835 ADALIMUMAB d04836 CYCLOSPORINE OPHTHALMIC d04839 INSULIN ASPART-INSULIN ASPART PROTAMINE d04844 CAMPHOR-MENTHOL TOPICAL d04849 ELETRIPTAN d04851 ROSUVASTATIN d04857 GATIFLOXACIN OPHTHALMIC d04860 MOXIFLOXACIN OPHTHALMIC d04861 DIPHENHYDRAMINE-PHENYLEPHRINE d04878 HYDROCHLOROTHIAZIDE-OLMESARTAN d04882 ATAZANAVIR d04884 EMTRICITABINE d04893 VARDENAFIL d04894 DAPTOMYCIN d04896 TADALAFIL d04898 EPINASTINE OPHTHALMIC d04899 MEMANTINE d04901 FOSAMPRENAVIR d04905 BROMPHENIRAMINE; DEXTROMETHORPH; PHENYLEPHRINE d04917 FLUOXETINE-OLANZAPINE d04920 PNEUMOCOCCAL 7-VALENT CONJUGATE VACCINE d04929 TROSPIUM d04986 ACAMPROSATE d05044 BETAMETHASONE-CALCIPOTRIENE TOPICAL d05048 AMLODIPINE-ATORVASTATIN d05218 CINACALCET d05265 NEBIVOLOL d05278 INSULIN GLULISINE d05283 BRIMONIDINE-TIMOLOL OPHTHALMIC d05294 RIFAXIMIN d05337 PNEUMOCOCCAL 23-POLYVALENT VACCINE d05338 DIPHTHERIA-TETANUS TOXOIDS (DT) PED d05343 HAEMOPHILUS B CONJUGATE (PRP-T) VACCINE d05348 EZETIMIBE-SIMVASTATIN d05350 POLYETHYLENE GLYCOL 3350 d05352 EMTRICITABINE-TENOFOVIR d05354 ABACAVIR-LAMIVUDINE d05355 DULOXETINE d05357 IBANDRONATE d05361 CARBETAPENTANE-GUAIFENESIN d05366 ACETAMINOPHEN; DEXTROMETHORPHAN; DOXYLAMINE d05383 ACETAMINOPHEN;CHLORPHENIRAMINE;DM d05395 LANTHANUM CARBONATE d05413 SOLIFENACIN d05420 ALOH; DIPHENHYD; LIDOCAINE; MGOH; SIMETH TOPICAL d05421 ESZOPICLONE d05422 DARIFENACIN d05432 MENINGOCOCCAL CONJUGATE VACCINE d05433 DIGESTIVE ENZYMES;HYOSCYAMINE;PHENYLTOLOXAMIN d05436 INSULIN DETEMIR d05465 CICLESONIDE d05473 DESLORATADINE-PSEUDOEPHEDRINE d05508 PREGABALIN d05525 ENTECAVIR

d05526 ALENDRONATE-CHOLECALCIFEROL d05529 EXENATIDE d05540 HYDRALAZINE-ISOSORBIDE DINITRATE d05543 DAPSONE TOPICAL d05578 RAMELTEON d05612 RASAGILINE d05630 CALCIUM CARBONATE-RISEDRONATE d05633 NEPAFENAC OPHTHALMIC d05635 METFORMIN-PIOGLITAZONE d05646 SACCHAROMYCES BOULARDII LYO d05647 FERRIC SUBSULFATE TOPICAL d05674 GLIMEPIRIDE-ROSIGLITAZONE d05690 FERROUS FUMARATE-IRON POLYSACCHARIDE d05694 ABATACEPT d05696 LENALIDOMIDE d05702 METHYLSULFONYLMETHANE d05703 CHONDROITIN;GLUCOSAMINE;METHYLSULFONYLMETHANE d05719 RANOLAZINE d05736 LUBIPROSTONE d05773 L-METHYLFOLATE d05776 IODINE d05781 TETANUS; DIPHTH; PERTUSS (TDAP) ADULT; ADOL d05782 DIPHTHERIA;TETANUS;PERTUSSIS (DTAP) PED d05807 VARENICLINE d05813 ZOSTER VACCINE LIVE d05817 HUMAN PAPILLOMAVIRUS VACCINE d05819 DIPHENHYDRAMINE-IBUPROFEN d05825 DARUNAVIR d05831 DASATINIB d05847 EFAVIRENZ; EMTRICITABINE; TENOFOVIR d05851 LEVOCETIRIZINE d05866 GUAR GUM d05893 ARFORMOTEROL d05896 SITAGLIPTIN d05899 CICLESONIDE NASAL d06008 BENZYL ALCOHOL TOPICAL d06032 FLUOCINOLONE OTIC d06297 PALIPERIDONE d06507 CINNAMON d06635 MILNACIPRAN d06662 AMLODIPINE-VALSARTAN d06663 LISDEXAMFETAMINE d06665 ALISKIREN d06720 METFORMIN-SITAGLIPTIN d06831 RETAPAMULIN TOPICAL d06841 AMBRISENTAN d06842 ARMODAFINIL d06848 LUTEIN d06851 AZITHROMYCIN OPHTHALMIC d06852 MARAVIROC d06857 ACETIC;ANTIPYRINE;BENZOCAINE;POLYCOS OTIC d06860 OXYGEN d06867 BIOTIN

d06905 AMLODIPINE-OLMESARTAN d07048 RALTEGRAVIR d07057 NILOTINIB d07063 BROMPHENIRAMINE-DIPHENHYDRAMINE d07064 BROMPHENIRAMINE; DIPHENHYDRAMINE; PHENYLEPHRINE d07076 ETRAVIRINE d07110 NIACIN-SIMVASTATIN d07113 DESVENLAFAXINE d07130 NAPROXEN-SUMATRIPTAN d07131 REGADENOSON d07132 OLOPATADINE NASAL d07137 DABIGATRAN d07162 FESOTERODINE d07298 DIFLUPREDNATE OPHTHALMIC d07302 CHLOPHEDIANOL;GUAIFENESIN;PSEUDOEPHEDRINE d07347 BIFIDOBACTERIUM INFANTIS d07349 LACOSAMIDE d07354 SILODOSIN d07356 RIVAROXABAN d07371 FENOFIBRIC ACID d07373 D-XYLITOL d07382 ADAPALENE-BENZOYL PEROXIDE TOPICAL d07395 DEXLANSOPRAZOLE d07397 FEBUXOSTAT d07409 PRASUGREL d07435 GOLIMUMAB d07440 AMLODIPINE;HYDROCHLOROTHIAZIDE;VALSARTAN d07441 ILOPERIDONE d07453 TAPENTADOL d07458 DRONEDARONE d07466 LIRAGLUTIDE d07467 SAXAGLIPTIN d07473 ASENAPINE d07486 ALISKIREN-VALSARTAN d07505 COPPER d07510 CHLOPHEDIANOL;DEXBROMPHENIRAMINE;PE d07586 PNEUMOCOCCAL 13-VALENT CONJUGATE VACCINE d07631 ESOMEPRAZOLE-NAPROXEN d07637 PITAVASTATIN d07640 DENOSUMAB d07643 HEPATITIS B PEDIATRIC VACCINE d07660 FORMOTEROL-MOMETASONE d07668 AMLODIPINE:HYDROCHLOROTHIAZIDE;OLMESARTAN d07684 ROFLUMILAST d07685 CARBOXYMETHYLCELLULOSE d07692 FINGOLIMOD d07694 DEXBROMPHENIRAMINE-PHENYLEPHRINE d07697 DROSPIRENONE;ETHINYL ESTRADIOL;LEVOMEFOLATE d07705 LURASIDONE d07709 METFORMIN-SAXAGLIPTIN d07721 TICAGRELOR d07727 PENICILLIN G BENZATHINE d07739 SPINOSAD TOPICAL d07740 VILAZODONE

d07796 EMTRICITABINE;RILPIVIRINE;TENOFOVIR d07818 AZILSARTAN-CHLORTHALIDONE d07854 ASCORBIC ACID-CARBONYL IRON d07899 COBICISTAT; ELVITEGRAVIR; EMTRICITABINE; TENOFOV n08029 CODEINE; ACETAMINOPHEN; CAFFEINE; BUTALBITAL

n08053 ECZEMA CREAM

n08058 POMEGRANATE JUICE

n08004 BIRTH CONTROL PILLS n08027 BOSWELLIC ACID

- n08067 VITAMIN B; VITAMIN E; ASCORBIC ACID; ERGOCALCIFEROL
- n08073 HELICOBACTER PYLORI VACCINE
- n08078 EMPIRIC ANTIBIOTICS
- n08081 DABIGATRAN

n08046 ACETAMIDE

d07754 AZILSARTAN d07767 LINAGLIPTIN d07774 BOCEPREVIR d07776 RILPIVIRINE d07777 TELAPREVIR

- n08105 RESVERATROL
- n08202 BACTERIAL VACCINE
- n08203 PENTAVALENT ROTAVIRUS VACCINE
- n08207 THALLIUM
- n08222 VITAMIN A-ASCORBIC ACID
- n09002 CALCIUM CITRATE-MAGNESIUM
- n09026 METHYLPREDNISOLONE-KETOROLAC
- n09046 ACAI
- n09146 HONEY-LEMON OIL
- n09148 OMEGA-3 POLYUNSATURATED FATTY ACIDS;OMEGA-6 POLYUNSATURATED FATTY ACIDS; OMEGA-9 POLYUNSATURATED FATTY ACIDS
- n09150 SODIUM CHLORIDE-SODIUM BICARBONATE
- n09188 CISPLATIN; VINBLASTINE; BLEOMYCIN
- n09189 RIVAROXABAN
- n10022 BETAMETHASONE-BUPIVACAINE
- n11008 CANNABIS (MEDICAL MARIJUANA)
- n12004 FOLIC ACID;ASCORBIC ACID;NIACIN;THIAMINE;RIBOFLAVIN;PYRIDOXINE; CYANOCOBALAMIN; PANTOTHENATE; BIOTIN
- n12005 CLORETAZINE
- n12008 CARISOPRODOL-TRAMADOL

## **B. DRUG ENTRY CODES AND NAMES IN NUMERIC ORDER**

NOTE: This list of drugs only includes those found in the 2012 NAMCS CHC data.

00001 RYZOLT 00002 TAMIFLU 00004 LIDODERM PATCH 00008 VIACTIV 00009 BICILLIN L-A 00012 IPOL 00013 MYCOPHENOLATE MOFETIL 00019 HAWTHORN 00022 PREVNAR 00027 SYNAGIS 00032 EXCEDRIN MIGRAINE 00038 GLYSET 00039 SONATA 00040 SOY 00042 PROTONIX 00048 MOBIC 00052 SILDENAFIL CITRATE 00059 RHO IMMUNE GLOBULIN 00061 BISMUTH 00068 CLEOMYCIN 00073 LUXIQ 00076 TRILEPTAL 00078 AGGRENOX 00080 CARBIDOPA-LEVODOPA 00081 EXELON 00084 PREGABALIN 00091 ACT 00092 ESTROSTEP FE 00096 OSTEO-BIFLEX 00101 ISOSORBIDE DINITRATE 00102 ISOSORBIDE MONONITRATE 00106 ORLISTAT 00109 URSODIOL 00112 MEDERMA 00113 ANDROGEL 00114 DILTIA XT 00117 CRANBERRY 00119 K-MAG 00122 GATORADE 00123 NICOTINE 00125 AVELOX 00127 MONISTAT 3 00132 CAL-MAG 00133 CANDESARTAN 00150 NICODERM CQ PATCH 00151 TUSSIN 00154 CHILDREN'S IBUPROFEN 00159 KALETRA 00161 BISOPROLOL 00167 NOVOLIN N

00169 KETOROLAC TROMETHAMINE 00177 SALT WATER 00183 ABC COMPOUND W/CODEINE 00184 KEPPRA 00187 OPHTHALMIC DROPS 00198 ENOXAPARIN SODIUM 00206 ACTONEL 00208 CELECOXIB 00209 GLUCOVANCE 00213 PANTOPRAZOLE SODIUM 00218 CARBAMIDE PEROXIDE 00233 CONCERTA 00237 VANIQA 00251 VICODIN ES 00253 LISPRO 00254 CARTIA XT 00260 ACETAMINOPHEN 00267 LIQUID TEARS 00268 MOMETASONE FUROATE 00270 ACETAMINOPHEN NO. 3 00273 PROVIGIL 00274 QVAR 00280 ACETAMINOPHEN W/CODEINE 00283 ACETAMINOPHEN W/OXYCODONE 00287 CENESTIN 00293 AMLACTIN 00295 ACETAZOLAMIDE 00296 PENLAC 00305 ACETIC ACID 00311 BUPAP 00312 COMBIPATCH 00316 LEFLUNOMIDE 00317 NICOTROL INHALER 00329 DTAP-HEPB-IPV 00337 DTAP/IPV/HIB 00339 FEROCON 00340 ACHROMYCIN 00341 TDAP 00342 TRICYCLICS 00344 APIDRA SOLOSTAR 00351 VALTURNA 00361 FLOVENT HFA 00367 CONCEPT OB 00374 TYLENOL SINUS 00379 CETAPHIL CREAM 00387 JOLESSA 00388 LISPRO PROTAMINE 00407 FOLNATE 00419 ACETIC ACID/ANTIPYRINE/BENZOCAINE/POLYC 00540 ADIPEX 00597 ADVIL 00598 AEROBID 00645 AFRIN

00790 ALCOHOL 00800 ALCOHOL ISOPROPYL 00825 ALDACTAZIDE 00830 ALDACTONE 00845 ALDOMET 00953 ALLER-CHLOR 00975 ALLERFRIN 00980 ALLERGY RELIEF OR SHOTS 01001 CLARITIN D 01002 NEXIUM 01003 ANAPROX DS 01007 TIKOSYN 01008 ZONEGRAN 01012 BUDESONIDE 01017 BACTRIM DS 01018 MONSEL'S SOLUTION 01019 NIFEDICAL XL 01020 OPTIVAR 01021 BUTORPHANOL TARTRATE 01022 METOPROLOL TARTRATE 01027 STROMECTOL 01028 CODEINE COUGH SYRUP 01029 EFFEXOR XR 01030 ALLOPURINOL 01034 ADVAIR DISKUS 01036 GEODON 01037 GLUCOTROL XL 01038 HALDOL DECANOATE 01041 RABEPRAZOLE SODIUM 01043 ZIPRASIDONE HCL 01044 Z-PAK 01046 QUINOLONES 01047 IRBESARTAN 01050 TOLTERODINE TARTRATE 01055 ORAPRED 01056 ACTIVELLA 01057 DETROL LA 01062 RHINOCORT AQUA 01063 TEGRETOL XR 01064 WELLBUTRIN SR 01073 MAXALT-MLT 01076 STARLIX 01082 BENZACLIN 01083 BIESTROGEN 01084 LUMIGAN 01086 MSM 01094 CARDIZEM CD 01096 CLINDAGEL 01104 LOESTRIN FE 01106 LUTEIN 01109 SPIRULINA 01111 TRAVATAN 01119 INDERAL LA 01121 LESCOL XL

01124 ULTRACET 01137 PROMENSIL 01144 OLUX 01146 CHROMIUM PICOLINATE 01153 VAGIFEM 01156 MARCAINE/KENALOG 01161 ACCURETIC 01166 WELCHOL 01174 PROACTIVE 01178 PODOFILOX 01194 EMBREX 01199 NEOSURE 01201 STROVITE FORTE 01203 BACILLIN C-R 01206 COENZYME Q10 01207 LITHIUM CARBONATE 01211 PULMICORT RESPULES 01214 LANTUS 01216 OXCARBAZEPINE 01223 ALUMINUM CHLORIDE 01228 BECLOMETHASONE DIPROPIONATE 01229 PEG-INTRON 01234 RITALIN-SR 01236 VERAPAMIL SR 01242 CEFAZOLIN SODIUM 01249 METADATE CD 01250 ALUMINUM-MAGNESIUM HYDROX W/SIMETHICONE 01255 ALUPENT 01257 BARRIER OINTMENT 01259 MILK THISTLE 01262 CORICIDIN HBP COUGH & COLD 01263 VIDEX EC 01266 INSULIN GLARGINE 01267 HUMALOG MIX 75/25 01268 LORCET PLUS 01274 TRIZIVIR 01275 ZONISAMIDE 01278 METROLOTION 01281 ADDERALL XR 01282 LATANOPROST 01284 NOREL DM 01285 ZOMETA 01290 AMANTADINE 01293 CENTRUM KIDS COMPLETE 01297 NICOTINE GUM 01307 DORZOLAMIDE AND TIMOLOL 01310 PARICALCITOL 01450 AMINOPHYLLINE 01530 AMITRIPTYLINE 01535 AMITRIPTYLINE HCL W/PERPHENAZINE 01615 AMOLIN 01630 AMOXICILLIN 01635 AMOXICILLIN TRIHYDRATE

01640 AMOXIL 01660 AMPHETAMINE 01685 AMPICILLIN 01690 AMPICILLIN TRIHYDRATE 01755 ANACIN 01770 ANALBALM 01775 ANALGESIC 01838 ANAPROX 01860 ANBESOL 01865 ANCEF 01935 ANDROLONE 01983 ANESTHETIC 01995 ANEXSIA 02013 BENICAR 02016 CLARINEX 02018 FOCALIN 02019 FORADIL AEROLIZER 02026 YASMIN 02027 GLUCAGEN 02031 ELIDEL CREAM 02036 EXTRA STRENGTH TYLENOL 02037 LEVETIRACETAM 02038 LO-OGESTREL 02039 DTAP-HIB 02042 DUONEB 02047 AUGMENTIN ES 02054 TRIMETHOPRIM SULFATE/POLYMYXIN B SULFAT 02059 AZMACORT 02060 DIAMOX SEQUELS 02061 GUAIFENESIN/PSEUDOEPHEDRINE 02064 INVANZ 02074 LUPRON 02075 ANTABUSE 02076 MAPAP 02079 NITROGLYCERIN SUBLINGUAL 02080 ANTACID 02083 UNITHROID 02087 SOAPSUDS ENEMA 02088 ANTACID AND ADSORBENT 02093 OATMEAL BATH 02099 DEPAKOTE ER 02103 LEVALBUTEROL HCL 02104 MAGNESIUM HYDROXIDE 02107 ZALEPLON 02108 COLAZAL 02116 ERYCIN 02117 PLAN B 02119 LEXAPRO 02125 ANTIACID 02128 BENZONATATE 02129 CLORAZEPATE DIPOTASSIUM 02131 ESOMEPRAZOLE MAGNESIUM 02133 NITROGLYCERIN TRANSLINGUAL 02134 PEDIALYTE FREEZER POPS

02135 ANTI-ITCH 02140 THIAMINE HCL 02143 FOLTX 02144 ORTHO-EVRA 02147 METHYLIN 02152 KENALOG/LIDOCAINE 02153 VITAMIN B12/FOLIC ACID 02154 ENTOCORT EC 02156 GLEEVEC 02158 ANTIBIOTIC AGENT 02168 BLACK COHOSH 02169 ICAR 02173 BORAGE OIL 02176 ALPHA LIPOIC ACID 02186 ORTHO EVRA 02187 ALPHAGAN P 02188 DEXEDRINE SPANSULES 02189 GLUCOPHAGE XR 02191 ZYRTEC-D 12 HOUR TABLETS 02195 ANTIPYRINE 02203 ABILIFY 02207 ROBAXIN-750 02209 NOVOLOG 02213 ELIDEL 02214 NULEV 02217 ARANESP 02223 ZETIA 02226 FROVA 02231 ADALAT CC 02232 BENEFIBER 02233 EMERGEN-C 02234 TAZTIA XT 02236 TRIEST 02237 CLORPRES 02239 DOVE SOAP 02244 CALAN SR 02247 FLOXIN OTIC 02249 PEPCID AC 02250 ANTIVERT 02256 ESCITALOPRAM OXALATE 02259 NEULASTA 02261 VORICONAZOLE 02268 RETIN-A MICRO GEL 02279 PULMICORT 02280 APRI 02281 CHICKEN POX VACCINE 02282 5-HYDROXYTRYPTOPHAN 02298 CYCLESSA 02299 SENNA-GEN 02303 REMIFEMIN 02304 TWINRIX 02310 ANUSOL 02311 PIOGLITAZONE HCL

02212	CABERGOLINE
	ANUSOL-HC
	NEOMYCIN/POLYMYXIN B SULFATES/HYDROCORT
	ROXICODONE
	APAP
	CALMOSEPTINE
	LIDOCAINE W/MARCAINE
	FEMARA
	PROCTOSOL
	VIREAD
	CALCITRATE
	NUVARING
	APLISOL
	SCALPICIN SOLUTION
	MULTIVITAMIN W/D
	TRIPLE PASTE
	DOC-Q-LACE
02396	VARICELLA VIRUS VACCINE
	AQUAPHOR
02520	ARALEN
	ARISTOCORT
	ARISTOCORT A
02627	ARMOUR THYROID
02630	ARNICA
	ARTANE
02705	ASCORBIC ACID
02725	ASCRIPTIN
02730	ASCRIPTIN NO. 2
	ASMALIX ELIXIR
02805	ASPIRIN
02820	ASPIRIN COMPOUND #3
	ATARAX
	ATIVAN
	ATROPINE
	ATROVENT
	AUGMENTIN 125
02000	AURALGAN
	AVODART
	CORTISPORIN OINTMENT
	DEPAKOTE SPRINKLE
	DILANTIN INFATABS
	TIGER BALM
	REYATAZ
03021	
03039	
03040	-
03041	
	RENAL CAPS
	NEPRO
	RELPAX
	AVEENO
03051	LITTLE NOSES GENTLE FORMULA

03054 RYNATAN PEDIATRIC SUSPENSION 03055 AVEENO LOTION 03057 MEGESTROL ACETATE 03067 COX-2 INHIBITOR 03069 NYSTOP 03071 OXYTROL 03072 A+D OINTMENT 03080 STRATTERA 03081 AMOXICILLIN AND CLAVULANATE POTASSIUM 03084 SYSTANE 03089 ATACAND HCT 03091 AZELASTINE HCL 03099 CILOSTAZOL 03101 AXID 03104 METROCREAM 03106 ONE A DAY VITAMIN 03113 AYGESTIN 03115 AYR SALINE MIST 03116 URSO 03117 AZACTAM 03122 GINGER 03123 AZATHIOPRINE 03127 CARDIZEM LA 03129 DIPROLENE AF 03131 DUAC 03134 RESTASIS 03137 BROVEX 03138 CIPRO XR 03139 HECTOROL 03141 LISINOPRIL/HCTZ 03142 NIFEDIPINE ER 03148 AVIANE 03151 STERAPRED DS 03156 BUPROPION SR 03159 ONE A DAY VITAMINS MEN 03161 MICROGESTIN FE 03162 PEGASYS 03163 ROSULA 03177 CALCARB 600 03179 PEDIARIX 03180 LEVITRA 03181 METAGLIP 03184 WELLBUTRIN XL 03185 XANAX XR 03187 CRESTOR 03188 MUCINEX 03189 ORTHO-TRICYCLEN LO 03192 VIGAMOX 03193 ABELCET 03194 AVAR 03197 CIPRODEX 03201 MEMANTINE 03208 ALAVERT

03209 ATAZANAVIR SULFATE 03211 CIALIS 03221 ENDOMYCIN 03222 MICARDIS HCT 03225 AZULFIDINE 03226 ENALAPRIL MALEATE 03228 AVINZA 03229 RED YEAST RICE 03232 PORTIA 03234 TERAZOL 3 03236 TERAZOL 7 03237 ATOMOXETINE HCL 03241 TESTIM 03247 COLESEVELAM HCI 03250 B COMPLEX 03251 RANITIDINE HCI 03253 GREEN TEA EXTRACT 03257 PRIMACARE 03267 INDOCIN SR 03269 SEASONALE 03272 METOPROLOL SUCCINATE 03273 NOVOLIN R 03276 SUBOXONE 03279 AMPHETAMINE SALT COMBO 03283 CEFDINIR 03286 KARIVA 03289 PRE-HIST-D 03296 IVERMECTIN 03303 RESCON 03306 NOVALOG 03309 PROVENTIL HFA 03312 CORAL CALCIUM DAILY 03319 TRAMADOL HCL 03328 ENALAPRIL/HCTZ 03332 BENADRYL ALLERGY 03354 L-LYSINE 03355 B-12 03378 DANDELION 03379 KENALOG IN ORABASE 03381 MELOXICAM 03392 TYLENOL ELIXIR 03410 BACITRACIN 03411 FLAX SEED 03415 BACITRACIN-NEOMYCIN-POLYMYXIN 03420 BACITRACIN-POLYMYXIN 03423 BACLOFEN 03426 DIATX 03427 HUMIRA 03428 EMTRICITABINE 03430 BACTRIM 03433 CORTANE-B 03434 HYOSCYAMINE 03438 BACTROBAN 03442 SILVASORB

03590 BARIUM 03635 BASALJEL 03700 BECLOMETHASONE 03709 BECONASE 03800 BELLADONNA 03805 BELLADONNA ALKALOIDS W/PHENOBARBITAL 03825 BELLADONNA W/PHENOBARBITAL 03900 BEN-GAY 03905 BENADRYL 04000 BENTYL 04002 CALCIUM-MAGNESIUM-ZINC SUPPLEMENT 04011 NAMENDA 04014 ARIPIPRAZOLE 04020 BENZAC 04021 BENICAR HCT 04023 BISOPROLOL/HCTZ 04029 CEROVITE TABLETS 04030 BENZAGEL 04041 ALBUTEROL/ATROVENT 04042 SPIRIVA 04043 SYMBYAX 04045 CLEMASTINE FUMARATE 04049 CULTURELLE 04051 CYMBALTA 04054 CUBICIN 04058 DIALYVITE 04059 DOCUSATE -SENNA 04063 FERREX 04071 FORTEO 04072 NASAL SALINE 04079 GLYCOLAX 04085 BENZOYL 04087 ICAR-C 04088 BENZOYL PEROXIDE 04092 EYE-VITE 04094 LACLOTION 04097 LEXIVA 04100 BEROCCA 04113 FORTAMET 04114 VYTORIN 04120 BETADINE 04121 NOVAREL 04129 MYCELEX TROCHES 04136 NOVOLOG MIX 70/30 04143 CATAPRES-TTS-1 04144 POLY-IRON 150 CAPSULES 04146 EZETIMIBE 04154 SILVER NITRATE STICK 04162 FLUMIST 04168 REFRESH TEARS 04170 BETAMETHASONE 04171 EMTRIVA 04174 ROBAFEN

04175 METFORMIN HYDROCHLORIDE ER 04176 SENNA-S 04178 TESSALON 04190 BETHANECHOL 04194 BUFFERED ASPIRIN 04196 CADUET 04197 CALCARB 600 WITH VITAMIN D 04199 CALCIUM MAGNESIUM CHELATED 04200 CALCIUM ZINC MAGNESIUM 04201 CALTRATE PLUS 04204 CARMEX 04213 COLON CLENZ 04217 THERA H TABS 04221 CEREFOLIN 04228 DIABETIC TUSSIN 04232 CARBINOXAMINE MALEATE 04235 BICILLIN 04236 DEEP SEA NASAL SPRAY 04237 DILEX -G 04238 ELESTAT 04240 BICILLIN C-R 04243 FIBER TAB 04244 FLORAJEN 04245 FLORANEX TABS 04246 FLORASTOR 04248 TEARS NATURALE FREE 04266 GARLIC OIL 04277 RIBASPHERE 04278 RISPERDAL CONSTA 04282 ZEMPLAR 04287 SEA-OMEGA 04288 SENNALAX 04292 SENSIPAR 04304 TEARS AGAIN 04307 SENNOSIDES 04311 Q-TUSSIN 04316 ARIXTRA 04320 ATENOLOL/CHLORTHALIDONE 04327 BOUDREAUX'S BUTT PASTE 04331 ST. JOSEPH ASPIRIN 04333 GENERLAC 04339 HERBAL DRUG (UNSPECIFIED) 04345 BIOTIN 04351 JANTOVEN 04367 NASCOBAL 04368 CONTRACEPTIVE AGENT 04370 BISACODYL 04383 PROCTOZONE HC CREAM 04393 TRUVADA 04416 AMIBID LA 04422 BABY SHAMPOO 04423 LETROZOLE 04431 BROMHIST DM PEDIATRIC SYRUP 04434 BI-EST

04437 URELLE 04440 BISMUTH SUBSALICYLATE 04446 LYCOPENE 04448 AMMONIUM LACTATE 04451 CANDIDA ALBICANS SKIN TEST ANTIGEN 04456 CLINDAMAX 04463 LORTUSS DM 04465 ICAR-C PLUS 04476 MODIFIED CITRUS PECTIN 04480 BLEPH 04489 METADATE 04491 SYMBICORT 04494 IMIQUIMOD 04503 PEDIATEX 04512 TRINESSA 04514 TRISPRINTEC 04529 METHYLPREDNISOLONE SODIUM SUCCINATE 04536 ABX OINTMENT 04541 TYLENOL INFANT'S 04544 HYDROCORTISONE VALERATE 04549 ACECOL 04556 SEVELAMER HYDROCHLORIDE 04558 CALCIUM CHANNEL BLOCKER 04561 RAZADYNE 04562 CALCIPOTRIENE 04564 DIABETES MEDICATION 04569 INNOPRAN XL 04571 ISTALOL 04576 DULOXETINE 04577 HORSE CHESTNUT 04578 L-ARGININE 04580 BONINE 04585 BONTRIL PDM 04589 TIOTROPIUM BROMIDE 04593 VITEYES 04594 COPEGUS 04614 CRYSELLE 04617 ACCUNEB 04619 PARAFFIN 04622 EXEMESTANE 04623 NICOTINE NASAL SPRAY 04624 PRAZIQUANTEL 04627 TRAVOPROST 04631 EPZICOM 04632 FOSAMPRENAVIR CALCIUM 04634 HEMIN 04642 OYST-CAL 04654 TRACLEER 04664 MIRENA 04674 NATEGLINIDE 04679 STATINS 04682 UTIRA 04803 BROMFED

04808 BROMOCRIPTINE 04820 BROMPHEN 04845 BROMPHENIRAMINE 05010 BUFFERIN 05024 BUMEX 05026 ASCENSIA ELITE 05033 LUNESTA 05035 BUPIVACAINE 05051 VESICARE 05054 SUBUTEX 05056 ZEGERID 05063 FLUORABON 05066 CAMPRAL 05072 BONIVA 05074 ENABLEX 05083 PROLACTIN RIA 05087 DIABETIC TUSSIN DM 05090 NEVANAC 05095 BUTALBITAL 05097 LYRICA 05099 CLOTRIMAZOLE-BETAMETHASONE DIPROPRIONAT 05102 CHOLEST-OFF 05103 BUTALBITAL W/CODEINE 05106 GLIPIZIDE ER 05109 ALDEX 05116 CARDIOTEK RX 05122 METHYLIN ER 05124 ENPRESSE 05127 MONONESSA 05133 RENAX 05156 ERYTHROMYCIN BASE-NEOMYCIN 05162 BYETTA 05169 POLYVENT 05174 ANTARA 05178 FOSRENOL 05184 DUET DHA 05192 ABSORBASE 05197 LOSARTAN-HCTZ 05203 ENFALYTE 05207 CEFUROXIME AXETIL 05218 CICLOPIROX 05222 PYRANTEL 05233 MOXILIN 05244 ROZEREM 05250 CAFERGOT 05252 DIGESTIVE ADVANTAGE 05264 ASMANEX TWISTHALER 05265 CAFFEINE 05266 SANCTURA 05269 INSPRA 05271 METANX 05277 DEPO-MEDROL W/ LIDOCAINE 05278 OCUVITE LUTEIN 05307 ATRIDOX

05308 MUCINEX DM 05310 CALADRYL 05322 AMCINONIDE 05324 EPLERENONE 05327 SPRINTEC 05329 CAMILA 05331 COMMIT 05333 NORTREL 05335 CALAMINE LOTION 05337 LOFIBRA 05338 FLUTICASON-SALMETEROL 05344 FLUOR-A-DAY 05347 CALAN 05348 NATALCARE PLUS 05349 NEOMYCIN SULFATE 05351 ORTHO MICRONOR 05375 CALCIFEROL 05393 CALCITONIN 05394 CALCITREL 05395 CALCIUM ACETATE 05405 CALCIUM CARBONATE 05415 CALCIUM 05465 CALCIUM-D 05541 CALTRATE W/VITAMIN D 05595 CANTHARIDIN 05640 CAPITAL W/CODEINE 05663 CARAFATE 05680 CARBAMAZEPINE 05750 CARDEC-DM 05789 CARDIZEM 05810 CARISOPRODOL 05820 CARMOL 05895 CATAPRES 05983 CEFADROXIL 05993 CEFTIN 05995 CEFAZOLIN 06001 ALAVERT D 06002 AMBIEN CR 06004 FOCALIN XR 06005 CELESTONE 06014 ERRIN 06015 CELESTONE SOLUSPAN 06016 TAB-A-VITE 06017 AMLODIPINE/BENAZEPRIL 06038 AMITIZA 06044 CATAPRES-TTS-2 06045 FEMRING 06054 FORTICAL 06059 XODOL 06061 ACTOPLUS MET 06062 CEPHADYN 06064 GLYBURIDE/METFORMIN 06068 ANASTROZOLE

06071 IMATINIB 06086 VANDAZOLE 06089 XIFAXAN 06093 TACLONEX 06094 XIBROM 06095 CENTRAX 06100 CENTRUM 06101 TYLENOL COLD 06102 BIDIL 06108 GARDASIL 06109 YAZ 06110 CEPACOL 06118 AZILECT 06120 CEPASTAT 06121 RANEXA 06122 RIFAXIMIN 06125 CEPHALEXIN 06126 AVANDARYL 06129 ADACEL 06138 BOOSTRIX 06153 DEXPAK 06162 CEFUROXIME 06164 LEVEMIR 06166 ALFUZOSIN 06170 CERUMENEX 06172 DAYTRANA 06173 ROTATEQ 06176 OLOPATADINE 06192 CHANTIX 06193 JANUVIA 06196 SOLODYN 06203 TANDEM-OB 06204 CIPROXIN 06210 CETAPHIL 06212 CLARINEX-D 06213 DILT-XR 06216 LENALIDOMIDE 06219 DESOGESTREL 06229 DAPTOMYCIN 06236 ATRIPLA 06237 CERAVE 06242 LEVSIN/SL 06247 FLECAINIDE 06249 SALONPAS 06253 JUNEL FE 06256 Q-DRYL 06258 ZOSTER VACCINE LIVE 06261 LESSINA 06278 FAZACLO 06291 TELMISARTAN 06294 CHEMOTHERAPY 06302 OLMESARTAN 06318 CHERATUSSIN 06322 DICEL

06323 TRIDERM 06374 CHILDREN'S TYLENOL 06470 CHLORASEPTIC 06475 CHLORASEPTIC CHILDREN'S 06495 CHLORDIAZEPOXIDE 06605 CHLORPHENIRAMINE 06620 CHLORPROMAZINE 06625 CHLORPROPAMIDE 06645 CHLORTHALIDONE 06661 CHLORZOXAZONE 06720 CHOLINE 06798 CHROMIUM 06815 CIMETIDINE 06839 CIPRO 06860 CITRATE OF MAGNESIA 06895 CLEAR EYES 06900 CLEARASIL 06905 CLEOCIN 06913 CLEOCIN T 06920 CLINDAMYCIN 06925 CLINDAMYCIN (PHOSPHATE) 06930 CLINDEX 06935 CLINORIL 06975 CLOMID 06980 CLONAZEPAM 06985 CLONIDINE 06990 CLONOPIN 06993 CLORAZEPATE 07001 OSELTAMIVIR 07003 CLOTRIMAZOLE 07004 EZOL 07016 MENACTRA 07018 ORENCIA 07031 SULFAZINE 07049 APIDRA 07058 ESTROVEN 07061 REVLIMID 07064 ADOL 07065 NONI JUICE 07069 ENJUVIA 07072 TEA TREE OIL 07075 COAL TAR 07076 INVEGA 07079 BROVANA 07081 BUDEPRION SR 07087 DERMACERIN 07090 BANOPHEN 07096 FLUTICASONE PROPIONATE 07099 CALCIUM CITRATE W/VITAMIN D 07106 CINNAMON 07117 OPANA 07118 FOCUS SMART 07137 EXFORGE

07140 COCOA BUTTER 07141 ZOSTAVAX 07144 PROAIR HFA 07145 COCONUT OIL 07150 COD LIVER OIL 07153 ARB 07154 ASPIRIN FREE 07159 FOSAMAX PLUS D 07163 NOREL EX 07166 DERMOTIC OIL 07167 SEASONIQUE 07170 BENAZEPRIL-HYDROCHLOROTHIAZIDE 07171 LAMISIL AT 07173 SELSEB 07180 CODEINE 07182 PATADAY 07183 JANUMET 07188 ATUSS DS 07190 CODEINE SULFATE 07198 GINGERMAX 07203 GUMMIVITES 07207 FEMCON FE 07208 IODORAL 07211 SPRYCEL 07218 GLUMETZA 07223 OPANA ER 07228 THERA-M 07229 BUDEPRION XL 07232 LUTERA 07234 KELNOR 07237 DEPLIN 07239 ICAPS AREDS 07243 ED-CHLOR-TAN 07250 COGENTIN 07251 PERCOCET 10 07252 PERCOCET 7.5 07257 VERAMYST 07263 QUALAQUIN 07265 COLACE 07266 RENA-VITE 07275 COLCHICINE 07283 TANDEM PLUS 07291 TRI-VITE 07293 COLD RELIEF 07294 V-C FORTE 07299 VISION FORMULA 07318 HYDROPHOR 07331 PHENADOZ 07348 SUPER B-50 COMPLEX 07349 TEKTURNA 07352 TRAVATAN Z 07358 NIFEDIAC CC 07366 VITAMIN D3 07371 CARBOXYMETHYLCELLULOSE

07386 BARACLUDE

	ENTECAVIR
07393	CLINDAMYCIN TOPICAL
07398	ALTABAX
07401	HUMAN PAPILLOMAVIRUS VACCINE
07406	VYVANSE
	COBAL-1000
07412	
	PROPO-N
	AMRIX
	GUAIFENESIN-HYDROCODONE
	PREZISTA
07454	
	COMPAZINE
07473	BENADRYL CREAM
07474	INFANRIX
07477	NEEVO
07478	COMPOUND W
07481	XYZAL
07486	J-MAX
07491	LEVACET
	LIDOCAINE/MAALOX/BENADRYL COMPOUND
	LOVAZA
07499	
	ETONOGESTREL
07539	
	CONJUGATED ESTROGENS
	ISOMETHEPTENE
	HYDROCERIN
	FLULAVAL
	MMR VACCINE
07576	ALIGN
	BIOSIL
	ACCUHIST
07596	CORFEN-DM
07608	ALLI
	DERMABOND
07622	FLUARIX
07623	COPPER
07633	QUASENSE
07634	TYROSINE
07635	PRENATAL PLUS
	IMPLANON
07642	
07652	
07655	
	Q-TAPP
07669	GERI-HYDROLAC
07670	CORGARD
07673	METOCLOPHEN
07680	
07683	ABC PLUS

07688 07693	INSULIN ASPART CALCIUM, MAGNESIUM AND VITAMIN D
07755	,
07778	CORTICOTROPIN
07795	
	CORTISPORIN OPHTHALMIC SOLUTION
07913	
07920 07930	
	CREON
	NORA-BE
08006	
08007	
	OB COMPLETE DHA
	INSULIN N
	CROMOLYN BALZIVA
	BYSTOLIC
	LYBREL
	DIGEX
	SERUM
08045	
	LIALDA
	M-END DM
	PRENATAL VISINE TEARS
08071	
08082	BOSWELLIN
	METOPROLOL/HYDROCHLOROTHIAZIDE
08090	
08097	EMTRICITABINE/TENOFOVIR
08116	
08122	
08123	
08124	FIBER CAPSULES CERON-DM
08137	BALSALAZIDE
	CYCLOGYL
08147	MICRO-K
	ADVAIR
	FLECTOR
	CYCLOPHOSPHAMIDE
08157	COMBIGAN VARDENAFIL
08159	ROSUVASTATIN
08162	
08164	
08165	ACULAR
08168	ACETAMIDE
08169	
08173	
08174	ERYTHROMYCIN BENZOYL PEROXIDE ONE A DAY WOMENS FORMULA
	SANCTURA XR
00110	

08180 CYPROHEPTADINE 08181 DILTIAZEM CD 08185 DICLOFENAC XR 08191 GLIPIZIDE/METFORMIN 08194 ALLERTEC 08196 ECZEMA CREAM 08197 TREXIMET 08202 ALBUTEROL/IPRATROPIUM 08203 OMNARIS 08204 TADALAFIL 08208 SALINE GARGLES 08209 MUCINEX D 08212 SEROQUEL XR 08214 TYLENOL CHILDRENS COUGH 08217 POMEGRANATE JUICE 08219 SUDOGEST 08224 CITRANATAL 08228 CHLORPHENIRAMINE/HYDROCODONE 08230 CYTOMEL 08234 PRISTIQ 08241 VITAMINS E, C, D, B, B12 08246 OXYCODONE ER 08249 PATANASE 08255 NIACIN SR 08258 NIASPAN ER 08261 ALVESCO 08267 HELICOBACTER PYLORI VACCINE 08272 PHENYLEPHRINE/GUAIFENESIN 08276 EMPIRIC ANTIBIOTICS 08284 DABIGATRAN 08293 SITAGLIPTIN 08303 BACITRACIN ZINC 08306 PHENYTOIN SODIUM EXTENDED 08308 SENNA PLUS 08329 ULTRAM ER 08337 RESVERATROL 08341 CALCIUM CARBONATE W/VIT D 08343 OCEAN NASAL SPRAY 08346 DIET PILLS 08347 ADVIL PM 08351 IRON SULFATE 08354 VICODIN HP 08378 VARENICLINE 08384 BLOOD PRESSURE MEDICATION 08385 DALLERGY 08398 RIBAPAK 08412 HEP A+B COMBO 08413 LACTAID 08414 ANTI REFLUX 08418 POLYMYXIN B SULFATE DROPS 08420 DANTRIUM 08423 PENTACEL 08426 DOXYLAMINE

08432 NOVOLOG FLEXPEN 08437 OMNIPRED 08439 FLORICET 08440 DAPSONE 08448 PEDIATRIC MULTIVITAMINS 08450 DARAPRIM 08451 MOISTURIZING CREAM OTC 08452 TUSSIONEX PENNKINETIC 08464 ENSURE PLUS 08470 DARVOCET-N 08476 DHA 08478 COREG CR 08481 ADIPEX-P 08490 DARVON-N 08492 NETIPOT 08499 PNEUPED 08513 OPHTHALMIC SOLUTION 08518 BACTERIAL VACCINE 08519 LIVE ORAL PRV 08521 RECLIPSEN 08522 RECLAST 08527 DARUNAVIR 08530 JAY-PHYL 08534 YEAST CREAM 08535 DDAVP 08536 THALLIUM 08546 ESTER-C 08547 PCV 08551 A/B OTIC 08552 PEG 3350 08553 HIB-PRP-T 08561 CENTURY 08565 DEBROX 08573 VITAMIN A & C 08576 YOGURT 08585 DECADRON 08588 FLEXPEN 08591 ISENTRESS 08603 SKIN CREAM 08605 DECADRON-LA 08606 OPIOIDS 08611 BENZAC AC 08624 CETRAXAL 08627 PRENAFIRST 08665 DECONEX 08666 CHILDRENS VITAMINS 08670 DECONGESTANT 08671 RU-HIST FORTE 08679 GLATIRAMER 08681 ETRAVIRINE 08745 DELESTROGEN 08753 DELSYM 08770 DELTASONE 08805 DEMULEN

08835 DEPAKENE 08836 DEPAKOTE 08860 DEPO-ESTRADIOL 08865 DEPO-MEDROL 08870 DEPO-PROVERA 08880 DEPO-TESTOSTERONE 08900 DEPOTESTOGEN 09003 CALCIUM CITRATE W MAG 09015 DESFERAL 09020 DESIPRAMINE 09025 DESITIN 09029 BAKING SODA BATHS 09032 DEPOMEDROL/TORADOL 09033 DESOWEN 09037 FALCON EYE DROPS 09038 TOPICAL SKIN CREAM 09059 ACAI 09075 DEXAMETHASONE 09080 DEXAMETHASONE ACETATE 09095 DEXAMETHASONE SODIUM PHOSPHATE 09098 OCP 09108 DTAP-POLIO 09109 PREVIDENT 09119 ALAHIST DM 09120 DEXEDRINE 09122 ULORIC 09127 NEUTREXIN 09133 PROMISEB 09138 PROCENTRA 09140 APPLE CIDER VINEGAR 09141 GELNIQUE 09146 MULTIVITAMIN FOR HER 09149 INSULIN R 09151 STEROID 09152 VERIPRED 09153 ULESFIA 09154 CHILDREN ANTIHISTAMINE 09167 COMPOUND MEDICATION 09170 DEXTROAMPHETAMINE 09175 DEXTROSE 09184 XYLITOL 09189 HYDROCODONE CP 09207 SELZENTRY 09213 ESZOPICLONE 09215 CHOLESTEROL MED 09223 EFFIENT 09227 ENFAMIL LIPIL 09231 HEADACHE MED 09237 DEXLANSOPRAZOLE 09239 ED CHLORPED 09253 EPIPEN JR 09265 MILLIPRED 09266 POLY-VENT DM

09279 DUREZOL 09281 SALMON OIL 09284 ACID REDUCER 09286 NUCYNTA 09287 HUMALOG MIX 50/50 09293 DIVALPROEX ER 09296 KEPPRA XR 09297 VALSARTAN/HYDROCHLOROTHIAZIDE 09300 TIVA 09305 DIAMOX 09311 INTEGRAF 09318 MYCOLOG II 09324 CELOX 09326 METFORMIN ER 09327 LEXISCAN 09334 PALIPERIDONE 09336 TYLAPRIN 09353 MULTAQ 09361 PRENATAL AD 09362 CENTRUM CARDIO 09364 DROSPIRENONE/ETHINYL ESTRADIOL 09367 SIMILAC ADVANCE 09368 KRILL OIL 09370 DIAZEPAM 09374 SPRIX 09377 Z-PACK 09378 MAALOX MAX 09381 C-PHEN DM 09384 DEXMETHYLPHENIDATE 09386 PROMETHEGAN 09391 SAPHRIS 09394 SSRI 09396 INTUNIV 09398 PRENATAL DHA TABS 09404 VORTEX 09407 TASIGNA 09408 FOSINOPRIL/HCTZ 09409 VITAMIN B & D 09417 THERA-M PLUS 09424 DICLOX 09428 HONEY AND LEMON COUGH SYRUP 09431 EEMT HS 09433 DICLOXACILLIN 09438 OMEGA 3/6/9 09444 ONGLYZA 09450 NEILMED SINUS RINSE 09451 MUCINEX MAX STRENGTH 09453 FELODIPINE ER 09455 DICYCLOMINE 09461 FLINTSTONES PLUS IRON CHEW 09465 DIDREX 09505 TRI-SPRINTEC 09545 DIGOXIN 09561 HONEY

09562 DEXTROMETHORPHAN/GUAIFENSIN 09567 PHOSPHA 09569 SMZ TMP DS 09571 NIACIN CR 09576 POTASSIUM CITRATE 09577 NYQUIL 09579 DESOGESTREL ETHINYL-ESTRADIOL 09581 ALMOTRIPTAN 09582 OXYCODONE CR 09583 LANTUS SOLOSTAR 09585 DILANTIN 09587 BUPROPION XL 09588 CONJUGATED ESTROGENS/METHYLTESTOSTERONE 09593 DILATRATE 09597 KINRIX 09600 DILAUDID 09601 RENVELA 09608 ALLERCLEAR 09614 ZOLPIDEM 09616 VOSOL 09618 ASTEPRO 09619 TELMISARTAN/HCTZ 09624 CLOBETASOL PROPIONATE 09626 JUNEL 09627 AZURETTE 09637 NECON 777 09640 DIMENHYDRINATE 09644 PREVIFEM 09645 EPIDUO 09647 OCELLA 09651 ACETAMINOPHEN-TRAMADOL 09652 TRILIPIX 09655 IV FLUIDS 09658 LIDOCAINE HURRICANE 09681 CITRANATAL ASSURE 09687 TESTOSTERONE CYPIONATE 09689 HUMALOG INSULIN PUMP 09690 DIMETAPP 09701 DIGESTIVE ENZYMES 09702 AZO 09703 THYROID DESICCATED 09709 LATRIX 09711 LEVOCARNITINE 09716 KETOCONAZOLE SHAMPOO 09722 CHOLECALCIFEROL 09723 INTELENCE 09729 MALATHION 09733 CORVITE 09734 ASPIRIN/ACETAMINOPHEN/CAFFEINE 09737 IBUDONE 09741 FEROSUL 09751 HYDROCODONE/IBUPROFEN 09752 SULFAMETHAZOLE TRIMETHOPRIM

09753 THYROID STIMULATING HORMONE 09757 ACZONE 09760 KETOTIFEN FUMARATE 09764 VITAFOL-OB+DHA 09772 TOVIAZ 09791 VENTOLIN\ATROVENT 09795 EXFORGE HCT 09797 RAPAFLO 09798 OS-CAL ULTRA 09801 AZASITE 09806 LETAIRIS 09807 POLY HIST FORTE 09809 ASPIR-LOW 09831 OSTEO NUTRIENTS 09834 DITROPAN XL 09837 LIPOFEN 09839 DIPHENHIST 09841 DMPA INJECTION 09842 STRONG START VITAMINS 09843 FERROSOL 09845 DIPHENHYDRAMINE COUGH SYRUP 09850 DIPHENHYDRAMINE 09853 GLIPIZIDE XL 09854 SAVELLA 09856 ROTARIX 09861 NUVIGIL 09862 GAS RELIEF 09868 MUCUS RELIEF DM 09869 AMLODIPINE/ATORVASTATIN 09870 DIPHENHYDRAMINE HCL SYRUP 09880 DIPHENOXYLATE HCL & ATROPINE SULFATE 09882 DEXTROMETHORPHAN 09886 REFRESH PLUS 09887 LOTION 09888 INSULIN DETEMIR 09889 CALCIUM ALGINATE 09892 MOXATAG 09903 NICORELIEF 09910 VIMPAT 09911 SINUS MEDICATION 09913 ZOVIA 09914 EAR WAX REMOVAL 09915 DIPROSONE 09917 SLEEP AID 09918 ORTHO INJECTIONS 09920 DIPYRIDAMOLE 09925 DISALCID 09928 DASATINIB 09937 SRONYX 09938 CENTRUM WOMENS 09954 DIVALPROEX 09956 PVB 09957 ALAWAY EYE DROPS 09958 RIVAROXABAN

09968	APRISO
09978	LUVOX CR
	BMX SOLUTION
09990	
09993	DIPHTHERIA TOXOID
09995	DITROPAN
	LUBRICANT DROPS
	RENAL GEL
	ACTONEL W/ CALCIUM
10016	TRI-PREVIFEM
10026	GLUCOSAMINE AND CHONDROITIN W MSM
	INVEGA SUSTENNA
	DOAK OIL
	ASPIRIN/SALICYLAMIDE/CAFFEINE
	ZENPEP
10064	UBIQUINONE
10070	BUDEPRION
	DOCUSATE
10089	
10092	
	ZIPSOR
10121	DULERA
10123	VICTOZA
10126	DOLOBID
	DOLOPHINE
	PPV 23
	DEXILANT
	DOMEBORO
10159	CERON
10164	DOSEPAK
10166	BUPRENORPHINE-NALOXONE
10169	
10179	
	LISDEXAMFETAMINE
10192	
10204	BUTALBITAL-ACETAMINOPHEN
10210	DONNATAL
10216	HPV VACCINE
	REPREXAIN
	NEOMYCIN/POLYMYXIN B/HYDROCORTISONE
	ABACAVIR-LAMIVUDINE
	D-VI-SOL
10244	TRIBENZOR
10246	INSULIN LISPRO MIX
	FEXOFENADINE-PSEUDOEPHEDRINE
	TROSPIUM
	NICOTINE POLACRILEX
	HYDROCORTISONE-PRAMOXINE
	TANDEM
10282	TIROSINT
	ECASA
	PROPHYLACTIC ANTIBODIES

<sup>10298</sup> PROPHYLACTIC ANTIBODIES

	VITAMIN D2
	CELADRIN PCV 13
	HYDROCHLOROTHIAZIDE/TRIAMTERENE
	DOXEPIN
	DOXYCYCLINE
	PRADAXA
	LEVOCETIRIZINE DIHYDROCHLORIDE
	FLEX-A-MIN
	NITAZOXANIDE
	BUTRANS
	DEXTROAMPHETAMINE/AMPHETAMINE
10393	LORATADINE-PSEUDOEPHEDRINE
10396	DIAPER OINTMENT
10421	ALER-TAB
	OMEGA FATTY ACIDS
	SALINE CLEANSER
	ORBIVAN
	PRASUGREL
	DRISDOL
10467	DEX 4 ZYMAXID
	VIMOVO SAXAGLIPTIN
	EXALL
	MARCAINE/CELESTONE SOLUSPAN
	COLCRYS DRYSOL
10518	
	PRORENAL
	DULCOLAX
	DUOFILM
	DURICEF
	DYAZIDE
	E-MYCIN
	EAR DROPS
10975	ECOTRIN
11014	PENNSAID
11016	MOXEZA
11017	NASOHIST
	VANATAB DX
	BEYAZ
	EFUDEX
	URIBEL
	GILENYA
	SILENOR
11045	
	LIVALO DERMATROPHIN
11058	ELAVIL
11005	
	CALCIO DEL MAR
	GENTLEASE
11128	

11130 ELECTROLYTE 11142 LATUDA 11143 VIIBRYD 11152 ELOCON 11154 EDARBI 11188 TELAPREVIR 11190 EMETROL 11195 CATALYN 11197 LURASIDONE 11198 AMORYN 11203 NOVOFINE 11216 ZARAH 11226 TRAJENTA 11228 QUINAPRIL-HCTZ 11229 EXALGO 11258 KOMBIGLYZE XR 11267 MEDICAL MARIJUANA 11275 PRENATABS 11276 POLY-VI-FLOR WITH IRON AND FLUORIDE 11278 INCIVEK 11283 PEDIATEX TD 11303 FANAPT 11334 COMPLERA 11336 EDURANT 11353 DALIRESP 11355 ENFAMIL 11359 Q-TUSSIN DM 11390 ENSURE 11393 XARELTO 11402 ZUTRIPRO 11540 EPINEPHRINE 11548 EPIPEN 11549 EPITOL 11575 EPSOM SALT 11615 ERGOCALCIFEROL 11651 ERYC 11657 ERYPED 11665 ERYTHROMYCIN 11668 ERYTHROMYCIN OPHTHALMIC 11688 ESGIC 11740 ESTRACE 11745 ESTRADIOL 11765 ESTRATEST 11800 ESTROGEN 11898 ETHOSUXAMIDE 11915 ETHYL CHLORIDE 11945 EUCERIN 11960 EURAX 12002 ACCUFLORA 12006 MICROGESTIN 12007 MIDAZOLAM 12008 MORPHINE ER 12009 ALENDRONATE

12010	ALDEX D
	NEXPLANON
-	NICOTINE PATCH
12014	
12016	NORETHINDRONE
12017	NORGESTREL/ETHINYL ESTRADIOL
12022	
12027	
12028	OXYCODONE
12029	
12031	
	ARBINOXA
	PAIN MEDICATIONS
	PANTOPRAZOLE
	EXCEDRIN
	PARAGARD
	ASPIR 81
	PEN-VK
	PERCOCET
	AXIRON
	POLIO VACCINE
12056	
12057	TUBERCULIN PURIFIED PROTEIN DERIVATIVE
12059	BENZOCAINE/CETYLPYRIDINIUM
12060	BENZOCAINE/DEXTROMETHORPHAN
12062	
12066	CARDEC
12070	CAZIANT
12071	CHERATUSSIN AC
12072	
12073	CHILDRENS TYLENOL COLD AND COUGH
12074	CHLO TUSS
12077	
12081	PROCTOSOL HC
12082	-
12084	
	ROBITUSSIN D
	ROBITUSSIN DM
	ROBITUSSIN PE
12090	ROMYCIN
12091	RONDEC
12093	
12096	
12097	
12101	
12102	
12104 12105	
12108 12112	
12112	
	VENLAFAXINE ER
	GUAIFENESIN DM
	ZYRTEC-D
12123	

12124 HYOMAX SL 12126 INTEGRA 12129 KAPVAY 12136 ALA HIST PE 12138 VINATE ULTRA 12140 FASTIN 12141 ASPIRIN W/HYDROCODONE 12149 CORTISPORIN 12151 DEXTROMETHORPHAN/PROMETHAZINE 12154 ESCITALOPRAM 12157 LEVOCETIRIZINE 12158 LEUPROLIDE 12161 MOMETASONE 12162 PRILOSEC OTC 12167 OPV/IPV 12168 PEDIADERM TA 12169 NOHIST-DM 12171 NORGESTIMATE-ETHINYL ESTRADIOL 12176 PREPARATION H 12177 RHINOFLEX 12180 STAXYN 12182 BUPROBAN 12187 PYRIL D 12188 FOLBIC 12189 GARLIC 12191 LEVALBUTEROL 12192 LOSEASONIQUE 12193 FELDENE 12195 SALINE NASAL SPRAY 12196 SULFAMETHOXAZOLE-TRIMETHOPRIM 12198 CORICIDIN HBP 12199 CORTIZONE-10 12200 EDARBYCLOR 12204 TRIAMINIC COLD & ALLERGY 12206 TRIAMINIC NIGHT TIME COLD & COUGH 12207 TRIPHROCAPS 12208 CLORETAZINE 12219 NATURAL BALANCE TEAR 12223 GUAIASORB 12224 ADVACAL 12225 FEMIRON 12231 RYNEX DM 12232 RYNEX PSE 12233 CARISOPRODOL-TRAMADOL 12236 CAMPHOR-MENTHOL 12237 PRENACARE 12249 GENERESS FE 12255 FEOSOL 12263 ONFI 12266 MEGACE ES 12274 HEMP TINCTURE 12285 FER-IN-SOL 12287 CETIRIZINE-PSEUDOEPHEDRINE

12204	GOLD BOND ANTI-ITCH
	FERGON
	APHTHASOL
	VANACOF DX
	STRIBILD
	BOCEPREVIR
	BENSAL HP
	NATROBA
	TRI-DEX
	ALA-SCALP HP
	BIFIDOBACTERIUM INFANTIS
12341	
-	BRILINTA
	EFAVIRENZ-EMTRICITABINE-TENOFOVIR
	ESCAVITE
	TROLAMINE SALICYLATE CREAM
	TYVASO
	RASPBERRY KETONE
	DILTZAC
	SIMPONI
	TOPIRAGEN
	VEMMA
	WILD MEXICAN YAM
	APETIMAR
	ASPIRIN-DIPHENHYDRAMINE
	BRAIN & MEMORY POWER BOOST
	MATZIM LA
12403	PROSVENT
12411	VILAZODONE
12412	WILLOW BARK
12421	OCUDYNE
12422	PYGEUM
	REZIRA
12426	SOY ISOFLAVONOES
12428	BIO-ALLAY
	PHENYLEPHRINE-CHLORPHENIRAMINE-DEXTROME
	CETROTIDE
	CONZIP
	SEROGEN
	FERROUS FUMARATE
	FERROUS GLUCONATE
	FERROUS PLUS
	FERROUS SULFATE
	FIBERCON
	FIORINAL
	FLAGYL
	FLEET BAGENEMA
	FLEET ENEMA
	FLEXERIL
	FLUOCINOLONE
	FLUORESCEIN
	FLUORIDE
12755	FLUORITAB

12770 FLUOROURACIL 12780 FLUPHENAZINE 12785 FLURA-DROPS 12810 FLURAZEPAM 12830 FLUZONE 12865 FOLIC ACID 13008 FREEZONE 13096 FUNGOID 13118 FUROSEMIDE 13205 GARAMYCIN 13208 GARGLE 13220 GAVISCON 13320 GENTAMICIN 13325 GENTIAN VIOLET 13455 GERITOL 13515 GINSENG 13535 GLUCAGON 13550 GLUCOSE 13553 GLUCOTROL 13655 GLYCOPYRROLATE 13785 GRIFULVIN 13790 GRIS-PEG 13800 GRISEOFULVIN 13830 GUAIFENESIN & DEXTROMETHORPHAN HBR 13835 GUAIFENESIN 13838 GUAIFENESIN W/CODEINE 13875 GUIATUSS 13885 GUIATUSSIN 13890 GUIATUSSIN W/CODEINE 13930 GYNE-LOTRIMIN 13999 HALCION 14000 HALDOL 14040 HALOPERIDOL 14090 HEAD & SHOULDERS 14095 HEB CREAM BASE 14180 HEMORRHOIDAL OINTMENT 14190 HEMORRHOIDAL HC 14240 HEPARIN 14279 HEPTAVAX-B 14415 HIBICLENS 14683 HORMONE 14713 HUMAN CHORIONIC GONADOTROPIN 14727 HUMULIN 14770 HYCODAN 14840 HYDRALAZINE 14870 HYDRATE 14875 HYDREA 14903 HYDROCORT 14930 HYDROCHLOROTHIAZIDE 14935 HYDROCHLOROTHIAZIDE W/RESERPINE 14953 HYDROCO 14955 HYDROCODONE 14960 HYDROCODONE PA SYRUP

14965 HYDROCORTISONE 14985 HYDRODIURIL 14990 HYDROGEN PEROXIDE 15005 HYDROMORPHONE 15025 HYDROPHILIC OINTMENT 15040 HYDROQUINONE 15065 HYDROXY-PROGESTERONE 15070 HYDROXYCHLOROQUINE 15090 HYDROXYUREA 15100 HYDROXYZINE 15105 HYDROXYZINE PAMOATE 15115 HYGROTON 15305 HYTONE 15307 HYTRIN 15395 IBUPROFEN 15455 ICY HOT ANALGESIC BALM 15520 IMIPRAMINE 15545 IMODIUM 15555 IMURAN 15575 INDERAL 15590 INDOCIN 15600 INDOMETHACIN 15630 INH 15678 INSULATARD NPH 15680 INSULIN 15685 INTAL 15730 IODINE 15865 IRON & B COMPLEX PLUS 15870 IRON PREPARATION 15873 IRON PEDIATRIC 15990 ISONIAZID 16003 ISOPHANE INSULIN SUSPENSION 16095 ISORDIL 16105 ISOSORBIDE 16210 K-LOR 16268 K-TAB 16365 KAOPECTATE 16405 KARAYA GUM 16455 KAYEXALATE 16475 KEFLEX 16505 KENALOG 16535 KERODEX 16710 KLOR-CON 16728 KLOTRIX 16895 L-THYROXINE 16915 LACRI-LUBE 16950 LACTINEX 16955 LACTOBACILLUS ACIDOPHILUS 16970 LACTOSE 16975 LACTULOSE 17070 LANOLIN 17115 LANOXIN 17165 LASIX 17205 LAVATAR

17243 LAXATIVE 17345 LEVODOPA 17365 LEVOTHROID 17370 LEVOTHYROXINE 17375 LEVSIN 17440 LIBRAX 17450 LIBRIUM 17475 LIDEX 17485 LIDOCAINE 17490 LIDOCAINE HCL 17495 LIDOCAINE HCL W/EPINEPHRINE 17530 LIMBITROL 17540 LINCOCIN 17545 LINCOMYCIN 17548 LINDANE 17560 LIORESAL 17563 LIOTHYRONINE SODIUM 17595 LIPODERM 17600 LIPOFLAVONOID 17705 LISTERINE 17715 LITHIUM 17725 LITHOBID 17825 LO/OVRAL 17833 LOCAL ANESTHETIC 17838 LODRANE 17840 LOESTRIN 17865 LOMOTIL 17880 LOPERAMIDE 17883 LOPID 17885 LOPRESSOR 17888 LORAZEPAM 17889 LOPURIN 17925 LOTRIMIN 17940 LOXAPINE 17945 LOXITANE 17975 LUBRIDERM 18015 LUMINAL 18020 LURIDE DROPS 18050 LYSINE 18078 M.T.E. 18080 M.V.I. 18125 MAALOX 18130 MACRODANTIN 18189 MAGNESIUM CARBONATE 18190 MAGNESIUM CHLORIDE 18195 MAGNESIUM CITRATE 18205 MAGNESIUM OXIDE 18215 MAGNESIUM SULFATE 18395 MARCAINE 18498 MAXAIR 18520 MAXITROL 18523 MAXZIDE 18540 MEASLES VIRUS VACCINE

18552 MEBENDAZOLE 18555 MECLIZINE 18605 MEDICATED FOOT POWDER 18640 MEDROL 18643 MEDROXYPROGESTERONE 18655 MEGACE 18663 MEGESTROL 18695 MENEST 18760 MEPERIDINE 18920 MESTINON 18930 METAMUCIL 18980 METHACHOLINE 18985 METHADONE 19035 METHENAMINE 19045 METHERGINE 19070 METHOCARBAMOL 19090 METHOTREXATE 19155 METHYLDOPA 19175 METHYLPHENIDATE 19180 METHYLPREDNISOLONE 19185 METHYLTESTOSTERONE 19208 METOCLOPRAMIDE 19210 METOLAZONE 19218 METOPROLOL 19231 METRO 19233 METRONIDAZOLE 19242 MEVACOR 19280 MICATIN 19290 MICONAZOLE 19320 MICRONOR 19350 MIDOL 19360 MIDRIN 19375 MILK OF MAGNESIA 19445 MINERAL OIL 19455 MINIPRESS 19460 MINOCIN 19465 MINOCYCLINE 19478 MINOXIDIL 19618 MODURETIC 19635 MICONAZOLE NITRATE 19640 MONISTAT 7 19650 MORPHINE 19675 MOTRIN 19680 MOUTHWASH 19699 MS CONTIN 19730 MUCOPLEX 19785 MULTI-VITAMIN 19815 MULTIPLE VITAMIN 19825 MULTIPLE VITAMINS 19840 MULTIVITAMIN 19853 MULTIVITAMIN/FLUORIDE 19865 MULTIVITAMIN/MULTIMINERAL 19870 MULTIVITAMINS & MINERALS 19948 MUSCLE RELAXANT

20010 MYCELEX 20055 MYCOLOG 20060 MYCOSTATIN 20080 MYLANTA 20095 MYLICON 20135 MYSOLINE 20185 NAFTIN 20215 NALIDIXIC ACID 20255 NAPHAZOLINE 20260 NAPHCON 20270 NAPHCON-A 20285 NAPROSYN 20290 NAPROXEN 20320 NASAHIST 20325 NASAL DECONGESTANT 20435 NAVANE 20688 NEOM/POLY M GRAMICIDIN OPHTH 20690 NEOMYCIN 20693 NEOMYCIN-POLYMYXIN B 20730 NEOSPORIN 20798 NEPHROCAPS 20815 NESACAINE 20855 NEUTROGENA 20885 NIACIN 20890 NIACINAMIDE 21130 NITRO-BID 21143 NITRO-DUR 21145 NITROFURANTOIN 21160 NITROGLYCERIN 21176 NITROLINGUAL 21185 NITROSTAT 21203 NIZORAL 21228 NORDETTE 21278 NORETHIN 21280 NORFLEX 21300 NORINYL 21390 NORPACE 21403 NORTRIPTYLINE 21405 NOSE DROPS 21513 NTG 21550 NUBAIN 21585 NUPERCAINAL 21695 NYSTATIN 21701 NYSTATIN W/TRIAMCINOLONE 21750 OCEAN MIST 21785 OLIVE OIL 21802 ONE-A-DAY-ESSENTIAL 21925 ORABASE 21958 ORAP 22065 ORPHENADRINE 22090 ORTHO-NOVUM 22110 OS-CAL 22120 OS-CAL 500

22160 OTIC DROPS 22210 OVCON 22215 OVRAL 22242 OXAZEPAM 22287 OXYBUTYNIN CHLORIDE 22303 OXYCODONE HCL 22305 OXYCODONE HCL & ACETAMINOPHEN 22315 OXYGEN 22345 OXYTOCIN 22348 OYSCO 500 22350 OYSTER SHELL & VITAMIN D 22520 PAMELOR 22630 PANCREASE 22643 PANCRELIPASE 22675 PANOXYL 22725 PANTOTHENIC ACID 22810 PARAFON FORTE 22885 PARNATE 23120 PEDIALYTE 23185 PEN-VEE K 23215 PENICILLIN 23221 PENICILLIN G POTASSIUM 23225 PENICILLIN V 23228 PENICILLIN V POTASSIUM 23230 PENICILLIN VK 23370 PEPTO-BISMOL 23385 PERCOCET-5 23430 PERI-COLACE 23440 PERIACTIN 23523 PERPHENAZINE 23535 PERSANTINE 23585 PETROLATUM 23715 PHENAZOPYRIDINE 23755 PHENERGAN 23790 PHENERGAN VC EXPECTORANT W/CODEINE 23792 PHENERGEN W/DEXTROMETHORPHAN 23798 PHENERGAN W/CODEINE 23845 PHENOBARBITAL 23935 PHENOL 23970 PHENTERMINE 24015 PHENYLEPHRINE 24045 PHENYTOIN 24058 PHILLIPS MILK OF MAGNESIA 24080 PHISOHEX 24195 PILOCARPINE 24280 PLACEBO 24300 PLAQUENIL 24355 PNEUMOVAX 24370 PODOPHYLLUM 24405 POLIOMYELITIS VACCINE 24415 POLY-VI-FLOR 24418 POLY-VI-FLOR W/IRON 24420 POLY-VI-SOL 24422 POLY-VITAMIN FLUORIDE

24470 POLYMYXIN 24510 POLYSPORIN 24525 POLYVITAMIN 24530 POLYVITAMIN DROPS 24535 POLYVITAMIN FLUORIDE 24550 PONSTEL 24645 POTASSIUM CARBONATE 24650 POTASSIUM 24653 POTASSIUM CHLORIDE 24685 UROCIT-K 24695 POTASSIUM GLUCONATE 24805 PRAZOSIN 24830 PRE-NATAL VITAMINS 24850 PRED FORTE 24885 PREDNISOLONE 24890 PREDNISONE 24895 PREDOXINE 24950 PREMARIN 24960 PREMARIN VAGINAL 24975 PRENATAL FORMULA (VITAMINS) 24985 PRENATAL W/FOLIC ACID 24988 PRENATAL W/FOLIC ACID & IRON 24989 PRENATAL 1+1 24990 PRENATAMIN 25055 PRIMIDONE 25060 PRIMOLINE 25078 PRINIVIL 25150 PROBENECID 25213 PROCARDIA 25220 PROCHLORPERAZINE 25240 PROCTOCORT 25243 PROCTOCREAM-HC 25250 PROCTOFOAM 25255 PROCTOFOAM-HC 25305 PROGESTERONE 25330 PROLIXIN 25365 PROMETHAZINE 25375 PROMETHAZINE COMPOUND W/CODEINE 25390 PROMETHAZINE EXPECTORANT W/CODEINE 25415 PROMETHAZINE HCL W/CODEINE EXPECTORANT 25430 PROMETHAZINE VC W/CODEINE 25432 PROMETHAZINE W/CODEINE 25433 PROMETHAZINE W/DM 25435 PROMETHAZINE W/PHENYLEPHRINE HCL 25560 PROPYLTHIOURACIL 25638 PROVENTIL 25640 PROVERA 25674 PROZAC 25695 PSEUDOEPHEDRINE 25800 PYRAZINAMIDE 25810 PYRIDIUM 25820 PYRIDOSTIGMINE 25825 PYRIDOXINE HCL

26199 26255 26280 26453 26475 26477 26510 26685 26695 26715	RIFAMPIN RITALIN ROBAXIN
26830	
26835	
26840	
26855 26870	
	ROGAINE
	ROLAIDS
	ROLOX
	RONASE
	RONDEC SYRUP
	ROXICET RUBELLA VIRUS VACCINE LIVE
	RULOX
27170	
	RYNATAN
27335	SALICYLAMIDE
	SALICYLIC ACID
27368	
27374 27405	
27405	
27725	
	SELSUN
27735	SELSUN BLUE
27770	
	SENOKOT
	SENOLAX
27835 27840	SEPTRA SEPTRA DS
27855	
27960	
27985	SILVADENE
27995	
28015	
28030	SIMETHICONE SIMILAC
28035 28080	
28080	
28350	
28366	

	SLOW-MAG
28450	
28455	
28495	
28545	
28575	
	SODIUM FLUORIDE
	SOLU-MEDROL
	SOMA
	SORBITOL
	SPIRONOLACTONE W/HYDROCHLOROTHIAZIDE
	STADOL
	STERAPRED STEROID(S)
29490	STEROID(S) STOOL SOFTENER
	STRESS FORMULA
	SUCRETS
	SUDAFED
	SULFACETAMID
	SULFADIAZINE
	SULFAMETHOXAZOLE
	SULFAMETHOX W/TRIMETHOPRIM
	SULFANILAMIDE
	SULFASALAZINE
	SULFATRIM
29998	SULINDAC
30030	SUNSCREEN
30035	SUMYCIN
30195	SURFAK
	SYNALAR
	SYNTHROID
	T-STAT
	TAGAMET
30515	
	TAMOXIFEN
	TAPAZOLE
	TEARS NATURALE
	TEGRETOL
	TEMAZEPAM TENEX
	TENORETIC
	TENORMIN
	TERAZOL
	TESSALON PERLE
	TESTOSTERONE
	TESTOSTERONE ENANTHATE
	TETANUS ANTITOXIN
	TETANUS DIPHTHERIA TOXOID
	TETANUS IMMUNE GLOBULIN
31015	TETANUS TOXOID
31045	TETRACYCLINE

31050 TETRACYCLINE HCL 31219 THEOPHENYLLINE 31235 THEOPHYLLINE 31318 THERA-GESIC BALM 31335 THERAGRAN-M 31390 THERAPEUTIC MULTIVITAMIN 31400 THERAPEUTIC VITAMIN & MINERAL -31408 THERAVIM 31455 THIAMINE 31542 THIOTHIXENE 31543 THIORIDAZINE 31550 THORAZINE 31630 THYROID 31655 TIGAN 31658 TIMOLOL 31660 TIMOPTIC 31670 TINACTIN 31723 TOBRADEX 31725 TOBRAMYCIN 31728 TOBREX OPHTHALMIC 31740 TOFRANIL 31880 TOTAL B W/C 31895 TPN ELECTROLYTES 31939 TRANSDERM-SCOP 31945 TRANXENE 31997 TRAZODONE 32013 TRENTAL 32135 TRI-VERT 32140 TRI-VI-FLOR 32145 TRI-VI-SOL 32190 TRIAM 32195 TRIAMCINOLONE 32200 TRIAMCINOLONE ACETONIDE 32245 TRIAMINIC 32273 TRIAMTERENE 32310 TRICHLOROACETIC ACID 32363 TRIFLUOPERAZINE 32390 TRIHEXYPHENIDYL 32423 TRIMETHOPRIM W/SULFASOXAZOLE 32430 TRIMOX 32438 TRIMETHOPRIM 32515 TRIPLE ANTIBIOTIC 32543 TRIPLEX 32610 TRIVITAMIN DROPS 32660 TRYPTOPHAN 32695 TUBERSOL 32710 TUCKS 32735 TUMS 32845 TUSSI-ORGANIDIN 32855 TUSSIONEX 32905 TYLENOL 32920 TYLENOL NO. 3 32925 TYLENOL NO. 4 32930 TYLENOL W/CODEINE

32945 TYLOX 32960 TYPHOID VACCINE 33170 UNISOM 33215 UREA 33448 VACCINATION 33530 VALERIAN 33555 VALIUM 33573 VALPROIC ACID 33575 VANCERIL 33585 VANCOCIN HCL 33588 VANCOMYCIN 33670 VASELINE 33677 VASERETIC 33843 VENTOLIN 33858 VERAPAMIL 34090 VIBRAMYCIN 34103 VICKS VAPORUB 34110 VICODIN 34158 VINBLASTINE 34260 VISINE 34270 VISTARIL 34310 VITABEE 34360 VITAMIN A 34365 VITAMIN A + VITAMIN D 34370 VITAMIN A & D 34425 VITAMIN B COMPLEX 34430 VITAMIN B COMPLEX B-12 W/C 34450 VITAMIN B COMPLEX W/VITAMIN C 34455 VITAMIN B-1 34460 VITAMIN B-1 & B-12 34495 VITAMIN B-12 34510 VITAMIN B-6 34520 VITAMIN C 34545 VITAMIN C PLUS E 34560 VITAMIN CHEWABLE CHILDREN'S 34565 VITAMIN D 34570 VITAMIN D-2 IN OIL 34575 VITAMIN E 34623 VITAMIN K 34625 VITAMIN(S) 34628 VITAMINS AND MINERALS 34675 VITRON-C 34725 VOLTAREN 34730 VONTROL 34740 VOSOL OTIC 34745 VOSOL HC 34775 WARFARIN 34780 WART OFF 34855 WESTCORT 34875 WHEAT GERM OIL 35023 XANAX 35050 XEROFOAM DRESSING 35060 XYLOCAINE

35085 XYLOCAINE VISCOUS 35110 YELLOW FEVER VACCINE 35155 ZAROXOLYN 35224 ZESTRIL 35240 ZINC 35250 ZINC OXIDE 35260 ZINC SULFATE 35341 ZOVIRAX 35350 ZYLOPRIM 35425 ANTIDIARRHEAL AGENT 35430 ANTIEMETIC AGENT 35445 ANTIFUNGAL AGENT 35450 ANTIHISTAMINE 35495 ANTIPYRETIC AGENT 35595 TRIMETHOPRIM/SULFAMETHOXAZOLE 40185 BAYER ASPIRIN 40285 CALTRATE 40455 CYCLOPENTOLATE 40460 CYTOTEC 40520 DESYREL 40580 DIABETA 40585 DIHYDROERGOTOXINE MESYLATE 40615 DIPROLENE 40735 ESTROGENS 40830 HYDRALAZINE W/HCTZ 40905 ISOPTIN 40950 LOPROX 41115 MULTI VIT 41310 POLY-VI-SOL W/IRON 41315 POLYETHYLENE GLYCOL 41395 QUINIDINE GLUCONATE 41470 SLOW FE 41505 SPECTAZOLE 41670 TRI-NORINYL 41685 TRI-VI-SOL W/IRON 41780 ZANTAC 41800 HCTZ 41820 GLYCERIN SUPPOSITORIES 41830 PSYLLIUM 41845 PTU 41850 KCL 41855 NPH INSULIN 41860 FOLATE 41865 MOM 41875 CAPTOPRIL 41895 HUMULIN INSULIN 41905 THYROXINE 42425 GOLYTELY 42780 NEOSPORIN OPHTHALMIC 42800 NORMAL SALINE 42985 PROPRANOLOL 42990 PROPRANOLOL W/HCTZ 60035 ACLOVATE 60040 ADALAT

60115 AUGMENTIN 60120 AUGMENTIN 250 60125 AUGMENTIN 500 60150 BACITRACIN OPHTHALMIC 60175 BENZAMYCIN 60180 BENZTROPINE MESYLATE 60195 BETAMETHASONE SOD PHOSPHATE 60200 BETAMETHASONE VALERATE 60260 BUGS BUNNY VIT PLUS MINERALS 60265 BUPRENEX 60270 BUSPAR 60310 CHLORPHENIRAMINE W/PHENYLPROPANOLAMINE 60325 CITRUCEL 60340 CO-GESIC 60355 COLYTE 60370 CORDARONE 60385 CORTISPORIN OPHTHALMIC 60485 DORYX 60545 ESTRADERM 60550 EYE DROPS 60595 FIORICET 60640 GENTAMICIN OPHTHALMIC 60665 GLYCERIN 60695 HIB-IMUNE 60700 HIB-VAX 60735 INFLUENZA VIRUS VACC 60750 IOPHEN 60755 IOPHEN DM 60775 K-DUR 60790 KLONOPIN 60795 LACHYDRIN 60835 LOTRISONE 60870 MARINOL 60940 MSIR 60950 MURINE EAR DROPS 61025 NICORETTE 61035 NIX 61045 NOVOLIN 61130 PAIN RELIEVER 61135 PEDIACARE 61140 PEDIAPRED 61160 PEPCID 61205 POVIDONE-IODINE 61245 PROPRANOLOL HCL 61295 ROCEPHIN 61305 RYMED 61330 SECTRAL 61380 STUART PRENATAL 61385 SULFACETAMIDE SODIUM 61440 TEMOVATE 61480 TOLNAFTATE 61495 TOPICORT 61565 VASOTEC

61605	WELLBUTRIN
61625	TRIAMTERENE W/HCTZ
89004	AMILORIDE HCL W/HCTZ
89009	ANUCORT-HC
89010	BETAMETHASONE DIPROPIONATE
89012	BROMFED-DM
89017	
89018	CLINDAMYCIN HCL
89019	CLONIDINE HCL
89020	CYCLOBENZAPRINE HCL
89025	
89028	
89031	
89038	HUMULIN 70/30 HYDROCODONE BITARTRATE W/APAP
89038	
89039	
89045	LIDOCAINE HCL VISCOUS
89049	METHYLPREDNISOLONE ACETATE
89050	MOTRIN IB
89053	-
89056	
89061	
89062	PRAZOSIN HCL
89066	PRELONE
89067	PROCARDIA XL
89069	
89076	SUPRAX
89080	TIMOLOL MALEATE
89081	
91000	
91003	ANTIPYRINE W/BENZOCAINE BUTALBITAL/APAP/CAFFAINE
91009 91015	
91015	
91027	
	ISOPTIN S.R.
	LOTRIMIN AF
	LUPRON DEPOT
	NIFEDIPINE
91040	ONE TOUCH TEST STRIPS
91043	PRILOSEC
91061	
91062	ALPRAZOLAM
91063	
	BUSPIRONE HCL
	CEFTAZIDIME
	CEFUROXIME SODIUM DILTIAZEM HCL
	ENALAPRIL
	FLECAINIDE ACETATE
	FLUOXETINE
5.575	

91081 GLIPIZIDE 91084 IPRATROPIUM BROMIDE 91085 KETOCONAZOLE 91088 LOVASTATIN 91089 METHIMAZOLE 91091 MISOPROSTOL 91096 OMEPRAZOLE 91099 RANITIDINE 91102 TRETINOIN 92000 ACCUPRIL 92003 ALTACE 92005 BENYLIN 92006 BIAXIN 92011 CALCIUM ANTACID 92012 CARDURA 92015 CILOXAN 92016 CLOZARIL 92017 CUTIVATE 92018 DESOXIMETASONE 92024 DURAGESIC 92025 DYNACIRC 92031 FLOXIN 92033 FLUPHENAZINE DECANOATE 92038 GENTAMICIN SULFATE 92042 HYDROMET 92043 HYOSCYAMINE SULFATE 92051 LODINE 92052 LOTENSIN 92055 MIACALCIN 92057 MONOPRIL 92061 NASACORT 92063 NEOMYCIN/POLYMYXIN/DEXAMETH 92070 ORAMORPH SR 92076 PRAVACHOL 92078 PROCRIT 92083 RINGERS 92085 ROBITUSSIN PEDIATRIC 92093 TOLMETIN SODIUM 92100 ULTRAVATE 92105 ZOFRAN 92107 BENAZEPRIL 92109 CEFACLOR 92110 CEFIXIME 92111 CIPROFLOXACIN 92112 CLARITHROMYCIN 92114 CLOMIPHENE 92115 CLOZAPINE 92116 DICLOFENAC 92120 DOXAZOSIN MESYLATE 92124 ETODOLAC 92125 FELODIPINE 92126 FLUTICASONE 92128 FOSINOPRIL

92130 HALOBETASOL 92131 HEPATITIS B VACCINE 92132 ISRADIPINE 92134 LEVONORGESTREL 92135 MESALAMINE 92137 METROGEL 92138 NADOLOL 92139 NORGESTREL 92140 OFLOXACIN 92141 ONDANSETRON 92143 PENTOXIFYLLINE 92145 PIROXICAM 92146 PRAVASTAN 92149 QUINAPRIL 92150 RAMIPRIL 92152 TERCONAZOLE 92156 DIFLUCAN 92157 ELIMITE 92159 MINITRAN 92160 PRINZIDE 92161 TORADOL 92163 ZESTORETIC 92164 LISINOPRIL 92178 HUMIBID 92180 LORTAB 92187 PRENATE 93010 ALIMENTUM 93014 ALLERGY MEDICATION 93016 ANALPRAM HC 93022 ARTIFICIAL TEAR SOLUTION 93023 ASACOL 93024 ASPERCREME 93029 BETA CAROTENE 93030 BLEPH-10 93037 CARNITINE 93038 CEFZIL 93041 CITRACAL 93042 CONDYLOX 93046 DERMA-SMOOTHE 93048 DILACOR-XR 93049 **DIPHEN** 93053 E-LOR 93059 EPOGEN 93062 FISH OIL 93064 FLEXALL 93065 GAS-X 93067 GENTAK 93069 GLYNASE 93080 ISMO 93082 ISOMIL 93089 LORCET 93090 MACROBID 93093 MAXAQUIN 93101 NASAL SPRAY

<ul> <li>93107 NICOTROL</li> <li>93113 OCUVITE</li> <li>93116 ORAGEL</li> <li>93117 ORTH-CYCLEN</li> <li>93120 PEDIASURE</li> <li>93121 PERIDEX</li> <li>93124 PINDOLOL</li> <li>93127 PROSCAR</li> <li>93131 REFRESH</li> <li>93132 RELAFEN</li> <li>93133 REPLENS</li> </ul>	
93136 RHOGAM	
93150 SULFONYLUREAS 93151 SUPPOSITORY	
93151 SOFFOSITORT 93152 TAC	
93154 THEREMS	
93156 TOPROL XL	
93164 VAGISIL	
93166 VANTIN	
93167 VARICELLA-ZOSTER IMMUNE GLOBULIN 93173 WART TREATMENT	
93173 WARTTREATMENT 93176 ZANTRYL	
93179 ZITHROMAX	
93181 ZOCOR	
93183 ZOLOFT	
93186 ANTIHYPERTENSIVE AGENT	
93187 NORVASC	
93188 NALTREXONE	
93193 SERTRALINE	
93195 HISTAMINE H-2 BLOCKER/ANTAGONIST	
93197 RYTHMOL	
93202 CYCLOSPORINE 93203 LABETALOL	
93210 FIBER SUPPLEMENT	
93211 AMIODARONE	
93212 PAXIL	
93213 GEMFIBROZIL	
93214 AZITHROMYCIN	
93215 FLUCONAZOLE	
93217 DAIRY EASE	
93218 ORTHO-CEPT	
93220 KETOROLAC 93224 CLARITIN	
93224 GLARITIN 93227 GUAIMAX-D	
93230 DYNACIN	
93231 IMITREX	
93237 SIMVASTATIN	
93239 FLURBIPROFEN	
93243 LAMISIL	

93248 SUMATRIPTAN 93256 PNEUMOCOCCAL VACCINE 93257 LORATADINE 93304 NEPHRO-VITE 93305 GLYBURIDE 93307 ENGERIX-B 93308 DAKIN'S SOLUTION 93309 BENZODIAZEPINES 93311 PEDVAX HIB 93312 KETOPROFEN 93315 PROPAFENONE 93316 MEFLOQUINE 93325 EMLA 93326 INJECTION 93327 ITRACONAZOLE 93334 CLEMASTINE 93341 FELBATOL 93347 AMBIEN 93348 PHOSLO 93352 FAMOTIDINE 93355 BUPROPION 93363 DESOGEN 93371 MIDODRINE 93372 BETASERON 93383 IMMUNIZATION 93394 AEROSOL THERAPY 93395 INHALER 93396 AMLODIPINE 93399 OXAPROZIN 93400 NEBULIZER 93404 SUCRALFATE 93415 REZINE 93417 CEFPROZIL 93418 FILGRASTIM 93419 TRIAZOLAM 93420 NEVIRAPINE 93421 SELENIUM SULFIDE SHAMPOO 93422 FLUNISOLIDE 93424 FLUDROCORTISONE ACETATE 93427 INSECT/BUG REPELLANT 93438 GREEN GRASSHOPPER 93440 CONDOMS 93442 HAEMOPHILUS B CONJUGATE VACCINE 93446 BETAXOLOL 93447 EMOLLIENT / LOTION / CREAM /MOISTURIZER 93450 APRODINE 93451 CLOMIPRAMINE 93453 RH IMMUNE GLOBUIN 93455 PERTUSSIS IMMUNE GLOBULIN 94001 SOTALOL 94002 BENZONATE 94004 PAROXETINE 94010 PENTASA 94011 CATAFLAM

94014 VENLAFAXINE 94016 ZIAC 94020 ALOMIDE 94022 BREWERS YEAST 94031 IMDUR 94034 ORTHO-TRICYCLEN 94035 ZOLPIDEM TARTRATE 94040 OXY-5 94041 PINK COCKTAIL 94043 TYLENOL ALLERGY SINUS 94048 METROGEL VAGINAL 94049 OYSTER SHELL CALCIUM 94052 TRIAMETERNE 94054 ACE INHIBITOR 94059 DOVONEX 94070 EFFEXOR 94071 INDAPAMIDE 94072 NSAID 94073 OCUFLOX 94074 PULMOZYME 94075 SEREVENT 94079 CORTICOSTEROID(S) 94080 DESMOPRESSIN 94081 DIVALPROEX SODIUM 94089 ICAPS 94091 VAGINAL LUBRICANT 94094 GLIBENCLAMIDE 94097 MEPRON 94099 NEURONTIN 94100 NIZATIDINE 94101 OXISTAT 94103 QUININE 94104 RISPERIDONE 94110 LOZENGES 94113 DIFLUNISAL 94114 GABAPENTIN 94116 HUMULIN R 94117 LOVENOX 94119 NORETHINDRONE ACETATE 94123 BECONASE AQ 94124 CHOLESTYRAMINE 94125 ALEVE 94126 DEMADEX 94127 DAYPRO 94128 DAYQUIL 94129 DOXY 94131 GARLIC PILL 94133 TERAZOSIN 94134 DESONIDE 94136 LAMIVUDINE 94137 SULFA 94139 CEFPODOXIME 94141 BACTIGEN

94143 DEPO INJECTION 94145 OINTMENT 94146 PENICILLIN G BENZATHINE 94149 ESGIC PLUS 94158 RISPERDAL 94163 ALOE VERA 94167 ED A-HIST 94174 RHINOCORT 94175 ANTIBACTERIAL AGENT 94176 ASTROGLIDE 94179 NABUMETONE 94182 FLU-SHIELD 94188 FENTANYL 94190 MG 94191 MONISTAT 95003 ECONAZOLE 95005 FLONASE 95016 ADDERALL 95017 FAMVIR 95022 FEVERALL 95023 CHILDRENS MOTRIN 95024 FLUVOXAMINE 95025 LUVOX 95029 DOK 95033 MAC 95036 BUPRENORPHINE 95039 GUAIFENEX PSE 95044 ROBITUSSIN W/ CODEINE 95045 TYLENOL PM 95046 AMYLASE 95047 ATOVAQUONE 95050 ULTRAM 95054 ACTHIB 95057 DTAP 95062 STROVITE 95064 ZIDOVUDINE 95072 BENZTROPINE 95074 DIMETAPP DM 95082 PAMIDRONATE 95084 STAVUDINE 95086 LIQUID NITROGEN 95087 PROPHYLAXIS 95088 ESTROPIPATE 95089 METAXALONE 95092 PRAVASTATIN 95097 CARDIOLITE 95100 PROTEIN SUPPLEMENT 95111 GLUCOPHAGE 95114 TRUSOPT 95116 CAPSAICIN 95118 HEPATITIS A VACCINE 95119 MULTIVITAMIN W/ IRON 95122 PREVACID 95130 ULTRASE

95133 METFORMIN 95137 ALFALFA 95141 NEFAZODONE 95142 PREMPRO 95144 LOTREL 95145 MENINGOCOCCAL VACCINE 95148 HEPATITIS C VACCINE 95152 COZAAR 95154 QUERCETIN 95155 FLAX SEED OIL 95156 MYCOCIDE 95157 COLESTIPOL 95160 CLIMARA 95164 DORZOLAMIDE 95171 HYZAAR 95173 LEVBID 95174 PROGRAF 95177 FINASTERIDE 95178 FIORICET/ CODEINE 95181 LAMICTAL 95182 VARIVAX 95183 FOSAMAX 95188 PREMPHASE 95189 UNIVASC 95191 EPIVIR 95192 CASODEX 96003 PERMETHRIN 96005 ALENDRONATE SODIUM 96006 AZELEX 96007 CETIRIZINE 96008 HUMULIN N 96009 BENZOCAINE 96010 VAPORIZER 96020 LEVOXYL 96021 TSH 96022 ZYRTEC 96024 CLOBETASOL 96027 DOCUSATE SODIUM 96028 ACETAMINOPHEN-HYDROCODONE 96033 LEVOBUNOLOL 96034 RIFAPENTINE 96038 MUPIROCIN 96041 TRAMADOL 96043 VALTREX 96044 NASAREL 96045 DEMEROL 96046 GOUT MEDICATION 96049 HEPATITIS VACCINE 96055 LEVOTHYROID 96058 PRECOSE 96059 PRENAVITE 96066 NORVIR 96067 ANTIOXIDANTS

96068 96070 96072 96077 96083 96084 96086 96091	TIAZAC HYDROCOLLOID DRESSINGS NAPRELAN OPCON-A SULAR FLOVENT
96093 96094	
	EC-NAPROSYN
96105	TEGADERM
96107	BUMETANIDE
96109	
96111	AYR NASAL GEL
96115	SALMETEROL
96119 96121	CAVERJECT DIMETAPP COLD/ALLERGY
96121	REMERON
96123	_
96124	HAVRIX
96125	
96128	-
96130	
96131 96135	
96135	
96138	AMARYL
96141	VIVELLE
96144	ACCOLATE
96147	CELLCEPT
96156	VITAFOL
96157	AEROCHAMBER ALCLOMETASONE DIPROPRIONATE
96158 96165	ELMIRON
96167	-
96168	
96169	ACIDOPHILUS
96171	MENTAX
96173	
96174	ALLEGRA
96176	DIFFERIN OLANZAPINE
97002 97016	ARICEPT
97017	HUMALOG
97018	MOEXIPRIL
97019	SAW PALMETTO
97020	LIPITOR
97024	
97027	
97028 97029	ALPHAGAN ATUSS DM
97029 97030	
97035	ASTELIN

97036 DIOVAN 97037 PATANOL 97043 BROMFED PD 97045 LEVAQUIN 97047 MAGNESIUM 97049 TOPAMAX 97051 VIRACEPT 97052 VIRAMUNE 97056 MIRTAZAPINE 97060 FAMCICLOVIR 97073 LOSARTAN 97078 ANDRODERM PATCHES 97085 TORSEMIDE 97086 ALESSE 97089 GUANFACINE 97092 TRANDOLAPRIL 97098 PRAMIPEXOLE 97101 NIFEREX FORTE 97105 COMBIVENT 97108 HELIDAC 97109 REVIA 97111 TARKA 97113 ZANAFLEX 97114 TAURINE 97126 FLOMAX 97129 ST JOHNS WORT 97130 TACROLIMUS 97135 VALACYCLOVIR 97136 LAMOTRIGINE 97138 TUSSIN DM 97141 COMBIVIR 97142 COREG 97145 AVAPRO 97146 ESTRING 97150 REQUIP 97151 CHONDROITIN SULFATE 97152 MIRAPEX 97154 VINEGAR 97157 ATORVASTATIN 97159 CALCITRIOL 97163 LEVOFLOXACIN 97168 SEROQUEL 97170 CENTRUM SILVER 97174 BABY ASPIRIN 97179 DENAVIR 98001 MAG-OX 98006 ARTHROTEC 98008 CARVEDILOL 98010 NASONEX 98011 CONSTULOSE 98013 BEE POLLEN 98017 PROPECIA 98018 VANICREAM

98022 ZOMIG 98030 ECHINACEA 98033 ALDARA 98036 NORCO 98038 SINGULAIR 98041 VIAGRA 98043 VICOPROFEN 98046 MICROZIDE 98047 NORITATE 98049 DONEPEZIL HCL 98051 OS-CAL +D 98053 PREVPAC 98054 TAZORAC 98065 DETROL 98071 THERAFLU 98073 DOMPERIDONE 98075 CALCIUM CITRATE 98076 TUBERCULOSIS VACCINE 98083 AZOPT 98085 NIASPAN 98086 PLAVIX 98089 TERBINAFINE 98090 ARIMIDEX 98092 DOXIL 98093 MONTELUKAST 98095 SUSTIVA 98097 AMERGE 98098 COSOPT 98101 PRANDIN 98109 CHLORHEXIDINE GLUCONATE 98114 CARBATROL 98115 CELEXA 98116 GABITRIL 98117 FENOFIBRATE 98123 ANTIRETROVIRAL AGENT 98126 FLUVIRIN 98131 TOPIRAMATE 98136 PROMETRIUM 98139 TIZANIDINE 98141 VALSARTAN 98143 COPAXONE 98144 KADIAN 98146 EFAVIRENZ 98150 DEHYDROEPIANDROSTERONE 98156 MAXALT 98158 TRICOR 98160 ARAVA 98167 GRAPESEED EXTRACT 99001 CEFEPIME 99002 CELEBREX 99005 REMICADE 99006 RENAGEL 99007 ROPIVACAINE HCL 99008 ALLEGRA D

99011 NALEX 99013 NASACORT AQ 99014 OMNICEF 99015 ORTHO-NOVUM 7/7/7 99016 PRIMROSE OIL 99017 RIBAVIRIN 99018 ROTAVIRUS VACCINE 99019 SYNVISC 99023 CORTISPORIN OTIC 99026 GLUCOSAMINE 99028 TYLENOL ARTHRITIS 99030 AVANDIA 99031 ATACAND 99033 CLOPIDOGREL 99036 GLUCOSAMINE CHONDROITIN 99039 LOTENSIN HCT 99042 PACERONE 99043 PROAMATINE 99049 XENICAL 99051 AVALIDE 99052 ACTIVATED CHARCOAL 99056 GLIMEPIRIDE 99057 HEMOCYTE PLUS 99059 MICARDIS 99066 SINEMET CR 99073 CIPRO HC 99074 CITALOPRAM 99075 ENBREL 99076 GLUCOSAMINE SULFATE 99080 MIRALAX 99081 MULTIVITAMINS W/ FOLIC ACID 99088 ZIAGEN 99089 ACIPHEX 99090 ACTOS 99098 NITROQUICK 99099 PLETAL 99101 QUETIAPINE FUMARATE 99106 XOPENEX 99107 ZADITOR 99114 ENDOCET 99118 NECON 99123 MORPHINE SULFATE 99128 LIPASE 99129 Q-PAP 99132 EVISTA 99133 ALBUTEROL 99138 KELP 99139 MAGIC MOUTHWASH 99141 PIN-X 99142 PRENATAL VITAMINS W/ IRON 99145 UROGESIC BLUE 99148 ARMIDEX 99152 EVENING PRIMROSE OIL

99156 LIPID LOWERING AGENT 99161 ROPINIROLE HCL 99163 ANAPLEX DM 99167 COQ-10 99170 DR. SMITH'S OINTMENT 99171 NETTLE 99172 NOVOLIN 70/30 99174 PHOSPHORUS 99182 RICOLA 99184 TRIVORA 99185 UNIRECTIC 99189 CALCIUM W/ VITAMIN D 99194 ABACAVIR SULFATE 99198 EMADINE 99201 ORTHO-CYCLEN 99202 PRENATAL VITAMINS W/ CALCIUM 99207 BRIMONIDINE 99210 CARTIA 99211 CITRACAL + D 99213 DIASTAT 99214 DIOVAN HCT 99216 FEXOFENADINE 99218 FORMULA SUPPLEMENT 99219 GINKGO BILOBA 99223 LEVORA 99224 OMEGA-3 99225 RALOXIFENE 99227 UNIRETIC 99999 ILLEGIBLE

## C. MULTUM LEXICON END-USER LICENSE AGREEMENT

The Multum Lexicon End-User License Agreement for the 2012 NAMCS Community Health Center Public Use Micro-Data File is the same as that used for the 2012 National Ambulatory Medical Care Survey Public Use Micro-Data File and is available <u>here</u>.

## D. MULTUM CLASSIFICATION OF THERAPEUTIC CLASSES (DRUG CATEGORIES)

The Multum Classification of Therapeutic Classes for the 2012 NAMCS Community Health Center Public Use Micro-Data File is the same as that used for the 2012 National Ambulatory Medical Care Survey Public Use Micro-Data File and is available <u>here</u>.