

Table 7C.6: Hospital Discharges, Length of Stay (LOS), and Charges for Children and Adolescents Age 20 and Under with Diagnoses<sup>1</sup> of a Syndrome with Musculoskeletal (MSK) Implications, by Sex and Age, United States 2013

Hospital Discharges	Number of Hospital Discharges (in 1,000s)									Total	
	Sex		Age in Years								
	Male	Female	Neonatal	<1	1 to 4	5 to 9	10 to 13	14 to 17	18 to 20		
Any Syndrome with MSK Implications Diagnoses [1]	14.2	12.5	6.1	4.8	6.4	3.1	2.2	2.5	1.8	27.0	
Primary Diagnosis [2]	0.2	0.3	*	*	*	*	*	*	*	0.6	
Discharges/Visits for Any MSK Diagnoses	274.2	229.6	168.8	22.2	50.5	53.9	55.1	81.5	72.0	503.9	
Proportion Any Syndrome with MSK Implications to Any MSK Diagnoses	5.2%	5.4%	3.6%	21.6%	12.7%	5.8%	4.0%	3.1%	2.5%	5.4%	
Proportion Primary Syndrome with MSK Implications to Any MSK Diagnoses	0.1%	0.1%	*	*	*	*	*	*	*	0.1%	
Discharges/Visits for All Diagnosis	3,040.9	3,262.9	3,935.2	292.4	416.1	289.8	241.9	445.2	686.0	6,303.8	
Proportion Any Syndrome with MSK Implications to All Diagnoses	0.5%	0.4%	0.2%	1.6%	1.5%	1.1%	0.9%	0.6%	0.3%	0.4%	
Proportion Primary Syndrome with MSK Implications to All Diagnoses	0.0%	0.0%	*	*	*	*	*	*	*	0.0%	
Hospital Charges	Mean LOS and Charges										
Any Syndrome with MSK Implications Diagnoses [1]											
Mean Length of Stay	7.7	8.1	13.9	8.6	5.5	4.5	5.7	6.2	5.4	7.9	
Mean Charges [3] (in 1,000 \$s)	\$ 76.8	\$ 80.5	\$ 108.4	\$ 111.5	\$ 51.1	\$ 53.5	\$ 64.2	\$ 71.8	\$ 58.4	\$ 78.5	
Total Charges (in million \$s)	\$ 1,090.6	\$ 1,006.3	\$ 661.2	\$ 535.2	\$ 327.0	\$ 165.9	\$ 141.2	\$ 179.5	\$ 105.1	\$ 2,119.5	
Primary Diagnosis [2]											
Mean Length of Stay	*	*	*	*	*	*	*	*	*	*	
Mean Charges [3] (in 1,000 \$s)	*	*	*	*	*	*	*	*	*	*	
Total Charges (in million \$s)	*	*	*	*	*	*	*	*	*	*	

\* Data does not meet standards for reliability

[1] Includes Marfan syndrome, Ehlers danlos, connective disorders, Down's syndrome, and neurofibromatosis.

[2] Primary diagnosis defined as the first Dx.

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

Source: HCUP National Inpatient Sample (NIS). Healthcare Cost and Utilization Project (HCUP). 2013. Agency for Healthcare Research and Quality, Rockville, MD. <https://www.hcup-us.ahrq.gov/nisoverview.jsp>