

National Ambulatory Medical Care Survey—Community Health Centers: 2020 National Summary Tables

The Ambulatory and Hospital Care Statistics Branch is pleased to release nationally representative estimates of ambulatory care visits made to both physicians and nonphysician clinicians (physician assistants [PAs], nurse practitioners [NPs], and nurse midwives) at community health centers (CHCs) in the United States. These web tables provide national estimates of visits to CHC providers and their characteristics.

The sampling frame for the 2020 National Ambulatory Medical Care Survey (NAMCS) CHC was compiled from a list of Federally Qualified Health Center (FQHC) service delivery sites from the Health Resources and Services Administration's (HRSA) Bureau of Primary Health Care and a list of sites from the Indian Health Service. Three types of CHCs were eligible for the NAMCS CHC: FQHCs that received Public Health Service Act, Section 330, funding; FQHC "look-alikes" (community-based health care providers that met the requirements of the HRSA Health Center Program but did not receive Health Center Program funding); and urban Indian Health Service outpatient clinics.

The 2020 NAMCS CHC utilized a two-stage sample of physicians and advanced practice providers in health center delivery sites. A stratified probability sample of delivery sites was selected at the first stage, with strata defined by 1) census region and 2) type of health center, with one group defined as FQHCs and FQHC "look-alikes" and the other as Indian Health Service outpatient clinics. At the second stage, systematic random samples of providers were selected from lists of each sampled site's providers.

The 2020 NAMCS CHC sample included 104 CHC service delivery sites. A total of 10 sampled CHC service delivery sites were ruled out of scope (ineligible) for the study. Of the 94 in-scope and eligible CHC service delivery sites, 67 participated in the study, for an unweighted response rate of 71.3% (69.0% weighted). From these sites, data were collected for 1,667 visits. Overall, a sample of 134 CHC providers who were scheduled to see patients during the sample week were selected from participating CHCs. Among the 134 eligible providers, 97 participated, but only 93 were considered "respondents." Respondents are those who submitted at least one-half of the Patient Record Forms (PRFs) expected based on the number of visits during their reporting week, including those expecting no visits at the sampled CHC site that week. The remaining providers were minimal participants who provided less than one-half of the expected PRFs. The unweighted PRF response rate among all participants was 51.6% (55.2% weighted). The unweighted PRF visit response rate among responders was 49.5% (53.6% weighted).

The U.S. Census Bureau collected the data electronically using a computerized instrument developed by the National Center for Health Statistics (NCHS). Data were abstracted from medical records, with a target of about 30 sampled visits per provider during a randomly assigned 1-week reporting period.

Specifications for checking, configuring, and transmitting the data files were developed by NCHS and applied by the U.S. Census Bureau. Data files were transmitted either to NCHS for further processing, or to RTI International, Research Triangle Park, North Carolina. At NCHS, the data underwent multiple consistency checks and review of verbatim entries. RTI edited and coded verbatim entries, which required medical coding (patient's reason for visit, physician's diagnosis, cause of injury, services, and procedures) and further assessed the values assigned to a variable that indicated whether the diagnosis was probable, questionable, or ruled out. Medication editing and coding were performed entirely at NCHS by the NAMCS Drug Database Coordinator. All RTI International medical coding and keying operations were subject to quality control procedures. The contractor selected a 13.3% sample of records, which were independently recoded and compared. Differences were adjudicated by RTI, with error rates reported to NCHS. Coding error rates ranged from 0.1% to 4.6%.

Web table estimates include physician and nonphysician clinician visits to CHCs. Visit estimates are based on sample data weighted to produce annual national estimates and include standard errors. Because of the complex, multi-stage design of NAMCS CHC, the data are weighted using sample weights that take all stages of the design into account. The survey data are inflated or weighted to produce unbiased national annual estimates. The visit weight includes four basic components: inflation by reciprocals of selection probabilities, adjustment for nonresponse, population ratio adjustments, and weight smoothing. Estimates of the sampling variability are calculated using Taylor approximations in SUDAAN, which take into account the complex sample design of NAMCS CHC.

As with any survey, results are subject to sampling and nonsampling errors. Nonsampling errors include reporting and processing errors as well as biases due to nonresponse and incomplete response. Information on missing data is provided in table footnotes. Proportion estimates that do not meet NCHS standards of reliability are not presented or are flagged based on procedures specified in “[National Center for Health Statistics Data Presentation Standards for Proportions](#).” For all estimates other than estimates of proportions, the following approach is used. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data and only an asterisk (*) appears in those table cells. Visit estimates based on 30 or more cases include an asterisk if the relative standard error of the estimate exceeds 30%

The 2020 NAMCS CHC data file is available for use in the NCHS Research Data Center (RDC). Please visit the [RDC website](#), or contact the Ambulatory and Hospital Care Statistics Branch at ambcare@cdc.gov or 301-458-4600 for more information.

Suggested citation: Santo L, Okeyode T, Schappert SM. National Ambulatory Medical Care Survey—Community health centers: 2020 national summary tables. Hyattsville, MD: National Center for Health Statistics. 2022. DOI: <https://dx.doi.org/10.15620/cdc:117687>.

Table 1. Visits to community health centers, by patient age and sex: United States, 2020

Patient age (years) and sex	Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)	Number of visits per 100 people per year ¹ (standard error of rate)
All visits	40,096 (7,723)	100.0 ...	12.4 (2.4)
Age			
Under 26	10,894 (2,508)	27.2 (3.1)	10.3 (2.4)
26–44	11,533 (2,464)	28.8 (5.5)	14.1 (3.0)
45 and over	17,669 (4,707)	44.1 (5.8)	13.0 (3.5)
Sex and age			
Female	27,057 (5,571)	67.5 (3.3)	16.3 (3.4)
Under 26	7,106 (1,676)	17.7 (2.3)	13.6 (3.2)
26–44	8,320 (1,911)	20.8 (4.1)	20.1 (4.6)
45 and over	11,631 (3,355)	29.0 (4.5)	16.1 (4.6)
Male	13,039 (2,662)	32.5 (3.3)	8.2 (1.7)
Under 26	3,788 (1,036)	9.4 (1.8)	7.0 (1.9)
26–44	3,213 (893)	8.0 (2.3)	7.9 (2.2)
45 and over	6,038 (1,481)	15.1 (1.9)	9.4 (2.3)

... Category not applicable.

¹Visit rates are based on the July 1, 2020, set of estimates of the civilian noninstitutionalized population of the United States as developed by the Population Division, U.S. Census Bureau.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 2. Visits to community health centers, by patient race and ethnicity: United States, 2020

Patient characteristic	Number of visits in thousands (standard error in thousands)	Number of visits per 100 people per year ¹ (standard error of rate)
All visits	40,096 (7,723)	12.4 (2.4)
Race ²		
White	30,742 (7,004)	12.5 (2.8)
Black or African American	3,976 (1,053)	9.2 (2.4)
Other ³	*5,378 (3,678)	*15.6 (10.7)
Ethnicity ²		
Hispanic or Latino	14,732 (3,834)	24.3 (6.3)
Not Hispanic or Latino	25,364 (6,118)	9.6 (2.3)

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Visit rates are based on the July 1, 2020, set of estimates of the civilian noninstitutionalized population of the United States as developed by the Population Division, U.S. Census Bureau.

²Race groups White, Black or African American, and other include people of Hispanic and non-Hispanic origin. People of Hispanic origin may be of any race. Starting with 2009 data, the National Center for Health Statistics adopted the technique of model-based single imputation for National Ambulatory Medical Care Survey race and ethnicity data. The race imputation is restricted to three categories (White, Black or African American, and other) based on research by an internal work group and on quality concerns with imputed estimates for race categories other than White and Black. Additional information is available from: https://www.cdc.gov/nchs/ahcd/rdc_data.htm. For 2020, race data were missing for 8.2% of visits, and ethnicity data were missing for 20.0% of visits.

³Includes Asian, Native Hawaiian or Other Pacific Islander, or American Indian or Alaska Native people, and people with more than one race.

NOTE: Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 3. Expected sources of payment at visits to community health centers: United States, 2020

Expected sources of payment	Number of visits in thousands ¹ (standard error in thousands)	Percent of visits (standard error of percent)
All visits	40,096 (7,723)	100 ...
Private insurance	10,113 (2,565)	25.2 (3.8)
Medicare	*6,737 (2,452)	16.8 (4.0)
Medicaid or CHIP ²	20,190 (3,985)	50.4 (6.4)
Medicare and Medicaid ³	1,117 (330)	2.8 (1.0)
No insurance ⁴	2,355 (607)	5.9 (1.7)
Other ⁵	*3,093 (982)	7.7 (2.2)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Combined total of expected sources of payment exceeds "All visits," and "Percent of visits" exceeds 100% because more than one source of payment may be reported per visit.

²CHIP is Children's Health Insurance Program.

³Visits in this category are also included in both the Medicare and Medicaid or CHIP categories.

⁴Defined as having only self-pay, no charge, or charity as payment sources. The individual self-pay and no charge or charity categories are not mutually exclusive.

⁵Includes workers' compensation, other, and unknown or blank.

NOTES: Numbers may not add to totals because more than one category could be indicated. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 4. Principal reason for visit to community health centers: United States, 2020

Principal reason for visit and RVC code ¹	Number of visits in thousands ¹ (standard error in thousands)	Percent distribution (standard error of percent)
All visits	40,096 (7,723)	100.0 ...
Symptom-related S001–S999	11,727 (3,122)	29.2 (4.2)
Disease-related D001–D999	*6,936 (2,755)	17.3 (5.1)
Diagnostic, screening, and preventive X100–X599	12,239 (2,731)	30.5 (3.5)
Treatment T100–T899	6,680 (1,286)	16.7 (3.7)
Other ²	2,513 (661)	6.3 (1.5)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Based on, "A Reason for Visit Classification for Ambulatory Care (RVC)". Additional information is available from: https://www.cdc.gov/nchs/ahcd/rdc_data.htm.

²Includes injuries and adverse effects module J001–J999; test results module R100–R700; administrative module A100–A140; and problems and complaints not elsewhere classified, entries of "none," and illegible entries U990–U999.

NOTES: Numbers may not add to totals because of rounding. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 5. Primary diagnosis at visits to community health centers, classified by major disease category: United States, 2020

Major disease category and ICD-10-CM code range ¹	Number of visits in thousands (standard error in thousands)	Percent distribution (standard error of percent)
All visits	40,096 (7,723)	100.0 ...
Certain infectious and parasitic diseases (A00-B99)	*	1.6 (0.6)
Neoplasms. (C00-D49)	*	0.6 (0.4)
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)	*	0.4 (0.3)
Certain endocrine, nutritional and metabolic diseases (E00-E89)	3,430 (832)	8.6 (1.5)
Mental, behavioral and neurodevelopmental disorders. (F01-F99)	*4,408 (2,282)	*
Diseases of the nervous system (G00-G99)	*	1.7 (0.7)
Diseases of the eye and adnexa (H00-H59)	*	0.5 (0.2)
Diseases of the ear and mastoid process (H60-H95)	*	1.3 (0.4)
Diseases of the circulatory system (I00-I99)	3,300 (953)	8.2 (1.6)
Diseases of the respiratory system (J00-J99)	*2,869 (1,103)	*
Diseases of the digestive system (K00-K95)	1,063 (278)	2.7 (0.5)
Diseases of the skin and subcutaneous tissue (L00-L99)	679 (162)	1.7 (0.4)
Diseases of the musculoskeletal and connective tissue (M00-M99)	2,056 (547)	5.1 (0.9)
Diseases of the genitourinary system (N00-N99)	1,780 (445)	4.4 (0.9)
Pregnancy, childbirth and the puerperium. (O00-O9A)	*1,785 (700)	*
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)	3,148 (621)	7.9 (0.8)
Injury, poisoning and certain other consequences of external causes (S00-T88)	650 (185)	1.6 (0.5)
Persons encountering health services for examinations (Z00-Z13)	7,336 (2,007)	18.3 (2.7)
Factors influencing health status and contact with health services excluding examinations (Z14-Z99)	4,524 (1,188)	11.3 (3.2)

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Based on the *International Classification of Diseases, Tenth Revision, Clinical Modification* (ICD-10-CM).

NOTES: Other diagnosis (which includes certain conditions originating in perinatal period [P00-P96]; congenital malformations, deformations and chromosomal abnormalities [Q00-Q99]; and external causes of morbidity [V00-Y99]) represents 1.2% (standard error of 0.5) of the visits and is not shown in the table. Blanks represent 0.3% (standard error of 0.1) of the visits and are not shown in the table. Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions"; only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 6. Provider-assessed major reason for visit to community health centers, by selected patient and visit characteristics: United States, 2020

Patient and visit characteristic	Total number of visits in thousands (standard error in thousands)	Total percent	New problem	Preventive care ¹	Other ²
All visits	40,096 (7,723)	100.0	32.7 (4.1)	33.2 (4.7)	34.1 (5.0)
Age (years)					
Under 26	10,894 (2,508)	100.0	35.9 (6.0)	50.9 (5.3)	13.2 (3.3)
26–44	11,533 (2,464)	100.0	*	30.7 (6.7)	*
45 and over	17,669 (4,707)	100.0	29.1 (2.7)	24.0 (6.1)	46.9 (5.4)
Sex					
Female	27,057 (5,571)	100.0	30.9 (3.5)	38.0 (5.0)	31.1 (4.3)
Male	13,039 (2,662)	100.0	36.2 (6.5)	23.4 (4.0)	*
Race³					
White	30,742 (7,004)	100.0	35.9 (4.5)	34.5 (4.8)	29.6 (2.8)
Black or African American	3,976 (1,053)	100.0	24.6 (4.0)	*	*
Other	*5,378 (3,678)	100.0	20.1 (5.7)	22.1 (4.5)	*
Ethnicity³					
Hispanic or Latino	14,732 (3,834)	100.0	44.4 (4.7)	27.6 (5.0)	27.9 (4.1)
Not Hispanic or Latino	25,364 (6,118)	100.0	25.8 (4.2)	36.5 (5.8)	37.7 (5.8)
Expected source of payment					
Private insurance	10,113 (2,565)	100.0	30.8 (6.3)	*	33.2 (5.5)
Medicare	*6,737 (2,452)	100.0	24.5 (3.4)	25.6 (6.4)	49.9 (5.7)
Medicare and Medicaid ⁴	1,117 (330)	100.0	31.5 (6.4)	28.5 (5.9)	*
Medicaid or CHIP ⁵	20,190 (3,985)	100.0	35.1 (5.4)	35.5 (4.3)	*
No insurance ⁶	2,355 (607)	100.0	46.2 (6.6)	13.5 (3.6)	*
Other ⁷	*3,093 (982)	100.0	28.1 (4.2)	*	*

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Includes routine prenatal, well-baby visit, screening, insurance, or general examinations (see Major reason for this visit question on the Patient Record Sample Card, available from: <https://www.cdc.gov/nchs/data/namcs/2020-NAMCS-patient-record-sample-blank-508.pdf>).

²Includes pre-surgery, post-surgery, chronic routine, chronic flare-up, and unknown or blank.

³Race data were missing for 8.2% of visits and ethnicity data were missing for 20.0% of visits.

⁴Visits in this category are also included in both the Medicare and Medicaid or CHIP categories.

⁵CHIP is Children's Health Insurance Program.

⁶Defined as having only self-pay, no charge, or charity as payment sources. The individual self-pay and no charge or charity categories are not mutually exclusive.

⁷Includes workers' compensation, other, and unknown or blank.

NOTES: Numbers may not add to totals because more than one category could be indicated. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions"; only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 7. Presence of selected chronic conditions at visits to community health centers, by patient sex: United States, 2020

Chronic condition ¹	Total	Sex	
		Female	Male
Percent distribution (standard error of percent)			
All visits	100.0 ...	100.0 ...	100.0 ...
None	30.0 (3.8)	27.8 (3.2)	34.7 (5.6)
One or more chronic conditions.	69.2 (3.8)	71.3 (3.3)	64.9 (5.6)
One.	23.7 (1.6)	24.2 (2.2)	22.6 (2.4)
Two.	16.9 (1.7)	18.0 (1.7)	14.5 (3.1)
Three or more.	28.7 (5.1)	29.1 (5.2)	27.8 (6.3)
Blank	0.8 (0.3)	1.0 (0.4)	*
Percent of visits (standard error of percent)			
Hypertension	28.1 (3.2)	26.8 (3.3)	30.8 (4.3)
Obesity	25.2 (3.8)	29.0 (3.9)	17.4 (4.8)
Depression	22.8 (4.2)	25.8 (4.4)	16.7 (4.0)
Hyperlipidemia	19.2 (3.3)	17.1 (3.3)	23.6 (4.7)
Diabetes (Type I, Type II, unspecified)	18.3 (1.7)	18.5 (2.2)	17.9 (2.1)
Asthma	10.2 (2.5)	11.0 (2.9)	*
COPD ²	4.8 (1.2)	4.8 (1.1)	*
Cancer	2.3 (0.7)	2.8 (1.0)	1.5 (0.7)
Osteoporosis	2.1 (0.8)	2.8 (0.8)	*
Chronic kidney disease	1.8 (0.4)	1.6 (0.6)	2.3 (0.9)
Cerebrovascular disease	1.6 (0.9)	0.8 (0.6)	*
Alcohol abuse, misuse.	1.3 (0.3)	0.9 (0.5)	2.0 (0.7)
Coronary heart disease, ischemic heart disease, or history of myocardial infarction	1.1 (0.3)	0.4 (0.2)	2.7 (0.7)
Autism	0.8 (0.4)	0.3 (0.1)	2.0 (1.0)
History of pulmonary embolism	0.7 (0.5)	0.7 (0.5)	*

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Presence of chronic conditions was based on the checklist of chronic conditions and reported diagnoses. Combined total visits by patients with chronic conditions (percent of visits) exceeds 100% because more than one chronic condition may be reported per visit.

²COPD is chronic obstructive pulmonary disease.

NOTES: Numbers may not add to totals because more than one chronic condition may be reported per visit. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions"; only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 8. Selected services ordered or provided at visits to community health centers: United States, 2020

Selected services	Number of visits in thousands ¹ (standard error in thousands)	Percent of visits (standard error of percent)
All visits	40,096 (7,723)	100.0 ...
No services provided	*2,141 (931)	*
One or more services ordered or provided ²	37,955 (7,233)	**94.7 (1.9)
Vital signs		
Temperature	25,241 (5,565)	63.0 (5.4)
Blood pressure	29,413 (6,798)	73.4 (5.5)
Fitness measures		
Height	30,434 (6,899)	75.9 (5.4)
Weight	30,554 (7,136)	76.2 (5.7)
Blood tests		
Complete blood count (CBC)	3,952 (893)	9.9 (1.9)
Lipids or cholesterol	4,886 (895)	12.2 (1.3)
Glucose	*1,244 (750)	*
Glycohemoglobin (HbA1c)	5,781 (1,560)	14.4 (2.0)
Prostate specific antigen (PSA)	*	1.1 (0.4)
Other tests ³	10,143 (2,495)	25.3 (3.5)
Examinations or screenings ⁴	*10,851 (3,460)	27.1 (6.8)
Any imaging ⁵	4,421 (1,245)	11.0 (1.6)
Nonmedication treatment ⁶	1,223 (328)	3.0 (1.0)
Health education and counseling ⁷	16,555 (4,429)	*

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

** Estimate meets National Center for Health Statistics standards of reliability, but its complement does not.

¹Combined total of diagnostic, screening, and nonmedication treatment services exceeds "All visits," and "Percent of visits" exceeds 100% because more than one service may be reported per visit.

²Includes up to nine write-in procedures.

³Includes urinalysis, Pap test, electrocardiogram, biopsy, sigmoidoscopy, colonoscopy, peak flow, electroencephalogram, electromyogram, audiometry, spirometry, tonometry, cardiac stress test, fetal monitoring, chlamydia test, HIV test, pregnancy or human chorionic gonadotropin test, or human papillomavirus DNA test.

⁴Includes skin, pelvic, breast, foot, rectal, retinal, depression screening, and neurologic examinations.

⁵Includes X-ray, echocardiogram as well as other ultrasound, magnetic resonance imaging, computed tomography scan, mammography, bone mineral density, and other imaging.

⁶Includes physical therapy; excision of tissue; wound care; psychotherapy; other mental health counseling; cast, splint, or wrap; complementary and alternative medicine; durable medical equipment; home health care; and radiation therapy.

⁷Includes asthma, diet or nutrition, exercise, family planning or contraception, growth or development, injury prevention, stress management, tobacco use or exposure, and weight reduction education.

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure notes specified in "National Center for Health Statistics Data Presentation Standards for Proportions"; only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 9. Medication therapy and number of medications mentioned at visits to community health centers: United States, 2020

Medication at visit	Number of visits in thousands (standard error in thousands)	Percent of visits (standard error of percent)
All visits	40,096 (7,723)	100.0 ...
Medication therapy ¹		
0 drug mentions ²	7,838 (1,750)	19.5 (3.9)
1 or more drug mentions	31,914 (6,829)	79.6 (3.8)
Blank	*	0.9 (0.2)
Number of medications provided or prescribed		
All visits	40,096 (7,723)	100.0 ...
0.	7,838 (1,750)	19.5 (3.9)
1.	7,767 (1,794)	19.4 (3.3)
2.	5,217 (1,046)	13.0 (1.5)
3.	3,520 (600)	8.8 (1.7)
4.	*3,026 (915)	7.5 (1.2)
5.	2,281 (583)	5.7 (1.0)
6.	1,346 (307)	3.4 (0.6)
7.	*1,192 (398)	3.0 (0.7)
8.	*1,505 (638)	3.8 (1.1)
9.	*906 (377)	2.3 (0.7)
10 or more	*5,154 (2,601)	*

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Includes prescription drugs, over-the-counter preparations, immunizations, and desensitizing agents. Up to 30 drug mentions were collected per visit in 2020 compared with a maximum of 10 drug mentions collected in 2013; also defined as drug visits.

²Documentation in a patient's record of a drug provided, prescribed, or continued at a visit. Up to 30 medications may be listed.

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions"; only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.

Table 10. Twenty most frequently mentioned drug names at visits to community health centers: United States, 2020

Drug name ¹	Number of mentions in thousands (standard error in thousands)	Percent distribution (standard error of percent)	Therapeutic drug category ²
All drug mentions	*166,691 (58,272)	100.0
Acetaminophen	*5,275 (2,892)	3.2 (0.7)	Analgesics
Albuterol	*4,489 (1,560)	2.7 (0.2)	Bronchodilators
Atorvastatin	*4,052 (1,583)	2.4 (0.3)	Antihyperlipidemic agents
Aspirin	*3,492 (1,692)	2.1 (0.3)	Analgesics, antiplatelet agents
Ibuprofen	*3,379 (1,436)	2.0 (0.2)	Analgesics
Multivitamin	*3,297 (1,917)	2.0 (0.5)	Vitamin and mineral combinations
Lisinopril	2,984 (780)	1.8 (0.3)	Angiotensin converting enzyme inhibitors
Metformin	2,957 (720)	1.8 (0.4)	Antidiabetic agents
Fluticasone nasal	2,763 (826)	1.7 (0.3)	Nasal preparations
Omeprazole	*2,633 (983)	1.6 (0.2)	Proton pump inhibitors
Levothyroxine	*2,381 (860)	1.4 (0.2)	Thyroid hormones
Amlodipine	2,262 (518)	1.4 (0.4)	Calcium channel blocking agents
Multivitamin, prenatal	*2,207 (1,023)	1.3 (0.7)	Iron products, vitamin and mineral combinations
Gabapentin	2,074 (601)	1.2 (0.2)	Anticonvulsants
Cetirizine	2,034 (573)	1.2 (0.4)	Antihistamines
Metoprolol	*1,991 (1,202)	1.2 (0.3)	Beta-adrenergic blocking agents
Loratadine	1,909 (571)	1.1 (0.2)	Antihistamines
Ergocalciferol	*1,908 (738)	1.1 (0.1)	Vitamins
Losartan	*1,870 (607)	1.1 (0.3)	Angiotensin II inhibitors
Buprenorphine-naloxone	*	*	Analgesics
Other	*111,015 (39,640)	66.6 (1.4)	Other

... Category not applicable.

* Estimate does not meet National Center for Health Statistics standards of reliability.

¹Based on Multum Lexicon terminology, drug name reflects the active ingredient(s) of a drug provided, prescribed, or continued.

²Based on Multum Lexicon second-level therapeutic drug category (see <https://www.cerner.com/solutions/drug-database>).

NOTES: Numbers may not add to totals because of rounding. Visit estimates are not presented if they are based on fewer than 30 cases in the sample data; only an asterisk is shown. Visit estimates based on 30 cases or more include an asterisk if the relative standard error of the estimate exceeds 30%. Proportion estimates are not presented if they are unreliable based on the procedure specified in "National Center for Health Statistics Data Presentation Standards for Proportions"; only an asterisk is shown.

SOURCE: National Center for Health Statistics, National Ambulatory Medical Care Survey, 2020.