Neurology Fact Sheet from the

National Ambulatory Medical Care Survey

ABOUT NAMCS

The National Ambulatory Medical Care Survey (NAMCS) produces statistics that are representative of people in the United States who visit office-based physicians. The survey provides information on office visits by physician practice characteristics, patient characteristics, and visit characteristics.

NEUROLOGY

In 2015–2016, there were an estimated **15 million visits per year** to nonfederally employed, office-based neurologists in the United States.

CONTACT US

Ambulatory and Hospital Care Statistics Branch:

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https://www.cdc.gov/nchs/ahcd/ namcs_participant.htm ambcare@cdc.gov





PROVIDER-ASSESSED MAJOR REASON FOR VISIT

CHRONIC PROBLEM, ROUTINE 55.6%

NEW PROBLEM¹

20.2%

¹Onset less than 3 months.

NOTE: Major reason for visit is the broad category of the problem or symptom which, in the physician's judgment, was most responsible for the patient making this visit.

PATIENTS' TOP **5** PRINCIPAL REASONS FOR VISIT

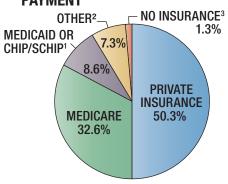
- PROGRESS VISIT
- HEADACHE
- CONVULSIONS
- MIGRAINE HEADACHE
- ABNORMAL INVOLUNTARY MOVEMENTS

NOTE: Principal reason for visit is based on the patient's primary expressed reason for the visit, which is abstracted from the medical record and later coded into categories using an internal NCHS system.

TOP **2** SERVICES, ORDERED OR PROVIDED

- NEUROLOGIC EXAMINATION
- MRI

PRIMARY EXPECTED SOURCE OF PAYMENT



¹CHIP is Children's Health Insurance Program; SCHIP is State CHIP.
²Includes workers' compensation, other sources of payment, unknown, and blank data.
³Having only self-pay, no charge, or charity as source of payment.
NOTE: Percentages may not add to 100 due to rounding.

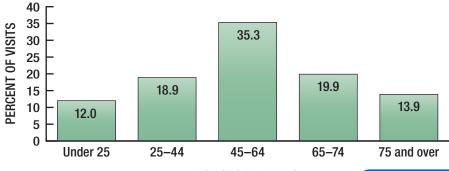
MEDICATIONS WERE PRESCRIBED OR CONTINUED AT **76.5%** OF OFFICE VISITS.

TOP 5 ACTIVE INGREDIENTS



- GABAPENTIN
- ASPIRIN
- TOPIRAMATE
- LEVOTHYROXINE
- AMITRIPTYLINE

PERCENT DISTRIBUTION OF NEUROLOGY OFFICE VISITS, BY PATIENT'S AGE: 2015–2016



AGE GROUP (YEARS)



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NAMCS data are widely used in research studies appearing in nationally recognized medical journals. Here are a few recent publications using NAMCS data:

Goodson JD, Shahbazi S, Rao K, Song Z. **Differences in the complexity of office visits by physician specialty: NAMCS 2013–2016.** J Gen Intern Med 35(6):1715–20. 2020.

Zhou L, Bhattacharjee S, Kwoh CK, Tighe PJ, Malone DC, Slack M, et al. **Trends, patient and prescriber characteristics in gabapentinoid use in a sample of United States ambulatory care visits from 2003 to 2016.** J Clin Med 9(1):83. 2019.

Dudley N, Ritchie CS, Stijacic-Cenzer I, Lee SJ. **Palliative care needs in oncology, cardiology, and neurology clinic patients in the USA.** J Gen Intern Med 34(7):1100–2. 2019.

Bhattacharjee S, Vadiei N, Goldstone L, Alrabiah Z, Sherman SJ. **Patterns and predictors of depression** treatment among older adults with Parkinson's disease and depression in ambulatory care settings in the **United States.** Parkinsons Dis 2018:3402983. 2018.

Burch R, Rizzoli P, Loder E. The prevalence and impact of migraine and severe headache in the United States: Figures and trends from government health studies. Headache 58(4):496–505. 2018.

Takaki H, Onozuka D, Hagihara A. Migraine-preventive prescription patterns by physician specialty in ambulatory care settings in the United States. Prev Med Rep 9:62–7. 2017.

A complete list of publications using NAMCS data, which includes articles and reports, can be found at: https://www.cdc.gov/nchs/ahcd/ahcd_products.htm.