

# 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.

## UROLOGY

In 2015–2016, there were an estimated **23 million visits per year** to nonfederally employed, office-based physicians specializing in urology in the United States.

## CONTACT US

Ambulatory and Hospital Care Statistics Branch:  
**301-458-4600**  
[https://www.cdc.gov/nchs/ahcd/namcs\\_participant.htm](https://www.cdc.gov/nchs/ahcd/namcs_participant.htm)  
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## PROVIDER-ASSESSED MAJOR REASON FOR VISIT

CHRONIC PROBLEM, ROUTINE	49.6%
NEW PROBLEM <sup>1</sup>	22.3%
CHRONIC PROBLEM, FLARE-UP	11.8%
POSTSURGERY	6.7%
PRESURGERY	2.2%

<sup>1</sup>Onset 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

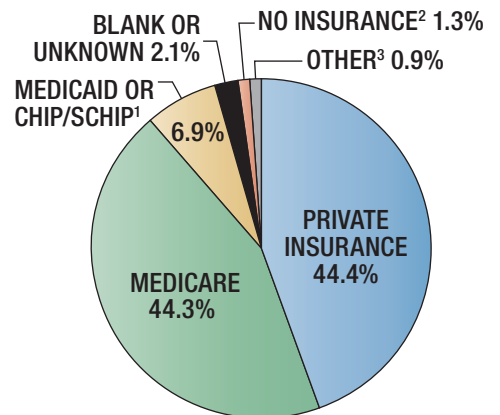
- PROGRESS VISIT
- URINARY TRACT DISEASES, EXCEPT CYSTITIS
- CANCER OF URINARY AND MALE GENITAL TRACT
- DISEASES OF THE MALE GENITAL ORGANS
- FREQUENCY AND URGENCY OF URINATION

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 5 SERVICES, ORDERED OR PROVIDED

- URINALYSIS
- SKIN EXAMINATION
- OTHER ULTRASOUND
- PSA (PROSTATE-SPECIFIC ANTIGEN) TEST
- URINE CULTURE

## PRIMARY EXPECTED SOURCE OF PAYMENT



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

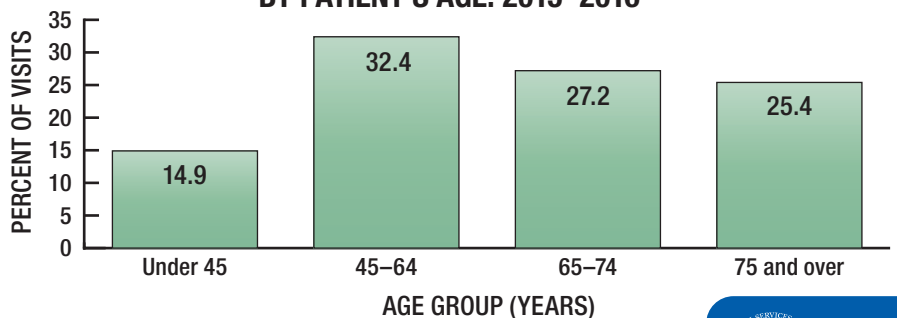
MEDICATIONS WERE PRESCRIBED OR CONTINUED AT **72.3%** OF OFFICE VISITS.

## TOP 5 ACTIVE INGREDIENTS



- TAMBUSULOSIN
- ASPIRIN
- MULTIVITAMIN
- CIPROFLOXACIN
- ATORVASTATIN

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



# National Ambulatory Medical Care Survey

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

Ward BW, Myrick KL, Cherry DK. **Physician specialty and office visits made by adults with diagnosed multiple chronic conditions: United States, 2014–2015.** Public Health Rep 135(3):372–82. 2020.

Stark T, Shoag JE, Nicolas J, Patel N, Taylor B, Scherr DS. **Ambulatory bladder cancer care in the United States.** Urology Prac 6(3):165–73. 2019.

Gaitonde S, Malik RD, Christie AL, Zimmern PE. **Bethanechol: Is it still being prescribed for bladder dysfunction in women?** Int J Clin Pract 73(8):e13248. 2019.

Vadiei N, Bhattacharjee S. **Patterns and predictors of depression treatment among adults with chronic kidney disease and depression in ambulatory care settings in the United States.** Int Urol Nephrol 51(2):303–9. 2019.

Rhee TG, Choi YC, Ouellet GM, Ross JS. **National prescribing trends for high-risk anticholinergic medications in older adults.** J Am Geriatr Soc 66(7):1382–7. 2018.

David SA, Patil D, Alemozaffar M, Issa MM, Master VA, Filson CP. **Urologist use of cystoscopy for patients presenting with hematuria in the United States.** Urology 100:20–6. 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](https://www.cdc.gov/nchs/ahcd/ahcd_products.htm).