

9 Procedures for admitted patients

Introduction

The *National Health Data Dictionary* version 11.0 (NHDC 2002) defines a procedure as a clinical intervention that is surgical in nature, carries a procedural risk, carries an anaesthetic risk, requires specialised training, and/or requires special facilities or equipment only available in an acute care setting. Procedures therefore encompass surgical procedures and also non-surgical investigative and therapeutic procedures such as X-rays and chemotherapy. Client support interventions that are neither investigative nor therapeutic (such as anaesthesia) are also included.

Procedures for 2002–03 were classified, coded and reported to the National Hospital Morbidity Database by all states and territories, using the third edition of the *International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification* (ICD-10-AM) (NCCH 2002). Information about the quality of the ICD-10-AM coded data is presented in Appendix 3.

One or more procedures can be reported for each separation in the National Hospital Morbidity Database, but procedures are not undertaken for all hospital admissions, so only a proportion of the separation records include procedure data.

There are two types of data on procedures presented in this chapter:

- data on the separations for which there was one or more procedures reported within the group of procedures (an ICD-10-AM procedure block, group of blocks or chapter) being considered. Because more than one procedure can be reported for each separation, the counts for these data are not additive, so totals in the tables will not usually equal the sum of counts in the rows; and
- data on the total number of procedures reported. For these data, all procedures within a group of procedures being considered are counted, even if there is more than one reported for a separation.

The procedure classification is divided into chapters by anatomical site and within each chapter by a 'superior' to 'inferior' (head to toe) approach. These sub chapters are further divided into more specific procedure blocks, beginning with the least invasive procedure through to the most invasive. The blocks, which are numbered sequentially, group the very specific procedure codes. The tables and figures in this chapter use the groups of blocks, blocks and abbreviated descriptions. Full descriptions of the categories are available in the ICD-10-AM publication.

Most of the information is presented using three methods of grouping procedures based on the ICD-10-AM procedure classification:

- ICD-10-AM procedure chapters – these 20 groups provide information aggregated at the ICD-10-AM chapter level (Figures 9.2 and 9.3 and Table 9.19);
- ICD-10-AM procedure block groupings – these 65 groups were chosen to provide more detailed information than ICD-10-AM chapters, but still cover the entire procedure

classification at a manageable level (Tables 9.1 to 9.4). Tables 9.6 and 9.7 present counts of all procedures using these groupings; and

- ICD-10-AM procedure blocks – these 1,424 categories describe procedures at a quite specific level. Detailed information is presented for the 30 of these groups with the highest number of separations (Tables 9.8 to 9.18) and summary information is provided for all of the groups (for which separations were reported) on the website at <http://www.aihw.gov.au> (Tables S9.1 and S9.2).

In addition, Table 9.5 presents information on the number of procedures reported per separation.

Tables are presented with summary separation, patient day and average length of stay statistics for public and private hospitals and for public patients, nationally and by state and territory. National information on age group and sex distributions is presented, as well as procedure statistics for Indigenous status. The 30 ICD-10-AM procedure blocks with the highest number of separations are also presented. Information on 'public' patients in Tables 9.1 to 9.2 and Tables 9.8 to 9.12 relates to separations for which the patient election status was reported as public (see Chapter 6).

Data for private hospitals in Tasmania, the Australian Capital Territory and the Northern Territory are not shown in Tables 9.4, 9.5, 9.7, 9.14 and 9.16. The data were supplied but were not published for confidentiality reasons.

Overall, there were 5.3 million separations for which a procedure was reported, 80% of total separations. Almost 18.8 million patient days were reported for separations with a procedure, accounting for 79.7% of the total (Tables 9.1 and 9.2).

Procedures and other data elements reported for separations

The information on procedures reported in this chapter is compiled in the National Hospital Morbidity Database with a range of other data. Figure 9.1 demonstrates this using the example of procedure block 412 *Tonsillectomy or adenoidectomy* and other data elements in the National Hospital Morbidity Database. There were 41,732 separations for which this procedure was reported, with an average length of stay of 1.1 days. Almost 54% of separations were admitted to private hospitals. The majority of separations (99.3%) with this procedure had a separation mode of *Other*, suggesting that these patients went home after separation from the hospital. The principal diagnosis mostly associated with this procedure was *Chronic diseases of tonsils and adenoids* (J35) with 30,492 separations and the most commonly reported AR-DRG was *Tonsillectomy and/or Adenoidectomy* (D11Z) with 33,613 separations. Separations were evenly distributed between sexes. Patients aged 5 to 14 years accounted for 43% of separations, followed by patients aged 1 to 4 years (29%).

ICD-10-AM chapters

Figures 9.2 and 9.3 provide a summary of the number of separations and patient days by public and private sector, reported for each of the ICD-10-AM procedure chapter groupings. If a separation has two block numbers within the same chapter, it is only counted once.

The highest number of separations in both the public and private sector was for *Non-invasive, cognitive and interventions, not elsewhere classified* (Blocks 1820-1916). This chapter also accounted for the highest number of patient days in the public sector and the private sector.

Broad procedure groupings

Sector

Public hospitals accounted for 56.4% of the separations for which a procedure was reported, although they accounted for 61.5% of the separations overall. Similarly, although 69.8% of overall patient days were in public hospitals, only 66.9% of patient days associated with procedures were in public hospitals. In public hospitals, 73.3% of total separations involved a procedure (3,000,596) and these separations were associated with 76.4% of the 16,426,460 total patient days (Table 9.1). In contrast, 90.5% of total separations in private hospitals involved a procedure (2,319,800), and these separations were associated with 87.3% of total patient days (6,216,786) (Table 9.2). About 86.2% of separations with a procedure in public hospitals were for public patients, in contrast to just 3.6% in private hospitals.

The private sector reported a higher proportion of separations for same day procedures than the public sector. About 54.1% (1,623,422) of separations for which a procedure was reported were same day in public hospitals, compared with 64.3% (1,492,529) in private hospitals (Tables 9.1 and 9.2).

Excluding *Administrative/clinical/client support interventions* (Blocks 1909–1915) (1,238,624) and *Generalised allied health interventions* (Block 1916) (729,935), the group of procedures that accounted for the largest number of separations in public hospitals was *Procedures on kidney* (Blocks 1040–1063), which includes haemodialysis. There were 615,600 separations for which procedures in this group were reported, accounting for 834,941 patient days. This group of procedures also accounted for a large number of same day separations (593,665) and public patient separations (548,935).

Within the private sector, *Procedures on large intestine* (Blocks 904–925), which includes colonoscopy, was the group of procedures that accounted for the largest number of separations, excluding *Administrative/clinical/client support interventions* (Blocks 1909–1915) (1,586,096 separations) and *Generalised allied health interventions* (Block 1916) (298,967 separations). There were 298,300 separations for which procedures in this group were reported, accounting for 456,246 patient days. This group of procedures also accounted for a large number of same day separations (271,311). Other groups of procedures that accounted for a large number of separations in private hospitals were *Other procedures on abdomen, peritoneum and hernia* (Blocks 983–1011) with 282,174 separations and *Chemotherapeutic and radiation oncology procedures* (1780–1799) with 148,643 separations.

States and territories

Tables 9.3 and 9.4 contain detail on the pattern of hospital use in the states and territories by procedure grouping, in both the public and private sectors. These tables enable state by state comparisons of overall hospital use for the different procedure groupings, and the share of separations between the private and public sector. For example, the proportion of total separations for *Procedures on skull, brain and meninges* (Blocks 1–28) performed in public hospitals in comparison to private hospitals was higher in New South Wales (2,824 public

sector separations or 74.1% of combined separations) than in Queensland (1,279 public sector separations or 66.0% of combined separations). In contrast, the proportion of total separations for *Procedures on lens* (Blocks 193–203) performed in private hospitals in comparison to public hospitals was higher in Queensland (23,688 private sector separations, representing 81.2% of combined separations) than in South Australia (8,196 private sector separations, or 63.3%).

Number of procedure codes

Table 9.5 presents information on the number of procedure codes reported to the National Hospital Morbidity Database. Ideally, the number of procedures recorded for a patient should reflect the procedures undertaken, and not be restricted by administrative or technical limitations. There were marked differences between the states and territories in the maximum number of procedures reported, ranging from 31 procedures for Queensland and Western Australia to 20 for New South Wales. However, with the exception of the Northern Territory (public hospitals), the average number of procedure codes per separation varied little among the jurisdictions, for both the public and private sectors. The AIHW requested a maximum of 31 codes, so this may have restricted the number of codes reported by Queensland and Western Australia.

There was a marked increase in both sectors for reporting five or more procedure codes for a separation, compared to 2001–02. In the public sector, 6.9% of records had five or more procedure codes, as did 7.6% of records in the private sector (compared with 5.8% and 5.3%, respectively in 2001–02).

Total procedures

Tables 9.6 and 9.7 provide counts of all the procedures reported for 2002–03, by state and territory for the public and private sectors. The totals are the total number of procedures, rather than the total number of separations for which a procedure was reported, as reported elsewhere in this chapter. A total of 12.7 million procedures was reported, 6.9 million in the public sector and 5.8 million in the private sector. The most commonly reported procedure group in public hospitals and private hospitals combined was *Administrative/clinical/client support interventions* (Blocks 1909–1915) (3,161,019). A block which accounted for many of these was *Cerebral anaesthesia* (Block 1910), 81.5% of the group overall (2,575,434) (Tables 9.8 to 9.11). The number of codes reported for Block 1910 was markedly higher than for 2001–02. However, this reflects the fact that this block includes both *General anaesthesia* and *Sedation* in ICD-10-AM third edition but included only *General anaesthesia* in ICD-10-AM second edition. The next most common procedure groups for both sectors combined were *Generalised allied health interventions* (Block 1916) (1,755,722), *Therapeutic interventions* (Blocks 1867–1908) (746,000), and *Procedures on kidneys* (Block 1040–1064) with 704,207 procedures.

After *Administrative/clinical/client support interventions* (Blocks 1909–1915) and *Generalised allied health interventions* (Block 1916), the most commonly reported procedure group in public hospitals was *Procedures on kidney* (Blocks 1040–1063) with 593,889 procedures. In private hospitals, it was *Procedures on large intestine* (Blocks 904–925) and *Other procedures on abdomen, peritoneum and hernia* (Blocks 983–1011) with 302,817 and 290,875 procedures respectively.

High volume procedures

Sector

Tables 9.8 to 9.16 present information on the most common procedures (at the block level of the ICD-10-AM classification).

Tables 9.8 and 9.9 contain summary separation, patient day and average length of stay statistics for the 30 blocks with the highest number of overnight separations in public and private hospitals, and Tables 9.10 and 9.11 contain summary separation statistics for same day separations. Table 9.12 contains summary separation, patient day and average length of stay statistics for the procedure blocks with the most separations in private free-standing day hospitals only.

In the public sector, the most common procedure blocks for overnight separations were *Generalised allied health interventions* (Block 1916) (697,654) and *Cerebral anaesthesia* (Block 1910) (520,587) (Table 9.8). The average length of stay for separations reporting each of these procedure blocks was 11.9 and 6.5 days respectively. Both these procedure blocks also accounted for the highest number of patient days for separations with procedures, with 8,303,010 patient days for *Generalised allied health interventions* (Block 1916) and 3,370,243 patient days for *Cerebral anaesthesia* (Block 1910).

Cerebral anaesthesia (Block 1910) was the most frequently reported procedure for overnight separations in private hospitals (491,844) (Table 9.9), and also the most frequently reported procedure for same day separations (933,778) as listed in Table 9.11.

Cerebral anaesthesia (Block 1910) was the most frequently reported procedure group in private free-standing day hospitals (269,972 separations), followed by *Panendoscopy with excision* (Block 1008) (63,756 separations) (Table 9.12). Over 30.4% of the separations for *Haemodialysis* (Block 1060) in private free-standing day hospitals were for public patients (8,959).

States and territories

There was some variation between the states and territories in the relative number of separations for the most common procedure blocks (Tables 9.13 and 9.14). In the public sector, for example, the proportion of total separations for which *Haemodialysis* (Block 1060) was reported was greatest for the Northern Territory (37.4%, 25,473) and lowest in South Australia (11.2%, 41,283). The number of separations for *Chemotherapy administration* (Block 1780) was lower in New South Wales (8,265) than in other comparable states such as Victoria (53,637). This is due to a gradual reclassification of chemotherapy patients in New South Wales public hospitals from admitted patient to outpatient activity. In the private sector, Victoria had relatively high numbers of separations with *Panendoscopy* (Block 1005) (18,523).

There was also some variation between the states and territories in the average length of stay for separations reporting the most common procedure blocks (Tables 9.15 and 9.16). For example, in the public sector, the average length of stay for separations with *Panendoscopy with excision* (Block 1008) ranged from 2.9 days in Victoria, Queensland and Australian Capital Territory to 5.7 days in Tasmania (Table 9.15). Overall, there was a much smaller variation in average length of stays within the private sector for those blocks reported, but there was still some variation. For example, the average length of stay for separations with *Arthroscopic meniscectomy of knee with repair* (Block 1873) ranged from 2.6 days in Queensland to 10.5 days in South Australia (Table 9.16).

Age group and sex

There was little difference between males and females in the proportion of separations with procedures, with males reporting 80.7% (3,097,234) and females reporting 79.3% (3,556,294) (Tables 9.17 and 9.18). Besides the more gender-specific procedures such as *Medical or surgical induction of labour* (Block 1334), most of the top 30 procedures were common to both sexes. For both males and females, the group of procedures with the most separations was *Cerebral anaesthesia* (Block 1910), with the most separations for this group of procedures in the 55 to 64 years age group for males and the 45 to 54 years age group for females.

For males, the highest number of separations with procedures was reported for the 65 to 74 years age group (481,957, 19.3%) (Table 9.17). For females, the age group with the highest number of separations with procedures was the 25 to 34 years age group (400,483, 14.2%) (Table 9.18). Common procedure groups among females in this age group were in relation to labour and delivery, for example *Postpartum suture* (Block 1344) (46,613) and *Caesarean section* (Block 1340) (43,432).

Indigenous status

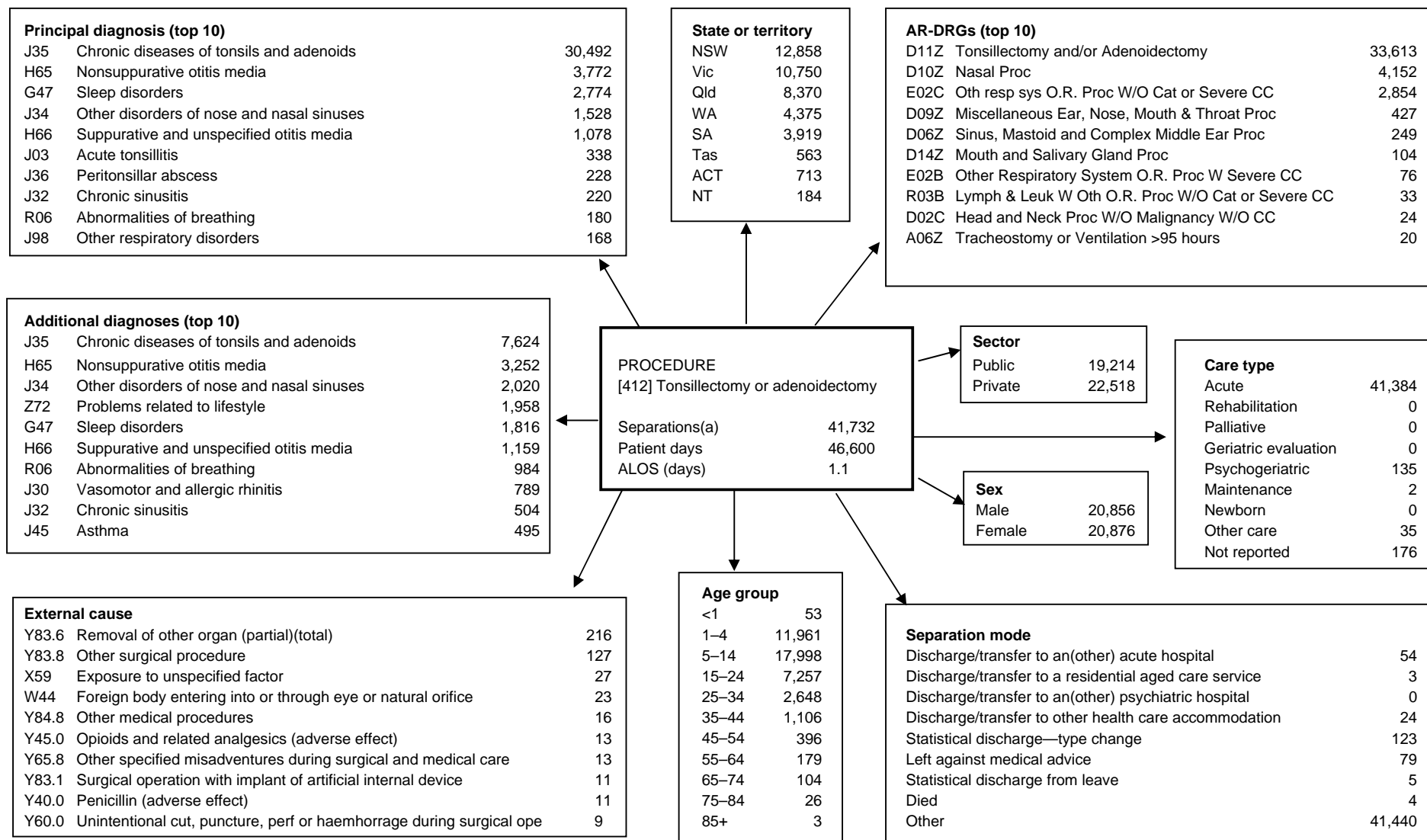
Table 9.19 contains a comparison between patients identified as Indigenous and patients identified as non-Indigenous for each of the ICD-10-AM procedure chapters, including information on procedures per 1,000 population. Apart from the chapter *Non-invasive, cognitive and interventions, not elsewhere classified* (Blocks 1820–1916), *Procedures on urinary system* (Blocks 1040–1128) was the most frequently reported procedure chapter for Indigenous patients (77,231). For *Haemodialysis* (Block 1060), the rate for persons identified as Indigenous was nearly eight times that for non-Indigenous people. For *Procedures on respiratory system* (Blocks 520–569) the rate for persons identified as Indigenous was over twice that of non-Indigenous people and for *Procedures on ear and mastoid process* (Blocks 300–333) the rate was 1.4 times that of non-Indigenous persons. Some chapters for which the rate for Indigenous persons was less than that for non-Indigenous persons included *Procedures on endocrine system* (Blocks 110–129), *Procedures on nose, mouth and pharynx* (Blocks 370–422) and *Gynaecological procedures* (Blocks 1240–1299).

Although population rates for procedures were higher for Indigenous persons, Figure 9.4 shows the proportion of separations with a procedure by ICD-10-AM diagnosis chapter was lower for Indigenous patients than for non-Indigenous patients for almost all of the diagnosis chapters. For example, for *Diseases of the circulatory system* (I00–I99), 71.6% of separations for non-Indigenous patients had a procedure reported, compared with 49.4% of separations for Indigenous patients. *Certain conditions originating in the perinatal period* was the only chapter where the proportion of separations with procedures was higher for Indigenous patients. These differences may be affected by the pattern of principal diagnoses reported within chapters.

Additional data

The accompanying tables on the website at <http://www.aihw.gov.au/> provide information on the number of separations by five-year age group and ICD-10-AM procedure groupings for males and females. There are also national summary statistics for public and private

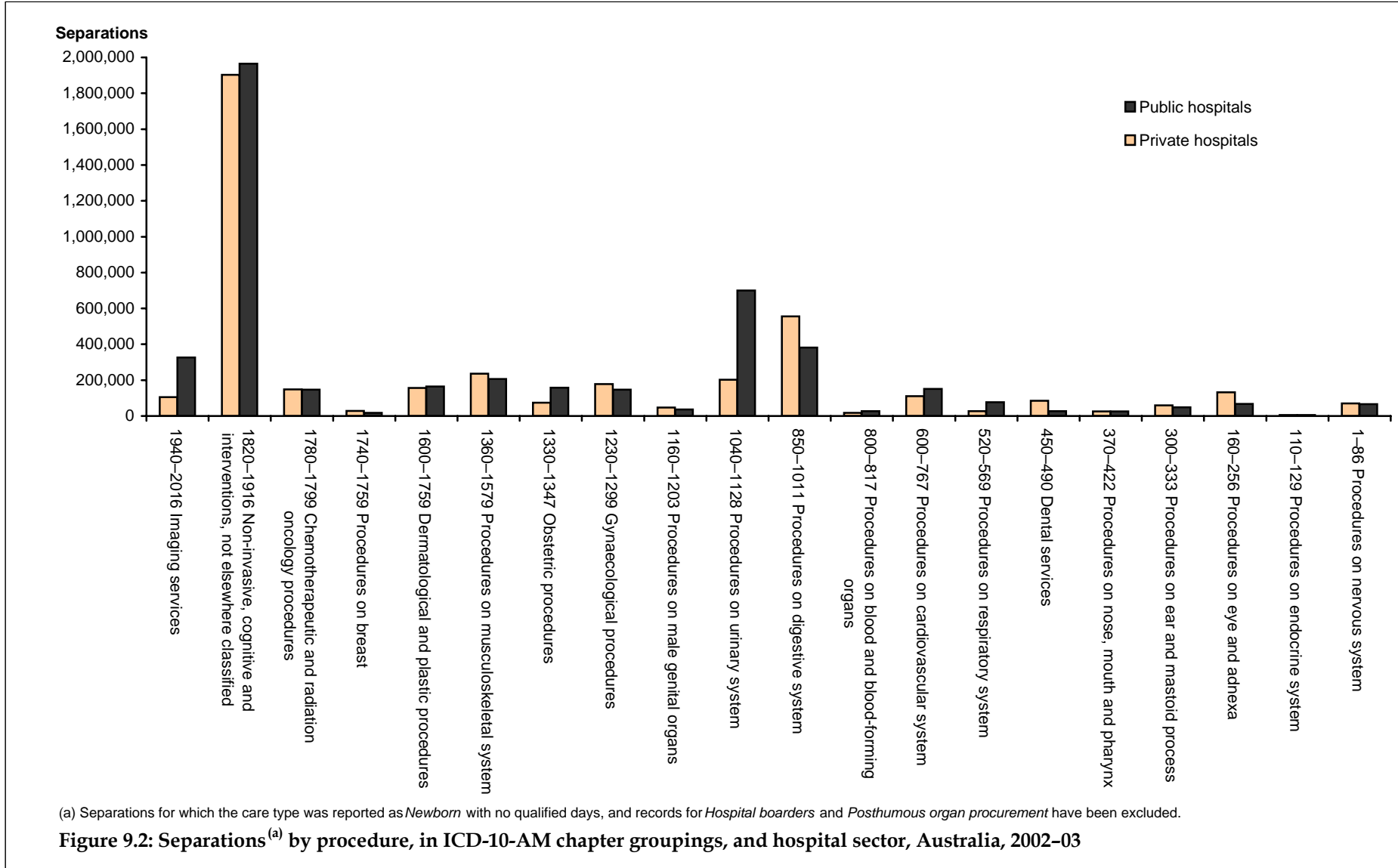
hospitals for each procedure block, for overnight and same day separations (as presented for the top 30 procedure blocks in Tables 9.8 to 9.11).



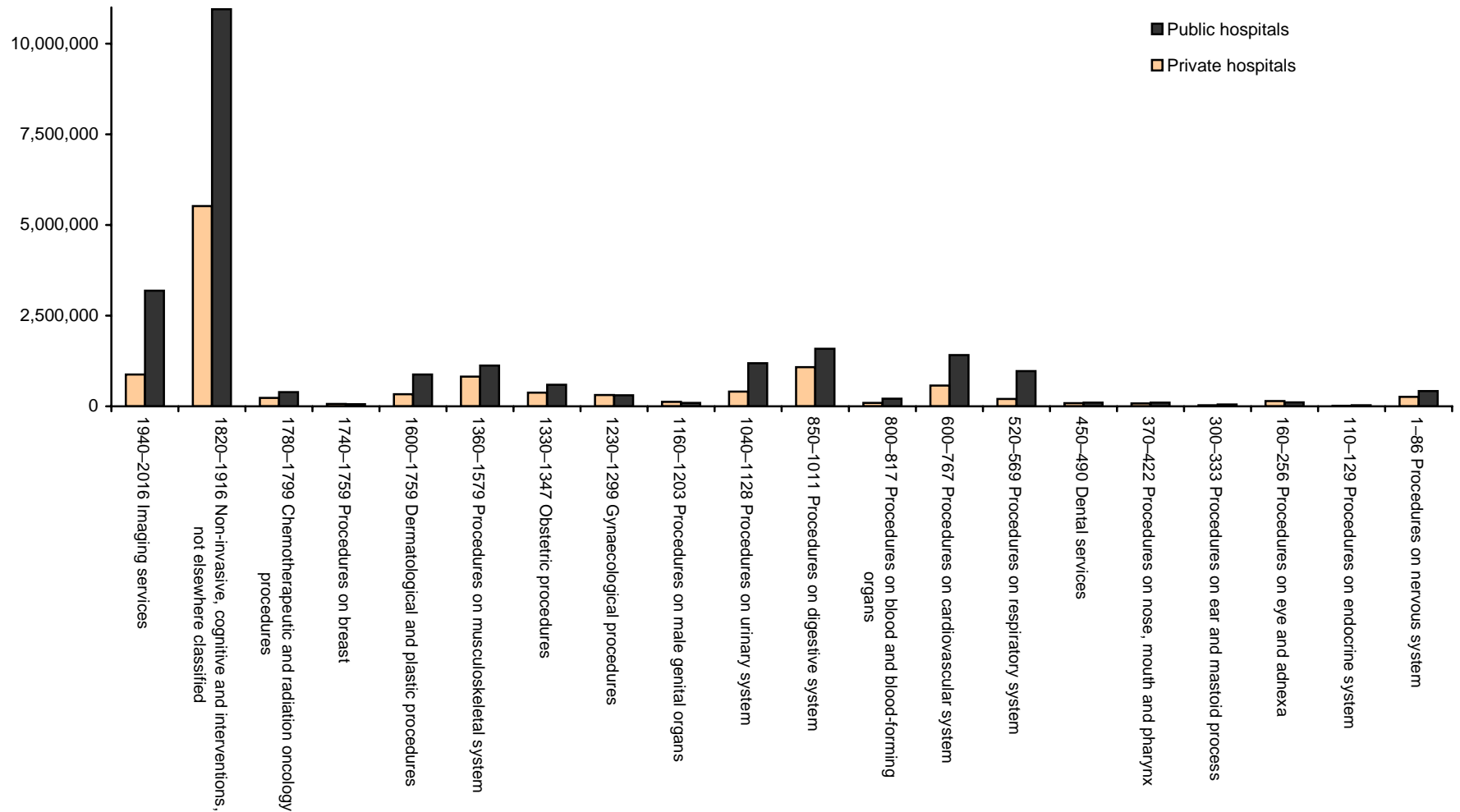
Note: Main abbreviations: ALOS—average length of stay; Proc—procedure; W—with; W/O—without; CC—complication or comorbidity; perf—perforation.

(a) Selected statistics for separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

Figure 9.1: Interrelationships of a procedure (Block 412 Tonsillectomy or adenoidectomy) with other data elements, all hospitals, Australia, 2002-03



Patient days



(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

Figure 9.3: Patient days^(a) by procedure, in ICD-10-AM chapter groupings, and hospital sector, Australia, 2002-03

Table 9.1: Separation^(a) and procedure statistics, by procedure in ICD-10-AM groupings, public hospitals, Australia, 2002-03

Procedure blocks		Separations	Same day separations	Public patient separations	Separations		Patient days		ALOS (days)	
					per 10,000 population	Patient days	per 10,000 population	ALOS (days)	excluding same day	
1-28	Procedures on skull, meninges and brain	8,472	168	6,315	4.3	129,790	65.7	15.3	15.6	
29-59	Procedures on spinal canal and spinal cord structures	33,689	9,923	28,419	17.1	252,791	127.9	7.5	10.2	
60-86	Procedures on peripheral nervous system	24,451	16,850	20,402	12.4	64,106	32.4	2.6	6.2	
110-129	Procedures on thyroid and parathyroid glands	5,367	182	4,605	2.7	26,241	13.3	4.9	5.0	
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	7,901	4,888	5,985	4.0	22,649	11.5	2.9	5.9	
193-203	Procedures on lens	47,565	43,451	38,001	24.1	56,246	28.5	1.2	3.1	
204-256	Procedures on retina, conjunctiva and other areas of eye	16,561	9,562	12,083	8.4	38,222	19.3	2.3	4.1	
300-306	Procedures on external ear	3,128	1,637	2,705	1.6	9,762	4.9	3.1	5.4	
307-333	Procedures on eardrum, middle and inner ear and mastoid	23,512	15,998	19,916	11.9	43,068	21.8	1.8	3.6	
370-389	Procedures on nose and sinuses	21,532	7,442	18,541	10.9	46,214	23.4	2.1	2.8	
390-399	Procedures on tongue, salivary gland and ducts	4,180	2,007	3,471	2.1	13,853	7.0	3.3	5.5	
400-408	Procedures on mouth, palate or uvula	5,055	2,508	4,225	2.6	13,504	6.8	2.7	4.3	
409-422	Procedures on tonsils, adenoids and pharynx	21,930	4,121	18,323	11.1	35,360	17.9	1.6	1.8	
450-490	Dental and orthodontic procedures	26,601	22,015	20,466	13.5	98,182	49.7	3.7	16.6	
520-542	Procedures on larynx and trachea	9,650	3,233	7,953	4.9	195,416	98.9	20.3	29.9	
543-558	Procedures on bronchus, lung and pleura	22,224	9,178	18,098	11.2	217,766	110.2	9.8	16.0	
559-567	Procedures on chest wall, mediastinum and diaphragm	17,617	1,330	14,209	8.9	240,388	121.7	13.6	14.7	
568-569	Airway management, continuous ventilatory support	39,568	3,499	32,425	20.0	690,456	349.5	17.4	19.0	
600-638	Procedures on atrium, ventricle, septum and valves	34,168	10,394	27,670	17.3	195,270	98.8	5.7	7.8	
639-666	Other procedures on heart, myocardium and pericardium	23,888	3,188	19,328	12.1	212,495	107.5	8.9	10.1	
667-693	Procedures on coronary arteries and aorta	54,337	12,676	44,708	27.5	309,901	156.8	5.7	7.1	
694-767	Procedures on arteries and veins	85,917	19,459	71,993	43.5	1,103,154	558.3	12.8	16.3	
800-817	Procedures on blood and blood-forming organs	27,292	9,593	22,937	13.8	208,615	105.6	7.6	11.2	
850-869	Procedures on oesophagus	10,924	5,921	9,160	5.5	66,844	33.8	6.1	12.2	
870-890	Procedures on stomach	12,689	2,734	10,481	6.4	205,130	103.8	16.2	20.3	
891-903	Procedures on small intestine	7,346	168	6,031	3.7	144,861	73.3	19.7	20.2	
904-925	Procedures on large intestine	133,094	101,538	116,813	67.4	428,910	217.1	3.2	10.4	
926-927	Procedures on appendix	19,570	115	16,913	9.9	78,186	39.6	4.0	4.0	
928-950	Procedures on rectum and anus	29,820	13,996	26,226	15.1	126,299	63.9	4.2	7.1	
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	42,690	8,396	36,516	21.6	232,116	117.5	5.4	6.5	
983-1011	Other procedures on abdomen, peritoneum and hernia	194,866	106,688	168,839	98.6	906,356	458.7	4.7	9.1	
1040-1064	Procedures on kidney	615,600	593,665	548,935	311.6	834,941	422.6	1.4	11.0	
1065-1129	Procedures on bladder, ureter and urethra	86,374	45,602	75,404	43.7	378,061	191.3	4.4	8.2	
1160-1170	Procedures on prostate and seminal vesicle	11,074	1,469	9,497	5.6	56,001	28.3	5.1	5.7	

(continued)

Table 9.1 (continued): Separation^(a) and procedure statistics, by procedure in ICD-10-AM groupings, public hospitals, Australia, 2002–03

Procedure blocks	Separations	Same day separations	Public patient separations	Separations		Patient days		ALOS (days)	
				per 10,000 population	Patient days	per 10,000 population	ALOS (days)	excluding same day	
1171–1176 Procedures on scrotum and tunical vaginalis	2,269	653	1,890	1.1	6,595	3.3	2.9	3.7	
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	13,396	9,574	11,412	6.8	19,252	9.7	1.4	2.5	
1190–1203 Procedures on penis and other male genital organs	11,023	8,942	9,503	5.6	17,090	8.6	1.6	3.9	
1240–1258 Procedures on ovaries and fallopian tubes	28,696	13,728	25,177	14.5	71,777	36.3	2.5	3.9	
1259–1273 Procedures on uterus	97,311	68,702	85,032	49.3	188,235	95.3	1.9	4.2	
1274–1278 Procedures on cervix	20,526	18,590	18,577	10.4	25,923	13.1	1.3	3.8	
1279–1288 Procedures on vagina and pelvic floor	22,783	13,168	20,629	11.5	50,708	25.7	2.2	3.9	
1289–1299 Procedures on other female genital organs	16,368	11,233	11,549	8.3	30,845	15.6	1.9	3.8	
1330–1335 Induction and augmentation of labour	94,383	3,373	86,051	47.8	347,828	176.0	3.7	3.8	
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	32,033	674	29,340	16.2	116,895	59.2	3.6	3.7	
1340 Caesarean delivery	41,914	152	37,037	21.2	227,897	115.3	5.4	5.5	
1341–1347 Other obstetric and postpartum procedures	83,237	5,019	75,741	42.1	284,550	144.0	3.4	3.6	
1360–1371 Procedures on head, facial bones and joints	6,859	2,930	5,745	3.5	22,543	11.4	3.3	5.0	
1373–1379 Procedures on neck, thorax and ribs	588	61	474	0.3	10,397	5.3	17.7	19.6	
1381–1393 Procedures on spinal cord and vertebrae	2,686	68	1,935	1.4	41,971	21.2	15.6	16.0	
1394–1406 Procedures on shoulder, scapula and clavicle	9,061	2,269	7,899	4.6	24,602	12.5	2.7	3.3	
1408–1438 Procedures on humerus, elbow and forearm	31,799	6,608	25,837	16.1	92,282	46.7	2.9	3.4	
1439–1474 Procedures on hand, wrist and phalanges	27,756	13,721	22,702	14.0	53,853	27.3	1.9	2.9	
1476–1493 Procedures on hip, pelvis and femur	29,280	371	23,047	14.8	351,868	178.1	12.0	12.2	
1495–1524 Procedures on knee, patella, tibia and fibula	40,307	16,340	34,083	20.4	222,170	112.4	5.5	8.6	
1526–1548 Procedures on ankle, foot and toes	19,852	3,009	16,156	10.0	125,342	63.4	6.3	7.3	
1550–1579 Other procedures for musculoskeletal system	56,961	19,655	45,732	28.8	425,463	215.3	7.5	10.9	
1600–1660 Procedures on skin and subcutaneous tissue	154,833	80,098	131,847	78.4	844,674	427.5	5.5	10.2	
1661–1718 Plastic, cosmetic and corrective procedures	12,238	4,089	9,665	6.2	65,724	33.3	5.4	7.6	
1740–1759 Procedures on breast	17,804	8,098	15,906	9.0	60,374	30.6	3.4	5.4	
1780–1799 Chemotherapeutic and radiation oncology procedures	147,386	122,687	128,741	74.6	389,856	197.3	2.6	10.8	
1820–1866 Diagnostic interventions	50,227	13,815	43,237	25.4	543,288	275.0	10.8	14.5	
1867–1908 Therapeutic interventions	379,804	160,306	321,587	192.2	2,818,561	1,426.5	7.4	12.1	
1909–1915 Administrative/clinical/client support interventions	1,238,624	613,445	1,051,097	626.9	4,618,053	2,337.3	3.7	6.4	
1916 Generalised allied health interventions	729,935	32,281	612,634	369.4	8,335,291	4,218.7	11.4	11.9	
1940–2016 Imaging services	326,504	50,297	266,917	165.3	3,190,248	1,614.7	9.8	11.4	
<i>Procedure reported</i>	<i>3,000,596</i>	<i>1,623,422</i>	<i>2,587,540</i>	<i>1,518.7</i>	<i>12,549,525</i>	<i>6,351.7</i>	<i>4.2</i>	<i>7.9</i>	
No procedure or not reported	1,090,375	376,815	968,990	551.9	3,876,935	1,962.2	3.6	4.9	
Total^(b)	4,090,971	2,000,237	3,556,530	2,070.5	16,426,460	8,313.9	4.0	6.9	

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: ALOS—average length of stay.

Table 9.2: Separation^(a) and procedure statistics, by procedure in ICD-10-AM groupings, private hospitals, Australia, 2002-03

Procedure blocks		Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS (days) excluding same day
1-28	Procedures on skull, meninges and brain	3,150	51	2	1.6	33,489	16.9	10.6	10.8
29-59	Procedures on spinal canal and spinal cord structures	32,154	10,591	554	16.3	165,901	84.0	5.2	7.2
60-86	Procedures on peripheral nervous system	37,677	27,166	529	19.1	70,685	35.8	1.9	4.1
110-129	Procedures on parathyroid and thyroid glands	4,997	68	48	2.5	16,933	8.6	3.4	3.4
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	12,731	11,188	219	6.4	15,331	7.8	1.2	2.7
193-203	Procedures on lens	106,784	94,310	2,269	54.0	110,517	55.9	1.0	1.3
204-256	Procedures on retina, conjunctiva and other areas of eye	21,614	16,848	358	10.9	25,929	13.1	1.2	1.9
300-306	Procedures on external ear	2,159	783	68	1.1	2,824	1.4	1.3	1.5
307-333	Procedures on eardrum, middle and inner ear and mastoid	25,116	18,300	503	12.7	29,568	15.0	1.2	1.7
370-389	Procedures on nose and sinuses	31,012	9,545	591	15.7	40,415	20.5	1.3	1.4
390-399	Procedures on tongue, salivary gland and ducts	3,422	1,608	86	1.7	6,906	3.5	2.0	2.9
400-408	Procedures on mouth, palate or uvula	7,743	4,931	128	3.9	10,267	5.2	1.3	1.9
409-422	Procedures on tonsils, adenoids and pharynx	23,642	5,837	629	12.0	27,970	14.2	1.2	1.2
450-490	Dental and orthodontic procedures	84,548	78,875	349	42.8	88,983	45.0	1.1	1.8
520-542	Procedures on larynx and trachea	4,941	3,088	170	2.5	31,594	16.0	6.4	15.4
543-558	Procedures on bronchus, lung and pleura	8,899	3,521	176	4.5	69,106	35.0	7.8	12.2
559-567	Procedures on chest wall, mediastinum and diaphragm	6,048	287	203	3.1	71,085	36.0	11.8	12.3
568-569	Airway management, continuous ventilatory support	11,112	449	339	5.6	101,288	51.3	9.1	9.5
600-638	Procedures on atrium, ventricle, septum and valves	44,117	15,323	526	22.3	157,309	79.6	3.6	4.9
639-666	Other procedures on heart, myocardium and pericardium	17,892	1,642	28	9.1	136,305	69.0	7.6	8.3
667-693	Procedures on coronary arteries and aorta	57,513	17,641	598	29.1	214,967	108.8	3.7	4.9
694-767	Procedures on arteries and veins	43,940	9,661	1,204	22.2	336,187	170.2	7.7	9.5
800-817	Procedures on blood and blood-forming organs	17,436	5,013	254	8.8	91,042	46.1	5.2	6.9
850-869	Procedures on oesophagus	11,097	9,033	219	5.6	26,549	13.4	2.4	8.5
870-890	Procedures on stomach	7,451	939	107	3.8	56,587	28.6	7.6	8.5
891-903	Procedures on small intestine	4,818	814	108	2.4	60,227	30.5	12.5	14.8
904-925	Procedures on large intestine	298,300	271,311	4,596	151.0	456,246	230.9	1.5	6.9
926-927	Procedures on appendix	7,392	60	517	3.7	29,490	14.9	4.0	4.0
928-950	Procedures on rectum and anus	34,967	19,802	708	17.7	106,990	54.2	3.1	5.7
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	27,989	2,358	1,116	14.2	105,319	53.3	3.8	4.0
983-1011	Other procedures on abdomen, peritoneum and hernia	282,174	210,003	5,109	142.8	596,164	301.7	2.1	5.4
1040-1064	Procedures on kidney	109,483	104,091	27,219	55.4	150,173	76.0	1.4	8.5
1065-1129	Procedures on bladder, ureter and urethra	94,296	54,048	3,759	47.7	264,398	133.8	2.8	5.2
1160-1170	Procedures on prostate and seminal vesicle	21,926	6,228	464	11.1	88,191	44.6	4.0	5.2

(continued)

Table 9.2 (continued): Separation^(a) and procedure statistics, by procedure in ICD-10-AM groupings, private hospitals, Australia, 2002–03

Procedure blocks	Separations	Same day separations	Public patient separations	Separations per 10,000 population	Patient days	Patient days per 10,000 population	ALOS (days)	ALOS (days) excluding same day
1171–1176	Procedures on scrotum and tunical vaginalis	1,072	528	76	0.5	1,886	1.0	2.5
1177–1189	Procedures on testis, vas deferens, epididymis, spermatic cord	16,611	12,379	451	8.4	20,806	10.5	2.0
1190–1203	Procedures on penis and other male genital organs	8,083	6,396	390	4.1	11,861	6.0	3.2
1240–1258	Procedures on ovaries and fallopian tubes	24,882	13,394	828	12.6	53,054	26.9	3.5
1259–1273	Procedures on uterus	121,833	94,367	3,264	61.7	202,662	102.6	3.9
1274–1278	Procedures on cervix	14,520	13,151	476	7.3	17,421	8.8	3.1
1279–1288	Procedures on vagina and pelvic floor	18,634	5,351	514	9.4	63,637	32.2	4.4
1289–1299	Procedures on other female genital organs	40,508	35,411	534	20.5	53,031	26.8	3.5
1330–1335	Induction and augmentation of labour	43,783	277	1,721	22.2	216,194	109.4	5.0
1336–1339	Spontaneous vertex, or forceps, vacuum or breech delivery	18,302	42	1,410	9.3	90,832	46.0	5.0
1340	Caesarean delivery	27,348	22	898	13.8	168,283	85.2	6.2
1341–1347	Other obstetric and postpartum procedures	36,853	1,009	1,255	18.7	170,447	86.3	4.7
1360–1371	Procedures on head, facial bones and joints	4,162	2,928	52	2.1	5,416	2.7	2.0
1373–1379	Procedures on neck, thorax and ribs	424	25	1	0.2	5,295	2.7	13.2
1381–1393	Procedures on spinal cord and vertebrae	4,658	282	44	2.4	39,703	20.1	9.0
1394–1406	Procedures on shoulder, scapula and clavicle	24,232	1,751	269	12.3	49,869	25.2	2.1
1408–1438	Procedures on humerus, elbow and forearm	9,899	2,560	666	5.0	24,959	12.6	3.1
1439–1474	Procedures on hand, wrist and phalanges	26,569	16,863	446	13.4	33,686	17.0	1.7
1476–1493	Procedures on hip, pelvis and femur	20,627	590	637	10.4	209,939	106.3	10.4
1495–1524	Procedures on knee, patella, tibia and fibula	90,953	47,820	1,524	46.0	280,088	141.8	5.4
1526–1548	Procedures on ankle, foot and toes	22,417	6,063	485	11.3	64,698	32.7	3.6
1550–1579	Other procedures for musculoskeletal system	61,855	26,773	1,239	31.3	228,726	115.8	5.8
1600–1660	Procedures on skin and subcutaneous tissue	133,286	99,891	2,545	67.5	288,243	145.9	5.6
1661–1718	Plastic, cosmetic and corrective procedures	29,814	14,567	208	15.1	60,893	30.8	3.0
1740–1759	Procedures on breast	27,802	11,358	388	14.1	62,451	31.6	3.1
1780–1799	Chemotherapeutic and radiation oncology procedures	148,643	134,753	4,519	75.2	233,433	118.1	7.1
1820–1866	Diagnostic interventions	44,184	9,562	1,356	22.4	171,881	87.0	4.7
1867–1908	Therapeutic interventions	230,786	131,374	8,732	116.8	1,282,106	648.9	11.6
1909–1915	Administrative/clinical/client support interventions	1,586,096	1,020,476	32,821	802.8	3,547,121	1,795.3	4.5
1916	Generalised allied health interventions	298,967	34,493	10,802	151.3	2,806,332	1,420.4	10.5
1940–2016	Imaging services	104,537	21,062	5,012	52.9	876,546	443.6	10.2
	<i>Procedure reported</i>	<i>2,319,800</i>	<i>1,492,529</i>	<i>82,428</i>	<i>1,174.1</i>	<i>6,216,786</i>	<i>3,146.5</i>	<i>5.7</i>
	No procedure or not reported	243,001	84,594	16,099	123.0	907,154	459.1	5.2
Total^(b)		2,562,801	1,577,123	98,527	1,297.1	7,123,940	3,605.6	5.6

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: Abbreviation: ALOS—average length of stay.

Table 9.3: Separations^(a), by procedure in ICD-10-AM groupings, public hospitals, states and territories, 2002–03

Procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, meninges and brain	2,824	2,426	1,279	823	626	224	217	53	8,472
29–59	Procedures on spinal canal and spinal cord structures	9,770	10,017	5,691	3,720	2,904	766	395	426	33,689
60–86	Procedures on peripheral nervous system	6,999	6,591	3,715	3,585	2,580	541	268	172	24,451
110–129	Procedures on parathyroid and thyroid glands	1,933	1,503	906	379	445	100	77	24	5,367
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	2,497	2,145	1,414	916	707	80	40	102	7,901
193–203	Procedures on lens	16,443	14,332	5,473	5,421	4,761	69	672	394	47,565
204–256	Procedures on retina, conjunctiva and other areas of eye	5,166	4,951	2,277	1,712	1,984	179	108	184	16,561
300–306	Procedures on external ear	804	806	778	335	232	68	45	60	3,128
307–333	Procedures on eardrum, middle and inner ear and mastoid	4,907	7,224	5,031	2,911	2,556	236	363	284	23,512
370–389	Procedures on nose and sinuses	5,104	7,241	3,918	2,218	2,454	222	259	116	21,532
390–399	Procedures on tongue, salivary gland and ducts	1,464	1,160	679	381	336	52	62	46	4,180
400–408	Procedures on mouth, palate or uvula	1,278	1,600	1,003	514	423	105	65	67	5,055
409–422	Procedures on tonsils, adenoids and pharynx	5,636	7,420	3,821	2,135	2,217	210	363	128	21,930
450–490	Dental and orthodontic procedures	6,697	6,568	6,410	3,056	2,727	471	241	431	26,601
520–542	Procedures on larynx and trachea	2,912	2,759	1,790	967	810	163	140	109	9,650
543–558	Procedures on bronchus, lung and pleura	6,959	5,902	4,312	1,912	2,037	678	278	146	22,224
559–567	Procedures on chest wall, mediastinum and diaphragm	6,018	4,590	3,103	1,592	1,446	325	374	169	17,617
568–569	Airway management, continuous ventilatory support	13,422	10,754	6,467	3,381	3,351	799	759	635	39,568
600–638	Procedures on atrium, ventricle, septum and valves	10,958	7,937	5,621	4,604	3,038	593	1,192	225	34,168
639–666	Other procedures on heart, myocardium and pericardium	8,103	6,737	3,975	1,898	2,009	586	539	41	23,888
667–693	Procedures on coronary arteries and aorta	17,887	13,222	8,027	5,724	5,819	1,601	1,815	242	54,337
694–767	Procedures on arteries and veins	26,918	23,245	14,157	7,527	7,651	2,339	2,986	1,094	85,917
800–817	Procedures on blood and blood-forming organs	7,748	8,306	4,998	2,892	2,048	458	696	146	27,292
850–869	Procedures on oesophagus	3,580	2,706	1,864	905	1,251	278	252	88	10,924
870–890	Procedures on stomach	3,864	3,886	2,079	1,074	1,235	227	222	102	12,689
891–903	Procedures on small intestine	2,669	1,873	1,217	689	576	134	141	47	7,346
904–925	Procedures on large intestine	46,577	33,793	19,053	15,910	12,694	1,431	2,522	1,114	133,094
926–927	Procedures on appendix	6,625	5,074	3,361	2,072	1,369	382	410	277	19,570
928–950	Procedures on rectum and anus	11,660	7,563	4,233	2,634	2,694	471	275	290	29,820
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	14,864	11,591	6,835	3,657	3,595	997	814	337	42,690
983–1011	Other procedures on abdomen, peritoneum and hernia	62,747	55,654	31,927	19,800	17,540	2,397	3,088	1,713	194,866
1040–1064	Procedures on kidney	173,357	186,924	95,531	62,658	42,624	13,679	15,178	25,649	615,600
1065–1129	Procedures on bladder, ureter and urethra	29,033	23,516	11,796	9,822	8,600	1,721	1,237	649	86,374
1160–1170	Procedures on prostate and seminal vesicle	3,454	3,645	1,544	909	1,033	297	133	59	11,074

(continued)

Table 9.3 (continued): Separations^(a), by procedure in ICD-10-AM groupings, public hospitals, states and territories, 2002-03

Procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171-1176 Procedures on scrotum and tunical vaginalis	701	623	416	247	178	31	40	33	2,269
1177-1189 Procedures on testis, vas deferens, epididymis, spermatic cord	3,955	4,259	1,576	1,672	1,552	165	105	112	13,396
1190-1203 Procedures on penis and other male genital organs	3,773	3,577	1,033	1,145	1,075	127	70	223	11,023
1240-1258 Procedures on ovaries and fallopian tubes	8,900	8,645	4,196	3,464	2,408	413	294	376	28,696
1259-1273 Procedures on uterus	28,656	31,347	12,781	8,543	12,104	1,254	1,011	1,615	97,311
1274-1278 Procedures on cervix	5,450	6,037	5,413	1,273	1,721	132	184	316	20,526
1279-1288 Procedures on vagina and pelvic floor	5,267	5,558	6,126	1,874	3,513	235	138	72	22,783
1289-1299 Procedures on other female genital organs	5,402	5,839	1,650	1,323	1,715	146	152	141	16,368
1330-1335 Induction and augmentation of labour	32,732	23,571	17,765	8,413	7,252	1,834	1,669	1,147	94,383
1336-1339 Spontaneous vertex, or forceps, vacuum or breech delivery	6,572	4,987	6,948	10,854	1,653	430	405	184	32,033
1340 Caesarean delivery	14,275	10,738	8,196	3,485	3,205	673	634	708	41,914
1341-1347 Other obstetric and postpartum procedures	28,797	19,834	17,043	7,388	6,272	1,408	1,473	1,022	83,237
1360-1371 Procedures on head, facial bones and joints	2,030	1,661	1,346	678	565	204	160	215	6,859
1373-1379 Procedures on neck, thorax and ribs	193	172	111	33	54	13	11	1	588
1381-1393 Procedures on spinal cord and vertebrae	807	820	489	263	184	57	66	0	2,686
1394-1406 Procedures on shoulder, scapula and clavicle	2,936	2,363	1,653	995	743	152	151	68	9,061
1408-1438 Procedures on humerus, elbow and forearm	11,696	7,625	5,497	2,800	2,290	613	707	571	31,799
1439-1474 Procedures on hand, wrist and phalanges	8,806	7,501	4,689	2,946	2,379	572	459	404	27,756
1476-1493 Procedures on hip, pelvis and femur	10,607	7,694	4,455	2,571	2,429	750	597	177	29,280
1495-1524 Procedures on knee, patella, tibia and fibula	12,579	11,096	6,721	3,584	4,218	781	814	514	40,307
1526-1548 Procedures on ankle, foot and toes	6,506	5,308	3,334	1,871	1,640	472	413	308	19,852
1550-1579 Other procedures for musculoskeletal system	17,659	16,258	9,830	5,884	4,098	1,316	957	959	56,961
1600-1660 Procedures on skin and subcutaneous tissue	40,254	39,269	34,326	15,059	19,198	2,509	1,690	2,528	154,833
1661-1718 Plastic, cosmetic and corrective procedures	3,050	4,336	1,892	1,135	1,429	169	132	95	12,238
1740-1759 Procedures on breast	5,435	5,044	2,760	2,370	1,526	305	195	169	17,804
1780-1799 Chemotherapeutic and radiation oncology procedures	12,114	57,385	33,722	18,347	16,876	2,845	5,115	982	147,386
1820-1866 Diagnostic interventions	15,162	8,887	8,792	4,598	11,406	998	293	91	50,227
1867-1908 Therapeutic interventions	119,176	103,138	59,304	35,021	41,988	11,254	6,444	3,479	379,804
1909-1915 Administrative/clinical/client support interventions	402,429	349,148	198,653	123,274	109,719	21,713	20,019	13,669	1,238,624
1916 Generalised allied health interventions	258,671	199,810	112,592	68,341	59,466	13,374	11,769	5,912	729,935
1940-2016 Imaging services	126,502	88,001	46,712	25,033	24,681	7,222	5,348	3,005	326,504
<i>Procedure reported</i>	<i>900,191</i>	<i>868,551</i>	<i>496,845</i>	<i>292,148</i>	<i>278,159</i>	<i>59,364</i>	<i>55,699</i>	<i>49,639</i>	<i>3,000,596</i>
No procedure or not reported	390,983	281,289	205,321	75,677	89,700	20,851	8,044	18,510	1,090,375
Total^(b)	1,291,174	1,149,840	702,166	367,825	367,859	80,215	63,743	68,149	4,090,971

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Table 9.4: Separations^(a), by procedure in ICD-10-AM groupings, private hospitals, states and territories, 2002–03

Procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, meninges and brain	986	893	659	200	273	n.p.	n.p.	n.p.	3,150
29–60	Procedures on spinal canal and spinal cord structures	8,330	6,843	5,564	5,898	3,917	n.p.	n.p.	n.p.	32,154
61–86	Procedures on peripheral nervous system	9,439	8,406	7,010	6,362	4,634	n.p.	n.p.	n.p.	37,677
110–129	Procedures on parathyroid and thyroid glands	1,747	1,090	1,042	481	421	n.p.	n.p.	n.p.	4,997
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	4,101	1,676	3,493	1,360	1,661	n.p.	n.p.	n.p.	12,731
193–203	Procedures on lens	38,718	21,302	23,688	9,290	8,196	n.p.	n.p.	n.p.	106,784
204–256	Procedures on retina, conjunctiva and other areas of eye	6,691	3,901	6,166	2,431	1,374	n.p.	n.p.	n.p.	21,614
300–306	Procedures on external ear	784	388	411	274	194	n.p.	n.p.	n.p.	2,159
307–333	Procedures on eardrum, middle and inner ear and mastoid	7,348	5,315	4,833	3,290	3,324	n.p.	n.p.	n.p.	25,116
370–389	Procedures on nose and sinuses	10,155	6,839	5,379	3,391	3,993	n.p.	n.p.	n.p.	31,012
390–399	Procedures on tongue, salivary gland and ducts	1,143	717	698	437	284	n.p.	n.p.	n.p.	3,422
400–408	Procedures on mouth, palate or uvula	2,201	1,664	1,258	1,405	895	n.p.	n.p.	n.p.	7,743
409–422	Procedures on tonsils, adenoids and pharynx	8,286	4,377	5,287	2,578	2,175	n.p.	n.p.	n.p.	23,642
450–490	Dental and orthodontic procedures	23,560	22,279	16,371	12,356	6,650	n.p.	n.p.	n.p.	84,548
520–542	Procedures on larynx and trachea	1,387	1,154	1,056	620	553	n.p.	n.p.	n.p.	4,941
543–558	Procedures on bronchus, lung and pleura	1,587	2,263	2,882	814	963	n.p.	n.p.	n.p.	8,899
559–567	Procedures on chest wall, mediastinum and diaphragm	1,286	1,604	1,623	662	608	n.p.	n.p.	n.p.	6,048
568–569	Airway management, continuous ventilatory support	3,350	1,685	3,876	453	1,388	n.p.	n.p.	n.p.	11,112
600–638	Procedures on atrium, ventricle, septum and valves	13,676	11,043	10,842	3,639	3,311	n.p.	n.p.	n.p.	44,117
639–666	Other procedures on heart, myocardium and pericardium	6,065	4,913	4,242	895	1,584	n.p.	n.p.	n.p.	17,892
667–693	Procedures on coronary arteries and aorta	18,596	15,235	12,944	4,460	4,066	n.p.	n.p.	n.p.	57,513
694–767	Procedures on arteries and veins	10,241	13,142	10,628	3,865	3,637	n.p.	n.p.	n.p.	43,940
800–817	Procedures on blood and blood-forming organs	4,371	3,901	5,309	1,543	1,391	n.p.	n.p.	n.p.	17,436
850–869	Procedures on oesophagus	2,965	2,108	3,579	632	1,222	n.p.	n.p.	n.p.	11,097
870–890	Procedures on stomach	1,368	2,172	2,016	710	812	n.p.	n.p.	n.p.	7,451
891–903	Procedures on small intestine	1,564	1,065	1,106	500	421	n.p.	n.p.	n.p.	4,818
904–925	Procedures on large intestine	96,862	76,140	71,209	27,797	18,104	n.p.	n.p.	n.p.	298,300
926–927	Procedures on appendix	1,454	1,551	2,278	1,112	574	n.p.	n.p.	n.p.	7,392
928–950	Procedures on rectum and anus	14,014	6,916	6,942	3,084	2,468	n.p.	n.p.	n.p.	34,967
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	8,334	6,403	6,292	3,097	2,519	n.p.	n.p.	n.p.	27,989
983–1011	Other procedures on abdomen, peritoneum and hernia	83,768	77,201	68,482	26,023	18,068	n.p.	n.p.	n.p.	282,174
1040–1064	Procedures on kidney	21,595	18,414	33,517	21,046	14,559	n.p.	n.p.	n.p.	109,483
1065–1129	Procedures on bladder, ureter and urethra	29,510	20,107	19,885	11,411	8,492	n.p.	n.p.	n.p.	94,296
1160–1170	Procedures on prostate and seminal vesicle	7,271	5,873	4,065	2,178	1,314	n.p.	n.p.	n.p.	21,926

(continued)

Table 9.4 (continued): Separations^(a), by procedure in ICD-10-AM groupings, private hospitals, states and territories, 2002–03

Procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171–1176 Procedures on scrotum and tunical vaginalis	356	218	213	137	76	n.p.	n.p.	n.p.	1,072
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	5,585	3,811	3,030	1,693	1,502	n.p.	n.p.	n.p.	16,611
1190–1203 Procedures on penis and other male genital organs	2,967	1,567	1,117	993	917	n.p.	n.p.	n.p.	8,083
1240–1258 Procedures on ovaries and fallopian tubes	7,314	6,211	5,055	3,047	1,921	n.p.	n.p.	n.p.	24,882
1259–1273 Procedures on uterus	35,370	35,231	28,587	11,783	6,525	n.p.	n.p.	n.p.	121,833
1274–1278 Procedures on cervix	4,827	4,307	2,973	1,190	581	n.p.	n.p.	n.p.	14,520
1279–1288 Procedures on vagina and pelvic floor	5,854	4,179	3,741	2,420	1,527	n.p.	n.p.	n.p.	18,634
1289–1299 Procedures on other female genital organs	13,677	10,503	9,371	2,629	2,196	n.p.	n.p.	n.p.	40,508
1330–1335 Induction and augmentation of labour	13,215	11,173	8,218	5,521	3,170	n.p.	n.p.	n.p.	43,783
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	3,452	3,454	3,997	5,803	859	n.p.	n.p.	n.p.	18,302
1340 Caesarean delivery	7,575	6,376	6,459	3,697	1,871	n.p.	n.p.	n.p.	27,348
1341–1347 Other obstetric and postpartum procedures	11,241	9,775	7,167	4,105	2,568	n.p.	n.p.	n.p.	36,853
1360–1371 Procedures on head, facial bones and joints	1,220	984	807	467	512	n.p.	n.p.	n.p.	4,162
1373–1379 Procedures on neck, thorax and ribs	119	115	102	24	54	n.p.	n.p.	n.p.	424
1381–1393 Procedures on spinal cord and vertebrae	1,340	1,259	929	503	395	n.p.	n.p.	n.p.	4,658
1394–1406 Procedures on shoulder, scapula and clavicle	6,751	5,900	4,122	3,761	2,642	n.p.	n.p.	n.p.	24,232
1408–1438 Procedures on humerus, elbow and forearm	2,715	2,288	2,097	1,332	969	n.p.	n.p.	n.p.	9,899
1439–1474 Procedures on hand, wrist and phalanges	7,739	6,188	5,099	3,188	2,934	n.p.	n.p.	n.p.	26,569
1476–1493 Procedures on hip, pelvis and femur	5,605	6,173	3,687	2,190	1,880	n.p.	n.p.	n.p.	20,627
1495–1524 Procedures on knee, patella, tibia and fibula	28,090	22,524	14,603	10,701	10,127	n.p.	n.p.	n.p.	90,953
1526–1548 Procedures on ankle, foot and toes	6,457	6,064	3,466	2,917	2,190	n.p.	n.p.	n.p.	22,417
1550–1579 Other procedures for musculoskeletal system	19,229	16,200	10,097	7,636	5,799	n.p.	n.p.	n.p.	61,855
1600–1660 Procedures on skin and subcutaneous tissue	38,996	28,253	31,313	13,539	14,427	n.p.	n.p.	n.p.	133,286
1661–1718 Plastic, cosmetic and corrective procedures	9,092	7,355	5,701	3,145	3,191	n.p.	n.p.	n.p.	29,814
1740–1759 Procedures on breast	8,165	6,772	5,959	3,137	2,311	n.p.	n.p.	n.p.	27,802
1780–1799 Chemotherapeutic and radiation oncology procedures	27,802	43,808	41,298	16,785	13,308	n.p.	n.p.	n.p.	148,643
1820–1866 Diagnostic interventions	13,160	8,934	10,436	3,310	5,020	n.p.	n.p.	n.p.	44,184
1867–1908 Therapeutic interventions	62,279	49,626	75,608	23,047	13,854	n.p.	n.p.	n.p.	230,786
1909–1915 Administrative/clinical/client support interventions	487,876	378,677	357,618	171,010	120,897	n.p.	n.p.	n.p.	1,586,096
1916 Generalised allied health interventions	91,091	79,367	63,873	21,963	31,946	n.p.	n.p.	n.p.	298,967
1940–2016 Imaging services	27,607	25,604	26,462	11,992	8,378	n.p.	n.p.	n.p.	104,537
<i>Procedure reported</i>	668,561	577,131	545,201	250,493	186,205	n.p.	n.p.	n.p.	2,319,800
No procedure or not reported	40,415	73,975	56,964	30,105	25,506	n.p.	n.p.	n.p.	243,001
Total^(b)	708,976	651,106	602,165	280,598	211,711	n.p.	n.p.	n.p.	2,562,801

(a) Separations for which the care type was reported as *Newborn with no qualified days*, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

n.p. Not published.

Table 9.5: Separations^(a), by number of procedures reported and hospital sector, states and territories, 2002–03

Hospital sector	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
	Number								
Public hospitals									
Separations ^(b)	1,291,174	1,149,840	702,166	367,825	367,859	80,215	63,743	68,149	4,090,971
No procedure reported	390,968	281,289	205,321	75,677	89,700	20,851	8,044	18,510	1,090,360
One procedure code only	339,784	376,393	221,272	124,617	124,944	28,330	28,514	31,953	1,275,807
Two procedure codes only	253,501	243,433	139,003	80,607	79,050	15,182	12,402	9,701	832,879
Three procedure codes only	140,351	114,200	63,847	40,149	37,630	6,934	6,616	4,013	413,740
Four procedure codes only	67,517	55,891	29,377	19,258	16,139	3,466	3,122	1,599	196,369
Five or more procedure codes	99,053	78,634	43,346	27,517	20,396	5,452	5,045	2,373	281,816
Mean procedure codes per separation ^(c)	2.5	2.3	2.3	2.3	2.2	2.3	2.2	1.8	2.3
Maximum number of procedure codes	20	25	31	31	25	30	25	30	31
Private hospitals									
Separations ^(b)	708,976	651,106	602,165	280,598	211,711	n.p.	n.p.	n.p.	2,562,801
No procedure reported	40,415	73,975	56,964	30,106	25,506	n.p.	n.p.	n.p.	243,000
One procedure code only	121,442	142,578	126,560	57,712	47,159	n.p.	n.p.	n.p.	510,305
Two procedure codes only	281,284	245,709	235,651	103,274	67,685	n.p.	n.p.	n.p.	974,747
Three procedure codes only	152,839	105,028	105,402	46,878	35,844	n.p.	n.p.	n.p.	466,737
Four procedure codes only	56,526	38,982	34,934	19,412	14,837	n.p.	n.p.	n.p.	172,639
Five or more procedure codes	56,470	44,834	42,654	23,216	20,680	n.p.	n.p.	n.p.	195,373
Mean procedure codes per separation ^(c)	2.6	2.4	2.4	2.5	2.6	n.p.	n.p.	n.p.	2.5
Maximum number of procedure codes	20	25	31	31	25	n.p.	n.p.	n.p.	31
Per cent									
Public hospitals									
No procedure reported	30.3	24.5	29.2	20.6	24.4	26.0	12.6	27.2	26.7
One procedure code only	26.3	32.7	31.5	33.9	34.0	35.3	44.7	46.9	31.2
Two procedure codes only	19.6	21.2	19.8	21.9	21.5	18.9	19.5	14.2	20.4
Three procedure codes only	10.9	9.9	9.1	10.9	10.2	8.6	10.4	5.9	10.1
Four procedure codes only	5.2	4.9	4.2	5.2	4.4	4.3	4.9	2.3	4.8
Five or more procedure codes	7.7	6.8	6.2	7.5	5.5	6.8	7.9	3.5	6.9
Private hospitals									
No procedure reported	5.7	11.4	9.5	10.7	12.0	n.p.	n.p.	n.p.	9.5
One procedure code only	17.1	21.9	21.0	20.6	22.3	n.p.	n.p.	n.p.	19.9
Two procedure codes only	39.7	37.7	39.1	36.8	32.0	n.p.	n.p.	n.p.	38.0
Three procedure codes only	21.6	16.1	17.5	16.7	16.9	n.p.	n.p.	n.p.	18.2
Four procedure codes only	8.0	6.0	5.8	6.9	7.0	n.p.	n.p.	n.p.	6.7
Five or more procedure codes	8.0	6.9	7.1	8.3	9.8	n.p.	n.p.	n.p.	7.6

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) Includes separations for which no procedure codes were reported.

(c) Means are for separations with one or more procedures.

n.p. Not published.

Note: AIHW requested up to 31 procedure codes to be reported.

Table 9.6: Number of procedures^(a), by ICD-10-AM groupings, public hospitals, states and territories, 2002–03

Procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1–28	Procedures on skull, meninges and brain	4,526	4,058	2,091	1,361	841	389	366	81	13,632
29–59	Procedures on spinal canal and spinal cord structures	10,761	11,250	6,666	4,830	3,207	906	463	447	38,083
60–86	Procedures on peripheral nervous system	7,776	7,397	4,508	4,442	2,720	588	292	194	27,723
110–129	Procedures on parathyroid and thyroid glands	2,104	1,620	985	456	479	107	87	25	5,838
160–192	Procedures on eyeball, cornea, sclera, iris and ciliary body	2,968	2,341	1,666	1,030	748	85	41	109	8,879
193–203	Procedures on lens	16,513	14,393	5,520	5,450	4,777	69	673	399	47,395
204–256	Procedures on retina, conjunctiva and other areas of eye	6,623	6,118	2,852	2,075	2,289	198	124	219	20,279
300–306	Procedures on external ear	850	846	806	358	248	80	49	63	3,237
307–333	Procedures on eardrum, middle and inner ear and mastoid	5,636	7,912	5,459	3,169	2,798	263	409	307	25,646
370–389	Procedures on nose and sinuses	9,036	13,577	5,736	3,834	4,149	383	498	185	37,213
390–399	Procedures on tongue, salivary gland and ducts	1,512	1,205	708	413	347	54	67	50	4,306
400–408	Procedures on mouth, palate or uvula	1,314	1,682	1,083	533	443	114	68	72	5,237
409–422	Procedures on tonsils, adenoids and pharynx	5,743	7,533	3,895	2,185	2,281	215	373	139	22,225
450–490	Dental and orthodontic procedures	23,917	19,572	24,268	13,229	6,272	1,657	714	1,786	89,629
520–542	Procedures on larynx and trachea	3,252	3,112	2,007	1,157	920	181	162	117	10,791
543–558	Procedures on bronchus, lung and pleura	7,926	7,105	4,891	2,136	2,318	745	341	164	25,462
559–567	Procedures on chest wall, mediastinum and diaphragm	7,079	5,436	3,725	2,000	1,692	365	442	211	20,739
568–569	Airway management, continuous ventilatory support	25,167	21,111	12,229	6,611	6,552	1,555	1,488	1,334	74,713
600–638	Procedures on atrium, ventricle, septum and valves	11,561	8,758	6,034	4,820	3,072	612	1,204	225	36,061
639–666	Other procedures on heart, myocardium and pericardium	11,983	9,999	5,682	2,922	2,874	957	799	64	35,216
667–693	Procedures on coronary arteries and aorta	25,123	19,061	11,183	7,701	7,133	2,419	2,230	242	74,850
694–767	Procedures on arteries and veins	35,851	29,750	18,938	9,822	9,898	3,230	3,555	1,442	111,044
800–817	Procedures on blood and blood-forming organs	8,289	8,682	5,354	3,118	2,175	492	745	151	28,855
850–869	Procedures on oesophagus	3,798	2,917	1,981	991	1,314	290	283	98	11,574
870–890	Procedures on stomach	4,255	4,233	2,254	1,226	1,368	246	248	117	13,830
891–903	Procedures on small intestine	3,058	2,245	1,438	845	659	146	165	56	8,556
904–925	Procedures on large intestine	48,265	35,014	19,879	16,425	13,220	1,510	2,620	1,157	136,933
926–927	Procedures on appendix	6,656	5,079	3,373	2,075	1,382	382	418	278	19,365
928–950	Procedures on rectum and anus	13,722	8,962	4,894	3,162	3,017	535	318	333	34,610
951–982	Procedures on liver, gallbladder, biliary tract and pancreas	24,319	16,450	11,088	5,446	5,539	1,457	1,196	471	65,495
983–1011	Other procedures on abdomen, peritoneum and hernia	67,407	59,297	34,530	21,205	18,608	2,587	3,298	1,826	206,932
1040–1064	Procedures on kidney	174,917	187,867	96,154	63,036	42,906	13,753	15,256	25,714	593,889
1065–1129	Procedures on bladder, ureter and urethra	39,249	28,800	15,238	12,620	10,737	2,254	1,704	820	110,602
1160–1170	Procedures on prostate and seminal vesicle	3,559	3,704	1,587	926	1,055	309	150	62	11,290

(continued)

Table 9.6 (continued): Number of procedures^(a), by ICD-10-AM groupings, public hospitals, states and territories, 2002-03

Procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171-1176 Procedures on scrotum and tunical vaginalis	720	640	425	261	184	32	41	33	2,303
1177-1189 Procedures on testis, vas deferens, epididymis, spermatic cord	4,158	4,483	1,678	1,766	1,623	190	107	116	14,005
1190-1203 Procedures on penis and other male genital organs	3,923	3,698	1,074	1,213	1,116	136	76	226	11,236
1240-1258 Procedures on ovaries and fallopian tubes	9,624	9,409	4,601	3,915	2,655	434	318	412	30,956
1259-1273 Procedures on uterus	39,142	42,222	18,323	11,370	15,368	1,559	1,430	1,875	129,414
1274-1278 Procedures on cervix	6,423	6,752	5,882	1,450	1,835	144	208	337	22,694
1279-1288 Procedures on vagina and pelvic floor	5,899	6,251	6,503	2,129	3,695	264	154	80	24,895
1289-1299 Procedures on other female genital organs	5,668	6,665	1,747	1,428	1,763	148	160	159	17,579
1330-1335 Induction and augmentation of labour	41,721	30,315	22,992	11,664	10,410	2,372	2,273	1,375	121,747
1336-1339 Spontaneous vertex, or forceps, vacuum or breech delivery	7,007	5,430	7,112	11,098	1,756	461	446	204	33,310
1340 Caesarean delivery	14,293	10,745	8,201	3,486	3,207	675	634	708	41,241
1341-1347 Other obstetric and postpartum procedures	32,861	23,445	20,864	8,521	7,253	1,561	1,650	1,180	96,155
1360-1371 Procedures on head, facial bones and joints	2,348	1,891	1,547	845	638	229	180	297	7,678
1373-1379 Procedures on neck, thorax and ribs	243	232	125	35	60	15	12	1	722
1381-1393 Procedures on spinal cord and vertebrae	1,354	1,373	834	428	286	83	101	0	4,459
1394-1406 Procedures on shoulder, scapula and clavicle	3,126	2,565	1,817	1,110	846	160	174	76	9,798
1408-1438 Procedures on humerus, elbow and forearm	14,426	9,447	6,914	3,390	2,767	756	912	739	38,612
1439-1474 Procedures on hand, wrist and phalanges	10,991	10,074	5,732	4,027	3,008	759	588	563	35,179
1476-1493 Procedures on hip, pelvis and femur	11,239	8,332	4,820	2,820	2,538	807	648	235	31,204
1495-1524 Procedures on knee, patella, tibia and fibula	14,038	12,677	7,585	4,187	4,649	903	931	639	44,970
1526-1548 Procedures on ankle, foot and toes	8,005	7,137	4,179	2,418	2,086	583	557	396	24,965
1550-1579 Other procedures for musculoskeletal system	21,044	21,372	11,941	7,436	4,761	1,601	1,129	1,310	69,284
1600-1660 Procedures on skin and subcutaneous tissue	58,527	58,221	52,501	23,411	28,518	3,611	2,409	3,695	227,198
1661-1718 Plastic, cosmetic and corrective procedures	3,747	5,337	2,322	1,437	1,783	219	163	108	15,008
1740-1759 Procedures on breast	6,991	6,291	3,516	3,221	1,784	390	228	205	22,421
1780-1799 Chemotherapeutic and radiation oncology procedures	13,320	60,375	35,788	19,460	18,669	2,901	5,204	983	155,717
1820-1866 Diagnostic interventions	20,348	9,652	9,175	4,886	11,877	1,007	294	95	57,239
1867-1908 Therapeutic interventions	155,870	123,332	73,152	44,350	48,641	13,025	7,946	4,396	466,316
1909-1915 Administrative/clinical/client support interventions	467,755	392,444	229,045	142,806	122,532	26,604	23,499	15,195	1,404,685
1916 Generalised allied health interventions	470,475	423,052	184,720	114,019	94,677	23,695	21,673	9,515	1,332,311
1940-2016 Imaging services	173,721	116,991	60,124	32,835	31,536	9,773	7,379	3,625	432,359
Total procedures	2,253,722	1,987,936	1,123,941	683,031	600,559	134,230	122,370	87,736	6,905,789

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

Table 9.7: Number of procedures^(a), by ICD-10-AM groupings, private hospitals, states and territories, 2002-03

Procedure blocks		NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1-28	Procedures on skull, meninges and brain	1,853	1,549	1,220	345	462	n.p.	n.p.	n.p.	5,653
29-59	Procedures on spinal canal and spinal cord structures	11,436	8,962	7,953	8,757	4,983	n.p.	n.p.	n.p.	44,240
60-86	Procedures on peripheral nervous system	11,133	10,138	10,354	7,759	5,162	n.p.	n.p.	n.p.	46,839
110-129	Procedures on parathyroid and thyroid glands	1,937	1,168	1,130	560	462	n.p.	n.p.	n.p.	5,495
160-192	Procedures on eyeball, cornea, sclera, iris and ciliary body	4,394	1,753	3,858	1,472	2,294	n.p.	n.p.	n.p.	14,233
193-203	Procedures on lens	38,908	24,736	23,763	9,310	8,215	n.p.	n.p.	n.p.	110,535
204-256	Procedures on retina, conjunctiva and other areas of eye	9,534	5,003	9,111	3,092	1,787	n.p.	n.p.	n.p.	29,865
300-306	Procedures on external ear	857	415	470	288	210	n.p.	n.p.	n.p.	2,355
307-333	Procedures on eardrum, middle and inner ear and mastoid	8,124	5,689	5,226	3,535	3,627	n.p.	n.p.	n.p.	27,303
370-389	Procedures on nose and sinuses	22,846	13,305	13,113	7,018	10,264	n.p.	n.p.	n.p.	69,697
390-399	Procedures on tongue, salivary gland and ducts	1,206	736	740	456	292	n.p.	n.p.	n.p.	3,580
400-408	Procedures on mouth, palate or uvula	2,977	2,068	1,597	1,851	1,355	n.p.	n.p.	n.p.	10,215
409-422	Procedures on tonsils, adenoids and pharynx	8,395	4,417	5,324	2,608	2,210	n.p.	n.p.	n.p.	23,973
450-490	Dental and orthodontic procedures	66,313	52,122	43,854	33,788	19,948	n.p.	n.p.	n.p.	227,211
520-542	Procedures on larynx and trachea	1,457	1,308	1,133	642	607	n.p.	n.p.	n.p.	5,327
543-558	Procedures on bronchus, lung and pleura	2,017	2,917	3,464	903	1,206	n.p.	n.p.	n.p.	10,957
559-567	Procedures on chest wall, mediastinum and diaphragm	1,537	1,992	2,082	790	850	n.p.	n.p.	n.p.	7,554
568-569	Airway management, continuous ventilatory support	4,266	2,581	5,119	836	1,891	n.p.	n.p.	n.p.	15,200
600-638	Procedures on atrium, ventricle, septum and valves	14,126	11,664	11,387	3,701	3,385	n.p.	n.p.	n.p.	45,869
639-666	Other procedures on heart, myocardium and pericardium	9,217	7,758	6,708	1,359	2,282	n.p.	n.p.	n.p.	27,691
667-693	Procedures on coronary arteries and aorta	26,610	20,254	18,302	5,495	5,601	n.p.	n.p.	n.p.	78,759
694-767	Procedures on arteries and veins	14,735	17,467	14,302	4,926	4,782	n.p.	n.p.	n.p.	59,519
800-817	Procedures on blood and blood-forming organs	4,646	4,088	5,485	1,647	1,491	n.p.	n.p.	n.p.	18,326
850-869	Procedures on oesophagus	3,040	2,156	3,639	657	1,264	n.p.	n.p.	n.p.	11,357
870-890	Procedures on stomach	1,469	2,406	2,276	793	876	n.p.	n.p.	n.p.	8,213
891-903	Procedures on small intestine	1,679	1,281	1,265	589	473	n.p.	n.p.	n.p.	5,473
904-925	Procedures on large intestine	98,525	77,663	72,647	28,353	18,427	n.p.	n.p.	n.p.	303,996
926-927	Procedures on appendix	1,456	1,554	2,281	1,112	575	n.p.	n.p.	n.p.	7,403
928-950	Procedures on rectum and anus	16,935	8,008	8,169	3,638	2,766	n.p.	n.p.	n.p.	41,293
951-982	Procedures on liver, gallbladder, biliary tract and pancreas	14,629	9,861	10,879	5,258	4,140	n.p.	n.p.	n.p.	46,880
983-1011	Other procedures on abdomen, peritoneum and hernia	86,383	79,304	71,548	27,056	18,806	n.p.	n.p.	n.p.	292,115
1040-1064	Procedures on kidney	21,823	18,603	33,707	21,113	14,684	n.p.	n.p.	n.p.	110,331
1065-1129	Procedures on bladder, ureter and urethra	42,193	25,436	25,901	15,274	11,450	n.p.	n.p.	n.p.	126,999
1160-1170	Procedures on prostate and seminal vesicle	7,551	6,047	4,154	2,203	1,359	n.p.	n.p.	n.p.	22,616

(continued)

Table 9.7 (continued): Number of procedures^(a), by ICD-10-AM groupings, private hospitals, states and territories, 2002–03

Procedure blocks	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1171–1176 Procedures on scrotum and tunical vaginalis	362	231	216	142	78	n.p.	n.p.	n.p.	1,103
1177–1189 Procedures on testis, vas deferens, epididymis, spermatic cord	5,934	4,003	3,241	1,800	1,600	n.p.	n.p.	n.p.	17,649
1190–1203 Procedures on penis and other male genital organs	3,219	1,642	1,186	1,092	953	n.p.	n.p.	n.p.	8,624
1240–1258 Procedures on ovaries and fallopian tubes	8,112	6,835	5,750	3,359	2,114	n.p.	n.p.	n.p.	27,620
1259–1273 Procedures on uterus	47,835	47,182	35,978	15,881	9,498	n.p.	n.p.	n.p.	162,649
1274–1278 Procedures on cervix	5,715	4,847	3,205	1,305	636	n.p.	n.p.	n.p.	16,448
1279–1288 Procedures on vagina and pelvic floor	7,131	5,141	4,356	2,760	1,894	n.p.	n.p.	n.p.	22,339
1289–1299 Procedures on other female genital organs	14,073	10,830	9,586	2,777	2,261	n.p.	n.p.	n.p.	41,702
1330–1335 Induction and augmentation of labour	18,857	15,831	12,046	8,747	5,032	n.p.	n.p.	n.p.	63,772
1336–1339 Spontaneous vertex, or forceps, vacuum or breech delivery	3,727	3,759	4,120	5,944	917	n.p.	n.p.	n.p.	19,270
1340 Caesarean delivery	7,577	6,378	6,465	3,697	1,871	n.p.	n.p.	n.p.	27,360
1341–1347 Other obstetric and postpartum procedures	12,307	10,812	7,996	4,472	2,938	n.p.	n.p.	n.p.	40,743
1360–1371 Procedures on head, facial bones and joints	1,381	1,073	942	523	570	n.p.	n.p.	n.p.	4,674
1373–1379 Procedures on neck, thorax and ribs	173	135	133	29	61	n.p.	n.p.	n.p.	541
1381–1393 Procedures on spinal cord and vertebrae	2,499	1,954	1,634	901	660	n.p.	n.p.	n.p.	8,086
1394–1406 Procedures on shoulder, scapula and clavicle	7,819	7,367	4,982	4,064	3,935	n.p.	n.p.	n.p.	29,372
1408–1438 Procedures on humerus, elbow and forearm	3,275	2,868	2,522	1,594	1,279	n.p.	n.p.	n.p.	12,145
1439–1474 Procedures on hand, wrist and phalanges	10,276	9,311	7,071	4,377	4,420	n.p.	n.p.	n.p.	37,525
1476–1493 Procedures on hip, pelvis and femur	6,057	6,622	3,928	2,284	2,068	n.p.	n.p.	n.p.	22,108
1495–1524 Procedures on knee, patella, tibia and fibula	32,682	26,045	16,645	12,623	12,490	n.p.	n.p.	n.p.	106,227
1526–1548 Procedures on ankle, foot and toes	10,431	9,478	4,947	4,342	3,894	n.p.	n.p.	n.p.	35,030
1550–1579 Other procedures for musculoskeletal system	23,017	19,864	12,211	9,242	6,810	n.p.	n.p.	n.p.	74,569
1600–1660 Procedures on skin and subcutaneous tissue	71,573	52,702	68,995	24,496	29,179	n.p.	n.p.	n.p.	259,115
1661–1718 Plastic, cosmetic and corrective procedures	13,124	10,803	8,584	5,231	4,319	n.p.	n.p.	n.p.	44,005
1740–1759 Procedures on breast	10,737	8,376	7,909	4,192	2,777	n.p.	n.p.	n.p.	35,781
1780–1799 Chemotherapeutic and radiation oncology procedures	28,234	45,199	42,901	17,033	14,426	n.p.	n.p.	n.p.	153,537
1820–1866 Diagnostic interventions	14,785	9,150	11,710	3,350	5,050	n.p.	n.p.	n.p.	47,442
1867–1908 Therapeutic interventions	72,498	54,410	100,126	30,502	15,593	n.p.	n.p.	n.p.	280,216
1909–1915 Administrative/clinical/client support interventions	543,563	418,727	395,010	193,989	134,764	n.p.	n.p.	n.p.	1,763,825
1916 Generalised allied health interventions	136,384	116,054	82,074	35,688	39,882	n.p.	n.p.	n.p.	423,986
1940–2016 Imaging services	33,936	33,100	34,705	15,145	10,318	n.p.	n.p.	n.p.	132,694
Total procedures	1,721,500	1,385,138	1,333,335	628,765	480,473	n.p.	n.p.	n.p.	5,787,229

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

n.p. Not published.

Table 9.8: Separation^(a) and procedure statistics for the 30 ICD-10-AM procedure blocks with the highest number of overnight separations, public hospitals, Australia, 2002–03

Procedure block	Separations	Public patient separations	Patient days	ALOS (days)	Total procedures reported
1916 Generalised allied health interventions	697,654	583,246	8,303,010	11.9	1,298,871
1910 Cerebral anaesthesia	520,587	437,318	3,370,243	6.5	583,279
1909 Conduction anaesthesia	139,377	118,417	1,026,493	7.4	144,425
1893 Transfusion of blood and gamma globulin	101,430	82,456	1,400,033	13.8	121,134
1952 Computerised tomography of brain	101,197	81,618	1,247,373	12.3	104,127
1885 Injection or infusion of therapeutic or prophylactic substance	68,552	56,864	914,866	13.3	87,812
1912 Postprocedural analgesia	54,186	45,105	478,464	8.8	55,536
1344 Postpartum suture	49,967	45,737	168,841	3.4	50,683
1334 Medical or surgical induction of labour	43,186	39,240	175,143	4.1	44,326
1340 Caesarean section	41,762	36,936	227,745	5.5	41,797
1335 Medical or surgical augmentation of labour	39,584	36,549	135,104	3.4	39,653
738 Venous catheterisation	38,853	31,889	841,000	21.6	44,046
1963 Computerised tomography of abdomen and pelvis	35,140	28,309	420,860	12.0	35,949
1333 Analgesia and anaesthesia during labour and caesarean section	34,210	30,482	149,598	4.4	34,279
668 Coronary angiography	27,130	22,111	187,899	6.9	27,431
569 Continuous ventilatory support	26,269	21,247	559,128	21.3	50,301
1962 Computerised tomography of abdomen	25,765	21,376	282,623	11.0	26,281
965 Cholecystectomy	24,044	21,691	111,277	4.6	24,102
2015 Magnetic resonance imaging	23,484	18,790	359,693	15.3	25,443
1960 Computerised tomography of chest	20,356	16,487	291,403	14.3	20,834
607 Examination procedures on ventricle	19,611	15,974	129,698	6.6	19,671
926 Appendicectomy	19,384	16,771	77,636	4.0	19,453
1343 Other procedures associated with delivery	18,920	16,532	72,998	3.9	18,990
2006 Lung perfusion or ventilation study	18,750	15,015	217,314	11.6	18,903
1008 Panendoscopy with excision	18,244	15,286	189,939	10.4	18,540
1780 Chemotherapy administration	18,057	14,911	175,233	9.7	19,122
957 Examination of gallbladder or biliary tract	17,014	15,193	82,517	4.8	17,594
568 Repair of wound of skin and subcutaneous tissue	16,526	13,415	328,410	19.9	19,759
1635 Airway management	16,523	12,389	117,292	7.1	19,163
1341 Foetal monitoring	16,248	15,353	65,196	4.0	16,869
Other	1,245,835	1,027,605	13,017,970	10.4	1,325,176
Total No procedure or not reported	713,560	625,353	3,500,120	4.9	..
Total^(b)	2,090,734	1,790,838	14,426,223	6.9	4,373,549

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: A similar listing of all procedures in ICD-10-AM blocks is provided on the Internet at <http://www.aihw.gov.au>.

.. Not applicable.

Table 9.9: Separation^(a) and procedure statistics for the 30 ICD-10-AM procedure blocks with the highest number of overnight separations, private hospitals, Australia, 2002–03

Procedure block	Separations	Public patient separations	Patient days	ALOS (days)	Total procedures reported
1910 Cerebral anaesthesia	491,844	11,850	2,116,051	4.3	519,413
1916 Generalised allied health interventions	264,474	10,719	2,771,839	10.5	381,876
1909 Conduction anaesthesia	120,219	3,002	740,529	6.2	123,985
1912 Postprocedural analgesia	55,190	1,973	417,123	7.6	56,335
1893 Transfusion of blood and gamma globulin	51,669	1,672	588,806	11.4	58,103
668 Coronary angiography	30,265	56	134,422	4.4	30,655
1340 Caesarean section	27,326	898	168,261	6.2	27,338
607 Examination procedures on ventricle	26,057	20	112,321	4.3	26,124
1333 Analgesia and anaesthesia during labour and caesarean section	24,495	707	128,946	5.3	24,534
1828 Sleep study	24,088	184	26,593	1.1	24,252
1334 Medical or surgical induction of labour	22,767	884	114,430	5.0	23,189
1344 Postpartum suture	22,208	809	102,843	4.6	22,321
965 Cholecystectomy	21,016	919	68,627	3.3	21,056
990 Repair of inguinal hernia	20,232	398	36,553	1.8	20,293
1952 Computerised tomography of brain	17,737	1,369	230,833	13.0	18,206
412 Tonsillectomy or adenoidectomy	17,110	351	18,888	1.1	17,126
957 Examination of gallbladder or biliary tract	16,017	730	50,199	3.1	16,255
1620 Excision of lesion of skin and subcutaneous tissue	15,664	183	59,777	3.8	29,344
1335 Injection or infusion of therapeutic or prophylactic substance	15,650	657	74,826	4.8	15,678
1885 Medical or surgical augmentation of labour	15,467	856	176,919	11.4	17,339
1518 Arthroplasty of knee	15,447	450	132,359	8.6	15,791
986 Division of abdominal adhesions	14,043	391	101,454	7.2	14,200
1489 Arthroplasty of hip	13,151	370	129,228	9.8	13,224
1343 Other procedures associated with delivery	13,076	287	64,339	4.9	13,103
1165 Transluminal coronary angioplasty with stenting	11,989	379	57,942	4.8	12,026
671 Transurethral prostatectomy	11,962	5	41,489	3.5	12,197
1780 Chemotherapy administration	11,830	171	75,142	6.4	12,316
905 Fiberoptic colonoscopy	11,787	322	67,983	5.8	12,003
379 Repair of nasal septum	11,388	119	14,698	1.3	11,447
197 Examination procedures on bladder	11,304	146	14,530	1.3	11,312
Other	908,855	25,760	6,205,707	6.8	980,015
No procedure or not reported	158,407	12,776	907,154	5.7	..
Total^(b)	985,678	39,960	5,546,817	5.6	2,581,056

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: A similar listing of all procedures in ICD-10-AM blocks is provided on the Internet at <http://www.aihw.gov.au>.

.. Not applicable.

Table 9.10: Separation^(a) and procedure statistics for the 30 ICD-10-AM procedure blocks with the highest number of same day separations, public hospitals, Australia, 2002-03

Procedure block		Separations	Public patient separations	Separations per 10,000 population	Total procedures reported
1060	Haemodialysis	586,132	523,447	299.0	586,325
1910	Cerebral anaesthesia	537,291	457,915	274.1	538,113
1780	Chemotherapy administration	116,852	104,091	59.6	119,620
1909	Conduction anaesthesia	91,382	78,420	46.6	91,828
1885	Injection or infusion of therapeutic or prophylactic substance	66,779	57,844	34.1	68,882
1008	Panendoscopy with excision	59,725	52,736	30.5	60,031
905	Fibreoptic colonoscopy	58,314	51,648	29.7	58,350
1620	Excision of lesion of skin and subcutaneous tissue	44,607	39,437	22.8	63,641
911	Fibreoptic colonoscopy with excision	41,879	37,401	21.4	42,999
1893	Transfusion of blood and gamma globulin	41,699	35,798	21.3	43,200
197	Extracapsular crystalline lens extraction by phacoemulsification	40,369	32,590	20.6	40,387
1265	Curettage of uterus	36,505	32,325	18.6	36,528
1916	Generalised allied health interventions	32,281	29,388	16.5	42,955
1259	Evacuation of gravid uterus	25,568	22,233	13.0	25,588
1267	Examination procedures on uterus	25,568	22,006	13.0	26,142
1089	Examination procedures on bladder	24,368	21,944	12.4	24,381
1005	Panendoscopy	22,880	20,156	11.7	22,891
1952	Computerised tomography of brain	17,184	15,075	8.8	17,214
1890	Therapeutic interventions on cardiovascular system	16,261	14,298	8.3	16,471
1275	Destruction procedures on cervix	12,536	11,285	6.4	13,309
668	Coronary angiography	12,221	9,937	6.2	12,223
309	Myringotomy	12,006	9,941	6.1	12,142
1279	Examination procedures on vagina	11,577	10,862	5.9	11,595
458	Surgical removal of tooth	11,108	7,071	5.7	22,079
1635	Repair of wound of skin and subcutaneous tissue	10,905	9,523	5.6	11,714
1554	Other application, insertion or removal procedures on other musculoskeletal sites	10,431	8,933	5.3	10,898
607	Examination procedures on ventricle	10,355	8,376	5.3	10,365
76	Release of carpal and tarsal tunnel	10,267	9,087	5.2	10,671
1888	Hyperbaric oxygen therapy	9,842	7,091	5.0	9,842
1907	Electroconvulsive therapy	9,345	8,861	4.8	9,345
	Other	507,554	433,065	258.9	560,247
Total	No procedure or not reported	376,815	343,637	190.7	..
Total^(b)		2,000,237	1,765,692	1,012.4	2,619,976

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procuremen* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table

Note: A similar listing of all procedures in ICD-10-AM blocks is provided on the Internet at <http://www.aihw.gov.au>

.. Not applicable.

Table 9.11: Separation^(a) and procedure statistics for the 30 ICD-10-AM procedure blocks with the highest number of same day separations, private hospitals, Australia, 2002–03

Procedure block		Separations	Public patient separations	Separations per 10,000 population	Total procedures reported
1910	Cerebral anaesthesia	933,778	15,224	472.6	934,629
905	Fibreoptic colonoscopy	154,100	1,893	78.0	154,142
1008	Panendoscopy with excision	148,771	1,867	75.3	149,470
1780	Chemotherapy administration	131,084	4,138	66.3	134,311
1909	Conduction anaesthesia	120,137	4,041	60.8	122,183
911	Fibreoptic colonoscopy with excision	116,449	1,817	58.9	119,168
1060	Haemodialysis	103,439	27,024	52.4	103,454
197	Extracapsular crystalline lens extraction by phacoemulsification	86,070	2,053	43.6	86,097
1620	Excision of lesion of skin and subcutaneous tissue	77,890	1,095	39.4	126,643
458	Surgical removal of tooth	64,585	161	32.7	142,157
1267	Evacuation of gravid uterus	45,233	1,100	22.9	45,340
1005	Panendoscopy	41,829	647	21.2	41,831
1885	Injection or infusion of therapeutic or prophylactic substance	41,273	2,680	20.9	45,934
1265	Curettage of uterus	38,527	1,082	19.5	38,547
1916	Generalised allied health interventions	34,493	83	17.5	42,110
1259	Examination procedures on uterus	30,553	632	15.5	30,569
1089	Examination procedures on bladder	29,829	1,201	15.1	29,834
1890	Therapeutic interventions on cardiovascular system	26,213	329	13.3	26,286
1297	Procedures for reproductive medicine	26,038	237	13.2	26,100
1873	Psychological/psychosocial therapies	23,005	1	11.6	24,021
1517	Arthroscopic meniscectomy of knee with repair	22,976	242	11.6	23,347
668	Coronary angiography	17,478	540	8.8	18,309
1893	Transfusion of blood and gamma globulin	16,516	534	8.4	17,146
1651	Local skin flap, simple and small, single stage	16,463	110	8.3	18,392
309	Myringotomy	15,747	308	8.0	15,872
607	Examination procedures on ventricle	15,196	506	7.7	15,203
76	Release of carpal and tarsal tunnel	14,798	270	7.5	15,982
941	Procedures for haemorrhoids	13,640	126	6.9	15,165
1503	Arthroscopic excision of knee	13,323	159	6.7	14,024
457	Non-surgical removal of tooth	10,601	158	5.4	18,662
	Other	554,742	12,992	280.8	611,245
Total	No procedure or not reported	84,594	3,323	42.8	..
Total^(b)		1,577,123	58,567	798.2	3,206,173

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Note: A similar listing of all procedures in ICD-10-AM blocks is provided on the Internet at <http://www.aihw.gov.au>.

.. Not applicable.

Table 9.12: Separation^(a) and procedure statistics for the 30 ICD-10-AM procedure blocks with the highest number of separations, private free-standing day hospitals, Australia,^(b) 2002-03

Procedure block		Separations	Same day separations	Public patient separations	Separations per 10,000 population	Total procedures reported
1910	Cerebral anaesthesia	269,972	269,891	820	136.6	270,303
1008	Panendoscopy with excision	63,756	63,756	0	32.3	64,008
905	Fibreoptic colonoscopy	62,420	62,419	92	31.6	62,435
1909	Conduction anaesthesia	47,820	47,819	554	24.2	48,929
911	Fibreoptic colonoscopy with excision	43,509	43,509	27	22.0	44,561
197	Extracapsular crystalline lens extraction by phacoemulsification	42,937	42,937	8	21.7	42,959
1267	Evacuation of gravid uterus	35,282	35,281	591	17.9	35,318
1620	Excision of lesion of skin and subcutaneous tissue	31,613	31,612	286	16.0	49,302
1060	Haemodialysis	29,475	29,472	8,959	14.9	29,489
1780	Chemotherapy administration	28,086	28,086	420	14.2	28,106
1005	Panendoscopy	21,439	21,438	105	10.9	21,439
1885	Injection or infusion of therapeutic or prophylactic substance	14,683	14,683	0	7.4	18,045
1890	Therapeutic interventions on cardiovascular system	14,316	14,316	0	7.2	14,317
458	Surgical removal of tooth	11,643	11,636	1	5.9	25,732
1297	Procedures for reproductive medicine	10,608	10,608	172	5.4	10,628
1651	Local skin flap, simple and small, single stage	7,047	7,047	69	3.6	7,744
1893	Transfusion of blood and gamma globulin	6,086	6,086	0	3.1	6,534
1867	Counselling or education relating to personal care and other activities of daily/independent living	4,589	4,589	0	2.3	4,590
1943	Ultrasound of abdomen or pelvis	4,484	4,484	532	2.3	4,485
668	Coronary angiography	4,405	4,405	173	2.2	5,234
1265	Curettage of uterus	4,338	4,338	5	2.2	4,341
195	Intracapsular crystalline lens extraction	3,845	3,845	5	1.9	3,845
1649	Other full thickness skin graft	3,798	3,798	67	1.9	3,986
941	Procedures for haemorrhoids	3,570	3,570	0	1.8	3,858
457	Non-surgical removal of tooth	3,527	3,524	0	1.8	5,003
1828	Sleep study	3,129	86	0	1.6	3,156
607	Examination procedures on ventricle	3,092	3,092	158	1.6	3,098
1259	Examination procedures on uterus	3,089	3,089	1	1.6	3,093
466	Tooth coloured adhesive restoration, direct	2,893	2,890	0	1.5	6,019
1888	Hyperbaric oxygen therapy	2,887	2,887	1,268	1.5	2,887
	Other	129,687	128,528	719	66	143,184
Total	No procedure or not reported	1,309	1,307	16	0.7	..
Total^(c)		455,094	451,141	12,315	230.3	976,628

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) Excludes separations from private free-standing hospitals in Tasmania.

(c) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

.. Not applicable.

Table 9.13: Separations^(a) for the 30 ICD-10-AM procedure blocks with the highest number of separations, public hospitals, states and territories, 2002–03

Procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1910 Cerebral anaesthesia	346,435	300,938	165,692	102,706	96,162	17,692	16,628	11,625	1,057,878
1916 Generalised allied health interventions	258,671	199,810	112,592	68,341	59,466	13,374	11,769	5,912	729,935
1060 Haemodialysis	167,322	182,747	91,869	61,161	41,283	13,493	14,644	25,473	597,992
1909 Conduction anaesthesia	70,856	65,254	39,897	25,641	17,643	5,017	4,042	2,409	230,759
1893 Transfusion of blood and gamma globulin	47,489	41,749	20,710	14,114	13,148	2,746	2,116	1,057	143,129
1885 Injection or infusion of therapeutic or prophylactic substance	41,168	37,318	18,138	11,659	18,640	4,080	3,233	1,095	135,331
1780 Chemotherapy administration	8,265	53,637	31,863	17,174	15,586	2,510	4,929	945	134,909
1952 Computerised tomography of brain	42,396	36,375	17,484	9,126	7,685	2,591	1,587	1,137	118,381
1008 Panendoscopy with excision	26,647	21,124	11,725	8,927	6,275	671	1,773	827	77,969
905 Fibreoptic colonoscopy	24,858	18,795	10,192	7,855	7,207	704	1,101	583	71,295
1620 Excision of lesion of skin and subcutaneous tissue	13,747	15,230	12,175	5,036	7,084	870	394	274	54,810
1912 Postprocedural analgesia	21,191	9,957	8,524	7,359	3,431	2,167	1,591	205	54,425
911 Fibreoptic colonoscopy with excision	18,129	12,266	7,161	7,213	4,379	529	1,249	438	51,364
1344 Postpartum suture	20,425	12,198	8,316	3,936	3,364	976	1,109	748	51,072
1334 Medical or surgical induction of labour	14,453	12,208	8,219	4,310	3,637	815	626	548	44,816
197 Extracapsular crystalline lens extraction by phacoemulsification	15,303	13,033	4,989	4,719	4,349	63	663	342	43,461
738 Venous catheterisation	14,630	10,285	8,043	3,610	3,310	1,299	1,106	681	42,964
1340 Caesarean section	14,275	10,738	8,196	3,485	3,205	673	634	708	41,914
1265 Curettage of uterus	13,591	14,474	5,805	3,792	2,918	309	449	285	41,623
1335 Medical or surgical augmentation of labour	15,158	9,483	8,155	2,952	2,554	807	870	515	40,494
668 Coronary angiography	13,542	8,434	5,952	4,691	4,053	1,174	1,263	242	39,351
1963 Computerised tomography of abdomen and pelvis	16,220	12,140	4,525	1,231	2,513	737	480	370	38,216
1005 Panendoscopy	10,120	11,694	6,465	3,517	4,534	497	249	202	37,278
1333 Analgesia and anaesthesia during labour and caesarean section	11,451	7,800	6,091	3,920	3,461	701	740	299	34,463
1267 Evacuation of gravid uterus	8,149	9,976	3,451	2,360	6,579	465	273	1,140	32,393
1089 Examination procedures on bladder	8,391	9,712	4,123	4,346	4,047	646	465	160	31,890
607 Examination procedures on ventricle	9,707	6,803	4,705	4,215	2,751	458	1,105	222	29,966
1962 Computerised tomography of abdomen	11,466	6,341	4,894	2,921	1,713	479	910	343	29,067
569 Examination procedures on uterus	9,528	7,920	4,594	2,333	2,516	641	577	523	28,632
1259 Continuous ventilatory support	8,884	9,227	4,687	2,165	2,796	240	362	254	28,615
Other	635,781	515,120	335,786	195,534	184,241	40,493	30,748	19,541	1,957,244
No procedure or not reported	390,983	281,289	205,321	75,677	89,700	20,851	8,044	18,510	1,090,375
Total^(b)	1,291,174	1,149,840	702,166	367,825	367,859	80,215	63,743	68,149	4,090,971

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Table 9.14: Separations^(a) for the 30 ICD-10-AM procedure blocks with the highest number of separations, private hospitals, states and territories, 2002–03

Procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1910 Cerebral anaesthesia	446,033	346,219	318,943	146,099	108,377	n.p.	n.p.	n.p.	1,425,622
1916 Generalised allied health interventions	91,091	79,367	63,873	21,963	31,946	n.p.	n.p.	n.p.	298,967
1909 Conduction anaesthesia	69,065	55,673	53,968	31,545	15,568	n.p.	n.p.	n.p.	240,356
905 Fiberoptic colonoscopy	54,729	44,617	40,073	10,986	10,839	n.p.	n.p.	n.p.	165,887
1008 Panendoscopy with excision	52,241	40,693	40,772	14,993	7,594	n.p.	n.p.	n.p.	159,862
1780 Chemotherapy administration	26,634	41,787	39,921	16,145	13,056	n.p.	n.p.	n.p.	142,914
911 Fiberoptic colonoscopy with excision	40,291	30,173	29,385	15,992	6,503	n.p.	n.p.	n.p.	125,439
1060 Haemodialysis	20,144	17,389	32,733	20,351	14,254	n.p.	n.p.	n.p.	104,899
197 Extracapsular crystalline lens extraction by phacoemulsification	36,192	18,942	21,435	8,602	6,725	n.p.	n.p.	n.p.	97,374
1620 Excision of lesion of skin and subcutaneous tissue	27,400	18,815	23,666	8,903	10,014	n.p.	n.p.	n.p.	93,554
458 Surgical removal of tooth	19,894	18,463	14,081	9,603	5,159	n.p.	n.p.	n.p.	69,678
1893 Transfusion of blood and gamma globulin	14,401	18,384	18,996	6,510	7,004	n.p.	n.p.	n.p.	68,185
1885 Injection or infusion of therapeutic or prophylactic substance	8,229	12,904	23,494	7,438	3,091	n.p.	n.p.	n.p.	56,740
1912 Postprocedural analgesia	18,284	7,358	11,411	10,958	5,366	n.p.	n.p.	n.p.	55,373
1005 Panendoscopy	10,042	18,523	11,099	2,872	4,671	n.p.	n.p.	n.p.	48,483
668 Coronary angiography	15,742	11,646	11,333	3,696	3,353	n.p.	n.p.	n.p.	47,743
1267 Evacuation of gravid uterus	11,697	15,538	14,220	3,844	809	n.p.	n.p.	n.p.	46,776
1265 Curettage of uterus	14,464	13,090	7,560	4,293	2,882	n.p.	n.p.	n.p.	44,257
607 Examination procedures on bladder	12,713	10,389	9,962	3,473	3,111	n.p.	n.p.	n.p.	41,253
1089 Examination procedures on ventricle	11,742	9,549	9,028	5,310	3,184	n.p.	n.p.	n.p.	41,031
1259 Examination procedures on uterus	10,307	9,999	6,437	3,263	2,832	n.p.	n.p.	n.p.	34,510
1890 Therapeutic interventions on cardiovascular system	2,091	6,811	17,072	1,282	1,038	n.p.	n.p.	n.p.	28,986
1517 Psychological/psychosocial therapies	7,869	7,288	4,625	3,288	4,253	n.p.	n.p.	n.p.	28,754
1873 Arthroscopic meniscectomy of knee with repair	15,212	1,359	11,331	537	309	n.p.	n.p.	n.p.	28,750
1340 Caesarean section	7,575	6,376	6,459	3,697	1,871	n.p.	n.p.	n.p.	27,348
1297 Procedures for reproductive medicine	9,111	6,806	6,268	1,331	1,137	n.p.	n.p.	n.p.	26,082
1333 Analgesia and anaesthesia during labour and caesarean section	7,304	5,899	4,320	3,762	2,305	n.p.	n.p.	n.p.	24,521
990 Sleep study	7,944	5,501	5,081	2,626	1,797	n.p.	n.p.	n.p.	24,264
1828 Repair of inguinal hernia	8,430	6,724	4,629	785	2,511	n.p.	n.p.	n.p.	24,205
1334 Medical or surgical induction of labour	6,472	5,931	4,475	2,963	1,667	n.p.	n.p.	n.p.	22,910
Other	497,782	382,859	362,599	196,458	157,387	n.p.	n.p.	n.p.	1,674,380
No procedure or not reported	40,415	73,975	56,964	30,105	25,506	n.p.	n.p.	n.p.	243,001
Total^(b)	708,976	651,106	602,165	280,598	211,711	n.p.	n.p.	n.p.	2,562,801

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

n.p. Not published.

Table 9.15: Average length of stay (days) for the 30 ICD-10-AM procedure blocks with the highest number of separations ^(a), public hospitals, states and territories, 2002–03

Procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1910 Cerebral anaesthesia	4.1	3.3	3.6	3.6	3.5	4.6	4.2	4.3	3.6
1916 Generalised allied health interventions	11.5	11.4	10.8	11.9	11.7	12.0	11.1	11.4	11.3
1060 Haemodialysis	1.3	1.2	1.2	1.3	1.3	1.2	1.2	1.2	1.2
1909 Conduction anaesthesia	5.3	4.5	4.7	4.7	4.3	6.0	4.5	5.6	4.8
1893 Transfusion of blood and gamma globulin	11.1	9.3	9.6	10.1	8.8	11.3	12.7	11.5	10.0
1885 Injection or infusion of therapeutic or prophylactic substance	8.3	6.7	8.1	8.4	5.1	5.8	6.4	7.1	7.2
1780 Chemotherapy administration	7.2	1.7	1.9	1.9	2.0	2.1	1.9	1.5	2.2
1952 Computerised tomography of brain	11.0	9.2	9.8	13.5	14.3	10.9	13.4	9.3	10.6
1008 Panendoscopy with excision	3.5	2.9	2.9	3.0	3.5	5.7	2.9	4.0	3.2
905 Fiberoptic colonoscopy	2.7	2.6	2.4	2.1	2.5	3.4	2.6	2.5	2.5
1620 Excision of lesion of skin and subcutaneous tissue	2.9	2.0	1.9	2.4	1.8	2.1	1.9	2.6	2.2
1912 Postprocedural analgesia	8.5	9.4	8.5	8.3	9.3	10.5	9.3	10.4	8.8
911 Fiberoptic colonoscopy with excision	2.8	2.5	2.6	2.1	2.6	3.2	2.4	2.4	2.6
1344 Postpartum suture	3.4	3.3	2.9	3.7	3.5	4.1	3.2	4.0	3.3
1334 Medical or surgical induction of labour	4.1	3.7	3.5	4.2	4.3	4.5	4.4	5.0	3.9
197 Extracapsular crystalline lens extraction by phacoemulsification	1.1	1.1	1.1	1.1	1.1	1.1	1.0	1.3	1.1
738 Venous catheterisation	19.9	20.1	18.3	21.7	19.9	17.1	18.6	19.5	19.4
1340 Caesarean section	5.6	5.4	4.6	5.8	5.9	5.4	6.4	6.5	5.3
1265 Curettage of uterus	1.2	1.1	1.2	1.3	1.2	1.4	1.3	1.3	1.2
1335 Medical or surgical augmentation of labour	3.4	3.4	2.9	3.8	3.6	4.4	3.7	4.2	3.3
668 Coronary angiography	6.4	5.2	4.3	3.8	3.8	4.9	2.6	7.4	5.0
1963 Computerised tomography of abdomen and pelvis	11.3	10.5	10.4	12.6	12.7	13.2	10.7	10.5	11.0
1005 Panendoscopy	7.4	5.0	5.9	6.1	5.1	10.1	7.8	7.0	6.0
1333 Analgesia and anaesthesia during labour and caesarean section	4.5	4.4	3.8	4.5	4.5	4.8	4.8	5.2	4.3
1267 Evacuation of gravid uterus	1.2	1.1	1.2	1.1	1.1	1.1	1.1	1.1	1.1
1089 Examination procedures on bladder	2.8	2.3	2.4	3.0	2.0	2.6	3.0	3.7	2.5
607 Examination procedures on ventricle	5.9	4.9	3.8	3.6	3.4	5.1	2.5	7.5	4.6
1962 Computerised tomography of abdomen	10.1	8.1	9.6	11.3	11.8	9.9	12.0	8.6	9.7
569 Examination procedures on uterus	18.4	19.4	18.9	25.3	21.7	18.2	19.8	16.2	19.3
1259 Continuous ventilatory support	1.2	1.1	1.2	1.1	1.1	1.3	1.3	1.3	1.1
Total^(a)	4.4	3.7	3.9	3.9	4.1	4.4	3.4	3.0	4.0

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

Table 9.16: Average length of stay (days) for the 30 ICD-10-AM procedure blocks with the highest number of separations ^(a), private hospitals, states and territories, 2002–03

Procedure block	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1910 Cerebral anaesthesia	1.9	2.2	2.2	2.3	2.3	n.p.	n.p.	n.p.	2.1
1916 Generalised allied health interventions	8.7	10.0	9.4	11.7	7.8	n.p.	n.p.	n.p.	9.4
1909 Conduction anaesthesia	3.1	4.2	3.7	3.6	3.1	n.p.	n.p.	n.p.	3.6
905 Fiberoptic colonoscopy	1.2	1.3	1.4	1.5	1.5	n.p.	n.p.	n.p.	1.3
1008 Panendoscopy with excision	1.2	1.4	1.7	1.6	1.6	n.p.	n.p.	n.p.	1.5
1780 Chemotherapy administration	1.2	1.5	1.6	1.4	1.5	n.p.	n.p.	n.p.	1.4
911 Fiberoptic colonoscopy with excision	1.2	1.3	1.5	1.4	1.6	n.p.	n.p.	n.p.	1.3
1060 Haemodialysis	1.2	1.3	1.2	1.0	1.2	n.p.	n.p.	n.p.	1.2
197 Extracapsular crystalline lens extraction by phacoemulsification	1.0	1.0	1.0	1.1	1.0	n.p.	n.p.	n.p.	1.0
1620 Excision of lesion of skin and subcutaneous tissue	1.5	1.5	1.5	1.7	1.3	n.p.	n.p.	n.p.	1.5
458 Surgical removal of tooth	1.0	1.0	1.1	1.0	1.1	n.p.	n.p.	n.p.	1.0
1893 Transfusion of blood and gamma globulin	9.6	8.8	8.0	9.5	9.0	n.p.	n.p.	n.p.	8.9
1885 Injection or infusion of therapeutic or prophylactic substance	4.7	4.2	3.2	3.9	4.4	n.p.	n.p.	n.p.	3.8
1912 Postprocedural analgesia	6.9	8.5	7.6	8.0	6.6	n.p.	n.p.	n.p.	7.5
1005 Panendoscopy	1.9	1.9	2.9	3.3	2.3	n.p.	n.p.	n.p.	2.3
668 Coronary angiography	2.5	3.4	4.0	3.1	3.6	n.p.	n.p.	n.p.	3.2
1267 Evacuation of gravid uterus	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.p.	1.0
1265 Curettage of uterus	1.1	1.1	1.2	1.2	1.2	n.p.	n.p.	n.p.	1.1
607 Examination procedures on bladder	2.5	3.3	3.8	2.9	3.4	n.p.	n.p.	n.p.	3.1
1089 Examination procedures on ventricle	1.7	2.0	2.0	2.4	1.9	n.p.	n.p.	n.p.	2.0
1259 Examination procedures on uterus	1.1	1.1	1.1	1.2	1.1	n.p.	n.p.	n.p.	1.1
1890 Therapeutic interventions on cardiovascular system	2.8	1.7	1.4	3.1	3.2	n.p.	n.p.	n.p.	1.7
1517 Psychological/psychosocial therapies	1.1	1.1	1.2	1.2	1.2	n.p.	n.p.	n.p.	1.1
1873 Arthroscopic meniscectomy of knee with repair	5.7	8.2	2.6	8.7	10.5	n.p.	n.p.	n.p.	4.7
1340 Caesarean section	6.1	6.0	5.7	7.0	6.9	n.p.	n.p.	n.p.	6.2
1297 Procedures for reproductive medicine	1.0	1.0	1.0	1.0	1.0	n.p.	n.p.	n.p.	1.0
1333 Analgesia and anaesthesia during labour and caesarean section	5.1	5.1	5.0	5.7	5.6	n.p.	n.p.	n.p.	5.3
990 Sleep study	1.7	1.7	1.5	1.8	1.9	n.p.	n.p.	n.p.	1.7
1828 Repair of inguinal hernia	1.1	1.1	1.1	1.2	1.0	n.p.	n.p.	n.p.	1.1
1334 Medical or surgical induction of labour	4.9	4.9	4.7	5.3	5.6	n.p.	n.p.	n.p.	5.0
Total^(a)	2.7	2.8	2.8	2.8	2.8	n.p.	n.p.	n.p.	2.8

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.
n.p. Not published.

Table 9.17: Separations^(a) for males for the 30 ICD-10-AM procedure blocks with the highest number of separations, by age group, all hospitals, Australia, 2002-03

Procedure block	<1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	Total ^(b)
1910 Cerebral anaesthesia	10,088	43,929	71,380	90,544	99,377	129,568	161,101	184,659	176,796	137,001	25,585	1,130,043
1916 Generalised allied health interventions	9,570	6,230	11,544	24,493	29,976	35,450	46,270	65,730	89,516	103,714	39,796	462,295
1060 Haemodialysis	3	367	382	8,113	23,684	42,097	62,371	83,146	109,314	78,606	5,908	413,991
1909 Conduction anaesthesia	2,940	2,550	3,449	7,354	9,815	15,106	23,936	38,502	50,903	50,573	11,457	216,585
1780 Chemotherapy administration	117	1,541	2,771	2,693	3,976	7,469	19,110	36,074	39,098	18,302	1,228	132,379
1008 Panendoscopy with excision	180	686	1,529	4,213	8,894	14,852	20,335	22,017	19,083	13,577	2,384	107,750
1893 Transfusion of blood and gamma globulin	1,583	1,301	3,060	3,317	3,816	5,745	9,749	16,937	24,881	27,475	9,097	106,963
905 Fibreoptic colonoscopy	7	29	123	1,536	5,729	14,144	22,408	24,370	20,443	13,455	2,097	104,344
1885 Injection or infusion of therapeutic or prophylactic substance	15,272	2,792	4,848	3,808	4,414	6,869	10,443	13,165	14,414	11,189	2,363	89,578
911 Fibreoptic colonoscopy with excision	28	94	456	1,937	4,516	9,193	16,913	22,518	19,978	12,246	1,512	89,392
1620 Excision of lesion of skin and subcutaneous tissue	215	701	1,736	2,136	3,458	6,474	10,609	14,323	15,888	18,012	5,177	78,729
1952 Computerised tomography of brain	800	1,342	2,286	5,522	5,687	5,884	6,480	8,451	12,230	15,979	6,527	71,188
668 Extracapsular crystalline lens extraction by phacoemulsification	42	44	65	125	544	3,039	9,928	16,008	16,534	10,140	853	57,322
197 Coronary angiography	0	10	17	69	139	575	2,530	7,068	17,293	24,294	5,099	57,095
607 Examination procedures on ventricle	66	67	62	94	446	2,450	8,257	13,223	13,344	7,875	638	46,522
1089 Examination procedures on bladder	103	176	327	577	1,229	2,278	4,455	8,052	11,370	11,162	2,696	42,425
1912 Postprocedural analgesia	185	254	1,143	2,853	2,992	3,572	5,432	8,875	10,055	6,148	836	42,345
1005 Panendoscopy	19	120	208	1,183	2,678	4,543	6,602	7,699	7,984	7,241	1,716	39,994
990 Repair of inguinal hernia	1,527	1,920	1,445	1,688	2,836	4,378	6,408	7,470	6,407	4,353	711	39,144
458 Surgical removal of tooth	4	564	3,055	15,902	7,270	3,364	2,018	1,432	787	544	110	35,050
738 Venous catheterisation	2,735	389	633	1,251	1,609	2,233	3,554	5,350	6,403	5,016	922	30,096
1890 Therapeutic interventions on cardiovascular system	88	202	721	709	953	1,691	4,337	7,482	7,164	3,610	355	27,313
1963 Computerised tomography of abdomen and pelvis	15	55	392	1,464	2,200	2,752	3,493	4,089	4,810	4,777	1,378	25,425
1566 Excision procedures on other musculoskeletal sites	36	500	1,139	3,096	3,420	3,646	3,777	3,445	2,587	1,923	510	24,080
1828 Sleep study	105	233	276	364	1,505	3,663	5,839	5,184	2,590	1,303	75	21,137
412 Tonsillectomy or adenoidectomy	40	7,300	9,129	2,399	1,057	554	203	91	64	17	2	20,856
1517 Arthroscopic meniscectomy of knee with repair	0	0	43	1,095	2,267	4,048	5,555	4,592	2,202	766	47	20,615
1554 Other application, insertion or removal procedures on other musculoskeletal sites	27	336	2,197	4,644	4,263	3,326	2,431	1,614	956	559	146	20,499
1165 Transurethral prostatectomy	0	0	0	0	3	37	618	3,801	7,307	6,858	1,531	20,155
309 Myringotomy	690	10,409	6,943	300	182	310	340	361	294	183	37	20,049
Other	49,338	47,899	87,163	113,283	135,815	172,840	212,714	256,664	265,742	218,423	49,657	1,609,559
<i>Procedure reported</i>	<i>42,845</i>	<i>56,827</i>	<i>93,410</i>	<i>136,509</i>	<i>177,132</i>	<i>249,166</i>	<i>341,839</i>	<i>434,566</i>	<i>481,957</i>	<i>398,801</i>	<i>87,488</i>	<i>2,500,561</i>
No procedure or not reported	38,010	45,886	37,593	47,313	57,463	61,410	65,396	68,993	73,058	75,058	26,475	596,673
Total^(c)	80,855	102,713	131,003	183,822	234,595	310,576	407,235	503,559	555,015	473,859	113,963	3,097,234

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) Includes separations for which age was not reported.

(c) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Table 9.18: Separations^(a) for females for the 30 ICD-10-AM procedure blocks with the highest number of separations, by age group, all hospitals, Australia, 2002–03

Procedure block	<1	1–4	5–14	15–24	25–34	35–44	45–54	55–64	65–74	75–84	85+	Total ^(b)
1910 Cerebral anaesthesia	4,780	27,525	51,776	121,265	176,470	204,374	213,484	193,676	172,286	148,037	39,754	1,353,431
1916 Generalised allied health interventions	7,955	5,050	9,083	32,492	65,460	47,833	47,101	58,565	83,705	129,453	79,882	566,583
1060 Haemodialysis	2	4	566	4,492	14,126	23,571	47,573	61,288	85,249	49,703	2,232	288,806
1909 Conduction anaesthesia	259	494	1,570	16,158	55,615	29,474	20,946	27,643	39,193	47,685	15,483	254,521
1780 Chemotherapy administration	99	1,257	1,942	1,842	4,842	17,124	33,635	39,247	29,940	14,390	1,122	145,440
905 Fiberoptic colonoscopy	2	12	84	2,585	7,332	17,690	30,069	30,508	24,653	16,550	3,351	132,836
1008 Panendoscopy with excision	129	475	1,512	6,239	10,484	17,954	26,407	25,864	21,026	16,089	3,901	130,080
1893 Transfusion of blood and gamma globulin	1,188	901	2,144	3,552	6,299	7,432	9,336	13,282	19,560	26,865	13,788	104,347
1885 Injection or infusion of therapeutic or prophylactic substance	12,002	2,211	3,710	4,855	7,248	10,437	14,031	16,124	15,281	12,791	3,795	102,485
911 Fiberoptic colonoscopy with excision	14	67	361	3,166	5,803	10,242	16,843	19,577	17,363	11,878	2,093	87,410
1265 Curettage of uterus	0	1	34	5,689	18,234	24,716	22,228	9,274	3,866	1,591	246	85,879
197 Extracapsular crystalline lens extraction by phacoemulsification	0	3	18	43	144	575	2,361	7,550	24,585	38,728	9,732	83,739
1267 Evacuation of gravid uterus	0	0	186	26,340	34,448	17,608	560	13	9	2	0	79,166
1344 Postpartum suture	0	0	41	14,356	46,613	12,259	61	3	0	1	0	73,334
1620 Excision of lesion of skin and subcutaneous tissue	177	636	1,955	2,797	4,714	8,104	11,303	11,244	10,485	12,484	5,732	69,631
1340 Caesarean section	0	0	16	9,037	43,432	16,643	132	1	0	0	0	69,261
1334 Medical or surgical induction of labour	0	0	35	13,164	42,676	11,768	82	0	0	0	0	67,725
1912 Postprocedural analgesia	150	240	865	4,248	14,908	11,145	8,685	8,799	9,544	7,453	1,415	67,452
1952 Computerised tomography of brain	551	1,011	1,317	3,013	3,708	4,508	5,440	6,182	9,389	18,111	12,156	65,386
1259 Examination procedures on uterus	0	0	35	3,421	13,274	17,905	17,412	6,867	2,829	1,176	205	63,124
1333 Analgesia and anaesthesia during labour and caesarean section	0	0	36	11,081	37,898	9,924	42	1	0	0	0	58,983
1335 Medical or surgical augmentation of labour	0	0	32	13,659	34,313	8,149	25	0	0	0	0	56,179
458 Surgical removal of tooth	0	431	3,796	24,783	9,775	3,848	2,444	1,312	719	561	174	47,843
1005 Panendoscopy	19	95	145	1,443	2,696	4,978	7,785	8,929	8,507	8,376	2,792	45,765
965 Cholecystectomy	1	2	91	2,178	5,403	6,107	6,510	5,626	3,824	2,250	438	32,430
1343 Other procedures associated with delivery	0	0	25	5,970	20,989	5,209	32	2	1	0	0	32,229
1089 Examination procedures on bladder	47	159	293	575	1,580	3,764	6,151	6,272	5,843	4,708	1,102	30,494
1297 Procedures for reproductive medicine	0	0	0	379	12,872	16,196	549	0	0	1	0	29,997
668 Coronary angiography	31	46	32	42	215	1,127	3,866	7,044	9,237	7,401	729	29,771
986 Division of abdominal adhesions	34	19	101	1,664	5,301	6,894	5,345	3,439	2,635	1,959	548	27,939
Other	34,642	45,643	76,954	137,690	256,675	260,199	270,911	256,926	240,980	227,232	77,440	1,885,299
<i>Procedure reported</i>	<i>28,415</i>	<i>37,123</i>	<i>68,610</i>	<i>210,024</i>	<i>400,483</i>	<i>365,063</i>	<i>384,196</i>	<i>394,322</i>	<i>412,510</i>	<i>383,129</i>	<i>135,781</i>	<i>2,819,667</i>
No procedure or not reported	31,569	35,365	28,665	93,954	139,679	88,059	66,506	59,010	62,591	82,530	48,682	736,627
Total^(c)	59,984	72,488	97,275	303,978	540,162	453,122	450,702	453,332	475,101	465,659	184,463	3,556,294

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) Includes separations for which age was not reported.

(c) As more than one procedure can be reported for each separation, the totals are not the sums of the rows of the table.

Table 9.19: Procedure^(a) statistics in ICD-10-AM chapters, by Indigenous status^(b), all hospitals, Australia, 2002–03

Procedure block	Count of procedures			Procedures per 1,000 population ^(c)			Rate ratio ^(d)
	Indigenous	Non-Indigenous	Procedures for patients identified as Indigenous (%)	Indigenous	Non-Indigenous	Rate ratio ^(d)	
1–86	Procedures on nervous system	2,040	174,852	0.8	6.4	8.9	0.7
110–129	Procedures on endocrine system	98	11,260	0.0	0.3	0.6	0.5
160–256	Procedures on eye and adnexa	1,907	230,006	0.8	8.2	11.6	0.7
300–333	Procedures on ear and mastoid process	1,624	57,287	0.7	4.3	3.0	1.4
370–422	Procedures on nose, mouth and pharynx	1,579	175,313	0.6	4.1	9.1	0.5
450–490	Dental services	6,857	311,769	2.8	21.9	16.4	1.3
520–569	Procedures on respiratory system	5,017	167,552	2.1	18.8	8.5	2.2
600–767	Procedures on cardiovascular system	7,022	463,960	2.9	24.2	23.4	1.0
800–817	Procedures on blood and blood-forming organs	439	46,893	0.2	1.4	2.4	0.6
850–1011	Procedures on digestive system	9,689	1,208,672	4.0	28.9	61.4	0.5
1040–1128	Procedures on urinary system	77,231	891,124	31.6	250.5	45.1	5.6
1060	Haemodialysis	74,619	628,975	30.5	241.4	31.9	7.6
	<i>Other</i>	2,612	262,149	1.1	9.1	13.2	0.7
1160–1203	Procedures on male genital organs	820	88,443	0.3	2.8	4.5	0.6
1240–1299	Gynaecological procedures	6,582	492,577	2.7	14.0	25.6	0.5
1330–1347	Obstetric procedures	12,225	434,840	5.0	19.9	22.9	0.9
1360–1579	Procedures on musculoskeletal system	9,230	592,174	3.8	21.6	30.3	0.7
1600–1718	Dermatological and plastic procedures	8,923	540,206	3.6	24.7	27.5	0.9
1740–1759	Procedures on breast	469	57,938	0.2	1.3	3.0	0.4
1780–1799	Chemotherapeutic and radiation oncology procedures	1,966	308,271	0.8	6.4	15.6	0.4
1820–1916	Non-invasive, cognitive and interventions, not elsewhere classified	81,532	5,723,689	33.3	251.4	291.1	0.9
1940–2016	Imaging services	9,427	559,251	3.9	29.6	28.3	1.0
	Total (excluding haemodialysis)	170,058	11,907,102	69.5	499.4	607.3	0.8
	Total (including haemodialysis)	244,677	12,536,077	100.0	740.8	639.1	1.2

(a) Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

(b) Identification of Indigenous patients is not considered to be complete and completeness varies among jurisdictions. See the text of Chapter 7 for further detail.

(c) The rates were directly age-standardised to the Australian population at 30 June 2001. The rate for non-Indigenous persons includes *Not Reported*. For details, see Appendix 3. Indigenous population data are available at <http://www.aihw.gov.au>.

(d) The rate ratio is equal to the rate for Indigenous people divided by the rate for non-Indigenous people (which includes *Not Reported*).

