

Hysterectomy Hospitalizations 1993-2002

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Hysterectomy Hospitalizations



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Document Abstract

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Title: Hysterectomy Hospitalizations, 1993-2002

Summary: This report presents data on hysterectomies in Florida for 2002 and examines historical trends since 1993. The demographics of patients, associated medical diagnoses, surgical procedures performed, length of hospital stays, and hospital charges are discussed.

Over the past decade, the hysterectomy rate has remained stable at an average annual rate of 5.3 per 1,000 women. Hysterectomy rates were highest among women ages 35 to 54 years. In 2002, the average length of stay was 2.9 days with most patients discharged home. Total hospital charges for hysterectomies were over \$600 million.

Future Policy Implications: Hysterectomies are of public health interest and medical economic concern due to the number performed. Concerns have been raised that the procedure is overused, therefore continuous monitoring of hysterectomy trends may be needed for future evaluations.

Relevant Florida Statutes: Section 408.02 (3), Florida Statutes, directs the Agency for Health Care Administration to summarize health care outcomes.

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To view or print this report, please visit the following web site:
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Executive Summary

The hysterectomy hospitalization rate in Florida has averaged 5.3 per 1,000 women for over the past decade. In 2002, the hysterectomy rate was 5.4 per 1,000 women. The number of hysterectomies performed in Florida hospitals between 1993 and 2002 increased by 19% as the number of women in affected age groups increased.

The most frequent indications for hysterectomies were uterine leiomyoma, genital prolapse, and disorders of menstruation in 2002. Hysterectomies were performed more often by the abdominal procedure and less often by the vaginal or laparoscopic assisted vaginal (LAVH) methods. From 1993 to 2002, the proportion of LAVH procedures increased from .2% (1993) to 9.5% (2002), while the proportion of vaginal procedures without laparoscopy decreased.

The rate of hysterectomy for nonwhite women was found to be typically higher than that of white women during 1993 to 2002. Among black women, uterine leiomyoma was a more frequent diagnosis.

Hysterectomies occurred more frequently among women ages 35 to 54 years. On average, hospital stays lasted 2.9 days in 2002.

The total charge for hysterectomies in 2002 was over \$600 million dollars. Charges for LAVH procedures or a diagnosis of genitourinary cancer were higher than the charges for all other women hospitalized. The source of payment for the majority of the women was private insurance.

The primary data source for the report was the Agency for Health Care Administration's (AHCA) hospital inpatient discharge database, years 1993 through 2002. The database is assembled from patient discharge records reported quarterly to the AHCA by all short-term, general acute-care hospitals in Florida. The focus of this report is on hysterectomy procedures during calendar year 2002, though comparative data from 1993 through 2001 are also displayed.

Introduction

Hysterectomy is second only to cesarean section as the most frequently performed major operation among reproductive-aged women in the United States. An estimated 633,000 hysterectomies are performed annually. Thirty-seven percent of women in the United States have had a hysterectomy by the age of 60. The average age at hysterectomy is 40 to 45 years, and the average age at menopause is 51 years.¹

Hysterectomies are of public health interest and medical economic concern due to the rising number of women reaching middle age, when most hysterectomies are performed. Hysterectomies are performed each year in the United States at an annual cost of over \$5 billion dollars.²

Frequently occurring symptoms prior to a hysterectomy are heavy or irregular uterine bleeding, pelvic pain, and pelvic pressure. These symptoms are often associated with uterine leiomyoma (i.e., fibroids), endometriosis, and uterine prolapse.³ The performance of hysterectomies for life threatening conditions such as gynecological cancer, pelvic inflammatory disease, or obstetrical hemorrhage account for 10 to 15 percent of the overall cases.¹

Hysterectomies have been a relatively safe procedure with mortality for operations related to noncancerous conditions to be one per 1,000. However, in addition to rare postoperative deaths, serious complications such as sepsis, hemorrhage, peritonitis, or pulmonary embolism can occur.⁴ Therefore, due to the frequency of the performance of this major operation and the potential for patients to experience serious complications, continuous monitoring may provide valuable information in identifying areas where hysterectomy rates can be reduced.

The purpose of this report is to provide a historical perspective and current view of the performance of hysterectomies among women 15 years of age or older in Florida's hospitals. The report will feature the demographics of patients, associated diagnosis, surgical procedures, and other information about length of stay and charges.

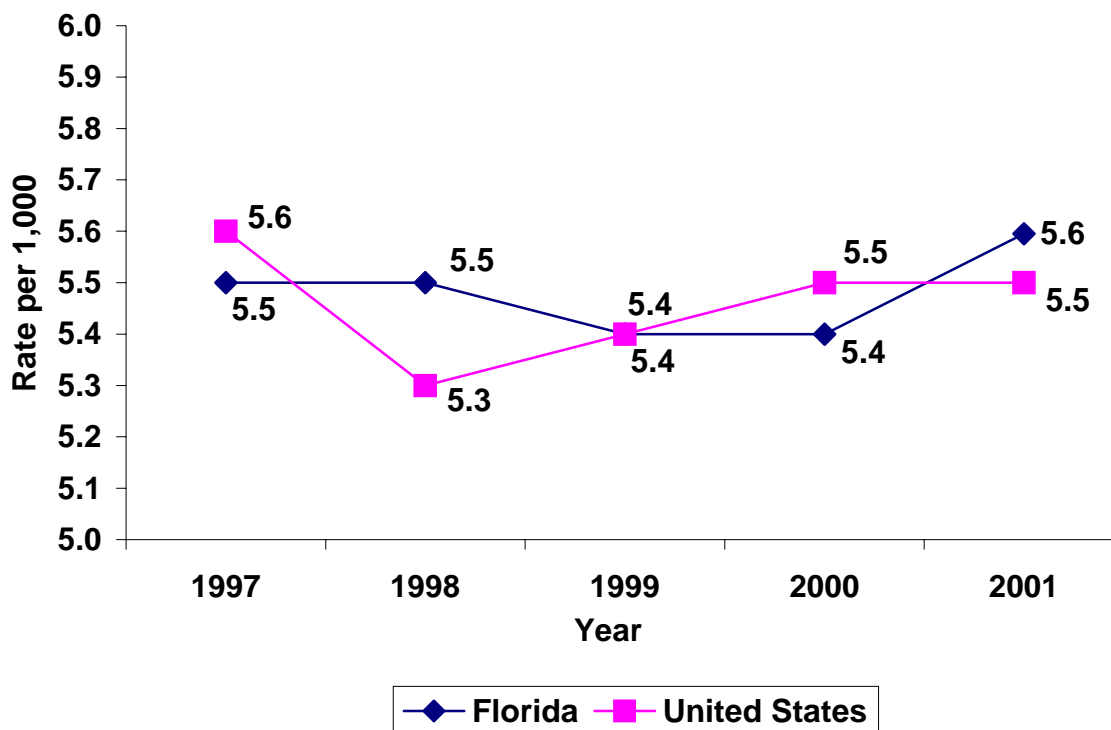
The data source was the Agency for Health Care Administration inpatient database, years 1993 through 2002. Discharges with an International Classification of Disease, 9th Revision, Clinical Modification (ICD-9-CM) code of hysterectomy were included. Hysterectomy was defined as ICD-9-CM procedure codes 68.3 through 68.7, 68.9, and 54.21. The ICD-9-CM code 54.21 was used in combination with 68.3 through 68.7 and 68.9. The data for this report was compiled in August 2003. **Appendix A** displays the principal procedure codes included in this study.

Rates of hysterectomy for each year were calculated using the population data of Florida female, civilian residents who were 15 years of age or older (unless otherwise noted). The population data was derived from the Office of Economic and Demographic Research, State of Florida Legislature.

Hysterectomy Rates and Trends

In the United States during the years 1997 to 2001, an estimated 2.9 million women ages 18 years and older had a hysterectomy. The average rate of hysterectomy over the five years was 5.5 per 1,000 women. As shown in **Figure 1**, Florida's hysterectomy rate was similar to the national rate of hysterectomies among women 18 years and older.

Figure 1
Trends in Hysterectomy Rates*
(18 years and Older)
Florida and United States, 1997-2001



* Per 1,000 Female Residents \geq 18 years.

Source: AHCA, Agency for Health Care Research and Quality, Office of Economic and Demographic Research, U.S. Census Bureau

Table 1 presents the number of hysterectomies performed among women 15 years of age or older in Florida's short-term acute care hospitals from 1993 to 2002. The annual number of hysterectomies was found to increase during this time period by 19%. The total number of hysterectomies performed in 1993 was 31,981 and 37,993 in the year 2002. Overall, the rate of hysterectomies during the years 1993 to 2002 was 5.3 per 1,000 women per year (**Table 1**).

Table 1
Florida Hysterectomy Rates* (15 years and Older), 1993-2002

| Year | Number | Population | Rate Per 1,000 |
|--------------|----------------|-------------------|-----------------------|
| 1993 | 31,981 | 5,780,918 | 5.5 |
| 1994 | 31,520 | 5,910,655 | 5.3 |
| 1995 | 32,046 | 6,031,462 | 5.3 |
| 1996 | 33,988 | 6,155,054 | 5.5 |
| 1997 | 33,406 | 6,287,735 | 5.3 |
| 1998 | 34,103 | 6,417,474 | 5.3 |
| 1999 | 33,817 | 6,574,150 | 5.1 |
| 2000 | 35,235 | 6,744,838 | 5.2 |
| 2001 | 36,904 | 6,891,864 | 5.4 |
| 2002 | 37,993 | 7,077,054 | 5.4 |
| Total | 340,993 | 63,871,204 | 5.3 |

* Per 1,000 Florida Female Residents \geq 15 years.

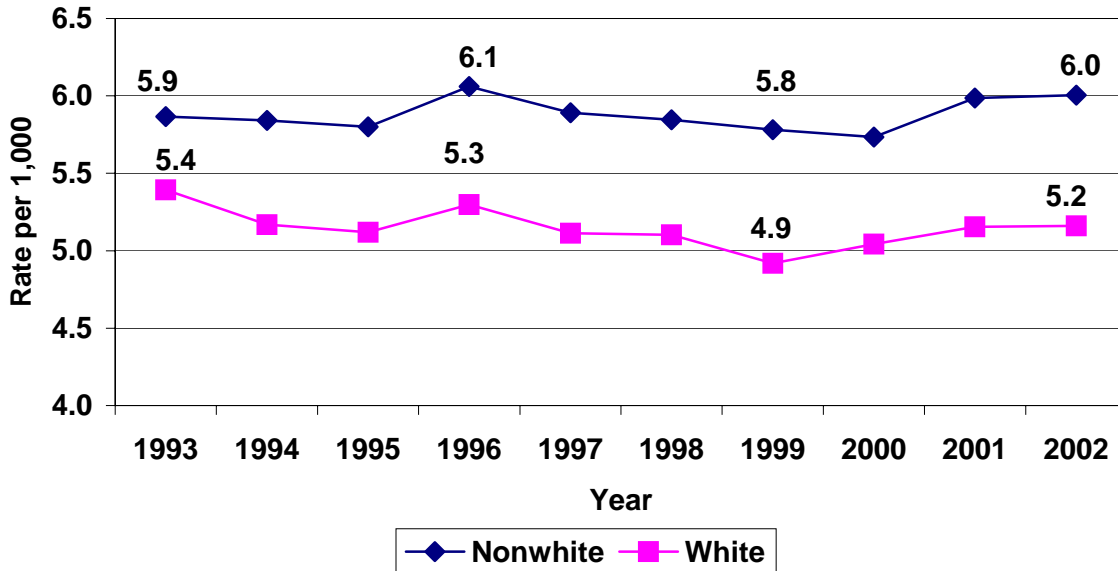
Source: AHCA and Office of Economic and Demographic Research

In Florida, hysterectomy rates for the years 1993 and 2002 showed little variance for women who were 35 to 44 years of age (11.4 per 1,000), and were observed to decline slightly among all other age groups (**Appendix B**).

Figure 2 displays the trend in hysterectomy rates among white and nonwhite women. As shown in the figure, the rate of hysterectomies for nonwhite women slightly exceeded that of white women. In 2002, the hysterectomy rate among nonwhite women was 6.0 per 1,000 women and the hysterectomy rate among white women was 5.2 per 1,000 women. The hysterectomy rate remained relatively stable over the years among both nonwhite and white women (**Figure 2**).

Appendix C provides a description of the race and ethnicity categories utilized in the study.

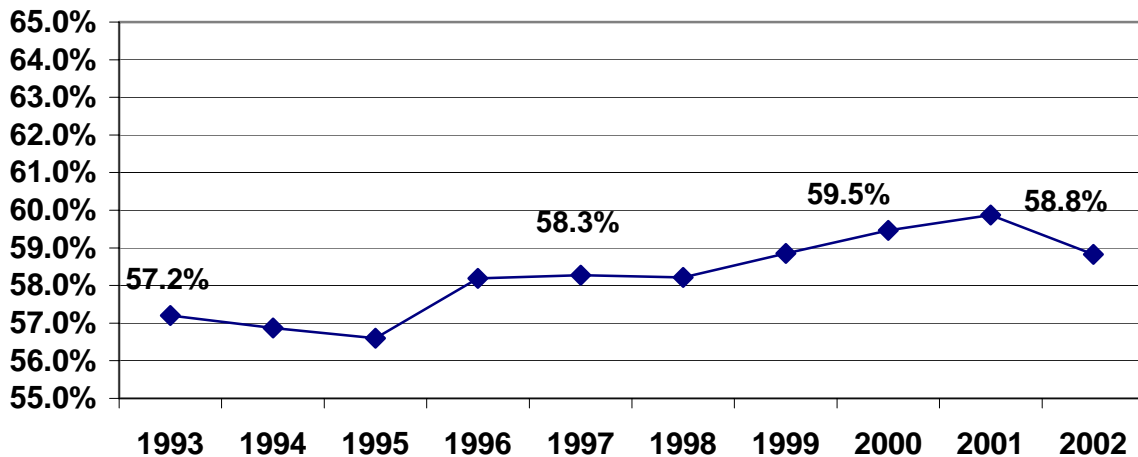
Figure 2
Hysterectomy Rates Among White and Nonwhite Women, 1993-2002



Source: AHCA

Figure 3 shows that over 50% of the women who had hysterectomies between 1993 and 2002 also had a bilateral oophorectomy, which is the removal of both ovaries. Women who had both ovaries removed before they began menopause experienced a surgical menopause, due to the removal of the main source of the female hormone.

Figure 3
Percentage of Hysterectomies with Bilateral Oophorectomy, 1993-2002



Source: AHCA

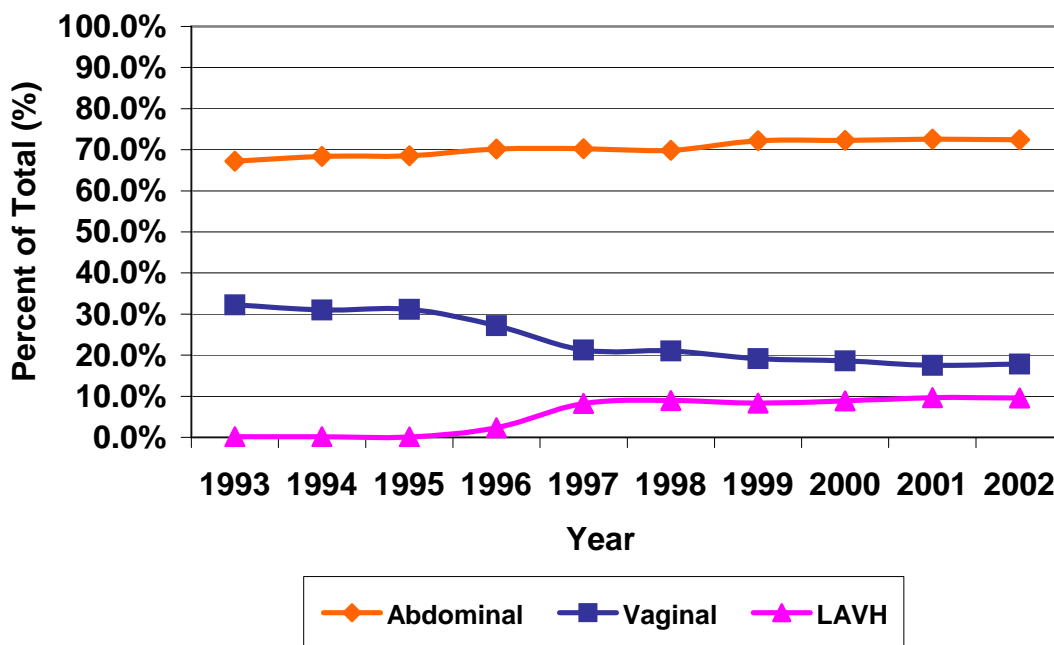
Appendix A provides the procedure codes for bilateral oophorectomy.

Hysterectomies are performed vaginally or abdominally. The vaginal hysterectomy involves removing the uterus via the vagina, whereas the abdominal procedure involves the removal of the organ through an incision in the abdomen. The abdominal procedure is usually performed when more extensive surgery is required.³

In addition to the abdominal and vaginal hysterectomy, the introduction of the laparoscopic assisted vaginal hysterectomy (LAVH) in 1990 presented another surgical option for the performance of hysterectomies. **Figure 4** presents the trend in the percentage of hysterectomies that were performed abdominally, vaginally, and laparoscopically during the years 1993 to 2002.

As shown, abdominal surgeries continue to be the most common type of hysterectomy procedure in Florida hospitals. Abdominal surgeries represented 67.2% of all procedures in 1993 and have increased to 72.4% in 2002.

Figure 4
Percentage of Hysterectomies by Type of Surgical Procedure, 1993-2002



Source: AHCA

Hysterectomies performed by the vaginal approach represented 17.9% of all hysterectomy procedures in 2002 and 32.2% in 1993. The utilization of the LAVH procedure has increased by 9.3 percentage points from .2% in 1993 to 9.5% in 2002. Vaginal hysterectomies and laparoscopic assisted vaginal hysterectomies (LAVH) combined were 27.4% of the hysterectomies performed in 2002.

Descriptions of the abdominal, vaginal, and laparoscopic procedure codes are provided in **Appendix D**.

Characteristics of Hysterectomy Population

In 2002, about two thirds of the hysterectomies performed were among women ages 35 to 54 years. As shown in **Table 2**, the hysterectomy rate rose as women approached 35 years of age, and subsequently declined after 54 years.

Younger women had an average length of stay for hysterectomies that was shorter than the length of stay for older women. As displayed in **Table 2**, hospital stays were 1.3 days shorter for women ages 25 to 34 years than the stays of women 65 years of age and older.

Table 2
Hysterectomy Rates and Average Length of Stay (ALOS) in Days by Age of Patient, 2002

| Age | Number | Rate Per 1,000 | ALOS |
|--------------|---------------|----------------|------------|
| 15-24 | 202 | 0.2 | 2.7 |
| 25-34 | 3,902 | 3.8 | 2.6 |
| 35-44 | 14,323 | 11.4 | 2.7 |
| 45-54 | 11,544 | 9.9 | 2.9 |
| 55-64 | 3,500 | 3.7 | 3.2 |
| 65 and older | 4,522 | 2.7 | 3.9 |
| Total | 37,993 | 5.4 | 2.9 |

Source: AHCA and Office of Economic and Demographic Research

Data on hysterectomies by race/ethnicity are displayed in **Table 3**. The majority of the hysterectomies performed in hospitals were among white women in 2002. Of the total number of hysterectomies performed, 69.3% were among white women, 16.2% were among black women, 10.9% were among Hispanic women, and the remaining procedures were performed among women of other racial/ethnic backgrounds.

When comparing the average age for hysterectomies across racial/ethnic groups, hysterectomies were found to occur at a younger age among black women in comparison to the average age of other race/ethnic groups (**Table 3**).

Table 3
Number of Hysterectomies, Average Age and
Average Length of Stay (ALOS) in Days by Race/Ethnicity, 2002

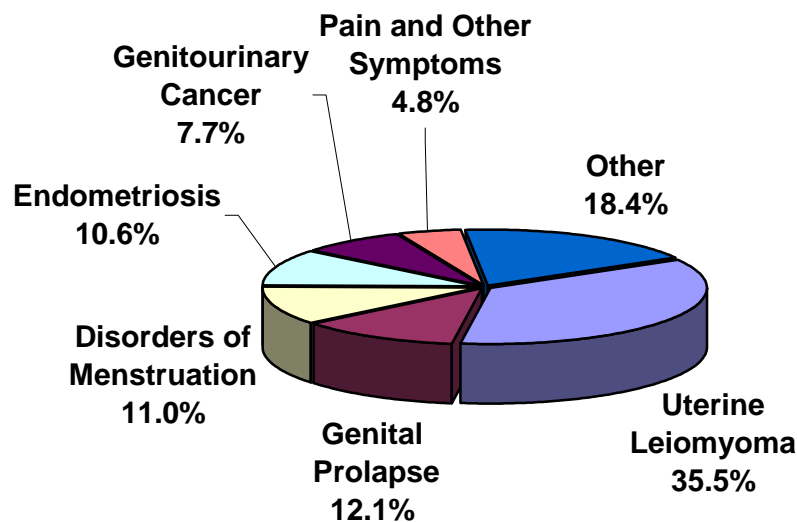
| Race/Ethnicity | Number | Percent | Average Age | ALOS |
|-----------------------|---------------|----------------|--------------------|-------------|
| White | 26,318 | 69.3 | 48 | 2.8 |
| Black | 6,143 | 16.2 | 44 | 3.4 |
| Hispanic | 4,130 | 10.9 | 48 | 3.1 |
| <i>White Hispanic</i> | 4,058 | 10.7 | 48 | 3.1 |
| <i>Black Hispanic</i> | 72 | 0.2 | 46 | 3.0 |
| Other | 939 | 2.5 | 48 | 3.1 |
| Total | 37,993 | 100.0 | 47 | 2.9 |

Note: Numbers may not add to total due to unclassified race/ethnicity records.

Source: AHCA

The most frequent diagnoses for women undergoing hysterectomies were uterine leiomyoma, genital prolapse, and disorders of menstruation (**Figure 5**). The three diagnoses were related to over 50% of the hysterectomies performed in 2002.

Figure 5
Principal Diagnoses Associated with Hysterectomy Procedures, 2002



Source: AHCA

Table 4 displays the diagnoses that are commonly associated with hysterectomies by race/ethnicity. The top three diagnoses among black women were uterine leiomyoma, disorders of menstruation, and endometriosis. The top diagnoses among white women, Hispanic women, and women of other races or ethnicities, however were slightly different than those of black women. The most frequent diagnoses were uterine leiomyoma, genital prolapse and endometriosis, with menstruation disorder also among the top three diagnoses for Hispanic women.

For black women, uterine leiomyoma represented more than half of the principal diagnosis associated with hysterectomies. A uterine leiomyoma is a benign tumor consisting of fibrous tissues. For all other race/ethnic groups, uterine leiomyoma was the principal diagnosis for less than 50% of the hysterectomies performed in 2002.

Appendix E provides the description of the diagnosis codes included in this report.

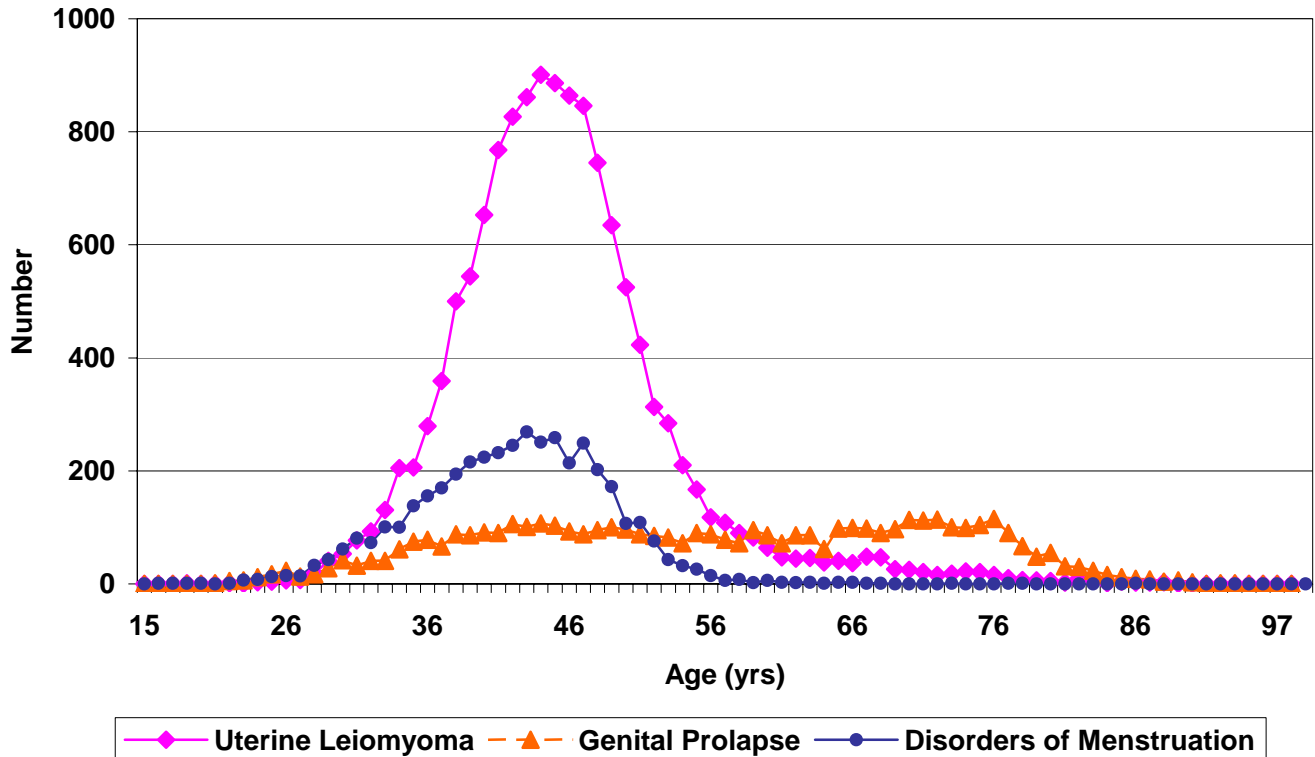
Table 4
Percentage of Principal Diagnoses Associated
with Hysterectomies by Race/Ethnicity, 2002

| Diagnosis | White | | Black | | Hispanic | | Other | | Total | |
|---------------------------|---------------|---------------|--------------|---------------|--------------|---------------|------------|---------------|---------------|---------------|
| | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Uterine Leiomyoma | 7,282 | 27.7% | 3,867 | 62.9% | 1,781 | 43.1% | 403 | 42.9% | 13,470 | 35.5% |
| Genital Prolapse | 3,658 | 13.9% | 219 | 3.6% | 566 | 13.7% | 98 | 10.4% | 4,587 | 12.1% |
| Disorders of Menstruation | 3,213 | 12.2% | 581 | 9.5% | 296 | 7.2% | 78 | 8.3% | 4,197 | 11.0% |
| Endometriosis | 3,283 | 12.5% | 329 | 5.4% | 296 | 7.2% | 84 | 8.9% | 4,032 | 10.6% |
| Genitourinary Cancer | 2,177 | 8.3% | 260 | 4.2% | 334 | 8.1% | 75 | 8.0% | 2,925 | 7.7% |
| Pain & Other Symptoms | 1,467 | 5.6% | 156 | 2.5% | 141 | 3.4% | 18 | 1.9% | 1,807 | 4.8% |
| All Other Diagnoses | 5,238 | 19.9% | 731 | 11.9% | 716 | 17.3% | 183 | 19.5% | 6,975 | 18.4% |
| Total | 26,318 | 100.0% | 6,143 | 100.0% | 4,130 | 100.0% | 939 | 100.0% | 37,993 | 100.0% |

Note: Unclassified race/ethnicity numbers are not shown.
Source: AHCA

The top three diagnoses associated with hysterectomies by age are presented in **Figure 6**. As shown, the number of hysterectomies for uterine leiomyoma and disorders of menstruation peaked as women reached their mid 40's. However, the number of hysterectomies for genital prolapse was found to increase among women in their late 60's and 70's.

Figure 6
Top 3 Principal Diagnoses
Associated with Hysterectomies by Age, 2002



Source: AHCA

Table 5 presents the type of hysterectomy procedures by race/ethnicity groups during the year 2002. The table shows that the abdominal hysterectomy was performed more frequently than the vaginal hysterectomy for all racial/ethnic groups. Abdominal hysterectomies occurred more often among black women (85.5%) than Hispanic women (78.2%) or white women (68.1%). White women (20.2%) were more likely to undergo vaginal hysterectomies than Hispanic women (15.8%), or black women (10.1%) in 2002.

Table 5
Percentage of Hysterectomy Procedure Types by Race/Ethnicity, 2002

| Procedure | White | | Black | | Hispanic | | Other | | Total | |
|--------------|---------------|---------------|--------------|---------------|--------------|---------------|------------|---------------|---------------|---------------|
| | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Abdominal | 17,924 | 68.1% | 5,251 | 85.5% | 3,230 | 78.2% | 743 | 79.1% | 27,523 | 72.4% |
| Vaginal | 5,320 | 20.2% | 621 | 10.1% | 652 | 15.8% | 132 | 14.1% | 6,784 | 17.9% |
| LAVH | 3,038 | 11.5% | 259 | 4.2% | 241 | 5.8% | 62 | 6.6% | 3,625 | 9.5% |
| Unspecified | 36 | 0.1% | 12 | 0.2% | 7 | 0.2% | ** | ** | 61 | 0.2% |
| Total | 26,318 | 100.0% | 6,143 | 100.0% | 4,130 | 100.0% | 939 | 100.0% | 37,993 | 100.0% |

Note: Unclassified race/ethnicity numbers not shown.

** Less than 6 procedures.

Source: AHCA

The type of hysterectomy procedures performed by diagnosis is displayed in **Table 6**. As shown, the diagnosis that was most often associated with abdominal and LAVH procedures was uterine leiomyoma. Vaginal procedures were performed more frequently for genital prolapse.

Table 6
Percentage of Hysterectomy Procedures by Type and Diagnosis, 2002

| Diagnosis | Abdominal | | Vaginal | | LAVH | | Total | |
|---------------------------|---------------|---------------|--------------|---------------|--------------|---------------|---------------|---------------|
| | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Uterine Leiomyoma | 11,428 | 41.5% | 1,057 | 15.6% | 959 | 26.5% | 13,470 | 35.5% |
| Genital Prolapse | 652 | 2.4% | 3,390 | 50.0% | 544 | 15.0% | 4,587 | 12.1% |
| Disorders of Menstruation | 2,783 | 10.1% | 802 | 11.8% | 604 | 16.7% | 4,197 | 11.0% |
| Endometriosis | 3,107 | 11.3% | 355 | 5.2% | 564 | 15.6% | 4,032 | 10.6% |
| Genitourinary Cancer | 2,772 | 10.1% | 70 | 1.0% | 75 | 2.1% | 2,925 | 7.7% |
| Pain & Other Symptoms | 1,229 | 4.5% | 326 | 4.8% | 250 | 6.9% | 1,807 | 4.8% |
| All Other Diagnoses | 5,552 | 20.2% | 784 | 11.6% | 629 | 17.4% | 6,975 | 18.4% |
| Total | 27,523 | 100.0% | 6,784 | 100.0% | 3,625 | 100.0% | 37,993 | 100.0% |

Source: AHCA

Table 7 presents the insurance status among women who had a hysterectomy procedure during the year 2002. The table shows private insurance as the principal payer for the majority of the hysterectomy procedures (73.7%), followed by Medicare (13.1%). Hospital stays were shorter among women with private insurance (2.7 days) than for women insured by Medicare (3.8 days). Patients whose hysterectomy was paid by Medicaid had the youngest average age (40 years). **Appendix F** provides a description of the payer categories.

Table 7
Number of Hysterectomies, Average Age, and
Average Length of Stay (ALOS) in Days by Payer, 2002

| Payer | Number | Percent | Average Age | ALOS |
|------------------------------|---------------|----------------|--------------------|-------------|
| Private Insurance | 28,006 | 73.7% | 44 | 2.7 |
| Medicare & Medicare HMO | 4,965 | 13.1% | 68 | 3.8 |
| Medicaid & Medicaid HMO | 2,418 | 6.4% | 40 | 3.3 |
| Self Pay/Charity | 1,467 | 3.9% | 46 | 3.6 |
| Other State/Local Government | 547 | 1.4% | 44 | 3.1 |
| Other | 590 | 1.6% | 45 | 2.9 |
| Total | 37,993 | 100.0% | 47 | 2.9 |

Source: AHCA

Hospital Charges

Table 8 displays charges and average length of stay associated with hysterectomy procedures performed in Florida hospitals. The charges, however, do not reflect the true cost of hysterectomies, since they do not include the cost of medical care received before or after admission to the hospital, nor physician charges.

In 2002, hysterectomy procedures resulted in total hospital charges of over \$679 million; an average hospital charge of \$17,883 and a hospital stay of 2.9 days. Average charges increased as the age of the patients increased, starting at about 44 years of age.

Table 8
Hospital Charges and Average Length of Stay
(ALOS) for Hysterectomies by Age, 2002

| Age | Number | Total Hospital Charges | Average Charge per Stay | ALOS |
|--------------|---------------|------------------------|-------------------------|------------|
| 15-24 | 202 | \$3,270,068 | \$16,188 | 2.7 |
| 25-34 | 3,902 | \$63,132,962 | \$16,180 | 2.6 |
| 35-44 | 14,323 | \$240,942,724 | \$16,822 | 2.7 |
| 45-54 | 11,544 | \$202,755,296 | \$17,564 | 2.9 |
| 55-64 | 3,500 | \$69,643,399 | \$19,898 | 3.2 |
| 65 and older | 4,522 | \$99,673,382 | \$22,042 | 3.9 |
| Total | 37,993 | \$679,417,831 | \$17,883 | 2.9 |

Note: Numbers may not add to total due to unclassified age records.
Source: AHCA

Table 9 presents the hospital charges and average length of stay for hysterectomies by principal diagnosis. As shown in the table, hospital charges for hysterectomies varied by the principal diagnosis associated with the procedure. Overall, the total charges were the highest for hysterectomy procedures associated with uterine leiomyoma (\$228,830,754). Average charges were higher among women with a primary genitourinary cancer diagnosis (\$27,134) than all other associated diagnoses.

Table 9
Hospital Charges and Average Length of Stay
(ALOS) for Hysterectomies by Principal Diagnosis, 2002

| Diagnosis | Number | Total Hospital Charges | Average Charge per Stay | ALOS |
|---------------------------|---------------|-------------------------------|--------------------------------|-------------|
| Uterine Leiomyoma | 13,470 | \$228,830,754 | \$16,988 | 2.8 |
| Genital Prolapse | 4,587 | \$80,448,921 | \$17,538 | 2.4 |
| Disorders of Menstruation | 4,197 | \$67,369,043 | \$16,052 | 2.5 |
| Endometriosis | 4,032 | \$66,200,131 | \$16,419 | 2.6 |
| Genitourinary Cancer | 2,925 | \$79,366,854 | \$27,134 | 5.1 |
| Pain and Other Symptoms | 1,807 | \$29,384,555 | \$16,262 | 2.5 |
| All Other Diagnoses | 6,975 | \$127,817,573 | \$18,325 | 3.2 |
| Total | 37,993 | \$679,417,831 | \$17,883 | 2.9 |

Source: AHCA

The hospital charges and average length of stay for the various hysterectomy procedures are presented in **Table 10**. The laparoscopic procedure was associated with higher charges (\$18,831) and shorter hospital stays (1.8 days). On average, the charges for laparoscopic hysterectomies were \$502 higher than the charges for abdominal procedures, and \$3,281 higher than the charges for vaginal procedures.

The lowest hospital charges were associated with vaginal procedures (\$15,551) with hospital stays lasting approximately 2.1 days. The procedure associated with one of the longest length of stays was the abdominal hysterectomy (3.3 days) with charges averaging \$18,331 per stay.

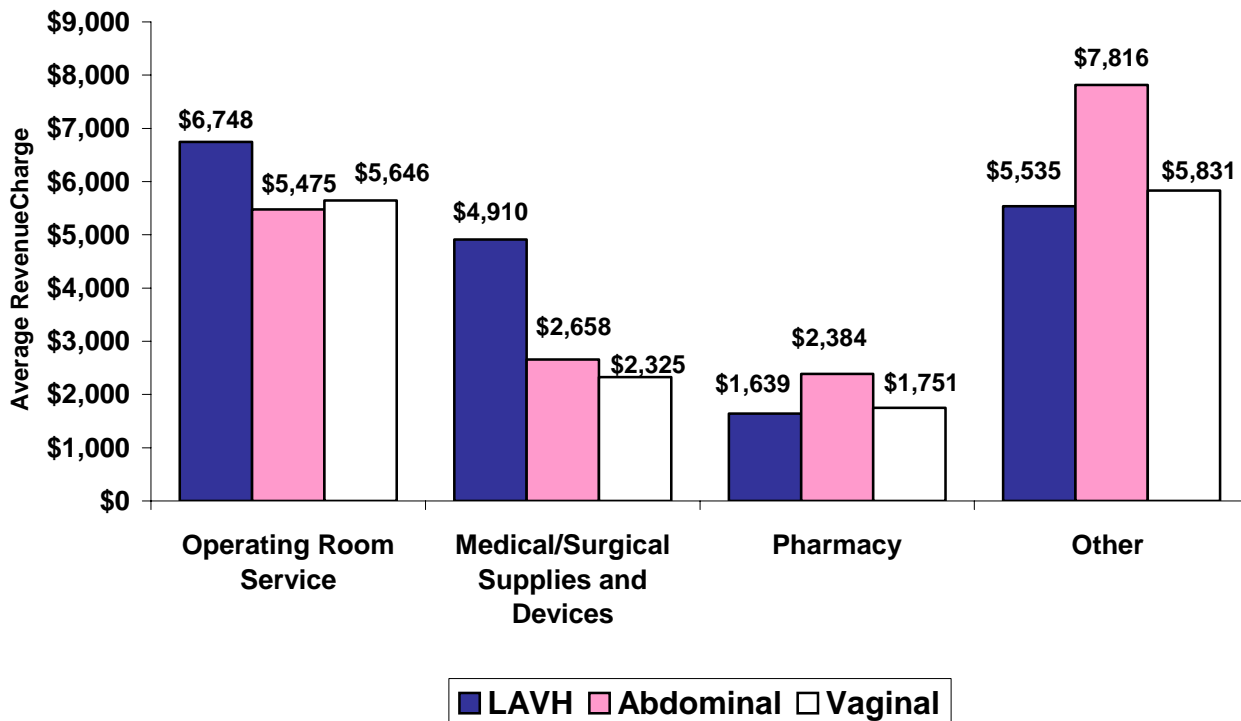
Table 10
Hospital Charges and Average Length of Stay
(ALOS) for Hysterectomies by Procedure Type, 2002

| Procedure Type | Number | Total Hospital Charges | Average Charge per Stay | ALOS |
|----------------|---------------|------------------------|-------------------------|------------|
| Abdominal | 27,523 | \$504,511,908 | \$18,331 | 3.3 |
| Vaginal | 6,784 | \$105,495,473 | \$15,551 | 2.1 |
| LAVH | 3,625 | \$68,263,416 | \$18,831 | 1.8 |
| Unspecified | 61 | \$1,147,034 | \$18,804 | 3.5 |
| Total | 37,993 | \$679,417,831 | \$17,883 | 2.9 |

Source: AHCA

An analysis of the charges revealed that the operating room service, medical or surgical supplies and devices, and pharmacy were responsible for the largest portion of the hysterectomy charges. **Figure 7** displays the revenue charges by procedure type.

Figure 7
Average Revenue Charges for Hysterectomies by Procedure Type, 2002



Source: AHCA

As displayed in **Figure 7**, the average charge for the operating room service and medical or surgical supplies and devices were higher for hysterectomies performed by the LAVH method. Pharmacy charges were higher for women who had abdominal hysterectomies than for women who had a vaginal or a laparoscopic-assisted vaginal hysterectomy. A description of the revenue charges is provided in **Appendix G**.

Table 11 displays hospital charges and average length of stay for hysterectomies by payer. The top three payers for hysterectomies were private insurance, Medicare, and Medicaid.

Table 11
Hospital Charges and Average Length of Stay
(ALOS) for Hysterectomies by Payer, 2002

| Payer | Number | Total Hospital Charges | Average Charge per Stay | ALOS |
|------------------------------|---------------|-------------------------------|--------------------------------|-------------|
| Private Insurance | 28,006 | \$471,773,886 | \$16,845 | 2.7 |
| Medicare & Medicare HMO | 4,965 | \$107,079,023 | \$21,567 | 3.8 |
| Medicaid & Medicaid HMO | 2,418 | \$47,232,462 | \$19,534 | 3.3 |
| Self Pay/Charity | 1,467 | \$31,231,898 | \$21,290 | 3.6 |
| Other State/Local Government | 547 | \$10,881,112 | \$19,892 | 3.1 |
| Other | 590 | \$11,219,450 | \$19,016 | 2.9 |
| Total | 37,993 | \$679,417,831 | \$17,883 | 2.9 |

Note: Numbers may not add to total due to unclassified payer records.

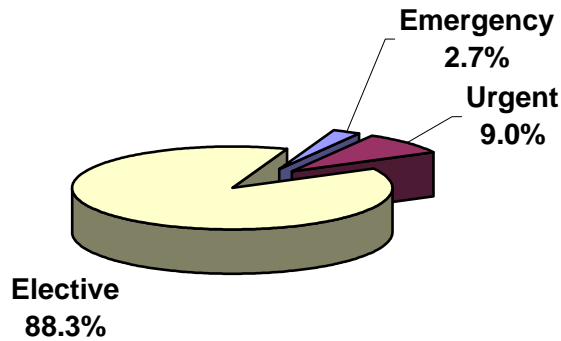
Source: AHCA

Average hospital charges for hysterectomies were lower among women with private insurance. Medicare patients had the highest average charge per stay at \$21,567 and the longest length of stay at 3.8 days. Medicaid was the third largest payer with hospital charges totaling \$47,232,462 and an average charge of \$19,534 per hospital stay.

Hospital Admissions and Discharges

Patients were admitted to the hospital for elective, urgent, and emergency hysterectomy procedures in 2002. As shown in **Figure 8**, the majority of the 37,993 hospitalizations were elective and about 12% were urgent or emergency admissions. The emergency department was the source of admission for 2.2% of the hysterectomies performed in 2002 (not shown).

Figure 8
Hysterectomy Hospitalizations by Admission Type, 2002



Source: AHCA

Table 12 displays the discharge status of patients hospitalized for hysterectomies. The majority of the patients were discharged home in 2.9 days.

Table 12
Hysterectomy Hospitalizations by Discharge Disposition, 2002

| Discharge | Number | Percent | ALOS |
|-----------------------------|---------------|---------------|------------|
| Home | 37,570 | 98.9% | 2.9 |
| Skilled Nursing Facility | 199 | 0.5% | 9.2 |
| Short-term Hospital | 22 | 0.1% | 6.5 |
| Intermediate Care Facility | 11 | 0.0% | 6.0 |
| Other Institution | 137 | 0.4% | 5.6 |
| Left Against Medical Advice | 19 | 0.1% | 2.9 |
| Expired | 35 | 0.1% | 13.5 |
| Total | 37,993 | 100.0% | 2.9 |

Source: AHCA

Appendix H describes the discharge disposition categories included in the table. Information on the number of hospitalizations and average length of stay among Florida hospitals by county are provided in **Appendix I**.

Conclusion

The annual hysterectomy rate in Florida has remained stable in recent years, with an average occurrence of 5.3 per 1,000 women. The procedure was performed most often among women 35 to 54 years of age and the majority of the hospitalizations were elective. The average length of stay was 2.9 days with over 98% of the patients discharged home.

The majority of the hysterectomies were performed abdominally, with the proportion of hysterectomies performed abdominally increasing to 72.4% in 2002. About one third of vaginal hysterectomies were laparoscopic-assisted hysterectomies. Uterine leiomyoma and abdominal procedures were found to be associated more often with hysterectomies among black women than of women of other races/ethnicities.

Total charges for hysterectomies in 2002 were over \$679 million dollars, with an average charge of \$17,883 per stay. Charges, on average, were found to be higher among women diagnosed with genitourinary cancer and among women who had laparoscopic procedures. The principal payer for the majority of the hysterectomies was private insurance.

Findings of this report suggest that continued monitoring of hysterectomy trends might be necessary to identify areas where hysterectomy rates can be reduced. However, experts disagree about the criteria for reducing the rate. Some researchers feel that hysterectomies should be performed for life-threatening conditions, while others point to the findings of studies that have shown many women to experience marked improvement in their quality of life after having the procedure for conditions such as uterine leiomyoma. Therefore, additional long-term studies are needed to determine the appropriate type of treatment for patients who suffer from gynecological conditions.

The purpose of the Health Outcome Series is to gain a better understanding of the health outcomes being achieved through the intervention of medical care and to provide this information to physicians, other health professionals, and patients.

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Appendix A

Hysterectomy Codes Included in Report

| Description | ICD-9-CM Codes |
|------------------------------------------------|------------------------------------------------------------------------|
| Laparoscopy (laparoscopic hysterectomy)* | 54.21* |
| Subtotal Abdominal Hysterectomy | 68.3 |
| Total Abdominal Hysterectomy | 68.4 |
| Vaginal Hysterectomy | 68.5 |
| Laparoscopically Assisted Vaginal Hysterectomy | 68.51 |
| Other Vaginal Hysterectomy | 68.59 |
| Radical Abdominal Hysterectomy | 68.6 |
| Radical Vaginal Hysterectomy | 68.7 |
| Other and Unspecified Hysterectomy | 68.9 |
| Bilateral Oophorectomy** | 65.5,65.51, 65.52, 65.53, 65.54, 65.6, 65.61, 65.62 65.63, 65.64 |

*To identify laparoscopic hysterectomies, the ICD-9-CM code 54.21 for laparoscopy was used in combination with codes 68.3 through 68.7, and 68.9.

** Bilateral oophorectomies were identified as secondary procedures with a principal procedure of hysterectomy.

Appendix B

Hysterectomies and Rate per Population by Age of Patient*, 1993-2002

| Age Groups | | 1993 | 1994 | 1995 | 1996 | 1997 | 1998 | 1999 | 2000 | 2001 | 2002 |
|--------------|-------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| 15-24 | Hospitalizations | 252 | 237 | 208 | 224 | 181 | 194 | 175 | 177 | 187 | 202 |
| | Rate/1,000 | 0.3 | 0.3 | 0.2 | 0.3 | 0.2 | 0.2 | 0.2 | 0.2 | 0.2 | 0.2 |
| 25-34 | Hospitalizations | 4,620 | 4,208 | 4,138 | 4,090 | 3,896 | 3,722 | 3,529 | 3,496 | 3,728 | 3,902 |
| | Rate/1,000 | 4.4 | 4.0 | 3.9 | 3.9 | 3.7 | 3.6 | 3.4 | 3.4 | 3.6 | 3.8 |
| 35-44 | Hospitalizations | 11,623 | 11,404 | 11,722 | 12,394 | 12,108 | 12,636 | 12,517 | 13,339 | 13,998 | 14,323 |
| | Rate/1,000 | 11.4 | 10.8 | 10.7 | 10.9 | 10.4 | 10.6 | 10.2 | 10.7 | 11.2 | 11.4 |
| 45-54 | Hospitalizations | 7,852 | 7,919 | 8,251 | 9,137 | 9,128 | 9,607 | 9,771 | 10,334 | 11,254 | 11,544 |
| | Rate/1,000 | 10.2 | 9.8 | 9.7 | 10.2 | 9.7 | 9.9 | 9.5 | 9.6 | 10.1 | 9.9 |
| 55-64 | Hospitalizations | 2,725 | 2,658 | 2,683 | 2,885 | 2,933 | 2,971 | 3,069 | 3,133 | 3,368 | 3,500 |
| | Rate/1,000 | 4.1 | 3.9 | 3.9 | 4.1 | 4.0 | 3.9 | 3.8 | 3.7 | 3.8 | 3.7 |
| 65 + | Hospitalizations | 4,909 | 5,094 | 5,044 | 5,258 | 5,160 | 4,973 | 4,756 | 4,756 | 4,369 | 4,522 |
| | Rate/1,000 | 3.4 | 3.4 | 3.3 | 3.4 | 3.3 | 3.2 | 3.0 | 3.0 | 2.7 | 2.7 |
| Total | Hospitalizations | 31,981 | 31,520 | 32,046 | 33,988 | 33,406 | 34,103 | 33,817 | 35,235 | 36,904 | 37,993 |
| | Rate/1,000 | 5.5 | 5.3 | 5.3 | 5.5 | 5.3 | 5.3 | 5.1 | 5.2 | 5.4 | 5.4 |

* Per 1,000 Florida Female Residents \geq 15 years.

Source: AHCA and Office of Economic and Demographic Research

Appendix C

Racial Groups and Race/Ethnicity Categories

| Racial Group | Race/Ethnicity Categories |
|---------------------|-----------------------------------------------------------------------------------------------|
| Nonwhite | American Indian/Eskimo/Aleut Asian or Pacific Islander Black Black Hispanic Other |
| White | White White Hispanic |

| Racial Group | Race/Ethnicity Categories |
|---------------------|--------------------------------------------------------------------|
| White | White |
| Black | Black |
| Hispanic | Black Hispanic White Hispanic |
| Other | American Indian/Eskimo/Aleut Asian or Pacific Islander Other |

Appendix D

Procedure Codes and Type of Hysterectomy

| Type of Hysterectomy | ICD-9-CM Codes |
|--------------------------------------------|-----------------|
| Abdominal | 68.3-68.4; 68.6 |
| Vaginal | 68.5,68.59,68.7 |
| Laparoscopic Assisted Vaginal Hysterectomy | 68.51, 54.21* |
| Other | 68.9 |

*To identify laparoscopic assisted vaginal hysterectomies, the ICD-9-CM code 54.21 for laparoscopy was used in combination with vaginal hysterectomy codes 68.5,68.59, and 68.7.

Appendix E

Description of Diagnosis Categories

| Diagnosis | ICD-9-CM Codes |
|---------------------------|-------------------------|
| Uterine Leiomyoma | 218 - 218.9 |
| Genital Prolapse | 618 - 618.9 |
| Disorders of Menstruation | 626 - 626.9 |
| Endometriosis | 617 – 617.9 |
| Genitourinary Cancer | 179 – 184.9; 188- 189.9 |
| Pain & Other Symptoms | 625 – 625.9 |

Appendix F

Principal Payer Categories

| | |
|------------------------------|----------------------------------------------------------|
| Medicaid and Medicaid HMO | Medicaid Medicaid HMO |
| Medicare and Medicare HMO | Medicare Medicare HMO |
| Private Insurance | Commercial Insurance Commercial HMO Commercial PPO |
| Self Pay/Charity | Self Pay/Underinsured Charity |
| Other State/Local Government | Other State/Local Government |
| Other | Workers' Compensation Champus VA Other |

Appendix G

Description of Revenue Categories

| Revenue Charge | Revenue Description |
|---------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pharmacy | Pharmacy |
| Medical/Surgical Supplies and Devices | Medical/Surgical Supplies and Devices |
| Operating Room Services | Operating Room Services |
| Other | Anesthesia Cardiology Coronary Care CT Scan Emergency Room Intensive Care Labor Room/Delivery Laboratory Laboratory Pathological Magnetic Resonance Imaging Nuclear Medicine Nursery Occupational Therapy Oncology Other Physical Therapy Radiology-Diagnostic Radiology-Therapeutic Recovery Room Respiratory Services Room Charges |

Appendix H

Discharge Disposition Categories

| | |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Home | Discharged home Discharged to home care under supervision of a home healthcare organization Discharged home on IV medications |
| Skilled Nursing Facility | Discharged to a skilled nursing facility |
| Short-term Hospital | Discharged to a short-term general hospital |
| Intermediate Care Facility | Discharged to an intermediate care facility |
| Other Institution | Discharged to another type of institution |
| Left Against Medical Advice | Left facility against medical advice |
| Expired | Expired |

Appendix I

Hysterectomy Hospitalizations Among Florida Hospitals and Average Length of Stay (ALOS) in Days, 2002

| County | Facility Name | Number | ALOS |
|-----------|----------------------------------------------|--------|------|
| Alachua | North Florida Regional Medical Center | 604 | 2.5 |
| Alachua | Shands at AGH | 112 | 3.6 |
| Alachua | Shands Hospital at the University of Florida | 295 | 4.2 |
| Baker | Ed Fraser Memorial Hospital | ** | ** |
| Bay | Bay Medical Center | 271 | 2.0 |
| Bay | Gulf Coast Medical Center | 397 | 2.3 |
| Brevard | Cape Canaveral Hospital | 177 | 2.5 |
| Brevard | Holmes Regional Medical Center | 423 | 2.5 |
| Brevard | Palm Bay Community Hospital | 14 | 1.7 |
| Brevard | Parrish Medical Center | 200 | 2.8 |
| Brevard | Wuesthoff Medical Center-Rockledge | 174 | 2.4 |
| Broward | Broward General Medical Center | 257 | 3.9 |
| Broward | Cleveland Clinic Hospital | 141 | 2.7 |
| Broward | Coral Springs Medical Center | 212 | 2.7 |
| Broward | Florida Medical Center | 81 | 3.2 |
| Broward | Hollywood Medical Center | 47 | 3.0 |
| Broward | Holy Cross Hospital, Inc. | 237 | 3.2 |
| Broward | Imperial Point Medical Center | 156 | 3.7 |
| Broward | Memorial Hospital Pembroke | 57 | 2.2 |
| Broward | Memorial Hospital West | 501 | 3.4 |
| Broward | Memorial Regional Hospital | 506 | 3.3 |
| Broward | North Broward Medical Center | 97 | 3.6 |
| Broward | North Ridge Medical Center | 61 | 4.1 |
| Broward | Northwest Medical Center | 171 | 3.0 |
| Broward | Plantation General Hospital | 217 | 3.3 |
| Broward | University Hospital and Medical Center | 14 | 3.6 |
| Broward | West Regional Medical Center | 113 | 3.1 |
| Charlotte | Bon Secours - Saint Joseph Hospital | 304 | 2.0 |
| Charlotte | Charlotte Regional Medical Center | 24 | 2.3 |
| Charlotte | Fawcett Memorial Hospital | 261 | 1.7 |
| Citrus | Citrus Memorial Hospital | 95 | 2.3 |
| Citrus | Seven Rivers Community Hospital | 47 | 1.9 |
| Clay | Orange Park Medical Center | 411 | 2.5 |
| Collier | Cleveland Clinic Florida Hospital-Naples | 30 | 2.6 |
| Collier | Naples Community Hospital | 82 | 3.5 |
| Collier | North Collier Hospital | 508 | 2.3 |

| County | Facility Name | Number | ALOS |
|-----------|------------------------------------------------------|--------|------|
| Columbia | Lake City Medical Center | 65 | 2.4 |
| Columbia | Shands at Lake Shore | 51 | 2.7 |
| Dade | Aventura Hospital and Medical Center | 165 | 3.4 |
| Dade | Baptist Hospital of Miami | 528 | 3.4 |
| Dade | Cedars Medical Center | 167 | 5.8 |
| Dade | Coral Gables Hospital | 103 | 3.6 |
| Dade | Healthsouth Doctors' Hospital | 109 | 3.4 |
| Dade | Hialeah Hospital | 169 | 2.8 |
| Dade | Homestead Hospital | 29 | 3.5 |
| Dade | Jackson Memorial Hospital | 703 | 3.4 |
| Dade | Jackson Memorial Hospital-North | ** | ** |
| Dade | Jackson South Community Hospital | 24 | 4.9 |
| Dade | Kendall Regional Medical Center | 88 | 4.2 |
| Dade | Larkin Community Hospital | 23 | 2.7 |
| Dade | Mercy Hospital, Inc. | 340 | 3.5 |
| Dade | Mount Sinai Medical Center | 236 | 4.2 |
| Dade | Mount Sinai Medical Center and Miami Heart Institute | 15 | 8.9 |
| Dade | North Shore Medical Center | 78 | 3.9 |
| Dade | Palm Springs General Hospital | 155 | 2.5 |
| Dade | Palmetto General Hospital | 301 | 3.1 |
| Dade | Pan American Hospital | 67 | 3.5 |
| Dade | Parkway Regional Medical Center | 54 | 3.8 |
| Dade | South Miami Hospital | 410 | 3.3 |
| Dade | University of Miami Hospital and Clinics | 52 | 3.1 |
| Dade | Westchester General Hospital | 49 | 4.1 |
| DeSoto | DeSoto Memorial Hospital | 15 | 2.6 |
| Duval | Baptist Medical Center | 597 | 2.8 |
| Duval | Baptist Medical Center – Beaches | 195 | 2.6 |
| Duval | Memorial Hospital Jacksonville | 515 | 2.9 |
| Duval | Saint Luke's Hospital | 280 | 3.5 |
| Duval | Saint Vincent's Medical Center | 799 | 3.3 |
| Duval | Shands Jacksonville Medical Center | 288 | 3.0 |
| Escambia | Baptist Hospital | 217 | 2.9 |
| Escambia | Sacred Heart Hospital | 941 | 3.3 |
| Escambia | West Florida Hospital | 230 | 2.9 |
| Flagler | Florida Hospital Flagler | 71 | 2.3 |
| Gulf | Gulf Pines Hospital | ** | ** |
| Hernando | Brooksville Regional Hospital | ** | ** |
| Hernando | Oak Hill Hospital | 137 | 2.6 |
| Hernando | Spring Hill Regional Hospital | 120 | 2.8 |
| Highlands | Florida Hospital Heartland Medical Center | 116 | 2.6 |
| Highlands | Highlands Regional Medical Center | 39 | 2.8 |

| County | Facility Name | Number | ALOS |
|--------------|------------------------------------------------------------|--------|------|
| Hillsborough | Brandon Regional Hospital | 595 | 2.6 |
| Hillsborough | H. Lee Moffitt Cancer Center & Research Institute Hospital | 275 | 4.0 |
| Hillsborough | Memorial Hospital of Tampa | ** | ** |
| Hillsborough | South Florida Baptist Hospital | 137 | 2.6 |
| Hillsborough | Saint Joseph's Hospital, Inc. | 1,182 | 2.9 |
| Hillsborough | Tampa General Hospital | 232 | 3.9 |
| Hillsborough | Town & Country Hospital | 37 | 2.8 |
| Hillsborough | University Community Hospital | 389 | 3.0 |
| Hillsborough | University Community Hospital at Carrollwood | ** | ** |
| Indian River | Indian River Memorial Hospital | 293 | 3.2 |
| Indian River | Sebastian River Medical Center | 28 | 2.3 |
| Jackson | Jackson Hospital | 97 | 2.8 |
| Lake | Florida Hospital Waterman | 112 | 3.0 |
| Lake | Leesburg Regional Medical Center | 244 | 2.5 |
| Lake | South Lake Hospital | 16 | 2.3 |
| Lee | Cape Coral Hospital | 343 | 2.4 |
| Lee | Gulf Coast Hospital | 269 | 2.2 |
| Lee | Healthpark Medical Center - Lee Memorial Hospital | 378 | 2.5 |
| Lee | Lee Memorial Hospital | 313 | 4.1 |
| Lee | Lehigh Regional Medical Center | 26 | 3.2 |
| Lee | Southwest Florida Regional Medical Center | 20 | 4.9 |
| Leon | Capital Regional Medical Center | 272 | 2.9 |
| Leon | Tallahassee Memorial Hospital | 909 | 3.0 |
| Manatee | Blake Medical Center | 170 | 2.6 |
| Manatee | Manatee Memorial Hospital | 293 | 2.5 |
| Marion | Munroe Regional Medical Center | 605 | 2.6 |
| Marion | Ocala Regional Medical Center | 236 | 2.7 |
| Marion | West Marion Community Hospital | ** | ** |
| Martin | Martin Memorial Hospital South | 45 | 3.3 |
| Martin | Martin Memorial Medical Center | 346 | 2.8 |
| Monroe | Fishermen's Hospital | ** | ** |
| Monroe | Lower Keys Medical Center | 79 | 2.4 |
| Monroe | Mariners Hospital | 15 | 6.1 |
| Nassau | Baptist Medical Center - Nassau | 125 | 2.3 |
| Okaloosa | Fort Walton Beach Medical Center | 342 | 2.5 |
| Okaloosa | North Okaloosa Medical Center | 429 | 2.1 |
| Okaloosa | Twin Cities Hospital | 53 | 2.4 |
| Okeechobee | Raulerson Hospital | 41 | 3.0 |
| Orange | Arnold Palmer Hospital | ** | ** |
| Orange | Florida Hospital | 775 | 3.3 |
| Orange | Florida Hospital-East Orlando | 18 | 3.9 |
| Orange | Health Central | 255 | 2.8 |
| Orange | Lucerne Medical Center | 969 | 2.6 |

| County | Facility Name | Number | ALOS |
|------------|------------------------------------------|--------|------|
| Orange | Orlando Regional Medical Center | 181 | 4.4 |
| Orange | Sand Lake Hospital | 168 | 2.3 |
| Orange | Winter Park Memorial Hospital | 296 | 2.6 |
| Osceola | Florida Hospital-Celebration Health | 153 | 2.1 |
| Osceola | Florida Hospital-Kissimmee | 39 | 2.6 |
| Osceola | Osceola Regional Medical Center | 263 | 2.3 |
| Osceola | Saint Cloud Hospital | 9 | 2.0 |
| Palm Beach | Bethesda Memorial Hospital | 327 | 3.9 |
| Palm Beach | Boca Raton Community Hospital | 322 | 3.9 |
| Palm Beach | Columbia Hospital | 27 | 3.4 |
| Palm Beach | Delray Medical Center | 25 | 6.1 |
| Palm Beach | Glades General Hospital | 16 | 3.2 |
| Palm Beach | Good Samaritan Medical Center | 338 | 4.2 |
| Palm Beach | JFK Medical Center | 108 | 4.2 |
| Palm Beach | Jupiter Medical Center | 246 | 3.2 |
| Palm Beach | Palm Beach Gardens Medical Center | 154 | 3.3 |
| Palm Beach | Palms West Hospital | 342 | 3.3 |
| Palm Beach | Saint Mary's Medical Center | 148 | 3.5 |
| Palm Beach | Wellington Regional Medical Center | 158 | 2.8 |
| Palm Beach | West Boca Medical Center | 172 | 3.7 |
| Pasco | Community Hospital | 141 | 2.9 |
| Pasco | East Pasco Medical Center, Inc. | 83 | 2.8 |
| Pasco | Morton Plant North Bay Hospital | 121 | 2.4 |
| Pasco | Pasco Regional Medical Center | 98 | 2.2 |
| Pasco | Regional Medical Center Bayonet Point | 78 | 2.9 |
| Pinellas | Bayfront Medical Center | 714 | 2.7 |
| Pinellas | Edward White Hospital | ** | ** |
| Pinellas | Helen Ellis Memorial Hospital | 123 | 2.7 |
| Pinellas | Largo Medical Center | 179 | 2.6 |
| Pinellas | Mease Hospital – Dunedin | 349 | 2.6 |
| Pinellas | Mease Hospital- Countryside | 20 | 4.2 |
| Pinellas | Morton Plant Hospital | 547 | 2.8 |
| Pinellas | Northside Hospital | 52 | 5.5 |
| Pinellas | Palms Of Pasadena Hospital | 26 | 2.4 |
| Pinellas | Saint Anthony's Hospital | 34 | 2.9 |
| Pinellas | Saint Petersburg General Hospital | 227 | 2.4 |
| Pinellas | Sun Coast Hospital | 35 | 4.0 |
| Polk | Bartow Memorial Hospital | 69 | 3.0 |
| Polk | Heart Of Florida Regional Medical Center | 105 | 3.4 |
| Polk | Lake Wales Medical Center | 57 | 3.2 |
| Polk | Lakeland Regional Medical Center | 539 | 2.8 |
| Polk | Winter Haven Hospital | 13 | 5.0 |
| Polk | Winter Haven Hospital-Regency | 279 | 2.7 |

| County | Facility Name | Number | ALOS |
|---------------|--------------------------------------|---------------|-------------|
| Putnam | Putnam Community Medical Center | 116 | 2.2 |
| Santa Rosa | Gulf Breeze Hospital | 95 | 2.2 |
| Santa Rosa | Santa Rosa Medical Center | 108 | 2.0 |
| Sarasota | Bon Secours-Venice Hospital | 159 | 3.2 |
| Sarasota | Doctors' Hospital Of Sarasota | 133 | 2.0 |
| Sarasota | Englewood Community Hospital | 45 | 2.6 |
| Sarasota | Sarasota Memorial Hospital | 622 | 1.8 |
| Seminole | Central Florida Regional Hospital | 255 | 2.8 |
| Seminole | Florida Hospital-Altamonte | 521 | 2.4 |
| Seminole | South Seminole Hospital | 277 | 2.3 |
| Saint Johns | Flagler Hospital | 200 | 2.5 |
| Saint Lucie | Lawnwood Regional Medical Center | 170 | 3.7 |
| Saint Lucie | Saint Lucie Medical Center | 113 | 3.0 |
| Sumter | The Villages Regional Hospital | ** | ** |
| Taylor | Doctors' Memorial Hospital, Inc. | 18 | 3.9 |
| Volusia | Bert Fish Medical Center | 42 | 3.7 |
| Volusia | Florida Hospital - Ormond Memorial | 238 | 2.9 |
| Volusia | Florida Hospital Deland | 191 | 3.0 |
| Volusia | Florida Hospital Fish Memorial | 21 | 3.9 |
| Volusia | Halifax Medical Center | 444 | 2.9 |
| Walton | Healthmark Regional Medical Center | ** | ** |
| Washington | Northwest Florida Community Hospital | ** | ** |

** Less than 6 procedures.

Source: AHCA



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