

Table 7C.8: Hospital Discharges, Length of Stay (LOS), and Charges for Children and Adolescents Age 20 and Under with Musculoskeletal (MSK) Neoplasm Diagnoses,¹ by Sex and Age, United States 2013

Hospital Discharges	Number of Hospital Discharges (in 1,000s)									
	Sex		Age in Years							Total
	Male	Female	Neonatal	<1	1 to 4	5 to 9	10 to 13	14 to 17	18 to 20	
Any MSK Neoplasm Diagnoses [1]	12.2	10.8	0.3	0.9	2.3	3.8	5.7	6.8	3.2	23.0
Primary Diagnosis [2]	2	1.6	*	0.2	0.4	0.5	0.8	1.0	0.6	3.6
Discharges/Visits for Any MSK Diagnoses	274.2	229.6	168.8	22.2	50.5	53.9	55.1	81.5	72.0	503.9
Proportion Any MSK Neoplasm to Any MSK Diagnoses	4.4%	4.7%	0.2%	4.1%	4.6%	7.1%	10.3%	8.3%	4.4%	4.6%
Proportion Primary MSK Neoplasm to Any MSK Diagnoses	0.7%	0.7%	*	0.9%	0.8%	0.9%	1.5%	1.2%	0.8%	0.7%
Discharges/Visits for All Diagnosis	3,040.9	3,262.9	3,935.2	292.4	416.1	289.8	241.9	445.2	686.0	6,303.8
Proportion Any MSK Neoplasm to All Diagnoses	0.4%	0.3%	0.0%	0.3%	0.6%	1.3%	2.4%	1.5%	0.5%	0.4%
Proportion Primary MSK Neoplasm to All Diagnoses	0.1%	0.0%	*	0.0%	0.1%	0.2%	0.3%	0.2%	0.1%	0.1%
Hospital Charges	Mean LOS and Charges									
Any MSK Neoplasm Diagnoses [1]										
Mean Length of Stay	4.2	5.0	10.6	5.0	4.3	4.2	4.3	4.4	5.0	4.6
Mean Charges [3] (in 1,000 \$s)	\$ 46.8	\$ 50.5	\$ 91.0	\$ 63.1	\$ 43.4	\$ 43.2	\$ 46.0	\$ 48.1	\$ 55.7	\$ 48.5
Total Charges (in million \$s)	\$ 571.0	\$ 545.4	\$ 27.3	\$ 56.8	\$ 99.8	\$ 164.2	\$ 262.2	\$ 327.1	\$ 178.2	\$ 1,115.5
Primary Diagnosis [2]										
Mean Length of Stay	5.5	7.4	*	9.0	4.9	8.2	5.3	6.3	6.7	6.4
Mean Charges [3] (in 1,000 \$s)	\$ 89.3	\$ 97.7	*	94.6	\$ 77.8	\$ 114.2	\$ 87.3	\$ 88.6	\$ 100.3	\$ 93.1
Total Charges (in million \$s)	\$ 178.6	\$ 156.3	*	* \$	\$ 31.1	\$ 57.1	\$ 69.8	\$ 88.6	\$ 60.2	\$ 335.2
Any MSK Neoplasm Diagnoses [1]										
Benign	1.6	1.4	0.3	0.5	0.4	0.4	0.5	0.5	0.4	3.0
Malignant	10.6	9.3	*	0.4	1.9	3.4	5.2	6.3	2.9	20.0
Proportion of Total MSK Neoplasm Diagnoses [5]										
Benign	13.1%	13.0%	100.0%	55.6%	17.4%	10.5%	8.8%	7.4%	12.5%	13.0%
Malignant	86.9%	86.1%	*	200.0%	475.0%	680.0%	650.0%	630.0%	483.3%	87.0%

* Data does not meet standards for reliability

[1] Includes benign lesions of bone, cartilage, and soft and connective tissue, lipoma, and malignancy of bone, cartilage, and soft and connective tissue.

[2] Primary diagnosis defined as the first Dx.

[3] Average charges are based on individual record discharges. The fees included may vary from patient to patient, but generally include hospital room, supplies, medications, laboratory fees, and care staff, such as nurses. They generally do not include professional fees (doctors) and non-covered charges. In a small proportion of the discharge cases, professional fees (doctors) are not removed from total charges because the data source cannot provide the information. Emergency charges incurred prior to admission to the hospital may be included in total charges.

[4] Total greater than 100% due to diagnoses for more than one deformity.

Source: HCUP National Inpatient Sample (NIS). Healthcare Cost and Utilization Project (HCUP). 2013. Agency for Healthcare Research and Quality, Rockville, MD. <https://www.hcup-us.ahrq.gov/nisoverview.jsp>