

TABLE E-1 Demographic Data for Revision Total Hip Arthroplasty According to Age*

Code	Patient Age in Years					Total
	<55	55 to 64	65 to 74	75 to 84	85 to 99	
00.70: All-component revision	4400 (20.9%)	4270 (20.2%)	5127 (24.3%)	5727 (27.1%)	1571 (7.4%)	21,095 (100.0%)
00.71: Acetabular component revision	1418 (21.7%)	1283 (19.6%)	1682 (25.8%)	1680 (25.7%)	467 (7.2%)	6530 (100.0%)
00.72: Femoral component revision	908 (13.5%)	1135 (16.8%)	1718 (25.5%)	2126 (31.5%)	862 (12.8%)	6749 (100.0%)
00.73: Isolated head/liner revision	1217 (18.8%)	1417 (21.9%)	1792 (27.7%)	1602 (24.7%)	450 (6.9%)	6479 (100.0%)
80.05: Arthrotomy/removal	1204 (25.7%)	853 (18.2%)	1026 (21.9%)	1091 (23.3%)	503 (10.8%)	4678 (100.0%)
81.53: Hip revision, not otherwise specified	1002 (20.6%)	849 (17.4%)	1113 (22.8%)	1406 (28.9%)	501 (10.3%)	4872 (100.0%)
Other combinations	221 (24.2%)	187 (20.5%)	212 (23.2%)	225 (24.6%)	67 (7.3%)	913 (100.0%)
Total	10,370 (20.2%)	9994 (19.5%)	12,670 (24.7%)	13,858 (27.0%)	4423 (8.6%)	51,315 (100.0%)

*The values are given as the number of procedures, with the percentage of the number of revisions with the specified procedure code in parentheses.

TABLE E-2 Frequency of Revision Total Hip Arthroplasty According to Hospital Type*

Code	Hospital Type			
	Rural	Urban Teaching	Urban Nonteaching	Total
00.70: All-component revision	1504 (7.1%)	7077 (33.5%)	12,525 (59.3%)	21,105 (100.0%)
00.71: Acetabular component revision	578 (8.8%)	2497 (38.2%)	3462 (53.0%)	6537 (100.0%)
00.72: Femoral component revision	699 (10.4%)	2905 (43.0%)	3145 (46.6%)	6749 (100.0%)
00.73: Isolated head/liner revision	466 (7.2%)	2508 (38.7%)	3506 (54.1%)	6479 (100.0%)
80.05: Arthrotomy/removal	339 (7.2%)	1577 (33.7%)	2767 (59.1%)	4682 (100.0%)
81.53: Hip revision, not otherwise specified	396 (8.1%)	1799 (36.9%)	2685 (55.0%)	4880 (100.0%)
Other combinations	95 (10.4%)	314 (34.4%)	504 (55.2%)	913 (100.0%)
Total	4076 (7.9%)	18,676 (36.4%)	28,593 (55.7%)	51,345 (100.0%)

*The values are given as the number of procedures, with the percentage of the number of revisions with the specified procedure code in parentheses.

TABLE E-3 Frequency of Revision Total Hip Arthroplasty According to Hospital Size*

Code	Hospital Size			
	Small	Medium	Large	Total
00.70: All-component revision	2875 (13.6%)	4932 (23.4%)	13,299 (63.0%)	21,105 (100.0%)
00.71: Acetabular component revision	769 (11.8%)	1403 (21.5%)	4365 (66.8%)	6537 (100.0%)
00.72: Femoral component revision	945 (14.0%)	1633 (24.2%)	4171 (61.8%)	6749 (100.0%)
00.73: Isolated head/liner revision	844 (13.0%)	1609 (24.8%)	4027 (62.2%)	6479 (100.0%)
80.05: Arthrotomy/removal	538 (11.5%)	938 (20.0%)	3206 (68.5%)	4682 (100.0%)
81.53: Hip revision, not otherwise specified	524 (10.7%)	1206 (24.7%)	3150 (64.5%)	4880 (100.0%)
Other combinations	87 (9.5%)	226 (24.8%)	600 (65.7%)	913 (100.0%)
Total	6582 (12.8%)	11,945 (23.3%)	32,818 (63.9%)	51,345 (100.0%)

*The values are given as the number of procedures, with the percentage of the number of revisions with the specified procedure code in parentheses.

TABLE E-4 Average Length of Stay and Average Total Hospital Charges for Revision Total Hip Arthroplasty

Code	NIS 2006 (Full Year) and 2005 Discharge in 4th Quarter (October to December), Hip Revisions*				
	No. of Procedures	Average Age (yr)	Gender (% female)	Length of Stay (days)	Total Charges
00.70: All-component revision	21,047 (41.1%)	66.7	55.8	5.3	\$55,416
00.71: Acetabular component revision	6525 (12.7%)	66.3	60.9	5.1	\$45,415
00.72: Femoral component revision	6738 (13.2%)	70.3	60.7	6.5	\$56,481
00.73: Isolated head/liner revision	6469 (12.6%)	66.8	55.7	5.0	\$42,245
80.05: Arthrotomy/removal	4678 (9.1%)	65.7	51.6	11.8	\$69,380
81.53: Hip revision, not otherwise specified	4862 (9.5%)	67.8	60.6	6.2	\$55,793
Other combinations	913 (1.8%)	65.5	51.7	11.1	\$90,301
Total	51,231 (100.0%)	67.1	57.1	6.2	\$54,553

*NIS = Nationwide Inpatient Sample.

TABLE E-5 Demographic Data on Revision Total Hip Arthroplasty According to United States Census Region*

Code	United States Census Region†				
	Northeast	Midwest	South	West	Total
00.70: All-component revision	3445 (16.3%)	5090 (24.1%)	7582 (35.9%)	4988 (23.6%)	21,105 (100.0%)
00.71: Acetabular component revision	997 (15.3%)	1638 (25.1%)	2329 (35.6%)	1572 (24.0%)	6537 (100.0%)
00.72: Femoral component revision	1231 (18.2%)	1777 (26.3%)	2433 (36.0%)	1309 (19.4%)	6749 (100.0%)
00.73: Isolated head/liner revision	1160 (17.9%)	1358 (21.0%)	2191 (33.8%)	1770 (27.3%)	6479 (100.0%)
80.05: Arthrotomy/removal	697 (14.9%)	1111 (23.7%)	1971 (42.1%)	903 (19.3%)	4682 (100.0%)
81.53: Hip revision, not otherwise specified	1011 (20.7%)	1050 (21.5%)	2078 (42.6%)	742 (15.2%)	4880 (100.0%)
Other combinations	188 (20.6%)	192 (21.0%)	282 (30.9%)	252 (27.6%)	913 (100.0%)
Total	8729 (17.0%)	12,214 (23.8%)	18,867 (36.7%)	11,535 (22.5%)	51,345 (100.0%)

*The United States Census Bureau regions are the Northeast (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont, New Jersey, New York, Pennsylvania), the Midwest (Indiana, Illinois, Michigan, Ohio, Wisconsin, Iowa, Nebraska, Kansas, North Dakota, Minnesota, South Dakota, Missouri), the South (Delaware, District of Columbia, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, West Virginia, Alabama, Kentucky, Mississippi, Tennessee, Arkansas, Louisiana, Oklahoma, Texas), and the West (Arizona, Colorado, Idaho, New Mexico, Montana, Utah, Nevada, Wyoming, Alaska, California, Hawaii, Oregon, Washington). †The values are given as the number of procedures, with the percentage of the number of revisions with the specified procedure code in parentheses.

TABLE E-6 Average Length of Stay and Average Total Hospital Charges for Revision Total Hip Arthroplasty According to United States Census Region

	United States Census Region									
	Northeast		Midwest		South		West		Total	
Code	Length of Stay (days)	Total Charges	Length of Stay (days)	Total Charges	Length of Stay (days)	Total Charges	Length of Stay (days)	Total Charges	Length of Stay (days)	Total Charges
00.70: All-component revision	5.7	\$52,234	5.0	\$48,257	5.4	\$54,320	5.0	\$67,516	5.3	\$55,416
00.71: Acetabular component revision	5.9	\$44,344	4.8	\$39,316	5.2	\$44,172	4.9	\$54,766	5.1	\$45,415
00.72: Femoral component revision	7.5	\$55,023	6.1	\$50,847	6.3	\$53,107	6.5	\$73,220	6.5	\$56,481
00.73: Isolated head/liner revision	4.8	\$37,825	4.7	\$36,399	5.3	\$39,565	5.1	\$53,854	5.0	\$42,245
80.05: Arthrotomy/removal	15.1	\$74,488	9.9	\$57,753	11.1	\$61,750	13.3	\$99,029	11.8	\$69,380
81.53: Hip revision, not otherwise specified	6.7	\$57,686	5.5	\$48,529	6.3	\$55,202	6.2	\$66,104	6.2	\$55,793
Other combinations	8.5	\$69,701	10.0	\$80,189	12.6	\$86,483	12.3	\$119,118	11.1	\$90,301
Total	6.8	\$52,595	5.6	\$47,504	6.3	\$52,551	6.1	\$67,779	6.2	\$54,553