## Exclusions

* Survey results representing patients less than 18 years of age

## NHAMCS Data Aggregation and Cleaning Methods

Data for this study are publicly available and were accessed on 2/2/2022 (CITATION TO LINK). Attributes were selected for the reported indicators from the 2007-2019 datasets and combined. Binary indicators for opioid, NSIAD, or cyclobenzaprine administration or prescription were created based on medication and given/prescribed attributes. Reason for visit (RFV) survey results were used to create an indicator for musculoskeletal visits based on manually selected RFVs (supplemental). Triage immediacy assessments for 2007 and 2008 were collected as time ranges. These were mapped to correlating emergency severity index levels (e.g., 1-14 minutes -> Emergent). Estimated national totals for each indicator were calculated using survey patient visit weights.

The following could be included or placed in a supplemental:  
Opioid names considered:   
'Morphine', 'Tramadol', 'Ultram', 'Oxycodone', 'Percocet', ‘Codeine', 'Hydromorphone', 'Hydrocodone', 'Ultracet', 'Vicodin', 'Dilaudid', 'Roxicodone', 'Norco'

NSAIDs names considered:   
'Ibuprofen', 'Ketoprofen', 'Indomethacin', 'Indocin', 'Ketorolac', 'Etodolac', 'Celecoxib', 'Meloxicam', 'Advil', 'Motrin', 'Naproxen'

Flexeril names considered:   
'Flexeril', 'Cyclobenzaprine'

## Data location alternatives for citation

* + <https://www.cdc.gov/nchs/ahcd/datasets_documentation_related.htm>
  + https://ftp.cdc.gov/pub/Health\_Statistics/NCHS/Datasets/NHAMCS/

## Selected MSK RFVs

Attached as CSV document.