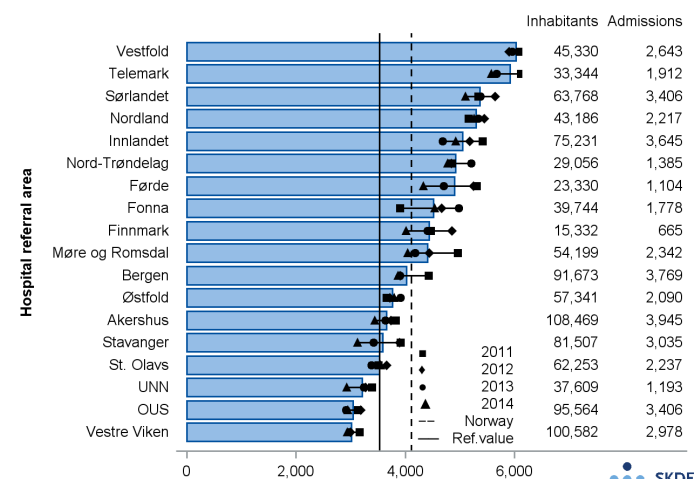


Medical admissions of children are used for conditions where the patient does not undergo surgery and is mostly assessed and treated by paediatric specialists. Most children who are admitted to hospital are placed in special paediatric departments, but in some areas where such departments are a long way away, such as Nordland and Troms, children are also admitted to adult medical departments at the nearest local hospital. Common causes for admission of children include respiratory tract infections, vomiting and diarrhoea, diabetes and epilepsy.

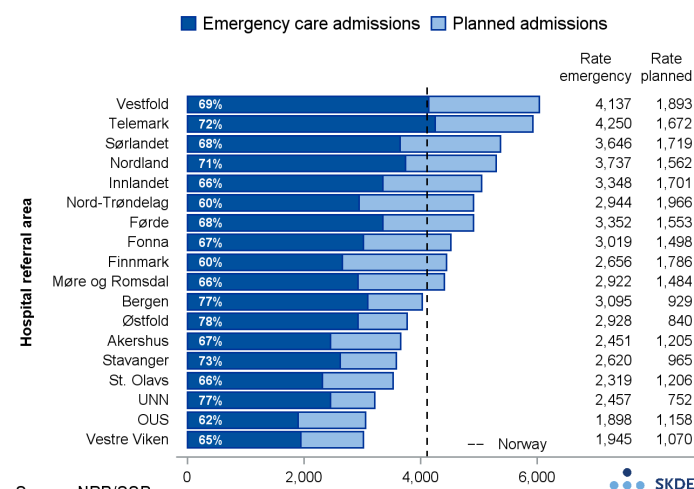
Sample

The sample consists of all medical admissions of children in the somatic specialist health service with a duration of at least 24 hours. By medical admissions is meant admissions for conditions that are normally treated by an internal medicine department, see the report for a more detailed definition.

The admission rate for children living in the hospital referral areas of the six university hospitals has been chosen as the reference value.



Source: NPR/SSB
Medical admissions, age-adjusted usage rates per 100,000 children 0-16 year, per hospital referral area, per year, reference value and an average for the period 2011-2014.

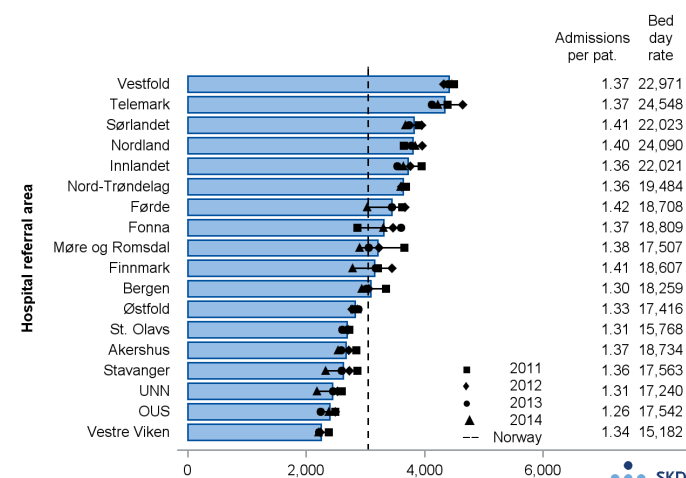


Source: NPR/SSB
Medical admissions, by degree of urgency, age-adjusted usage rates per 100,000 children 0-16 year, per hospital referral area and as an average for the period 2011-2014.

Comments

Each year, 32,000 children are admitted to Norwegian hospitals a total of 44,000 times for medical diagnoses. Admissions for medical conditions account for 71% of all somatic hospital admissions of children aged 0-16 years. Emergency care admissions make up 68% of the admissions.

Vestfold hospital referral area has twice as many admissions and twice as many patients admitted (per 100,000 children) as Vestre Viken. The contact frequency varies from 1.26 in OUS hospital referral area to 1.42 in Førde. The hospital referral areas of Vestre Viken and Vestfold are neighbouring areas with paediatric departments in Tønsberg and Drammen, respectively. Vestre Viken covers a larger geographical area than Vestfold, and is more similar to the hospital referral areas of Telemark and Sørlandet, whose rates are at the same level as Vestfold's. This means that the travel distance to hospital in the hospital referral areas can probably not explain the identified variation in usage rates.



Source: NPR/SSB
Medical admissions, age-adjusted patient rates per 100,000 children 0-16 year, per hospital referral area, per year and as an average for the period 2011-2014. Average number of admissions per patient (contact frequency) and bed day rate.

If all the hospital referral areas had had the same usage rate as the six university hospital's referral areas, the number of medical admissions would have been reduced by 6,500 (15%). There is reason to ask whether there is an unwarranted variation in children's medical admissions between hospital referral areas.