Kids Inpatient Database (KID)

Overview

The Healthcare Cost and Utilization Project (HCUP) Kids' Inpatient Database (KID) was developed to enable analyses of hospital utilization by children across the United States. The target universe includes pediatric discharges from community hospitals in the United States in 1997. Community hospitals, as defined by the American Hospital Association (AHA), include "all nonfederal, short-term, general and other specialty hospitals, excluding hospital units of institutions." Included among community hospitals are academic medical centers and specialty hospitals such as obstetrics-gynecology, ear-nose-throat, short-term rehabilitation, orthopedic, and pediatric hospitals. Excluded are federal hospitals (Veterans Administration, Department of Defense, and Indian Health Service hospitals), long-term hospitals, psychiatric hospitals, alcohol/chemical dependency treatment facilities, and hospital units within institutions such as prisons.

The sampling frame is limited to pediatric discharges from community hospitals for which data were provided by 22 HCUP Partner states. The states include Arizona, California, Colorado, Connecticut, Florida, Georgia, Hawaii, Iowa, Illinois, Kansas, Maryland, Massachusetts, Missouri, New Jersey, New York, Oregon, Pennsylvania, South Carolina, Tennessee, Utah, Washington, and Wisconsin.

Pediatric discharges are defined as all discharges that had an age at admission of 18 years or less. Discharges with missing, invalid, or inconsistent ages are excluded. Pediatric discharges are identified as one of three types of records:

- uncomplicated in-hospital births (**HOSPBRTH = 1** and **UNCBRTH = 1**),
- complicated in-hospital births (**HOSPBRTH = 1** and **UNCBRTH = 0**), and
- all other pediatric cases (**HOSPBRTH = 0**).

In-hospital births (**HOSPBRTH = 1)** are identified by any principal or secondary diagnosis code in the range of V3000 to V3901 with the last two digits of "00" or "01" and the patient is not transferred from another acute care hospital or health care facility. Uncomplicated births (**UNCBRTH = 1**) have a Diagnosis Related Group (DRG) equal to 391 indicating "Normal Newborn."

Hospitals are divided into strata using six hospital characteristics: ownership/control, bedsize, teaching status, rural/urban location, U.S. region, and hospital type (pediatric versus other). The stratum-specific sampling rates are constant across all hospitals in the sampling frame. Ten percent of uncomplicated in-hospital births, and 80 percent of other pediatric cases in each frame stratum are sampled. If fewer than two frame hospitals, less than 30 uncomplicated births, less than 30 complicated births, and less than 30 non-birth pediatric discharges are contained in a stratum, then that stratum is merged with an "adjacent" stratum containing hospitals with similar characteristics.

The KID contains data from 2,521 hospitals and includes 1.9 million unweighted discharge records, which, when weighted, yield approximately 6.7 million pediatric discharges 18 years and younger (including newborns).

To protect confidentiality, the KID includes general descriptors of hospital types (including a designation of children's hospital status), but does not include hospital or state identifiers.

Data Files

There are two different KID data files:

- Core file with information on inpatient stays and
- Hospital Weights file.

The Core file contains pediatric discharges sampled from community hospitals in 22 HCUP Partner States. The Core file contains data elements for linkage, patient demographics, clinical information, and payment information. Sample weights for the three types of records, uncomplicated in-hospital births, complicated in-hospital births, and all other pediatric cases, are calculated separately by stratum and merged onto the Core file accordingly. The variable **DISCWT_U** contains the appropriate weight for the discharge.

The Hospital Weights file contains one observation for each hospital included in the KID. This file contains data elements for linkage to the Core file, hospital characteristics, and summary sampling information. Hospital characteristics are based on information from the AHA Annual Survey of Hospitals. The KID Hospital Weights file does not contain hospital identifiers that allow linkage to the AHA Annual Survey of Hospitals.