EXHIBIT 2.4 Most Frequent Principal Diagnoses by Gender

Number of Discharges, Percent Distribution, and Growth of the Most Frequent Principal Diagnoses for Inpatient Hospital Stays by Gender, 2008

	NUMBER OF DISCHARGES IN THOUSANDS		PERCENT OF GENDER- SPECIFIC DISCHARGES		MALE PERCENT OF DIAGNOSIS-	GRO	CUMULATIVE GROWTH 1997-2008	
					SPECIFIC			
PRINCIPAL CCS DIAGNOSIS	MALES	FEMALES	MALES	FEMALES	DISCHARGES	MALES	FEMALES	
All discharges*	16,499	23,275	100.0%	100.0%	41.4%	16%	14%	
All maternal discharges	_	4,667	_	20.1	_	_	8	
Liveborn infant	2,176	2,069‡	13.2	8.9	51.3	13	12	
Coronary atherosclerosis	581	337	3.5	1.4	63.3	-30	-41	
Pneumonia	554	600	3.4	2.6	48.0	-7	-5	
Congestive heart failure	501	519‡	3.0	2.2	49.1	11	-4	
Cardiac dysrhythmias	392	405‡	2.4	1.7	49.2	43	36	
Acute myocardial infarction	384	260	2.3	1.1	59.6	-13	-10	
Septicemia	374	417	2.3	1.8	47.3	106	80	
Osteoarthritis	358	550	2.2	2.4	39.4	124	114	
Mood disorders	358	463	2.2	2.0	43.6	44	19	
Non-specific chest pain	325	401	2.0	1.7	44.8	32	38	
Urinary tract infections	158	420	1.0	1.8	27.3	35	45	
Chronic obstructive pulmonary								
disease and bronchiectasis	317	399	1.9	1.7	44.3	32	28	

^{*} Excludes a small number of discharges (111,000 or 0.3 percent) with missing gender.

Source: AHRQ, Center for Delivery, Organization, and Markets, Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, 1997 and 2008.

Females accounted for almost 6 out of every 10 hospital stays—23.3 million stays in 2008. About 20 percent of all female hospitalizations were related to pregnancy and childbirth. Males accounted for 16.5 million hospitalizations in 2008. If childbirth is excluded, most diagnoses are common to both males and females. However, some diagnoses were more frequent in one gender.

- Five heart-related diagnoses—coronary atherosclerosis, congestive heart failure, cardiac dysrhythmias, acute myocardial infarction, and non-specific chest pain—were among the ten most common principal inpatient diagnoses for both males and females.
 - Males accounted for 63 percent of hospital stays for coronary atherosclerosis and 60 percent of stays for acute myocardial infarction (AMI). Hospitalizations for coronary atherosclerosis and AMI decreased for males (30 and 13 percent, respectively) and females (41 and 10 percent, respectively) between 1997 and 2008.
 - The number of hospital stays for cardiac dysrhythmias (392,000 stays for males and 405,000 for females) and congestive heart failure (501,000 stays for males and 519,000 for females) were similar for males and females.
 - Women accounted for a greater share of hospitalizations for non-specific chest pain (55 percent of stays) than men (45 percent of stays).
- Women accounted for a greater number of hospital stays for mood disorders in 2008 than men (463,000 female versus 358,000 male discharges). The number of stays for mood disorders grew 44 percent for men and 19 percent for women between 1997 and 2008.

[‡] Female discharges are <u>not</u> statistically different from male discharges at p<0.05.

- Infections such as septicemia and urinary tract infections were common reasons for hospital stays among both men and women in 2008 and grew rapidly for both genders between 1997 and 2008.
 - Stays for septicemia rose 106 percent among men and 80 percent among women. In 2008, 2.3 percent of male hospital stays and 1.8 percent of female hospital stays were due to septicemia.
 - Growth was similar in stays for urinary tract infections for women (35 percent) and men (45 percent); however, 73 percent of all stays for urinary tract infections were for women.
- Osteoarthritis caused more hospitalizations for females (550,000 discharges) than for males (358,000 discharges) in 2008; 61 percent of stays for this condition were for females. Hospital stays for osteoarthritis more than doubled for men (124 percent) and women (114 percent) between 1997 and 2008.