**510**

**EMERGENCY DEPARTMENT (ED) VISITS FOR OPIOID OVERDOSE:**
July 2017

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**510**

**Opioid overdose ED visits**
July 2017
Compared to **410** July 2016

Source: NC DETECT; ED; Syndrome: Overdose: Opioid Overdose (ICD-9/10-CM)

Note: Counts based on diagnosis (ICD-9/10-CM code) of an opioid overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents. Opioid overdose cases include poisonings with opium, heroin, opioids, methadone, and other synthetic narcotics.

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**Opioid Overdose ED Visits by Year:**
North Carolina, 2009-2017 YTD

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**Monthly ED Visits by Opioid Class:**
North Carolina, 2017 YTD

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**Opioid Overdose ED Visits by Month:**
North Carolina, 2016-2017 YTD

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**Notes:**
- Counts based on diagnosis (ICD-9/10-CM code) of an opioid overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents.
- Opioid overdose cases include poisonings with opium, heroin, opioids, methadone, and other synthetic narcotics.

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NC DETECT; ED; Syndrome: Overdose: Opioid Overdose (ICD-9/10-CM)

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**Source:**
NC DETECT; ED; Syndrome: Overdose: Opioid Overdose (ICD-9/10-CM)
Rate of Opioid Overdose ED Visits by County: July 2017

Highest Rates of Opioid Overdose ED Visits by County: July 2017

<table>
<thead>
<tr>
<th>County</th>
<th>Count</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vance*</td>
<td>11</td>
<td>24.9</td>
</tr>
<tr>
<td>Rowan*</td>
<td>28</td>
<td>20.0</td>
</tr>
<tr>
<td>Lincoln</td>
<td>13</td>
<td>16.0</td>
</tr>
<tr>
<td>Cabarrus</td>
<td>30</td>
<td>14.9</td>
</tr>
<tr>
<td>Buncombe*</td>
<td>26</td>
<td>10.2</td>
</tr>
<tr>
<td>Robeson</td>
<td>11</td>
<td>8.3</td>
</tr>
<tr>
<td>Cumberland</td>
<td>26</td>
<td>7.9</td>
</tr>
<tr>
<td>Mecklenburg</td>
<td>75</td>
<td>7.1</td>
</tr>
<tr>
<td>New Hanover</td>
<td>15</td>
<td>6.7</td>
</tr>
<tr>
<td>Catawba</td>
<td>10</td>
<td>6.4</td>
</tr>
</tbody>
</table>

Note: Rate per 100,000 N.C. residents
Rates not shown for counties <10 cases
* ≥5 overdoses this month compared to last month

Demographic data from the North Carolina census provide population-level context for potential disparities by age or race among opioid overdose ED visits.

In North Carolina, ED visits for opioid overdose occur predominately among whites, and those ages 25-34 years if age.


NOTE: The North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT) is North Carolina’s statewide syndromic surveillance system. For training on NCDETECT, contact Amy Ising, ising@ad.unc.edu.

Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes. NC DETECT reports five categories of race: White, Black, American Indian, Asian, or Other. Due to low counts, Asian, American Indian, and Other races have been collapsed into a single category.