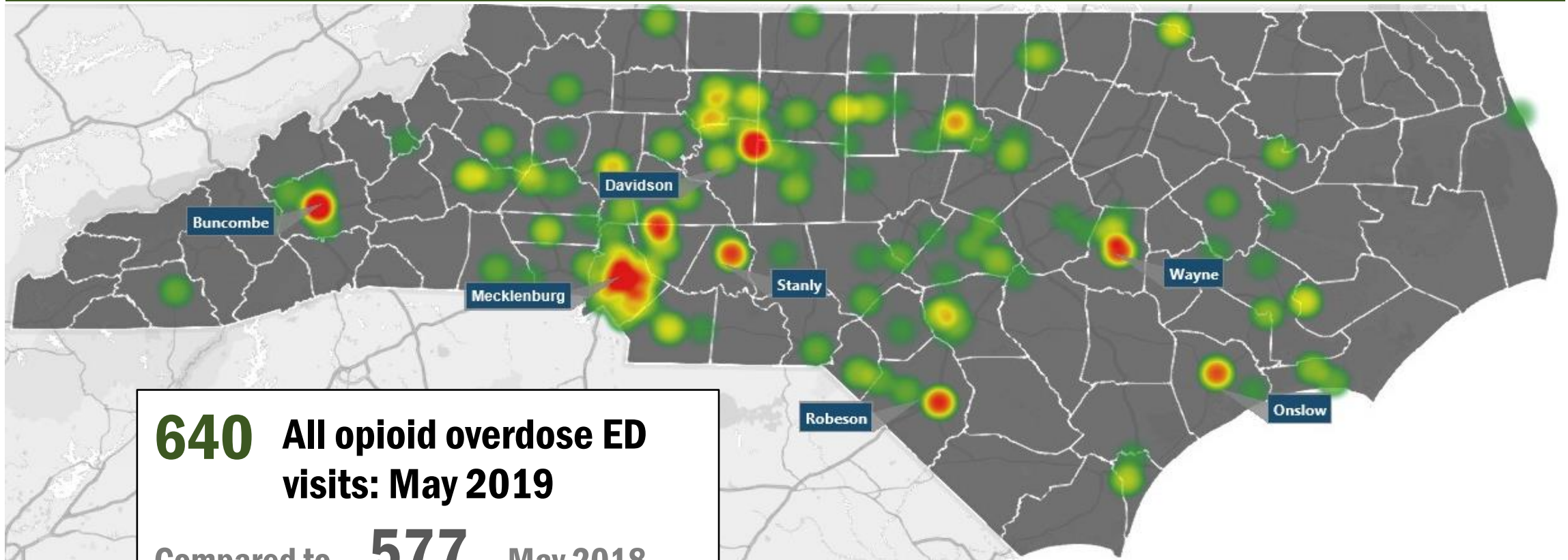


# ALL OPIOID OVERDOSE ED VISITS: NORTH CAROLINA, MAY 2019



**640** All opioid overdose ED visits: May 2019  
 Compared to **577** May 2018

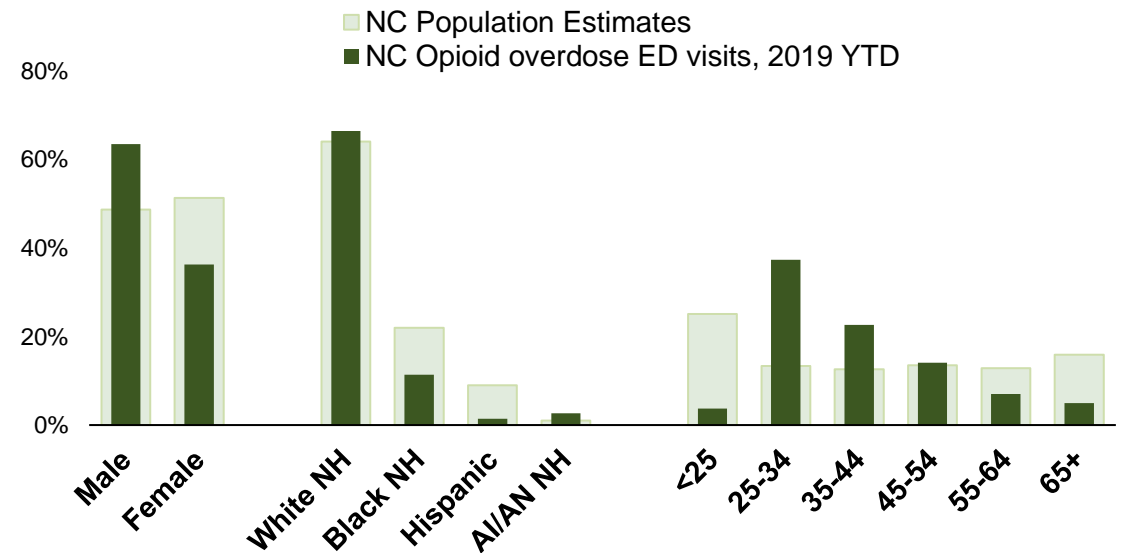
Data Source: NCDETECT: ED; Custom Event: Overdose: Opioid Overdose V.2 (ICD-9/10-CM)

The highest concentration of visits ( $\geq 5$ ) by zip code occurred in:

**Davidson, Robeson, Stanly, Buncombe, Onslow, Mecklenburg, Wayne and Cabarrus counties.**

The highest rates (per 100,000 residents) occurred in:

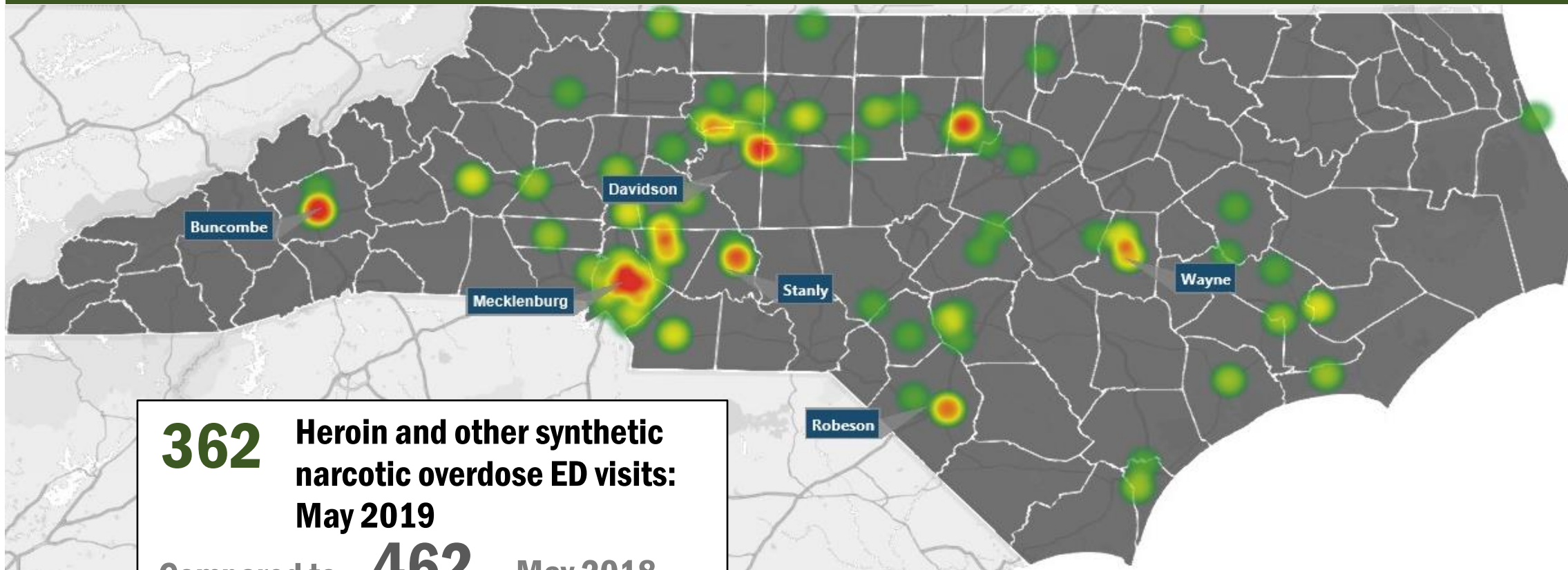
**Stanly (24.7), Robeson (17.3), Carteret (14.5), Wayne (12.1) and Buncombe (11.7) counties.**



**Note:** NH(Non Hispanic). 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. \*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.



# HEROIN AND OTHER SYNTHETIC NARCOTIC OVERDOSE ED VISITS, MAY 2019



**362** Heroin and other synthetic narcotic overdose ED visits: May 2019

Compared to **462** May 2018

Data Source: NCDETECT: ED; Custom Event: Overdose: Opioid Overdose V.2 (ICD-9/10-CM) searching diagnosis codes for T40.1 & T40.4

The highest concentration of visits ( $\geq 5$ ) by zip code occurred in:

**Buncombe, Davidson, Robeson, Stanly, Mecklenburg, and Wayne counties.**

The highest rates (per 100,000 residents) occurred in:

**Randolph (7.7), Robeson (7.5), Alamance (6.3), Buncombe (6.2) and Cabarrus (6.0) counties.**

**Note:** NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of a heroin or other synthetic narcotic overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents. \*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.

