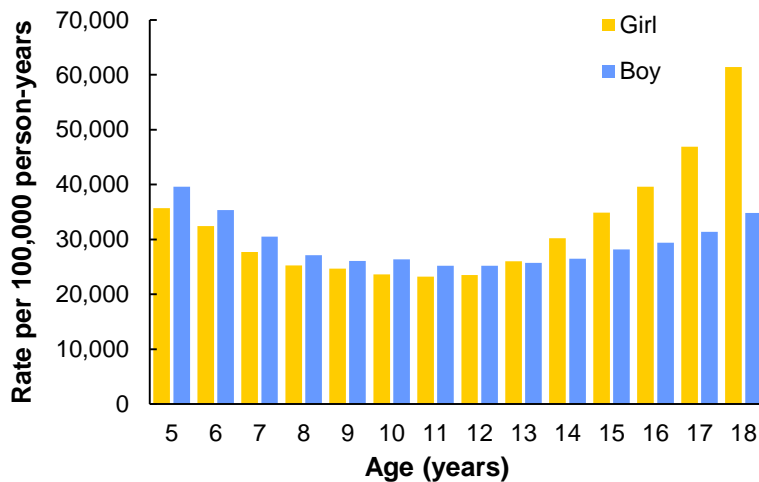


## NORTH CAROLINA EMERGENCY DEPARTMENT VISITS AMONG SCHOOL-AGE CHILDREN, 5-18 YEARS OF AGE, 2013

The North Carolina Disease Event Tracking and Epidemiologic Collection tool (NC DETECT) provides public health officials and hospital users with the capacity for statewide early event detection and timely public health surveillance. Through NC DETECT, users can access near real-time data from North Carolina acute care emergency departments (EDs), the Carolinas Poison Center (CPC), and the Pre-Hospital Medical Information System (PreMIS). NC DETECT data from ED visits have become increasingly important for the surveillance of injury morbidity in North Carolina. NC DETECT is funded by the NC Division of Public Health (NC DPH). This document summarizes 2013 ED visits by school-age children 5-18 years of age.\*

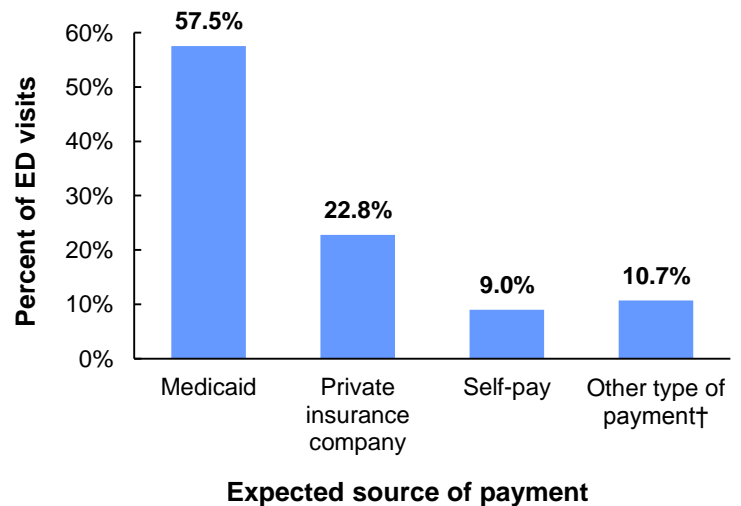
### Rates of NC ED visits among school-age children



- Among school-age children 5-18 years of age, there was a total of 558,499 ED visits in 2013.
- The rate of ED visits for this population was 30,924 visits per 100,000 person-years.
- In 2013, school-age girls (32,509 ED visits per 100,000 person-years) were more likely to visit the ED than boys (29,402 ED visits per 100,000 person-years).
- Rates peaked at 18 years of age for girls (61,408 ED visits per 100,000 person-years) and at 5 years of age for boys (39,616 ED visits per 100,000 person-years).

### NC ED visits by expected source of payment and other descriptors, 2013

- The majority of school-age children arrived at the ED via walk-in following public/private/unspecified transportation (89.1%). Another 6.3% arrived via air/ground ambulance and 4.6% arrived via some other means of transportation.
- Over one-half of school-age children treated in the ED had an expected source of payment of Medicaid (57.5%).
- Most school-age children were discharged from the ED (92.9%) with only 2.5% of children admitted to the hospital (another 4.6% of children had some other disposition).



\*For questions about the methods used to generate this fact sheet, please email [ncdetect@listserv.med.unc.edu](mailto:ncdetect@listserv.med.unc.edu).

Missing: 30,394 (5.4%) ED visits missing expected source of payment  
†Other type of payment includes Medicare, workers' compensation, other government payment, and no charge.

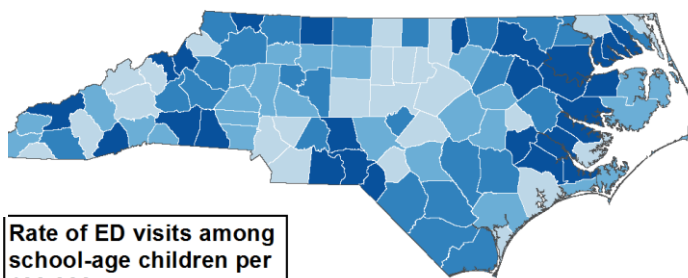
School-age children's NC ED visits classified by the five most common *diagnosis* groupings, 2013<sup>§</sup>

Classification	Number of ED visits	Percent of ED visits
<b>1. Injury and poisoning</b>	<b>113,112</b>	<b>25.1%</b>
A. Superficial wounds and contusions	25,037	5.6%
B. Strains and sprains	21,077	4.7%
C. Fractures, upper and lower extremities	12,424	2.8%
<b>2. Symptoms, signs, and ill-defined conditions</b>	<b>106,893</b>	<b>23.7%</b>
A. Abdominal pain	22,508	5.0%
B. Nausea and vomiting	13,635	3.0%
C. Fever	12,480	2.8%
<b>3. Diseases of the respiratory system</b>	<b>52,398</b>	<b>11.6%</b>
A. Acute respiratory infections	27,346	6.1%
B. Asthma	14,197	3.1%
C. Influenza and pneumonia	4,211	0.9%
<b>4. Factors influencing health status and contact with health services<sup>‡</sup></b>	<b>31,889</b>	<b>7.1%</b>
A. Encounter for other and unspecified procedures and aftercare	10,590	2.3%
B. Other persons seeking consultation	4,485	1.0%
C. Observation and evaluation for suspected conditions, not found	3,384	0.8%
<b>5. Diseases of the musculoskeletal system</b>	<b>26,805</b>	<b>5.9%</b>
A. Other and unspecified disorders of joint	9,254	2.1%
B. Pain in extremities	6,812	1.5%
C. Other and unspecified disorders of the back	4,411	1.0%

Missing: 107,788 ED visits missing a classifiable, first-listed diagnosis code; denominator is out of 450,711 ED visits

<sup>§</sup>ICD-9-CM classification based on the first-listed diagnosis code; other ICD-9-CM groupings are: diseases of the nervous system and sense organs (5.5%); mental health disorders (4.0%); infectious and parasitic diseases (3.7%); diseases of the skin (3.5%); diseases of the digestive system (3.5%); diseases of the genitourinary system (3.4%); complications of pregnancy and childbirth (0.9%); endocrine, metabolic, and immunologic disorders (0.9%); diseases of the blood (0.5%); diseases of the circulatory system (0.3%); neoplasms (0.1%); congenital anomalies (0.1%); and conditions originating in the perinatal period (<0.1%).

<sup>‡</sup>This category consists of supplementary codes (V-codes) used to classify ED visits for circumstances other than diseases or injuries (e.g. medical evaluations and screenings).



Rate of ED visits among school-age children per 100,000 person-years, categorized by quartile

- 13,531 - 26,070
- 26,071 - 32,437
- 32,438 - 40,928
- 40,929 - 73,273

Population-based rates of ED visits among school-age children by NC county, 2013

- The five NC counties with the highest rates of ED visits in 2013 (visits per 100,000 person-years in parentheses) were Alleghany (73,273), Bertie (60,218), Pasquotank (59,802), Richmond (59,532), and Cleveland counties (52,916).



Source: Carolina Center for Health Informatics / <https://cchi.web.unc.edu> / Department of Emergency Medicine, University of North Carolina at Chapel Hill, 2014.

NC Division of Public Health / [www.publichealth.nc.gov](http://www.publichealth.nc.gov) / Injury Epidemiology & Surveillance Unit/ 919-707-5425

NC Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT) / [www.ncdetect.org](http://www.ncdetect.org) / 919-843-2361

State of North Carolina / Department of Health and Human Services / [www.ncdhhs.gov](http://www.ncdhhs.gov)

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