### All Opioid Overdose ED Visits: North Carolina, November 2018

<table>
<thead>
<tr>
<th>Month Total ED Visits</th>
<th>Year to Date Total ED Visits</th>
<th>Month Total ED Visits Last Year</th>
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</table>

**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.

*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 & SYNTHETIC NARCOTIC OVERDOSE EMERGENCY DEPARTMENT VISITS: NOVEMBER 2018

274 Heroin and synthetic narcotic overdose ED visits: November 2018

Compared to 281 November 2017

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

The highest concentration of visits (≥5 residents) by zip code occurred in:

Mecklenburg, Guilford, Cumberland, and Surry counties.

The highest rates occurred in:

Randolph (7 per 100,000 residents), and Buncombe (5.1 per 100,000 residents) counties.

Note: Counts based on diagnosis (ICD-9/10-CM code) of a heroin 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.