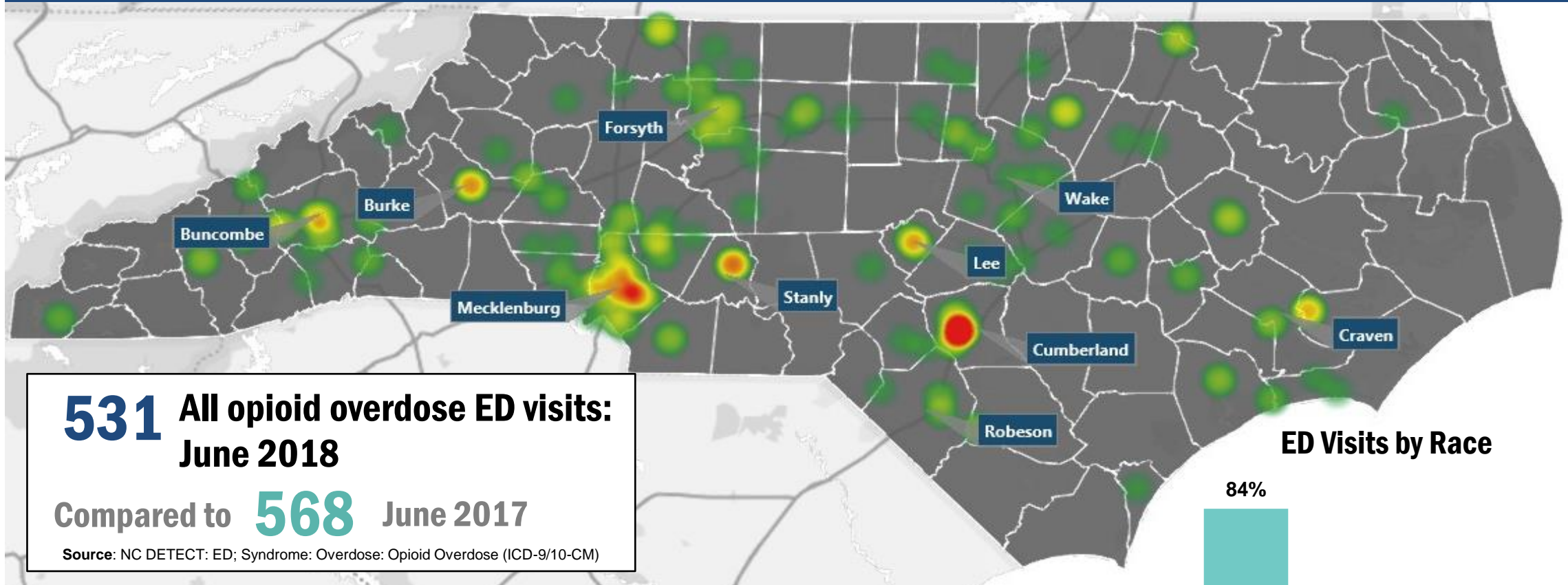


ALL OPIOID OVERDOSE EMERGENCY DEPARTMENT VISITS: NORTH CAROLINA, JUNE 2018



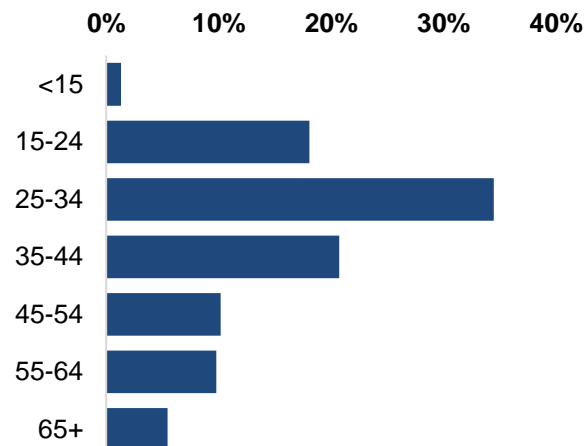
The highest concentration of visits by zip code occurred in:

Cumberland, Stanly, Burke, Craven, Mecklenburg, Surry, and Franklin counties.

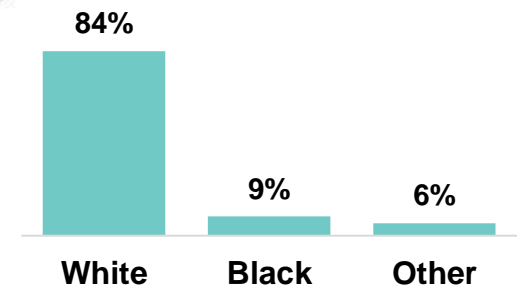
The highest rates occurred in:

Stanly (21.4 per 100,000 residents), and Lee (16.8 per 100,000 residents) counties.

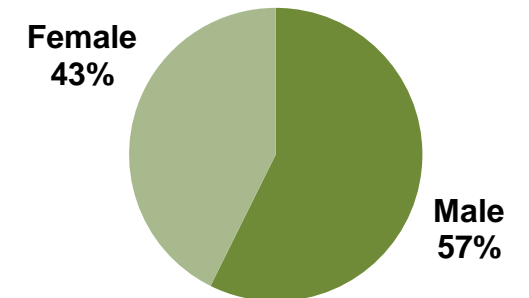
ED Visits by Age



ED Visits by Race



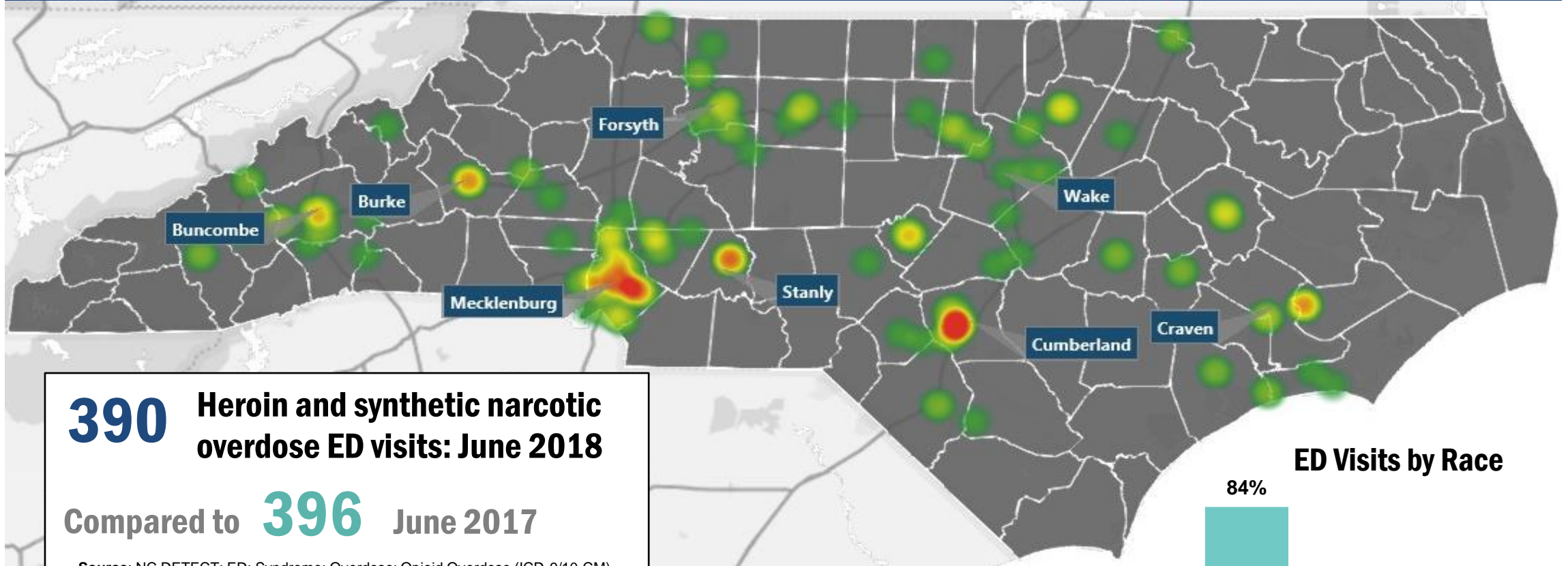
ED Visits by Gender



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: JUNE 2018



390 Heroin and synthetic narcotic overdose ED visits: June 2018

Compared to **396** June 2017

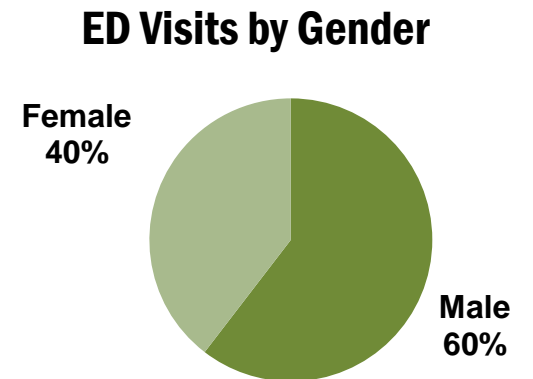
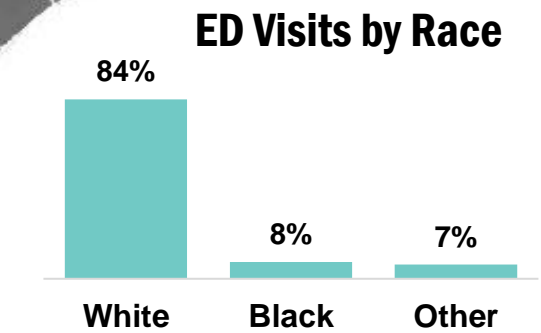
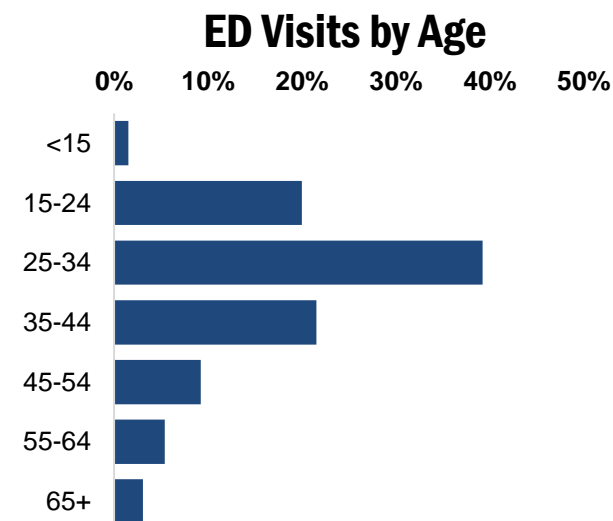
Source: NC DETECT: ED; Syndrome: Overdose: Opioid Overdose (ICD-9/10-CM)

The highest concentration of visits by zip code occurred in:

Cumberland, Stanly, Burke, Craven, Mecklenburg, and Franklin counties.

The highest rates occurred in:

Stanly (18.1 per 100,000 residents), and Lee (13.4 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.

