CARBON MONOXIDE POISONINGS

MONTHLY REPORT October 2014

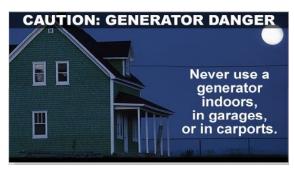


Image courtesy of CDC: Tools.cdc.gov/ecards/

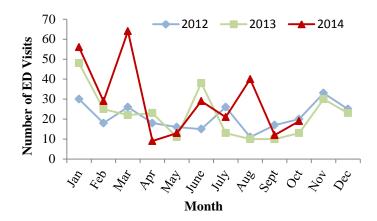
<u>Table 1.</u> 19 Emergency Department (ED) visits related to unintentional non-fire related carbon monoxide (CO) poisoning in North Carolina were identified.

	N (%)
Sex	
Female	8 (42)
Male	11 (58)
Age Group (yrs)	
0–9	0 (0)
10–24	3 (16)
25–44	3 (16)
45–64	11 (58)
65+	2 (11)
Exposure Site	
Home	1 (5)
Vehicle	3 (16)
Workplace	2 (11)
Unspecified	13 (68)

	N (%)
Disposition	
Admitted	2 (11)
Discharged	15 (79)
Transferred	2 (11)
Insurance	
Medicaid	5 (26)
Medicare	2 (11)
Other government payments	2 (11)
Private	4 (21)
Self-pay	3 (16)
Workers' compensation	1 (5)
Unknown	2 (11)

Percentages may not add to 100 due to rounding

<u>Figure 1.</u> ED visits related to unintentional non-fire-related CO poisoning by month and year, North Carolina



Carolinas Poison Center (CPC): The CPC received 10 calls^{1, 2} related to unintentional CO exposure in North Carolina and 2 calls related to CO alarm use.

- 18 exposed persons were mentioned:
 - o 10 (56%) Female
 - o 8 (44%) Male
- Site of exposure:
 - 13 (72%) Residence
 - o 1 (6%) Workplace
 - o 4 (22%) Unspecified

October 2014 CO Exposure Descriptions

- One person experienced CO poisoning while riding in a car with an exhaust leak.
- Another person experienced CO poisoning while working on flooring in a room with poor ventilation.

¹We do not have the ability to determine the extent of overlap between CPC calls and ED visits. Therefore, they are analyzed separately.

²We do not have the ability to determine if CPC calls were related to fires.

NOTE: NC DETECT (www.ncdetect.org) search criteria for ED visits: ICD-9-CM diagnostic code 986 or external cause of injury code E868.3, E868.9, E982.1, E868.2 or E982.0 for North Carolina residents who visited North Carolina hospitals. ED visits related to self-inflicted or fire-related exposures (identified by keywords "fire" or "smoke") were excluded. CPC calls were filtered by substance and included when unintentional CO exposure, CO alarm use or a request for CO information was documented.

NC DETECT is a statewide public health syndromic surveillance system, funded by the N.C. Division of Public Health (NC DPH) Federal Public Health Emergency Preparedness Grant and managed through collaboration between NC DPH and UNC-CH Department of Emergency Medicine's Carolina Center for Health Informatics. The NC DETECT Data Oversight Committee is not responsible for the scientific validity or accuracy of methodology, results, statistical analyses, or conclusions presented.





