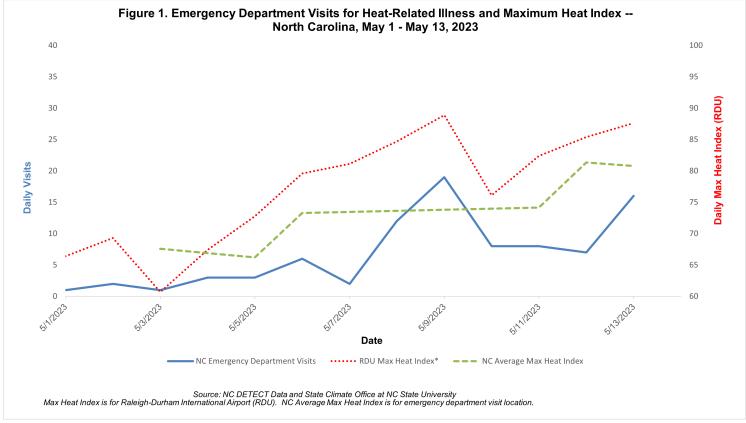
North Carolina Heat Report May 1–13, 2023



Season to Date (May 2023)

- Daily maximum heat indices ranged from 61°F to 98°F (median = 80°F) at Raleigh-Durham International Airport (RDU)
- 82 emergency department visits for heat-related illness were observed (Figure 1)
 - ✤ 61% of visits were among males
 - 32% of visits were among patients aged 25 to 44 years
 - The most frequent heat related diagnosis code was Heat Exhaustion (Table 2)
 - * Most visits were seen in hospitals in the Piedmont (59%) and Coastal (37%) regions
 - 22% of visits were seen in hospitals in the Sandhills sub-region¹
- During May 1–13, the proportion of emergency department visits for heat-related illness was 0.05%, similar to the historical average (Figure 2)



¹The Sandhills sub-region is comprised of the following counties from the Piedmont and Coastal regions: Bladen, Cumberland, Harnett, Hoke, Lee, Montgomery, Moore, Richmond, Robeson, and Scotland.







Way 1-10, 2020				
	N=82*	(%)†		
Sex				
Male	50	(61)		
Female	31	(38)		
Unknown	1	(1)		
Age				
0-14	8	(10)		
15-18	2	(2)		
19-24	7	(9)		
25-44	26	(32)		
45-64	15	(18)		
65+	24	(29)		

Table 1. Visits by sex and age group -	
May 1-13, 2023	

<u> Table 2.</u>	√isits by severity – May 1-´	13,
2023		

	N=38‡	(%)†
Severity§		
Heat Cramps	2	(5)
Heat Syncope	9	(24)
Heat Stroke	2	(5)
Heat Exhaustion	18	(47)
Other Effects [∎]	7	(19)

*n may vary from weekly total visits † may not total 100 due to rounding ‡ missing severity data = 44 § definitions of heat related illness categories: heatrelillness.html II other effects include heat fatigue, heat edema, other effects of heat and light, and https://www : aov/ni bics/h other effects unspecified

NOTE: Emergency department visit records and maximum heat indices were obtained from NC DETECT and the State Climate Office at NC State University, respectively. Heat-related illness is captured through a near real-time keyword search for 'heat', 'hot', 'hyperthermia', 'heat cramp', 'heat exhaustion', 'heat stroke', and 'sun stroke' in chief complaint or triage notes of emergency department records or a diagnosis code for heat-related illness. These figures present an estimate of the number of emergency department visits for heat-related illness. Please contact autumn.locklear@dhhs.nc.gov for more information.

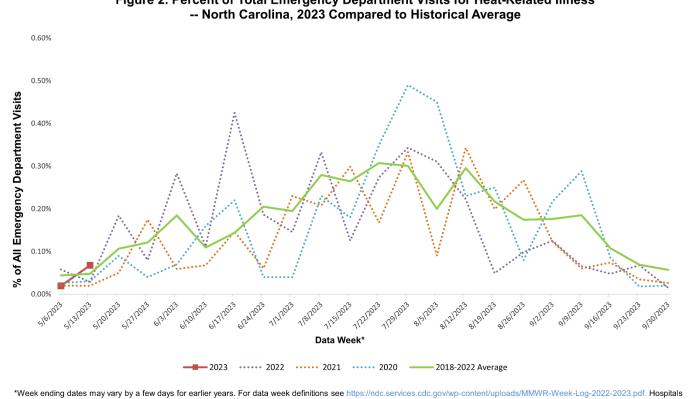


Figure 2. Percent of Total Emergency Department Visits for Heat-Related Illness

*Week ending dates may vary by a few days for earlier years. For data week definitions see https://ndc.services.cdc.gov/wp-content/uploads/MMWR-Week-Log-2022-2023.pdf. Hospitals transitioned from the ICD-9-CM diagnosis code standard to ICD-10-CM in 2015. This transition may impact the number of emergency department visits with a heat related illness diagnosis. Source: NC DETECT

Disclaimer: The North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT) is an advanced, statewide public health surveillance system. NC DETECT is funded with federal funds by North Carolina Division of Public Health (NC DPH), Public Health Emergency Preparedness Grant (PHEP), and managed through a collaboration between NC DPH and the University of North Carolina at Chapel Hill Department of Emergency Medicine's Carolina Center for Health Informatics (UNC CCHI). The NC DETECT Data Oversight Committee does not take responsibility for the scientific validity or accuracy of methodology, results, statistical analyses, or conclusions presented. The NC DETECT Data Oversight Committee (DOC) includes representatives from the NC DPH, UNC NC DETECT Team and NC Hospital Association.