

# CARBON MONOXIDE POISONINGS

## December 2016

**Table.** 42 Emergency Department (ED) visits related to unintentional, non-fire related carbon monoxide (CO) poisoning in North Carolina were identified.

	N (%)		N (%)
<b>Sex</b>		<b>Age Group</b>	
Female	24 (57)	0–17	6 (14)
Male	18 (43)	18–34	19 (45)
		35–54	13 (31)
<b>Insurance</b>		55+	4 (10)
Medicaid	9 (21)	<b>Disposition</b>	
Medicare	1 (2)	Admitted	8 (19)
Private	16 (38)	Discharged	34 (81)
Self-pay	2 (5)	<b>Residency</b>	
Workers' compensation	1 (2)	N.C. resident	41 (98)
Other/Unknown	13 (31)	Out-of-state resident	1 (2)

## CARBON MONOXIDE (CO) POISONING



Image courtesy of the Centers for Disease Control and Prevention (CDC)

### December 2016 CO Exposure Descriptions

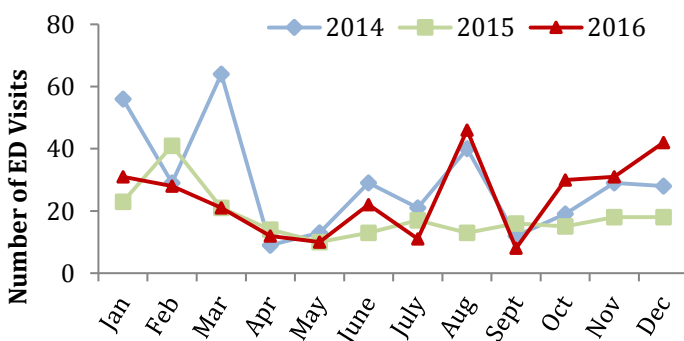
- Thirty-six restaurant patrons were exposed to CO from a malfunctioning heating system and eighteen of them went to the emergency department for CO poisoning.

### Carolinas Poison Center (CPC)

The CPC received 27 calls related to unintentional CO exposure in North Carolina and two calls requesting CO information.

- 84 exposed people were mentioned:
  - 15 (18%) Ages 0–17
  - 17 (20%) Ages 18–34
  - 10 (12%) Ages 35–54
  - 10 (12%) Ages 55+
  - 32 (38%) Unknown age
- Site of exposure:
  - 44 (52%) Residence
  - 36 (43%) Restaurant
  - 2 (2%) Workplace
  - 1 (1%) Public Area
  - 1 (1%) Unknown

**Figure.** ED visits related to unintentional, non-fire-related CO poisoning by month and year, North Carolina



**NOTE:** NC DETECT ([www.ncdetect.org](http://www.ncdetect.org)) search criteria for ED visits at N.C. hospitals: ICD-10-CM code T58. ED visits for self-inflicted or fire-related exposures were excluded. Visits by out-of-state residents who visited N.C. hospitals were included unless it was known that the exposure occurred out-of-state. CPC calls were filtered by substance and included when unintentional CO exposure, CO alarm use, or a request for CO information was documented. ED data and CPC data are analyzed separately.

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.