## CARBON MONOXIDE POISONINGS

## September 2015

## **CARBON MONOXIDE (CO)** POISONING



SFFN



SMELLED



**HEARD** 



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

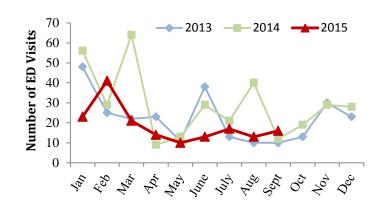
Table. 16 Emergency Department (ED) visits related to unintentional, non-fire related carbon monoxide (CO) poisoning in North Carolina were identified.

	N (%)
Sex	
Female	11 (69)
Male	5 (31)
Age Group (yrs.)	
0–9	4 (25)
10–24	3 (19)
25–44	5 (31)
45–64	4 (25)
65+	0 (0)
Disposition	
Admitted	1 (6)
Discharged	13 (81)
Left without advice	1 (6)
Other	1 (6)

	N (%)
Insurance	
Medicaid	6 (38)
Medicare	1 (6)
Private	4 (25)
Self-pay	3 (19)
Other/ Unknown	2 (13)

Percentages may not add to 100 due to rounding

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



## **Carolinas Poison Center (CPC)**

The CPC received 16 calls<sup>1, 2</sup> related to unintentional CO exposure in North Carolina, one call requesting CO information, and one call about CO alarm use.

- 21 exposed people were mentioned:
  - 11 (52%) Female
  - 10 (48%) Male
- Site of exposure:
  - 1 (5%) Public Area
  - 14 (67%) Residence
  - 3 (14%) Workplace
  - 0 3 (14%) Other
- Deaths:
  - The CPC received reports of two adults who died from CO poisoning; however, both deaths were related to house fires.

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

<sup>2</sup>We 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, E868.8, 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 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.





