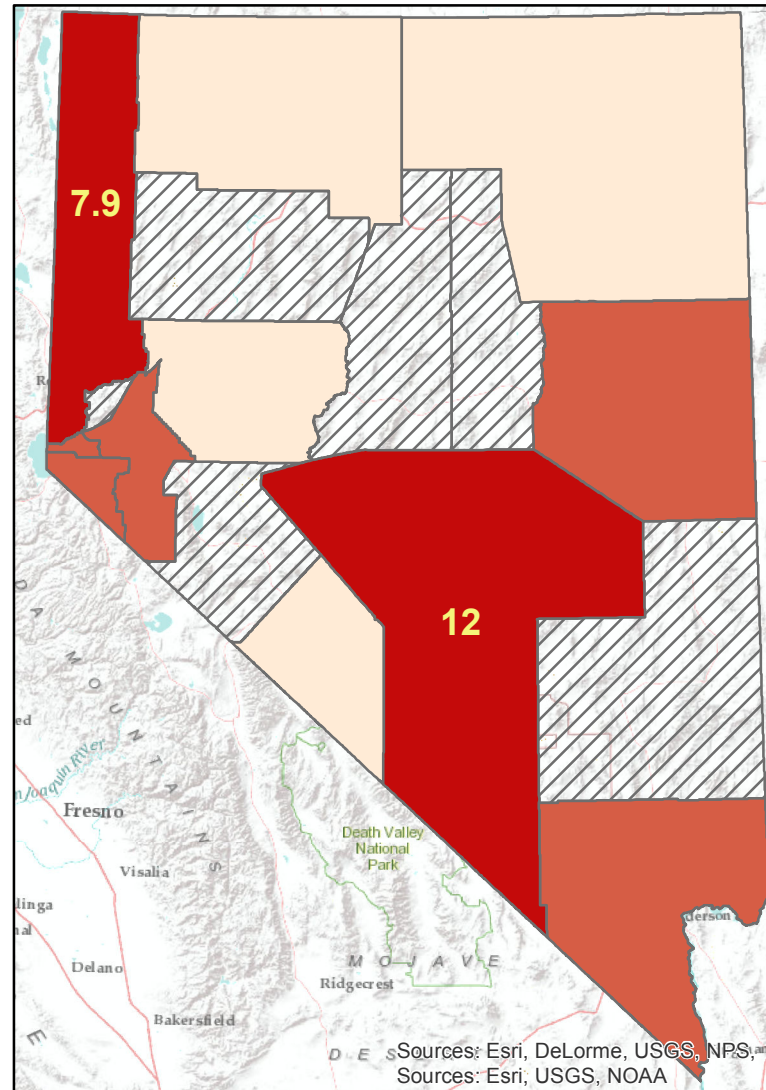




Public Health
Prevent. Promote. Protect.

HEROIN/OPIOID DEPENDENCE, ABUSE, OR POISONING EMERGENCIES for Nevada residents in 2013



HEROIN/OPIOID DEPENDENCE, ABUSE, OR
POISONING* EMERGENCIES
for Nevada residents§
in 2013¶

Age-adjusted rates‡ were used to assess whether a county's experience with heroin/opioids was higher, lower, or not appreciably different from the State. The coloring of the counties represents the conclusion of that comparison.

Crude rates† are shown to represent the true magnitude of heroin/opioid-related emergency visits for each county whose age-adjusted rate is higher than the State rate, 5.9, with a difference that is statistically significant. Crude rates should not be compared to one another. The numbers in yellow represent the crude emergency rates.

age-adjusted rate

statistically unreliable~

significant

lower, difference statistically significant

difference not statistically significant

higher, difference statistically significant

Division of Public and Behavioral Health

contacts

Jay Kvam, MSPH, Chief Biostatistician (jkvam@health.nv.gov)

edition 1.0
March 2015

* diagnosis codes (ICD-9): 304.0*, 304.7*, 305.5*, 965.0*, E850.0-2, E935.0-2

† per 1,000 emergency department visits

‡ 2000 US standard population

§ with a patient county in Nevada

¶ 2013 hospital emergency department billing (HEDB) datasets
~ Rates that are statistically unreliable due to low counts, small populations, and/or high variability/volatility are suppressed to avoid misunderstanding and/or protect confidentiality.