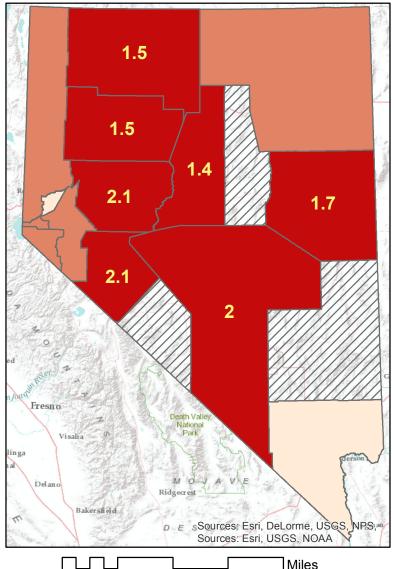


STROKE CRUDE AND AGE-ADJUSTED EMERGENCY RATES for Nevada residents in 2013





STROKE* CRUDE† AND AGE-ADJUSTED‡ EMERGENCY RATES for Nevada residents§ in 2013¶

Age-adjusted rates were used to assess whether a county's experience with stroke 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 stroke emergency visits for each county whose age-adjusted rate is higher than the State rate 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 Office of Public Health Informatics and Epidemiology Chronic Disease Section

contacts

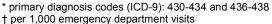
Jay Kvam, MSPH, Chief Biostatistician (jkvam@health.nv.gov); Adel Mburia-Mwalili, Biostatistician (amburia@health.nv.gov)

edition 1.0 March 2015 The creation of this map was facilitated by the "Geographic Information Systems (GIS) Training for Surveillance of Heart Disease, Stroke and Other Chronic Diseases" training award made possible by CDC, NACDD, and the University of Michigan.

150

200

100



^{‡ 2000} US standard population, 19 age-group distribution

~ 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.

[§] with a patient county and postal code in Nevada

^{¶ 2013} hospital emergency department billing (HEDB) datasets