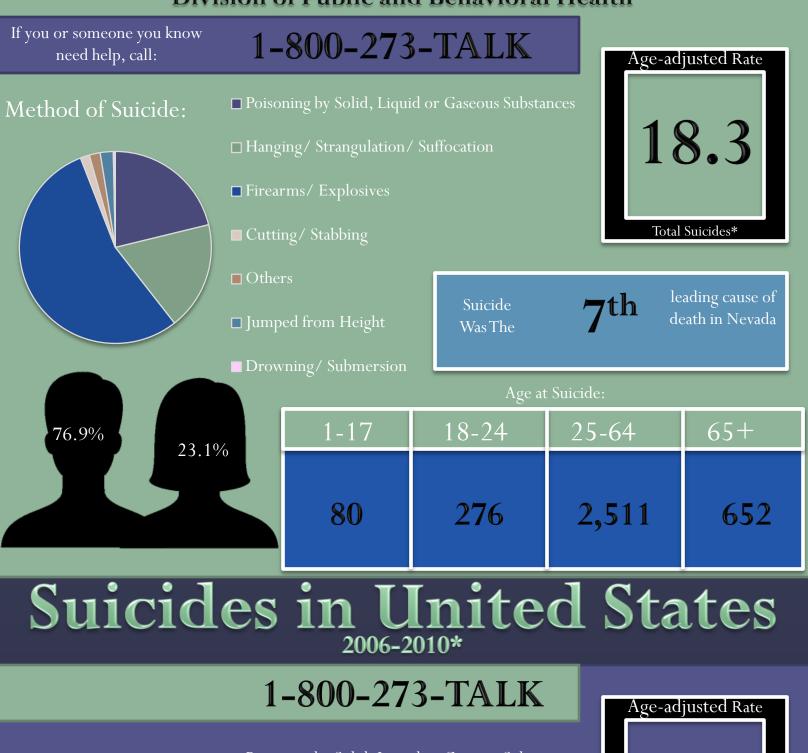
Suicides in Nevada 2006-2012* * See Technical Notes.

Division of Public and Behavioral Health



□ Poisoning by Solid, Liquid or Gaseous Substances Method of Suicide: ■ Hanging / Strangulation / Suffocation ■ Firearms/ Explosives Total Suicides* Cutting / Stabbing ■ Others leading cause of Suicide 10th death in the □ Jumped from Height United States Drowning/ Submersion Age at Suicide: 1-17 <u>18-2</u>4 65 +25-64 78.3% 21.7% 4,825 17,891 127,812 28,276

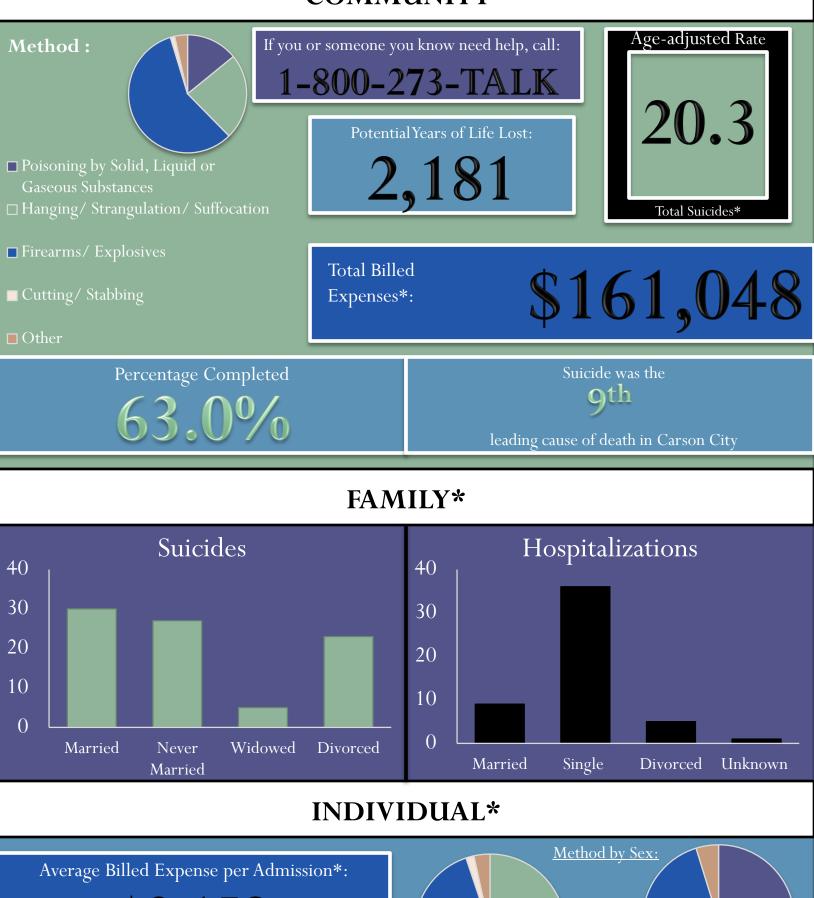
Suicides in Carson City

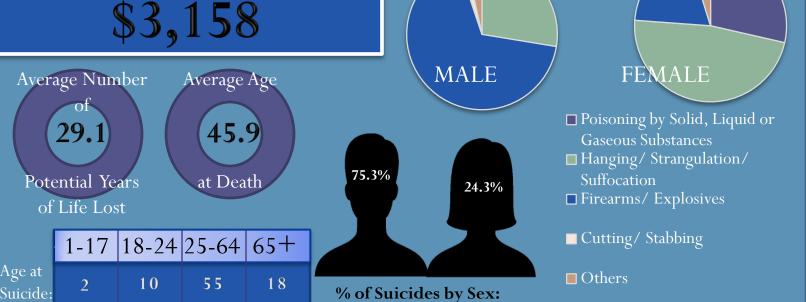
Division of Public and Behavioral Health

2006-2012*

* See Technical Notes.

COMMUNITY*



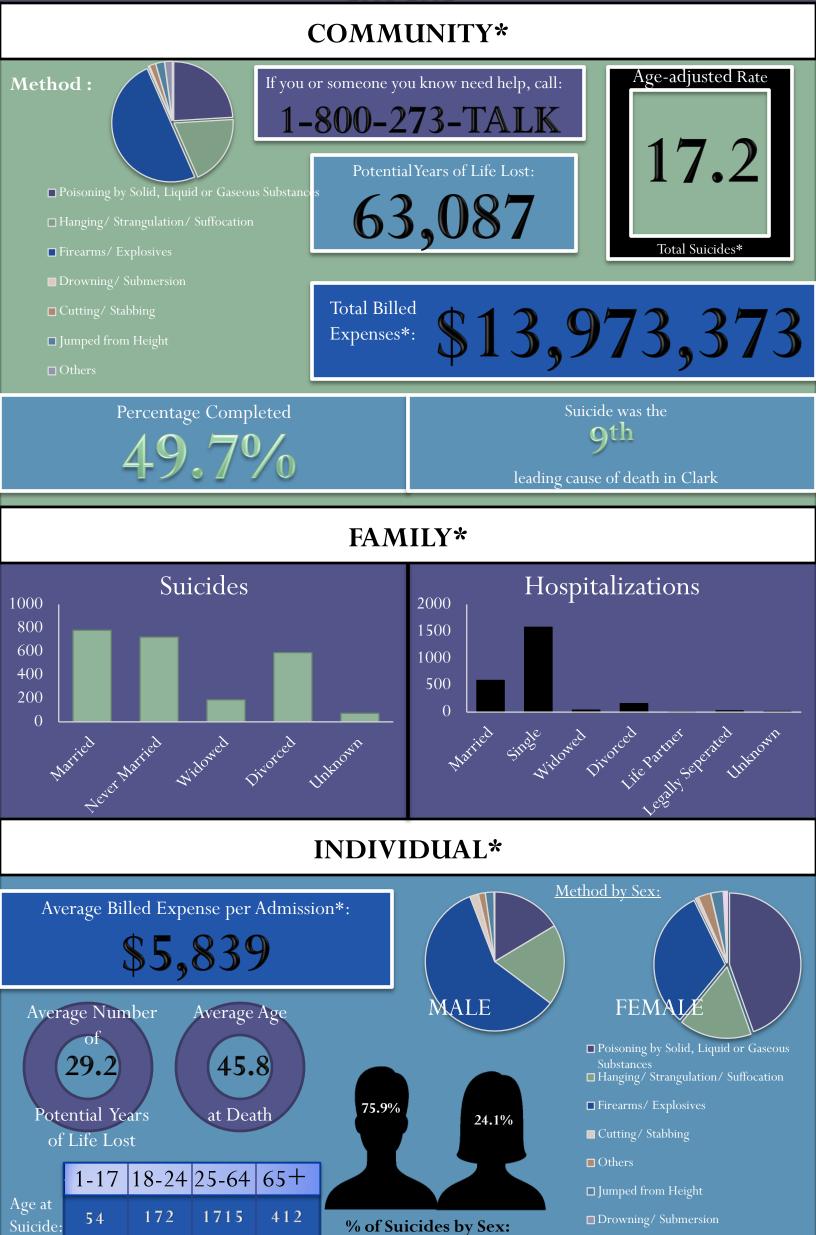


Suicides in Clark

Division of Public and Behavioral Health

2006-2012*

* See Technical Notes.



Suicides in Douglas

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5

5

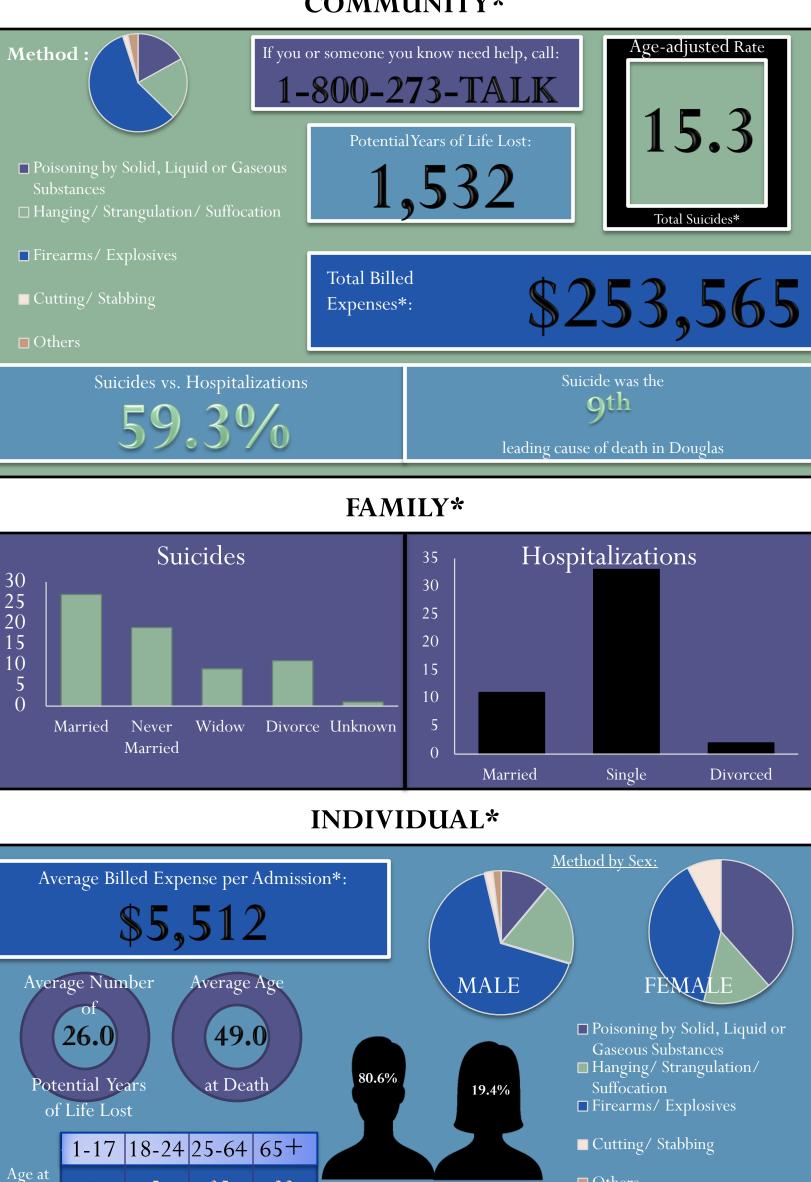
22

35

2006-2012*

* See Technical Notes.

COMMUNITY*



% of Suicides by Sex:

Others

Suicides in Elko

Division of Public and Behavioral Health

Age at

54

14

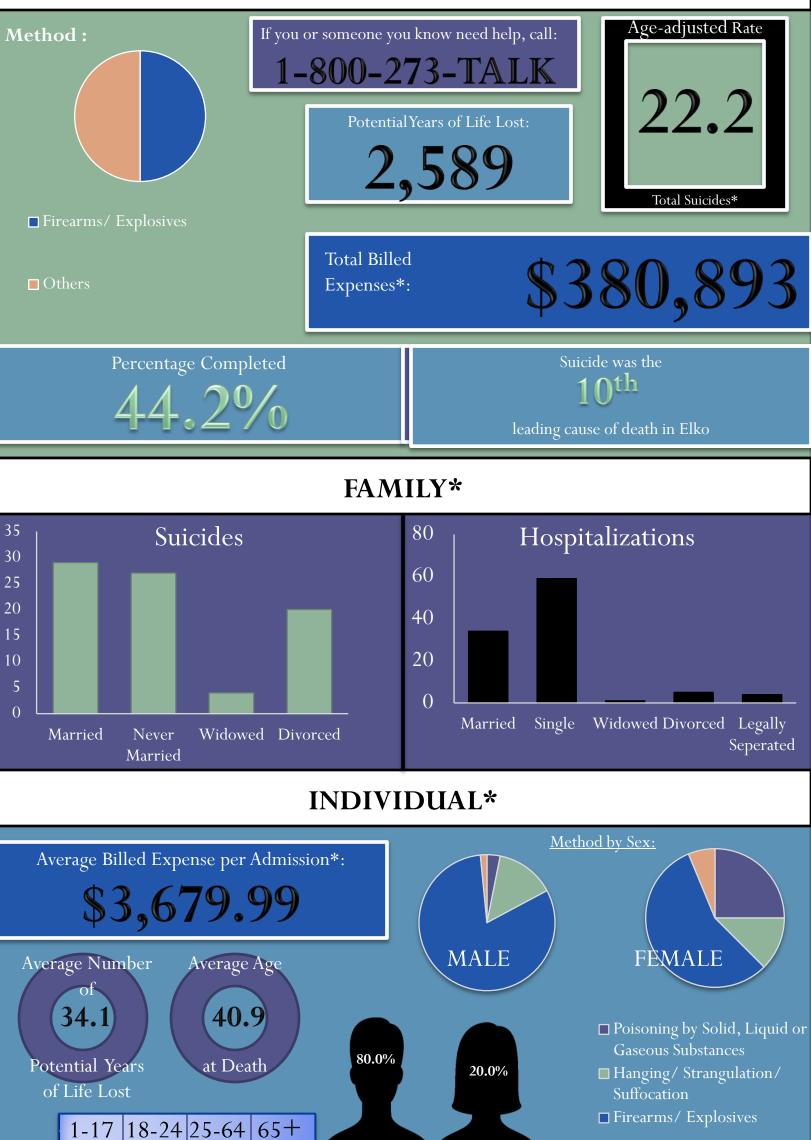
2

10

2006-2012*

* See Technical Notes.

COMMUNITY*



% of Suicides by Sex:

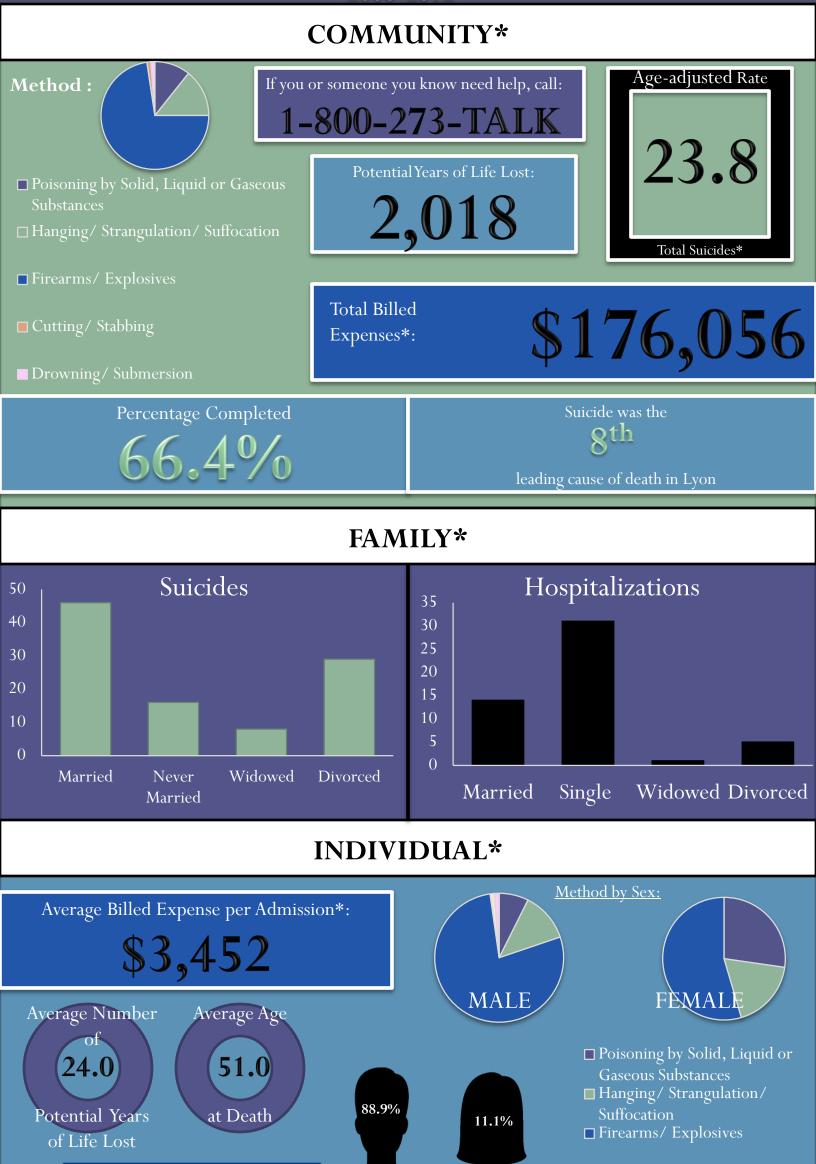
Others

Suicides in Lyon

Division of Public and Behavioral Health

2006-2012*

* See Technical Notes.



% of Suicides by Sex:

18-24 25-64

60

3

1 - 17

3

Age at

65 +

33

Cutting / Stabbing

Drowning/ Submersion

Suicides in Nye

Division of Public and Behavioral Health

7

2

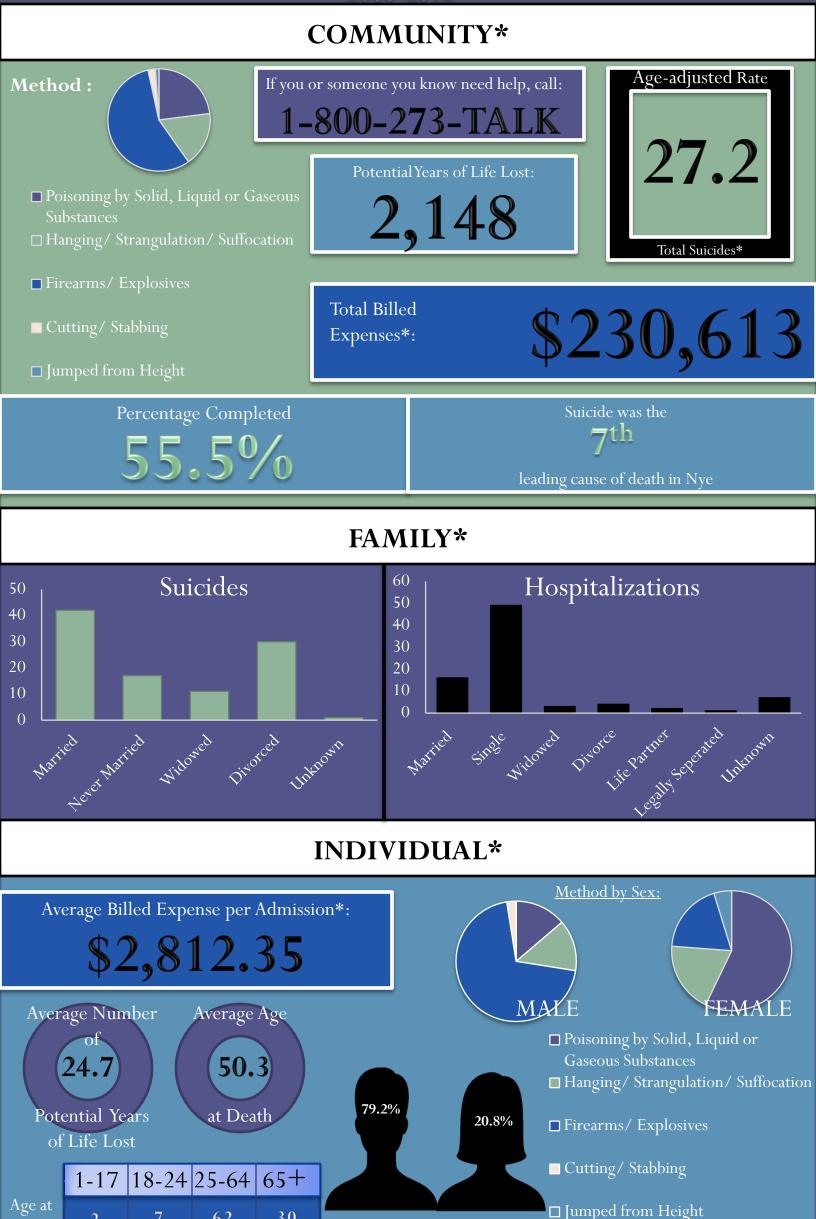
62

30

% of Suicides by Sex:

2006-2012*

* See Technical Notes.

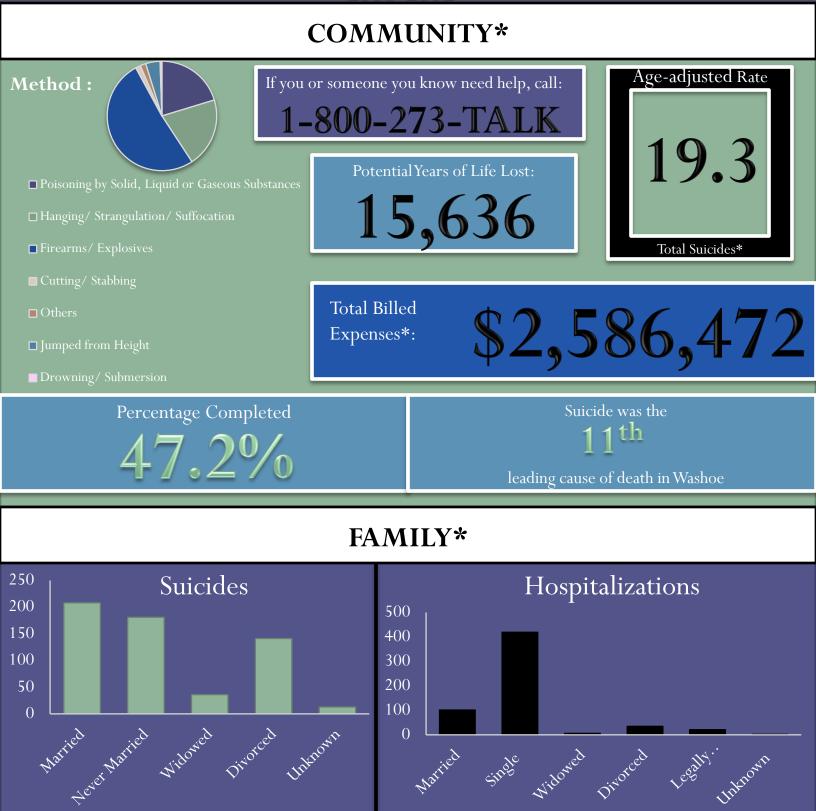


Suicides in Washoe

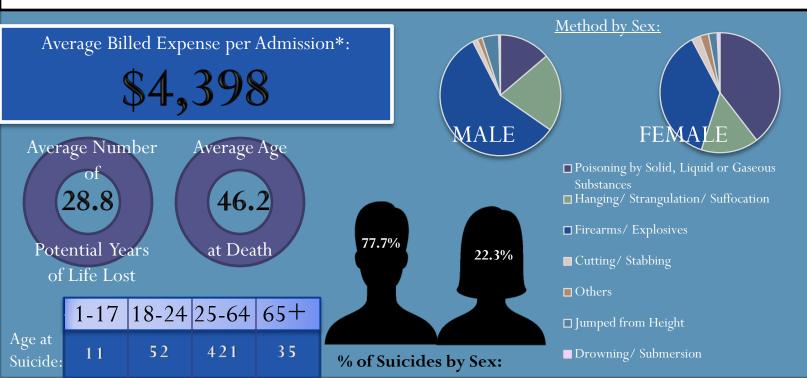
Division of Public and Behavioral Health

2006-2012*

* See Technical Notes.



INDIVIDUAL*



Suicides in All Other Counties

Division of Public and Behavioral Health

2006-2012*

* See Technical Notes.

Statistics for the following counties were suppressed to protect confidentiality and/or due to concerns of statistical reliability. Please refer to the overall Nevada fact sheet which may serve as proxy measures for any one of those counties.

> Churchill Esmeralda Eureka Humboldt Lander Lincoln Mineral Pershing Storey White Pine

Suicide Prevention

SUICIDE INDICATORS	SUICIDE RISK FACTORS
•Talking about wanting to die	•Metal Disorders
or kill oneself	•Alcohol and other substance
•Looking for a way to kill	use
oneself, such as searching	•Impulsive and/or aggressive
online or buying a gun	tendencies
•Talking about feeling	•History of trauma or abuse
hopeless or having no reason	•Major physical illness
to live	•Previous suicide attempt
•Talking about feeling trapped	•Family history of suicide
or in unbearable pain	•Job or financial loss
•Talking about being a burden	•Loss of relationship (divorce)
to others	•Easy access to lethal means
•Increasing use of alcohol or	•Local clusters of suicide
drugs	•Lack of social support and
•Sleeping too little or too	sense of isolation
much	•Stigma associated with asking
•Withdrawing or isolating	for help
oneself	•Lack of health care,
•Showing rage or talking	especially mental health and
about seeking revenge	substance abuse treatment
•Displaying extreme mood	•Cultural and religious beliefs
swings	•Exposure to others who have
•Feeling like he or she can't	died by suicide
talk to anyone or would rather	
be alone	
•Appearing anxious or	
agitated or behaving recklessly	

Suicide Prevention

If you or someone you know is considering suicide, get help!



Technical Notes

Hospitalizations

ICD-9 Definition	ICD-9 Codes
Suicide related injuries/death	E950-959.9

Emergency department visits by demographics, county of residence 2009-2011 combined.

The ICD-9 codes above were used to compile these data.

All 33 diagnosis codes and 5 E-codes related to suicide were considered.

Data may not meet the criteria for reliability, data quality or confidentiality due to small counts.

Data contains instances where the patient passed away leading to double reporting if compared to the suicide data within this report.

Hospital Emergency Department Billing (HEDB) data was proved by the Center for Health Information Analysis (CHIA). HEDB data is used to calculate the figures for all hospital related statistics: suicide related hospital case count, marital status, and billed hospital expenses.

Marital status is self-reported and only reported in the graphs when case count is greater than 1.

Percentage completed is the number of suicides divided by the sum of the number of suicides and the number of suicide-related hospitalizations that did not result in death.

Suicides

ICD-10 Definition	ICD-10 Codes
Poisoning by Solid, Liquid or Gaseous Substance	X60 through X69.9
Hanging/Strangulation/Suffocation	X70 through X70.9
Drowning/Submersion	X71 through X71.9
Firearms/Explosives	X72 through X75.9
Cutting/Stabbing	X78 through X79.9
Jumped from Height	X80 through X80.9
Others	X76 through X76.9 (or) X77 through X77.9 (or) X81 through X84.9 (or) Y87.0 (or) U03

Age-adjusted mortality rates are per 100,000 state and county specific population and are adjusted to the 2000 U.S. Standard population.

Population estimates were provided by the Nevada State Demographer in March 2012.

Data may not meet the criteria for reliability or data quality due to small counts.

*Nevada deaths during 2006-2012 period were combined for this report. 2012 Nevada death data is not final and subject to change. United States death data is 2006-2010 period combined.

ICD-10 codes used were queried using the underlying cause of death only.

Potential years of Life lost (PYLL) is the sum of the differences between the life expectancy (75 years of age) of a given population and the age of death for each person who died before then. All persons are considered half-way through the year for their age of death.

Average number of potential years of life lost (PYLL) is the number of deaths by residence divided by the total sum of potential years of life lost to the region.

Death counts were used to create all charts within this document.

Leading cause of death ranking is calculated using county specific age-adjusted rates for all suicide causes.

Marital status is self-reported and only reported in the graphs when case count is greater than 1.