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INJURY IN NEBRASKA 2009-2013

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Nebraska Department of Health and Human Services

Courtney Phillips, Acting Director, Division of Public Health
CEO, Department of Health and Human Services

Jenifer Roberts-Johnson, J.D. Deputy Director, Health Licensure & Health Data

Judy Martin, Deputy Director, Community & Environmental Health

Ming Qu, Ph.D., Administrator, Epidemiology and Informatics Unit

Kay Wenzl, Administrator, Public Health Promotion Unit

Report prepared by:

Ashley Newmyer, MPH, CPH Epidemiology Surveillance Coordinator

Derry Stover, MPH, CPH Occupational Health Epidemiologist

Ran Gu, Data Analyst Intern

Huang Huang, Data Analyst Intern

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For more information about this report, or for questions or comments, please contact:

Injury Prevention Program
Nebraska Department of Health and Human Services
301 Centennial Mall South
P.O. Box 95044
Lincoln, NE 68509
(402) 471-2101

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EXECUTIVE SUMMARY

Injuries are a major public health concern in Nebraska and the United States, resulting in significant numbers of deaths, hospitalizations, and emergency department (ED) visits each year. From 2009 to 2013, intentional and unintentional injuries were the fifth leading cause of death in Nebraska. For Nebraskans ages 1-44, unintentional injuries were the leading cause of death.

To better understand the pattern of injury in Nebraska, this report combines hospital discharge data and death certificate data from 2009 to 2013. It describes the leading causes of injury death and the leading causes of injury hospital discharges, including hospitalizations and ED visits.

The data shows that the pattern of fatal and nonfatal injury varied by age group and gender, as well as by body region and nature of injury, and median hospital charge and payer source.

Highlights of the report include:

- Deaths due to injury made up 6% of total deaths to Nebraskans. Among 5-34 year olds, over half of all deaths were due to injuries. (75.4% for ages 15-24 and approximately 55% for the 25-34 age groups).

- In Nebraska, injury was the second leading cause of years of potential life lost after malignant neoplasm (cancer).

- Statewide, unintentional motor vehicle crashes and suicide were the leading causes of injury death.

- Suicide was the leading cause of injury death for Nebraskans age 35-55. It was the second leading cause of injury death for Nebraskans age 5-34. The male death rate from suicide was higher than the female death rate (16.4 per 100,000 males vs. 3.9 per 100,000 females) while female hospitalization and ED visit rates due to self-inflicted injury (42.6 and 80.9 per 100,000 females, respectively) were higher than male rates (25.5 and 46.8 per 100,000 males, respectively).

- Death rates from falls were relatively low until the age of 65 years, when fall-related injury death rates began to rise dramatically.

- Falls were the leading cause of injury ED visits and hospitalizations for all ages combined in Nebraska. They were the second leading cause of unintentional injury death.

- Motor vehicle crash hospitalization rates were highest among young adults and seniors (67.6 per 100,000 for ages 15-24 and approximately 79 per 100,000 for ages 75+). Emergency department (ED) visit rates were highest for adolescents and young adults aged 15-24 years (1212.4 per 100,000 persons).

- Older Nebraskans aged 75 years and older had the highest ED visit and hospitalization rates for numerous categories of injuries: falls, motor vehicle crashes, overexertion, poisoning, struck by/against, and suffocation.

- In addition, older Nebraskans aged 75 years and older had the highest death rates for several categories of injuries: cut/pierce, fall, motor vehicle crashes, struck by/against, and suffocation.

- Suffocation was the second leading cause of injury death for Nebraskans under the age of 1 year and those over the age of 85 years. Overall, suffocation was the sixth leading cause of injury death in Nebraska.

- Struck by/against was among the top two leading causes of hospital discharges for ages under 34.

- More than one-third of fatal occupational injuries in Nebraska were among workers in the agriculture, forestry, fishing, and hunting industry.

Conclusions:

Motor vehicle crashes, suicides, and unintentional falls were the three leading causes of injury death in Nebraska for 2009 to 2013. On average, more years of potential life were lost due to unintentional and intentional injury than due to any other cause of death, with the exception of cancer. During this same time period, unintentional falls, motor vehicle crashes and self-inflicted injury were the three leading causes of injury-related hospitalization, while unintentional falls, struck by/against, and cut/pierce were the three leading causes of ED visits due to injury.

This report depicts the most recent injury surveillance data to help guide current and future injury prevention activities and programs.

INTRODUCTION

Unintentional injuries are often regarded as accidents – the result of misfortune and chance. However, most unintentional injuries are preventable.

Injuries are a serious problem in Nebraska. Injuries were the fifth leading cause of death in Nebraska from 2009 to 2013. Deaths due to injury usually occur at a much younger age than deaths due to cancer or heart disease (the first and second leading causes of death in Nebraska). As a result, the number of years of potential life lost (YPLL) due to injury is disproportionately large.

Injuries, in addition to causing death, also result in a wide variety of adverse health and lifestyle outcomes. In many cases, injury leads to disability, chronic pain, large medical costs, and profound changes in one's daily life. Furthermore, injury affects more than just the injured. Injury impacts families, employers, and communities due to its negative social and economic outcomes.

Data allow us to better understand and diagnose the injury problem; it shows us which injuries are most problematic so we can appropriately focus our intervention efforts. The purpose of this report is to present recent data to improve understanding of the nature and magnitude of injury in Nebraska. This information can be used to prioritize needs, direct resources, and evaluate prevention strategies, with the goal of reducing the number and severity of injuries in Nebraska each year.

Each section of this report describes a leading cause of fatal or nonfatal injury in Nebraska. Age-adjusted and age-specific death, hospitalization, and emergency department (ED) visit rates are presented by gender in each section. Also, body region and nature of injury, median hospital cost, and payer source are described for hospitalizations and ED visits. For intentional injuries, including suicide/self-inflicted injury and homicide/assault, the method used to inflict the injury is also presented. Selected occupational injury data are presented in a special supplement, and selected injury-related data from the Nebraska Trauma Registry are presented separately in data tables in Table 11 of Appendix F.

AN OVERVIEW OF INJURY IN NEBRASKA

Injury deaths as a percent of all deaths

From 2009 to 2013, approximately 6% of all deaths among Nebraskans were due to injuries. The percent of deaths due to injury were highest among younger Nebraska residents aged 15-34 years old. Among 15-24 year olds, three-quarters (75.4%) of deaths were due to injury. *Figure 1.*

Figure 1: Injury deaths as a percent of all deaths, by age group, Nebraska residents, 2009-2013

Age Group	Injury Deaths	All Deaths	Percent of Deaths Due to Injury
All Ages	4694	74572	6.3%
< 1	29	646	4.5%
1-4	55	120	45.8%
5-14	67	163	41.1%
15-24	559	741	75.4%
25-34	528	927	57.0%
35-44	512	1527	33.5%
45-54	686	4252	16.1%
55-64	535	7917	6.8%
65-74	338	10990	3.1%
75-84	576	19372	3.0%
85+	809	27917	2.9%

Source: NE Vital Statistics, 2009-2013

Leading causes of death in the United States

From 2009 to 2013, unintentional injury was the leading cause of death for people aged 1-44 years old in the United States, and the fifth leading cause of death overall. In addition, suicide was the second leading cause of death for adults aged 25-34 years old in the U.S., and the third leading cause of death for adolescents and young adults aged 10-24 years old. During this same time period, homicide was the second leading cause of death for U.S. adolescents and young adults aged 15-24 years old, and the third leading cause of death for U.S. adults aged 25-34 years old. *Table 1.*

Leading causes of death in Nebraska

From 2009 to 2013, unintentional injury was the leading cause of death for people aged 1-44 years old in Nebraska with the exception of the age group 5-9 years, and the fifth leading cause of death overall. In addition, suicide was the second leading cause of death for Nebraskans aged 15-34 years old, and the third leading cause of death for Nebraska adolescents aged 10-14 years old. During this same time period, homicide was the third leading cause of death for adolescents and young adults aged 15-24 years old, and the fourth leading cause of death for Nebraskans aged 1-4 years, 10-14 years and 25-34 years old. *Table 2.*

Table 1: Five leading causes of death by age, United States, 2009-2013 total deaths

	Age Groups										
Rank	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	Congenital Anomalies N=25,136	Unintentional Injury N=6,906	Unintentional Injury N=3,781	Unintentional Injury N=4,257	Unintentional Injury N=60,656	Unintentional Injury N=76,213	Unintentional Injury N=75,512	Malignant Neoplasms N=243,937	Malignant Neoplasms N=555,356	Heart Disease N=2,397,581	Heart Disease N=3,004,495
2	Short Gestation N=21,196	Congenital Anomalies N=2,441	Malignant Neoplasms N=2,244	Malignant Neoplasms N=2,235	Suicide N=23,543	Suicide N=29,719	Malignant Neoplasms N=58,731	Heart Disease N=180,188	Heart Disease N=348,876	Malignant Neoplasms N=1,995,866	Malignant Neoplasms N=2,886,566
3	SIDS N=9,441	Homicide N=1,849	Congenital Anomalies N=886	Suicide N=1,500	Suicide N=23,037	Homicide N=21,243	Heart Disease N=53,140	Unintentional Injury N=101,141	Unintentional Injury N=74,993	Chronic Low. Respiratory Disease N=606,567	Chronic Low. Respiratory Disease N=711,070
4	Maternal Pregnancy Comp. N=7,862	Malignant Neoplasms N=1,769	Homicide N=622	Homicide N=815	Malignant Neoplasms N=7,921	Malignant Neoplasms N=18,124	Suicide N=33,156	Suicide N=43,738	Chronic Low. Respiratory Disease N=74,600	Cerebro-vascular N=547,280	Cerebro-vascular N=644,774
5	Unintentional Injury N=5,779	Heart Disease N=801	Heart Disease N=397	Congenital Anomalies N=801	Heart Disease N=4,958	Heart Disease N=16,186	Homicide N=13,040	Liver Disease N=43,554	Diabetes Mellitus N=61,340	Alzheimer's Disease N=411,292	Unintentional Injury N=623,667

WISQARS™ **Note: For leading cause categories in this State-level chart, counts of less than 10 deaths have been suppressed (---).**
Data Source: National Center for Health Statistics (NCHS), National Vital Statistics System Produced By: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention

Table 2: Five leading causes of death by age, Nebraska, 2009-2013

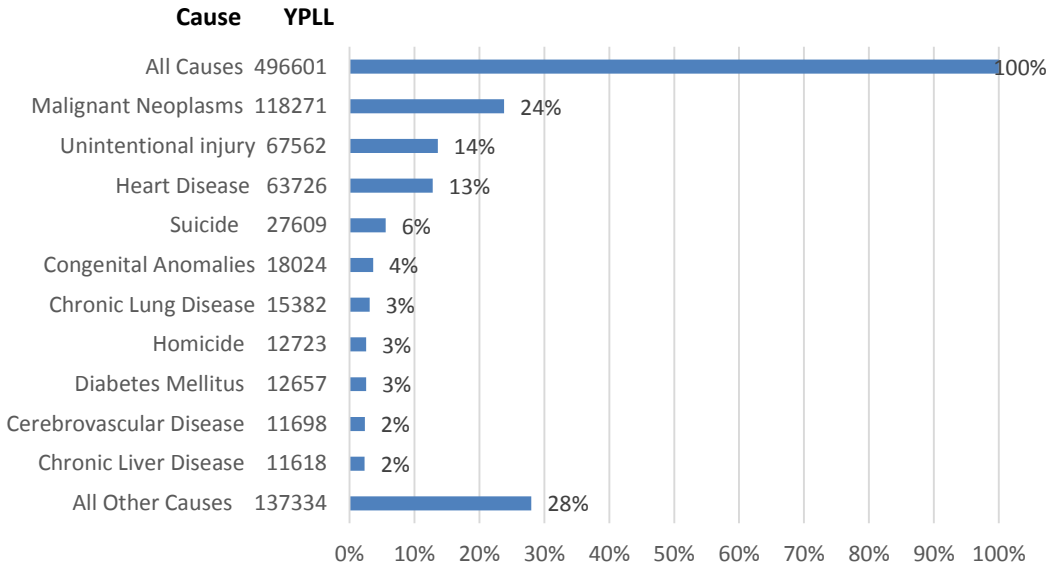
	Age Groups										
Rank	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	Congenital Anomalies N=188	Unintentional Injury N=43	Malignant Neoplasms N=20	Unintentional Injury N=42	Unintentional Injury N=367	Unintentional Injury N=341	Unintentional Injury N=335	Malignant Neoplasms N=1,275	Malignant Neoplasms N=2,995	Heart Disease N=14,011	Malignant Neoplasms N=17,121
2	SIDS N=89	Malignant Neoplasms N=17	Unintentional Injury N=19	Malignant Neoplasms N=15	Suicide N=141	Suicide N=152	Malignant Neoplasms N=293	Heart Disease N=763	Heart Disease N=1,451	Malignant Neoplasms N=12,373	Heart Disease N=16,585
3	Short Gestation N=75	Congenital Anomalies N=12	Congenital Anomalies N=14	Suicide N=--	Homicide N=89	Heart Disease N=89	Heart Disease N=235	Unintentional Injury N=452	Chronic Low. Respiratory Disease N=468	Chronic Low. Respiratory Disease N=4,506	Chronic Low. Respiratory Disease N=5,147
4	Maternal Pregnancy Comp. N=55	Homicide N=11	Influenza & Pneumonia N=--	Homicide N=--	Malignant Neoplasms N=49	Malignant Neoplasms N=83	Suicide N=159	Liver Disease N=221	Unintentional Injury N=375	Cerebro-vascular N=3,711	Cerebro-vascular N=4,139
5	Placenta Cord Membranes N=32	Heart Disease N=--	Chronic Low. Respiratory Disease N=--	Congenital Anomalies N=--	Heart Disease N=18	Homicide N=81	Homicide N=53	Suicide N=212	Diabetes Mellitus N=298	Alzheimer's Disease N=2,823	Unintentional Injury N=3,556

WISQARS™ **Note: For leading cause categories in this State-level chart, counts of less than 10 deaths have been suppressed (---).**
Data Source: National Center for Health Statistics (NCHS), National Vital Statistics System
Produced By: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention

Years of potential life lost due to injury

Years of potential life lost (YPLL) is a measure of premature death. The younger the age of a person at death, the more years of potential life lost. From 2009 to 2013, deaths due to unintentional injury accounted for approximately 14% of total YPLL among Nebraskans. During this same period, suicide accounted for nearly 6% of total YPLL. *Figure 2.*

Figure 2: Total years of potential life lost (YPLL) before age 75 years old, by underlying cause of death, Nebraska residents, 2009-2013



Source: NE Vital Statistics, 2009-2013

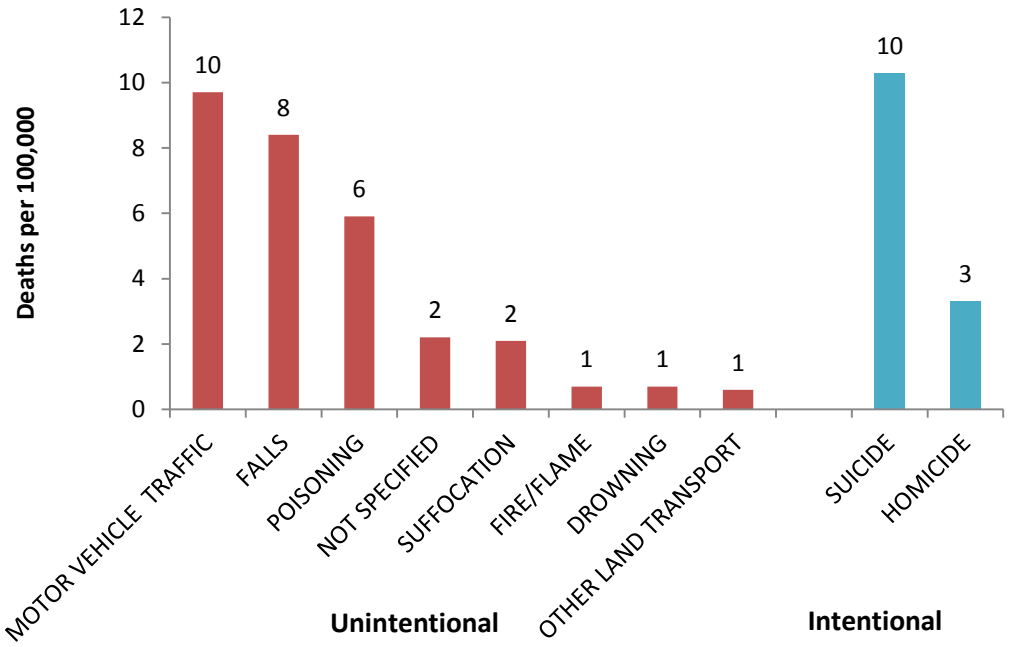
Leading causes of injury death in Nebraska

Unintentional motor vehicle crashes and suicide were the leading cause of injury death among Nebraska residents from 2009 to 2013 (10 deaths per 100,000 persons). During the same time period, unintentional falls were the second leading cause of injury death among Nebraskans (8 deaths per 100,000 persons), followed by unintentional poisoning (6 deaths per 100,000 persons). *Figure 3.*

Leading causes of hospitalizations due to injury in Nebraska

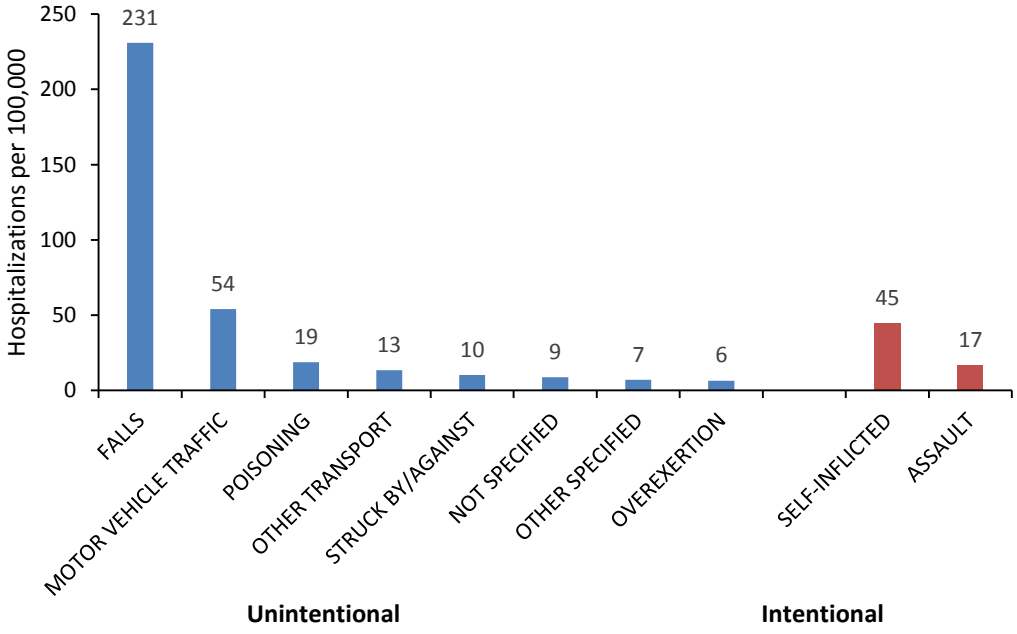
Unintentional falls were the leading cause of hospitalizations due to injury among Nebraska residents from 2009 to 2013 (231 per 100,000 persons). During the same time period, unintentional injuries due to motor vehicle traffic were the second leading cause of hospitalizations due to injury (54 per 100,000 persons), followed by self-inflicted injuries (45 per 100,000 persons). *Figure 4.*

Figure 3: Age-adjusted death rates due to leading causes of unintentional and intentional injuries, Nebraska residents, 2009-2013 (n=4,511)



Source: NE Vital Statistics, 2009-2013

Figure 4: Age-adjusted hospitalization rates due to leading causes of unintentional and intentional injuries, Nebraska residents, 2009-2013 (N=44,868)

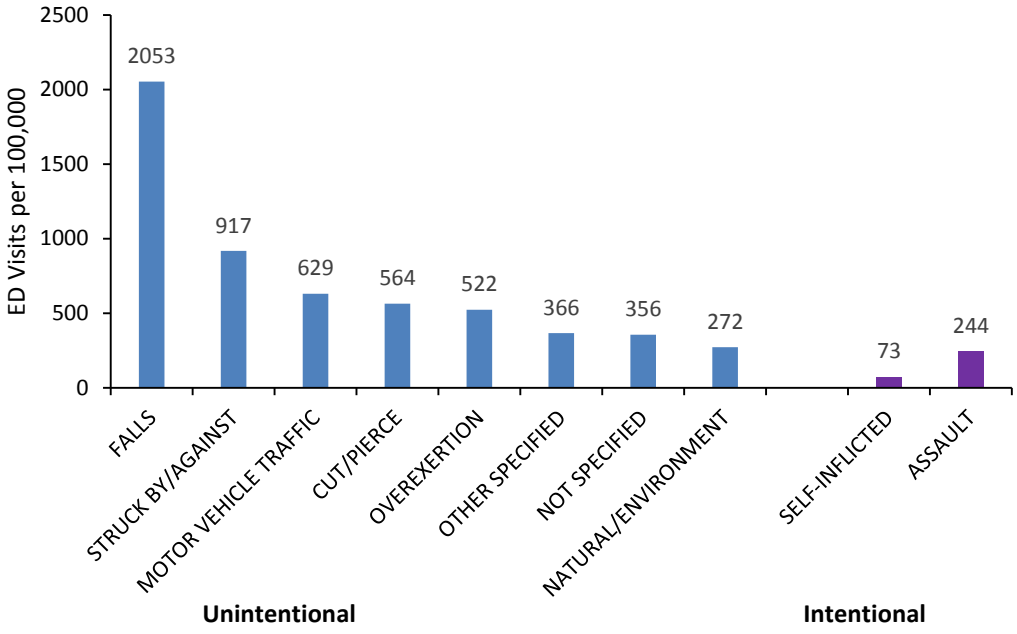


Source: NE hospital discharge data, 2009-2013

Leading causes of emergency department (ED) visits due to injury in Nebraska

Unintentional falls were the leading cause of emergency department (ED) visits due to injury among Nebraska residents from 2009 to 2013 (2,053 per 100,000 persons). During the same time period, unintentional struck by/against injuries were the second leading cause of ED visits due to injury (917 per 100,000 persons), followed by motor vehicle traffic injuries (629 per 100,000 persons). *Figure 5.*

Figure 5: Age-adjusted emergency department (ED) visit rates due to leading causes of unintentional and intentional injuries, Nebraska residents, 2009-2013 (N=610,978)



Source: NE hospital discharge data, 2009-2013

UNINTENTIONAL MOTOR VEHICLE CRASHES

Overview

From 2009 to 2013, motor vehicle crashes were the leading cause of injury death and the second leading cause of injury-related hospitalizations among Nebraskans.

Definitions

Unintentional motor vehicle crashes include, but are not limited to:

- motor vehicle traffic crashes involving collision with a train,
- motor vehicle traffic crashes involving collision with another motor vehicle,
- motor vehicle traffic crashes involving collision with a pedestrian, and
- motor vehicle traffic crashes due to loss of control, without collision

Deaths

Rates

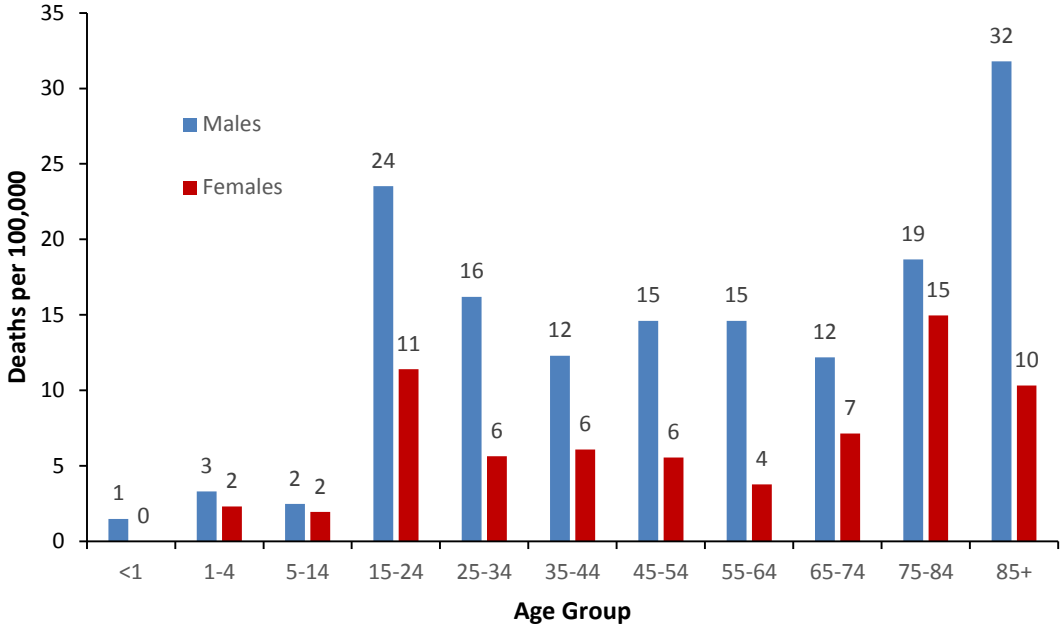
From 2009 to 2013, the age-adjusted death rate due to unintentional motor vehicle crash injuries was 10 per 100,000 Nebraskans. Such deaths were most common among adolescents and young adults aged 15-24 years old (18 per 100,000 persons), and older adults aged 75 years and older (17 per 100,000 persons). In general, deaths due to motor vehicle crashes were more common among males than among females (13 per 100,000 males vs. 6 per 100,000 females). *Figure 6.*

Hospitalizations

Rates

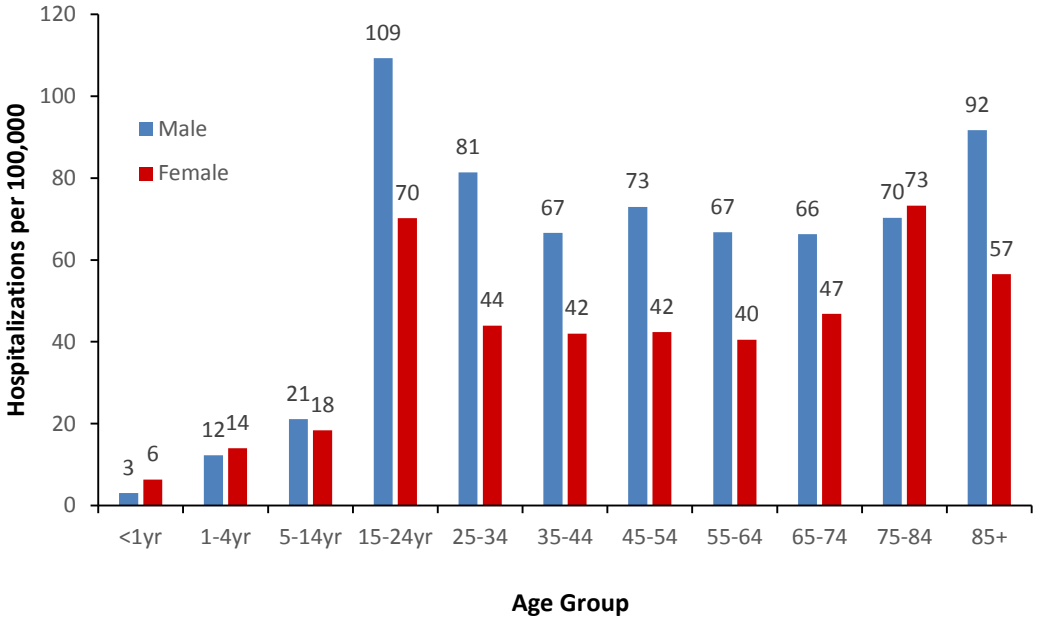
From 2009 to 2013, the age-adjusted hospitalization rate due to unintentional motor vehicle crash injuries was 54.0 per 100,000 Nebraskans. Hospitalizations due to unintentional motor vehicle crash injuries were most common among males aged 15-24 years (109 per 100,000 persons), males aged 25-34 years (81 per 100,000 persons), and males aged 85 years and older (92 per 100,000 persons). *Figure 7.*

Figure 6: Death rates due to unintentional motor vehicle crash injuries, by age group and gender, Nebraska residents, 2009-2013 (n=905)



Source: NE Vital Statistics, 2009-2013

Figure 7: Hospitalization rates due to unintentional motor vehicle crash injuries, by age group and gender, Nebraska residents, 2009-2013 (n= 5,002)



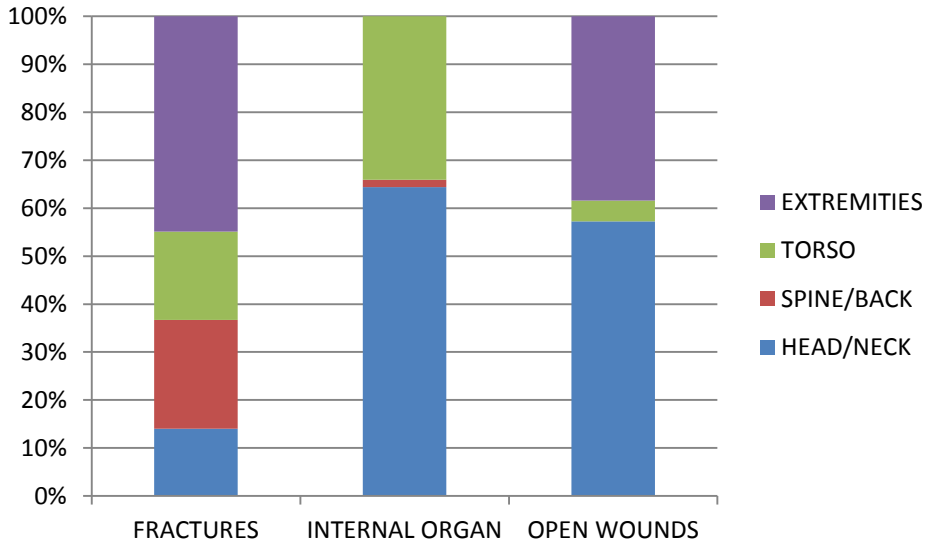
Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

Approximately 58% of all hospitalizations for unintentional motor vehicle crash injuries were to treat fractures, 29% were to treat internal organ injuries, 5% were to treat open wounds, and 8% were to treat other or unspecified injuries.

Nearly half (45%) of fractures were fractures of the extremities, while approximately 66% of internal organ injuries were injuries of the head and neck, including traumatic brain injuries. *Figure 8.*

Figure 8: Hospitalizations due to unintentional motor vehicle crash injuries, by body region and nature of injury, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Median hospital charges and payer source

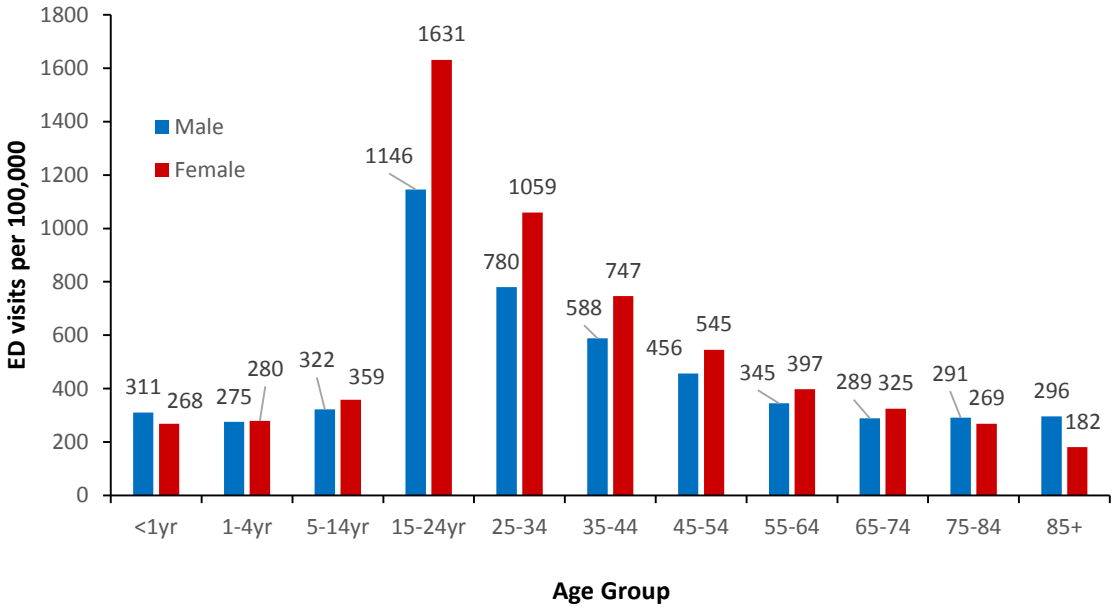
The median hospital charge for injuries due to unintentional motor vehicle crashes was $36,487 for hospitalizations. Approximately 12% of hospitalization charges to treat injuries caused by unintentional motor vehicle crashes were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

Emergency department (ED) visits

Rates

From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to unintentional motor vehicle crash injuries was 629.4 per 100,000 Nebraskans.ED visits due to unintentional motor vehicle crash injuries were most common among adolescents and young adults aged 15-24 years (1,383 per 100,000 persons). Among individuals in this age category, ED visits due to unintentional motor vehicle crash injuries were considerably higher among females than males (1,631 per 100,000 females vs. 1,146 per 100,000 males). *Figure 9.*

Figure 9: Emergency department (ED) visit rates due to unintentional motor vehicle crash injuries, by age group and gender, Nebraska residents, 2009-2013 (n=56,907)



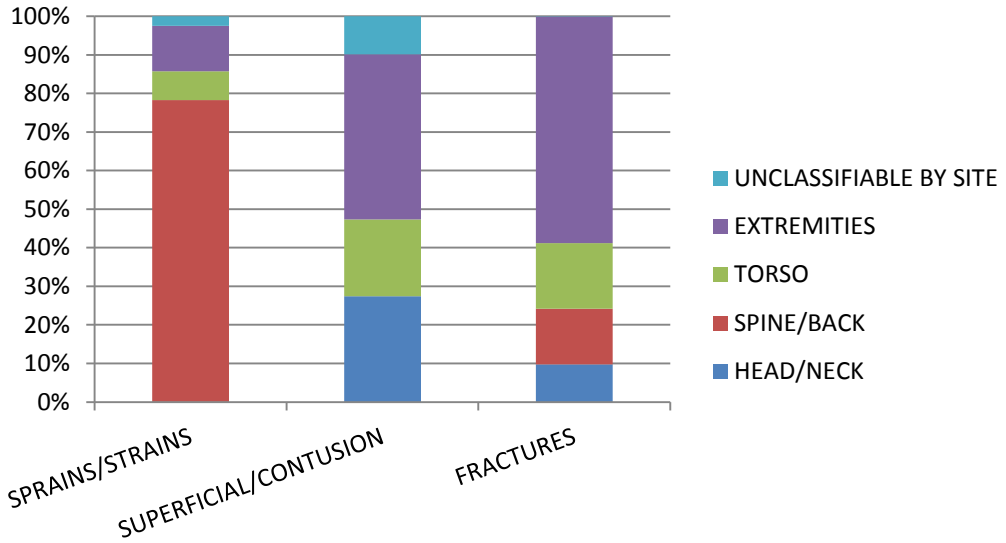
Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

Approximately 38% of all emergency department (ED) visits for unintentional motor vehicle crash injuries were to treat sprains and strains, 30% were to treat superficial injuries or contusions, 8% were to treat fractures, and 24% were to treat other or unspecified injuries.

Approximately 78% of sprains and strains were of the back and spine, while nearly 43% of superficial injuries or contusions were of the extremities. *Figure 10.*

Figure 10: Emergency department (ED) visits due to unintentional motor vehicle crash injuries, by body region and nature of injury, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Median hospital charges and payer source

The median hospital charge for injuries due to unintentional motor vehicle crashes was $1,289 for emergency department (ED) visits. Approximately 10% of ED visit charges to treat unintentional motor vehicle crash injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

UNINTENTIONAL FALLS

Overview

From 2009 to 2013, unintentional falls were the leading cause of hospitalizations and emergency department (ED) visits due to injury among Nebraskans, and the third leading cause of injury death.

Definitions

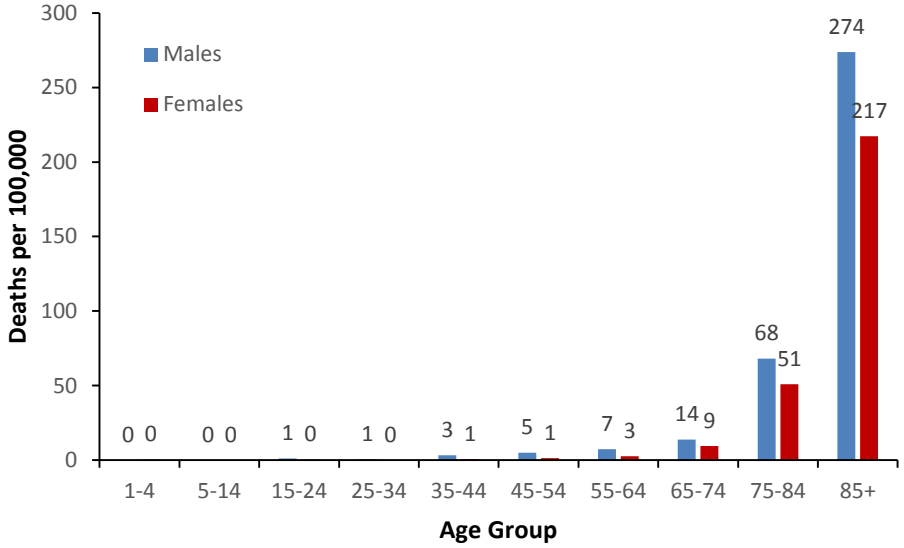
Unintentional falls include:

- fall on or from stairs or steps
- fall on or from ladders or scaffolding
- fall from or out of building or other structure, such as a balcony or roof
- fall into hole or other opening in surface
- fall from one level to another including: fall from playground equipment, chairs, beds, and other furniture
- fall on same level from slipping, tripping, or stumbling
- fall on same level from collision, pushing, or shoving, by or with other person, including in sports
- other and unspecified falls

Deaths

From 2009 to 2013, the age-adjusted death rate due to unintentional fall injuries was 8 per 100,000 Nebraskans. Such deaths were most common among adults aged 85 years and older (236 per 100,000 persons). Among adults aged 75 years and older, death rates due to unintentional fall injuries were higher for males than for females (68 per 100,000 males vs. 51 per 100,000 females) among adults aged 75-84 years old; (274 per 100,000 males vs. 217 per 100,000 females) among adults aged 85 years and older. *Figure 11.*

Figure 11: Death rates due to unintentional fall injuries, by age group and gender, Nebraska residents, 2009-2013 (n=924)



Source: NE Vital Statistics, 2009-2013

Hospitalizations

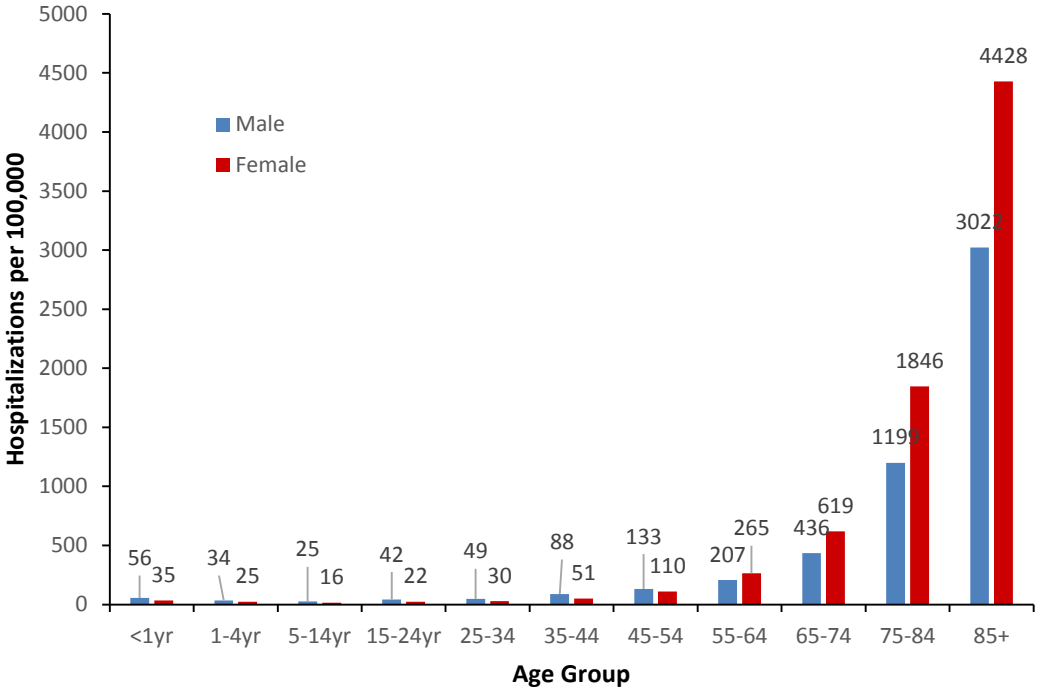
Rates

From 2009 to 2013, the age-adjusted hospitalization rate due to unintentional fall injuries was 230.4 per 100,000 Nebraskans. Hospitalizations due to unintentional fall injuries were most common among older Nebraska residents. Adults aged 85 years and older were most likely to be discharged from a hospital due to an unintentional fall injury (3,963 per 100,000 persons). For adults aged 55 years and older, hospitalization rates due to unintentional fall injuries were higher among females than males. *Figure 12.*

Body region and nature of injury

Approximately 80% of all hospitalizations for unintentional falls were to treat fractures; of these, nearly 75% were fractures of the extremities.

Figure 12: Hospitalization rates due to unintentional fall injuries, by age group and gender, Nebraska residents, 2009-2013 (n=24,264)

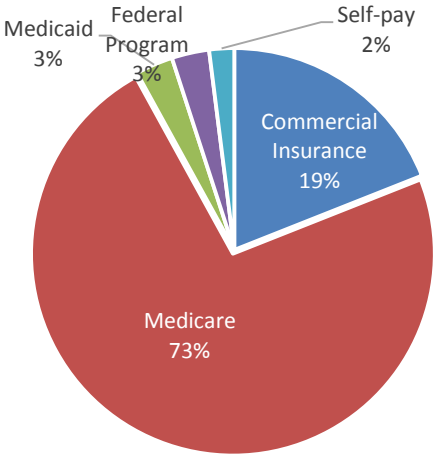


Source: NE hospital discharge data 2009-2013

Median hospital charges, and payer source

The median hospital charge for injuries due to unintentional falls was $27,290 for hospitalizations. Approximately 76% of hospitalization charges to treat unintentional fall injuries were paid for by Medicare and Medicaid. *Figure 13.*

Figure 13: Hospitalizations due to unintentional fall injuries, by payer source, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

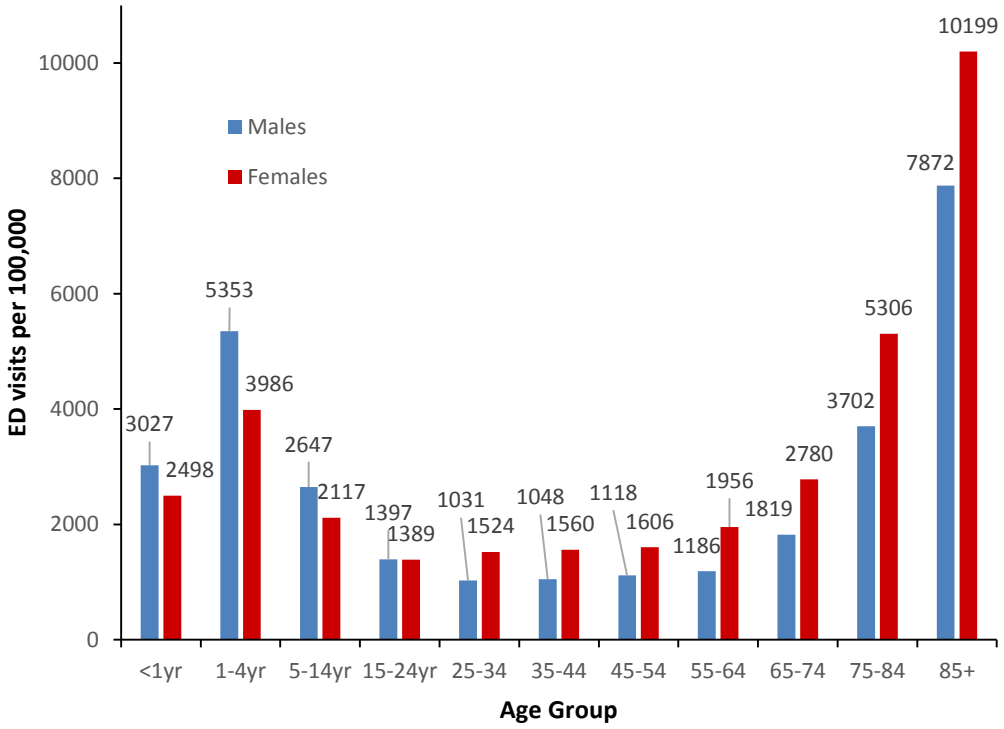
Emergency department (ED) visits

Rates

Emergency department (ED) visits due to unintentional fall injuries were most common among older Nebraska residents. Adults aged 85 years and older had the highest ED visit rates due to an unintentional fall injury (9,430 per 100,000 persons). Among children and adolescents, youth ages 1-4 years had relatively higher ED visit rates due to unintentional fall injuries (4,686 per 100,000 persons) compared to youth in other age groups.

For adults aged 25 years and older, ED visit rates due to unintentional fall injuries were higher among females than males. For younger age categories, ED visit rates due to unintentional fall injuries were higher among males than females. *Figure 14.*

Figure 14: Emergency department (ED) visit rates due to unintentional fall injuries, by age group and gender, Nebraska residents, 2009-2013 (n=194,818)



Source: NE hospital discharge data 2009-2013

Body region and nature of injury

Approximately 25% of all emergency department (ED) visits for unintentional fall injuries were to treat superficial injuries or contusion, 23% were to treat fractures, 20% were to treat open wounds, and 32% were to treat another or unspecified injury.

Among internal organ injuries, nearly 97% were injuries of the head and neck. Among superficial injuries or contusions, approximately 43% were injuries of the extremities.

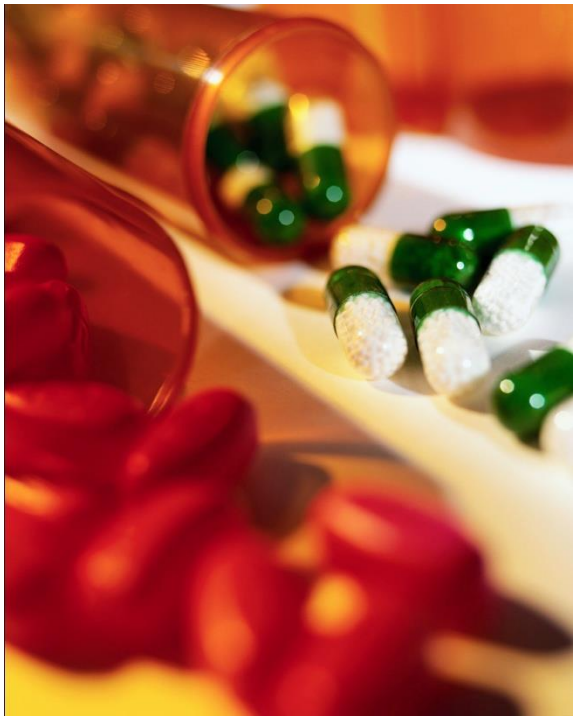
Median hospital charges and payer source

The median hospital charge for unintentional fall injuries was $1,028 for emergency department (ED) visits. Nearly half (43%) of ED visit charges to treat unintentional fall injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

UNINTENTIONAL POISONING

Overview

Unintentional poisoning was the third leading cause of unintentional injury death in Nebraska between 2009 and 2013.



Definitions

Agents involved in unintentional poisonings include:

- medications
- alcohols
- gases and vapors
- cosmetics and personal care products
- cleaning products
- pesticides
- plants

Deaths

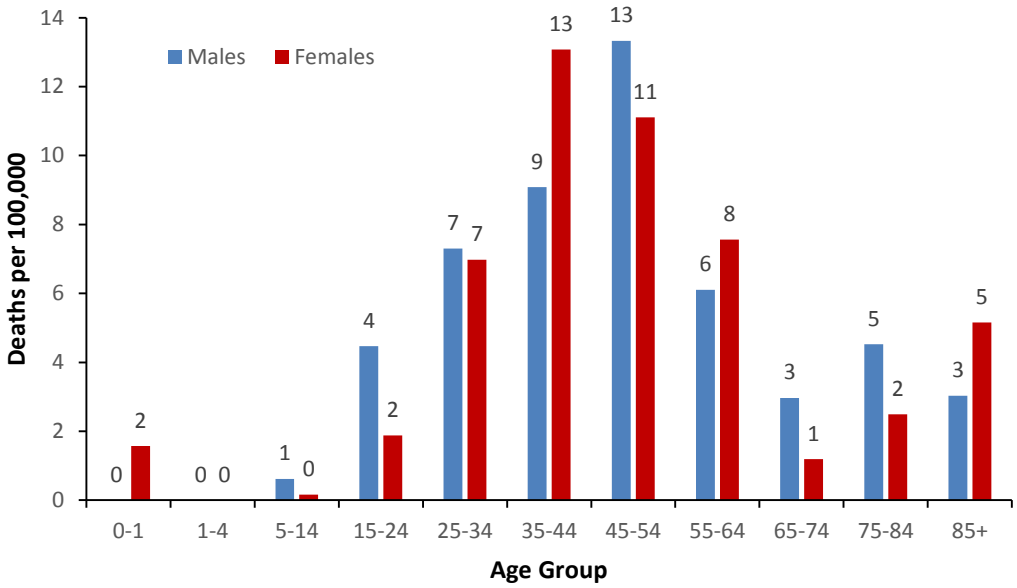
Rates

From 2009 to 2013, the age-adjusted death rate due to unintentional poisoning was 6 per 100,000 Nebraskans. Deaths due to unintentional poisoning were most common among Nebraska adults aged 45-54 years old (12 per 100,000 persons). Overall, death rates due to unintentional poisoning were approximately equal for males and females (6.0 per 100,000 males vs. 5.8 per 100,000 females). *Figure 27.*

Details of cause of injury

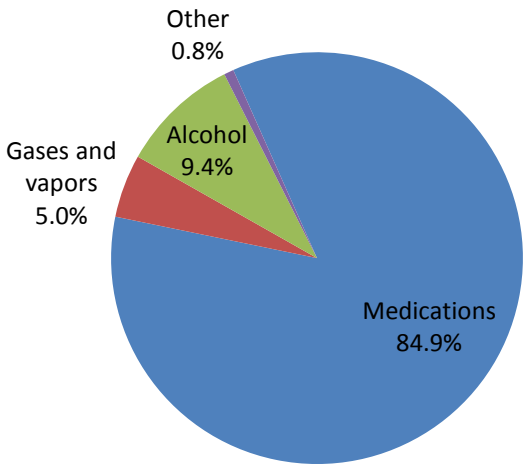
Among deaths due to unintentional poisoning, 85% were due to poisonings by medications. *Figure 28.*

Figure 27: Death rates due to unintentional poisoning, by age group and gender, Nebraska residents, 2009-2013 (n=523)



Source: NE Vital Statistics, 2009-2013

Figure 28: Deaths due to unintentional poisoning, by details of cause of injury, Nebraska residents, 2009-2013



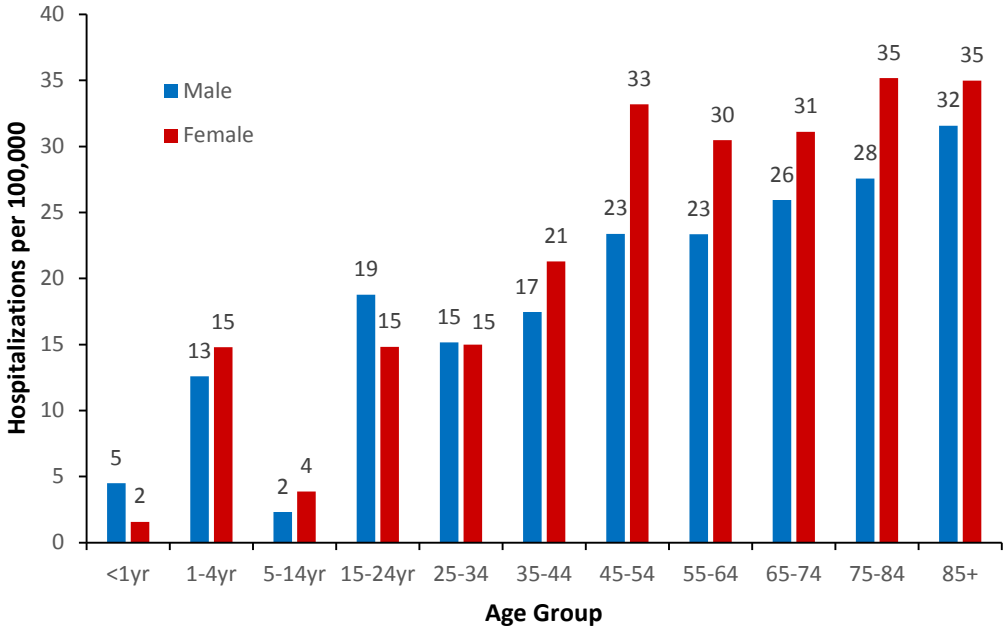
Source: NE Vital Statistics, 2009-2013

Hospitalizations

Rates

From 2009 to 2013, the age-adjusted hospitalization rate due to unintentional poisoning was 18.8 per 100,000 Nebraskans. Hospitalization rates due to unintentional poisoning were highest among adults aged 75-84 years old (32 per 100,000 persons) and 85 years and older (33 per 100,000 persons). For adults aged 35 years and older, hospitalization rates due to unintentional poisoning were higher among females than among males. This difference was particularly evident for adults aged 45-54 year olds (33 per 100,000 females vs. 23 per 100,000 males). *Figure 29.*

Figure 29: Hospitalization rates due to unintentional poisoning, by age group and gender, Nebraska residents, 2009-2013 (n=1,776)



Source: NE hospital discharge data, 2009-2013

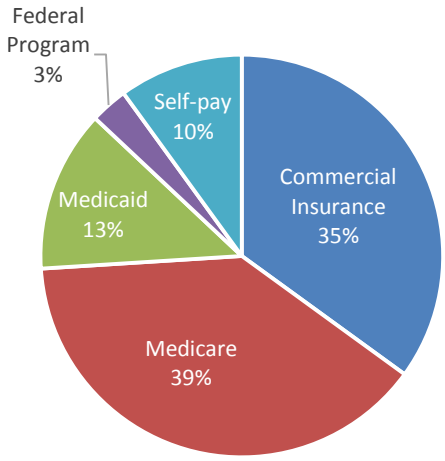
Body region and nature of injury

Approximately 99% of all hospitalizations for unintentional poisonings were to treat system wide and late effects.

Median hospital charges and payer source

The median hospital charge for unintentional poisonings was $11,263 for hospitalizations. Approximately 51% of hospitalization charges to treat unintentional poisonings were paid for by Medicare and Medicaid. *Figure 30.*

Figure 30: Hospitalizations due to unintentional poisoning, by payer source, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Details of cause of injury

Among hospitalizations due to unintentional poisoning, approximately 90% were due to poisoning by medications. The remaining 10% were due to poisoning by gases and vapors (4%), alcohol (3%), cleaning and polishing agents (0.7%), and other means (2.3%).

Emergency department (ED) visits

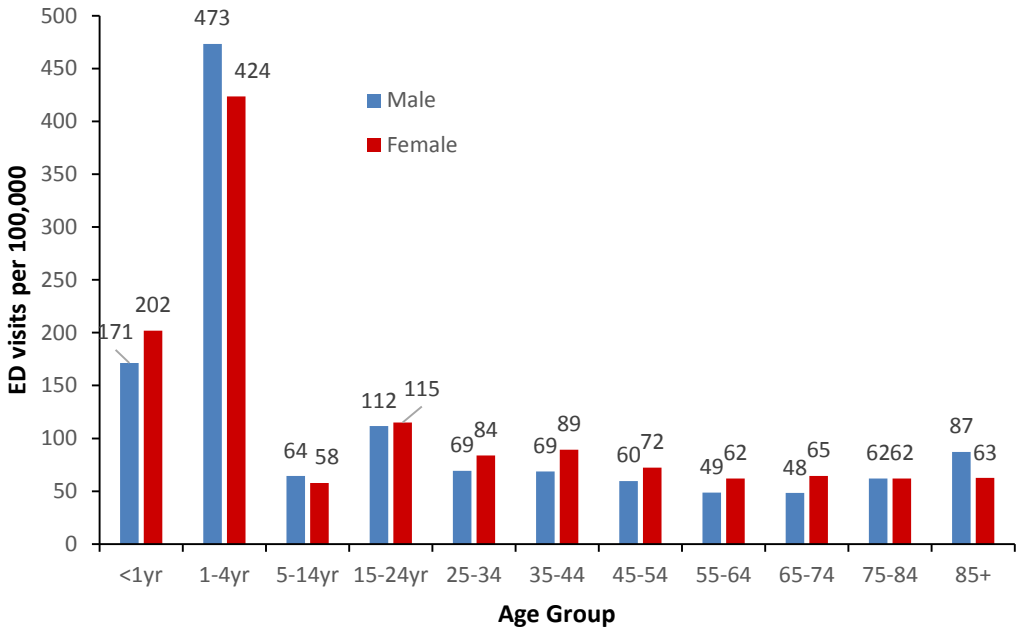
Rates

From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to unintentional poisoning was 96.6 per 100,000 Nebraskans. ED visit rates due to unintentional poisoning were highest for children ages 1-4 years old (449 per 100,000 persons). Within this age category, ED visit rates due to unintentional poisoning were higher for boys than for girls (473 per 100,000 boys vs. 423 per 100,000 girls). *Figure 31.*

Body region and nature of injury

Approximately 99% of all emergency department (ED) visits for unintentional poisonings were to treat system wide and late effects.

Figure 31: Emergency department (ED) visit rates due to unintentional poisoning, by age group and gender, Nebraska residents, 2009-2013 (n=8,891)



Source: NE hospital discharge data, 2009-2013

Median hospital charges and payer source

The median hospital charge for unintentional poisonings was $816 for emergency department (ED) visits. Approximately 32% of ED visit charges to treat unintentional poisonings were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

Details of cause of injury

Among emergency department (ED) visits due to unintentional poisoning, approximately 57% were due to poisoning by medications. The remaining 43% were due to poisoning by gases and vapors (10.9%), alcohol (1.4%), cleaning and polishing agents (3.7%), and other means (26.9%).

UNINTENTIONAL STRUCK BY/AGAINST

Overview

From 2009 to 2013, unintentional struck/by against was the second leading cause of emergency department (ED) visits for injuries among Nebraskans.

Definitions

Unintentional struck by/against includes:

- struck accidentally by a falling object, such as the collapse of a building, or an object falling from a machine
- striking against or struck accidentally by objects and people, such as being kicked or stepped on during a game, or being struck by a hit or thrown ball in sports, or being crushed or stepped on by a crowd due to collective fear or panic.

Deaths

From 2009 to 2013, there were 64 deaths due to unintentional struck by/against injuries. Overall, such deaths were uncommon among Nebraskans of all ages (less than 1 death per 100,000 persons).

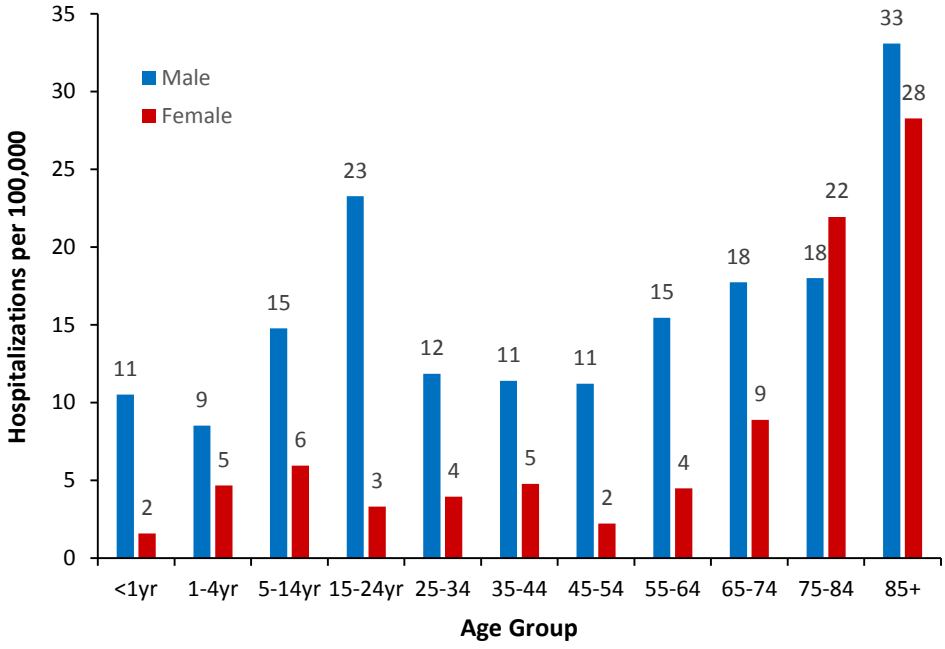
Hospitalizations

Rates

From 2009 to 2013, the age-adjusted hospitalization rate due to unintentional struck by/against injuries was 10.3 per 100,000 Nebraskans. Hospitalization rates due to unintentional struck by/against injuries were highest among Nebraska adults aged 85 years and older (30 per 100,000 persons).

For all other age categories, hospitalization rates for unintentional struck by/against injuries were higher for males than for females. This difference is most apparent among 5-14 year olds (15 per 100,000 males vs. 6 per 100,000 females) and 15-24 year olds (23 per 100,000 males vs. 3 per 100,000 females). *Figure 15.*

Figure 15: Hospitalization rates due to unintentional struck by/against injuries, by age group and gender, Nebraska residents, 2009-2013 (n=964)



Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

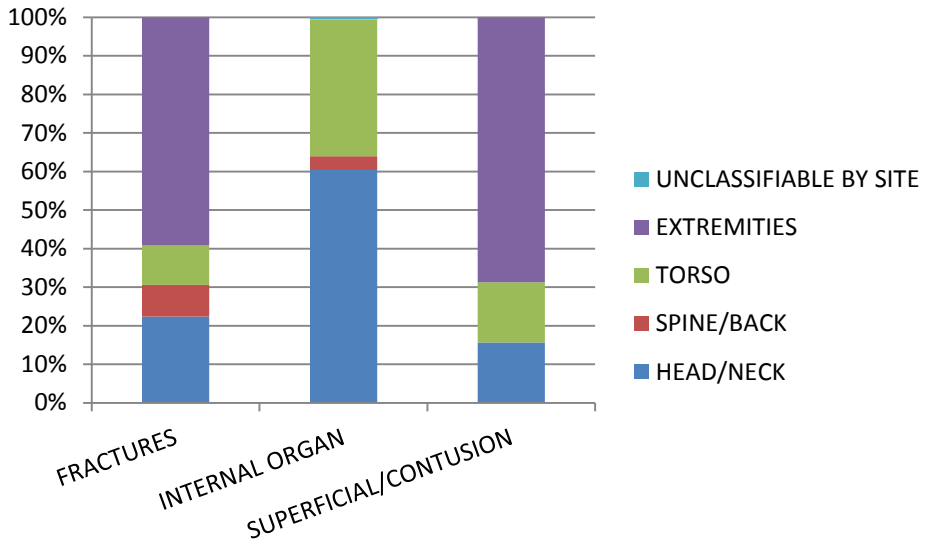
Approximately 52% of all hospitalizations for unintentional struck by/against injuries were to treat fractures, 20% were to treat injuries of the internal organs, 7% were to treat superficial injuries or contusions, and 21% were to treat other or unspecified injuries.

Among fractures, approximately 60% were fractures of the extremities while 22% were fractures of the head and neck. Among internal organ injuries, over half (60%) were injuries of the head and neck, including traumatic brain injury, and approximately 35% were injuries of the torso. *Figure 16.*

Median hospital charges and payer source

The median hospital charge for unintentional struck by/against injuries was $19,142 for hospitalizations. Approximately 30% of hospitalization charges to treat unintentional struck by/against injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

Figure 16: Hospitalizations due to unintentional struck by/against injuries, by body region and nature of injury, Nebraska residents, 2009-2013

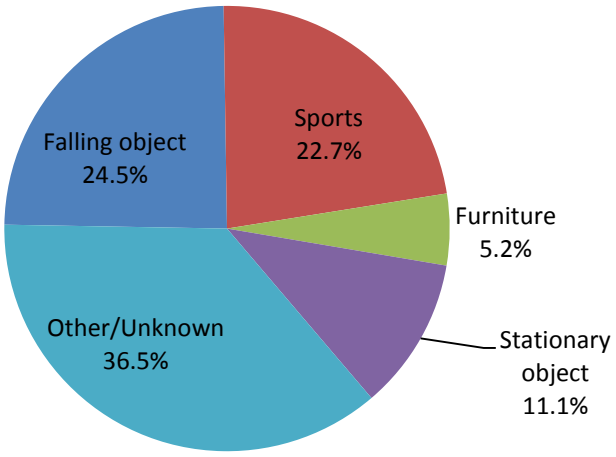


Source: NE hospital discharge data, 2009-2013

Details of cause of injury

Among hospitalizations due to unintentional struck by/against injuries, 23% were sports-related. *Figure 17.*

Figure 17: Hospitalizations due to unintentional struck by/against injuries, by details of cause of injury, Nebraska residents, 2009-2013



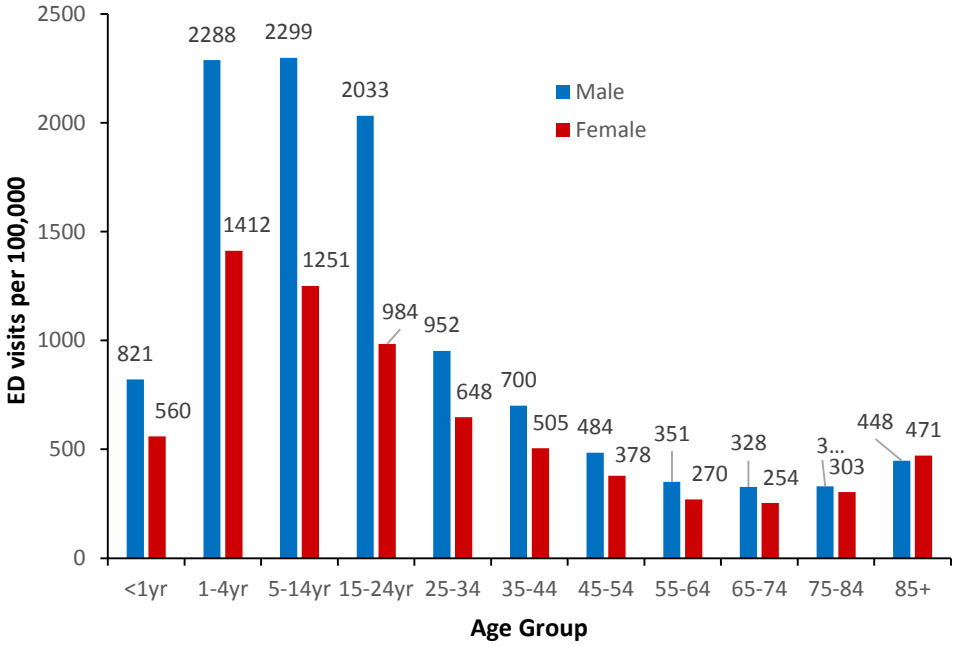
Source: NE hospital discharge data, 2009-2013

Emergency department (ED) visits

Rates

From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to unintentional struck by/against injuries was 916.2 per 100,000 Nebraskans. ED visit rates due to unintentional struck by/against injuries were highest among children and adolescents (1,860 per 100,000 persons aged 1-4 years old; 1,787 per 100,000 persons aged 5-14 years old). Overall, ED visit rates due to unintentional struck by/against injuries were higher for males than for females (1,137 per 100,000 males vs. 687 per 100,000 females). *Figure 18.*

Figure 18: Emergency department (ED) visit rates due to unintentional struck by/against injuries, by age group and gender, Nebraska residents, 2009-2013 (n=82,836)



Source: NE hospital discharge data, 2009-2013

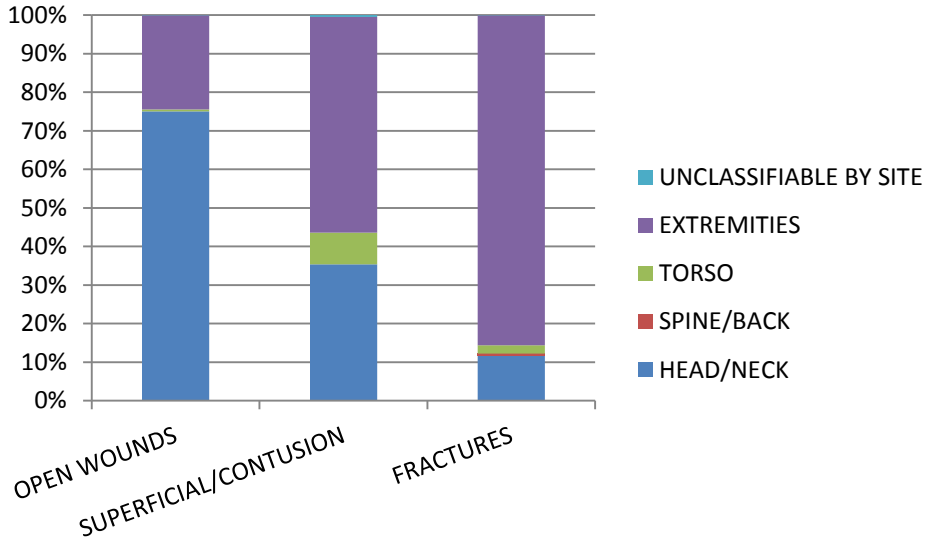
Body region and nature of injury

Approximately 33% of all emergency department (ED) visits for unintentional struck by/against injuries were to treat open wounds, 31% were to treat superficial injuries or contusions, 13% were to treat fractures, and 23% were to treat other or unspecified injuries.

Among open wounds, over three-quarters (75%) were open wounds of the head and neck, while approximately 24% were open wounds of the extremities. Among

superficial or contusion injuries, over half (56%) were injuries of the extremities, and approximately 35%were injuries of the head and neck. *Figure 19.*

Figure 19: Emergency department (ED) visits due to unintentional struck by/against injuries, by body region and nature of injury, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Median hospital charges and payer source

The median hospital charge for unintentional struck by/against injuries was $715 for emergency department (ED) visits. Approximately 23% of ED visit charges to treat unintentional struck by/against injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

Details of cause of injury

Among emergency department (ED) visits due to unintentional struck by/against injuries, approximately 22% were sports-related, 13% involved a stationary object, 10% involved a falling object, 6% involved furniture, and 46% involved other or unknown objects.

UNINTENTIONAL CUTTING/PIERCING

Overview

From 2009 to 2013, unintentional cutting/ piercing was the fourth leading cause of emergency department (ED) visits for injuries among Nebraskans.

Definitions

Unintentional cutting and/or piercing includes injuries caused by cutting and piercing instruments or objects including:

- a powered lawn mower
- other powered hand tools
- powered household appliances and implements
- knives, swords, and daggers
- other hand tools and implements
- hypodermic needles
- other specified cutting and piercing instruments or objects

Deaths

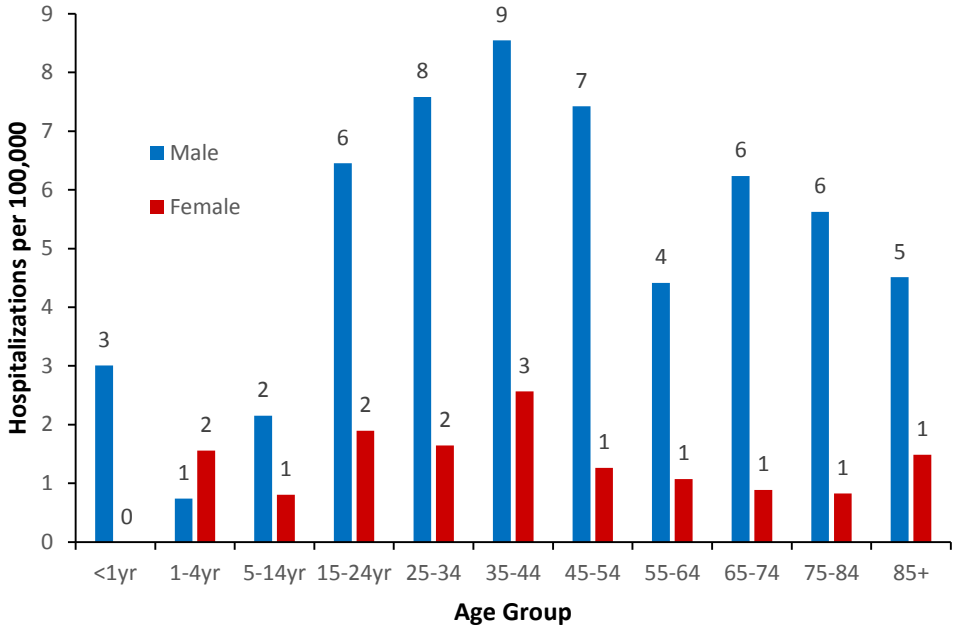
From 2009 to 2013, there were a total of 6 deaths due to unintentional cut/pierce injuries among Nebraskans.

Hospitalizations

Rates

From 2009 to 2013, the age-adjusted hospitalization rate due to unintentional cut/pierce injuries was 3.6 per 100,000 Nebraskans. Hospitalization rates due to unintentional cut/pierce injuries were highest among Nebraska males aged 35-44 years (9 per 100,000 persons). Males had higher hospitalization rates due to cut/pierce injuries than females across all age categories (6 per 100,000 males vs. 1 per 100,000 females). *Figure 20.*

Figure 20: Hospitalization rates due to unintentional cut/pierce injuries, by age group and gender, Nebraska residents, 2009-2013 (n=326)



Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

Approximately 60% of all hospitalizations for unintentional cut/pierce injuries were to treat open wounds, 10% were to treat amputations, 9% were to treat fractures, and 21% were to treat other or unspecified injuries.

Among open wounds, 90% were open wounds of the extremities.

Median hospital charges and payer source

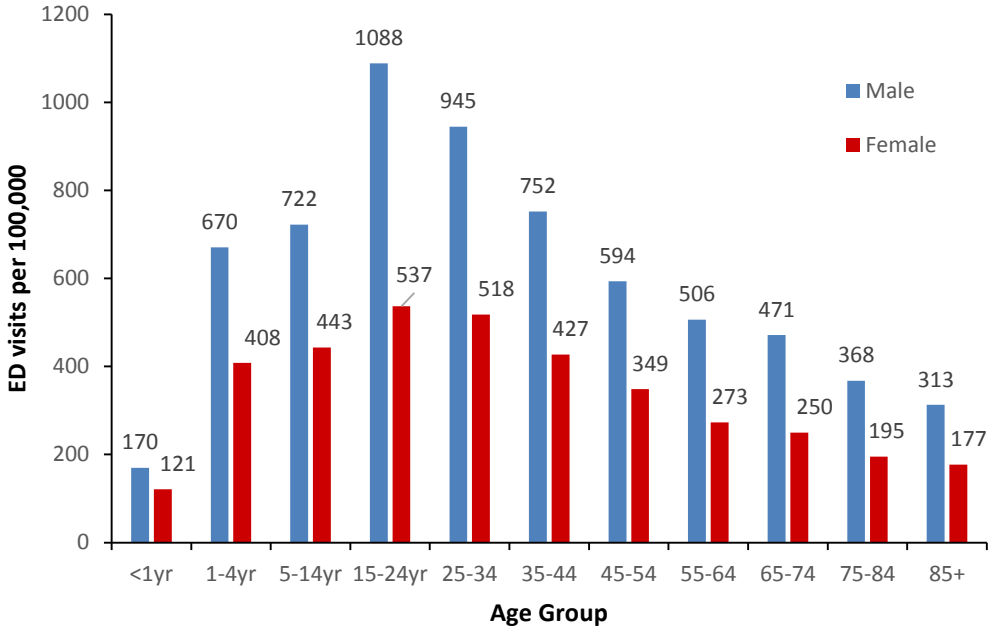
The median hospital charge for unintentional cut/pierce injuries was $17,275 for hospitalizations. Approximately 21% of hospitalization charges to treat unintentional cut/pierce injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

Emergency department (ED) visits

Rates

From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to unintentional cut/pierce injuries was 563.2 per 100,000 Nebraskans. ED visit rates due to unintentional cut/pierce injuries were, overall, higher among males than females (723 per 100,000 males vs. 402 per 100,000 females). Among males, unintentional cut/pierce injuries were highest among 15-24 year olds (1,089 per 100,000 males). *Figure 21.*

Figure 21: Emergency department (ED) visit rates due to unintentional cut/pierce injuries, by age group and gender, Nebraska residents, 2009-2013 (n=50,917)



Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

Approximately 93% of all emergency department (ED) visits for unintentional cut/pierce injuries were to treat open wounds, while the remaining 7% were to treat superficial injuries or contusions, fractures, and other or unspecified injuries.

Among open wounds, approximately 93% were open wounds of the extremities.

Median hospital charges and payer source

The median hospital charge for unintentional cut/pierce injuries was $705 for emergency department (ED) visits. Approximately 20% of ED visit charges to treat unintentional cut/pierce injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

UNINTENTIONAL SUFFOCATION

Overview

From 2009 to 2013, unintentional suffocation was the fourth leading cause of injury death among Nebraskans.

Definitions

Unintentional suffocation includes:

- inhalation and ingestion of food or other object causing obstruction of respiratory tract
- accidental mechanical suffocation, including suffocation in a bed or cradle, by a plastic bag, due to lack of air in closed place, by falling earth or other substance.

Deaths

Rates

From 2009 to 2013, the age-adjusted hospitalization rate due to unintentional suffocation was 2.1 per 100,000 Nebraskans. Deaths due to unintentional suffocation were most common among older adults aged 85 years and older (30 per 100,000 persons). Within this age group, death rates due to unintentional suffocation were considerably higher for males than for females (36 per 100,000 males vs. 27 per 100,000 females). *Figure 22.*

Details of cause of injury

Among deaths due to suffocation, approximately 47% were due to suffocation by an object, 16% were due to suffocation by food, 9% due to suffocation by gastric contents, 7% were due to unintentional hanging/strangulation, 6% occurred in bed, and 15% were due to suffocation by other means.

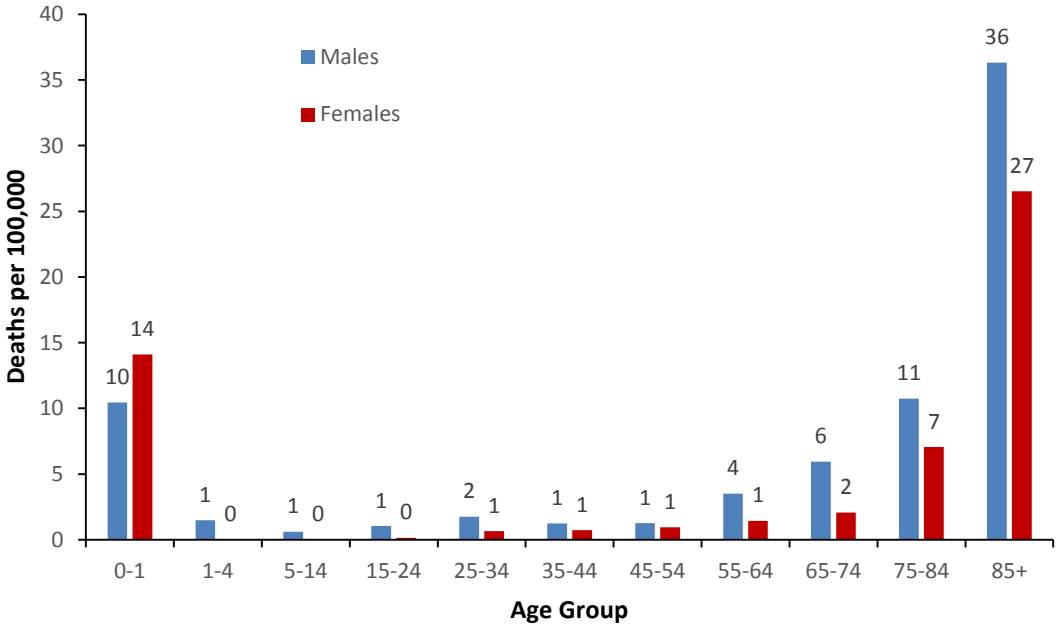
Hospitalizations

Rates

From 2009 to 2013, the age-adjusted hospitalization rate due to unintentional suffocation was 1.6 per 100,000 Nebraskans. Hospitalization rates due to unintentional suffocation were highest among infants (14 per 100,000 persons) and

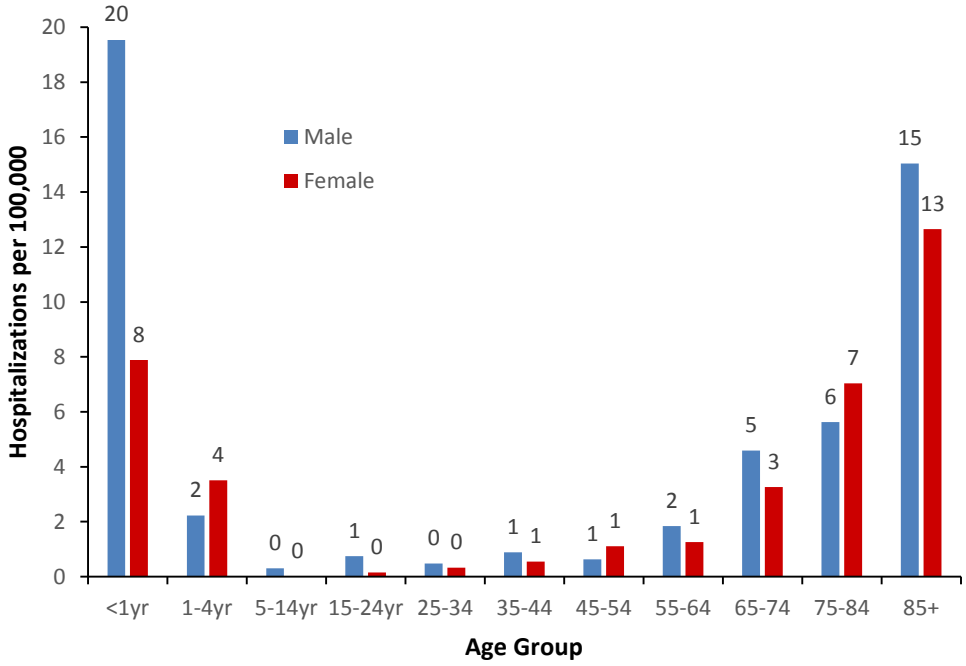
those 85 years and older (13 per 100,000 persons). Among children and adolescents, male infants less than 1 year old had the highest hospitalization rates due to unintentional suffocation (20 per 100,000 persons). *Figure 23.*

Figure 22: Death rates due to unintentional suffocation, by age group and gender, Nebraska residents, 2009-2013 (n=220)



Source: NE Vital Statistics, 2009-2013

Figure 23: Hospitalization rates due to unintentional suffocation, by age group and gender, Nebraska residents, 2009-2013 (n=161)



Source: NE hospital discharge data, 2009-2013

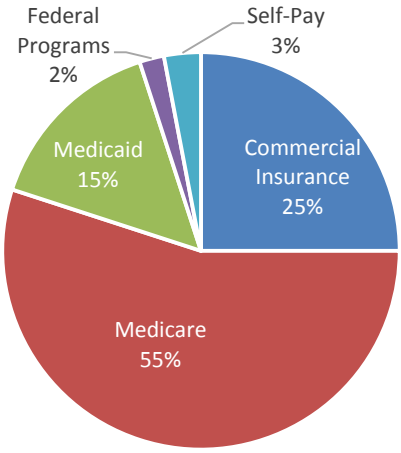
Body region and nature of injury

Approximately 92% of all hospitalizations for unintentional suffocation were to treat system wide and late effects, while the remaining 8% were to treat fractures and other or unspecified injuries.

Median hospital charges and payer source

The median hospital charge for injuries due to unintentional suffocation was $16,743 for hospitalizations. Approximately 70% of hospitalization charges to treat injuries caused by unintentional suffocation were paid for by Medicare and Medicaid. *Figure 24.*

Figure 24: Hospitalizations due to unintentional suffocation, by payer source, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Details of cause of injury

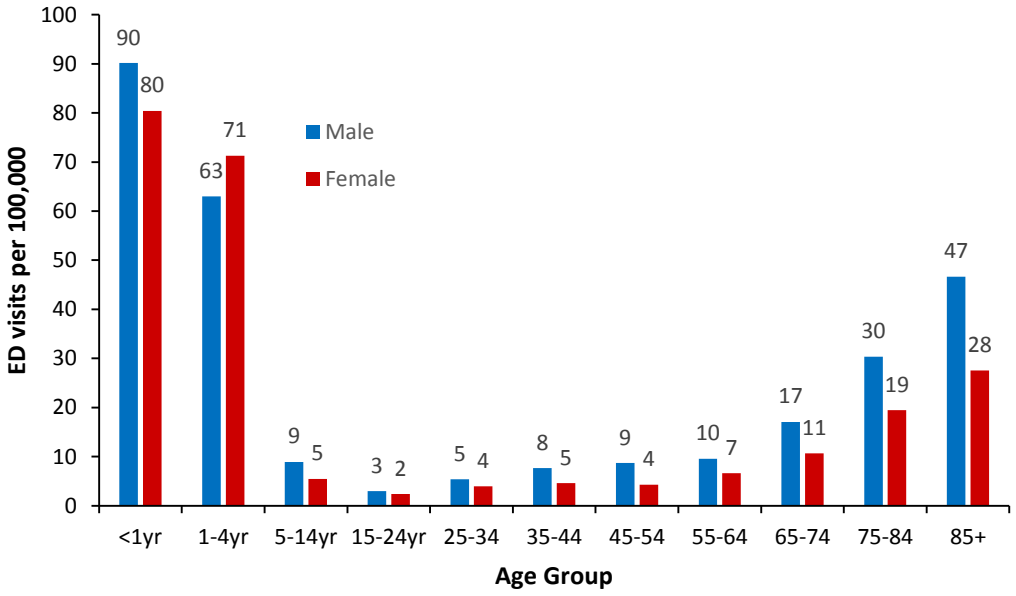
Among hospitalizations due to suffocation, approximately 40% were due to suffocation by an object, 56% were due to suffocation by food, and the remaining 4% were due to suffocation by other means.

Emergency department (ED) visits

Rates

From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to unintentional suffocation was 12.0 per 100,000 Nebraskans. ED visit rates due to unintentional suffocation were highest for infants less than 1 year old (85 per 100,000 children) and children ages 1-4 years old (67 per 100,000 children). For infants, ED visit rates due to unintentional suffocation were higher for males than for females (90 per 100,000 infants vs. 80 per 100,000 infants). *Figure 25.*

Figure 25: Emergency department (ED) visit rates due to unintentional suffocation, by age group and gender, Nebraska residents, 2009-2013 (n=1,145)



Source: NE hospital discharge data, 2009-2013

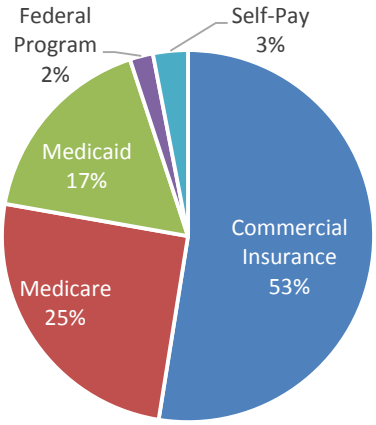
Body region and nature of injury

Approximately 97% of all ED visits for unintentional suffocation were to treat system wide and late effects, while 1% were to treat superficial injuries or contusions, and 2% were to treat other or unspecified injuries.

Median hospital charges and payer source

The median hospital charge for injuries due to unintentional suffocation was $686 for emergency department (ED) visits. Approximately 42% of ED visit charges to treat injuries caused by unintentional suffocation were paid for by Medicare and Medicaid. *Figure 26.*

Figure 26: Emergency department (ED) visits due to unintentional suffocation, by payer source, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Details of cause of injury

Among emergency department (ED) visits due to suffocation, approximately 55% were due to suffocation by food, 44% were due to suffocation by an object, and the remaining 1% were due to mechanical suffocation or suffocation by other means.

UNINTENTIONAL DROWNING

Overview

In 2009 to 2013, unintentional drowning was the second leading cause of injury death for Nebraska children aged 1-4 years old and was among the top five leading causes of injury death for children aged 0-14 years old.

Definitions

Drowning can be classified into two categories:

- Boat-related drowning, including those that occur as a result of submersion of a boat or other watercraft as well as those that occur when someone falls from or is washed overboard from a boat
- Non-boat-related drowning, which might occur during recreational activities (e.g. water-skiing, diving, swimming, playing in or near irrigation ditches, and other water-based recreation), in swimming pools, or in bathtubs.

In Nebraska, most cases that require hospital treatment are due to non-boat-related drowning.

Deaths

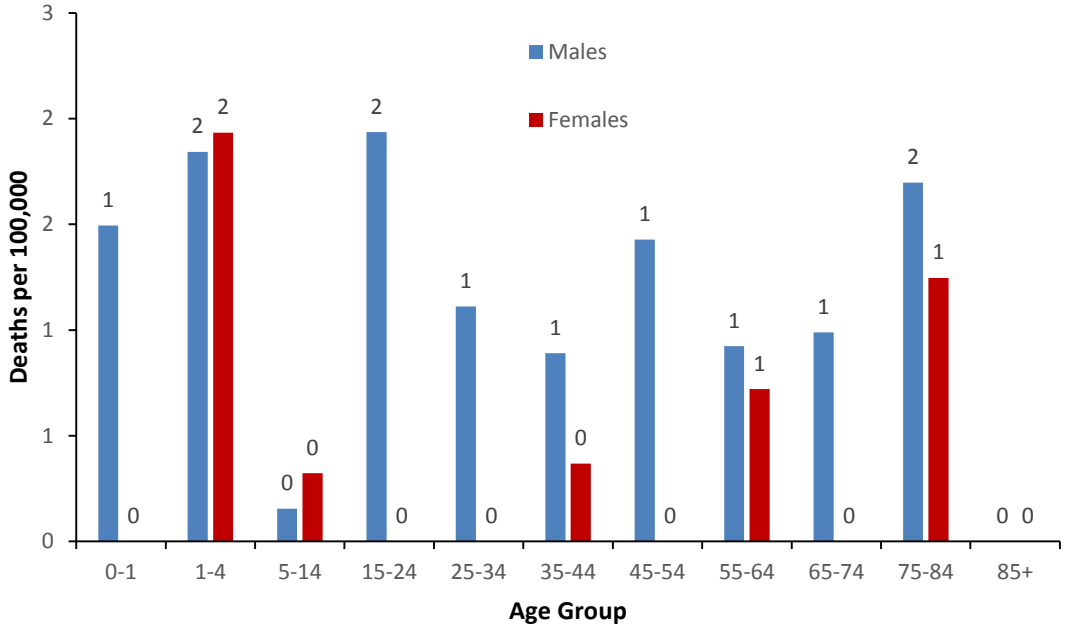
Rates

From 2009 to 2013, there were a total of 68 deaths due to drowning among Nebraskans. Overall, deaths due to unintentional drowning were relatively uncommon among Nebraska residents (less than 1 death per 100,000 persons). Deaths rates due to drowning were slightly higher for males compared to females (1.1 per 100,000 males vs. 0.3 per 100,000 females). *Figure 32.*

Details of cause of injury

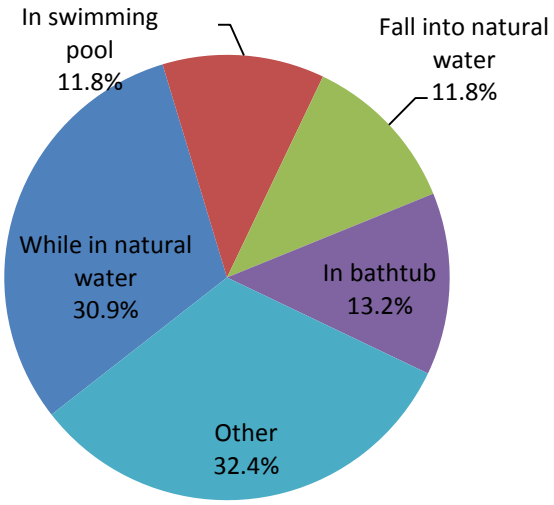
Among deaths due to drowning, approximately 43% occurred while in natural water. *Figure 33.*

Figure 32: Death rates due to unintentional drowning, by age group and gender, Nebraska residents, 2009-2013 (n=68)



Source: NE Vital Statistics, 2009-2013

Figure 33: Deaths due to unintentional drowning, by details of cause of injury, Nebraska residents, 2009-2013



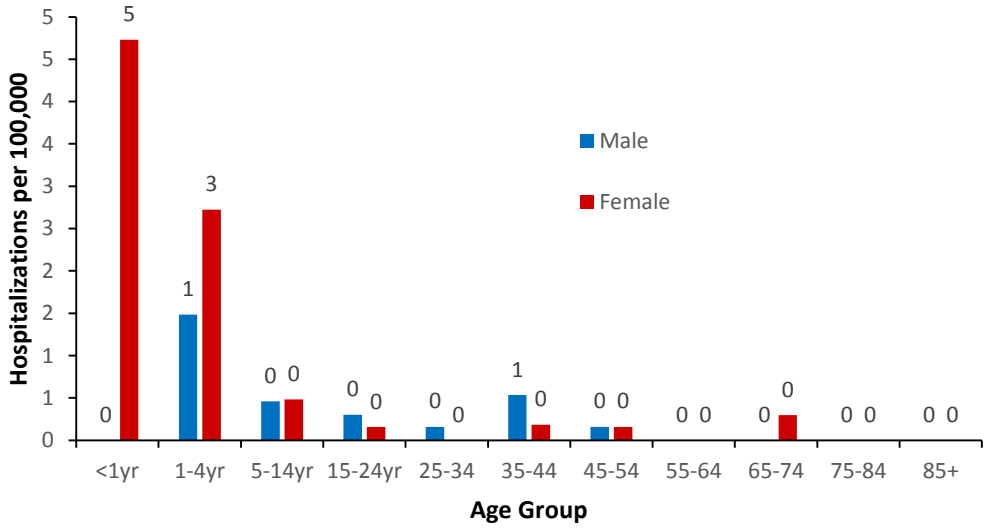
Source: NE Vital Statistics, 2009-2013

Hospitalizations

Rates

From 2009 to 2013, hospitalization rates due to unintentional drowning were very low across all age groups of Nebraskans, with the highest rates found among infants aged less than 1 year old (2 per 100,000 infants) and children aged 1-4 years old (2 per 100,000 children). *Figure 34.*

Figure 34: Hospitalization rates due to unintentional drowning, by age group and gender, Nebraska residents, 2009-2013 (n=31)



Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

Approximately 85% of all hospitalizations for unintentional drowning were to treat system wide and late effects and 15% were to treat fractures and internal organ injuries.

Median hospital charges and payer source

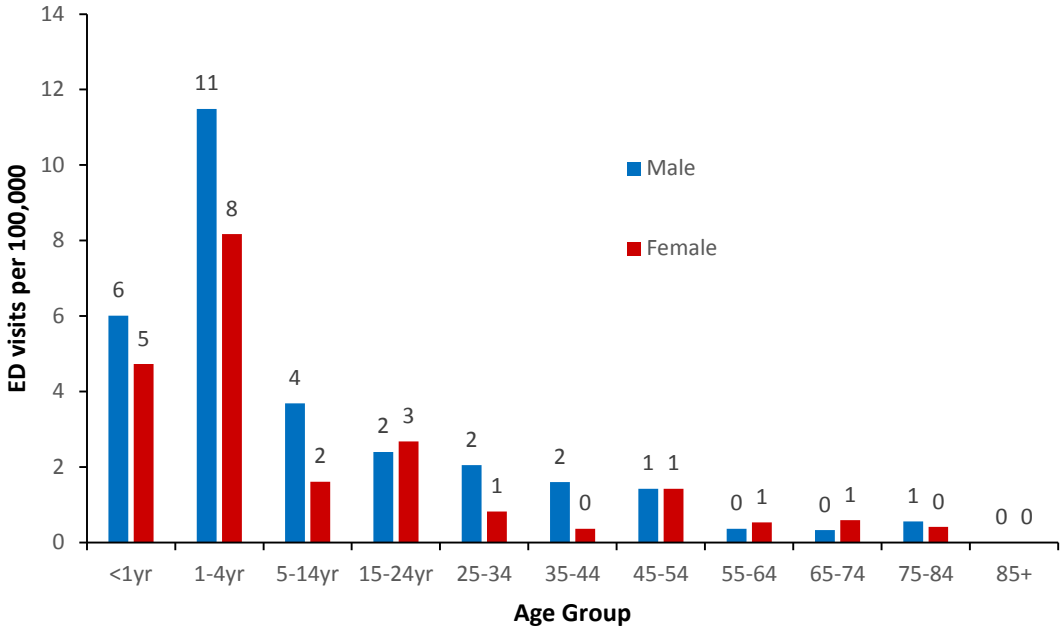
The median hospital charge for unintentional drowning was $17,981 for hospitalizations. Approximately 26% of hospitalization charges to treat unintentional drowning were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

Emergency department (ED) visits

Rates

From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to unintentional drowning was 2.0 per 100,000 Nebraskans. ED visit rates due to unintentional drowning were highest among children aged 1-4 years (10 per 100,000 children) and infants aged less than 1 year old (5 per 100,000 infants). *Figure 35.*

Figure 35: Emergency department (ED) visit rates due to unintentional drowning, by age group and gender, Nebraska residents, 2009-2013 (n=183)



Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

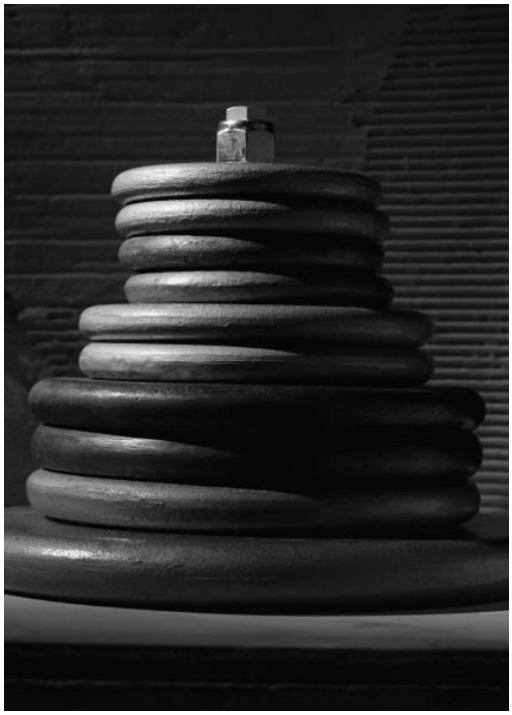
Approximately 63% of all emergency department (ED) visits for unintentional drowning were to treat system wide and late effects, 10% were to treat sprains and strains, 7% were to treat fractures, and 20% were to treat other or unspecified injuries.

Among sprains and strains, 80% were of the extremities.

Median hospital charges and payer source

The median hospital charge for unintentional drowning was $1,553 for emergency department (ED) visits. Approximately 19% of ED visit charges to treat unintentional drowning were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

OVEREXERTION



Overview

Definitions

Overexertion includes:
- excessive physical exercise
- overexertion from lifting, pulling and pushing
- strenuous movements in recreational and other activities

Deaths

There were 2 deaths due to overexertion reported for Nebraskans from 2009 to 2013.

Hospitalizations

Rates

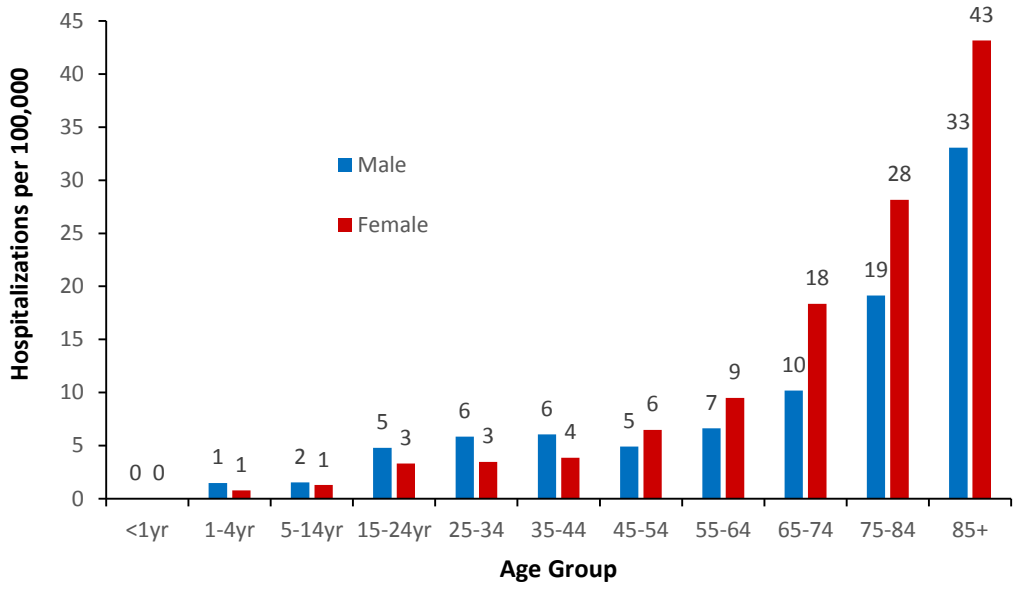
From 2009 to 2013, the age-adjusted hospitalization rate due to overexertion was 6.4 per 100,000 Nebraskans. Hospitalization rates due to overexertion were highest among Nebraska adults aged 85 years and older (40 per 100,000 persons). Among adults aged 45 years and older, hospitalization rates due to overexertion were higher for females than for males. This difference was especially pronounced among adults aged 85 years and older (43 per 100,000 females vs. 33 per 100,000 males). *Figure 36.*

Body region and nature of injury

Approximately 65% of all hospitalizations for overexertion were to treat fractures, 24% were to treat sprains and strains, 4% were to treat dislocations, and 6% were to treat other or unspecified injuries.

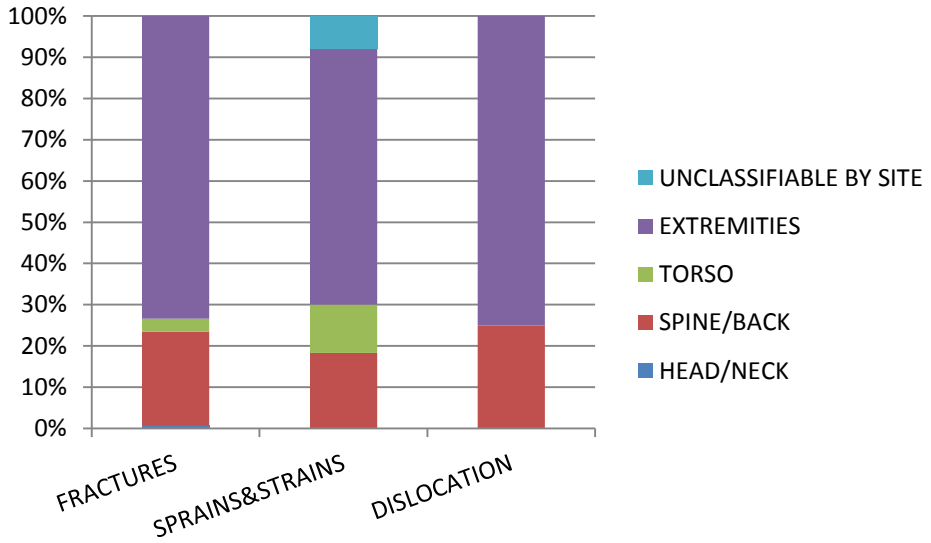
Among fractures, approximately 73% were fractures of the extremities. *Figure 37.*

Figure 36: Hospitalization rates due to overexertion, by age group and gender, Nebraska residents, 2009-2013 (n=626)



Source: NE hospital discharge data, 2009-2013

Figure 37: Hospitalizations due to overexertion, by body region and nature of injury, Nebraska residents, 2009-2013

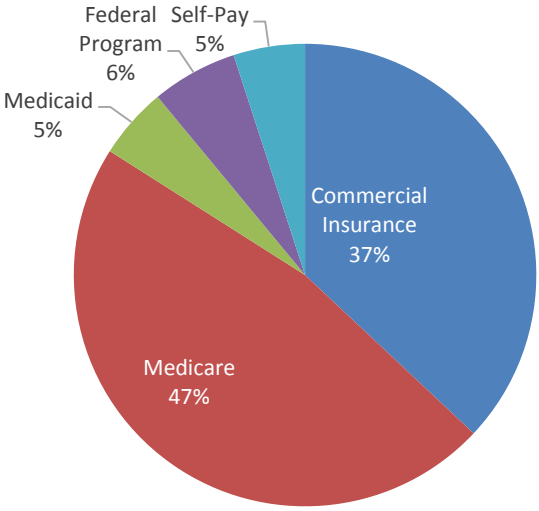


Source: NE hospital discharge data, 2009-2013

Median hospital charges and payer source

The median hospital charge for overexertion was $18,361 for hospitalizations. Approximately 52% of hospitalization charges to treat overexertion were paid for by Medicare and Medicaid. *Figure 38.*

Figure 38: Hospitalizations due to overexertion, by payer source, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Emergency department (ED) visits

Rates

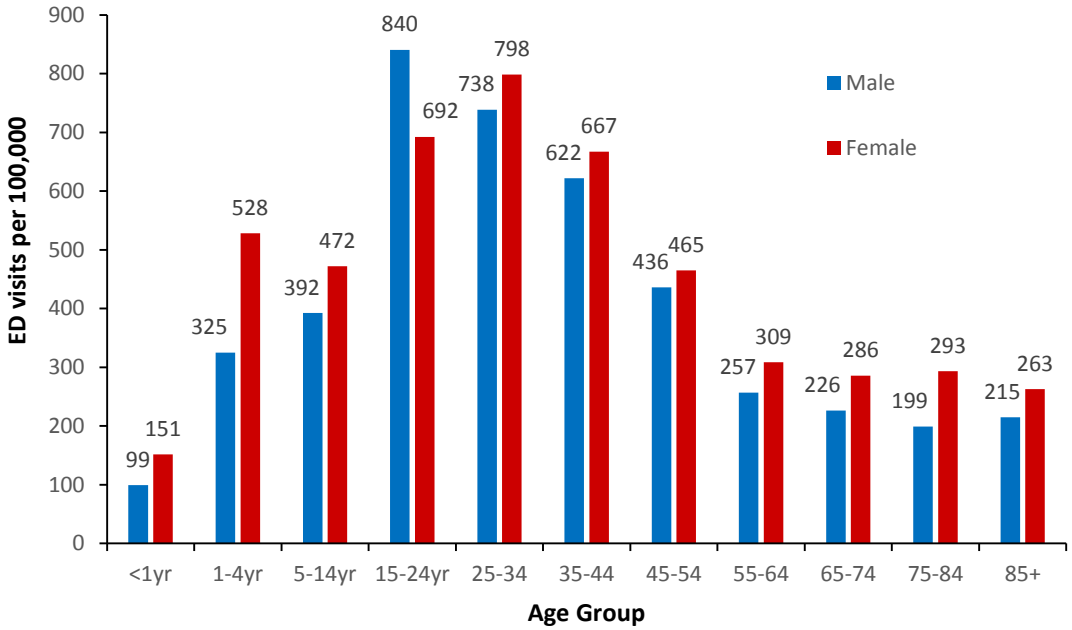
From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to overexertion was 520.9 per 100,000 Nebraskans. ED visit rates for overexertion were highest among adolescents and young adults aged 15-24 years olds (768 per 100,000 persons). Within this age category, ED visit rates for overexertion injuries were higher for males than for females (841 per 100,000 males vs. 692 per 100,000 females). *Figure 39.*

Body region and nature of injury

Approximately 73% of all emergency department (ED) visits for overexertion were to treat sprains and strains, 9% were to treat fractures, 8% were to treat dislocations, and 11% were to treat other or unspecified injuries.

Among sprains and strains, approximately 69% were sprains and strains of the extremities, while 18% were sprains and strains of the spine and back.

Figure 39: Emergency department (ED) visit rates due to overexertion, by age group and gender, Nebraska residents, 2009-2013 (n=46,552)



Source: NE hospital discharge data, 2009-2013

Median hospital charges and payer source

The median hospital charge for overexertion was $776 for emergency department (ED) visits. Approximately 23% of ED visit charges to treat overexertion were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

SUICIDE AND SELF-INFLICTED INJURY

Overview

From 2009 to 2013, suicide was the leading cause of injury death for Nebraskans aged 25-64 years old, and the second leading cause of injury death for all age groups combined.

Definitions

Suicide and self-inflicted injury include:

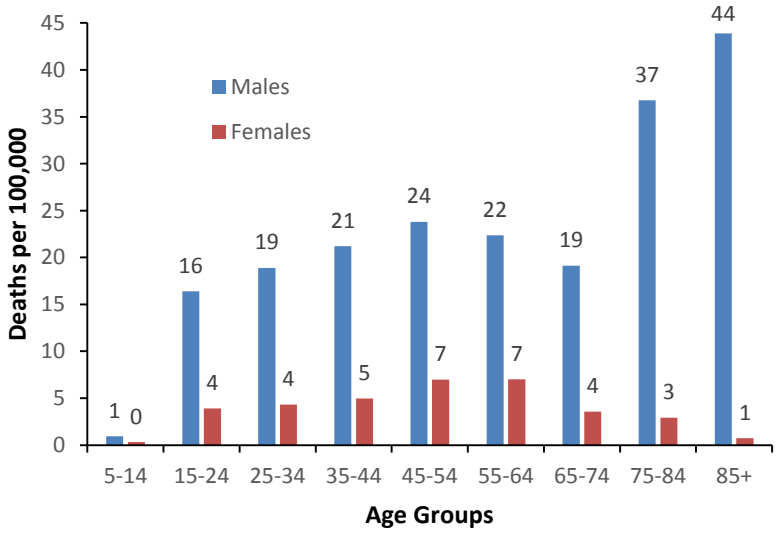
- injuries in suicide and attempted suicide
- self-inflicted injuries specified as intentional

Deaths

Rates

From 2009 to 2013, the age-adjusted suicide rate was 10 deaths per 100,000 Nebraskans. The suicide death rate was highest among adults aged 75-84 (about 17 deaths per 100,000 persons). Overall, suicide rates were higher among males than females (17.2 per 100,000 males vs. 3.9 per 100,000 females). *Figure 40.*

Figure 40: Suicide death rates, by age group and gender, Nebraska residents, 2009-2013 (n=960)

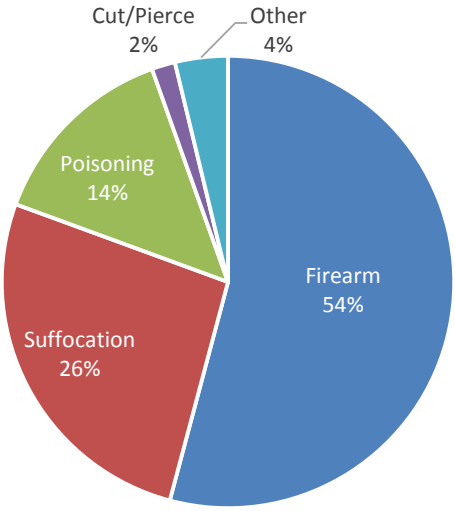


Source: NE Vital Statistics, 2009-2013

Method used

Approximately 54% of all suicide deaths were caused by firearm, while 26% were caused by suffocation, 14% by poisoning, and 6% by other means. *Figure 41.*

Figure 41: Suicide deaths, by method used, Nebraska residents, 2009-2013



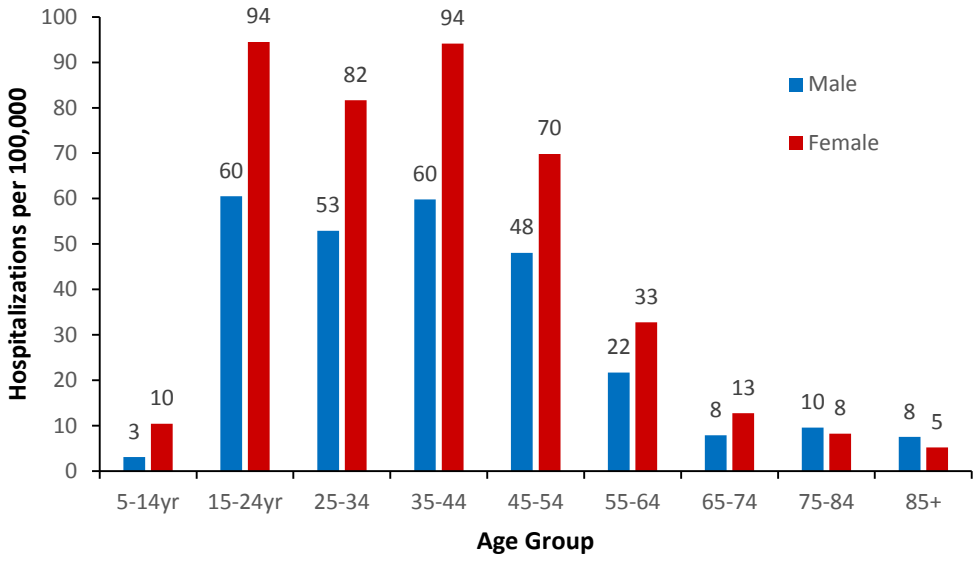
Source: NE Vital Statistics, 2009-2013

Hospitalizations

Rates

From 2009 to 2013, the age-adjusted hospitalization rate due to self-inflicted injury was 44.7 per 100,000 Nebraskans. Hospitalization rates due to self-inflicted injury were highest among adolescents and adults aged 15-44 years old (77 per 100,000 persons aged 15-24 years old; 67 per 100,000 persons aged 25-34 year olds; and 76 per 100,000 persons aged 35-44 years old). Overall, hospitalization rates due to self-inflicted injury were higher among females than males (55 per 100,000 females vs. 35 per 100,000 males). *Figure 42.*

Figure 42: Hospitalization rates due to self-inflicted injury, by age group and gender, Nebraska residents, 2009-2013 (n=3,930)

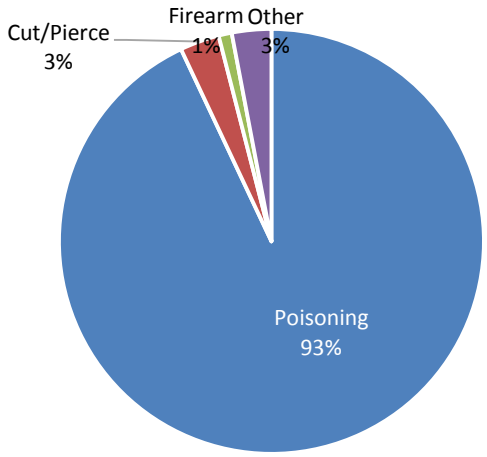


Source: NE hospital discharge data, 2009-2013

Method used

Approximately 93% of all self-inflicted injuries resulting in hospitalization were caused by poisoning, while 3% were caused by cut/pierce, 1% by firearm, and 3% by other means. *Figure 43.*

Figure 43: Hospitalizations due to self-inflicted injury, by method used, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

Approximately 95% of all hospitalizations for self-inflicted injuries were to treat system wide and late effects, 2% were to treat open wounds, 1% were to treat injuries of the internal organs, 1% were to treat fractures and 1% were to treat other or unspecified injuries.

Median hospital charges and payer source

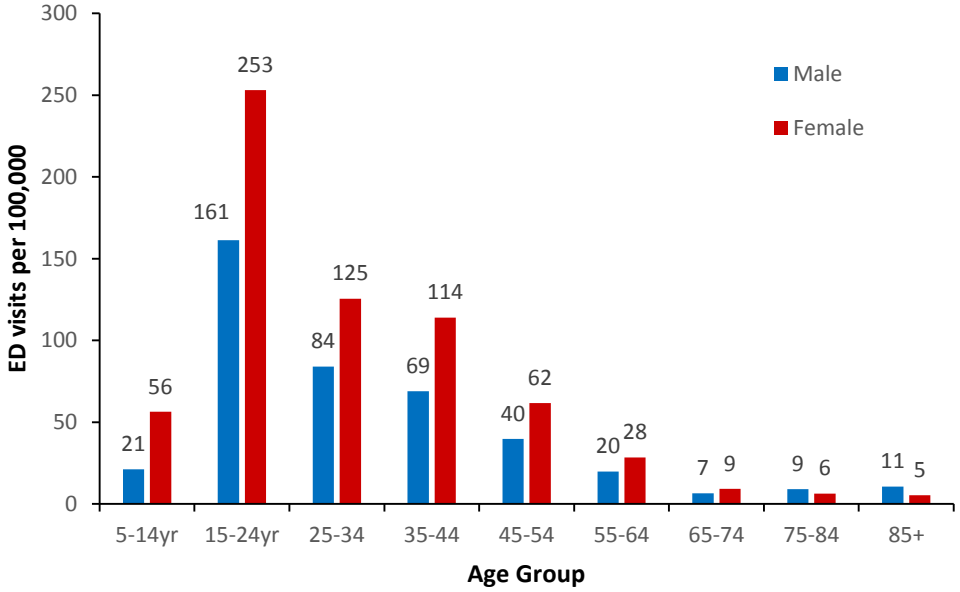
The median hospital charge for self-inflicted injuries was $10,584 for hospitalizations. Approximately 30% of hospitalization charges to treat self-inflicted injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

Emergency department (ED) visits

Rates

From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to self-inflicted injury was 73.1 per 100,000 Nebraskans. ED visit rates due to self-inflicted injury were highest among adolescents and young adults aged 15-24 years old (206 per 100,000 persons). Overall, ED visit rates due to self-inflicted injury were higher among females than males (91 per 100,000 females vs. 56 per 100,000 males). *Figure 44.*

Figure 44: Emergency department (ED) visit rates due to self-inflicted injury, by age group and gender, Nebraska residents, 2009-2013 (n=6,476)

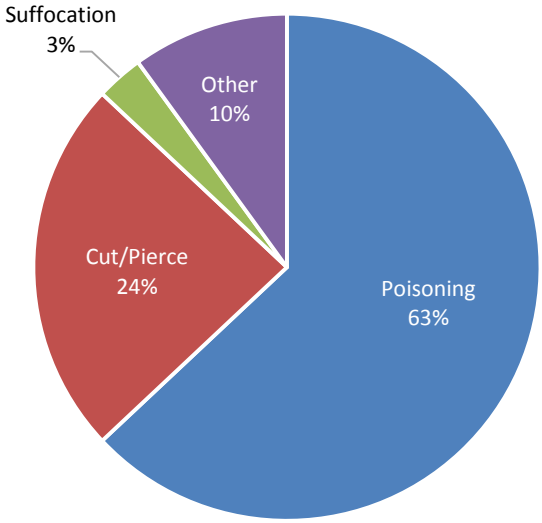


Source: NE hospital discharge data, 2009-2013

Method used

Approximately 63% of all self-inflicted injuries resulting in emergency department (ED) visits were caused by poisoning, while 24% were caused by cut/pierce, 3% by suffocation, and 10% by other means. *Figure 45.*

Figure 45: Emergency department (ED) visits due to self-inflicted injury, by method used, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

Approximately 70% of all emergency department (ED) visits for self-inflicted injuries were to treat system wide and late effects, 19% were to treat open wounds, 6% were to treat superficial injuries or contusions, and 5% were to treat other or unspecified injuries.

Median hospital charges and payer source

The median hospital charge for self-inflicted injuries was $2,430 for emergency department (ED) visits. Approximately 26% of ED visit charges to treat self-inflicted injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

HOMICIDE AND ASSAULT

Overview

From 2009 to 2013, homicide was the fourth leading cause of death for Nebraskans aged 1-4 years old and the third leading cause of death for Nebraska adolescents and young adults aged 15-24 years old.

Definitions

Homicide and assault includes injuries inflicted by another person with intent to injure or kill, by any means, such as:

- fight, brawl, or rape
- assault by corrosive or caustic substance
- assault by poisoning
- assault by drowning
- assault by cutting and piercing instrument
- child and adult abuse
- criminal neglect

Deaths

Rates

From 2009 to 2013, the age-adjusted homicide rate in Nebraska was 3 deaths per 100,000 persons. Homicide deaths were most common among 15-34 years (6.5 per 100,000 persons for 15-24 year olds and 6.4 per 100,000 persons for 25-34 year olds). In addition, homicide deaths were more common among males than females (5.0 per 100,000 males vs. 1.6 per 100,000 females). *Figure 46.*

Method used

Approximately 67% of all homicide deaths were caused by firearm, while 14% were caused by cut/pierce, 3% by suffocation, 2% by struck by/against, and 14% by other means. *Figure 47.*

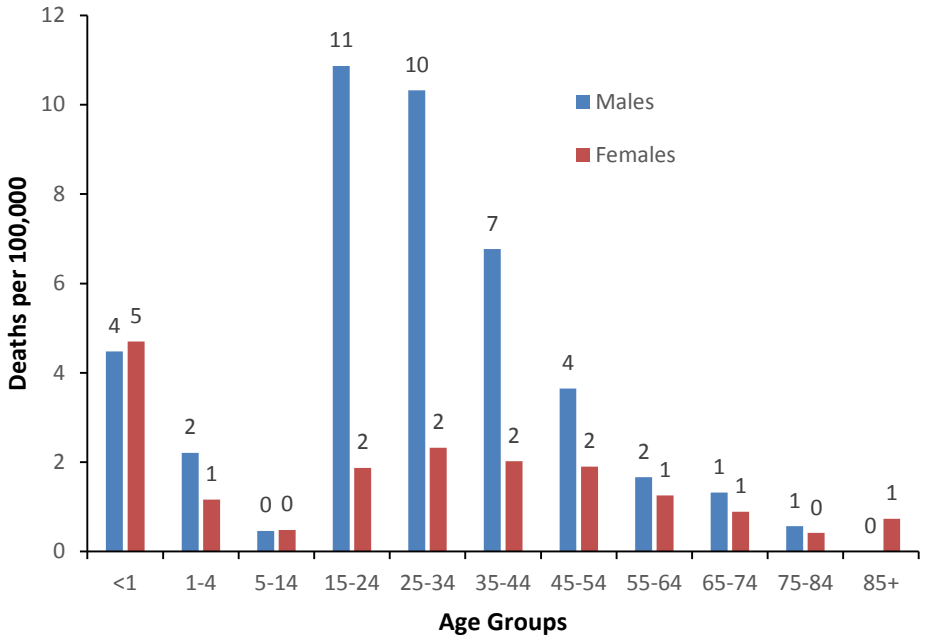
Hospitalizations

Rates

From 2009 to 2013, the age-adjusted hospitalization rate due to assault injuries was 17.0 per 100,000 persons. Hospitalization rates due to assault injuries were highest among male adolescents and young adults aged 15-24 years (64 per 100,000

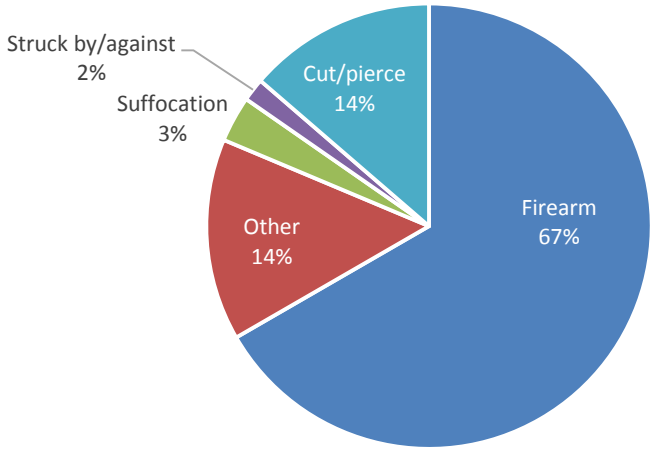
persons). Overall, hospitalizations due to assault injuries were more common among males than females (28 per 100,000 males vs. 6 per 100,000 females). *Figure 48.*

Figure 46: Homicide death rates, by age group and gender, Nebraska residents, 2009-2013 (n=295)



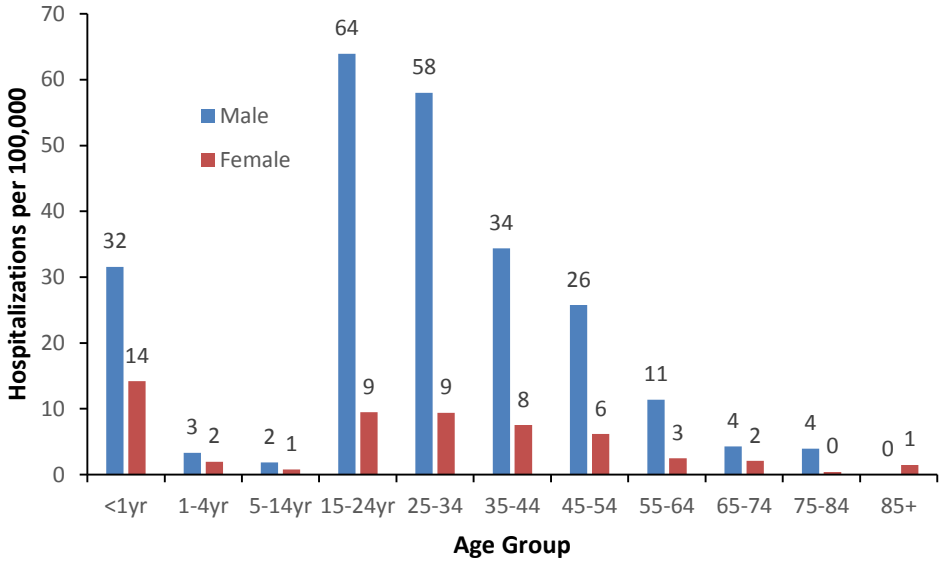
Source: NE Vital Statistics, 2009-2013

Figure 47: Homicide deaths, by method used, Nebraska residents, 2009-2013



Source: NE Vital Statistics, 2009-2013

Figure 48: Hospitalization rates due to assault injuries, by age group and gender, Nebraska residents, 2009-2013 (n=1,513)

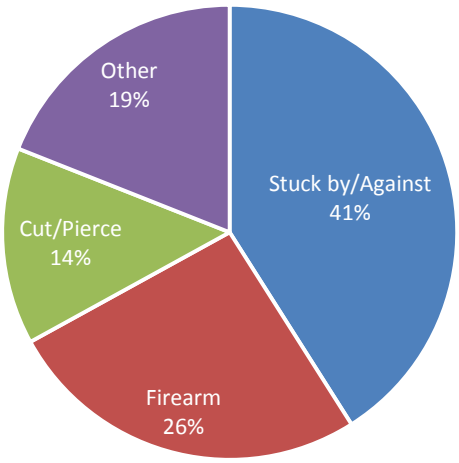


Source: NE hospital discharge data, 2009-2013

Method used

Approximately 41% of all assault injuries resulting in hospitalization were caused by struck by/against, 26% were caused by firearm, 14% were caused by cut/pierce, and 19% were caused by other means. *Figure 49.*

Figure 49: Hospitalizations due to assault injury, by method used, Nebraska residents, 2009-2013



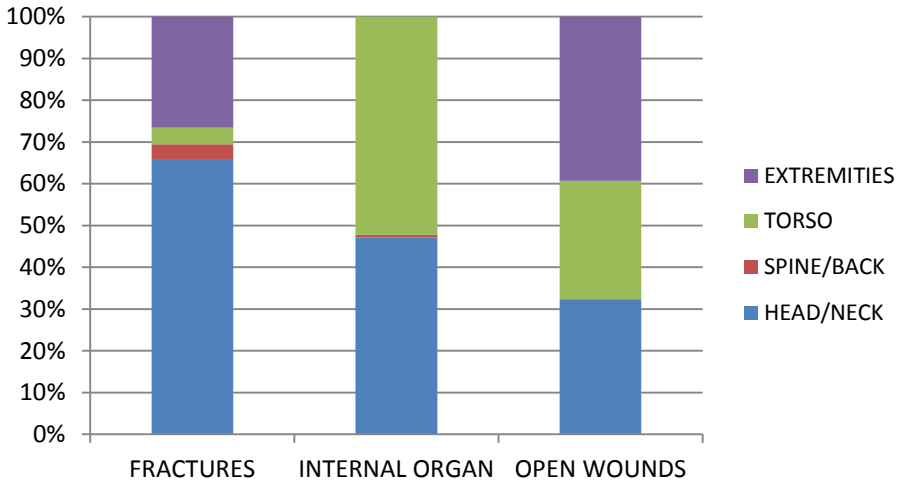
Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

Approximately 43% of all hospitalizations for assault injuries were to treat fractures, 32% were to treat injuries of the internal organs, 17% were to treat open wounds, and 8% were to treat other or unspecified injuries.

Among fractures, 66% were fractures of the head and neck and 27% were fractures of the extremities. Among internal organ injuries, 52% were injuries of the torso and 47% were injuries of the head and neck. *Figure 50.*

Figure 50: Hospitalizations due to assault injuries, by body region and nature of injury, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Median hospital charges and payer source

The median hospital charge for assault injuries was $31,935 for hospitalizations. Approximately 22% of hospitalization charges to treat assault injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

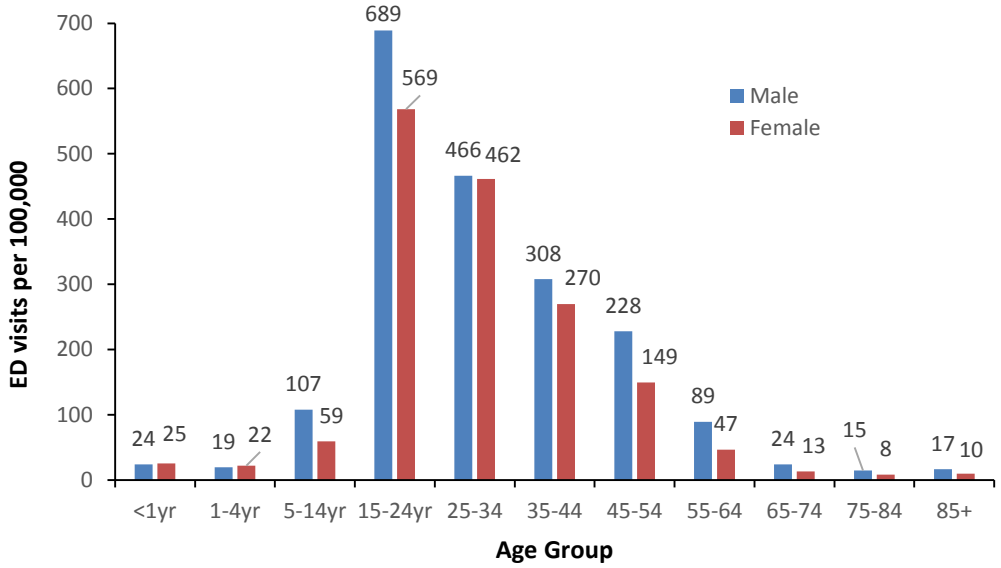
Emergency department (ED) visits

Rates

From 2009 to 2013, the age-adjusted emergency department (ED) visit rate due to assault injuries was 244.2 per 100,000 persons. ED visit rates due to assault injury were highest among adolescents and young adults 15-24 years (630 per 100,000

persons). Overall, ED visits due to assault injuries were slightly more common among males than females (267 per 100,000 vs. 221 per 100,000).*Figure 51.*

Figure 51: Emergency department (ED) visit rates due to assault injury, by age group and gender, Nebraska residents, 2009-2013 (n=21,675)

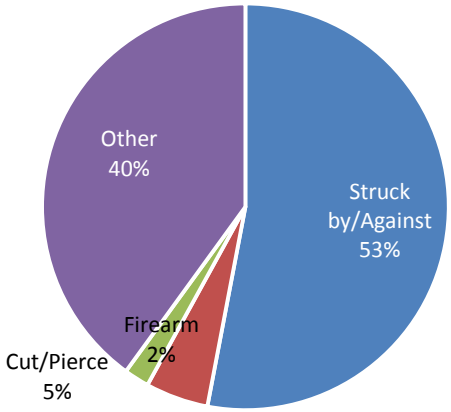


Source: NE hospital discharge data, 2009-2013

Method used

Approximately 53% of all assault injuries resulting in an emergency department (ED) visit were caused by struck by/against, 5% were caused by cut/pierce, 2% were caused by firearm, and 40% were caused by other means. *Figure 52.*

Figure 52: Emergency department (ED) visits due to assault injury, by method used, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

Body region and nature of injury

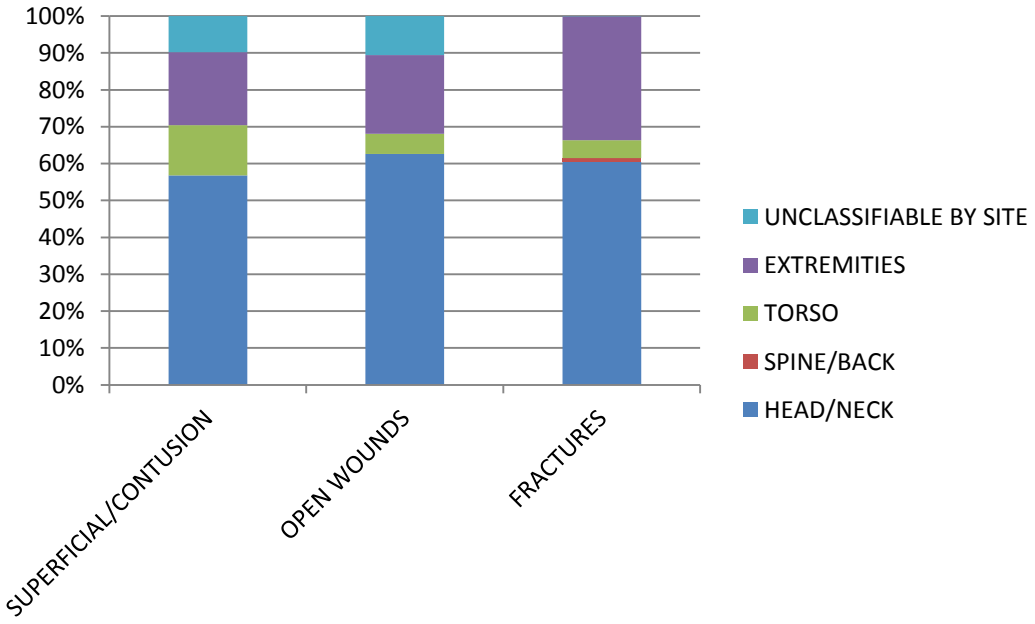
Approximately 34% of all emergency department (ED) visits for assault injuries were to treat superficial injuries and contusions, 28% were to treat open wounds, 12% were to treat fractures, and 26% were to treat other or unspecified injuries.

Among superficial injuries and contusions, nearly 57% were injuries of the head and neck and approximately 20% were injuries of the extremities. Among open wounds, nearly 70% were open wounds of the head and neck and 23% were open wounds of the extremities. *Figure 53.*

Median hospital charges and payer source

The median hospital charge for assault injuries was $1,417 for emergency department (ED) visits. Approximately 23% of ED visit charges to treat assault injuries were paid for by Medicare and Medicaid, with the remaining charges paid for by commercial insurance, federal programs, or out-of-pocket (i.e. self-pay).

Figure 53: Emergency department (ED) visits due to assault injuries, by body region and nature of injury, Nebraska residents, 2009-2013



Source: NE hospital discharge data, 2009-2013

SPECIAL SUPPLEMENT

OCCUPATIONAL INJURIES

Overview

From 2009 to 2013, more than one-third of workplace deaths were among workers employed in the agriculture, forestry, fishing, and hunting industry.

Definitions

Deaths: Fatalities due to traumatic work-related incidents, including incidents where the worker was on the employer's premises to work, the person was working, or the event or exposure was related to the person's work or status as an employee.

Occupational hospitalizations: Injuries among Nebraska residents aged 16 years or older that resulted in an inpatient hospitalization in a Nebraska acute care hospital and the treatment was paid by workers' compensation.

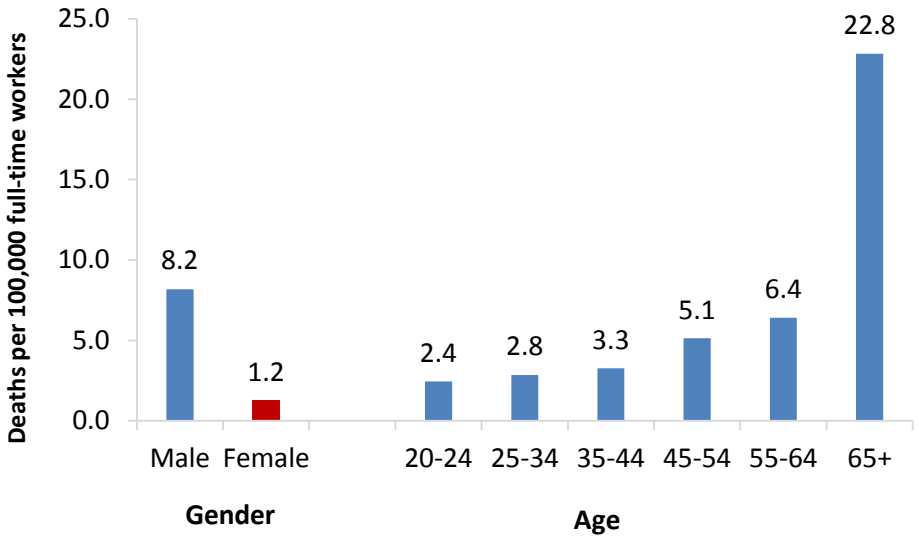
Occupational injuries: Non-fatal injuries among workers aged 16 years or older that involve lost work time, restriction of work or motion, loss of consciousness, transfer to another job, or medical treatment other than first aid.

Deaths

From 2009 to 2013, the average crude fatality rate was 5.2 per 100,000 full-time workers in Nebraska. Rates were highest among males (8.2 per 100,000 full-time workers) and workers aged 65 years and older (22.8 per 100,000 full-time workers). *Figure 54.*

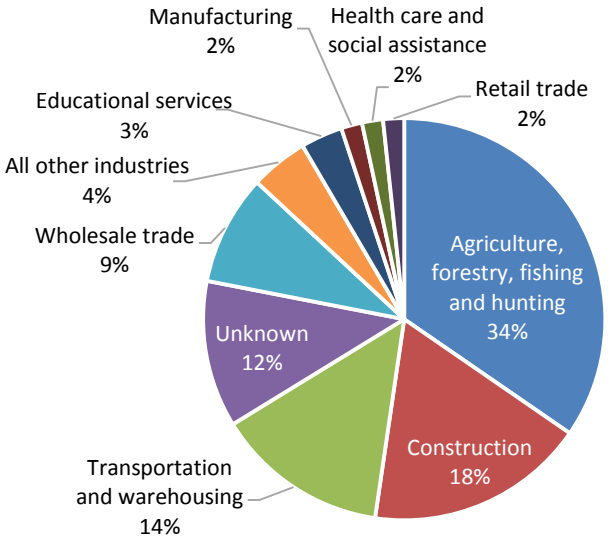
Approximately 34% of deaths were among workers employed in the agriculture, forestry, fishing, and hunting industry, 18% were in the construction industry, 14% were in the transportation and warehousing industry, and 9% were in wholesale trade industry. *Figure 55.*

Figure 54: Fatal occupational injury crude rates by gender and age group, Nebraska, 2009-2013 (n=237)



Source: Bureau of Labor Statistics (BLS) Census of Fatal Occupational Injuries, 2009-2013 (numerator); BLS Current Population Survey (denominator)

Figure 55: Percent of fatal occupational injuries, by industry, Nebraska, 2009-2013 (n=237)

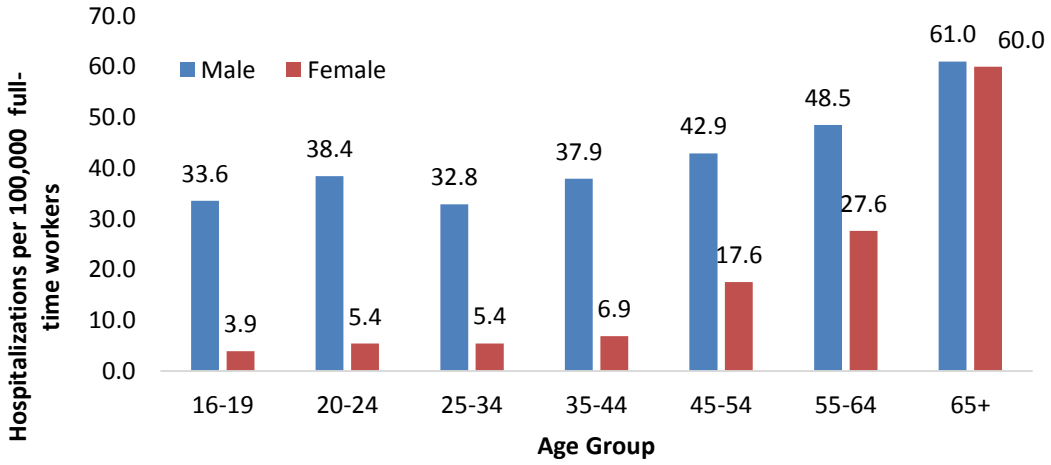


Source: BLS Census of Fatal Occupational Injuries, 2009-2013

Hospitalizations

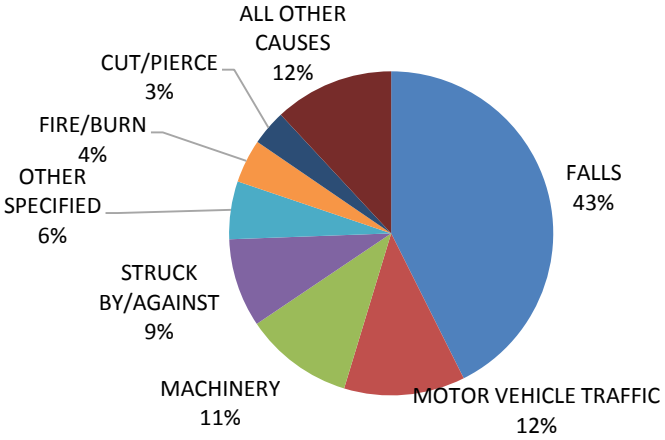
The crude rate of hospitalizations due to occupational injuries was 29.5 per 100,000 full-time workers in Nebraska from 2009 to 2013. Overall, adults aged 65 years and older were most likely to be discharged from a hospital due to an occupational injury. Occupational injury hospitalization rates were considerably higher among males than females, except for the 65 years and older age group. *Figure 56.* Falls were the most common cause of injury resulting in an occupational injury hospitalization. *Figure 57*.

Figure 56: Hospitalization crude rates due to occupational injuries, by age group and gender, Nebraska residents, 2009-2013 (n=1,356)



Source: NE hospital discharge data 2009-2013 (numerator); BLS Current Population Survey (denominator)

Figure 57: Hospitalizations due to occupational injuries, by cause of injury, Nebraska residents, 2009-2013 (n=1,356)

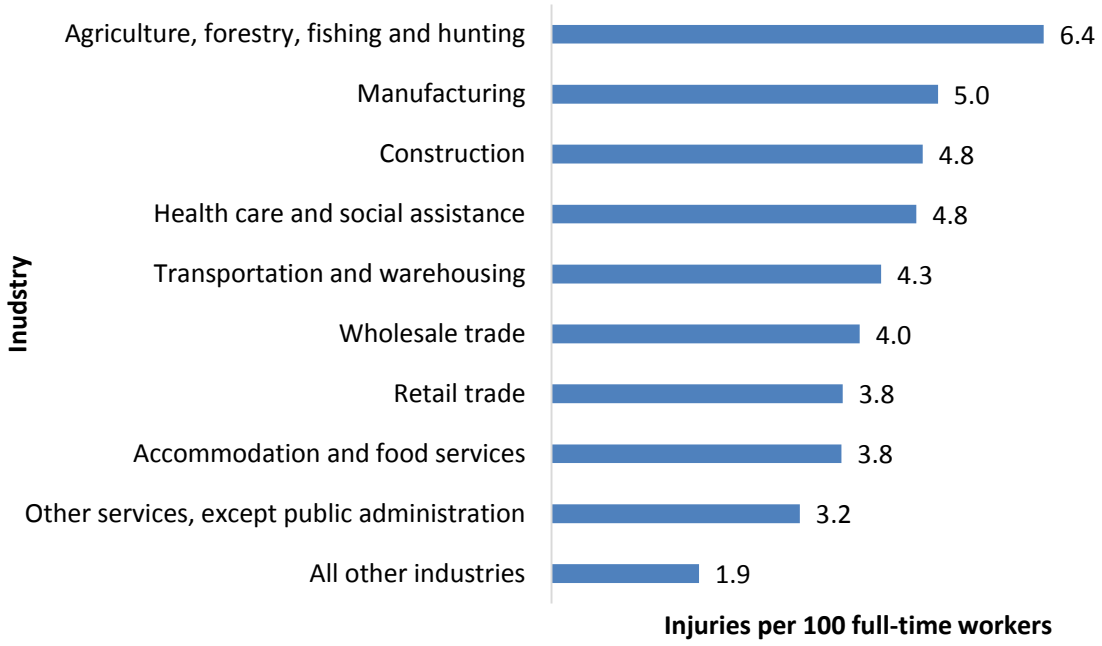


Source: NE hospital discharge data 2009-2013

Occupational Injuries

From 2009 to 2013, the average non-fatal occupational injury rate was 3.6 per 100 full-time workers in Nebraska. Injuries were most common among workers employed in agriculture, forestry, fishing and hunting (6.4 per 100 full-time workers), manufacturing (5.0 per 100 full-time workers), construction (4.8 per 100 full-time workers), and health care and social assistance (4.8 per 100 full-time workers). *Figure 58.*

Figure 58: Average estimated non-fatal occupational injury rate by industry, Nebraska, 2009-2013 (n=113,600)



Source: BLS Survey of Occupational Injuries and Illnesses (SOII), 2009-2013

APPENDIX A: DEFINITIONS AND METHODS

Definitions

Age-adjusted rate: A rate that has been standardized to the age distribution of a particular population, so that it is independent of the age distribution of the population it presents. Age-adjusted rates are used to compare rates over time or between different population groups.

Age-specific rate: A rate for a specified age group is calculated by dividing the actual number of cases in a given period (e.g., 2009-2013) for a specific age group by the population in that age group for that period. The numerator and the denominator refer to the same age group.

E-codes: The external cause of injury codes (E-codes) are a subset of the International Classification of Diseases, and are used to classify the environmental events, circumstances, and conditions that are the cause of injury, poisoning, or other adverse effects. E-code classifications used in this report are listed in Appendix D.

Hospital discharges: Records from hospital discharges; including hospitalizations and emergency department (ED) visits.

Hospitalization: Discharge record indicating a patient who was in hospital care for longer than 24 hours.

ICD-9-CM: The International Classification of Diseases, Ninth Revision, Clinical Modification coding system is used to classify diagnoses on inpatient and outpatient care records.

ICD-10: The International Classification of Diseases, Tenth Revision, is the coding system used to classify the causes of death listed on death certificates beginning in 1999.

Intent of injury: Intentional injuries, such as homicide and suicide, involve acts in which there is intent to kill or harm. Unintentional injuries involve acts in which there is no intent to harm; these injuries are sometimes labeled as “accidental.” In some cases, the intentionality has not been determined. These injuries are categorized as “undetermined intent.”

Legal intervention: This category includes injuries that were inflicted in the course of performing legal law enforcement actions. In this report, as in National Vital Statistics Reports, injuries due to legal intervention are grouped with homicide and assault.

Mechanism of injury: The activities or circumstances that led to the death, hospitalization, or emergency department (ED) visit (e.g., fall, motor vehicle crash, etc.).

Other specified and classifiable: Injuries that may include foreign body entering eye or orifice, caught accidentally in or between objects, accident caused by explosive material, accident caused by electric current, exposure to radiation, or late effects of accidents.

Rate: The number of deaths or hospital discharge records per 100,000 persons.

Underlying cause of death: Defined by the World Health Organization as the disease or injury that initiated the train of events leading directly to death; or the circumstances of the accident or violence, which produced the fatal injury. Most standard mortality data are compiled by underlying cause of death.

Data sources

Nebraska vital statistics (2009-2013), hospital discharge data (2009-2013), Nebraska Trauma Registry data (2009-2013), and national surveys (2009-2013) were used for this report.

Vital statistics

Death certificates containing information about Nebraska residents are collected and compiled by the Nebraska Department of Health and Human Services (DHHS) Office of Vital Records. Death certificates classify injuries by external cause of death. The data include information on a variety of attributes of the deceased including age, gender, place of residence, and primary and secondary causes of deaths. Primary causes of death were coded based on the International Classification of Diseases-10th Revision (ICD-10) and are presented based on the external cause-of-injury mortality matrix (*Appendix B*).

Hospital discharge data

Hospital discharge data (HDD) is generated from uniform hospital billing forms which contain records of patient discharge information, excluding names. This information is provided by Nebraska acute care hospitals to the Nebraska Hospital Association (NHA), using the 2004 Uniform Billing form (UB-04). The records for each patient discharge contain information on the date of admission, date of discharge, patient's age and gender, county of residence, and primary and secondary diagnosis codes, including dedicated fields for recording E-codes. An E-Code specifies the external cause of injury. The E-code data, a subset of HDD containing injury related records, is provided to the Nebraska Department of Health and Human Services (DHHS) by the NHA.

For this report, an injury record is defined as the record of a Nebraska resident who was treated in a Nebraska acute care hospital because of an injury. Discharge records in the E-code database are identified as inpatient hospitalizations, outpatient-emergency department (ED) and outpatient non-ED. Outpatient non-ED records are not presented in this report. Both injuries and their external cause are classified according to the 9th Revision of the International Classification of Diseases, Clinical Modification (ICD-9-CM). The body region and nature of the injury is presented based on the Barell Matrix (*Appendix C*). The external cause of injury is presented based on the Recommended Framework of E-code Groupings (*Appendix D*).

A limitation of hospital discharge data is that it is record-based; therefore, one patient may be counted more than once if discharged for the same injury more than once. *The rates displayed in this report reflect numbers of discharge records, rather than numbers of patients discharged.*

Nebraska Trauma Registry data

The Nebraska Trauma Registry (NTR) is a database which contains detailed information about injury patients admitted to designated trauma centers in Nebraska. The trauma registry collects information that aids in the evaluation of trauma care for a set of injured patients. Information collected includes patient demographics, injury type, injury severity, and place of occurrence.

Because the current NTR does not receive data from all trauma centers and hospitals in the state, it is not possible to calculate population-based estimates. As a result, percentages are presented instead of rates in this report.

Occupational injury data

Occupational death data were obtained from the U.S. Bureau of Labor Statistics (BLS) Census of Fatal Occupational Injuries (CFOI). The CFOI uses multiple data sources to track fatal work injuries. CFOI reports data on work-related fatalities by the state in which the fatal incident occurred, which is not necessarily the state of death or the state of residence.

Occupational hospitalization data are obtained using E-code data from Hospital Discharge Data (HDD), as described above. For this report, an occupational injury discharge is defined as the record of a Nebraska resident aged 16 years or older who was treated in a Nebraska acute care hospital because of an injury and workers' compensation was indicated in the payer type field. Only occupational inpatient hospitalizations are presented.

Non-fatal occupational injury data were obtained from U.S. Bureau of Labor Statistics (BLS) Survey of Occupational Injuries and Illnesses (SOII). SOII is a survey of employers that uses data from logs of occupational injuries and illnesses

maintained by employers as required by OSHA. Because SOII is a survey, frequency counts and incidence rates are estimates and do not reflect underreporting of injuries by employers.

Analysis

Data was prepared based on the Centers for Disease Control and Prevention (CDC) State Injury Indicator Report Guidance 2012, except for data presented in the Occupational Injury Supplement. Data was analyzed in accordance with STIPDA's *Consensus Recommendations for Injury Surveillance in State Health Departments* (2007).

The leading causes of injury death and injury hospital discharge in Nebraska are addressed in this report. These include unintentional motor vehicle crashes, falls, struck by or against, cutting and piercing, poisoning, suffocation, drowning, overexertion; suicide and self-inflicted injury; and homicide and assault.

All of the results presented in this report are based on analyses of deaths and hospital discharges of Nebraska residents. Nebraska residents who died outside of Nebraska or were treated at hospitals out of the state are not included. Thus, rates may be underestimated if Nebraskans died or were treated in other states.

Five-year averages are used throughout the report to provide more stable rates by reducing the effects of fluctuations from year to year for groups with small numbers of injury events.

Occupational Injury Supplement

Data presented in the Occupational Injuries Supplement were prepared and analyzed using different methods as described above. Fatal and non-fatal injury data were prepared and analyzed using modified guidance from the Council of State and Territorial Epidemiologists, and rates presented are crude rates using based on the number of full-time workers from the BLS Current Population Survey. BLS fatal and non-fatal injury data include injuries that occurred in Nebraska, whether or not the person was a state resident.

Age-adjusted rates

All age-adjusted rates presented in this report are per 100,000 Nebraska residents and are age adjusted to the 2000 U.S. standard population using the direct method applied to eleven age groups. Direct age adjustment involves the application of age-specific rates in a population of interest to a standardized age distribution (i.e., that of the U.S.) in order to eliminate differences in observed rates that result from age differences between populations. This adjustment is usually done when comparing

two or more populations at one point in time or one population at two or more points in time.

Age-adjusted rates (AAR) are calculated by the direct method as follows:

$$AAR = \text{Summation of } (ASR_i * weight_i)$$

Where ASR_i = the age-specific rates for the population of interest
$Weight_i$ = the standard weight in age group *i*

Age Adjustment Table
All Ages — Eleven Age Groups

Age	U.S. 2000 Standard population (1,000s)	Adjustment Weights
All ages	274,364	1.000000
<1	3,795	0.013818
1-4	15,192	0.055317
5-14	39,977	0.145565
15-24	38,077	0.138646
25-34	37,233	0.135573
35-44	44,659	0.162613
45-54	37,030	0.134834
55-64	23,961	0.087247
65-74	18,136	0.066037
75-84	12,315	0.044842
85+	4,259	0.015508

Years of Potential Life Lost

Years of potential life lost (YPLL) is a measure of premature death. In this report, YPLL before age 75 is calculated from the difference between 75 and the age at death. For example, the death of a person 40 years old contributes 35 years of life lost before age 75. YPLL are calculated by summing the years of life lost for all deaths over all ages.

APPENDIX B: EXTERNAL CAUSE-OF-INJURY MORTALITY MATRIX

Table 3: External cause-of-injury mortality matrix based on ICD-10 external cause-of-injury codes

		Manner or intent	
	Mechanism of death (based on ICD–10)	All injury	Unintentional
	All injury	*U01–*U03, V01–Y36, Y85–Y87, Y89	V01–X59, Y85–Y86
#	Cut or pierce	W25–W29, W45, X78, X99, Y28, Y35.4	W25–W29, W45
#	Drowning	W65–W74, X71, X92, Y21	W65–W74
#	Fall	W00–W19, X80, Y01, Y30	W00–W19
#	Fire or hot object or substance	*U01.3, X00–X19, X76–X77, X97–X98, Y26–Y27, Y36.3	X00–X19
	Fire or flame	X00–X09, X76, X97, Y26	X00–X09
	Hot object or substance	X10–X19, X77, X98, Y27	X10–X19
#	Firearm	*U01.4,W32–W34,X72–X74,X93–X95,Y22–Y24, Y35.0	W32–W34
#	Machinery	W24, W30–W31	W24, W30–W31
	All transport	*U01.1, V01–V99, X82, Y03, Y32, Y36.1	V01–V99
#	Motor vehicle traffic	[V02–V04](.1,.9), V09.2, [V12–V14](.3–.9), V19(.4–.6), [V20–V28](.3–.9),[V29–V79](.4–.9), V80(.3–.5), V81.1, V82.1, [V83–V86](.0–.3), V87(.0–.8), V89.2	[V02–V04](.1,.9), V09.2, [V12–V14](.3–.9), V19(.4–.6), [V20–V28](.3–.9), [V29–V79](.4–.9), V80(.3–.5), V81.1, V82.1, [V83–V86](.0–.3), V87(.0–.8), V89.2
	Occupant	[V30–V79](.4–.9), [V83–V86](.0–.3)	[V30–V79](.4–.9), [V83–V86](.0–.3)
	Motorcyclist	[V20–V28](.3–.9), V29(.4–.9)	[V20–V28](.3–.9), V29(.4–.9)
	Pedal cyclist	[V12–V14](.3–.9), V19(.4–.6)	[V12–V14](.3–.9), V19(.4–.6)
	Pedestrian	[V02–V04](.1,.9), V09.2	[V02–V04](.1,.9), V09.2
	Other	V80(.3–.5), V81.1, V82.1	V80(.3–.5), V81.1, V82.1
	Unspecified	V87(.0–.8), V89.2	V87(.0–.8), V89.2
#	Pedal cyclist, other	V10–V11, [V12–V14](.0–.2), V15–V18, V19(.0–.3,.8,.9)	V10–V11, [V12–V14](.0–.2), V15–V18, V19(.0–.3,.8,.9)
#	Pedestrian, other	V01, [V02–V04](.0), V05, V06, V09(.0–.1,.3,.9)	V01, [V02–V04](.0), V05, V06, V09(.0–.1,.3,.9)
	Other land transport	[V20–V28](.0–.2), [V29–V79](.0–.3), V80(.0–.2,.6–.9), [V81–V82](.0,.2–.9), [V83–V86](.4–.9), V87.9, V88(.0–.9), V89(.0,.1,.3,.9), X82, Y03, Y32	[V20–V28](.0–.2), [V29–V79](.0–.3), V80(.0–.2,.6–.9), [V81–V82](.0,.2–.9), [V83–V86](.4–.9), V87.9, V88(.0–.9), V89(.0,.1,.3,.9)
	Other transport	*U01.1,V90–V99,Y36.1	V90–V99
#	Natural or environmental	W42–W43, W53–W64, W92–W99, X20–X39, X51–X57	W42–W43, W53–W64, W92–W99, X20–X39, X51–X57
#	Overexertion	X50	X50
#	Poisoning	*U01(.6–.7), X40–X49, X60–X69, X85–X90, Y10–Y19, Y35.2	X40–X49
#	Struck by or against	W20–W22,W50–W52,X79,Y00,Y04,Y29,Y35.3	W20–W22, W50–W52
#	Suffocation	W75–W84,X70,X91,Y20	W75–W84
	Other specified, classifiable	*U01(.0,.2,.5), *U03.0, W23, W35–W41, W44, W49, W85–W91, X75, X81, X96, Y02, Y05–Y07, Y25, Y31, Y35(.1,.5), Y36(.0,.2,.4–.8), Y85	W23, W35–W41, W44, W49, W85–W91, Y85
	Other specified, not elsewhere classified	*U01.8,*U02,X58,X83,Y08,Y33,Y35.6,Y86–Y87,Y89(.0–.1)	X58,Y86
	Unspecified	*U01.9, *U03.9, X59, X84,Y09, Y34, Y35.7, Y36.9, Y89.9	X59

Source: *Injury in the United States: 2007 Chartbook*

Table 3 (Cont): External cause-of-injury mortality matrix based on ICD-10 external cause-of-injury codes

		Manner or intent			
	Mechanism of death (based on ICD–10)	Suicide	Homicide	Undetermined	Legal intervention or war
	All injury	*U03, X60–X84, Y87.0	*U01–*U02, X85–Y09, Y87.1	Y10–Y34, Y87.2, Y89.9	Y35–Y36, Y89(.0.–1)
#	Cut or pierce	X78	X99	Y28	Y35.4
#	Drowning	X71	X92	Y21	...
#	Fall	X80	Y01	Y30	...
#	Fire or hot object or substance	X76–X77	*U01.3, X97–X98	Y26–Y27	Y36.3
	Fire or flame	X76	X97	Y26	...
	Hot object or substance	X77	X98	Y27	...
#	Firearm	X72–X74	*U01.4, X93–X95	Y22–Y24	Y35.0
#	Machinery	...	...	...	...
	All transport	X82	*U01.1, Y03	Y32	Y36.1
#	Motor vehicle traffic	...	...	...	...
	Occupant	...	...	...	...
	Motorcyclist	...	...	...	...
	Pedal cyclist	...	...	...	...
	Pedestrian	...	...	...	...
	Other	...	...	...	...
	Unspecified	...	...	...	...
#	Pedal cyclist, other	...	...	...	...
#	Pedestrian, other	...	...	...	...
	Other land transport	X82	Y03	Y32	...
	Other transport	...	*U01.1	...	Y36.1
#	Natural or environmental	...	...	...	...
#	Overexertion	...	...	...	...
#	Poisoning	X60–X69	*U01(.6–.7), X85–X90	Y10–Y19	Y35.2
#	Struck by or against	X79	Y00,Y04	Y29	Y35.3
#	Suffocation	X70	X91	Y20	...
	Other specified, classifiable	*U03.0, X75, X81	*U01(.0,.2,.5), X96, Y02, Y05–Y07	Y25,Y31	Y35(.1,.5), Y36(.0,.2,.4–.8)
	Other specified, not elsewhere classified	X83, Y87.0	*U01.8, *U02, Y08, Y87.1	Y33, Y87.2	Y35.6, Y89(.0–.1)
	Unspecified	*U03.9, X84	*U01.9, Y09	Y34, Y89.9	Y35.7, Y36.9

... Category not applicable.
NOTES: ICD–10 is the *International Classification of Diseases, Tenth Revision*. The causes designated by # are ranked to determine leading mechanisms of injury. When a set of additional digits are required for *International Classification of Diseases* codes, the additional digits are in parentheses ( ) and apply to the preceding code or preceding range of codes in brackets [ ]. For explanation of asterisks (*) preceding cause-of-death codes, see Appendix I, Mortality, identifying injury deaths.
SOURCE: Fingerhut L. ICD Framework: External cause of injury mortality matrix [online]. Hyattsville, MD: National Center for Health Statistics. Available from: http://www.cdc.gov/nchs/about/otheract/ice/matrix10.htm.

APPENDIX C: THE BARELL MATRIX

Table 4: The Barell Injury Diagnosis Matrix based on ICD-9-CM codes for classification by body region and nature of the injury

Body region of injury			*International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) codes	Fracture 800–829	Dislocation 830–839	Sprains and strains 840–848
Head and neck	Traumatic brain injury	Type 1 TBI	[800,801,803,804](.1–.4,.6–.9,.03–.05,.53–.55), 850(.2–.4), 851–854, 950(.1–.3), 995.55	[800,801,803,804](.1–.4,.6–.9, .03–.05,.53–.55)	...	...
		Type 2 TBI	[800,801,803,804](.00,.02,.06,.09,.50,.52,.56,.59), 850(.0–.1,.5,.9)	[800,801,803,804](.00,.02,.06,.09, .50,.52,.56,.59)	...	...
		Type 3 TBI	[800,801,803,804](.01, .51)	[800,801,803,804](.01,.51)	...	...
	Other head, face, and neck	Other head	873(.0–.1,.8–.9), 941.x6, 951, 959.01	...	...	...
		Face	802, 830, 848(.0–.1), 872, 873(.2–.7), 941(.x1,.x3–.x5,.x7)	802	830	848(.0–.1)
		Eye	870–871, 918, 921, 940, 941.x2, 950(.0,.9)	...	...	...
		Neck	807(.5–.6), 848.2, 874, 925.2, 941.x8, 953.0, 954.0	807(.5–.6)	...	848.2
		Head, face, and neck unspecified	900, 910, 920, 925.1, 941(.x0, .x9), 947.0, 957.0, 959.09	...	...	...
Spine and back	Spinal cord (SCI)	Cervical SCI	806(.0–.1), 952.0	806(.0–.1)	...	...
		Thoracic or dorsal SCI	806(.2–.3), 952.1	806(.2–.3)	...	...
		Lumbar SCI	806(.4–.5), 952.2	806(.4–.5)	...	...
		Sacrum coccyx SCI	806(.6–.7), 952(.3–.4)	806(.6–.7)	...	...
		Spine and back unspecified SCI	806(.8–.9), 952(.8–.9)	806(.8–.9)	...	...
	Vertebral column (VCI)	Cervical VCI	805(.0–.1), 839(.0–.1), 847.0	805(.0–.1)	839(.0–.1)	847.0
		Thoracic or dorsal VCI	805(.2–.3), 839(.21,.31), 847.1	805(.2–.3)	839(.21,.31)	847.1
		Lumbar VCI	805(.4–.5), 839(.20,.30), 847.2	805(.4–.5)	839(.20,.30)	847.2
		Sacrum Coccyx VCI	805(.6–.7), 839(.41–.42,.51–.52), 847(.3–.4)	805(.6–.7)	839(.41–.42, .51–.52)	847(.3–.4)
		Spine and back unspecified VCI	805(.8–.9), 839(.40,.49,.50,.59)	805(.8–.9)	839(.40,.49,.50,.59)	...
Torso	Torso	Chest (thorax)	807(.0–.4), 839(.61,.71), 848(.3–.4), 860–862, 875, 879(.0–.1), 901, 922(.0–.1,.33), 926.19, 942(.x1–.x2), 953.1	807(.0–.4)	839(.61,.71)	848(.3–.4)
		Abdomen	863–866, 868, 879(.2–.5), 902(.0–.4), 922.2,942.x3, 947.3, 953(.2,.5)	...	...	...
		Pelvis and urogenital	808, 839(.69,.79), 846, 848.5, 867,877–878 902(.5,.81–.82), 922.4, 926(.0,.12), 942.x5,947.4, 953.3	808	839(.69,.79)	846, 848.5
		Trunk	809, 879(.6–.7), 911, 922(.8–.9), 926(.8–.9), 942(.x0,.x9), 954(.1,.8–.9), 959.1	809	...	...
		Back and buttock	847.9, 876, 922(.31–.32), 926.11, 942.x4	...	...	847.9
Extremities	Upper	Shoulder and upper arm	810–812, 831, 840, 880, 887(.2–.3), 912,923.0, 927.0, 943(.x3–.x6) ,959.2	810–812	831	840
		Forearm and elbow	813, 832, 841, 881(.x0–.x1), 887(.0–.1), 923.1, 927.1, 943(.x1–.x2)	813	832	841
		Wrist, hand, and fingers	814–817, 833–834, 842,881.x2, 882, 883, 885–886, 914–915, 923(.2–.3) ,927(.2–.3), 944 ,959(.4–.5)	814–817	833, 834	842
		Other and unspecified	818, 884, 887(.4–.7), 903, 913, 923(.8–.9), 927(.8–.9), 943(.x0,.x9), 953.4, 955, 959.3	818	...	...
	Lower	Hip	820, 835, 843, 924.01, 928.01	820	835	843
		Upper leg and thigh	821, 897(.2–.3), 924.00, 928.00, 945.x6	821	...	...
		Knee	822, 836, 844(.0–.3), 924.11, 928.11, 945.x5	822	836	844(.0–.3)
		Lower leg and ankle	823–824, 837, 845.0, 897(.0–.1), 924(.10,.21), 928(.10,.21), 945(.x3–.x4)	823–824	837	845.0
		Foot and toes	825–826, 838, 845.1, 892–893, 895–896, 917, 924(.3,.20), 928 (.3,.20), 945 (.x1–.x2)	825–826	838	845.1
		Other and unspecified	827,844(.8–.9), 890–891, 894, 897(.4–.7), 904(.0–.8), 916, 924(.4–.5), 928(.8–.9), 945(.x0,.x9), 959(.6–.7)	827	...	844(.8–.9)
Unclassifiable by site	Other and unspecified	Other or multiple	819, 828, 902(.87,.89), 947(.1–.2), 953.8, 956	819, 828	...	...
		Unspecified site	829, 839(.8–.9), 848(.8–.9), 869, 879(.8–.9), 902.9, 904.9, 919, 924(.8–.9), 929, 946, 947(.8–.9), 948, 949, 953.9, 957(.1,.8–.9), 959(.8–.9)	829	839(.8–.9)	848(.8–.9)
	System-wide	System-wide and late effects	905–908, 909 (.0–.2,.4,.9), 930–939,958, 960–994, 995(.50–.54,.59,.80–.85)			

Source: *Injury in the United States: 2007 Chartbook*

Table 4 (Cont): The Barell Injury Diagnosis Matrix based on ICD-9-CM codes for classification by body region and nature of the injury

Body region of injury			Internal 850–854, 860–869, 952, 995.55	Open Wound 870–884, 890–894	Amputations 885–887, 895–897	Blood vessels 900–904	Contusion or superficial 910–924	Crush 925–929	Burns 940–949	Nerves 950–951, 953–957	Unspecified 959
Head and neck	Traumatic brain injury	Type 1 TBI	850(.2–.4), 851–854†, 995.55	...	...	...	...	...	...	950(.1–.3)	...
		Type 2 TBI	850(.0–.1,.5,.9)	...	...	...	...	...	...	...	...
		Type 3 TBI	...	...	...	...	...	...	...	...	...
	Other head, face, and neck	Other head	...	873(.0–.1,.8–.9)	...	...	...	...	941.x6	951	959.01†
		Face	...	872, 873(.2–.7)	...	...	...	...	941(.x1,.x3–.x5,.x7)	...	...
		Eye	...	870–871	...	...	918, 921	...	940, 941.x2	950(.0,.9)	...
		Neck	...	874	...	...	...	925.2	941.x8	953.0, 954.0	...
		Head, face, and neck unspecified	...	...	...	900	910, 920	925.1	941(.x0,.x9), 947.0	957.0	959.09
Spine and back	Spinal cord (SCI)	Cervical SCI	952.0	...	...	...	...	...	...	...	...
		Thoracic or dorsal SCI	952.1	...	...	...	...	...	...	...	...
		Lumbar SCI	952.2	...	...	...	...	...	...	...	...
		Sacrum coccyx SCI	952(.3–.4)	...	...	...	...	...	...	...	...
		Spine and back unspecified SCI	952(.8–.9)	...	...	...	...	...	...	...	...
	Vertebral column (VCI)	Cervical VCI	...	...	...	...	...	...	...	...	...
		Thoracic or dorsal VCI	...	...	...	...	...	...	...	...	...
		Lumbar VCI	...	...	...	...	...	...	...	...	...
		Sacrum Coccyx VCI	...	...	...	...	...	...	...	...	...
		Spine and back unspecified VCI	...	...	...	...	...	...	...	...	...
Torso	Torso	Chest (thorax)	860–862	875, 879(.0–.1)	...	901	922(.0–.1,.33)	926.19	942(.x1–.x2)	953.1	...
		Abdomen	863–866, 868	879(.2–.5)	...	902(.0–.4)	922.2	...	942.x3, 947.3	953(.2,.5)	...
		Pelvis and urogenital	867	877–878	...	902(.5, .81–.82)	922.4	926(.0, .12)	942.x5, 947.4	953.3	...
		Trunk	...	879(.6–.7)	...	...	911, 922(.8–.9)	926(.8–.9)	942.x0, 942.x9	954(.1, .8–.9)	959.1
		Back and buttock	...	876	...	...	922(.31–.32)	926.11	942.x4	...	...
Extremities	Upper	Shoulder and upper arm	...	880	887(.2–.3)	...	912, 923.0	927.0	943(.x3–.x6)	...	959.2
		Forearm and elbow	...	881(.x0–x1)	887(.0–.1)	...	923.1	927.1	943(.x1–.x2)	...	...
		Wrist, hand, and fingers	...	881.x2,882, 883	885–886	...	914–915, 923(.2–.3)	927(.2–.3)	944	...	959(.4–.5)
		Other and unspecified	...	884	887(.4–.7)	903	913,923(.8–.9)	927(.8–.9)	943(.x0,.x9)	953.4, 955	959.3
	Lower	Hip	...	...	...	...	924.01	928.01	...	...	...
		Upper leg and thigh	...	...	897(.2–.3)	...	924.00	928.00	945.x6	...	...
		Knee	...	...	...	...	924.11	928.11	945.x5	...	...
		Lower leg and ankle	...	...	897(.0–.1)	...	924(.10,.21)	928(.10,.21)	945(.x3–.x4)	...	...
		Foot and toes	...	892–893	895–896	...	917, 924(.3,.20)	928(.3,.20)	945(.x1–.x2)	...	...
		Other and unspecified	...	890–891,894	897(.4–.7)	904(.0–.8)	916, 924(.4–.5)	928(.8–.9)	945(.x0,.x9)	...	959(.6–.7)
Unclassifiable by site	Other and unspecified	Other or multiple	...	...	...	902(.87,.89)	...	...	947(.1–.2)	953.8, 956	...
		Unspecified site	869	879(.8–.9)	...	902.9, 904.9	919, 924(.8–.9)	929	946, 947(.8–.9) 948, 949	953.9, 957(.1,.8–.9)	959(.8–.9)
	System-wide	System-wide and late effects	Foreign body (930–939), Early complications of trauma (958), Poisoning (960–979), Toxic Effects (980–989), Other and unspecified effects of external cause (990–994), Child and adult maltreatment (995(.50–.54, .59, .80–.85)). Late effects of injuries, poisonings, toxic effects and other external causes (905–909) excluding 909(.3, .5)								

... Category not applicable (no code in cell).
†According to the CDC, 959.01 (added to ICD-9-CM in 1997) is not intended to be assigned to TBI cases; however, in the United States, it has been assigned incorrectly to a substantial proportion of cases previously coded 854.

NOTES: When a set of additional digits are required for *International Classification of Diseases* codes, the additional digits are in parentheses ( ) and apply to the preceding code or preceding range of codes in brackets [ ]. Special diagnostic codes for trauma are Flail Chest (807.4) and Pneumothorax (860). For purposes of classification, head injuries are labeled as "Type 1 TBI" if there is recorded evidence of an intracranial injury or a moderate or prolonged loss of consciousness (LOC), Shaken Infant Syndrome (SIS), or injuries to the optic nerve pathways. Type 2 TBI includes injuries with no recorded evidence of intracranial injury, and LOC of less than one hour, or LOC of unknown duration, or unspecified level of consciousness. Type 3 TBI includes patients with no evidence of intracranial injury and no LOC.
SOURCE: Barell V, Aharonson-Daniel L, Fingerhut LA, Mackenzie EJ, et al. An introduction to the Barell body region by nature of injury diagnosis matrix. Inj Prev 8(2):91–6. 2002.

APPENDIX D: RECOMMENDED FRAMEWORK OF E-CODE GROUPINGS FOR PRESENTING INJURY MORTALITY/MORBIDITY DATA

Mechanism/Cause	Manner/Intent				
	Unintentional	Self-inflicted	Assault	Undetermined	Other[1]
Cut/pierce	E920.0-.9	E956	E966	E986	E974
Drowning/submersion	E830.0-.9, E832.0-.9, E910.0-.9	E954	E964	E984	
Fall	E880.0-E886.9, E888	E957.0-.9	E968.1	E987.0-.9	
Fire/burn[3]	E890.0-E899, E924.0-.9	E958.1,.2,.7	E961, E968.0,.3, **E979.3**	E988.1,.2,.7	
Fire/flame[3]	E890.0-E899	E958.1	E968.0, **E979.3**	E988.1	
Hot object/substance	E924.0-.9	E958.2,.7	E961, E968.3	E988.2,.7	
Firearm[3]	E922.0-.3,.8, .9	E955.0-.4	E965.0-4, **E979.4**	E985.0-.4	E970
Machinery	E919 (.0-.9)				
Motor vehicle traffic[2,3]	E810-E819 (.0-.9)	E958.5	**E968.5**	E988.5	
Occupant	E810-E819 (.0,.1)				
Motorcyclist	E810-E819 (.2,.3)				
Pedal cyclist	E810-E819 (.6)				
Pedestrian	E810-E819 (.7)				
Unspecified	E810-E819 (.9)				
Pedal cyclist, other	E800-E807 (.3), E820-E825 (.6), E826.1,.9, E827-E829(.1)				
Pedestrian, other	E800-807(.2), E820-E825(.7), E826-E829(.0)				
Transport, other	E800-E807 (.0,.1,.8,.9), E820-E825 (.0-.5,.8,.9), E826.2-.8, E827-E829 (.2-.9), E831.0-.9, E833.0-E845.9	E958.6		E988.6	

Mechanism/Cause	Manner/Intent				
	Unintentional	Self-inflicted	Assault	Undetermined	Other[1]
Natural/environmental	E900.0-E909, E928.0-.2	E958.3		E988.3	
Bites and stings[3]	E905.0-.6,.9, E906.0-.4,.5,.9				
Overexertion	E927**.0-.4,.8-.9**				
Poisoning	E850.0-E869.9	E950.0-E952.9	E962.0-.9, **E979.6,.7**	E980.0-E982.9	E972
Struck by, against	E916-E917.9		E960.0; E968.2		E973, E975
Suffocation	E911-E913.9	E953.0-.9	E963	E983.0-.9	
Other specified and classifiable[3,4]	E846-E848, E914-E915, E918, E921.0-.9, **E922.4,.5**, E923.0-.9, E925.0-E926.9, **E928(.3-.6)**, E929.0-.5	E955.5,**.6,.7**,.9 E958.0,.4	E960.1, E965.5-.9, E967.0-.9, E968.4,**.6, .7, E979 (.0-.2,.5,.8,.9)**	E985.5,**.6,.7,** E988.0,.4	E971, E978, E990-E994, E996, E997.0-.2
Other specified, not elsewhere classifiable	E928.8, E929.8	E958.8, E959	E968.8, E969, E999.1	E988.8, E989	E977, E995, E997.8, E998, E999.0
Unspecified	E887, E928.9, E929.9	E958.9	E968.9	E988.9	E976, E997.9
All injury[3]	E800-E869, E880-E929	E950-E959	E960-E969, **E979**,E999.1	E980-E989	E970-E978, E990-E999.0
Adverse effects					E870-E879, E930.0-E949.9
Medical care					E870-E879
Drugs					E930.0-E949.9
All external causes					E800-E999

[1]Includes legal intervention (E970-E978) and operations of war (E990-E999).
[2]Three 4th-digit codes (.4 [occupant of streetcar], .5 [rider of animal], .8 [other specified person]) are not presented separately because of small numbers. However, because they are included in the overall motor vehicle traffic category, the sum of these categories can be derived by subtraction.

[3]Codes in bold are for morbidity coding only.

[4]E849 (place of occurrence) has been excluded from the matrix.

APPENDIX E: INJURY PREVENTION RESOURCES

The Nebraska Department of Health and Human Services Injury Prevention Program has produced several documents that address injury prevention recommendations and strategies. These include the Nebraska Injury Prevention State Plan, published in 2012, and the Best Practices for Unintentional Injury Prevention guide, published in 2005. These are both available online at http://dhhs.ne.gov//InjuryPrevention, or by contacting the Injury Prevention Program:

Injury Prevention Program
Safe Kids Nebraska Program
Nebraska Department of Health and Human Services
301 Centennial Mall South
P.O. Box 95044
Lincoln, NE 68509
(402) 471-2101
Website: http://dhhs.ne.gov/InjuryPrevention

Web sites

American Academy of Family Physicians
www.aafp.org

American Academy of Pediatrics
www.healthychildren.org/

American Association of Poison Control Centers
www.aapcc.org

Consumer Product Safety Commission
www.cpsc.gov

Insurance Institute for Highway Safety
www.iihs.org/

Mothers Against Drunk Driving (MADD) Nebraska
www.madd.org/local-offices/ne/

National Center for Injury Prevention and Control
www.cdc.gov/Injury/

National Children's Center for Rural and Agricultural Health and Safety
www.marshfieldclinic.org/NCCRAHS/

National Highway Traffic Safety Administration
www.nhtsa.gov

National Institute on Aging
www.nia.nih.gov/

National Program for Playground Safety
www.uni.edu/playground

The National Resource Center for Safe Aging
www.safeaging.org/

National Safety Council
www.nsc.org

National Strategy for Suicide Prevention
www.samhsa.gov/prevention/suicide.aspx

Nebraska Department of Motor Vehicles
www.dmv.state.ne.us/

Nebraska Crash Outcomes Data Evaluation System (CODES)
http://dhhs.ne.gov/publichealth/Pages/codes_index.aspx

Nebraska Occupational Safety and Health Surveillance Program
www.dhhs.ne.gov/publichealth/occhealth/

Nebraska Regional Poison Center
www.nebraskapoison.com/

Nebraska Safe Kids
http://dhhs.ne.gov/PublicHealth/InjuryPrevention/Pages/SafeKids.aspx

Nebraska State Suicide Prevention Coalition
www.suicideprevention.nebraska.edu/

Safe Kids Worldwide
www.safekids.org

Safe Ride News
www.saferidenews.com

Safe States Alliance
www.safestates.org/

APPENDIX F: DATA TABLES

Table: All injury deaths, percentages, and age-adjusted rates, by intent and gender, Nebraska residents, 2009-2013

Intent	Males			Females			Total		
	N	%	Rate	N	%	Rate	N	%	Rate
UNINTENTIONAL	1884	63.0%	41.8	1372	80.5%	24.6	3256	69.4%	32.8
SUICIDE	777	26.0%	17.1	183	10.7%	3.9	960	20.5%	10.3
HOMICIDE	225	7.5%	5.0	70	4.1%	1.6	295	6.3%	3.3
UNDETERMINED	62	2.1%	1.3	32	1.9%	0.7	94	2.0%	1.0
LEGAL/WAR	4	0.1%	0.1	0	0.0%	0.0	4	0.1%	0.0
ADVERSE EFFECTS	38	1.3%	0.9	47	2.8%	0.8	85	1.8%	0.8
TOTAL	2990	100.0%	66.2	1704	100.0%	31.5	4694	100.0%	48.3

Source: NE vital statistics data, 2009-2013

Note: rates are per 100,000 people and are age-adjusted to the 2000 U.S. standard population

Table 6: Injury-related hospitalizations, percentages, and age-adjusted rates, by intent and gender, Nebraska residents, 2009-2013

Intent	Males			Females			Total		
	N	%	Rate	N	%	Rate	N	%	Rate
UNINTENTIONAL	17463	84.8%	388.436	21408	88.2%	369.642	38871	86.6%	385.747
SUICIDE	1562	7.6%	35.194	2368	9.8%	54.665	3930	8.8%	44.774
HOMICIDE	1273	6.2%	28.121	240	1.0%	5.464	1513	3.4%	16.982
OTHER	26	0.1%	0.613	2	0.0%	0.044	28	0.1%	0.331
UNDETERMINED	273	1.3%	5.956	253	1.0%	5.512	526	1.2%	5.754
TOTAL	20597	100.0%	458.32	24271	100.0%	435.327	44868	100.0%	453.588

Source: NE hospital discharge data, 2009-2013

Table 7: Injury-related emergency department (ED) visits, percentages, and age-adjusted rates, by intent and gender, Nebraska residents, 2009-2013

Intent	Males			Females			Total		
	N	%	Rate	N	%	Rate	N	%	Rate
UNINTENTIONAL	300054	94.7%	6586.04	279335	95.0%	5981.97	579389	94.8%	6302.56
SUICIDE	2534	0.8%	56.08	3942	1.3%	90.62	6476	1.1%	73
HOMICIDE	12075	3.8%	266.7	9600	3.3%	221.14	21675	3.5%	244.17
OTHER	753	0.2%	16.91	162	0.1%	3.72	915	0.1%	10.43
UNDETERMINED	1333	0.4%	29.23	1138	0.4%	25.66	2471	0.4%	27.46
TOTAL	316749	100.0%	6954.96	294177	100.0%	6323.11	610926	100.0%	6657.62

Source: NE hospital discharge data, 2009-2013

Table 8: Injury deaths, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
ADVERSE EFFECTS	1-4	2	5.3%	0.7	0	0.0%	0.0	2	2.4%	0.4
	5-14	1	2.6%	0.2	1	2.1%	0.2	2	2.4%	0.2
	25-34	1	2.6%	0.2	0	0.0%	0.0	1	1.2%	0.1
	35-44	1	2.6%	0.2	3	6.4%	0.6	4	4.7%	0.4
	45-54	2	0.05263	0.316	4	0.08511	0.632	6	0.07059	0.474
	55-64	2	5.3%	0.4	3	6.4%	0.5	5	5.9%	0.5
	65-74	12	0.31579	3.939	7	0.14894	2.074	19	0.22353	2.958
	75-84	11	28.9%	6.2	15	31.9%	6.2	26	30.6%	6.2
	85+	6	15.8%	9.0	14	29.8%	10.4	20	23.5%	10.0
	All ages	**38**	**100.0%**	**0.9**	**47**	**100.0%**	**0.8**	**85**	**100.0%**	**0.8**
CUT/PIERCE	25-34	1	20.0%	0.2	0	0.0%	0.0	1	20.0%	0.1
	45-54	1	20.0%	0.2	0	0.0%	0.0	1	20.0%	0.1
	55-64	1	20.0%	0.2	0	0.0%	0.0	1	20.0%	0.1
	65-74	1	20.0%	0.3	0	0.0%	0.0	1	20.0%	0.2
	85+	1	20.0%	1.5	0	0.0%	0.0	1	20.0%	0.5
	All ages	**5**	**100.0%**	**0.1**	**0**	**0.0%**	**0.0**	**5**	**100.0%**	**0.0**
DROWNING	<1	1	1.9%	1.5	0	0.0%	0.0	2	3.3%	0.8
	1-4	5	9.6%	1.9	5	31.3%	0.8	7	11.7%	1.9
	5-14	1	1.9%	0.2	2	12.5%	0.5	5	8.3%	0.2
	15-24	13	25.0%	2.0	0	0.0%	0.2	14	23.3%	1.0
	25-34	7	13.5%	1.1	0	0.0%	0.0	8	13.3%	0.6
	35-44	5	9.6%	0.9	2	12.5%	0.0	7	11.7%	0.6
	45-54	9	17.3%	1.4	0	0.0%	0.0	10	16.7%	0.7
	55-64	5	9.6%	0.9	4	25.0%	0.2	3	5.0%	0.8
	65-74	3	5.8%	1.0	0	0.0%	0.7	3	5.0%	0.5
	75-84	3	5.8%	1.7	3	18.8%	0.0	1	1.7%	1.4
	All ages	**52**	**100.0%**	**1.1**	**16**	**100.0%**	**0.3**	**60**	**100.0%**	**0.7**
FALL	1-4	0	0.0%	0.0	1	0.2%	0.4	1	0.1%	0.2
	15-24	7	1.6%	1.1	2	0.4%	0.3	9	1.0%	0.7
	25-34	4	0.9%	0.6	0	0.0%	0.0	4	0.4%	0.3
	35-44	18	4.0%	3.2	4	0.8%	0.7	22	2.4%	2.0
	45-54	32	7.2%	5.1	9	1.9%	1.4	41	4.4%	3.2
	55-64	40	9.0%	7.4	15	3.1%	2.7	55	6.0%	5.0
	65-74	42	9.4%	13.8	32	6.7%	9.5	74	8.0%	11.5
	75-84	121	27.1%	68.1	123	25.7%	50.9	244	26.4%	58.2
	85+	182	40.8%	273.6	292	61.1%	217.3	474	51.3%	235.9
	All ages	**446**	**100.0%**	**10.3**	**478**	**100.0%**	**6.9**	**924**	**100.0%**	**8.4**
FIREARM	5-14	1	4.5%	0.2	0	0.0%	0.0	1	4.2%	0.1
	15-24	5	22.7%	0.8	1	50.0%	0.2	6	25.0%	0.5
	25-34	4	18.2%	0.6	1	50.0%	0.2	5	20.8%	0.4
	35-44	4	18.2%	0.7	0	0.0%	0.0	4	16.7%	0.4
	45-54	5	22.7%	0.8	0	0.0%	0.0	5	20.8%	0.4
	55-64	1	4.5%	0.2	0	0.0%	0.0	1	4.2%	0.1
	65-74	2	9.1%	0.7	0	0.0%	0.0	2	8.3%	0.3
	All ages	**22**	**100.0%**	**0.5**	**2**	**100.0%**	**0.0**	**24**	**100.0%**	**0.3**

Table 8 (Cont.): Injury deaths, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
MACHINERY	25-34	5	29.4%	0.8	0	0.0%	0.0	5	23.8%	0.4
	35-44	1	5.9%	0.2	0	0.0%	0.0	1	4.8%	0.1
	45-54	1	5.9%	0.2	2	50.0%	0.3	3	14.3%	0.2
	55-64	4	23.5%	0.7	1	25.0%	0.2	5	23.8%	0.5
	65-74	3	17.6%	1.0	1	25.0%	0.3	4	19.0%	0.6
	75-84	2	11.8%	1.1	0	0.0%	0.0	2	9.5%	0.5
	85+	1	5.9%	1.5	0	0.0%	0.0	1	4.8%	0.5
	All ages	**17**	**100.0%**	**0.4**	**4**	**100.0%**	**0.1**	**21**	**100.0%**	**0.2**
MOTOR VEHICLE TRAFFIC CRASH	<1	1	0.2%	1.5	0	0.0%	0.0	1	0.1%	0.8
	1-4	9	1.5%	3.3	6	2.1%	2.3	15	1.7%	2.8
	5-14	16	2.6%	2.5	12	4.2%	1.9	28	3.1%	2.2
	15-24	158	25.6%	23.7	73	25.3%	11.5	231	25.5%	17.8
	25-34	102	16.5%	16.1	34	11.8%	5.6	136	15.0%	11.0
	35-44	69	11.2%	12.3	33	11.5%	6.1	102	11.3%	9.2
	45-54	92	14.9%	14.5	35	12.2%	5.5	127	14.0%	10.0
	55-64	79	12.8%	14.5	21	7.3%	3.8	100	11.0%	9.1
	65-74	37	6.0%	12.1	24	8.3%	7.1	61	6.7%	9.5
	75-84	33	5.3%	18.6	36	12.5%	14.9	69	7.6%	16.5
	85+	21	3.4%	31.6	14	4.9%	10.4	35	3.9%	17.4
	All ages	**617**	**100.0%**	**13.4**	**288**	**100.0%**	**6.1**	**905**	**100.0%**	**9.7**
OTHER PEDAL CYCLIST	35-44	1	25.0%	0.2	0	0.0%	0.0	1	20.0%	0.1
	45-54	1	25.0%	0.2	0	0.0%	0.0	1	20.0%	0.1
	55-64	1	25.0%	0.2	1	100.0%	0.2	2	40.0%	0.2
	75-84	1	25.0%	0.6	0	0.0%	0.0	1	20.0%	0.2
	All ages	**4**	**100.0%**	**0.1**	**1**	**100.0%**	**0.0**	**5**	**100.0%**	**0.1**
OTHER PEDESTRIAN	1-4	1	7.7%	0.4	2	40.0%	0.8	3	16.7%	0.6
	5-14	1	7.7%	0.2	0	0.0%	0.0	1	5.6%	0.1
	15-24	1	7.7%	0.2	0	0.0%	0.0	1	5.6%	0.1
	25-34	2	15.4%	0.3	1	20.0%	0.2	3	16.7%	0.2
	35-44	2	15.4%	0.4	0	0.0%	0.0	2	11.1%	0.2
	45-54	3	23.1%	0.5	0	0.0%	0.0	3	16.7%	0.2
	55-64	0	0.0%	0.0	1	20.0%	0.2	1	5.6%	0.1
	65-74	2	15.4%	0.7	1	20.0%	0.3	3	16.7%	0.5
	75-84	1	7.7%	0.6	0	0.0%	0.0	1	5.6%	0.2
	All ages	**13**	**100.0%**	**0.3**	**5**	**100.0%**	**0.1**	**18**	**100.0%**	**0.2**
OTHER LAND TRANSPORT	1-4	1	2.2%	0.4	1	8.3%	0.4	2	3.5%	0.4
	5-14	2	4.4%	0.3	1	8.3%	0.2	3	5.3%	0.2
	15-24	4	8.9%	0.6	2	16.7%	0.3	6	10.5%	0.5
	25-34	5	11.1%	0.8	2	16.7%	0.3	7	12.3%	0.6
	35-44	4	8.9%	0.7	1	8.3%	0.2	5	8.8%	0.5
	45-54	6	13.3%	1.0	1	8.3%	0.2	7	12.3%	0.6
	55-64	6	13.3%	1.1	0	0.0%	0.0	6	10.5%	0.5
	65-74	9	20.0%	3.0	1	8.3%	0.3	10	17.5%	1.6
	75-84	7	15.6%	4.0	2	16.7%	0.8	9	15.8%	2.2
	85+	1	2.2%	1.5	1	8.3%	0.7	2	3.5%	1.0
	All ages	**45**	**100.0%**	**1.0**	**12**	**100.0%**	**0.3**	**57**	**100.0%**	**0.6**

Table 8 (Cont.): Injury deaths, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
HOT OBJECT/SCALD	65-74	0	0.0%	0.0	1	50.0%	0.3	1	50.0%	0.2
	75-84	0	0.0%	0.0	1	50.0%	0.4	1	50.0%	0.2
	All ages	**0**	**0.0%**	**0.0**	**2**	**100.0%**	**0.0**	**2**	**100.0%**	**0.0**
OTHER TRANSPORT	15-24	1	5.9%	0.1	2	66.7%	0.3	3	15.0%	0.2
	25-34	4	23.5%	0.6	1	33.3%	0.2	5	25.0%	0.4
	35-44	2	11.8%	0.4	0	0.0%	0.0	2	10.0%	0.2
	45-54	4	23.5%	0.6	0	0.0%	0.0	4	20.0%	0.3
	55-64	5	29.4%	0.9	0	0.0%	0.0	5	25.0%	0.5
	65-74	1	5.9%	0.3	0	0.0%	0.0	1	5.0%	0.2
	All ages	**17**	**100.0%**	**0.4**	**3**	**100.0%**	**0.1**	**20**	**100.0%**	**0.2**
NATURAL/ ENVIRONMENTAL	1-4	1	3.3%	0.4	0	0.0%	0.0	1	2.1%	0.2
	15-24	1	3.3%	0.1	0	0.0%	0.0	1	2.1%	0.1
	25-34	2	6.7%	0.3	0	0.0%	0.0	2	4.2%	0.2
	35-44	1	3.3%	0.2	3	16.7%	0.6	4	8.3%	0.4
	45-54	6	20.0%	1.0	1	5.6%	0.2	7	14.6%	0.6
	55-64	8	26.7%	1.5	1	5.6%	0.2	9	18.8%	0.8
	65-74	4	13.3%	1.3	4	22.2%	1.2	8	16.7%	1.3
	75-84	2	6.7%	1.1	4	22.2%	1.7	6	12.5%	1.4
	85+	5	16.7%	7.6	5	27.8%	3.7	10	20.8%	5.0
	All ages	**30**	**100.0%**	**0.6**	**18**	**100.0%**	**0.3**	**48**	**100.0%**	**0.5**
OVEREXERTION	55-64	1	50.0%	0.2	0	0.0%	0.0	1	50.0%	0.1
	85+	1	50.0%	1.5	0	0.0%	0.0	1	50.0%	0.5
	All ages	**2**	**100.0%**	**0.0**	**0**	**0.0%**	**0.0**	**2**	**100.0%**	**0.0**
POISONING	<1	0	0.0%	0.0	1	0.4%	1.6	1	0.2%	0.8
	5-14	4	1.5%	0.6	1	0.4%	0.2	5	1.0%	0.4
	15-24	30	11.2%	4.5	12	4.7%	1.9	42	8.0%	3.2
	25-34	46	17.2%	7.3	42	16.4%	7.0	88	16.8%	7.1
	35-44	51	19.1%	9.1	71	27.7%	13.1	122	23.3%	11.0
	45-54	84	31.5%	13.3	70	27.3%	11.1	154	29.4%	12.2
	55-64	33	12.4%	6.1	42	16.4%	7.6	75	14.3%	6.8
	65-74	9	3.4%	3.0	4	1.6%	1.2	13	2.5%	2.0
	75-84	8	3.0%	4.5	6	2.3%	2.5	14	2.7%	3.4
	85+	2	0.7%	3.0	7	2.7%	5.2	9	1.7%	4.5
	All ages	**267**	**100.0%**	**5.9**	**256**	**100.0%**	**5.8**	**523**	**100.0%**	**5.9**
STRUCK BY/AGAINST	<1	1	4.3%	1.5	1	11.1%	1.6	2	6.3%	1.5
	1-4	2	8.7%	0.7	1	11.1%	0.4	3	9.4%	0.6
	5-14	1	4.3%	0.2	0	0.0%	0.0	1	3.1%	0.1
	15-24	2	8.7%	0.3	0	0.0%	0.0	2	6.3%	0.2
	25-34	1	4.3%	0.2	0	0.0%	0.0	1	3.1%	0.1
	35-44	1	4.3%	0.2	0	0.0%	0.0	1	3.1%	0.1
	45-54	5	21.7%	0.8	2	22.2%	0.3	7	21.9%	0.6
	55-64	5	21.7%	0.9	0	0.0%	0.0	5	15.6%	0.5
	75-84	3	13.0%	1.7	3	33.3%	1.2	6	18.8%	1.4
	85+	2	8.7%	3.0	2	22.2%	1.5	4	12.5%	2.0
	All ages	**23**	**100.0%**	**0.5**	**9**	**100.0%**	**0.2**	**32**	**100.0%**	**0.3**

Table 8 (Cont.): Injury deaths, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
SUFFOCATION	<1	7	5.5%	10.5	9	9.8%	14.1	16	7.3%	12.2
	1-4	4	3.1%	1.5	0	0.0%	0.0	4	1.8%	0.8
	5-14	4	3.1%	0.6	0	0.0%	0.0	4	1.8%	0.3
	15-24	7	5.5%	1.0	1	1.1%	0.2	8	3.6%	0.6
	25-34	11	8.6%	1.7	4	4.3%	0.7	15	6.8%	1.2
	35-44	7	5.5%	1.2	4	4.3%	0.7	11	5.0%	1.0
	45-54	8	6.3%	1.3	6	6.5%	1.0	14	6.4%	1.1
	55-64	19	14.8%	3.5	8	8.7%	1.4	27	12.3%	2.5
	65-74	18	14.1%	5.9	7	7.6%	2.1	25	11.4%	3.9
	75-84	19	14.8%	10.7	17	18.5%	7.1	36	16.4%	8.6
	85+	24	18.8%	36.3	36	39.1%	26.5	60	27.3%	29.7
	All ages	**128**	**100.0%**	**2.8**	**92**	**100.0%**	**1.5**	**220**	**100.0%**	**2.1**
OTHER SPECIFIED	15-24	3	13.6%	0.4	0	0.0%	0.0	3	10.7%	0.2
	25-34	6	27.3%	1.0	0	0.0%	0.0	6	21.4%	0.5
	35-44	2	9.1%	0.4	1	16.7%	0.2	3	10.7%	0.3
	45-54	6	27.3%	1.0	1	16.7%	0.2	7	25.0%	0.6
	55-64	2	9.1%	0.4	1	16.7%	0.2	3	10.7%	0.3
	65-74	1	4.5%	0.3	0	0.0%	0.0	1	3.6%	0.2
	75-84	1	4.5%	0.6	2	33.3%	0.8	3	10.7%	0.7
	85+	1	4.5%	1.5	1	16.7%	0.7	2	7.1%	1.0
	All ages	**22**	**100.0%**	**0.5**	**6**	**100.0%**	**0.1**	**28**	**100.0%**	**0.3**
NEC	5-14	1	4.0%	0.2	0	0.0%	0.0	1	2.3%	0.1
	15-24	0	0.0%	0.0	1	5.3%	0.2	1	2.3%	0.1
	35-44	2	8.0%	0.4	0	0.0%	0.0	2	4.5%	0.2
	45-54	1	4.0%	0.2	1	5.3%	0.2	2	4.5%	0.2
	55-64	7	28.0%	1.3	0	0.0%	0.0	7	15.9%	0.6
	65-74	3	12.0%	1.0	0	0.0%	0.0	3	6.8%	0.5
	75-84	8	32.0%	4.5	5	26.3%	2.1	13	29.5%	3.1
	85+	3	12.0%	4.5	12	63.2%	8.8	15	34.1%	7.4
	All ages	**25**	**100.0%**	**0.6**	**19**	**100.0%**	**0.3**	**44**	**100.0%**	**0.4**
NOT SPECIFIED	15-24	3	2.8%	0.4	0	0.0%	0.0	3	1.2%	0.2
	25-34	4	3.8%	0.6	0	0.0%	0.0	4	1.7%	0.3
	35-44	2	1.9%	0.4	2	1.5%	0.4	4	1.7%	0.4
	45-54	9	8.5%	1.4	4	2.9%	0.6	13	5.4%	1.0
	55-64	13	12.3%	2.4	5	3.7%	0.9	18	7.4%	1.6
	65-74	10	9.4%	3.3	11	8.1%	3.3	21	8.7%	3.3
	75-84	21	19.8%	11.9	26	19.1%	10.8	47	19.4%	11.3
	85+	44	41.5%	66.6	88	64.7%	64.8	132	54.5%	65.4
	All ages	**106**	**100.0%**	**2.4**	**136**	**100.0%**	**1.9**	**242**	**100.0%**	**2.2**
LEGAL/WAR	25-34	1	25.0%	0.2	0	0.0%	0.0	1	25.0%	0.1
	55-64	1	25.0%	0.2	0	0.0%	0.0	1	25.0%	0.1
	75-84	1	25.0%	0.6	0	0.0%	0.0	1	25.0%	0.2
	85+	1	25.0%	1.5	0	0.0%	0.0	1	25.0%	0.5
	All ages	**4**	**100.0%**	**0.1**	**0**	**0.0%**	**0.0**	**4**	**100.0%**	**0.0**

Table 8 (Cont.): Injury deaths, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
SUICIDE	5-14	6	0.8%	1.6	2	1.1%	0.9	8	0.0%	1.3
	15-24	110	14.2%	19.7	25	13.7%	3.7	135	14.1%	11.9
	25-34	119	15.3%	17.4	26	14.2%	3.3	145	15.1%	10.5
	35-44	119	15.3%	21.3	27	14.8%	7.1	146	15.2%	14.3
	45-54	150	19.3%	24.0	44	24.0%	6.9	194	20.2%	15.5
	55-64	121	15.6%	19.1	39	21.3%	4.2	160	16.7%	11.5
	65-74	58	7.5%	19.8	12	6.6%	2.3	70	7.3%	10.4
	75-84	65	8.4%	25.7	7	3.8%	3.3	72	7.5%	12.5
	85+	29	3.7%	17.1	1	0.5%	2.2	30	3.1%	6.7
	All ages	**777**	**100.0%**	**17.1**	**183**	**100.0%**	**3.9**	**960**	**100.0%**	**10.3**
FIRE/FLAME	<1	1	2.3%	1.5	1	4.0%	1.6	2	2.9%	1.5
	1-4	3	7.0%	1.1	0	0.0%	0.0	3	4.4%	0.6
	5-14	3	7.0%	0.5	1	4.0%	0.2	4	5.9%	0.3
	15-24	2	4.7%	0.3	0	0.0%	0.0	2	2.9%	0.2
	25-34	4	9.3%	0.6	0	0.0%	0.0	4	5.9%	0.3
	35-44	5	11.6%	0.9	1	4.0%	0.2	6	8.8%	0.5
	45-54	7	16.3%	1.1	3	12.0%	0.5	10	14.7%	0.8
	55-64	2	4.7%	0.4	7	28.0%	1.3	9	13.2%	0.8
	65-74	3	7.0%	1.0	4	16.0%	1.2	7	10.3%	1.1
	75-84	8	18.6%	4.5	5	20.0%	2.1	13	19.1%	3.1
	85+	5	11.6%	7.5	3	12.0%	2.2	8	11.8%	4.0
	All ages	**43**	**100.0%**	**1.0**	**25**	**100.0%**	**0.5**	**68**	**100.0%**	**0.7**
HOMICIDE	<1	3	1.3%	4.5	3	4.3%	4.7	6	2.0%	4.6
	1-4	6	2.7%	2.2	3	4.3%	1.2	9	3.1%	1.7
	5-14	3	1.3%	0.5	3	4.3%	0.5	6	2.0%	0.5
	15-24	73	32.4%	11.0	12	17.1%	1.9	85	28.8%	6.5
	25-34	65	28.9%	10.3	14	20.0%	2.3	79	26.8%	6.4
	35-44	38	16.9%	6.8	11	15.7%	2.0	49	16.6%	4.4
	45-54	23	10.2%	3.6	12	17.1%	1.9	35	11.9%	2.8
	55-64	9	4.0%	1.7	7	10.0%	1.3	16	5.4%	1.5
	65-74	4	1.8%	1.3	3	4.3%	0.9	7	2.4%	1.1
	75-84	1	0.4%	0.6	1	1.4%	0.4	2	0.7%	0.5
	85+	0	0.0%	0.0	1	1.4%	0.7	1	0.3%	0.5
	All ages	**225**	**100.0%**	**5.0**	**70**	**100.0%**	**1.6**	**295**	**100.0%**	**3.3**
UNDETERMINED	1-4	1	1.6%	0.4	1	3.1%	0.4	2	2.1%	0.4
	15-24	5	8.1%	0.8	3	9.4%	0.5	8	8.5%	0.6
	25-34	7	11.3%	1.1	2	6.3%	0.3	9	9.6%	0.7
	35-44	9	14.5%	1.6	5	15.6%	0.9	14	14.9%	1.3
	45-54	24	38.7%	3.8	12	37.5%	1.9	36	38.3%	2.8
	55-64	10	16.1%	1.8	4	12.5%	0.7	14	14.9%	1.3
	65-74	2	3.2%	0.7	2	6.3%	0.6	4	4.3%	0.6
	75-84	2	3.2%	1.1	2	6.3%	0.8	4	4.3%	1.0
	85+	2	3.2%	3.0	1	3.1%	0.7	3	3.2%	1.5
	All ages	**62**	**100.0%**	**1.3**	**32**	**100.0%**	**0.7**	**94**	**100.0%**	**1.0**

Source: NE vital statistics data, 2009-2013

Note: rates are per 100,000 people and are age-adjusted to the 2000 U.S. standard population

Table 9: Injury-related hospitalizations, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
FIREARM	1-4	2	1.71%	0.7	0	0	0.0	2	1.57%	0.4
	5-14	8	6.84%	1.2	1	6.7%	0.2	9	7.09%	0.7
	15-24	37	31.62%	5.6	2	13.3%	0.3	39	30.71%	3.0
	25-34	29	24.79%	4.6	5	33.3%	0.8	34	26.77%	2.7
	35-44	12	10.26%	2.1	1	6.7%	0.2	13	10.24%	1.2
	45-54	12	10.26%	1.9	1	6.7%	0.2	13	10.24%	1.0
	55-64	13	11.11%	2.4	0	0.0%	0.0	13	10.24%	1.2
	65-74	2	1.71%	0.7	0	0.0%	0.0	2	1.57%	0.3
	75-84	1	0.85%	0.6	0	0.0%	0.0	1	0.79%	0.2
	85+	1	0.85%	1.5	0	0	0.0	1	0.79%	0.5
	All ages	**117**	**100.00%**	**2.5**	**10**	**100.0%**	**0.2**	**127**	**100.00%**	**1.4**
POISONING	<1	3	0.4%	4.5	1	0.1%	1.6	4	0.2%	3.1
	1-4	34	4.3%	12.6	38	3.9%	14.8	72	4.1%	13.7
	5-14	15	1.9%	2.3	24	2.4%	3.9	39	2.2%	3.1
	15-24	125	15.7%	18.8	94	9.6%	14.8	219	12.3%	16.9
	25-34	96	12.1%	15.2	91	9.3%	15.0	187	10.5%	15.1
	35-44	98	12.3%	17.5	116	11.8%	21.3	214	12.0%	19.3
	45-54	148	18.6%	23.4	210	21.4%	33.2	358	20.2%	28.3
	55-64	127	16.0%	23.4	170	17.3%	30.5	297	16.7%	27.0
	65-74	79	9.9%	25.9	105	10.7%	31.1	184	10.4%	28.7
	75-84	49	6.2%	27.6	85	8.7%	35.2	134	7.5%	32.0
	85+	21	2.6%	31.6	47	4.8%	35.0	68	3.8%	33.9
	All ages	**795**	**100.0%**	**17.2**	**981**	**100.0%**	**20.3**	**1776**	**100.0%**	**19.0**
FALLS	<1	37	0.4%	55.6	22	0.1%	34.7	59	0.2%	45.4
	1-4	91	1.0%	33.7	63	0.4%	24.5	154	0.6%	29.2
	5-14	165	1.9%	25.4	99	0.6%	15.9	264	1.1%	20.8
	15-24	282	3.2%	42.3	141	0.9%	22.2	423	1.7%	32.5
	25-34	309	3.5%	48.8	180	1.2%	29.6	489	2.0%	39.4
	35-44	494	5.6%	88.0	277	1.8%	50.8	771	3.2%	69.7
	45-54	839	9.5%	132.6	693	4.5%	109.5	1532	6.3%	121.0
	55-64	1123	12.7%	206.6	1480	9.6%	265.2	2603	10.7%	236.3
	65-74	1328	15.1%	435.9	2088	13.5%	618.5	3416	14.1%	531.9
	75-84	2131	24.2%	1198.6	4461	28.9%	1846.3	6592	27.2%	1571.7
	85+	2010	22.8%	3022.0	5951	38.5%	4428.5	7961	32.8%	3962.8
	All ages	**8809**	**100.0%**	**199.3**	**15455**	**100.0%**	**249.7**	**24264**	**100.0%**	**231.0**
OTHER	15-24	5	19.2%	0.7	0	0.0%	0.0	5	17.9%	0.4
	25-34	8	30.8%	1.3	1	50.0%	0.2	9	32.1%	0.7
	35-44	8	30.8%	1.4	0	0.0%	0.0	8	28.6%	0.7
	45-54	2	7.7%	0.3	1	50.0%	0.2	3	10.7%	0.2
	55-64	1	3.8%	0.2	0	0.0%	0.0	1	3.6%	0.1
	75-84	1	3.8%	0.3	0	0.0%	0.0	1	3.6%	0.2
	85+	1	3.8%	0.6	0	0.0%	0.0	1	3.6%	0.2
	All ages	**26**	**100.0%**	**0.6**	**2**	**100.0%**	**0.0**	**28**	**100.0%**	**0.3**

Table 9 (Cont.): Injury-related hospitalizations, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
SUFFOCATION	<1	13	15.9%	19.5	5	6.3%	7.9	18	11.2%	13.8
	1-4	6	7.3%	2.2	9	11.4%	3.5	15	9.3%	2.9
	5-14	2	2.4%	0.3	0	0.0%	0.0	2	1.2%	0.2
	15-24	5	6.1%	0.8	1	1.3%	0.2	6	3.7%	0.5
	25-34	3	3.7%	0.5	2	2.5%	0.3	5	3.1%	0.4
	35-44	5	6.1%	0.9	3	3.8%	0.6	8	5.0%	0.7
	45-54	4	4.9%	0.6	7	8.9%	1.1	11	6.8%	0.9
	55-64	10	12.2%	1.8	7	8.9%	1.3	17	10.6%	1.5
	65-74	14	17.1%	4.6	11	13.9%	3.3	25	15.5%	3.9
	75-84	10	12.2%	5.6	17	21.5%	7.0	27	16.8%	6.4
	85+	10	12.2%	15.0	17	21.5%	12.7	27	16.8%	13.4
	All ages	**82**	**100.0%**	**1.8**	**79**	**100.0%**	**1.4**	**161**	**100.0%**	**1.6**
DROWNING	<1	0	0.0%	0.0	3	17.6%	4.7	3	9.7%	2.3
	1-4	4	28.6%	1.5	7	41.2%	2.7	11	35.5%	2.1
	5-14	3	21.4%	0.5	3	17.6%	0.5	6	19.4%	0.5
	15-24	2	14.3%	0.3	1	5.9%	0.2	3	9.7%	0.2
	25-34	1	7.1%	0.2	0	0.0%	0.0	1	3.2%	0.1
	35-44	3	21.4%	0.5	1	5.9%	0.2	4	12.9%	0.4
	45-54	1	7.1%	0.2	1	5.9%	0.2	2	6.5%	0.2
	65-74	0	0.0%	0.0	1	5.9%	0.3	1	3.2%	0.2
	All ages	**14**	**100.0%**	**0.3**	**17**	**100.0%**	**0.4**	**31**	**100.0%**	**0.3**
FIRE/BURN	<1	10	2.6%	15.0	2	1.0%	3.2	12	2.0%	9.2
	1-4	43	11.1%	15.9	34	16.8%	13.2	77	13.1%	14.6
	5-14	29	7.5%	4.5	15	7.4%	2.4	44	7.5%	3.5
	15-24	49	12.7%	7.4	15	7.4%	2.4	64	10.9%	4.9
	25-34	49	12.7%	7.7	14	6.9%	2.3	63	10.7%	5.1
	35-44	38	9.8%	6.8	19	9.4%	3.5	57	9.7%	5.2
	45-54	61	15.8%	9.6	35	17.3%	5.5	96	16.3%	7.6
	55-64	51	13.2%	9.4	23	11.4%	4.1	74	12.6%	6.7
	65-74	33	8.5%	10.8	11	5.4%	3.3	44	7.5%	6.9
	75-84	19	4.9%	10.7	21	10.4%	8.7	40	6.8%	9.5
	85+	5	1.3%	7.5	13	6.4%	9.7	18	3.1%	9.0
	All ages	**387**	**100.0%**	**8.3**	**202**	**100.0%**	**4.2**	**589**	**100.0%**	**6.3**
CUT/PIERCE	<1	2	0.8%	3.0	0	0.0%	0.0	2	0.6%	1.5
	1-4	2	0.8%	0.7	4	6.1%	1.6	6	1.8%	1.1
	5-14	14	5.4%	2.2	5	7.6%	0.8	19	5.8%	1.5
	15-24	43	16.5%	6.5	12	18.2%	1.9	55	16.9%	4.2
	25-34	48	18.5%	7.6	10	15.2%	1.7	58	17.8%	4.7
	35-44	48	18.5%	8.6	14	21.2%	2.6	62	19.0%	5.6
	45-54	47	18.1%	7.4	8	12.1%	1.3	55	16.9%	4.4
	55-64	24	9.2%	4.4	6	9.1%	1.1	30	9.2%	2.7
	65-74	19	7.3%	6.2	3	4.5%	0.9	22	6.7%	3.4
	75-84	10	3.8%	5.6	2	3.0%	0.8	12	3.7%	2.9
	85+	3	1.2%	4.5	2	3.0%	1.5	5	1.5%	2.5
	All ages	**260**	**100.0%**	**5.8**	**66**	**100.0%**	**1.5**	**326**	**100.0%**	**3.7**

Table 9 (Cont.): Injury-related hospitalizations, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
STRUCK BY/ AGAINST	<1	7	1.0%	10.5	1	0.4%	1.6	8	0.8%	6.2
	1-4	23	3.4%	8.5	12	4.3%	4.7	35	3.6%	6.7
	5-14	96	14.1%	14.8	37	13.2%	6.0	133	13.8%	10.5
	15-24	155	22.7%	23.3	21	7.5%	3.3	176	18.3%	13.5
	25-34	75	11.0%	11.9	24	8.5%	4.0	99	10.3%	8.0
	35-44	64	9.4%	11.4	26	9.3%	4.8	90	9.3%	8.1
	45-54	71	10.4%	11.2	14	5.0%	2.2	85	8.8%	6.7
	55-64	84	12.3%	15.5	25	8.9%	4.5	109	11.3%	9.9
	65-74	54	7.9%	17.7	30	10.7%	8.9	84	8.7%	13.1
	75-84	32	4.7%	18.0	53	18.9%	21.9	85	8.8%	20.3
	85+	22	3.2%	33.1	38	13.5%	28.3	60	6.2%	29.9
	All ages	**683**	**100.0%**	**14.8**	**281**	**100.0%**	**5.6**	**964**	**100.0%**	**10.0**
MACHINERY	1-4	4	1.2%	1.5	0	0.0%	0.0	4	1.1%	0.8
	5-14	7	2.1%	1.1	2	5.4%	0.3	9	2.5%	0.7
	15-24	38	11.5%	5.7	2	5.4%	0.3	40	10.9%	3.1
	25-34	48	14.5%	7.6	4	10.8%	0.7	52	14.2%	4.2
	35-44	36	10.9%	6.4	9	24.3%	1.7	45	12.3%	4.1
	45-54	73	22.1%	11.5	9	24.3%	1.4	82	22.3%	6.5
	55-64	60	18.2%	11.0	5	13.5%	0.9	65	17.7%	5.9
	65-74	26	7.9%	8.5	1	2.7%	0.3	27	7.4%	4.2
	75-84	29	8.8%	16.3	3	8.1%	1.2	32	8.7%	7.6
	85+	9	2.7%	13.5	2	5.4%	1.5	11	3.0%	5.5
	All ages	**330**	**100.0%**	**7.1**	**37**	**100.0%**	**0.8**	**367**	**100.0%**	**3.9**
OTHER PEDAL CYCLIST	1-4	2	0.8%	0.7	1	0.9%	0.4	3	0.8%	0.6
	5-14	56	22.7%	8.6	20	18.0%	3.2	76	21.2%	6.0
	15-24	27	10.9%	4.1	3	2.7%	0.5	30	8.4%	2.3
	25-34	20	8.1%	3.2	4	3.6%	0.7	24	6.7%	1.9
	35-44	21	8.5%	3.7	13	11.7%	2.4	34	9.5%	3.1
	45-54	48	19.4%	7.6	26	23.4%	4.1	74	20.7%	5.9
	55-64	42	17.0%	7.7	23	20.7%	4.1	65	18.2%	5.9
	65-74	20	8.1%	6.6	15	13.5%	4.4	35	9.8%	5.5
	75-84	10	4.0%	5.6	4	3.6%	1.7	14	3.9%	3.3
	85+	1	0.4%	1.5	2	1.8%	1.5	3	0.8%	1.5
	All ages	**247**	**100.0%**	**5.3**	**111**	**100.0%**	**2.3**	**358**	**100.0%**	**3.8**
OTHER TRANSPORTATION	<1	0	0.00%	0.0	1	0.26%	1.6	1	0.08%	0.8
	1-4	12	1.38%	4.5	0	0.00%	0.0	12	0.95%	2.3
	5-14	67	7.72%	10.3	43	11.05%	6.9	110	8.75%	8.7
	15-24	142	16.36%	21.3	44	11.31%	6.9	186	14.80%	14.3
	25-34	128	14.75%	20.2	40	10.28%	6.6	168	13.37%	13.6
	35-44	108	12.44%	19.2	41	10.54%	7.5	149	11.85%	13.5
	45-54	129	14.86%	20.4	83	21.34%	13.1	212	16.87%	16.8
	55-64	142	16.36%	26.1	48	12.34%	8.6	190	15.12%	17.3
	65-74	77	8.87%	25.3	34	8.74%	10.1	111	8.83%	17.3
	75-84	46	5.30%	25.9	35	9.00%	14.5	81	6.44%	19.3
	85+	17	1.96%	25.6	20	5.14%	14.9	37	2.94%	18.4
	All ages	**868**	**100.00%**	**18.9**	**389**	**100.00%**	**8.2**	**1257**	**100.00%**	**13.0**

Table 9 (Cont.): Injury-related hospitalizations, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
OTHER PEDESTRIAN	1-4	2	4.7%	0.7	1	6.3%	0.4	3	5.1%	0.6
	5-14	3	7.0%	0.5	1	6.3%	0.2	4	6.8%	0.3
	15-24	11	25.6%	1.7	4	25.0%	0.6	15	25.4%	1.2
	25-34	4	9.3%	0.6	1	6.3%	0.2	5	8.5%	0.4
	35-44	3	7.0%	0.5	2	12.5%	0.4	5	8.5%	0.5
	45-54	8	18.6%	1.3	1	6.3%	0.2	9	15.3%	0.7
	55-64	7	16.3%	1.3	3	18.8%	0.5	10	16.9%	0.9
	65-74	2	4.7%	0.7	0	0.0%	0.0	2	3.4%	0.3
	75-84	2	4.7%	1.1	3	18.8%	1.2	5	8.5%	1.2
	85+	1	2.3%	1.5	0	0.0%	0.0	1	1.7%	0.5
	All ages	**43**	**100.0%**	**0.9**	**16**	**100.0%**	**0.3**	**59**	**100.0%**	**0.6**
NATURAL/ ENVIRONMENTAL	<1	4	1.0%	6.0	3	1.4%	4.7	7	1.2%	5.4
	1-4	17	4.4%	6.3	12	5.7%	4.7	29	4.9%	5.5
	5-14	23	6.0%	3.5	11	5.3%	1.8	34	5.7%	2.7
	15-24	28	7.3%	4.2	18	8.6%	2.8	46	7.8%	3.5
	25-34	34	8.9%	5.4	19	9.1%	3.1	53	9.0%	4.3
	35-44	45	11.7%	8.0	19	9.1%	3.5	64	10.8%	5.8
	45-54	63	16.4%	10.0	28	13.4%	4.4	91	15.4%	7.2
	55-64	63	16.4%	11.6	25	12.0%	4.5	88	14.9%	8.0
	65-74	45	11.7%	14.8	23	11.0%	6.8	68	11.5%	10.6
	75-84	45	11.7%	25.3	32	15.3%	13.2	77	13.0%	18.4
	85+	16	4.2%	24.1	19	9.1%	14.1	35	5.9%	17.4
	All ages	**383**	**100.0%**	**8.4**	**209**	**100.0%**	**4.2**	**592**	**100.0%**	**6.3**
OVEREXERTION	1-4	4	1.5%	1.5	2	0.6%	0.8	6	1.0%	1.1
	5-14	10	3.7%	1.5	8	2.3%	1.3	18	2.9%	1.4
	15-24	32	11.8%	4.8	21	5.9%	3.3	53	8.5%	4.1
	25-34	37	13.7%	5.9	21	5.9%	3.5	58	9.3%	4.7
	35-44	34	12.5%	6.1	21	5.9%	3.9	55	8.8%	5.0
	45-54	31	11.4%	4.9	41	11.5%	6.5	72	11.5%	5.7
	55-64	36	13.3%	6.6	53	14.9%	9.5	89	14.2%	8.1
	65-74	31	11.4%	10.2	62	17.5%	18.4	93	14.9%	14.5
	75-84	34	12.5%	19.1	68	19.2%	28.1	102	16.3%	24.3
	85+	22	8.1%	33.1	58	16.3%	43.2	80	12.8%	39.8
	All ages	**271**	**100.0%**	**6.0**	**355**	**100.0%**	**6.6**	**626**	**100.0%**	**6.0**
NEC	1-4	1	1.2%	0.4	1	1.3%	0.4	2	1.2%	0.4
	5-14	11	13.3%	1.7	1	1.3%	0.2	12	7.5%	0.9
	15-24	9	10.8%	1.4	6	7.7%	1.0	15	9.3%	1.2
	25-34	11	13.3%	1.7	4	5.1%	0.7	15	9.3%	1.2
	35-44	9	10.8%	1.6	10	12.8%	1.8	19	11.8%	1.7
	45-54	11	13.3%	1.7	7	9.0%	1.1	18	11.2%	1.4
	55-64	10	12.0%	1.8	6	7.7%	1.1	16	9.9%	1.5
	65-74	8	9.6%	2.6	13	16.7%	3.9	21	13.0%	3.3
	75-84	6	7.2%	3.4	15	19.2%	6.2	21	13.0%	5.0
	85+	7	8.4%	10.5	15	19.2%	11.2	22	13.7%	11.0
	All ages	**83**	**100.0%**	**1.8**	**78**	**100.0%**	**1.5**	**161**	**100.0%**	**1.7**

Table 9 (Cont.): Injury-related hospitalizations, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
OTHER SPECIFIED	<1	6	1.4%	9.0	2	0.9%	3.2	8	1.2%	6.2
	1-4	8	1.8%	3.0	10	4.6%	3.9	18	2.7%	3.4
	5-14	21	4.7%	3.2	11	5.0%	1.8	32	4.8%	2.5
	15-24	54	12.2%	8.1	13	5.9%	2.1	67	10.1%	5.2
	25-34	75	16.9%	11.9	13	5.9%	2.1	88	13.3%	7.1
	35-44	64	14.4%	11.4	20	9.1%	3.7	84	12.7%	7.6
	45-54	57	12.9%	9.0	19	8.7%	3.0	76	11.5%	6.0
	55-64	62	14.0%	11.4	33	15.1%	5.9	95	14.4%	8.6
	65-74	47	10.6%	15.4	29	13.2%	8.6	76	11.5%	11.8
	75-84	33	7.4%	18.6	27	12.3%	11.2	60	9.1%	14.3
	85+	16	3.6%	24.1	42	19.2%	31.3	58	8.8%	28.9
	All ages	**443**	**100.0%**	**9.8**	**219**	**100.0%**	**4.2**	**662**	**100.0%**	**7.0**
NOT SPECIFIED	<1	15	3.9%	22.5	20	4.0%	31.5	35	4.0%	26.9
	1-4	6	1.5%	2.2	5	1.0%	2.0	11	1.2%	2.1
	5-14	15	3.9%	2.3	7	1.4%	1.1	22	2.5%	1.7
	15-24	26	6.7%	3.9	6	1.2%	1.0	32	3.6%	2.5
	25-34	29	7.5%	4.6	8	1.6%	1.3	37	4.2%	3.0
	35-44	32	8.2%	5.7	17	3.4%	3.1	49	5.5%	4.4
	45-54	49	12.6%	7.7	37	7.5%	5.9	86	9.7%	6.8
	55-64	55	14.1%	10.1	55	11.1%	9.9	110	12.4%	10.0
	65-74	52	13.4%	17.1	70	14.1%	20.7	122	13.8%	19.0
	75-84	57	14.7%	32.1	124	25.0%	51.3	181	20.5%	43.2
	85+	53	13.6%	79.7	147	29.6%	109.4	200	22.6%	99.6
	All ages	**389**	**100.0%**	**8.6**	**496**	**100.0%**	**8.5**	**885**	**100.0%**	**9.0**
SELF-INFLICTED	5-14	20	1.3%	3.1	65	2.7%	10.5	85	2.2%	6.7
	15-24	403	25.8%	60.0	599	25.3%	93.6	1002	25.5%	76.4
	25-34	335	21.4%	53.2	496	20.9%	82.4	831	21.1%	67.5
	35-44	336	21.5%	59.9	513	21.7%	94.5	849	21.6%	76.9
	45-54	304	19.5%	48.2	442	18.7%	70.1	746	19.0%	59.2
	55-64	118	7.6%	21.8	183	7.7%	32.9	301	7.7%	27.5
	65-74	24	1.5%	7.9	43	1.8%	12.8	67	1.7%	10.5
	75-84	17	1.1%	9.6	20	0.8%	8.3	37	0.9%	8.9
	85+	5	0.3%	7.6	7	0.3%	5.2	12	0.3%	6.0
	All ages	**1562**	**100.0%**	**35.2**	**2368**	**100.0%**	**54.7**	**3930**	**100.0%**	**45.0**
ASSAULT	<1	21	1.6%	31.4	9	3.8%	14.1	30	2.0%	23.0
	1-4	9	0.7%	3.3	5	2.1%	1.9	14	0.9%	2.6
	5-14	12	0.9%	1.9	5	2.1%	0.8	17	1.1%	1.3
	15-24	426	33.5%	63.4	60	25.0%	9.4	486	32.1%	37.1
	25-34	367	28.8%	58.3	57	23.8%	9.5	424	28.0%	34.4
	35-44	193	15.2%	34.4	41	17.1%	7.6	234	15.5%	21.2
	45-54	163	12.8%	25.9	39	16.3%	6.2	202	13.4%	16.0
	55-64	62	4.9%	11.5	14	5.8%	2.5	76	5.0%	6.9
	65-74	13	1.0%	4.3	7	2.9%	2.1	20	1.3%	3.1
	75-84	7	0.5%	4.0	1	0.4%	0.4	8	0.5%	1.9
	85+	0	0.0%	0.0	2	0.8%	1.5	2	0.1%	1.0
	All ages	**1273**	**100.0%**	**28.1**	**240**	**100.0%**	**5.5**	**1513**	**100.0%**	**17.0**

Table 9 (Cont.): Injury-related hospitalizations, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
UNDETERMINED	<1	10	3.7%	14.9	3	1.2%	4.7	13	2.5%	9.9
	1-4	9	3.3%	3.3	2	0.8%	0.8	11	2.1%	2.1
	5-14	1	0.4%	0.2	3	1.2%	0.5	4	0.8%	0.3
	15-24	54	19.8%	8.0	34	13.4%	5.3	88	16.7%	6.7
	25-34	66	24.2%	10.5	48	19.0%	8.0	114	21.7%	9.3
	35-44	41	15.0%	7.3	41	16.2%	7.6	82	15.6%	7.4
	45-54	47	17.2%	7.5	57	22.5%	9.0	104	19.8%	8.3
	55-64	32	11.7%	5.9	35	13.8%	6.3	67	12.7%	6.1
	65-74	7	2.6%	2.3	18	7.1%	5.4	25	4.8%	3.9
	75-84	3	1.1%	1.7	4	1.6%	1.7	7	1.3%	1.7
	85+	3	1.1%	4.5	8	3.2%	5.9	11	2.1%	5.5
	All ages	**273**	**100.0%**	**6.0**	**253**	**100.0%**	**5.5**	**526**	**127.7%**	**5.8**
MOTOR VEHICLE CRASH	<1	2	0.1%	3.0	4	0.2%	6.3	6	0.1%	4.6
	1-4	33	1.1%	12.2	36	1.8%	14.0	69	1.4%	13.1
	5-14	137	4.6%	21.1	114	5.7%	18.3	251	5.0%	19.7
	15-24	728	24.3%	109.3	445	22.3%	70.2	1173	23.5%	90.2
	25-34	515	17.2%	81.4	267	13.4%	44.0	782	15.6%	63.1
	35-44	374	12.5%	66.6	229	11.5%	42.0	603	12.1%	54.5
	45-54	462	15.4%	73.0	268	13.4%	42.4	730	14.6%	57.7
	55-64	363	12.1%	66.8	226	11.3%	40.5	589	11.8%	53.5
	65-74	202	6.7%	66.3	158	7.9%	46.8	360	7.2%	56.1
	75-84	125	4.2%	70.3	177	8.9%	73.3	302	6.0%	72.0
	85+	61	2.0%	91.7	76	3.8%	56.6	137	2.7%	68.2
	All ages	**3002**	**100.0%**	**65.5**	**2000**	**100.0%**	**42.6**	**5002**	**100.0%**	**54.0**

Source: NE vital statistics data, 2009-2013

Note: rates are per 100,000 people and are age-adjusted to the 2000 U.S. standard

Table 10: Injury-related emergency department (ED) visits, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
OTHER	1-4	1	0.1%	0.4	1	0.6%	0.4	2	0.2%	0.4
	5-14	10	1.3%	1.5	1	0.6%	0.2	11	1.2%	0.9
	15-24	215	28.6%	32.3	47	29.0%	7.4	262	28.6%	20.2
	25-34	258	34.3%	40.8	40	24.7%	6.6	298	32.6%	24.0
	35-44	138	18.3%	24.6	29	17.9%	5.3	167	18.3%	15.1
	45-54	93	12.4%	14.7	32	19.8%	5.1	125	13.7%	9.9
	55-64	26	3.5%	4.8	8	4.9%	1.4	34	3.7%	3.1
	65-74	11	1.5%	3.6	3	1.9%	0.9	14	1.5%	2.2
	75-84	0	0.0%	0.0	1	0.6%	0.4	1	0.1%	0.2
	85+	1	0.1%	1.5	0	0.0%	0.0	1	0.1%	0.5
	All ages	**753**	**100.0%**	**16.9**	**162**	**100.0%**	**3.7**	**915**	**100.0%**	**10.4**
FIREARM	1-4	4	1.1%	1.5	0	0.0%	0.0	4	1.0%	0.8
	5-14	17	4.7%	2.6	2	3.7%	0.3	19	4.6%	1.5
	15-24	143	39.5%	21.3	14	25.9%	2.2	157	37.7%	12.0
	25-34	79	21.8%	12.5	22	40.7%	3.7	101	24.3%	8.2
	35-44	42	11.6%	7.5	8	14.8%	1.5	50	12.0%	4.5
	45-54	30	8.3%	4.8	7	13.0%	1.1	37	8.9%	2.9
	55-64	33	9.1%	6.1	0	0.0%	0.0	33	7.9%	3.0
	65-74	8	2.2%	2.6	1	1.9%	0.3	9	2.2%	1.4
	75-84	5	1.4%	2.8	0	0.0%	0.0	5	1.2%	1.2
	85+	1	0.3%	1.5	0	0.0%	0.0	1	0.2%	0.5
	All ages	**362**	**100.0%**	**7.8**	**54**	**100.0%**	**1.3**	**416**	**100.0%**	**4.6**
POISONING	<1	114	2.6%	170.3	128	2.8%	200.7	242	2.7%	185.1
	1-4	1277	29.5%	470.7	1088	23.9%	420.9	2365	26.6%	446.4
	5-14	418	9.6%	64.6	360	7.9%	58.2	778	8.8%	61.5
	15-24	743	17.1%	110.6	729	16.0%	113.9	1472	16.6%	112.2
	25-34	438	10.1%	69.5	509	11.2%	84.5	947	10.7%	76.9
	35-44	386	8.9%	68.8	487	10.7%	89.7	873	9.8%	79.1
	45-54	378	8.7%	60.0	458	10.1%	72.7	836	9.4%	66.3
	55-64	265	6.1%	49.0	346	7.6%	62.3	611	6.9%	55.7
	65-74	147	3.4%	48.5	218	4.8%	64.8	365	4.1%	57.1
	75-84	110	2.5%	62.2	150	3.3%	62.3	260	2.9%	62.3
	85+	58	1.3%	87.8	84	1.8%	61.9	142	1.6%	70.4
	All ages	**4334**	**100.0%**	**93.5**	**4557**	**100.0%**	**99.6**	**8891**	**100.0%**	**96.5**
FALLS	<1	2014	2.3%	3008.0	1584	1.5%	2483.7	3598	1.8%	2752.2
	1-4	14442	16.7%	5323.7	10238	9.4%	3960.3	24680	12.7%	4658.4
	5-14	17213	20.0%	2660.2	13166	12.1%	2129.6	30379	15.6%	2400.9
	15-24	9305	10.8%	1385.4	8806	8.1%	1376.1	18111	9.3%	1380.9
	25-34	6522	7.6%	1035.6	9256	8.5%	1537.2	15778	8.1%	1280.7
	35-44	5887	6.8%	1049.0	8506	7.8%	1566.4	14393	7.4%	1303.4
	45-54	7078	8.2%	1123.2	10161	9.4%	1612.3	17239	8.8%	1367.8
	55-64	6449	7.5%	1192.2	10913	10.1%	1963.8	17362	8.9%	1583.2
	65-74	5542	6.4%	1826.6	9386	8.6%	2790.7	14928	7.7%	2333.4
	75-84	6582	7.6%	3723.1	12821	11.8%	5325.7	19403	10.0%	4647.1
	85+	5236	6.1%	7925.1	13705	12.6%	10099.0	18941	9.7%	9387.2
	All ages	**86270**	**100.0%**	**1892.3**	**108542**	**100.0%**	**2185.8**	**194812**	**100.0%**	**2053.0**

Table 10 (Cont.): Injury-related emergency department (ED) visits, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
SUFFOCATION	<1	60	9.5%	89.6	51	9.9%	80.0	111	9.7%	84.9
	1-4	170	27.0%	62.7	183	35.5%	70.8	353	30.8%	66.6
	5-14	58	9.2%	9.0	34	6.6%	5.5	92	8.0%	7.3
	15-24	20	3.2%	3.0	15	2.9%	2.3	35	3.1%	2.7
	25-34	34	5.4%	5.4	24	4.7%	4.0	58	5.1%	4.7
	35-44	43	6.8%	7.7	25	4.8%	4.6	68	5.9%	6.2
	45-54	55	8.7%	8.7	27	5.2%	4.3	82	7.2%	6.5
	55-64	52	8.3%	9.6	37	7.2%	6.7	89	7.8%	8.1
	65-74	52	8.3%	17.1	36	7.0%	10.7	88	7.7%	13.8
	75-84	54	8.6%	30.6	47	9.1%	19.5	101	8.8%	24.2
	85+	31	4.9%	46.9	37	7.2%	27.3	68	5.9%	33.7
	All ages	**629**	**100.0%**	**13.6**	**516**	**100.0%**	**10.6**	**1145**	**100.0%**	**12.0**
DROWNING	<1	4	3.6%	6.0	3	4.1%	4.7	7	3.8%	5.4
	1-4	31	28.2%	11.4	21	28.8%	8.1	52	28.4%	9.8
	5-14	24	21.8%	3.7	10	13.7%	1.6	34	18.6%	2.7
	15-24	16	14.5%	2.4	17	23.3%	2.7	33	18.0%	2.5
	25-34	13	11.8%	2.1	5	6.8%	0.8	18	9.8%	1.5
	35-44	9	8.2%	1.6	2	2.7%	0.4	11	6.0%	1.0
	45-54	9	8.2%	1.4	9	12.3%	1.4	18	9.8%	1.4
	55-64	2	1.8%	0.4	3	4.1%	0.5	5	2.7%	0.5
	65-74	1	0.9%	0.3	2	2.7%	0.6	3	1.6%	0.5
	75-84	1	0.9%	0.6	1	1.4%	0.4	2	1.1%	0.5
	All ages	**110**	**100.0%**	**2.4**	**73**	**100.0%**	**1.6**	**183**	**100.0%**	**2.0**
FIRE/BURN	<1	144	2.8%	215.1	102	2.4%	159.9	246	2.6%	188.2
	1-4	917	18.0%	338.0	652	15.3%	252.2	1569	16.8%	296.2
	5-14	534	10.5%	82.5	468	11.0%	75.7	1002	10.7%	79.2
	15-24	1000	19.6%	148.9	752	17.7%	117.5	1752	18.7%	133.6
	25-34	860	16.8%	136.6	746	17.5%	123.9	1606	17.2%	130.4
	35-44	570	11.2%	101.6	543	12.8%	100.0	1113	11.9%	100.8
	45-54	532	10.4%	84.4	459	10.8%	72.8	991	10.6%	78.6
	55-64	336	6.6%	62.1	284	6.7%	51.1	620	6.6%	56.5
	65-74	137	2.7%	45.2	135	3.2%	40.1	272	2.9%	42.5
	75-84	59	1.2%	33.4	76	1.8%	31.6	135	1.4%	32.3
	85+	19	0.4%	28.8	36	0.8%	26.5	55	0.6%	27.3
	All ages	**5108**	**100.0%**	**111.1**	**4253**	**100.0%**	**95.3**	**9361**	**100.0%**	**103.3**
CUT/PIERCE	<1	113	0.3%	168.8	77	0.4%	120.7	190	0.4%	145.3
	1-4	1809	5.5%	666.8	1048	5.8%	405.4	2857	5.6%	539.3
	5-14	4696	14.3%	725.8	2754	15.3%	445.5	7450	14.6%	588.8
	15-24	7251	22.1%	1079.6	3403	18.9%	531.8	10654	20.9%	812.3
	25-34	5980	18.2%	949.5	3145	17.4%	522.3	9125	17.9%	740.7
	35-44	4221	12.8%	752.1	2328	12.9%	428.7	6549	12.9%	593.1
	45-54	3757	11.4%	596.2	2206	12.2%	350.0	5963	11.7%	473.1
	55-64	2753	8.4%	508.9	1523	8.4%	274.1	4276	8.4%	389.9
	65-74	1436	4.4%	473.3	844	4.7%	250.9	2280	4.5%	356.4
	75-84	654	2.0%	369.9	471	2.6%	195.7	1125	2.2%	269.4
	85+	208	0.6%	314.8	238	1.3%	175.4	446	0.9%	221.0
	All ages	**32878**	**100.0%**	**723.1**	**18037**	**100.0%**	**402.4**	**50915**	**100.0%**	**564.0**

Table 10 (Cont.): Injury-related emergency department (ED) visits, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
STRUCK BY/AGAINST	<1	546	1.0%	815.5	355	1.2%	556.6	901	1.1%	689.2
	1-4	6172	11.9%	2275.1	3626	11.8%	1402.6	9798	11.8%	1849.4
	5-14	14950	28.7%	2310.5	7778	25.2%	1258.1	22728	27.4%	1796.3
	15-24	13543	26.0%	2016.4	6235	20.2%	974.3	19778	23.9%	1508.0
	25-34	6028	11.6%	957.1	3936	12.8%	653.7	9964	12.0%	808.8
	35-44	3932	7.6%	700.6	2754	8.9%	507.2	6686	8.1%	605.5
	45-54	3066	5.9%	486.5	2394	7.8%	379.9	5460	6.6%	433.2
	55-64	1907	3.7%	352.5	1506	4.9%	271.0	3413	4.1%	311.2
	65-74	998	1.9%	328.9	856	2.8%	254.5	1854	2.2%	289.8
	75-84	587	1.1%	332.0	733	2.4%	304.5	1320	1.6%	316.2
	85+	298	0.6%	451.0	633	2.1%	466.5	931	1.1%	461.4
	All ages	**52027**	**100.0%**	**1136.7**	**30806**	**100.0%**	**678.2**	**82833**	**100.0%**	**917.0**
MACHINERY	1-4	38	1.1%	14.0	18	3.7%	7.0	56	1.4%	10.6
	5-14	60	1.7%	9.3	18	3.7%	2.9	78	1.9%	6.2
	15-24	559	15.5%	83.2	101	20.5%	15.8	660	16.1%	50.3
	25-34	618	17.1%	98.1	99	20.1%	16.4	717	17.5%	58.2
	35-44	571	15.8%	101.7	67	13.6%	12.3	638	15.5%	57.8
	45-54	646	17.9%	102.5	96	19.5%	15.2	742	18.1%	58.9
	55-64	556	15.4%	102.8	63	12.8%	11.3	619	15.1%	56.5
	65-74	355	9.8%	117.0	18	3.7%	5.4	373	9.1%	58.3
	75-84	178	4.9%	100.7	10	2.0%	4.2	188	4.6%	45.0
	85+	33	0.9%	50.0	3	0.6%	2.2	36	0.9%	17.8
	All ages	**3614**	**100.0%**	**79.3**	**493**	**100.0%**	**10.9**	**4107**	**100.0%**	**44.8**
OTHER PEDAL CYCLIST	1-4	371	6.8%	136.8	183	7.3%	70.8	554	7.0%	104.6
	5-14	2783	51.0%	430.1	1486	59.6%	240.4	4269	53.7%	337.4
	15-24	736	13.5%	109.6	186	7.5%	29.1	922	11.6%	70.3
	25-34	411	7.5%	65.3	152	6.1%	25.2	563	7.1%	45.7
	35-44	373	6.8%	66.5	143	5.7%	26.3	516	6.5%	46.7
	45-54	434	8.0%	68.9	166	6.7%	26.3	600	7.6%	47.6
	55-64	223	4.1%	41.2	125	5.0%	22.5	348	4.4%	31.7
	65-74	92	1.7%	30.3	42	1.7%	12.5	134	1.7%	21.0
	75-84	25	0.5%	14.1	11	0.4%	4.6	36	0.5%	8.6
	85+	4	0.1%	6.1	1	0.0%	0.7	5	0.1%	2.5
	All ages	**5452**	**100.0%**	**120.6**	**2495**	**100.0%**	**57.2**	**7947**	**100.0%**	**89.4**
OTHER TRANSPORTATION	<1	11	0.2%	16.4	3	0.1%	4.7	14	0.2%	10.7
	1-4	209	3.8%	77.0	158	4.5%	61.1	367	4.1%	69.3
	5-14	1013	18.6%	156.6	798	22.9%	129.1	1811	20.3%	143.1
	15-24	1420	26.1%	211.4	846	24.3%	132.2	2266	25.4%	172.8
	25-34	821	15.1%	130.4	435	12.5%	72.2	1256	14.1%	102.0
	35-44	594	10.9%	105.8	374	10.7%	68.9	968	10.8%	87.7
	45-54	597	11.0%	94.7	380	10.9%	60.3	977	10.9%	77.5
	55-64	416	7.6%	76.9	261	7.5%	47.0	677	7.6%	61.7
	65-74	213	3.9%	70.2	110	3.2%	32.7	323	3.6%	50.5
	75-84	118	2.2%	66.8	76	2.2%	31.6	194	2.2%	46.5
	85+	37	0.7%	56.0	43	1.2%	31.7	80	0.9%	39.7
	All ages	**5449**	**100.0%**	**119.5**	**3484**	**100.0%**	**77.9**	**8933**	**100.0%**	**98.7**

Table 10 (Cont.): Injury-related emergency department (ED) visits, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males N	Males %	Males Rate	Females N	Females %	Females Rate	Total N	Total %	Total Rate
OTHER PEDESTRIAN	1-4	22	9.9%	8.1	23	12.0%	8.9	45	10.9%	8.5
	5-14	73	32.9%	11.3	50	26.2%	8.1	123	29.8%	9.7
	15-24	35	15.8%	5.2	27	14.1%	4.2	62	15.0%	4.7
	25-34	33	14.9%	5.2	24	12.6%	4.0	57	13.8%	4.6
	35-44	18	8.1%	3.2	17	8.9%	3.1	35	8.5%	3.2
	45-54	25	11.3%	4.0	17	8.9%	2.7	42	10.2%	3.3
	55-64	10	4.5%	1.9	11	5.8%	2.0	21	5.1%	1.9
	65-74	4	1.8%	1.3	10	5.2%	3.0	14	3.4%	2.2
	75-84	1	0.5%	0.6	5	2.6%	2.1	6	1.5%	1.4
	85+	1	0.5%	1.5	7	3.7%	5.2	8	1.9%	4.0
	All ages	**222**	**100.0%**	**4.9**	**191**	**100.0%**	**4.2**	**413**	**100.0%**	**4.6**
NATURAL/ ENVIRONMENTAL	<1	130	1.1%	194.2	147	1.2%	230.5	277	1.1%	211.9
	1-4	2236	18.2%	824.2	1932	15.4%	747.4	4168	16.8%	786.7
	5-14	2577	21.0%	398.3	2189	17.5%	354.1	4766	19.2%	376.7
	15-24	1576	12.8%	234.7	2049	16.4%	320.2	3625	14.6%	276.4
	25-34	1473	12.0%	233.9	1656	13.2%	275.0	3129	12.6%	254.0
	35-44	1218	9.9%	217.0	1268	10.1%	233.5	2486	10.0%	225.1
	45-54	1254	10.2%	199.0	1293	10.3%	205.2	2547	10.3%	202.1
	55-64	866	7.1%	160.1	905	7.2%	162.9	1771	7.1%	161.5
	65-74	517	4.2%	170.4	540	4.3%	160.6	1057	4.3%	165.2
	75-84	317	2.6%	179.3	373	3.0%	154.9	690	2.8%	165.3
	85+	113	0.9%	171.0	171	1.4%	126.0	284	1.1%	140.8
	All ages	**12277**	**100.0%**	**268.5**	**12523**	**100.0%**	**277.1**	**24800**	**100.0%**	**272.0**
OVEREXERTION	<1	66	0.3%	98.6	96	0.4%	150.5	162	0.3%	123.9
	1-4	876	3.9%	322.9	1357	5.7%	524.9	2233	4.8%	421.5
	5-14	2551	11.3%	394.3	2936	12.3%	474.9	5487	11.8%	433.7
	15-24	5599	24.8%	833.6	4388	18.3%	685.7	9987	21.5%	761.5
	25-34	4673	20.7%	742.0	4850	20.3%	805.5	9523	20.5%	773.0
	35-44	3493	15.5%	622.4	3636	15.2%	669.6	7129	15.3%	645.6
	45-54	2761	12.2%	438.1	2940	12.3%	466.5	5701	12.2%	452.3
	55-64	1397	6.2%	258.3	1722	7.2%	309.9	3119	6.7%	284.4
	65-74	689	3.0%	227.1	964	4.0%	286.6	1653	3.6%	258.4
	75-84	354	1.6%	200.2	708	3.0%	294.1	1062	2.3%	254.4
	85+	143	0.6%	216.4	353	1.5%	260.1	496	1.1%	245.8
	All ages	**22602**	**100.0%**	**502.9**	**23950**	**100.0%**	**539.5**	**46552**	**100.0%**	**522.0**
SELF-INFLICTED	1-4	0	0.0%	0.0	3	0.1%	1.2	3	0.0%	0.6
	5-14	138	5.4%	21.2	350	8.9%	56.3	488	7.5%	38.4
	15-24	1075	42.4%	161.4	1605	40.7%	253.2	2680	41.4%	206.1
	25-34	532	21.0%	84.1	762	19.3%	125.5	1294	20.0%	104.3
	35-44	387	15.3%	68.9	621	15.8%	113.9	1008	15.6%	91.1
	45-54	251	9.9%	39.7	390	9.9%	61.6	641	9.9%	50.6
	55-64	108	4.3%	19.9	158	4.0%	28.3	266	4.1%	24.1
	65-74	20	0.8%	6.6	31	0.8%	9.2	51	0.8%	7.9
	75-84	16	0.6%	9.0	15	0.4%	6.2	31	0.5%	7.4
	85+	7	0.3%	10.5	7	0.2%	5.2	14	0.2%	7.0
	All ages	**2534**	**100.0%**	**56.1**	**3942**	**100.0%**	**90.6**	**6476**	**100.0%**	**73.0**

Table 10 (Cont.): Injury-related emergency department (ED) visits, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
NEC	<1	57	1.2%	85.1	82	1.8%	128.6	139	1.5%	106.3
	1-4	375	7.7%	138.2	334	7.4%	129.2	709	7.6%	133.8
	5-14	760	15.7%	117.5	622	13.7%	100.6	1382	14.8%	109.2
	15-24	1025	21.2%	152.6	864	19.1%	135.0	1889	20.2%	144.0
	25-34	841	17.4%	133.5	800	17.7%	132.9	1641	17.5%	133.2
	35-44	583	12.0%	103.9	559	12.4%	102.9	1142	12.2%	103.4
	45-54	500	10.3%	79.4	461	10.2%	73.2	961	10.3%	76.3
	55-64	327	6.8%	60.5	307	6.8%	55.3	634	6.8%	57.8
	65-74	176	3.6%	58.0	187	4.1%	55.6	363	3.9%	56.7
	75-84	126	2.6%	71.3	182	4.0%	75.6	308	3.3%	73.8
	85+	70	1.4%	106.0	126	2.8%	92.9	196	2.1%	97.1
	All ages	4840	100.0%	106.7	4524	100.0%	100.2	9364	100.0%	103.5
NOT SPECIFIED	<1	279	1.8%	416.7	229	1.3%	359.1	508	1.6%	388.6
	1-4	1543	10.1%	568.8	1216	7.1%	470.4	2759	8.5%	520.8
	5-14	1683	11.0%	260.1	1391	8.1%	225.0	3074	9.5%	243.0
	15-24	2360	15.4%	351.4	2716	15.8%	424.4	5076	15.6%	387.0
	25-34	2418	15.8%	383.9	3009	17.5%	499.7	5427	16.7%	440.5
	35-44	1935	12.6%	344.8	2284	13.3%	420.6	4219	13.0%	382.1
	45-54	1945	12.7%	308.7	2202	12.8%	349.4	4147	12.8%	329.0
	55-64	1360	8.9%	251.4	1448	8.4%	260.6	2808	8.6%	256.1
	65-74	826	5.4%	272.2	944	5.5%	280.7	1770	5.4%	276.7
	75-84	624	4.1%	353.0	973	5.7%	404.2	1597	4.9%	382.5
	85+	345	2.3%	522.2	788	4.6%	580.7	1133	3.5%	561.5
	All ages	15318	100.0%	337.4	17200	100.0%	374.2	32518	100.0%	356.0
ASSAULT	<1	16	0.1%	24.0	16	0.2%	25.2	32	0.1%	24.6
	1-4	52	0.4%	19.3	56	0.6%	21.8	108	0.5%	20.5
	5-14	699	5.8%	107.5	368	3.8%	59.2	1067	4.9%	83.9
	15-24	4590	38.0%	689.0	3604	37.5%	568.5	8194	37.8%	630.3
	25-34	2952	24.4%	466.5	2804	29.2%	461.6	5756	26.6%	464.1
	35-44	1730	14.3%	308.1	1471	15.3%	269.8	3201	14.8%	289.3
	45-54	1443	12.0%	228.0	944	9.8%	149.2	2387	11.0%	188.6
	55-64	484	4.0%	89.0	260	2.7%	46.6	744	3.4%	67.5
	65-74	72	0.6%	23.6	44	0.5%	13.0	116	0.5%	18.1
	75-84	26	0.2%	14.6	20	0.2%	8.3	46	0.2%	11.0
	85+	11	0.1%	16.5	13	0.1%	9.7	24	0.1%	12.0
	All ages	12075	100.0%	266.7	9600	100.0%	221.1	21675	100.0%	224.2

Table 10 (Cont.): Injury-related emergency department (ED) visits, percentages, and rates, by cause, age group, and gender, Nebraska residents, 2009-2013

CAUSE	Age Group	Males			Females			Total		
		N	%	Rate	N	%	Rate	N	%	Rate
UNDETERMINED	<1	13	1.0%	19.5	13	1.1%	20.5	26	1.1%	20.0
	1-4	45	3.4%	16.7	40	3.5%	15.6	85	3.4%	16.1
	5-14	87	6.5%	13.4	93	8.2%	15.0	180	7.3%	14.2
	15-24	455	34.1%	68.3	361	31.7%	57.0	816	33.0%	62.8
	25-34	295	22.1%	46.6	213	18.7%	35.1	508	20.6%	41.0
	35-44	165	12.4%	29.4	155	13.6%	28.4	320	13.0%	28.9
	45-54	152	11.4%	24.0	140	12.3%	22.1	292	11.8%	23.1
	55-64	73	5.5%	13.4	62	5.4%	11.1	135	5.5%	12.3
	65-74	18	1.4%	5.9	27	2.4%	8.0	45	1.8%	7.0
	75-84	21	1.6%	11.8	26	2.3%	10.8	47	1.9%	11.2
	85+	9	0.7%	13.5	8	0.7%	6.0	17	0.7%	8.5
	All ages	**1333**	**100.0%**	**29.2**	**1138**	**100.0%**	**25.7**	**2471**	**100.0%**	**27.5**
OTHER SPECIFIED	<1	326	1.6%	486.9	297	2.2%	465.7	623	1.9%	476.6
	1-4	3285	16.5%	1210.9	3005	22.3%	1162.4	6290	18.8%	1187.3
	5-14	3234	16.2%	499.8	2492	18.5%	403.1	5726	17.1%	452.5
	15-24	2830	14.2%	421.4	1803	13.4%	281.8	4633	13.9%	353.2
	25-34	2835	14.2%	450.1	1516	11.2%	251.8	4351	13.0%	353.2
	35-44	2268	11.4%	404.1	1145	8.5%	210.9	3413	10.2%	309.1
	45-54	2110	10.6%	334.8	1154	8.6%	183.1	3264	9.8%	259.0
	55-64	1475	7.4%	272.7	776	5.8%	139.6	2251	6.7%	205.3
	65-74	805	4.0%	265.3	523	3.9%	155.5	1328	4.0%	207.6
	75-84	522	2.6%	295.3	417	3.1%	173.2	939	2.8%	224.9
	85+	238	1.2%	360.2	352	2.6%	259.4	590	1.8%	292.4
	All ages	**19928**	**100.0%**	**436.9**	**13480**	**100.0%**	**295.8**	**33408**	**100.0%**	**366.0**
MOTOR VEHICLE TRAFFIC	<1	207	0.8%	309.2	170	0.5%	266.6	377	0.7%	288.4
	1-4	743	2.9%	273.9	718	2.3%	277.7	1461	2.6%	275.8
	5-14	2096	8.3%	323.9	2232	7.1%	361.0	4328	7.6%	342.1
	15-24	7635	30.2%	1136.8	10341	32.7%	1616.0	17976	31.6%	1370.6
	25-34	4936	19.5%	783.7	6434	20.3%	1068.5	11370	20.0%	922.9
	35-44	3301	13.1%	588.2	4072	12.9%	749.9	7373	13.0%	667.7
	45-54	2888	11.4%	458.3	3450	10.9%	547.4	6338	11.1%	502.9
	55-64	1875	7.4%	346.6	2218	7.0%	399.1	4093	7.2%	373.2
	65-74	881	3.5%	290.4	1096	3.5%	325.9	1977	3.5%	309.0
	75-84	517	2.0%	292.4	650	2.1%	270.0	1167	2.1%	279.5
	85+	197	0.8%	298.2	244	0.8%	179.8	441	0.8%	218.6
	All ages	**25276**	**100.0%**	**555.0**	**31625**	**100.0%**	**707.5**	**56901**	**100.0%**	**629.0**

Source: NE vital statistics data, 2009-2013

Note: rates are per 100,000 people and are age-adjusted to the 2000 U.S. standard population

Table 11: Injury-related trauma records and percentages, by cause and age group, Nebraska residents, 2009-2013

Primary Cause of Injury	Age Groups (years) < 1	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+	All Ages	%
Unintentional	**155**	**735**	**1779**	**5367**	**3943**	**3187**	**4134**	**3917**	**3281**	**4431**	**4452**	**35381**	**100.0%**
Fall	74	336	502	624	669	773	1441	2004	2227	3740	4144	16534	46.7%
MVT	26	134	469	2544	1492	1090	1258	990	608	400	172	9183	26.0%
Transport, not MVT	2	22	234	503	340	248	338	229	113	63	29	2121	6.0%
Struck by, against	13	65	194	274	149	121	136	113	66	42	25	1198	3.4%
Machinery	1	6	16	78	92	93	129	92	57	39	8	611	1.7%
Cut/pierce	0	10	33	92	100	76	68	45	33	13	3	473	1.3%
Natural/environmental	5	49	60	55	54	69	86	79	50	35	9	551	1.6%
Pedal cyclist, not MVT	1	5	128	63	45	42	98	72	23	12	1	490	1.4%
Fire/burn	4	22	16	30	21	29	20	28	14	9	0	193	0.5%
Overexertion	0	1	7	11	16	19	18	17	9	13	3	114	0.3%
Firearm	0	4	14	71	37	24	24	17	7	0	0	198	0.6%
Pedestrian, not MVT	0	8	10	28	17	15	19	13	1	7	5	123	0.3%
Drowning/submersion	2	12	10	4	6	6	5	2	0	0	0	47	0.1%
Suffocation	1	1	0	0	1	0	0	0	2	0	0	5	0.0%
Other specified and classifiable	3	20	32	61	95	80	73	60	25	16	8	473	1.3%
Other specified, not elsewhere classifable	0	1	5	8	5	7	7	1	2	2	3	41	0.1%
Unspecified	4	6	8	13	7	10	13	11	10	13	31	126	0.4%
Intentional	**19**	**29**	**41**	**906**	**797**	**485**	**401**	**144**	**32**	**26**	**11**	**2891**	**100.0%**
Self-Inflicted	1	0	13	119	89	77	74	33	10	15	8	439	15.2%
Assault	18	29	28	787	708	408	327	111	22	11	3	2452	84.8%

Source: Nebraska Trauma Registry data, 2009-2013

Note: Due to the trauma registry case inclusion criteria, Poisonings are not represented here.