

**1999 CSTE ANNUAL MEETING
CSTE POSITION STATEMENT # INJ - 5**

COMMITTEE: Injury

TITLE: Inclusion of Firearm Injury Indicators in the National Public Health Surveillance System (NPHSS)

POSITION TO BE ADOPTED:

The following firearm injury indicators should be put under nationwide surveillance as part of the National Public Health Surveillance System (NPHSS):

1. Fatal firearm injuries: surveillance should be based on death certificate data using ICD-9 External Cause of Injury Codes E922.0-.3,.9, E955.0-.4, E965.0-.4, E985.0-.4, or E970.
2. Non-fatal firearm injuries: surveillance should be based on statewide hospital discharge data using ICD-9CM External Cause of Injury Codes E922.0-.3,.9, E955.0-.4, E965.0-.4, E985.0-.4, or E970.

BACKGROUND AND JUSTIFICATION:

Firearm-related injuries are a leading cause of preventable mortality and morbidity, annually accounting for more than 35,000 deaths, 40,000 hospitalizations, and thousands of permanently disabling head and spinal cord injuries each year. In several states and communities firearms have surpassed motor vehicle crashes as the leading cause of injury death. Non-fatal firearm injuries also cause substantial morbidity.

This position statement is complementary to the following previously passed CSTE position statements endorsing the need for firearm-related injury data collection: “Intentional Injury Surveillance & Epidemiology” (1992), and “Firearm Injuries and Deaths” (1993).

GOALS FOR SURVEILLANCE:

- Estimate the number of fatal and non-fatal firearm injuries
- Monitor trends over time
- Identify high risk groups and geographic areas, to target interventions and prevention programs
- Document effectiveness of current interventions
- Determine the need for further resources to support firearm injury prevention

DATA TO BE COLLECTED:

1. Fatal firearm injuries using death certificates with ICD-9 E-codes E922.0-.3,.9, E955.0-.4, E965.0-.4, E985.0-.4, or E970. Corresponding codes from ICD-10 should be used when appropriate.
2. Non-fatal firearm injuries using statewide hospital discharge data with ICD-9CM E-codes

E922.0-.3,.9, E955.0-.4, E965.0-.4, E985.0-.4, or E970. Corresponding codes from ICD-10CM should be used when appropriate.

JUSTIFICATION FOR INDICATOR CHOSEN:

Deaths and hospitalizations are the most serious health outcomes resulting from firearm-related injuries. Statewide death certificate data are available in all states. Statewide hospital discharge data are readily accessible in most states and potentially available in all. The routine use of E-codes is increasing and even incomplete E-code information is still potentially valuable.

While some firearm injuries will not result in hospitalization or death, no data source capable of picking up those injuries is widely enough available to warrant recommending its routine use in nationwide surveillance at this time.

Deaths and hospitalizations should be aggregated separately. In some situations, however, it may be desirable to combine deaths and hospitalizations to estimate the total incidence of this type of injury. In that setting, hospital discharge records with a discharge disposition of death should be deleted from the hospitalized count, to minimize double counting of records, or, if linkage of hospital discharge and death records is possible, aggregation of cases should be done in a way that avoids double counting of cases.

States with more resources and access to more detailed information are strongly encouraged to collect, organize and use that information. While the use of these other data sources should be encouraged, at this time they are not widely enough available to recommend their routine use for surveillance in all states. Efforts to integrate these data sets should be encouraged.

PROPOSED SURVEILLANCE DEFINITIONS:

A case of **firearm-related injury** is defined as any projectile injury caused by a firearm.

A **firearm** is defined as a gun that uses an explosive charge to propel projectiles. Note that this definition does not include injuries from non-powder guns (e.g., guns using a burst of air to fire their projectiles).

INFORMATION SYSTEMS TO COLLECT AND TRANSMIT INFORMATION:

1. Vital Records (death certificates)
2. Statewide hospital discharge data systems

TEMPORARY/PERMANENT:

Permanent

PARTNER ORGANIZATIONS:

State and Territorial Injury Prevention Directors Association (STIPDA)

National Center for Injury Prevention and Control, Centers for Disease Control (NCIPC)