



FALL EMERGENCY DEPARTMENT VISIT INDICATOR 2

Nonfatal Fall-related Hip Fracture Emergency Department Visits in Persons Aged 65 Years and Older

Numerator:

- Nonfatal unintentional fall-related ED visits identified in the previous indicator (nonfatal unintentional fall ED visits) in people 65 years and older that have one of the following ICD-10-CM diagnosis codes in any field.

Codes* for Nonfatal Fall-related Hip Fractures in Persons Aged 65 Years and Older

S72.0	Fracture of head and neck of femur
S72.1	Pertrochanteric fracture
S72.2	Subtrochanteric fracture
T84.040**	Periprosthetic fracture around internal prosthetic right hip joint
T84.041**	Periprosthetic fracture around internal prosthetic left hip joint
M97.0**	Periprosthetic fracture around internal prosthetic hip joint

*7th character of A, B, C, or missing (reflects initial encounter, active treatment)

** T84.04 was retired and replaced by M97.0 in the FY2017 version of ICD-10-CM which went into effect on Oct 1, 2016

Denominator:

- Midyear population of people 65 years and older for the calendar year under surveillance obtained from the U.S. Census Bureau or suitable alternative.

Measures of frequency:

- Annual number of ED visits, by age group and sex.
- Annual age-adjusted rates, overall and by sex, standardized by the direct method to the year 2000 standard U.S. population.^{2,11}

Period for case definition:

- Calendar year based on date of ED discharge.

Indicator notes:

- The Injury Surveillance Indicator for use with ED data includes cases with either an injury diagnosis code or an external cause of injury code in any field. This broad definition results in the capture of all cases of injury or potential injury seen in the ED.
- This indicator does not include cases that were admitted to the hospital.

Limitations of data source:

- Injuries that result in ED visits only represent a portion of the overall burden of injury. These injuries should be considered in the context of both less- and more-severe injuries.
- The accuracy of indicators based on codes found in ED data are limited by the completeness and quality of coding. The overall completeness of external-cause-of-injury coding is of particular interest and should be reviewed in conjunction with the indicator.

This document was developed as part of the CSTE ICD-10-CM Injury Surveillance Toolkit.

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Updated: 2/28/20 (C added as a 7th character)