

EMERGENCY DEPARTMENT AND URGENT CARE VISITS FOR HEAT-RELATED

ILLNESS IN VIRGINIA

July 17-19, 2020

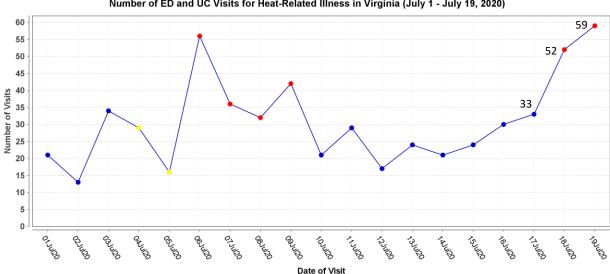
Background

At the time of this report, the Virginia Department of Health (VDH) received data on visits to 84 acute care hospital emergency departments (EDs), 18 free-standing EDs, and 61 urgent care centers (UCs) in Virginia for purposes of public health surveillance. This report characterizes ED and UC visit trends for heat-related illness.

See page 3 for data sources and case definitions used in this report.

Data Summary

A total of 144 ED and UC visits for heat-related illness occurred between July 17-19, with 9% admitted to the hospital. The graph below displays the daily number of heat-related visits in Virginia between July 1 and July 19, 2020.





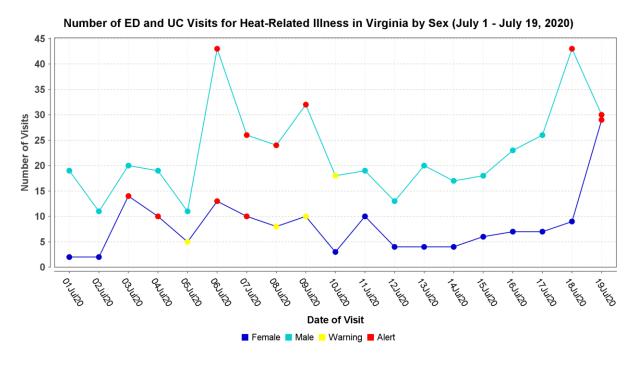


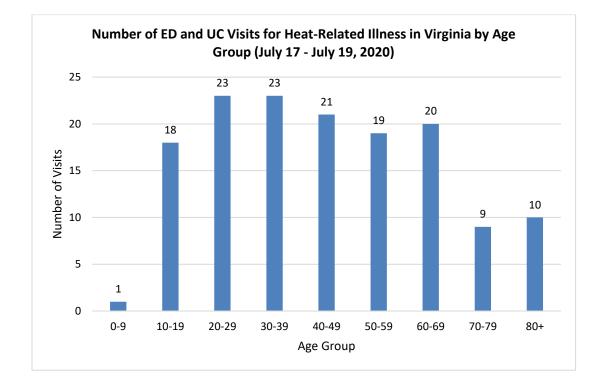
Number of ED and UC Visits for Heat-Related Illness in Virginia by Discharge Type (July 17-19, 2020)	
Discharge Type	Number of Visits (%)
Admitted	13 (9%)
Discharged to Home	130 (90%)
Not Reported	1 (1%)

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Both males and females displayed a significant increase in heat-related visits but visits among **females** doubled on July 19 compared to the previous day. The largest proportion of visits by age were among adults **20-29 years old and 30-39** (16%, N=23 for both age groups) followed by ages 40-49 (15%). The graphs below show ED and UC heat-related illness visits in Virginia by sex and age group.

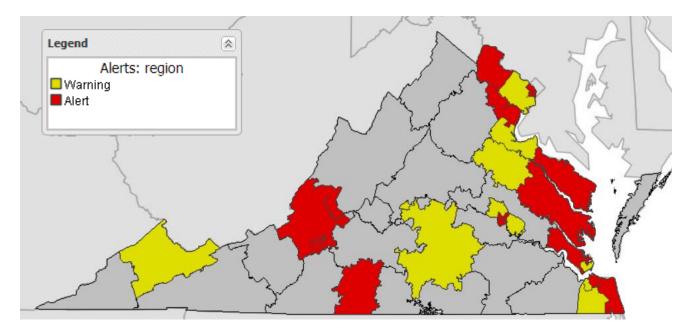




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The map below displays <u>VDH Health Districts</u> with significant increases in heat-related visits on July 17-19 compared to baseline levels. **20 VDH Health Districts** (out of 35) experienced elevated levels for heatrelated illness (red alerts: p-value < 0.01; yellow warning: p-value < 0.05).



Health Districts with elevated visits include 7 in the Eastern Region (Chesapeake, Hampton, Norfolk, Peninsula, Portsmouth, Three Rivers, Virginia Beach), all 5 health districts in the Northern Region (Alexandria, Arlington, Fairfax, Loudoun, Prince William), 4 in the Southwest (Alleghany, Cumberland Plateau, Pittsylvania-Danville, Roanoke City), 1 in the Northwest (Rappahannock), and 3 in Central (Henrico, Piedmont, Richmond City).

Data Sources

VDH analyzes chief complaints and discharge diagnoses of ED and UC visits to identify and monitor issues of public health concern across Virginia. The chief complaint is a free-text field capturing the patient's primary reason for seeking medical care as interpreted by the ED registration staff. The discharge diagnosis is a coded field that uses standardized values outlined by the International Classification of Diseases (ICD) 10th Revision and SNOMED Clinical Terms (CT) code sets. Readers are strongly encouraged to review <u>syndromic surveillance data limitations</u> when interpreting this report.

Case Definitions

ED and UC visits for **heat-related illness** were identified based on the <u>Heat-Related Illness Syndrome</u> <u>Query</u> definition published by the Council of State and Territorial Epidemiologists (CSTE) using the following terms for Chief Complaint and Discharge Diagnosis: *heat exhaustion; heat exposure; heat cramps; heat stroke; hyperthermia;* ICD-10 codes: *T67, X30.;* and SNOMED CT codes: *95868006, 95867001.*

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