

Injury-related Hospital Discharges

2010*

MASSACHUSETTS RESIDENTS

INJURY CAUSE	INJURY INTENT					Total Number	Percent of Total	Crude Rate per 100,000 ²
	Unintentional	Intentional		Undetermined	Other & Legal ¹			
		Self-Inflicted	Assault					
Cut/pierce	569	543	461	<7	<7	1,579	2.6	24.1
Drowning/submersion	48	0	0	0	0	48	0.1	0.7
Fall	27,395	31	<7	17	0	27,445	44.8	418.5
Fire/burn	513	28	11	7		559	0.9	8.5
<i>Fire/flare</i>	190	26	<7	7	0	225	0.4	3.4
<i>Hot object/substance burn</i>	323	<7	9	0	0	334	0.5	5.1
Firearms	29	10	273	<7	<7	320	0.5	4.9
Machinery	177					177	0.3	2.7
Natural/environmental	1,192	<7		20		1,214	2.0	18.5
<i>Dog bites</i>	180	0		0		180	0.3	2.7
<i>Other bites & stings</i>	563	0		0		563	0.9	8.6
<i>All other</i>	449	<7		20		471	0.8	7.2
Overexertion	835					835	1.4	12.7
Poisoning	2,984	3,514	<7	666	0	7,168	11.7	109.3
Struck by, against	1,262		630		12	1,904	3.1	29.0
Suffocation/hanging	656	48	<7	<7		710	1.2	10.8
Transport Injuries:	4,804	10	<7	<7		4,818	7.9	73.5
<i>Motor vehicle traffic-related</i>	3,719	10	<7	<7		3,733	6.1	56.9
<i>Occupant⁵</i>	2,439					2,439	4.0	37.2
<i>Motorcyclist</i>	498					498	0.8	7.6
<i>Pedal Cyclist</i>	145					145	0.2	2.2
<i>Pedestrian</i>	615					615	1.0	9.4
<i>Other person</i>	22					22	0.0	0.3
<i>Pedal cyclist, other</i>	460					460	0.8	7.0
<i>Pedestrian, other</i>	59					59	0.1	0.9
<i>Other transport</i>	566					566	0.9	8.6
Other specified & classifiable	2,809	11	188	<7	0	3,009	4.9	45.9
<i>Human bites</i>	43	0	48	0	0	91	0.1	1.4
<i>Non-powder guns</i>	10	<7	<7	<7	0	15	0.0	0.2
<i>Other specified & classifiable</i>	2,756	9	138	0	0	2,903	4.7	44.3
Other specified, not classifiable	1,022	150	272	76	30	1,550	2.5	23.6
Unspecified	3,490	15	158	27	<7	3,694	6.0	56.3
Adverse effects ³						3,122	5.1	47.6
Cause and Intent are not provided						3,380	5.5	51.5
TOTALS⁴	47,785	4,362	2,007	827	49	61,532	100%	938.4
RATE BY INTENT/per 100,000	728.7	66.5	30.6	12.6	0.7			

Source: Massachusetts Hospital Discharge Database, MA Division of Health Care Finance and Policy.

*All data sets from Health Care Finance and Policy are based on a fiscal year. The numbers provided here are based on fiscal year: October 1, 2009 - September 30, 2010 and will be different than numbers generated through the Department's query based system MassCHIP.

¹ Legal Intervention includes injuries resulting from police actions and operations of war.

² Counts less than 7 are suppressed and rates are not calculated. Rates that are based on counts less than twenty may be unstable.

³ Adverse Effects can be related to medical and surgical care procedures, or to the use of therapeutic substances (including allergic reactions).

⁴ Totals do not include subcategory counts. Total percentage may be less or more than 100% due to rounding, but is presented here as 100%.

⁵ Unspecified persons injured in a MV traffic crash are included in this category.

—An injury hospitalization is defined as any case having an ICD9-CM Nature of Injury Code of 800-999 assigned to any of the ICD9 diagnosis fields [cases having the following codes are excluded if no other valid ICD9-CM code is assigned: Certain Adverse Effects (995.0-995.4, 995.6,995.7, 995.86, 995.89), Complications of Surgical & Medical Care (996-999), and certain Late Effects (909.3,909.5)]

—Categories and groupings are based on a modified version of the CDC's "Recommended framework of E-code groupings for presenting injury mortality and morbidity data." This framework does not provide for intentionality for certain cause categories as indicated by gray shading.

—Injury subcategories are italicized.

—Only Massachusetts residents are included in this analysis.

—Injury hospitalization cases transferred to another acute care facility or subsequently dying in the hospital, are excluded from this analysis.

—Population data used to calculate rates are based on 2010 population estimates by the US Census Bureau. Estimated 2010 Massachusetts population is 6,557,254 Rates are per 100,000 residents.

—Data were extracted and compiled by the Injury Surveillance Program, Bureau of Health Information, Statistics, Research & Evaluation, MDPH, Revised February 2013.