

## Data Dictionary for Data Submission

# Emergency Department Visits

## National Environmental Public Health Tracking Network

Characteristic	Description
Data Source	State and Local Data Systems
Purpose	This data set will be used to calculate incidence measures for emergency department (ED) visits.
Geographic Level	The smallest geographic unit to be represented in this data set is sub-county.
Restrictions	<b>This is a restricted access data set.</b> Data will be displayed via the national public portal only when sufficient conditions have been met to protect data privacy. Only registered users will have direct access to this data set via the national secure portal.

CDC estimates the average public reporting burden for this collection of information as 80 hours per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0853).

**ENVIRONMENTAL PUBLIC HEALTH TRACKING  
DATA DICTIONARY FOR AGGREGATE DATA  
EMERGENCY DEPARTMENT (ED) VISITS**

Field Name	Field Description	Data Type	Code Scheme	Legal Values	Field Length	Optional
AGEGROUP	Five-year age group of individuals hospitalized for the condition indicated by HEALTHOUTCOMEID	Integer	1= 0-4 years 2= 5-9 years 3= 10-14 years 4= 15-19 years 5= 20-24 years 6= 25-29 years 7= 30-34 years 8= 35-39 years 9= 40-44 years 10= 45-49 years 11= 50-54 years 12= 55-59 years 13= 60-64 years 14= 65-69 years 15= 70-74 years 16= 75-79 years 17= 80-84 years 18= 85+ years 19= Unknown	1-19	2	Required

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Field Name	Field Description	Data Type	Code Scheme	Legal Values	Field Length	Optional
CensusTract	Census tract of residence	String	FIPS U=Unknown	FIPS code, U	11	Optional
COUNTY	County of residence	String	FIPS U=Unknown	00000-99999 U	5	Required
EDVISITDAY	Day of ED visit	String	dd	01-31	2	Optional
EDVISITMONTH	Month of ED visit	String	mm	01-12	2	Required
EDVISITYEAR	Year of ED visit	Integer	yyyy	20XX	4	Required
ETHNICITY	Ethnicity of individuals	Text	H=Hispanic NH=Non-Hispanic U=Unknown	H, NH, U	2	Optional

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Field Name	Field Description	Data Type	Code Scheme	Legal Values	Field Length	Optional
GeoCodingPrecision	Describe the degree of precision achieved during the geocoding process	Text	H = High precision L = Low precision U = Unknown precision C = County only S = State only	H, L, U, C, S	1	Required

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Field Name	Field Description	Data Type	Code Scheme	Legal Values	Field Length	Optional
HEALTHOUTCOMEID	Health outcome (Asthma, Carbon monoxide poisoning, or Heat stress illness)	Integer	1=Asthma 2= Acute myocardial infarction 3=Carbon monoxide poisoning 4=Heat stress illness 5 = COPD 6 = Acute respiratory infections 7 = Pneumonia 8 = All other respiratory outcomes 9 = Ischemic heart disease 10 = Cardiac arrhythmias 11 = Cerebrovascular disease 12 = Peripheral vascular disease 13 = Heart failure 14 = All other circulatory outcomes 15 = Cold illness 16 = Hyperthermia 17 = Renal failure	1-20	1	Required

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Field Name	Field Description	Data Type	Code Scheme	Legal Values	Field Length	Optional
INCIDENTCOUNTFIRE (For CO ED Visits ONLY)	Number of unintentional fire-related CO poisoning ED visits	Integer	nnnnnn If -999= Count is recorded in INCIDENTCOUNTUNKNO WN	0 to 999999, -999	6	Required
INCIDENTCOUNTNONFIRE (For CO ED Visits ONLY)	Number of unintentional, non-fire related CO poisoning ED visits	Integer	nnnnnn If -999= Count is recorded in INCIDENTCOUNTUNKNO WN	0 to 999999, -999	6	Required
INCIDENTCOUNTUNKNOWN (For CO ED Visits ONLY)	Number of CO poisoning ED visits where the cause was undetermined	Integer	nnnnnn	0 to 999999	6	Required
VISITS	Number of ED visits	Integer	nnnnn	0000-99999	5	Required
RACE	Race group of individual admitted	Text	W=White B=Black O=Other U=Unknown	W, B, O, U	1	Optional
SEX	Sex of individuals admitted	Text	M=Male F=Female U=Unknown	M, F, U	1	Required
STATE (For Header section only; Not a data element)	Patient's state of residence	String	FIPS	Valid state FIPS code	2	Required

