



Suspected_benzo_OD_n
Total_ED_visits
Total_hosp_visits

collection of information is estimated at 3 hours per response, including the time for reviewing instructions, searching existing data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person may not 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 Reports Clearance Officer, 1600 Clifton Road NW, MS D-74, Atlanta, GA 30333.

<b>Definition</b>
The two-digit state abbreviation (e.g., GA)
The four digit calendar year (e.g., 2019)
The full name of the month (e.g., January)
Includes "a_Unintentional" for all unintentional and undetermined overdose intent (e.g., a 1 or 4 in the 6th or 7th ICD-10-CM code character) and "b_Self-harm" for all intentional self-harm overdose intent (e.g., a 2 in the 6th or 7th ICD-10-CM code character). <i>Please see a definition guidance for hospital/billing data to see all relevant ICD-9-CM and ICD-10-CM overdose codes split by manner/intent.</i>
Three categories: male, female, missing
Eleven categories: 0-10 years, 11-14 years, 15-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65-74 years, 75-84 years, 85 years and up, missing
Five categories: American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, White
Two categories: Hispanic or Latino, not Hispanic or Latino
Exact name of the County within each jurisdiction (e.g., Adams). <i>Please exclude the word "county" after the county name (e.g., Adams County). Note that county is county of patient residence.</i>
Five character FIPS code for the County within each jurisdiction where the first two digits are the state code and the last three digits are the county code (e.g., 12345). <i>Note that county is county of patient residence.</i>
The number of ED visits/hospitalizations for each month within the required quarter related to a suspected drug overdose. For 2019 data is due April 13, 2020 and must include data listed separately for October, November, and December.
The number of ED visits/hospitalizations for each month within the required quarter related to a suspected opioid overdose. For 2019 data is due April 13, 2020 and must include data listed separately for October, November, and December. Suspected_opioid_OD_n is nested within and should be a subset of suspected_drug_OD_n.
The number of ED visits/hospitalizations for each month within the required quarter related to a suspected heroin overdose. For 2019 data is due April 13, 2020 and must include data listed separately for October, November, and December. Suspected_heroin_OD_n is nested within and should be a subset of suspected_opioid_OD_n and suspected_drug_OD_n.
The number of ED visits/hospitalizations for each month within the required quarter related to a suspected stimulant overdose. For 2019 data is due April 13, 2020 and must include data listed separately for October, November, and December. Suspected_stimulant_OD_n is nested within and should be a subset of suspected_drug_OD_n.
The number of ED visits for each required month related to a suspected fentanyl overdose. Suspected_fentanyl_OD_n is nested within and should be a subset of suspected_opioid_OD_n and suspected_drug_OD_n.
The number of ED visits for each required month related to a suspected cocaine overdose. Suspected_cocaine_OD_n is nested within and should be a subset of suspected_stimulant_OD_n and suspected_drug_OD_n.
The number of ED visits for each required month related to a suspected methamphetamine overdose. Suspected_methamphetamine_OD_n is nested within and should be a subset of suspected_stimulant_OD_n and suspected_drug_OD_n.

The number of ED visits for each required month related to a suspected benzodiazepine overdose. Suspected\_benzo\_OD\_n is should be a subset of suspected\_drug\_OD\_n.

The total number of ED visits for each month within the required quarter that were included in the analysis.

The total number of hospitalizations for each month within the required quarter that were included in the analysis.

**Provide metadata on quarterly hospital discharge data tracking ED visits involving suspected drug, opioid, heroin, fentanyl, all stimulant, cocaine, methamphetamine, and**

1. Approximately what percent of ED visits in your state or jurisdiction were included in your analysis? (Enter a percentage such as "75%")

2. How many total facilities are included in your analysis for this data submission? (Enter a number such as "22")

3. Over 90% of hospitals report data within (Check response):

< 1 month

< 3 months

< 6 months

< 1 year

< 2 year

> 2 year

Unknown

4. What was the maximum number of diagnosis codes (e.g., ICD-10-CM) entered for a single ED visit in this data submission? (Enter a number such as "10")

5. What was the mean number of diagnosis codes (e.g., ICD-10-CM) that were entered for all ED visits in this data submissions? (Enter a number such as "8")

6. Report the percent of all ED visits in this data submission that have no diagnosis codes (e.g., ICD-10-CM). (Enter a percentage such as "5%")

7. Please identify and describe any major issues that impact the quality of data shared during this data submission time period.

*Please briefly describe the problem*

8. Who should CDC contact with questions about this data report?

Name:

Email:









































































































































































































































































**Describe and provide metadata on quarterly hospital discharge data tracking hospitalizations involving suspected drug, opioid, heroin, fentanyl, all stimulant, cocaine, methamphetamine, and benzodiazepines**

1. Approximately what percent of hospitalizations in your state or jurisdiction were included in your analysis? (Enter a percentage such as "75%")

2. How many total facilities are included in your analysis for this data submission? (Enter a number such as "22")

3. Over 90% of hospitals report data within (Check response):

< 1 month

< 3 months

< 6 months

< 1 year

< 2 year

> 2 year

Unknown

4. What was the maximum number of diagnosis codes (e.g., ICD-10-CM) entered for a single hospitalization in this data submission? (Enter a number such as "10")

5. What was the mean number of diagnosis codes (e.g., ICD-10-CM) that were entered for all hospitalizations in this data submissions? (Enter a number such as "8")

6. Report the percent of all hospitalizations in this data submission that have no diagnosis codes (e.g., ICD-10-CM). (Enter a percent such as "5%")

7. Please identify and describe any major issues that impact the quality of data shared during this data submission time period.

*Please briefly describe the problem*

8. Who should CDC contact with questions about this data report?

Name:

Email:





































































































































































































































































