## **ICPSR 37121**

# Firearm Injury Surveillance Study, 1993-2014

United States Department of Health and Human Services. Centers for Disease Control and Prevention. National Center for Injury Prevention and Control

ICPSR Codebook

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# **Study Description**

#### Citation

#### **Title Statement**

Title: Firearm Injury Surveillance Study, 1993-2014

Identification No.: 37121

#### **Responsibility Statement**

Authoring Entity: U.S. Department of Health and Human Services. Centers for Disease Control and Prevention. National Center for Injury Prevention and Control

#### **Production Statement**

Producer: Inter-university Consortium for Political and Social Research

Place of Production: Ann Arbor, MI: Inter-university Consortium for Political and Social Research

Funding Agency: U.S. Department of Health and Human Services. Centers for Disease Control and Prevention. National Center for Injury Prevention and Control

#### **Distribution Statement**

Distributor: Inter-university Consortium for Political and Social Research

#### **Series Statement**

Series Name: National Electronic Injury Surveillance System (NEISS)

Series Information: In 1992, the National Center for Injury Prevention and Control (NCIPC), a unit of the Centers for Disease Control and Prevention (CDC), established an interagency agreement with the U.S. Consumer Product Safety Commission (CPSC) to begin collecting data on nonfatal firearm-related injuries by using the National Electronic Injury Surveillance System (NEISS), the primary data system of CPSC. This ongoing special study is commonly called the "CDC Firearm Injury Surveillance Study". These data provide the basis for national estimates of nonfatal firearm-related injuries and nonfatal BB/pellet gun-related injuries treated in hospital emergency departments in the United States. Beginning in July 2000, NCIPC, in collaboration with CPSC, expanded NEISS to collect data on all types and causes of injuries treated in a representative sample of hospitals. This system is called the "NEISS All Injury Program (NEISS AIP)". These data provide the basis for national estimates of all types of nonfatal injuries treated in hospital emergency departments in the United States.

#### **Bibliographic Citation**

U.S. Dept. of Health and Human Services, Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, and United States Consumer Product Safety Commission. Firearm Injury Surveillance Study, 1993-2014 [Computer file]. ICPSR36762-v1. Atlanta, GA: U.S. Dept. of Health and Human Services, Centers for Disease Control and Prevention, National Center for Injury Prevention and Control [producer] Ann Arbor MI: Inter-university Consortium for Political and Social Research [distributor].

#### **Study Scope**

#### **Subject Information**

Keyword(s): accidents, medical care, nonfatal injuries, firearms, handguns, product safety, public health, public safety

Topic Classification(s): Social Institutions and Behavior, Crime and the Criminal Justice System

#### **Abstract**

These data were collected using the National Electronic Injury Surveillance System (NEISS), the primary data system of the United States Consumer Product Safety Commission (CPSC). CPSC began operating NEISS in 1972 to monitor product-related injuries treated in United States hospital emergency departments (EDs). In June 1992, the National Center for Injury Prevention and Control (NCIPC), within the Centers for Disease Control and Prevention, established an interagency agreement with CPSC to begin collecting data on nonfatal firearm-related injuries in order to monitor the incidents and the characteristics of persons with nonfatal firearm-related injuries treated in United States hospital EDs over time. This dataset represents all nonfatal firearm-related injuries (i.e., injuries associated with powder-charged guns) and all nonfatal BB and pellet gun-related injuries reported through NEISS from 1993 through 2012. The cases consist of initial ED visits for treatment of the injuries. Cases were reported even if the patients subsequently died. Secondary visits and transfers from other hospitals were excluded. Information is available on injury diagnosis, firearm type, use of drugs or alcohol, criminal incident, and locale of the incident. Demographic information includes age, sex, and race of the injured person.

#### **Summary Data Description**

Time Period: 1993 - 2014

Date(s) of Collection: 1993 - 2014

Country: United States

Unit of Analysis: Nonfatal firearm-related injury incidents

Universe: United States hospitals providing emergency services

Kind of Data: Administrative records data

#### **Notes**

#### How do I identify nonfatal firearm-related injuries or BB and pellet gun-related injuries?

The data set has four indicator variables to aid the user in identifying nonfatal firearm-related injuries and nonfatal BB and pellet gun-related injuries. Previous studies have focused mainly on nonfatal firearm-related gunshot wounds (FA\_GSW = 1) and BB and pellet gun-related gunshot wounds (BB\_GSW = 1). However, analysts may also be interested in analyzing gun-related injuries other than gunshot wounds (FA\_NGSW = 1; BB\_NGSW = 1). Summary tables (included in the appendix) are provided on the annual weighted estimates of nonfatal firearm-related gunshot wounds overall and by selected characteristics of injured persons. Analysts should run computer programs to replicate the numbers in these tables to provide assurance that they are accurately reading the data set.

#### What are the limitations of these Data

These data have been reviewed and edited carefully by CPSC and CDC for consistency and valid codes. However, analysts need to understand that these are surveillance data. There may still be some minor inconsistency in coding. Hospital coders were instructed to code only from information provided in the medical record (e.g., the ED record, EMS report, doctor's notes and nurse's notes). Narratives are taken verbatim from the medical record. Some of the variables defining circumstances of injury have a relatively high proportion of missing data. This should be taken into consideration in analysis and interpretation of the data.

#### **Methodology and Processing**

#### **Data Collection Methodology**

Time Method: Cross-section

Data Collector: U.S. Department of Health and Human Services. Centers for Disease Control and Prevention. National Center for Injury Prevention and Control.

Frequency of Data Collection: Daily

Sampling Procedure:

Sampling

The sample design of NEISS is a stratified, probability sample of all United States hospitals that had at least six beds and provided 24-hour emergency services. There were four hospital-sized strata (defined as very large, large, medium, and small, based on the number of annual ED visits) and one children's hospital stratum. From 1993 through 1996, there were 91 NEISS hospital EDs in the sample. In 1997, the sampling frame was updated so that in 1997 through 1999, the sample included 101 NEISS hospital EDs. In 2000-2001, one NEISS hospital dropped out of the system, so there were 100 NEISS hospital EDs in the sample. In 2002, another hospital dropped out of the system, so there were 99 NEISS hospital EDs in the sampling frame. In 1997, CPSC collected firearm-related cases using the "old" and "new" NEISS hospital samples for a nine-month period. This dataset includes data from the "new" sample. The overlapping "old" sample is not included. Comparisons of weighted estimates based on the "old" and "new" samples indicated a difference of about 1 percent in the overall national estimate using these samples. The characteristics of firearm-related cases from these two overlapping samples were also very similar.

#### Weighting:

#### Do I need to use the sample weights in analyzing the data?

Yes, the sample weights are essential for computing the national estimates. Each sample weight (WT\_C) represents the inverse of the probability of selection of the case. These sample weights have been rounded off to the nearest whole number. The sample weights are computed monthly and are adjusted for non-response. The sample weights also have a post-stratification adjustment to account for changes in the annual number of emergency department visits in U.S. hospitals. The sum of these weights over the group or subgroup of interest will provide national estimates of injured persons treated in US hospital EDs.

#### **Data Appraisal Information**

Estimates of Sampling Error:

#### How do I calculate standard errors of the national estimates?

SUDAAN can be used to generate relative standard errors and 95% confidence intervals. There are variables on the data set that define the hospital stratum (STRATUM), primary sampling unit (PSU) and sample weight (WT\_C) for specification in SUDAAN. The Design statement in SUDAAN should be specified as "with replacement" (i.e., WR).

In the analysis of complex sample survey design data, such as NEISS, using SUDAAN, it is possible that one or more primary sampling units (hospitals) may have a zero count for the specific injury (e.g., firearm-related injury) being analyzed. In such an event, SUDAAN doesn't recognize that the hospital with missing cases belongs in the sampling frame because there is no data present for that PSU. Each missing PSU results in one fewer degrees of freedom (df) which must be accounted for in order to have the appropriate number of df's. A dummy record can be included in the data to compensate for each missing PSU. The record need only contain the missing PSU's number along with a weight that is assigned a very small value; say, 0.0001. The effect of this is the correct computation of the df's as the number of PSU's in the sampling frame minus the number of strata. (Example: With a sampling frame of 100 hospitals and 5 strata, the df's are 95.) very small weight has no other effect on the results; it is merely a tool to compute the correct number of df's.

In the case of firearm-related injuries captured using NEISS, there are a few NEISS hospitals each year that did not report cases. Therefore, in order to get the correct degrees of freedom (which is 100 -5 strata = 95) using SUDAAN, the analyst must enter a dummy record for each missing PSU in order to compute appropriate standard errors of national estimates of nonfatal firearm-related injuries in the US.

The following Table shows the correct degrees of freedom  $(\mathrm{df})$  by year

for computing standard errors of national estimates of firearm-related injuries by year. We have provided a SAS program with input statements and dummy PSU files. An analyst can modify it to obtain variance estimates. It has two sample SAS variance programs?one using SUDAAN and the other using PROC SURVEYMEANS. These programs should give similar standard errors of national estimates using the NEISS firearm injury surveillance data.

Table. Number of PSUs in the NEISS sampling frame and degrees of freedom for estimating standard errors of national estimates of firearm-related and BB/pellet gun-related injuries.

YEAR	PSUs	in	sampling	frame	df
2014		86	5		81
2013		87	7		82
2012		91	L		86
2011		91	L		86
2010		95	5		90
2009		93	3		88
2008		95	5		90
2007		96	5		91
2006		96	5		91
2005		97	7		92
2004		97	7		92
2003		98	3		93
2002		99	)		94
2001		10	00		95
2000		10	00		95
1999		10	)1		96
1998		10	)1		96
1997		10	)1		96
1996		91	L		87
1995		91	L		87
1994		91	L		87
1993		91	L		87

Other Forms of Data Appraisal:

#### Was information on model/make and caliber of the gun collected?

This type of information was obtained only on a small number of cases and, therefore, were not included on the data set. These data were helpful in verifying coded data on type of firearm used. Also, confidentiality regulations of NEISS required CDC to purge all names of manufacturers, hospitals, businesses and products from the narratives prior to release of the data.

#### Are these purged narratives useful for research?

Yes, these purged narrative (CMTX1 combined with CMTX2) still have useful data on the circumstances of the injury incident. Analysts may want to create additional data elements and code sets using these narratives for more detailed studies of interest.

# Are the nonfatal firearm-related injury estimates in WISQARS different from estimates obtained from the Firearm Injury Surveillance Study? If so, why?

Yes, estimates from WISQARS are different from what you will obtain when analyzing the Firearm Injury Surveillance Study data. Nonfatal firearm-related and BB/pellet gun-related injury estimates can be obtained using Centers for Disease Control and Preventionis Web-based Injury Statistics Query and Reporting System (WISQARS) Available from URL: www.cdc.gov/ncipc/wisqars. WISQARS provides nonfatal firearm-related injury and BB/pellet gun-related injury data from the National Electronic Injury Surveillance System All Injury Program from 2000 through 2014. The estimates from WISQARS will be similar to those from the NEISS Firearm Injury

Surveillance Study, but will not match perfectly. This is because the estimates provided in WISQARS are based on a nationally representative subsample of the NEISS hospitals while the NEISS Firearm Injury Surveillance Study is based on all NEISS hospitals. You will also notice that for nonfatal firearm-related injury data provided in WISQARS, intent of injury categories are presented as assault, self-harm, legal intervention, and unintentional/undetermined intent combined. Whereas, for the Firearm Injury Surveillance Study, intent of injury categories are assault, self-harm, legal intervention, unintentional, and undetermined intent (i.e., unintentional and undetermined intent categories are separated). For this reason and because there are more cases reported, the Firearm Injury Surveillance Study is better for gun-related injury research purposes.

#### **Data Access**

#### **Dataset Availability**

Location: Inter-university Consortium for Political and Social Research

Extent of Collection: 1 data file + machine-readable documentation (PDF) + SAS setup file(s) + SPSS setup file(s) + Stata setup file(s) + SAS transport + SPSS system + Stata system + R system

#### **Other Study Description Materials**

#### Related Publication(s)

- 1. US Consumer Product Safety Commission. National Electronic Injury Surveillance System All Injury Program Sample Design and Implementation. Washington, DC: US Consumer Product Safety Commission; 2002.
- 2. US Consumer Product Safety Commission. National Electronic Injury Surveillance System 2000 Coding Manual. Washington, DC: US Consumer Product Safety Commission; 2002.
- 3. US Consumer Product Safety Commission. National Electronic Injury Surveillance System (NEISS) Firearm Injury Special Study Instruction Manual. Washington, DC: US Consumer Product Safety Commission; 1997.
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- 5. McNeill AM, Annest JL. "The Ongoing Hazard of BB and Pellet Gun-Related Injuries in the United States." Annals Emerg Med 1995;26:187-194.
- 6. Centers for Disease Control and Prevention. "BB and Pellet Gun-Related Injuries--United States, June 1992-May 1994." MMWR 1995;44(no. 49):909-913.
- 7. Sinauer N, Annest JL, Mercy JA. "Unintentional, Nonfatal Firearm-Related Injuries: A Preventable Public Health Problem." JAMA 1996;275(22):1740-1743.
- 8. Davis Y, Annest JL, Powell KE, Mercy JA. "An Evaluation of the National Electronic Injury Surveillance System for Use in Monitoring Nonfatal Firearm Injuries and Obtaining National Estimates." J Safety Res 1996;27(2):83-91.
- 9. Cherry D, Annest JL, Mercy JA, Kresnow M, Pollock DA. "Trends in Nonfatal and Fatal Firearm- Related Injury Rates in the United States, 1985-1995." Ann Emerg Med 1998;32(1):51-59.
- 10. Rand MR. "Violence-Related Injuries Treated in Hospital Emergency Departments." Washington DC: US Department of Justice, Bureau of Justice Statistics Special Report, 1997; NCJ-156921.
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- 13. Beaman V, Annest JL, Mercy JA, Kresnow M, Pollock DA. "Lethality of Firearm-Related Injuries in the United States Population."
   Ann Emerg Med 2000;35:258-266.
- 14. Hootman J., Annest JL, Mercy JA, Hartgarten S. "National Estimates of Nonfatal Firearm-Related Injuries Other Than Gunshot Wounds." Injury Prevention (December 2000).
- 15. Gotsch KE, Annest JL, Mercy JA, Ryan GW. "Surveillance of Fatal and Nonfatal Firearm-Related Injuries: United States, 1993-1998." MMWR Surveillance Summary, Vol.50, No. SS-2. (April 13, 2001).
- 16. Nguyen MH, Annest JL, Mercy JA, Ryan GW. "Trends in BB/Pellet Gun Injuries in Children and Teenagers in the United States, 1985-99." Injury Prevention 2002;8:185-191.
- 17. Eber GB, Annest JL, Mercy JA, Ryan GW. "Nonfatal and Fatal Firearm-Related Injuries among Children Aged 14 Years and Younger: United States, 1993-2000." Pediatrics 2004;113:1686-1692.
- 18. Vyrostek SB, Annest JL, Ryan GW. "Surveillance of Fatal and Nonfatal Injuries, United States, 2001." MMWR Surveillance Summary, Vol. 53, No. SS-7 (September 3, 2004).
- 19. Fowler KA, Dahlberg LL, Haileyesus T, Annest JL. Firearm injuries in the United States. Preventive Medicine 79 (2015) 5-14. doi:10.1016/j.ypmed.2015.06.002
- 20. Fowler KA, Dahlberg LL, Haileyesus T, Gutierrez C, Bacon S. Childhood Firearm Injuries in the United States. Pediatrics. 2017;140(1):e20163486

# **Data Files Description**

#### File-by-File Description

File Dimensions:

No. of Cases: 86,226No. of Variables: 46Record Length: 282

Type of File: ASCII

Data Format: Logical record length

Extent of Processing Checks: ICPSR performed checks for undocumented codes, reformatted the data and documentation, and prepared SAS, SPSS, and Stata setup files and SAS transport, SPSS system, Stata system, and R system files.

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# Firearm Injury Surveillance Study, 1993-2014 Variable Description

Summary statistics (minimum, maximum, mean, median, and standard deviation) may not be available for every variable in the codebook. Conversely, a listing of frequencies in table format may not be present for every variable in the codebook either. However, all variables in the dataset are present and display sufficient information about each variable. These decisions are made intentionally and are at the discretion of the archive producing this codebook.

## Firearm Injury Surveillance Study, 1993-2014

#### PSU - PSU FROM \$HIDPSU.

Location: 1-3 (width: 3; decimal: 0)

Variable Type: numeric

#### **ARG - ARGUMENT INVOLVED**

Location: 4-4 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	-	-

#### **CRIME - CRIME INVOLVED**

Location: 5-5 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	-	-

#### **DRUGS - DRUGS INVOLVED**

Location: 6-6 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	-	-

#### **FIGHT - FIGHT INVOLVED**

Location: 7-7 (width: 1; decimal: 0)

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	_	-

## ONTHEJOB - INJURED ON THE JOB

Location: 8-8 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	-	-
3	Act duty military	-	-

## BDYPT - PRIMARY BODY PART AFFECTED

Location: 9-10 (width: 2; decimal: 0)

Value	Label	Unweighted Frequency	%
0	Internal	-	-
30	Shoulder	-	-
31	Upper trunk	-	-
32	Elbow	-	-
33	Lower arm	-	-
34	Wrist	-	-
35	Knee	-	-
36	Lower leg	-	-
37	Ankle	-	-
38	Pubic region	-	-
75	Head	-	-
76	Face	-	-
77	Eyeball	-	-
79	Lower trunk	-	-
80	Upper arm	-	-
81	Upper leg	-	-
82	Hand	-	-

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Value	Label	Unweighted Frequency	%
83	Foot	-	-
84	25-50 percent body	-	-
85	All parts body	-	-
87	Not stated/unknown	-	-
88	Mouth	-	-
89	Neck	-	-
92	Finger	-	-
93	Toe	-	-
94	Ear	-	-

## DIAG - DIAGNOSIS

Location: 11-12 (width: 2; decimal: 0)

Value	Label	Unweighted Frequency	%
41	Ingestion	-	-
42	Aspiration	-	-
46	Burn electrical	-	-
47	Burn not spec	-	-
48	Burn scald	-	-
49	Burn chemical	-	-
50	Amputation	-	-
51	Burn thermal	-	-
52	Concussion	-	-
53	Contusn abrasn	-	-
54	Crushing	-	-
55	Dislocation	-	-
56	Foreign body	-	-
57	Fracture	-	-
58	Hematoma	-	-
59	Laceration	-	-
60	Dental inj	-	-
61	Nerve damage	-	-
62	Internal inj	-	-
63	Puncture	-	-
64	Strain/sprain	-	-
65	Anoxia	-	-

Value	Label	Unweighted Frequency	%
66	Hemorrhage	-	-
67	Electric shock	-	-
68	Poisoning	-	-
69	Submersion	-	-
70	Unknown/not stated	-	-
71	Other	-	-
72	Avulsion	-	-
73	Radiation	-	-
74	Derma/conjunct	-	-

## **DISP - ED DISPOSITION OF CASE**

Location: 13-13 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
1	Treated/released	-	-
2	Transfd/released	-	-
3	Transfd/hospital	-	-
4	Hospitalized	-	-
5	Observation	-	-
6	AMA/LWBS	-	-
8	DOA	-	-
9	Unknown	-	-

## **SEX - SEX OF PATIENT**

Location: 14-14 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Male	-	-
2	Female	-	-

## STRATUM - STRATUM OF HOSPITAL BASED ON SIZE

Location: 15-15 (width: 1; decimal: 0)

#### Variable Type: numeric

Value	Label	Unweighted Frequency	%
1	Small	-	-
2	Medium	-	-
3	Large	-	-
4	Very large	-	-
5	Childrens	-	-

## FIRARM\_C - FIREARM TYPE

Location: 16-16 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Handgun	-	-
2	Rifle	-	-
3	Shotgun	-	-
4	BB gun	-	-
5	Other	-	-

## LOC\_C - TYPE OF LOCALE WHERE INJURED

Location: 17-17 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Home	-	-
2	Farm	-	-
3	Apt/cond	-	-
4	Street/hwy	-	-
5	Oth public	-	-
6	Mobile home	-	-
7	Industry	-	-
8	School	-	-
9	Recreation	-	-

#### MSTAT\_C - PATIENT MARITAL STATUS (18+YRS)

Location: 18-18 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Not stated	-	-
1	Never married	-	-
2	Married	-	-
3	Divorced	-	-
4	Separated	-	-
5	Widow	-	-
6	Other	-	-
	Missing Data		
	_	_	_

## SPECOT\_C - WHO CAUSED INJURY OTHER

Location: 19-33 (width: 15; decimal: 0)

Variable Type: character

#### SPECRE\_C - WHO CAUSED INJURY OTHER RELATIVE

Location: 34-48 (width: 15; decimal: 0)

Variable Type: character

## TRANOT\_C - MODE OF TRANSPORT TO ER OTHER

Location: 49-68 (width: 20; decimal: 0)

Variable Type: character

## TRANSP\_C - MODE OF TRANSPORT TO ER

Location: 69-69 (width: 1; decimal: 0)

Value	Label	Unweighted Frequency	%
0	Not stated	-	-
1	EMS	-	-
2	Ambulance	-	-
3	Rescue/fire	-	-
4	Police	-	-
5	Priv vehicle	-	-

Value	Label	Unweighted Frequency	%
6	Air transprt	-	-
7	Walk-in	-	-
8	Other	-	-

## WHO\_C - WHO CAUSED INJURY

Location: 70-70 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Self	-	-
2	Spouse	-	-
3	Ex-spouse	-	-
4	Oth relative	-	-
5	Friend	-	-
6	Stranger	-	-
7	No see	-	-
8	Other	-	-

## WT\_C - WEIGHT VALUE ROUNDED TO AN INTEGER

Location: 71-73 (width: 3; decimal: 0)

Variable Type: numeric

#### CLASS\_C - INCIDENT CLASSIFICATION-INTENT

Location: 74-74 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Unintentnl	-	-
2	Assault	-	-
3	Suicide	-	-
4	Law enforce	-	-

#### TRDATE - DATE OF TREATMENT OF PATIENT (YYYYMMDD)

Location: 75-82 (width: 8; decimal: 0)

Variable Type: numeric

## INJDT\_C - DATE OF INJURY OF PATIENT (YYYYMMDD)

Location: 83-90 (width: 8; decimal: 0)

Variable Type: numeric

## MSTATG\_C - PATIENT MARITAL STATUS (18+YRS)-GROUPED

Location: 91-91 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Not stated	-	-
1	Never married	-	-
2	Married	-	-
3	Divorce/separat	-	-
4	Other	-	-
	Missing Data		
		_	_

#### TRANSG\_C - MODE OF TRANSPORT TO ER-GROUPED

Location: 92-92 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Not stated	-	-
1	EMS/res/amb	-	-
2	Air trans	-	-
3	Priv veh	-	-
4	Walk-in	-	-
5	Police	-	-
6	Other	-	-

#### TRMON\_C - TREATMENT MONTH OF YEAR

Location: 93-94 (width: 2; decimal: 0)

Value	Label	Unweighted Frequency	%
1	January	-	-
2	February	-	-
3	March	-	-
4	April	-	-
5	May	-	-
6	June	-	-
7	July	-	-
8	August	-	-
9	September	-	-
10	October	-	-
11	November	-	-
12	December	-	-

## TRDAY\_C - TREATMENT DAY OF WEEK

Location: 95-95 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
1	Sunday	-	-
2	Monday	-	-
3	Tuesday	-	-
4	Wednesday	-	-
5	Thursday	-	-
6	Friday	-	-
7	Saturday	-	-

## AGENYR\_C - AGE IN YRS FROM AGENEW\_C (NUM)

Location: 96-98 (width: 3; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	<1 yr	-	-

## AGENG\_C - AGE GROUP 9 LEVELS FROM AGENEW\_C

Location: 99-99 (width: 1; decimal: 0)

#### Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	0-4	-	-
2	5-9	-	-
3	10-14	-	-
4	15-24	-	-
5	25-34	-	-
6	35-44	-	-
7	45-54	-	-
8	55-64	-	-
9	65+	-	-

## AGENG1\_C - AGE GROUP 7 LEVELS FROM AGENEW\_C

Location: 100-100 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	0-14	-	-
2	15-24	-	-
3	25-34	-	-
4	35-44	-	-
5	45-54	-	-
6	55-64	-	-
7	65+	-	-

## AGENG2\_C - AGE GROUP 4 LEVELS FROM AGENEW\_C

Location: 101-101 (width: 1; decimal: 0)

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	0-14	-	-
2	15-34	-	-
3	35-54	-	-
4	55+	_	_

#### AGENG3\_C - AGE GROUP 10 LEVELS FROM AGENEW\_C

Location: 102-103 (width: 2; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	0-4	-	-
2	5-9	-	-
3	10-14	-	-
4	15-19	-	-
5	20-24	-	-
6	25-34	-	-
7	35-44	-	-
8	45-54	-	-
9	55-64	-	-
10	65+	-	-

## BDYPTG\_C - PRIMARY BODY PART AFFECTED-GROUPED

Location: 104-104 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Head/neck	-	-
2	Upper trunk	-	-
3	Lower trunk	-	-
4	Arm/hand	-	-
5	Leg/foot	-	-
6	Other	-	-

## LOCG\_C - TYPE OF LOCALE WHERE INJURED-GROUPED

Location: 105-105 (width: 1; decimal: 0)

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Home/apt/cond	-	-

Value	Label	Unweighted Frequency	%
2	School/recrea	-	-
3	Street/hwy	-	-
4	Oth property	-	-
5	Farm	-	-

## RACE\_C - RACE OF PATIENT

Location: 106-106 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Not stated	-	-
1	White	-	-
2	Black	-	-
3	Other	-	-

## RACEOT\_C - RACE/ETHNICITY VERBATIM

Location: 107-121 (width: 15; decimal: 0)

Variable Type: character

## HISP\_C - HISPANIC ORIGIN

Location: 122-122 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
1	Hispanic	-	-
2	Non-hisp/not stated	-	-

## WHOG\_C - WHO CAUSED INJURY-GROUPED

Location: 123-123 (width: 1; decimal: 0)

Valu	e Label	Unweighted Frequency	%
0	Unknown	-	-
1	Stranger	-	-
2	Self	<u>-</u>	_

Value	Label	Unweighted Frequency	%
3	Friend/acq	-	-
4	Spouse/ex	-	-
5	Oth relative	-	-
6	Other/no see	-	-

## FA\_GSW - NONFATAL FIREARM-RELATED GUNSHOT WOUND

Location: 124-124 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	-	-
	Missing Data		
	-	_	_

#### FA\_NGSW - NONFATAL FIREARM-RELATED NONGUNSHOT WND

Location: 125-125 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	-	-
	Missing Data		
	-	-	-

## BB\_GSW - NONFATAL BB/PELLET GUNSHOT WOUND

Location: 126-126 (width: 1; decimal: 0)

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	-	-
	Missing Data		

Value	Label	Unweighted Frequency	%
	-	_	-

#### BB\_NGSW - NONFATAL BB/PELLET NON-GUNSHOT WOUND

Location: 127-127 (width: 1; decimal: 0)

Variable Type: numeric

Value	Label	Unweighted Frequency	%
0	Unknown	-	-
1	Yes	-	-
2	No	-	-
	Missing Data		
	-	_	_

#### YEAR - TREATMENT YEAR / DATA FILE YEAR

Location: 128-131 (width: 4; decimal: 0)

Variable Type: numeric

#### CMTX1 - COMMENT 1 PURGED BY CPSC AND CDC

Location: 132-202 (width: 71; decimal: 0)

Variable Type: character

#### CMTX2 - COMMENT 2 PURGED BY CPSC AND CDC

Location: 203-273 (width: 71; decimal: 0)

Variable Type: character

#### **RCASE - RANDOM CASE ID NUMBER**

Location: 274-282 (width: 9; decimal: 0)

Variable Type: character

## **Other Materials**

#### **Contact Information**

#### Text:

Additional information regarding the Firearm Injury Surveillance Study, 1993-2014 may be obtained from:

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TABLE 5. National Estimates of the Number and Percentage\* of Persons with Nonfatal Firearm Injuries\*\*
Treated in Hospital Emergency Departments, by Selected Characteristics, United States, January 2012-December 2014

	January-December 2012 Persons with Nonfatal Injuries		January-December 2013  Persons with Nonfatal Injuries		January-December 2014 Persons with Nonfatal Injuries	
	No.	%	No.	%	No.	%
Total	74,007	100	75,387	100	73,591	100
Age in years						
0-4	274	0.4	255	0.34	191	0.26
5-9	340	0.5	190	0.25	335	0.46
10-14	822	1.1	772	1.02	1275	1.73
15-19	10,740	14.5	11,916	15.81	10379	14.10
20-24	19,062	25.8	18,799	24.94	18394	24.99
25-34	21,215	28.7	20,459	27.14	21396	29.07
35-44	9,556	12.9	10,524	13.96	9814	13.34
45-54	5,914	8.0	6,152	8.16	6374	8.66
55-64	2,820	3.8	3,168	4.20	2720	3.70
65+	2,758	3.7	2,434	3.23	2273	3.09
Not Stated	506	0.7	718	0.95	440	0.60
Race/Ethnicity						
Black, Non-Hispanic & Hispanic	24,015	32.4	25,707	34.10	24697	33.56
White, Non-Hispanic <sup>†</sup>	17,870	24.1	18,221	24.17	19181	26.06
Hispanic <sup>††</sup>	11,580	15.7	10,593	14.05	5182	7.04
Asian/Pacific Islander, NH	0	0.0	0	0.00	0	0.00
Am Indian/Alaska Native, NH	0	0.0	0	0.00	0	0.00
Other, Non-Hispanic	1,336	1.8	1,656	2.20	1470	2.00
Not Stated	19,206	26.0	19,210	25.48	23061	31.34

TABLE 5 (Cont). National Estimates of the Number and Percentage\* of Persons with Nonfatal Firearm Injuries\*\*
Treated in Hospital Emergency Departments, by Selected Characteristics, United States, January 2012-December 2014

	_ · · · ·					
	January-December 2012		January-December 2013		January-December 2014	
	Persons with N	onfatal Injuries	Persons with N	onfatal Injuries	Persons with No	onfatal Injuries
	No.	%	No.	%	No.	%
Sex						
Male	66,574	90.0	66,547	88.27	65712	89.29
Female	7,417	10.0	8,834	11.72	7805	10.61
Not Stated	16	0.0	6	0.01	74	0.10
Marital Status (If age ≥18 years only)	67,896	100%	75,387	100%		100%
Never Married	28,135	41.4	26,380	38.08	20820	31.18
Married	6,678	9.8	7,050	10.18	5574	8.35
Divorced/Separated	1,626	2.4	1,567	2.26	907	1.36
Other	4,565	6.7	7,191	10.38	7699	11.53
Not Stated	26,892	39.6	27,095	39.11	31772	47.58
Injured on the Job						
No	72,793	98.4	74,259	98.50	72413	98.40
Yes	896	1.2	939	1.25	1036	1.41
Active Duty Military	142	0.2	0	0.00	16	0.02
Not Stated	176	0.2	189	0.25	126	0.17
Type of Locale where the Injury Occurred						
Home/Apartment/Mobile	16,712	22.6	18,406	24.42	16939	23.02
Street	14,509	19.6	15,154	20.10	14231	19.34
Other Property	9,960	13.5	8,876	11.77	9566	13.00
School/Sports	1,608	2.2	1,364	1.81	1582	2.15
Farm	68	0.1	79	0.10	80	0.11
Not Stated	31,150	42.1	31,508	41.80	31193	42.39

TABLE 5 (Cont). National Estimates of the Number and Percentage\* of Persons with Nonfatal Firearm Injuries\*\*
Treated in Hospital Emergency Departments, by Selected Characteristics, United States, January 2012-December 2014

	January-December 2012		January-Dec	January-December 2013		January-December 2014	
	Persons with No	onfatal Injuries	Persons with Nonfatal Injuries		Persons with Nor	nfatal Injuries	
	No.	%	No.	%	No.	%	
Mode of Transport to the Emergency Department							
EMS/Fire Rescue/Ambulance	51,935	70.2	50,701	67.25	50117	68.10	
Private Vehicle	9,027	12.2	9,925	13.17	9914	13.47	
Walk-in	4,035	5.5	4,682	6.21	4727	6.42	
Police	2,151	2.9	3,026	4.01	2343	3.18	
Air Transport	1,860	2.5	2,318	3.07	1814	2.46	
Other	110	0.1	161	0.21	28	0.04	
Not Stated	4,889	6.6	4,574	6.07	4648	6.32	
Primary Body Part Affected							
Head/Neck	10,822	14.6	9,802	13.00	10602	14.41	
Upper Trunk	12,211	16.5	12,577	16.68	11215	15.24	
Lower Trunk	12,369	16.7	12,740	16.90	12317	16.74	
Arm/Hand	13,448	18.2	12,664	16.80	12435	16.90	
Leg/Foot	25,103	33.9	27,483	36.46	26644	36.21	
Other	0	0.0	0	0.00	101	0.14	
Not Stated	54	0.1	121	0.16	277	0.38	
<b>Emergency Department Discharge Disposition</b>							
Treated and Released	28,860	39.0	30,089	39.91	29812	40.51	
Transferred to Another Hospital	3,885	5.2	3,283	4.35	4192	5.70	
Hospitalized	38,079	51.5	40,156	53.27	36613	49.75	
Held for observation	1,859	2.5	1,133	1.50	1916	2.60	
AMA/LWBS #	1,292	1.7	726	0.96	984	1.34	
Not Stated	32	0.0	0	0.00	74	0.10	

TABLE 5 (Cont). National Estimates of the Number and Percentage\* of Persons with Nonfatal Firearm Injuries\*\* Treated in Hospital Emergency Departments, by Selected Characteristics, United States, January 2012-December 2014

	January-December 2012 Persons with Nonfatal Injuries		January-December 2013  Persons with Nonfatal Injuries		January-December 2014  Persons with Nonfatal Injuries	
	No.	%	No.	%	No.	0/0
Intent of Injury						
Unintentional	13,181	17.8	13,494	17.90	16767	22.78
Assault	53,293	72.0	52,779	70.01	51190	69.56
Self-Inflicted, Intentionally	3,841	5.2	4,011	5.32	4110	5.58
Law Enforcement	889	1.2	1,156	1.53	1237	1.68
Not Stated	2,803	3.8	3,947	5.24	287	0.39
Type of Firearm Used						
Handgun	18,825	25.4	16,304	21.63	17789	24.17
Shotgun	2,213	3.0	1,978	2.62	2068	2.81
Rifle	1,668	2.3	1,797	2.38	1839	2.50
Not Stated	51,301	69.3	55,308	73.37	51895	70.52
Victim-Offender Relationship (Who caused the injury?)						
Self	14,454	19.5	15,115	20.05	15153	20.59
Stranger	13,408	18.1	12,034	15.96	10661	14.49
Friend/Acquaintance	2,036	2.8	3,067	4.07	2479	3.37
Other Relative	539	0.7	769	1.02	588	0.80
Spouse/Ex-spouse	405	0.5	641	0.85	416	0.57
Other/Did not see who	10,534	14.2	10,024	13.30	9766	13.27
Not Stated	32,631	44.1	33,737	44.75	34528	46.92

Column percentages may not sum up to 100.0 due to rounding error. Includes nonfatal firearm-related gunshot wounds only.

Nonfatal injuries for whites, excluding those who were of Hispanic origin.

Nonfatal injuries for Hispanics, excluding black Hispanics.

AMA/LWBS = Against Medical Advice/Left Without Being Seen. Data Source: CDC Firearm Injury Surveillance Study, OSP, NCIPC. neissfa33 for ICPSR 2012 2014.doc-8/2/2018