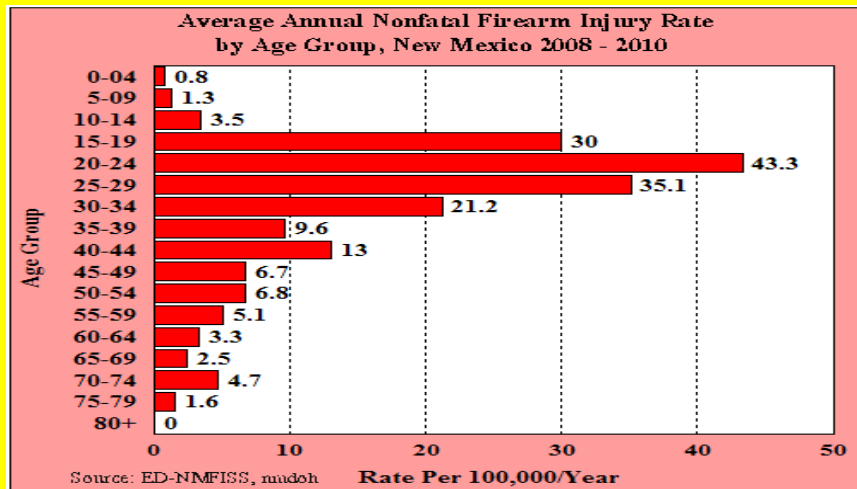


# New Mexico Firearm Injury Surveillance in Hospital Emergency Departments 2008 to 2010



Prepared by Injury Epidemiology Unit, Office of Injury Prevention  
Epidemiology and Response Division NMDOH

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The Honorable Susana Martinez

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# Table of Contents

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Executive Summary .....	1
Methodology .....	2
Nonfatal Firearm Injury .....	4
Summary .....	8
References .....	9
Appendix A. EDNMFISS .....	10
Appendix B. Data Tables: Firearm Injury ED Visits.....	11

## Executive Summary

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Firearms have been a leading cause of injury deaths in New Mexico, claiming about 300 lives per year (14.6 per 100,000 population) among the state's residents.<sup>1</sup> In 2010, firearm injury deaths accounted for approximately 17% of all New Mexico injury deaths. A majority of the firearm deaths were suicides (65%), followed by homicides (30%). Firearm deaths of unintentional, undetermined, and other intent (legal interventions and operations of war) accounted for 5% of firearm deaths.<sup>2</sup>

In 2000, Public Health Regulation 7NMAC made firearm injuries a notifiable condition for public health monitoring in New Mexico. At that time, the New Mexico Department of Health (NMDOH) established the Emergency Department-New Mexico Firearm Injury Surveillance System (ED-NMFISS) to collect and analyze data from all hospital emergency departments treating persons with firearm injuries. The purpose of ED-NMFISS is to identify and understand the impact of firearms on New Mexicans in order to reduce their risks.

This report serves as the third three-year summary presentation of the results of the surveillance system. The data in the report pertains to nonfatal injuries from firearms (i.e. bullet/shotgun) reported by ED-NMFISS for NM residents who were injured during 2008-2010.

### Key Findings

- An estimated 1257, or an average of 419 per year, New Mexico residents were treated for firearm injuries in New Mexico hospital emergency departments (ED) during the three year reporting period.
- Approximately 4% of the total firearm injuries either died in the ED or were dead on arrival at the ED.
- Of the 1137 persons with nonfatal firearm injuries, 59% were released, 23% were admitted to the hospital for further treatment, 12% were transferred to other hospitals, and 1% left against medical advice.
- Bullets accounted for 95% of the nonfatal injuries compared to 5% due to a shotgun.
- The highest rates of nonfatal firearm injury seen in emergency departments were among 20-24 year olds at the rate of 43.3 injuries per 100,000 population/year.
- Males accounted for 90% of the nonfatal firearm injury visits to the ED.
- Blacks had the highest rate of nonfatal firearm injury visits at 38.1 injuries per 100,000 population, followed by Hispanics at 21.4 injuries per 100,000 population/year.
- Ninety-one percent of nonfatal firearm injuries were to a single area of the body- head, arms, legs, chest, abdomen or back.
- As a gauge of severity, 89% of cases with injuries to the chest were hospitalized or transferred. In contrast, only 35% of cases with injuries to the extremities were hospitalized or transferred.

## Methodology

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The Emergency Department-New Mexico Firearm Injury Surveillance System (ED-NMFISS) was established in 2000 to address the lack of information about nonfatal firearm injuries that occur in New Mexico. Full implementation, with all non-federal and some Indian Health Service (IHS) hospital EDs reporting firearm injuries to the system was achieved in 2002. This was established as the baseline year for the system.

ED-NMFISS collects the following data elements on each firearm ED visit.

Case identifier: hospital name and patient name (used only for management of the system).

- Time: treatment date
- Residence: city, state and ZIP code
- Demographics: date of birth/age, gender, race, and ethnicity
- Injury specifics: body region injured and wound type

Each gun-related injury ED visit was characterized by three data elements:

- Gun wound type: the type of firearm/other gun mechanism of injury.  
(Note: Firearm injury is defined as a penetrating injury from a weapon that uses a powder charge to fire a projectile. This definition includes gunshot injuries sustained from bullets and shotguns but excludes wounds from air-powered BB and pellet guns)
  - Bullet: metal projectile that is expelled from a firearm and does not contain explosives
  - Shotgun (scattergun): “weapon designed or redesigned, made or remade, and intended to be fired from the shoulder, and designed or redesigned and made or remade to use the energy of the explosive in a fixed shotgun shell to fire through a smooth bore either a number of ball shot or a single projectile for each single pull of the trigger”- United States legal code (18 USC 921)
- Body region: the wound location(s) on the body
- Discharge status: the outcome of the ED visit

The individuals involved were characterized by:

- Age
- Gender
- Race/Ethnicity: note- Hispanic is used in this report to refer to persons with race identified as White and ethnicity as Hispanic
- Residence: city, county, state and ZIP code

Each ED completes the ED-NMFISS form (see Appendix A) for every firearm injury visit. The forms are submitted by mail, telephone or fax to the New Mexico Department of Health, Office of Injury Prevention. Data are entered into Epi Info software and updated on a continuous basis. Initial visit information were used for

cases with two records per incident, a situation that occurs when a patient is transferred from one NMED to another or returns to an ED for further care after the initial visit.

Quality control includes checks on variables to prevent invalid entries. The ED-NMFISS database manager maintains frequent communication with each ED to ensure completeness and quality of the data. All EDs receive quarterly feedback reports on their case collection. Each hospital receives a semi-annual report on its data including a table showing the completeness of reporting on each data element.

Of the data elements collected for 2008-2010 by ED-NMFISS, 99% percent are complete, having no missing data. The variables most likely to have missing values were race and ethnicity.

SAS Software was used to generate descriptive information of the surveillance data. Several types of measurements were used to present the data in this report: (1) the frequency of injuries; i.e., the number of firearm injuries that occurred in New Mexico among New Mexico residents; (2) the percent of the total number of firearm injuries and; (3) the number of NM resident injuries per 100,000 population/year.

## **Limitations**

ED-NMFISS provides approaches for examining firearm injuries in New Mexico. However, the surveillance system has limitations and a more complete picture may be developed by linking this dataset and various death files, including the New Mexico Violent Death Report System and the Hospital Inpatient Discharge Data system (HIDD).

Other limitations of ED-NMFISS include:

- Time of arrival and detailed circumstance information including cause/manner and intent of injury are not currently collected.
- In border areas where hospitals in other states are nearby, low numbers of reported firearm injuries in ED-NMFISS suggest that an unknown number of cases were sent to nearby out-of state medical centers without first being seen at a New Mexico ED.
- Some hospitals and institutions submit limited or no patient data.
- Firearm injuries among American Indians may be under reported due to incomplete participation by the Indian Health Service facilities in the state.

## Nonfatal Firearm Injuries

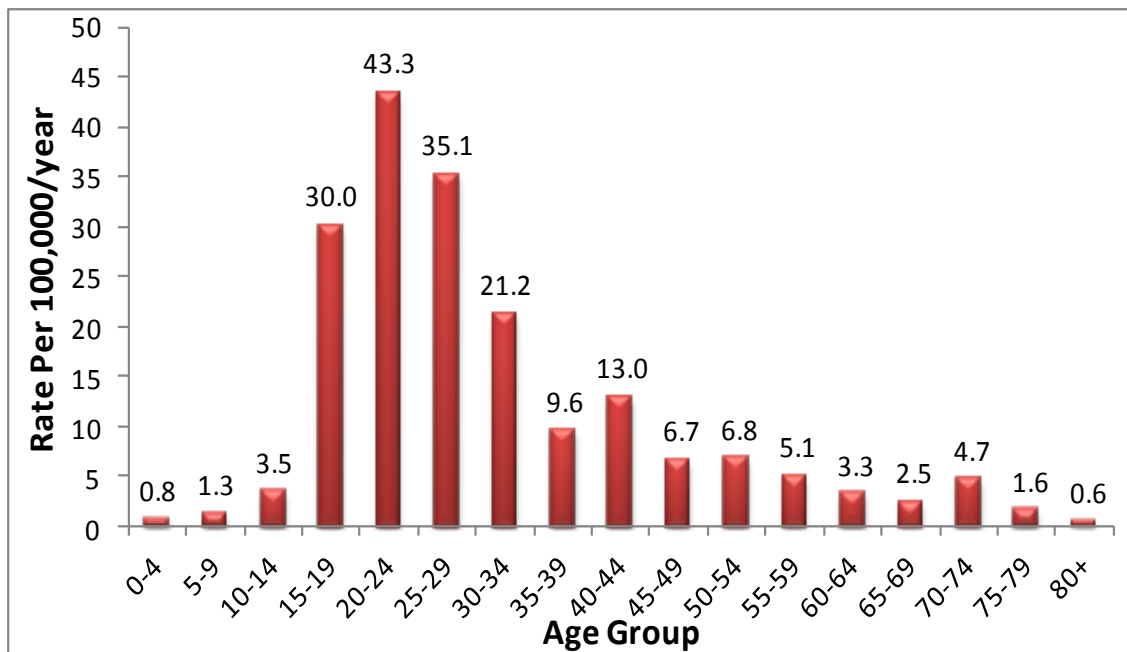
Firearm injuries are a major public health problem in both the United States and New Mexico. Nationally, an estimated 70,000 firearm nonfatal injuries are treated in emergency departments each year.<sup>3</sup> New Mexico ranked 8<sup>th</sup> among the 50 states for firearm deaths in 2007.<sup>4</sup>

The New Mexico Firearm Surveillance System is designed to collect accurate and timely data on persons treated for firearm injuries in NM emergency departments. The following section presents a detailed look at the number and characteristics of nonfatal firearm injury cases that were treated in New Mexico hospital emergency departments in 2008-2010.

### Demographics

According to ED-NMFISS, a total of 1137 nonfatal firearm injuries were treated in New Mexico emergency departments in 2008-2010. Males accounted for 90% of ED visits related to firearm injuries. Approximately 61% of the wounded were between 15-29 years of age. Young adults, 20-24 years of age, had the highest rate at 43.3 per 100,000 population. (Figure 1)

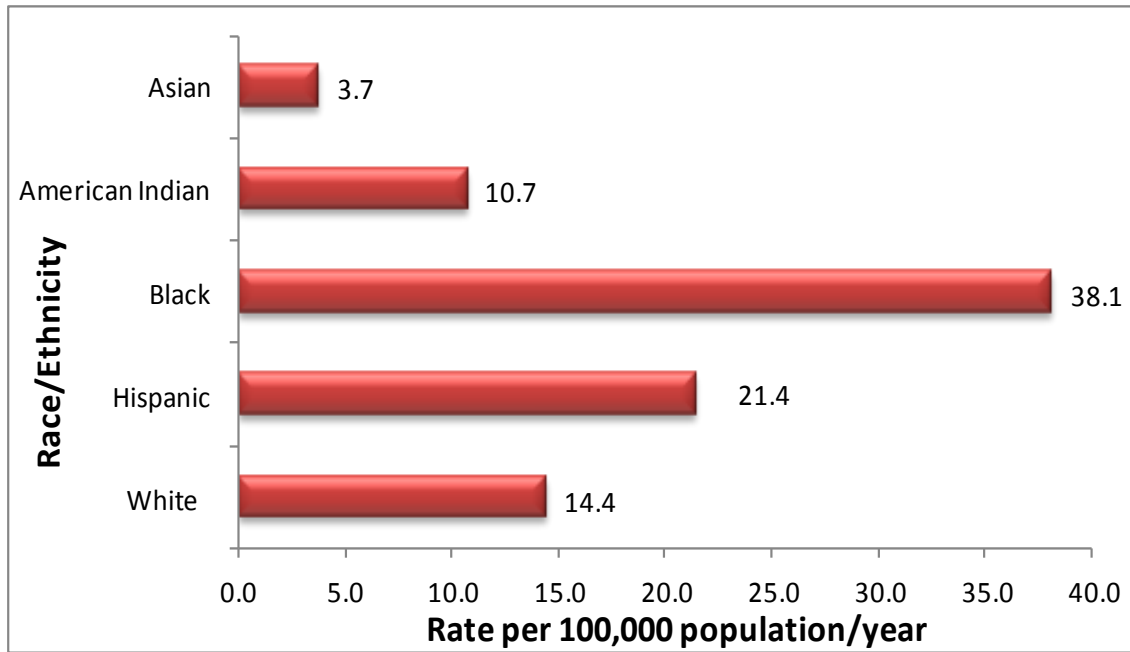
**Figure 1. Nonfatal Firearm Injury Rate by Age Group, NM, 2008-2010**



Source: ED-NMFISS, NMDOH

Firearm injury ED-visit rates for Blacks (38.1 per 100,000 population) were more than two and a half the rate for Whites (14.4 per 100,000 population) and three times that for American Indians (10.7 per 100,000). Hispanics had the second highest rate at 21.4 per 100,000 population. (Figure 2)

**Figure 2. Nonfatal Firearm Injury Rate per 100,000 population by Race/Ethnicity, NM, 2008- 2010**



Source: ED-NMFISS, NMDOH

\* Some rates are based on a small number of cases and may vary considerably from year to year. Under-reporting of American Indian ED visits was likely because not all Indian Health Service hospitals participate in ED-NMFISS.

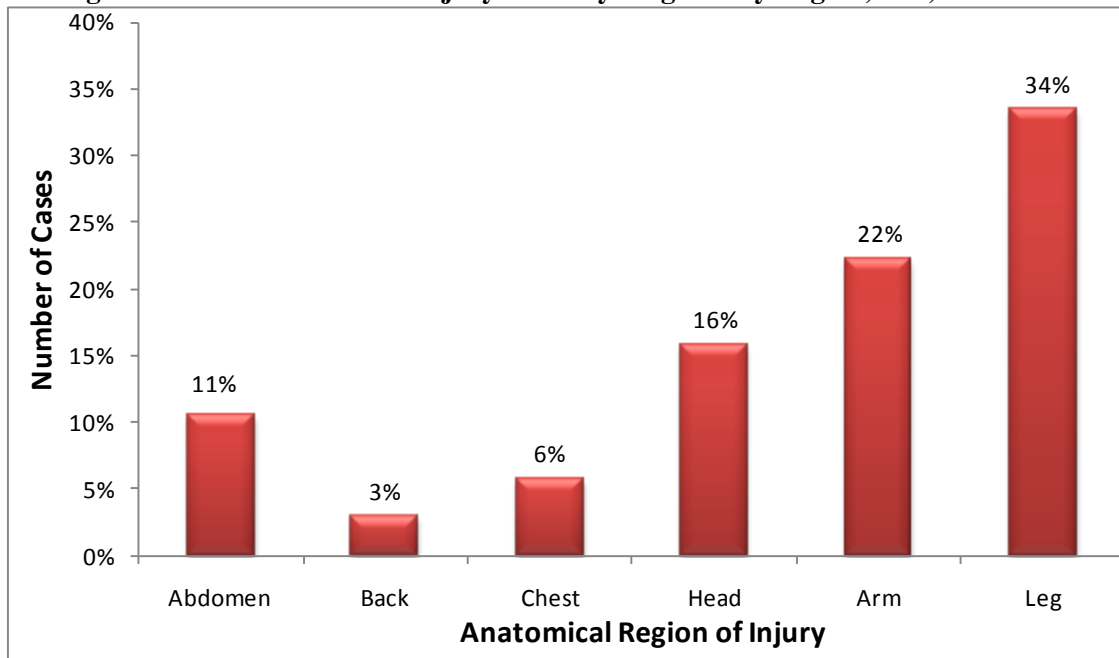
### **Injury Specifics**

Bullet wounds comprised 95% of firearm injuries while shotgun wounds were relatively uncommon, involving only 5% of cases. Approximately 48% of the patients were treated and released while 39% were admitted to the hospital at which the ED was located. Twelve percent of the cases were transferred to other hospitals for care.

Ninety-one percent of injured persons who came to the EDs were wounded in only one body region, most commonly to the extremities. The least common regions were the back and chest area, suggesting the lethality of injuries in these areas. (Figure 3)



**Figure 3. Nonfatal Firearm Injury Visits by Single Body Region, NM, 2008-2010**



Source: ED-NMFISS, NMDOH

The discharge status of nonfatal injuries varied depending on the number of wounds and the body region wounded. Half of the people with firearm injuries to a single body region were treated and released while most patients with multiple body region injuries were admitted to a hospital. (Figure 4) Among those with single area wounds, injuries to the chest (89%) or abdomen (74%) were most likely to result in hospitalization or transfer while those to the extremities were more likely to be released. (Figure 5)

**Figure 4. Patient Disposition by Single or Multiple Body Region Wounds, NM, 2008-2010**

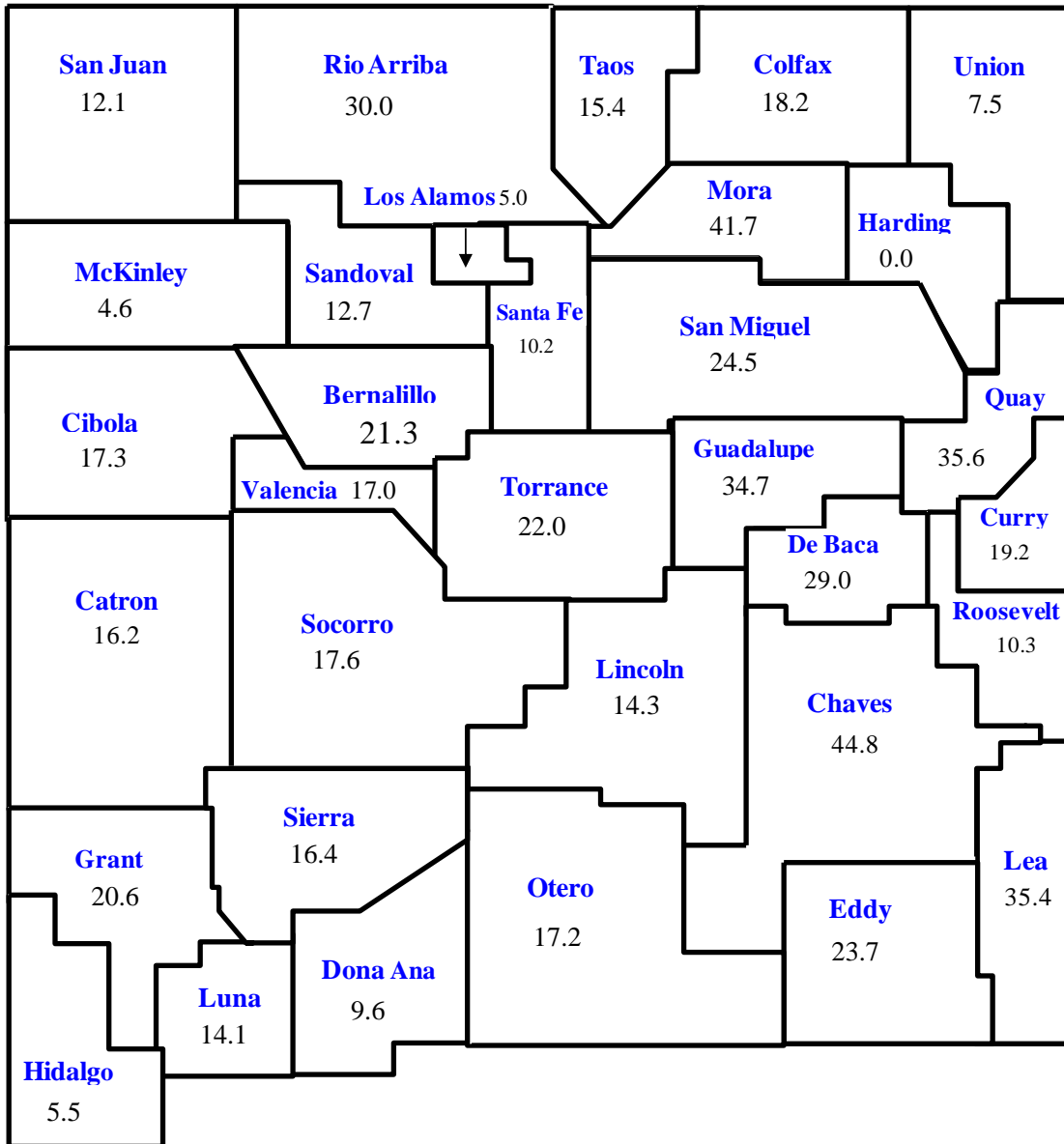
	Single Body Region Wounds	Multiple Body Region Wounds
Released	50%	26%
Admitted	37%	58%
Left AMA	2%	11%
Transferred	12%	5%
Total	100%	100%

**Figure 5. Percent Admitted or Transferred by Single Area Wound, NM, 2008-2010**

Body Region	Admitted/Transferred
Abdomen	74%
Back	52%
Chest	89%
Head	68%
Arm	35%
Leg	36%

There were no significant seasonal or geographic patterns for firearm injury rates. Approximately 40% of the counties had nonfatal firearm injury rates higher than the state average. The highest rates occurred in Chaves and Lea counties (the high rates for Guadalupe and Quay counties may not be statically reliable due to their small numbers of injuries). Very low rates for some border counties suggest that some cases may have gone directly to out-of-state facilities for treatment.

**Figure 6. Firearm Injury ED Visit Rate by County of Residence, NM, 2008-2010 (NM Rate=18 per 100,000)**



## Summary

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From a public health perspective, reducing the risk of firearm injuries is an important goal for improving the well-being of New Mexico's population. Firearm was the third leading cause of fatal injuries in New Mexico in 2010<sup>5</sup>. It has also been one of the state's leading causes of nonfatal injuries for many years. Nearly two-thirds of firearm injuries are nonfatal but little information was known about the characteristics of these injuries. The ED-NMFISS was established to improve the knowledge about nonfatal firearm injuries and to provide health care providers, policymakers, program planners and communities with data in order to assess risks and make informed decisions. The New Mexico Department of Health will continue to track trends in firearm injuries and plans to engage in a more detailed examination of these injury patterns with the goal of using the information to prevent injuries.

## References

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1. New Mexico Death Certificate Database, Office of Vital Records and Statistics, New Mexico Department of Health. Retrieved on August, 2011 from New Mexico Department of Health, Indicator-Based Information System for Public Health website: <http://ibis.health.state.nm.us/>. (NM-IBIS)
2. WISQARS (Web-based Injury Query and Reporting System), Centers for Disease Control and Prevention (CDC), National Center for Injury Prevention and Control, 2008-2010 Injury Data [http://webappa.cdc.gov/sasweb/ncipc/mortrate10\\_sy.html](http://webappa.cdc.gov/sasweb/ncipc/mortrate10_sy.html) (accessed 9/23/10).
3. WISQARS.
4. WISQARS.
5. NM-IBIS.

# Appendix A

## Emergency Department—NM Firearm Injury Surveillance System [ED-NMFISS]

PASTE PATIENT ID LABEL HERE

*If you attach the patient label, do not re-enter any information that is on the label*

1. Hospital/facility name \_\_\_\_\_
2. \*Treatment Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day 4-digit Year
3. \*Medical Record Number \_\_\_\_\_
4. \*Patient's Name: (Last, First, Middle initial) \_\_\_\_\_
5. \*Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age \_\_\_\_\_ Unknown   
Month Day 4-digit Year
6. City of Residence (Do not enter post office box or rural route): \_\_\_\_\_ Unknown
7. State of Residence: \_\_\_\_\_ Unknown
8. ZIP code \_\_\_\_\_ Unknown

<p><b>9. Gender</b></p> <p>Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown <input type="checkbox"/></p>	<p><b>12. Body Region(s) Injured (Check all that apply):</b></p> <p>Abdomen/pelvis <input type="checkbox"/> Back <input type="checkbox"/> Chest <input type="checkbox"/> Head/neck <input type="checkbox"/>          Arm/hand <input type="checkbox"/> Leg/foot <input type="checkbox"/> Unknown <input type="checkbox"/></p>
<p><b>10. Race</b></p> <p>White <input type="checkbox"/> Black <input type="checkbox"/> Native American <input type="checkbox"/>          Asian/Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/></p>	<p><b>13. Firearm Wound Type (Check all that apply):</b></p> <p>Bullet <input type="checkbox"/> BB <input type="checkbox"/> Pellet <input type="checkbox"/> Shotgun <input type="checkbox"/>          Blunt trauma w/gun (e.g.pistol-whipped) <input type="checkbox"/> Taser <input type="checkbox"/>          Other* _____ <input type="checkbox"/> Unknown <input type="checkbox"/></p>
<p><b>11. Ethnicity</b></p> <p>Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown <input type="checkbox"/></p>	<p><b>14. ED Discharge Status:</b></p> <p>Home/self <input type="checkbox"/> Hospitalized <input type="checkbox"/> Left-AMA <input type="checkbox"/>          Dies in ED <input type="checkbox"/> DOA at ED <input type="checkbox"/> Transferred to _____ <input type="checkbox"/>          Status Post <input type="checkbox"/> Unknown <input type="checkbox"/></p>

Comments: \_\_\_\_\_

Write in other situations that appear to be firearm related, (e.g., paint ball, rubber bullets, nail guns, collateral from drive by shootings).

**SUBMIT directly by FAX to: 1-(505) 827-2796**

**MAIL** to: ED-NMFISS, Epidemiology and Response Division, New Mexico Department of Health, P.O. Box 26110, Santa Fe, NM 87502-6110, OR

**TELEPHONE** to the answering machine **1-800-432-4404** and **READ IN** data, stating item and then patient facts.

*Have any questions? Please call Isaac Romero (505) 827-2724, All data you submit is treated as confidential.*

**PLEASE SUBMIT DATA WITHIN 4 DAYS OF ED VISIT.**

*Thank you for providing these data. N:\FIREARM\ED data form 25.doc 05/19/2009*

## Appendix B

### Detailed Data Tables for Nonfatal Firearm Injury Emergency Department Visits

Note: \*Total numbers of <20 may not be statistically reliable.

Rate per 100,000 injuries.

**Table A. Type of Firearm, NM Residents, 2008-2010**

FIREARM TYPE	2008	2009	2010	TOTAL	Annual Average	Percent	Rate
Bullet	397	363	318	1078	359	95%	17.0
Shotgun	26	19	14	59	20	5%	0.9
<b>Total</b>	<b>423</b>	<b>382</b>	<b>332</b>	<b>1137</b>	<b>379</b>	<b>100%</b>	<b>18.1</b>
Fatal Firearm*	283	295	300	878	293	-	14.0

\*NMIBIS- ICD10 Codes: W32-W34, X72-X74, X93-X95, U01.4, Y22-Y24, and Y35.0

**Table B. Gender of Firearm Injury ED Visits, NM, 2008-2010**

GENDER	2008	2009	2010	Total	Annual Average	Percent	Rate
Male	379	343	294	1016	339	89%	32.8
Female	44	39	38	121	40	11%	3.8
<b>Total</b>	<b>423</b>	<b>382</b>	<b>332</b>	<b>1137</b>	<b>379</b>	<b>100%</b>	<b>18.1</b>

**Table C. Age Group of Firearm Injury ED Visits, NM, 2008-2010**

Table C. Age Group of Firearm Injury ED Visits

AGE GROUP	2008	2009	2010	Total	Annual Average	Percent	Rate
0-4	2	1	0	3	1	0%	0.8
5-9	0	5	2	7	2	1%	1.9
10-14	9	8	3	20	7	2%	4.1
15-19	85	69	67	221	74	19%	43.1
20-24	114	87	73	274	91	24%	59.0
25-29	64	68	48	180	60	16%	47.9
30-34	42	33	34	109	36	10%	30.8
35-39	21	20	32	73	24	6%	17.0
40-44	28	36	24	88	29	8%	17.8
45-49	20	13	18	51	17	4%	10.3
50-54	15	17	18	50	17	4%	10.7
55-59	8	11	4	23	8	2%	6.2
60-64	3	6	5	14	5	1%	5.1
65-69	4	2	0	6	2	1%	2.5
70-74	5	5	1	11	4	1%	5.2
75-79	2	1	1	4	1	0%	2.2
80+	1	0	2	3	1	0%	0.6

**Table D. Race/Ethnicity of Firearm Injury ED Visits, NM, 2008-2010**

<b>RACE</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>Total</b>	<b>Annual Average</b>	<b>Percent</b>	<b>Rate</b>
White	102	123	168	393	131	35%	14.4
Hispanic	236	206	115	557	186	49%	21.4
Black	31	25	8	64	21	6%	38.1
American Indian	28	15	31	74	25	7%	10.7
Asian	2	1	1	4	1	0%	3.7
Other	24	12	9	45	15	4%	NA
<b>Total</b>	<b>423</b>	<b>382</b>	<b>332</b>	<b>1137</b>	<b>379</b>	<b>100%</b>	<b>18.1</b>

**Table E. Number of Body Regions Injured for Firearm Injury ED Visits, NM, 2008-2010**

<b>NUMBER OF REGIONS</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>Total</b>	<b>Annual Average</b>	<b>Percent</b>
One	384	349	299	1032	344	91%
Two	27	31	24	82	27	7%
Three or more	12	2	8	22	7	2%
Unknown	0	0	1	1	0	0%
<b>Total</b>	<b>423</b>	<b>382</b>	<b>332</b>	<b>1137</b>	<b>379</b>	<b>100%</b>

**Table F. Body Region Injured for Firearm Injury ED Visits, NM, 2008-2010**

<b>BODY REGIONS</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>Total</b>	<b>Annual Average</b>	<b>Percent</b>
Abdomen	50	34	36	120	40	11%
Back	13	14	6	33	11	3%
Chest	20	24	21	65	22	6%
Head	64	67	48	179	60	16%
Arm	84	89	79	252	84	22%
Leg	153	120	108	381	127	34%
Multiple	39	33	32	104	35	9%
Unknown	0	1	2	3	1	0%
<b>Total</b>	<b>423</b>	<b>382</b>	<b>332</b>	<b>1137</b>	<b>379</b>	<b>100%</b>

**Table G. Single Body Region Injured for Firearm Injury ED Visits Admitted or Transferred, NM, 2008-2010**

<b>BODY REGIONS</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>Total</b>	<b>Annual Average</b>	<b>Percent</b>	<b>Percent Total</b>
Abdomen	39	27	23	89	30	17%	74%
Back	7	8	2	17	6	3%	52%
Chest	20	21	17	58	19	11%	89%
Head	46	44	32	122	41	24%	68%
Arm	25	31	31	87	29	17%	35%
Leg	54	47	38	139	46	27%	36%
<b>Total</b>	191	178	143	512	171	100%	-

**Table H. Single Body Region Injured for Firearm Injury ED Visits Released Home, NM, 2008-2010**

<b>BODY REGION</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>Total</b>	<b>Annual Average</b>	<b>Percent</b>
Abdomen	9	23	13	45	15	10%
Back	5	5	4	14	5	3%
Chest	3	18	4	25	8	5%
Head	26	30	14	70	23	15%
Arm	48	23	47	118	39	25%
Leg	80	44	69	193	64	42%
<b>Total</b>	171	143	151	465	155	100%

**Table I. ED Patient Disposition for Firearm Injury ED Visits, NM, 2008-2010**

<b>FINAL STATUS</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>Total</b>	<b>Annual Average</b>	<b>Percent</b>
Released Home	204	181	157	542	181	48%
Admitted	157	152	133	442	147	39%
Left AMA	4	8	4	16	5	1%
Transferred	58	41	38	137	46	12%
<b>Total</b>	423	382	332	1137	379	100%



**Table J. ED Discharge Status for Single vs. Multiple Firearm Body Region Injury ED Visits, NM, 2008-2010**

	Percent	
	Single Body Area Wound	Multiple Body Area Wound
Released	50%	26%
Admitted	37%	58%
Left AMA	2%	11%
Transferred	12%	5%
Total	100%	100%

**Table K. Month of Treatment for Firearm Injury ED Visits, NM, 2008-2010**

MONTH	2008	2009	2010	Total	Annual Average
January	35	43	30	108	36
February	25	27	22	74	25
March	48	35	27	110	37
April	37	30	23	90	30
May	47	25	25	97	32
June	25	48	34	107	36
July	36	35	31	102	34
August	36	25	30	91	30
September	39	28	28	95	32
October	30	34	26	90	30
November	34	28	29	91	30
December	31	24	27	82	27
Total	423	382	332	1137	379

**Table L. Month of Treatment for Firearm for Children Under 19 years of Age Injury ED Visits, NM, 2008-2010**

MONTH (<19 of Age)	2008	2009	2010	Total	Annual Average	Percent
January	10	8	4	22	7	6%
February	9	3	2	14	5	4%
March	13	5	9	27	9	7%
April	6	9	2	17	6	4%
May	16	5	3	24	8	6%
June	4	9	8	21	7	5%
July	11	5	3	19	6	5%
August	6	8	3	17	6	4%
September	4	3	8	15	5	4%
October	2	2	4	8	3	2%
November	7	6	5	18	6	5%
December	8	1	7	16	5	3%
Total	96	64	58	218	73	55%

**Table M. County of Residence for Firearm Injury ED Visits, NM, 2008-2010**

<b>COUNTY</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>Total</b>	<b>Annual Average</b>	<b>Percent</b>	<b>Rate</b>
<b>Bernalillo</b>	162	132	126	420	140	37%	21.3
<b>Catron</b>	0	1	1	2	1	0%	16.8
<b>Chaves</b>	36	31	20	87	29	8%	44.8
<b>Cibola</b>	4	6	5	15	5	1%	17.3
<b>Colfax</b>	2	4	2	8	3	1%	18.2
<b>Curry</b>	8	13	6	27	9	2%	19.2
<b>De Baca</b>	1	1	0	2	1	0%	29.0
<b>Dona Ana</b>	26	24	11	61	20	5%	9.6
<b>Eddy</b>	9	20	9	38	13	3%	23.7
<b>Grant</b>	12	4	4	20	7	2%	20.6
<b>Guadalupe</b>	3	2	0	5	2	0%	34.7
<b>Harding</b>	0	0	0	0	0	0%	0.0
<b>Hidalgo</b>	0	0	1	1	0	0%	5.5
<b>Lea</b>	26	20	18	64	21	6%	35.4
<b>Lincoln</b>	1	3	6	10	3	1%	14.3
<b>Los Alamos</b>	1	1	1	3	1	0%	5.0
<b>Luna</b>	6	3	3	12	4	1%	14.1
<b>McKinley</b>	2	4	5	11	4	1%	4.6
<b>Mora</b>	1	3	3	7	2	1%	41.7
<b>Otero</b>	16	7	12	35	12	3%	17.2
<b>Quay</b>	7	4	0	11	4	1%	35.6
<b>Rio Arriba</b>	15	13	12	40	13	4%	30.0
<b>Roosevelt</b>	3		3	6	2	1%	10.3
<b>Sandoval</b>	16	19	15	50	17	4%	12.7
<b>San Juan</b>	12	16	20	48	16	4%	12.1
<b>San Miguel</b>	10	5	8	23	8	2%	24.5
<b>Santa Fe</b>	18	17	11	46	15	4%	10.2
<b>Sierra</b>	3	3	1	7	2	1%	16.4
<b>Socorro</b>	6	0	4	10	3	1%	17.6
<b>Taos</b>	6	4	5	15	5	1%	15.4
<b>Torrance</b>	1	4	7	12	4	1%	22.0
<b>Union</b>	0	0	1	1	0	0%	7.5
<b>Valencia</b>	10	18	12	40	13	4%	17.0
<b>Total</b>	423	382	332	1137	379	100%	18.1

**Table N. Firearm and Other Gun-Related Injury ED Visits by Hospital, NM\*, 2008-2010**

<b>HOSPITAL NAME</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
Alta Vista RMC Las Vegas	18	14	9
Artesia General Hospital	4	8	7
Carlsbad Med Center	15	20	11
Christus-St. Vincent	40	46	43
Cibola General Hospital	7	10	5
Dan C. Trigg Memorial	8	10	3
ENMMC Roswell	34	41	22
Espanola Hospital	16	22	32
Gerald Champion	23	22	23
Gila Reg Medical Center	14	8	10
Guadalupe County	1	1	1
Holy Cross Hospital	13	11	10
Kaseman-Presbyterian	12	7	10
Lea Regional Hospital	27	27	26
Lincoln County MC	5	7	12
Los Alamos Medical MC	0	2	1
Lovelace Downtown	14	12	13
Lovelace Westside	4	1	2
Memorial Medical Center	53	42	17
Mimbres Memorial	18	7	9
Miners Colfax MC	6	12	2
Mountain View RMC	12	15	14
Nor-Lea Hospital District	16	4	7
Plains Regional MC	19	28	18
Presbyterian Hospital	33	40	34
Presbyterian Rio Rancho	1	11	14
Rehoboth McKinley	2	4	5
Roswell Regional	10	8	7
Roosevelt General	4	5	7
San Juan Regional MC	29	29	34
Sierra Vista Hospital	3	3	2
Socorro General Hospital	4	2	9
Union County General	0	0	2
UNM Hospital	210	195	161
Northern Navajo (IHS)	10	14	13
Zuni Hospital (IHS)	2	7	3
<b>Total</b>	<b>687</b>	<b>695</b>	<b>598</b>

\*Note: The chart includes NM residents and non-residents. Gun-related injuries include all cases with wounds from bb/pellet guns, gun-like devices such as paint ball and taser guns, and blunt traumas inflicted with guns (e.g. pistol whip).

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