

# Maryland Heat-Related Illness Surveillance Report Week of June 2 – June 8, 2024 (MMWR 2024 Week 23)

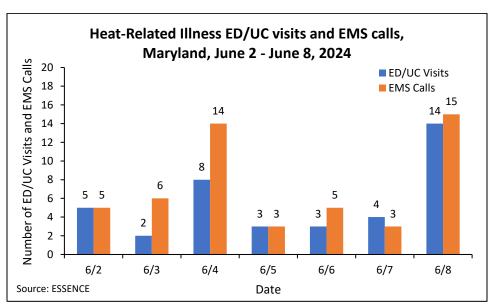
Report Date: June 12, 2024

## **Background**

The weekly Heat-Related Illness Surveillance Report is provided from May through September. The report focuses on extreme conditions including heat-related illness and heat-related deaths in Maryland.

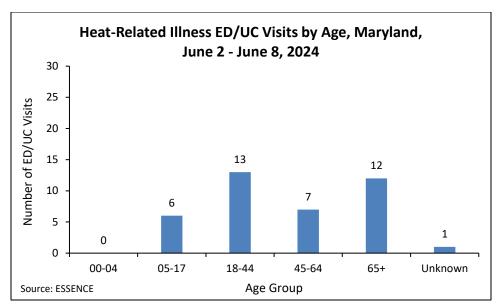
NOTE: Starting this heat season, we have begun using a revised heat-related illness query. This new query is more specific than the query used in previous seasons. Historical data in this report has been rerun using the new heat-related illness query.

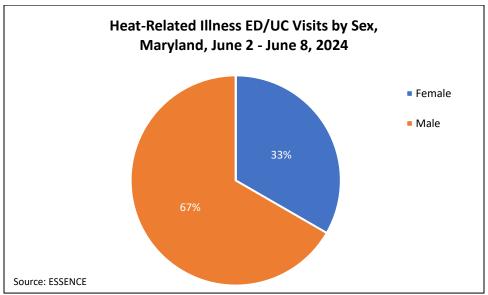
## **Weekly Heat-Related Illness**



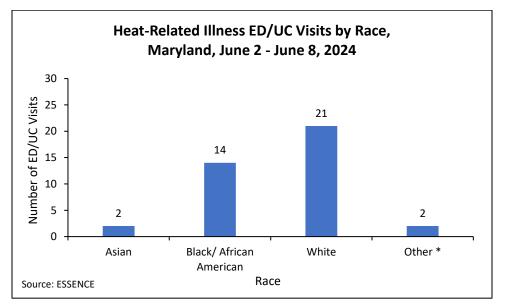
**Note on Emergency Department (ED) Data:** The results from the query used to track heat-related illnesses in ESSENCE, an electronic biosurveillance system, may be an overestimation of the actual burden of heat-related illness. This overestimation is due to the nature of the query, which includes the terms such as hyperthermia, heatstroke, or heat exhaustion. As of May 2024, visit data from 49 emergency departments and 24 urgent care centers are used for this ESSENCE visit data.

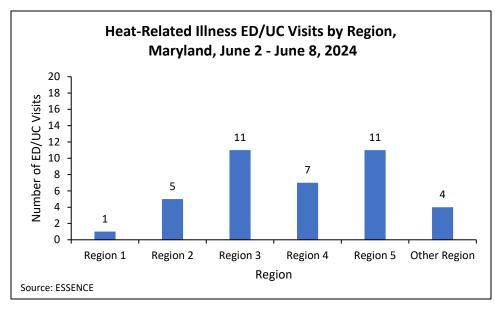
**Note on Emergency Medical Services (EMS) Data:** These data are based on EMS pre-hospital care reports where the EMS provider has selected hyperthermia as a primary or secondary impression of a patient's illness. This impression is solely based on the signs and symptoms seen by the provider, not on any diagnostic tests. Since these data do not include all primary or secondary impressions that may be seen with heat exposure, the actual numbers may be higher than what is represented. These data are reported for trending purposes only.





\*Other includes American Indian/ Alaskan Native, Native Hawaiian/ Other Pacific Islander, Other, and Not Reported





Note: Geographical distribution of ED visits is based on patients' jurisdiction of residence.

Region 1: Garrett and Allegany

Region 2: Washington and Frederick

Region 3: Anne Arundel, Baltimore City, Baltimore County, Carroll, Harford,

Howard

Region 4: Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, Worcester Region 5: Calvert,

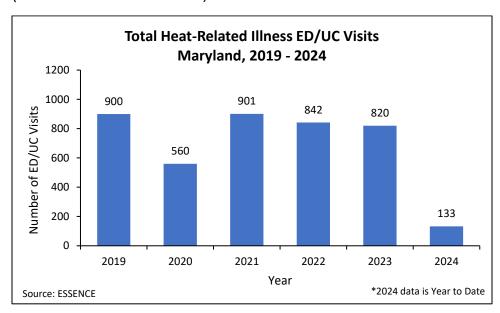
Charles, Montgomery, Prince George's, St.

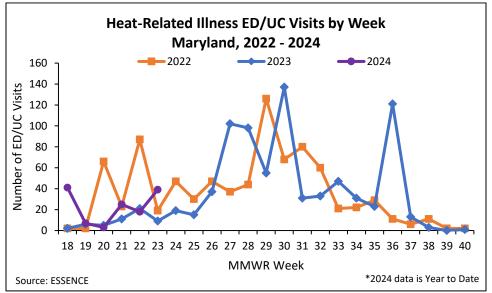
Mary's

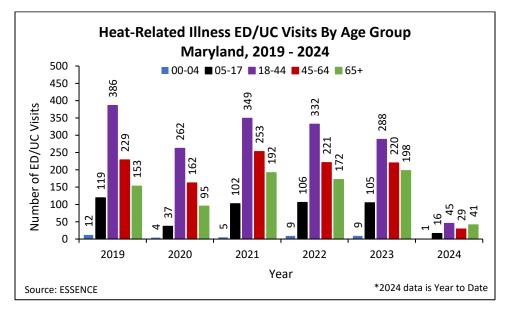
Other Region: Patient without a ZIP code or resides outside of MD.

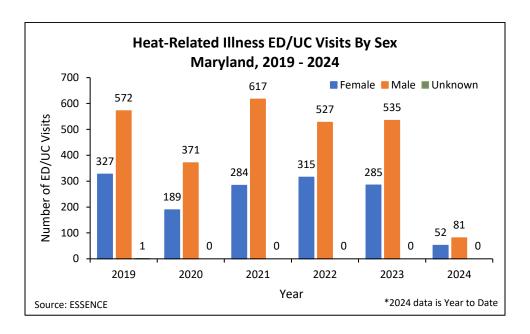
#### **Historical Heat-Related Illness**

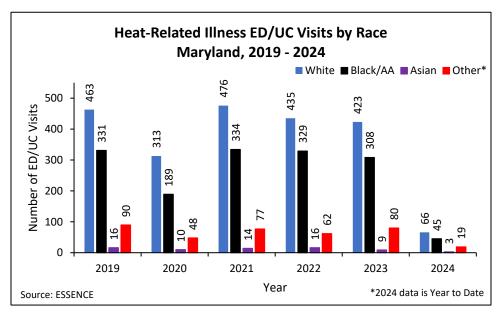
(Note: 2024 data is Year to Date)











\*Other includes American Indian/ Alaskan Native, Native Hawaiian/ Other Pacific Islander, Other, and Not Reported

**Region 1:** Garrett and Allegany

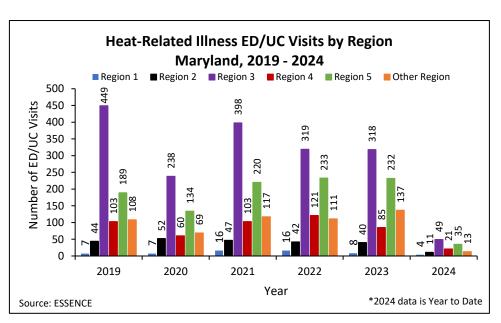
**Region 2:** Washington and Frederick

Region 3: Anne Arundel, Baltimore City, Baltimore County, Carroll, Harford, Howard

Region 4: Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, Worcester Region 5: Calvert,

Charles, Montgomery, Prince George's, St. Mary's

Other Region: Patient without a ZIP code or resides outside of MD.

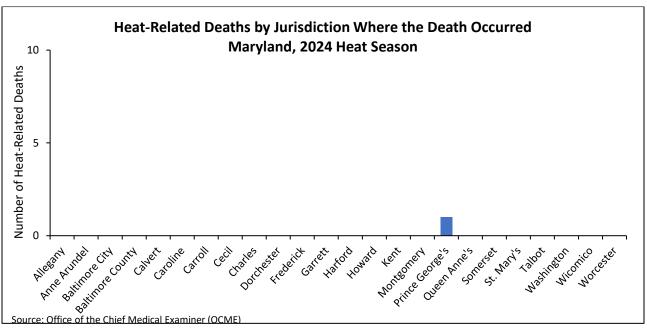


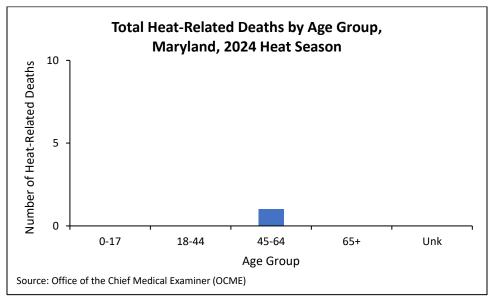
## **Heat-Related Deaths**

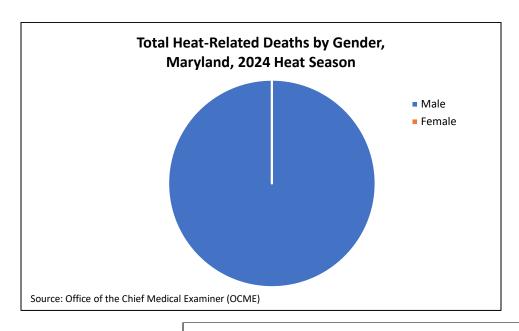
Total Reported Heat-Related Deaths This Season: 1

# Historical Total Reported Heat-Related Deaths

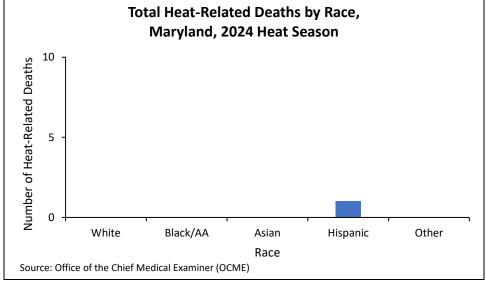
2019 Deaths	2020 Deaths	2021 Deaths	2022 Deaths	2023 Deaths
21	21	16	5	9







\*Other includes American Indian/ Alaskan Native, Native Hawaiian/ Other Pacific Islander, Other, and Not Reported



**Note:** Heat-Related Deaths are reported by the Office of the Chief Medical Examiner (OCME) and do not include deaths not evaluated by the OCME. Heat-Related deaths are those that the OCME has indicated "hyperthermia" as a cause of death or a contributing factor. Classification as a heat-related death does not mean that extreme temperatures were the only factor that caused or contributed to the death, as pre-existing medical conditions can significantly increase an individual's susceptibility to temperature changes.

## References

#### **ESSENCE**

The Maryland Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) program is an electronic biosurveillance system that uses non-traditional data sources to quickly identify disease outbreaks and other patterns of illness.

#### **Data Sources**

MDH analyzes chief complaints and discharge diagnoses of ED and UC visits to identify and monitor issues of public health concern across Maryland. The chief complaint is a free-text field capturing the patient's primary reason for seeking medical care as interpreted by the ED registration staff. The discharge diagnosis is a coded field that uses standardized values outlined by the International Classification of Diseases (ICD) 10th Revision and SNOMED Clinical Terms (CT) code sets.

#### **Case Definitions**

ED and UC visits for heat-related illness were identified based on the <u>Heat-Related Illness v2 Query</u> based on a previous query developed by the Council of State and Territorial Epidemiologists (CSTE) using Chief Complaint and Discharge Diagnosis.

For more information about extreme heat and emergency preparedness, follow the Office of Preparedness and Response on <u>Twitter</u> and <u>Facebook</u>.

For media inquiries, please contact the Office of Communications: 410-767-6490

#### Prepared by:

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