

Summer Hazards Emergency Department (ED) Visits Situational Report

Rapid Health Information NetwOrk
Washington State Department of Health

Date Prepared: June 25, 2025

Data Date Range: May 01, 2024 to October 31, 2024

Summer hazards are defined as outdoor conditions, extreme weather events, or recreational activities and can cause various adverse health effects resulting in healthcare visits. This report contains weather data and analyses of healthcare encounter data for summer hazards, including suspected heat-related illness (HRI), asthma, fire and smoke-inhalation related visits, drowning or submersion events, and boating-related emergency department (ED) visits based on data reported to the Rapid Health Information NetwOrk (RHINO).

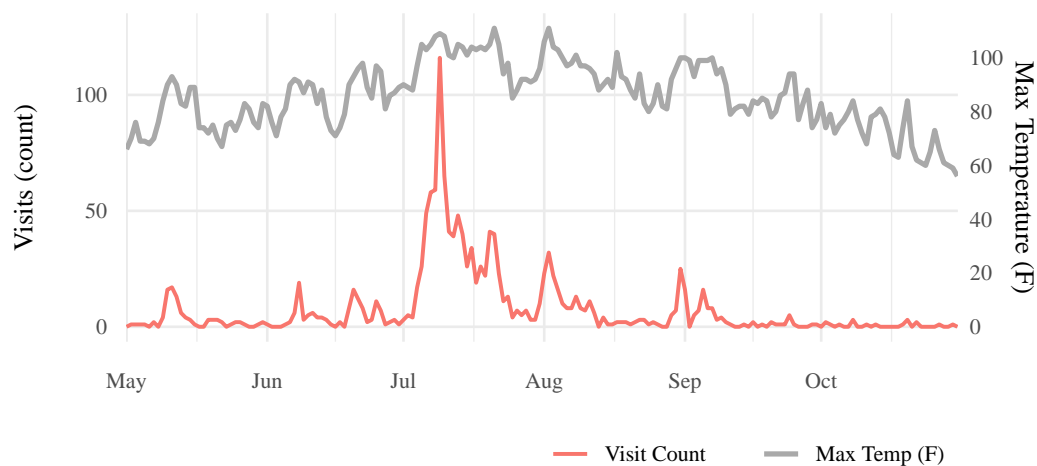
Summary (May 01, 2024 to October 31, 2024)

- 1415 HRI ED visits were identified. The highest volume of ED visits for HRI was 116 visits on July 9 .
- 171 HRI hospital admissions were identified.
- Smoke-related visits were identified in 348 ED visits.
- Asthma-related visits were identified in 46422 ED visits.
- Drowning or submersion related visits were identified in 227 ED visits.
- Boating-related visits were identified in 281 ED visits.

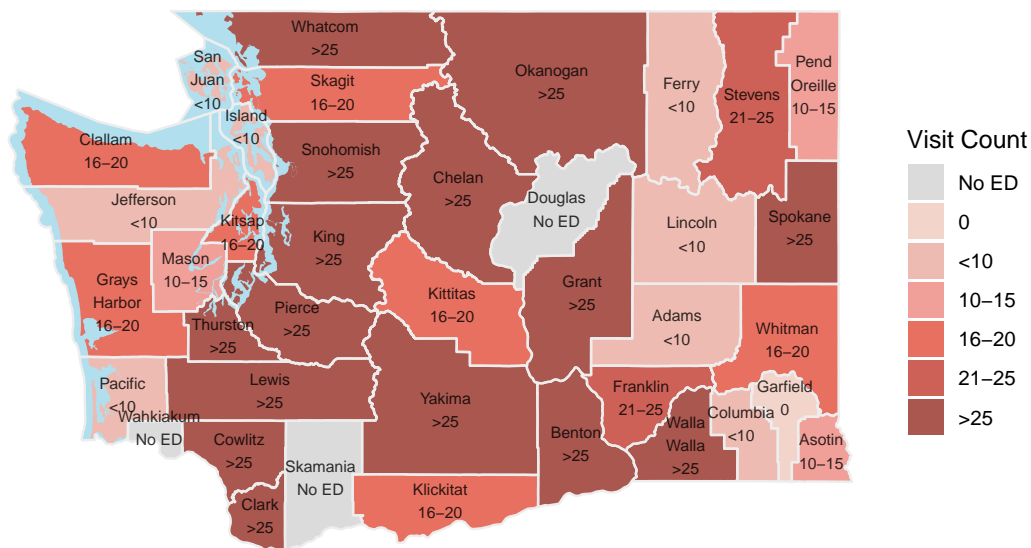
HRI ED Visits

Extreme heat may lead to heat-related illness (HRI), particularly in those with chronic conditions, pregnant individuals, young children and older adults, and those who work or recreate outdoors. HRI ED visits were elevated at different points throughout the summer season but were highest in early to mid-July. These elevated levels correspond with heat waves and elevated heat risk in different areas of the state. To reduce the risk of HRI, stay in indoor air-conditioned spaces as you are able or plan outdoor activities during cooler times of the day, drink plenty of fluids, and take frequent breaks when working outdoors.

Daily Count of HRI ED Visits



Count of HRI ED Visits by Facility Location
May 01, 2024 to October 31, 2024



Populations Impacted

Table 1: Demographics of All HRI ED Visits May 01, 2024 - October 31, 2024

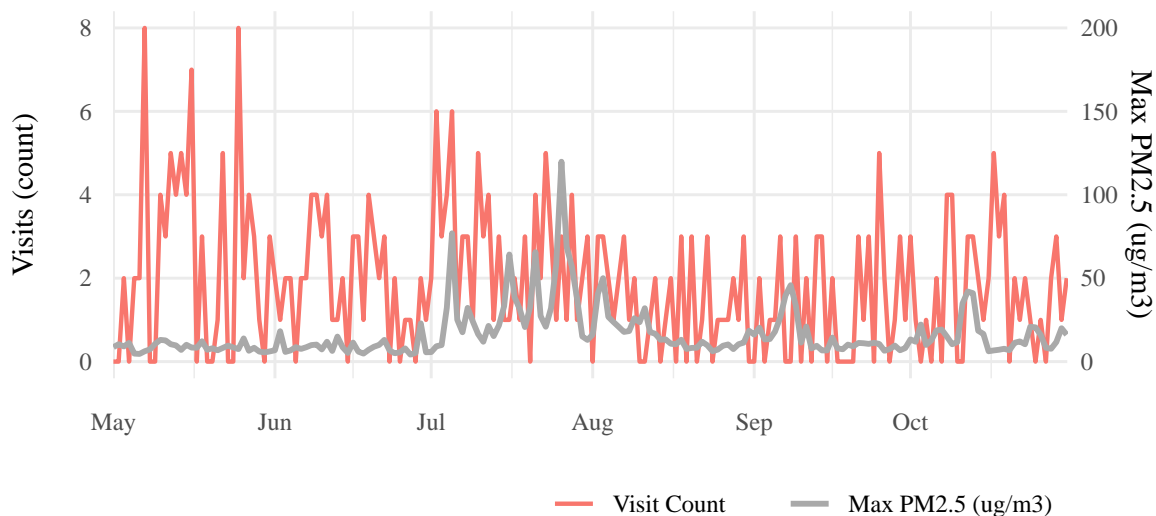
	Count (%)
Age Group	
0-4 years	35 (2.5)
5-17 years	110 (7.8)
18-44 years	590 (41.7)
45-64 years	324 (22.9)
65+ years	354 (25)
Sex	
Female	590 (41.7)
Male	821 (58)
Race	
Asian	30 (2.1)
Black or African American	63 (4.5)
American Indian or Alaska Native	27 (1.9)
Native Hawaiian or Other Pacific Islander	<10
White	1066 (75.3)
Multiracial	<10
Other Race	152 (10.7)
Unknown	61 (4.3)
Ethnicity	
Hispanic or Latino	189 (13.4)
Not Hispanic or Latino	1171 (82.8)
Unknown	55 (3.9)

*Visits with unknown age and unknown/other sex were <10.

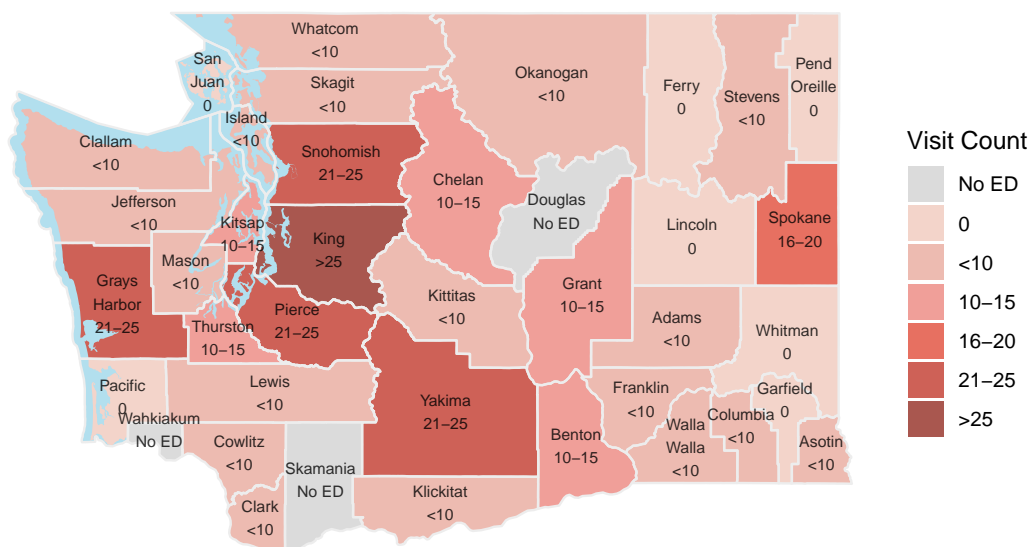
Smoke-Related ED Visits

Smoke-related ED visits are related to any smoke inhalation and are not specific to wildfire smoke. Smoke-related ED visits were elevated on and after the fourth of July due to fireworks, throughout late July possibly due to the presence of wildfire smoke, and at other times due to localized events (such as house fires). Central and Eastern Washington experienced wildfire smoke throughout July and early August, and most of the state experienced a short period of smoke in early September. There were periods of more localized wildfire smoke in areas near major fires at different points throughout the summer. Learn more about how to prepare for smoke [here](#) and about past wildfire smoke seasons on the [WA Smoke blog](#).

Daily Count of Smoke-Related ED Visits



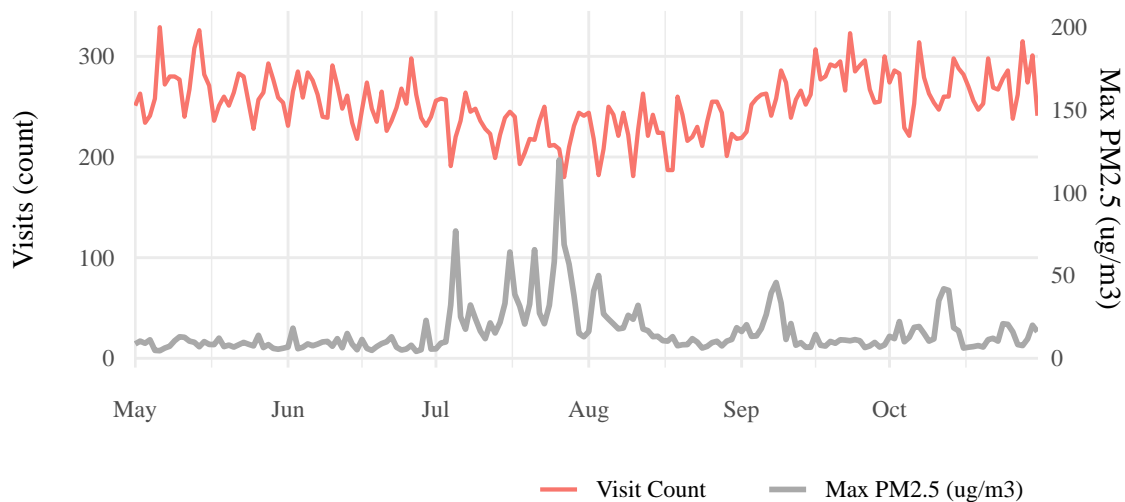
Count of Smoke-Related ED Visits by Facility Location May 01, 2024 to October 31, 2024



Asthma ED Visits

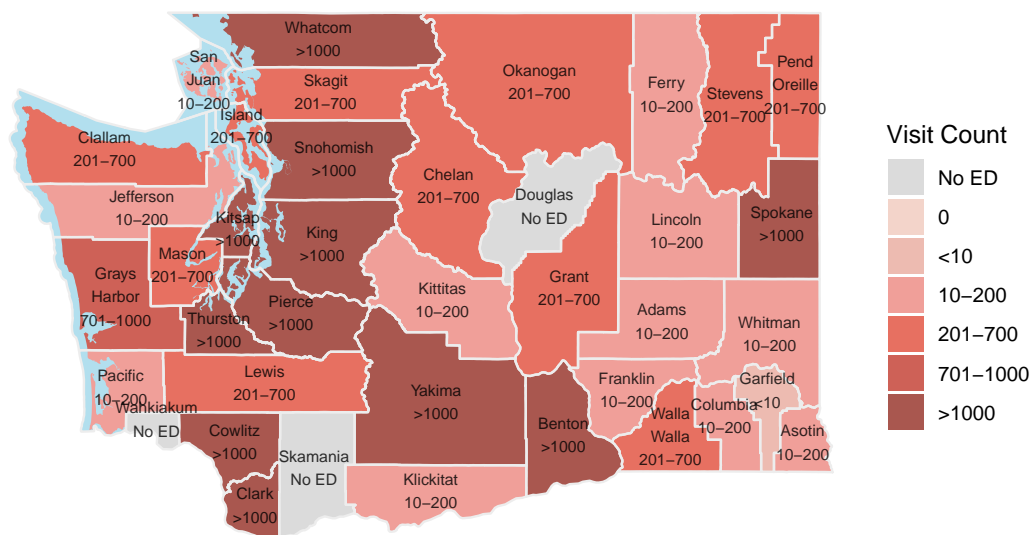
Outdoor air pollutants, indoor environmental contaminants, climate, exercise, colds and other respiratory infections, among other causes, can trigger or exacerbate [asthma](#) symptoms. Asthma visits slightly declined in July and August.

Daily Count of Asthma–Related ED Visits



Count of Asthma–Related ED Visits by Facility Location

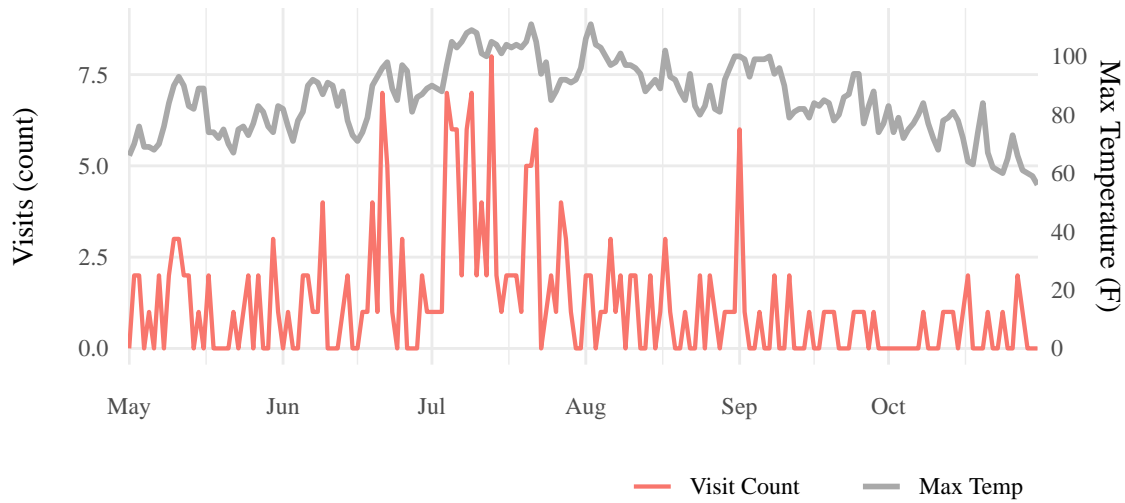
May 01, 2024 to October 31, 2024



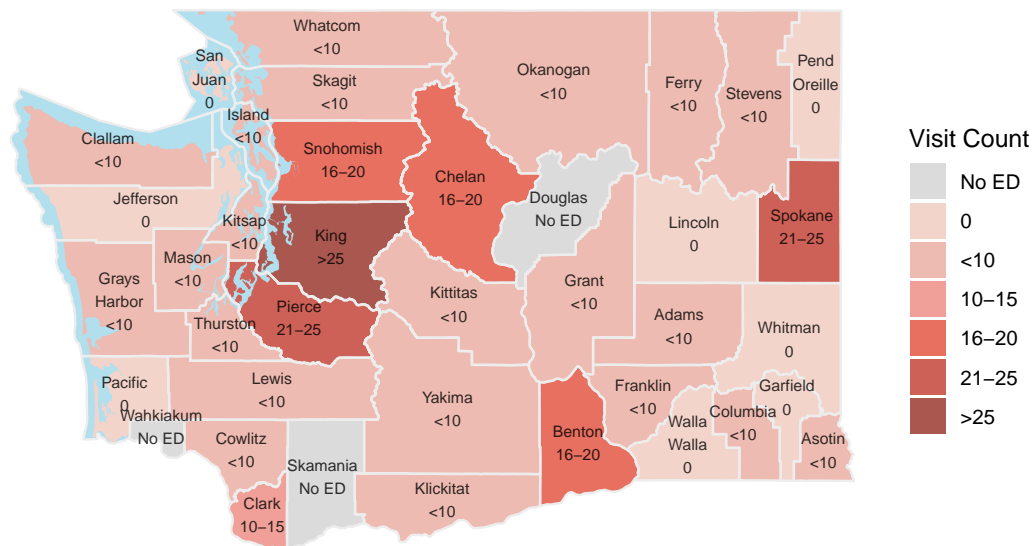
Drowning or Submersion ED Visits

Water-related recreational activities may lead to an increase in submersions and drownings, most are preventable. Drowning and submersion ED visits were elevated in June, July and early September.

Daily Count of Drowning or Submersion Related ED Visits



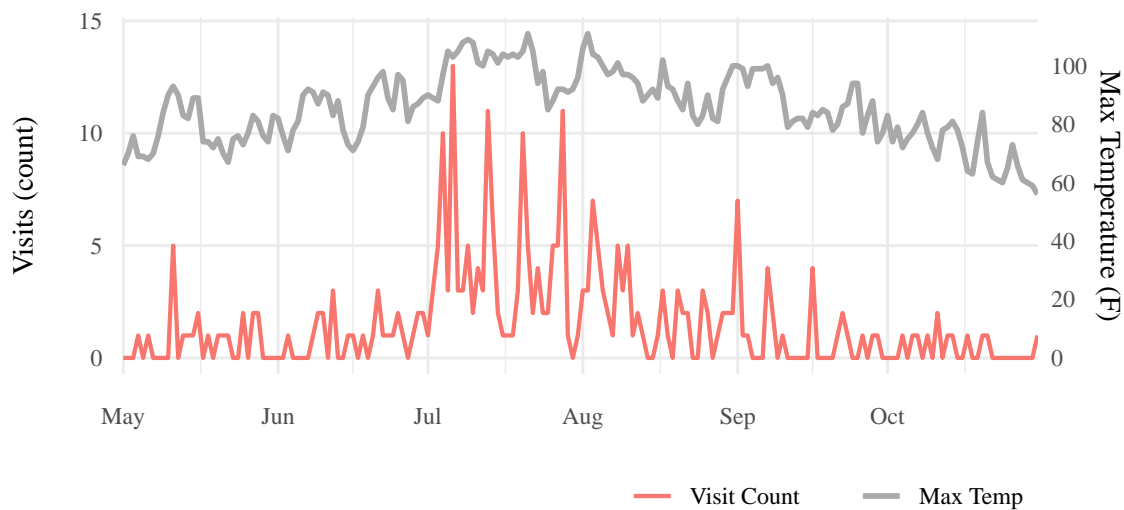
Count of Drowning or Submersion–Related ED Visits by Facility Location
May 01, 2024 to October 31, 2024



Boating-Related ED Visits

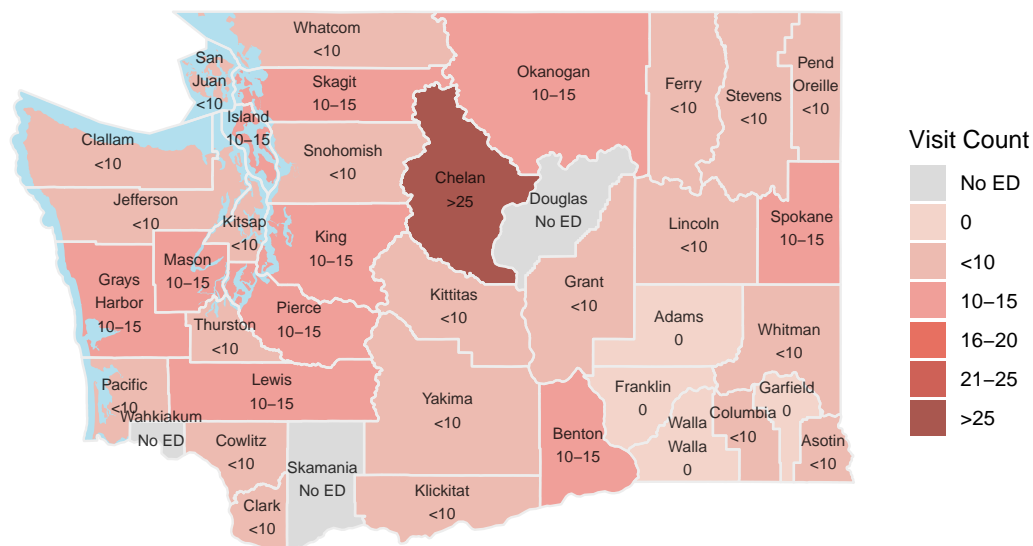
Recreational boating can lead to serious injuries on all types of vessels including motorized boats, sail boats, jet skis, and personal watercraft (including kayaks, canoes, and more). To boat safely, it is recommended to wear a life jacket, check the weather conditions, bring all [essential safety equipment](#), and share a plan that includes your contact information with route details with your family or friends before heading out on the water. Boating-related ED visits were elevated from July through mid-August and again in early September.

Daily Count of Boating–Related ED Visits



Count of Boating–Related ED Visits by Facility Location

May 01, 2024 to October 31, 2024



Data Notes

100% of non-federal EDs in Washington State submit data to RHINO. There are no EDs located in Douglas, Skamania, or Wahkiakum counties. These data are intended to be used for surveillance purposes only. Analyses are based on preliminary information that may change over time. Counts are ED visits or hospitalization events, not unique individuals. Dates are the date that a healthcare encounter began. Maximum temperature and PM2.5 (ug/m3) levels are the maximum values across the state on each day. Air quality (PM2.5) data is obtained from regulatory monitoring sites managed and collected by regional clean air agencies and the Washington State Department of Ecology and provided by AirNow. Temperature data is obtained from the CF6 dataset maintained by the [National Weather Service](#).

Visit Definitions

Heat-related Illness: Identified through the CDC ESSENCE Chief Complaint Discharge Diagnosis (CCDD) query category, Heat-Related Illness V2, using free text terms such as “heat,” “sun stroke,” and “hyperthermia” and ICD-10-CM diagnosis codes (including E900, T67, X30, W92) among ED chief complaints and discharge diagnoses.

Smoke-related: Identified using ICD-10-CM diagnosis codes (J70.5, T59.81, X01.1, X08.8) among ED discharge diagnoses. This query is not specific to wildfire smoke.

Asthma: Identified through the CDC ESSENCE Chief Complaint Discharge Diagnosis (CCDD) query category, Asthma V1, using free text terms such as “asthma,” and ICD-10-CM diagnosis code J45 among ED chief complaints and discharge diagnoses.

Drowning or submersion: Identified through the CDC ESSENCE Chief Complaint Discharge Diagnosis (CCDD) query category, Unintentional Drowning V1, using free text terms such as “drown”, “under water” and ICD-10-CM diagnosis codes (including T751, V90, V91, V92, W16, W22.041) among ED chief complaints and discharge diagnoses.

Boating-related: Identified through the CDC ESSENCE Chief Complaint Discharge Diagnosis (CCDD) query category, Recreational Boating Incidents V1, using free text terms such as “boat”, “jet ski”, and ICD-10-CM diagnosis codes (including V90-94, W16.7) among ED chief complaints and discharge diagnoses.

Contact Information

Point of Contact for Follow-Up

Name: RHINO Team

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