Injuries are an important cause of preventable morbidity and mortality in Utah, especially for young people. In the 1996 Health Status Survey, about one in five injuries reported for Utahns age 5 to 15, and one in ten for Utahns age 16 to 24, occurred at school. That was an estimated total of 13,100 Utahns age 5-24 who were injured at school.

A recent collaborative study by the University of Utah School of Medicine and the Utah Department of Health examined 44,565 school injuries that resulted in loss of at least one half day of school or needed medical attention from 1990 to 1997. This Health Status Update reviews some highlights of that study.

- The annual rate of school injuries was 13.7 per 1,000 students.
- The school injury rate was higher for boys (16.2 per 1,000) than for girls (11.0 per 1,000).

### School Injury Rates

Rate of school injuries (≥ 1/2 day absence or medical attention needed) per 1,000 students per year, Utah 1990-1997.

- The highest school injury rate by grade was for grades 4-6 (18.5 per 1,000).
- Most injured students (82%) missed no more than one school day, but 4% missed 3 or more days.
- In 4.2% of students with an initial injury, a second injury occurred within 2 years of the initial injury.

### School Injury Rate by Grade

Rate of school injuries (≥ 1/2 day absence or medical attention needed) per 1,000 students per year by grade, Utah 1990-1997.

- The most common contributing factors for school injuries were collision (33.6%), tripped (21%), falls (17.5%), equipment (7.3%), and hit by thrown object (4.8%).
- School injuries occurred on a variety of surfaces, including indoor surfaces (28.1%), grass (20.2%), and blacktop or concrete (19.1%).
- School injuries most often occurred during lunch or recess periods (39.6%) or during physical education (22.9%).

### School Injuries - Contributing Factors

Percentage of school injuries attributed to selected contributing factors, Utah 1990-1997.
Types of School Injury
Percentage of school injuries by type of injury, Utah 1990-1997.

- The most common types of school injuries were fractures (30%), lacerations (24.6%), and sprains (12%).
- Head injury occurred in 9.4% of injuries.
- Less than 1% of school injuries involved a weapon.
- 87% of school injuries resulted in medical evaluation.
- 1996 school injuries were linked to a database of emergency department records. For the 1,534 injuries evaluated in an emergency department (17.5% of injuries), the total ED charges were $545,000 (physician fees were not included in that total).
- 1992-1996 school injuries were linked to a database of hospital discharge records. For the 354 injuries requiring inpatient hospitalization (0.8%), total hospital charges were $1.16 million (mean $6,116 per discharge).

Injuries are one of the most important health issues for young people in Utah and elsewhere. Schools are an important focus for injury prevention. These data will help guide interventions to prevent injuries at school.

Utah Student Injury Surveillance

The studies from which these data were taken used the Utah Student Injury Report database, which is based on ongoing surveillance of all school injuries. This surveillance is conducted to define rates of school injuries; identify students at highest risk, or situations and activities that place them at highest risk; and define the outcomes and severity of school injuries. The ultimate purpose of these data is to guide and evaluate prevention efforts.

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Additional information about this topic are available from the Violence and Injury Prevention Program, Utah Department of Health, P O Box 142106, Salt Lake City, Utah 84114-2106, (801) 538-6864, FAX (801) 538-9134, email: ccazier@doh.state.ut.us and the Office of Public Health Data, Utah Department of Health, P O Box 142101, Salt Lake City, Utah 84114-2101, (801) 538-6108, FAX (801) 536-0947, email: phdata@doh.state.ut.us. Additional health data and reports can be obtained on the Internet at URL http://hlunix.hl.state.ut.us/action2000. Please send any comments on this report to the Office of Public Health Data.