## 28-8. Reduce occupational eye injury.

## 28-8b. Occupational eye injuries treated in emergency departments.

National Data Source	National Electronic Injury Surveillance System (NEISS), Consumer Product Safety Commission (CPSC) and National Institute for Occupational Safety and Health (NIOSH), CDC.
State Data Source	Not identified.
Healthy People 2000 Objective	Not applicable.
Changes since the 2000 Publication	New subobjective (see Comments).
Measure	Rate per 10,000 full-time workers.
Baseline (Year)	21.0 (1999)
Target	14.7
Target-Setting Method	30 percent improvement (see Comments).
	For a discussion of target-setting methods, see Part A, section 4.
Numerator	Number of occupational eye injuries or illnesses treated in hospital emergency departments.
Denominator	Number of full-time equivalent (FTE) workers (1 FTE = 2,000 hours worked per calendar year).
Population Targeted	Civilian non-institutionalized workers.
Questions Used To Obtain the National Baseline Data	From the 1999 National Electronic Injury Surveillance System (NEISS) Work-Related Injury Statistics Query System (Work-RISQS):
	[Query for:] (1) Treatment year (2) All ages (3) All or either gender (4) All diagnoses (5) Part of body: eyeball (6) All events, sources, and second sources

Expected Periodicity	Annual.
Comments	The NEISS is a national probability sample of hospitals in the U.S. and its territories. Patient information, including age, gender, and whether the injury is occupational or work-related, is collected from each NEISS hospital for every emergency visit. From the sample, work-related injuries by body part affected that are treated in hospital emergency rooms nationwide can be estimated.
	An occupational eye injury is any injury or illness affecting the eye (including the conjunctiva, cornea, eyeball, inside and outside of the eyelids, iris, lacrimal glands, lens, optic nerve, orbit, retina, and upper and lower eyelashes). The eye injury or illness must result from an event in the work environment. Work-related eye injuries/illnesses are counted if treated in an emergency department (ED re-visits are excluded) without regard to restricted activity, days away from work, payment by workers' compensation, or involvement of a consumer product.
	Rates are not restricted by industry or employer and include volunteers working for an organized group (for example, volunteer firemen or health aides).
	At the Internet-based Work-RISQS, rates are reported as the number injuries/illnesses per 100 full-time equivalent (FTE) workers. For the calculation, rate denominators are available by year, month, age group, and sex in FTE (1 FTE = 2000 hours/year) for all jobs worked. The employment estimate is derived from the Bureau of Labor Statistics Current Population Survey.
	The rate per 10,000 full-time workers is computed by (1) dividing the number of occupational injuries reported by the total number of hours worked by all employees during the calendar year, and (2) multiplying the result by 20,000,000. The factor 20,000,000 represents the hours worked in a year by 10,000 FTE workers (working 40 hours per week, 50 weeks a year).
	Estimatos loss than 2 500 do not most the minimum

Estimates less than 2,500 do not meet the minimum reporting requirements and rates are not shown.

Objective 28-8 moved from developmental to measurable during the Healthy People 2010 Midcourse Review. Two subobjectives, using two different data sources, were created. Subobjective 28-8a focuses on occupational eye injuries resulting in lost work days, while subobjective 28-8b focuses on occupational eye injuries treated in emergency departments.

The target for this subobjective is set to be consistent with objective 20-2: to reduce workrelated injuries resulting in medical treatment, lost time from work, or restricted work activity to 30 percent improvement.

See Part C for a description of SOII and Appendix A for focus area contact information.