



Metro Public Health Dept
 Nashville / Davidson County
 Promoting and Protecting Health

The Division of Epidemiology

presents

The Healthy People 2010 Report

September 2009

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Epidemiology and Research

The Epidemiology Division provides health data, information and analytical services to the community in order to foster decision-making that results in healthier lives.

The division collects, assembles and analyzes health status and health surveillance data in Nashville. It publishes reports on the health status of Davidson County residents based on various data sources that include birth and death certificates, notifiable disease data, and adult and youth health risk behavior surveys. Activities include epidemiological and spatial analyses, public health informatics, and public health

surveillance and response.

The division also provides technical support for program evaluation throughout the department. Surveys and evaluations may be conducted by request for programs within the Metro Public Health Department and for external organizations.

You may request data or services by going to our website at health.nashville.gov and clicking the link [Health Data Request](#).

Introduction:

Healthy People 2010 provided a set of objectives that the public health system (local, state, and federal) attempted to achieve in the first decade of the 21st century. The objectives were designed to identify the most significant preventable threats to health and to establish national goals for the significant reduction of these threats.

The purpose of this report is to measure the health status of Davidson County in relation to the national objectives. Using the most recently available data, this report provides an important perspective on the health status of Davidson County. It identifies locally the objectives which have been achieved and those on which continuing efforts are still needed.

Methodology:

Only objectives that were deemed by the Division of Epidemiology to be appropriate for the local level, and for which we were able to obtain data, are included in this report.

Many data sources were consulted in order to determine Davidson County's status. These data sources ranged from vital statistics, both the Behavioral Risk Factor Surveillance Systems (BRFSS) and the Youth Risk Behavior Survey (YRBS), hospital discharge data, notifiable disease data from the National Electronic Telecommunications System for Surveillance (NETSS), the National Electronic Disease Surveillance System (NEDSS), the Sexually Transmitted Disease Management Information System (STDMIS), and the HIV/AIDS Reporting System (HARS), reports from the Tennessee Department of Health (TDH), and information from specific programs. Please refer to the appendix for a list of data sources for each section of the report.

Objectives are grouped according to categories, and the data are presented in a series of tables. Each table lists the objective number, states the objective, goal, and unit of measurement, supplies the

corresponding data for Davidson County and the year of those data, and percent difference between the goal and the Davidson County number. As this is the second iteration of this report, the last two columns display the Davidson County data from the previous report where appropriate. Differences noted between the data in this report and the previous one are related to one of three issues: 1) new data sources have allowed reporting on objectives for which data were not available at the time of the first report, 2) changes in survey questions prohibit the reporting on some objectives for which data were available previously, or 3) new methodologies allowed refinement of previous measures, increasing accuracy. Objectives for which no recent data were available were excluded from this report, though data may have been reported in the previous version.

Objectives that Davidson County met are marked with an asterisk (*) by the objective number. Objectives that Davidson County has met but also demonstrate a worsening trend based on previous report are indicated by an asterisk and caret (*^). Objectives Davidson County has not met but demonstrate a worsening trend are indicated by a caret (^).

Access to Quality Health Services

In 2008, 86.9% of Davidson County residents reported having some form of health insurance, which was 13.1% below the national goal of 100.0%. **{Objective 1-1}**

The rate of pediatric asthma hospitalizations among children under the age of 18 years was 22.0% below the Healthy People 2010 goal of 17.3 admissions per 10,000. **{Objective 1-9a}**

In Davidson County, hospitalizations for uncontrolled diabetes among persons aged 18 to 64 years increased 17.3% from 9.8 per 10,000 population in 2002 to 11.5 per 10,000 in 2007. This rate was more than 2 times higher than the national goal of 5.4 admissions per 10,000. **{Objective 1-9b}**

Davidson County surpassed the Healthy People 2010 goal of reducing hospital admissions due to immunization preventable pneumonia or influenza among persons aged 65 years and older in 2007 by 60.0%. **{Objective 1-9c}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
1-1	Increase the proportion of persons with health insurance	100.0	percent	86.9	2008	-13.1	N/A	N/A
1-9	Reduce hospitalization rates for three ambulatory-care sensitive conditions: pediatric asthma, uncontrolled diabetes, and immunization-preventable pneumonia and influenza							
1-9a*	Pediatric asthma - persons under age 18 years	17.3	admissions per 10,000 population	13.5	2007	-22.0	14.5	2002
1-9b^	Uncontrolled diabetes - persons aged 18 to 64 years	5.4	admissions per 10,000 population	11.5	2007	113.0	9.8	2002
1-9c*	Immunization-preventable pneumonia or influenza - persons aged 65 years and older	8.0	admissions per 10,000 population	3.2	2007	-60.0	15.9	2002

*Davidson County has met this objective.

^Davidson County has worsened since last report.

^{N/A}Data for objective were not available at time of previous report.

Cancer

In 2007, cancer deaths decreased 6.2% from 2003, but were 24% higher than the Healthy People 2010 objective. **{Objective 3-1}**

The lung cancer death rate was 40.5% higher than the goal. **{Objective 3-2}**

The percentage of women having a Pap test within the last 3 years declined since 2001 from slightly above the goal to 8% below it. **{Objective 3-11b}**

The breast cancer death rate decreased 19.7% between 2003 and 2007, and was 34% lower than the goal. **{Objective 3-3}**

In Davidson County, the death rate from colorectal cancer was nearly 36% higher than the goal in 2007. **{Objective 3-5}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
3-1	Reduce the overall cancer death rate	159.9	deaths per 100,000 population	198.2	2007	24.0	211.2	2003
3-2	Reduce the lung cancer death rate	44.9	deaths per 100,000 population	63.1	2007	40.5	65.2	2003
3-3*	Reduce the breast cancer death rate	22.3	deaths per 100,000 population	14.7	2007	-34.1	18.3	2003
3-4*	Reduce the death rate from cancer of the uterine cervix	2.0	deaths per 100,000 population	0.3	2007	-85.0	0.4	2003
3-5	Reduce the colorectal cancer death rate	13.9	deaths per 100,000 population	18.9	2007	36.0	20.4	2003
3-6	Reduce the oropharyngeal cancer death rate	2.7	deaths per 100,000 population	3.5	2007	29.6	4.0	2003
3-7*	Reduce the prostate cancer death rate	28.8	deaths per 100,000 population	9.4	2007	-67.4	11.6	2003
3-8*	Reduce the rate of melanoma cancer deaths	2.5	deaths per 100,000 population	2.0	2007	-20.0	2.3	2003
3-11	Increase the proportion of women who receive a Pap test							
3-11b^	Women aged 18 years and older who received a Pap test within the preceding 3 years	90.0	percent	82.7	2008	-8.1	90.4	2001
3-13**	Increase the proportion of women aged 40 years and older who have received a mammogram within the preceding 2 years	70.0	percent	81.3	2008	16.1	88.1	2001
21-6	Increase the proportion of oral and pharyngeal cancers detected at the earliest stage	50.0	percent	34.1	2005	-31.8	30.9	2003

*Davidson County has met this objective.

^Davidson County has worsened since last report.

**Davidson County has met this objective, but has also worsened since last report.

Chronic Kidney Disease and Diabetes

In 2007, the diabetes death rate was 30.0% lower than the Healthy People 2010 goal of 45.0 deaths per 100,000 population. **{Objective 5-5}**

There were 375.9 new cases of end-stage renal disease per million population in 2006. This rate was 73.2% higher than the Healthy People 2010 goal of 217.0 new cases per million population, and was 22.9% higher than the incidence rate recorded in 2003. **{Objective 4-1}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
4-1 [^]	Reduce the rate of new cases of end-stage renal disease (ESRD)	217.0	cases per million population	375.9	2006	73.2	305.9	2003
5-5 ^{**}	Reduce the diabetes death rate	45.0	deaths per 100,000 population	31.5	2007	-30.0	26.9	2003

^{*}Davidson County has met this objective.

[^]Davidson County has worsened since last report.

^{**}Davidson County has met this objective, but has also worsened since last report.

Educational and Community-Based Programs, Environmental Health, Occupational Health and Safety

In 2008, none of the Davidson County schools met the Healthy People 2010 goal of a nurse to student ratio of 1:750. **{Objective 7-4}**

Davidson County had no waterborne disease outbreaks arising from water intended for drinking among persons served by community water systems in 2008. This surpasses the Healthy People 2010 goal of 2 outbreaks. **{Objective 8-6}**

In 2008, Davidson County was 19.3% below the 90.0% Healthy People 2010 goal for high school completion. **{Objective 7-1}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
7-1	Increase high school completion	90.0	percent of persons aged 18 to 24	72.6	2008	-19.3	N/A	N/A
7-4	Increase the proportion of the Nation's elementary, middle, junior high, and senior high schools that have a nurse-to-student ratio of at least 1:750							
7-4a	All middle, junior high, and senior high schools	50.0	percent	0.0	2009	-100.0	0.0	2005
7-4b	Senior high schools	50.0	percent	0.0	2009	-100.0	0.0	2005
7-4c	Middle and junior high schools	50.0	percent	0.0	2009	-100.0	0.0	2005
8-6*	Reduce waterborne disease outbreaks arising from water intended for drinking among persons served by community water systems	2	outbreaks	0	2008	-100.0	0	2005
8-11	Eliminate elevated blood lead levels in children	0.0	percent	0.2	2007	§	N/A	N/A
20-4‡	Reduce pneumoconiosis deaths	1900	number of deaths	0	2007	-100.0	1	2003

*Davidson County has met this objective.

§Percent difference cannot be calculated when objective equals 0.

N/AData for objective were not available at time of previous report.

‡Federal objective for which data were available. Local benchmark not available.

Family Planning

From 2004 to 2007, pregnancies among 15 to 17 year olds increased by 11%. **{Objective 9-7}**

Davidson County's teens fall short of the national goal for both sexual abstinence and delay of sexual activity until after age 15. **{Objectives 9-9, 9-8}**

Female adolescents in Davidson County surpassed national goals for condom use and condom use plus a hormonal method. **{Objectives 9-10e, 9-10g}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
9-2	Reduce the proportion of births occurring within 24 months of a previous birth	6.0	percent	14.6	2007	143.3	N/A	N/A
9-7*	Reduce pregnancies among adolescent females aged 15 to 17 years	43.0	pregnancies per 1,000 females aged 15-17	55.1	2007	28.1	49.6	2004
9-8	Increase the proportion of adolescents who have never engaged in sexual intercourse before age 15 years							
9-8a	Females	88.0	percent	78.3	2007	-11.0	78.0	2003
9-8b	Males	88.0	percent	65.6	2007	-25.5	65.8	2003
9-9	Increase the proportion of adolescents (15 to 17) who have never engaged in sexual intercourse							
9-9a	Females	75.0	percent	55.2	2007	-26.4	53.4	2003
9-9b	Males	75.0	percent	49.9	2007	-33.5	46.1	2003
9-10	Increase the proportion of sexually active, unmarried adolescents aged 15 to 17 years who use contraception that both effectively prevents pregnancy and provides barrier protection against disease							
	<i>Use at last intercourse</i>							
9-10e*	Females who use condoms	49.0	percent	62.0	2007	26.5	N/A	N/A
9-10f	Males who use condoms	79.0	percent	71.4	2007	-9.6	N/A	N/A
9-10g*	Females who use condoms plus hormonal method	11.0	percent	17.9	2007	62.7	N/A	N/A
9-10h	Males who use condoms plus hormonal method	20.0	percent	7.6	2007	-62.0	N/A	N/A

*Davidson County has met this objective.

†Davidson County has worsened since last report.

^{N/A}Data for objective were not available at time of previous report.

Food Safety

In 2008, the incidence of disease due to *Campylobacter* species was 4.4 cases per 100,000 persons; although the incidence of disease was lower than the Healthy People 2010 objective goal of 12.3 cases per 100,000, incidence increased 18.9% over the 3.7 cases per 100,000 reported for Davidson County in 2003. **{Objective 10-1a}**

Davidson County did not meet the goals for reducing infection due to *Listeria monocytogenes* and *Salmonella* species. **{Objectives 10-1b, 10-1c, 10-1d}**

In 2008, the incidence of *Escherichia coli* 0157:H7 was 1.0 cases per 100,000, which met the Healthy People 2010 goal. **{Objective 10-1b}**

In 2008, the incidence of *Listeria monocytogenes* (0.51 cases per 100,000 population) and *Salmonella* (12.3 cases per 100,000 population) was nearly double the Healthy People 2010 goal of 0.25 and 6.8 per 100,000, respectively. **{Objective 10-1c}**

Davidson County met the objectives targeted to reduce outbreaks of infections caused by *Escherichia coli* 0157:H7 and *Salmonella* serotype Enteritidis. In 2008, there was one investigated outbreak of *Escherichia coli* 0157:H7, and no investigated outbreaks of *Salmonella*. **{Objective 10-2}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
10-1	Reduce infection caused by key foodborne pathogens							
10-1a ^{**}	Campylobacter species	12.3	cases per 100,000 population	4.4	2008	-65.0	3.7	2003
10-1b ^{**}	Escherichia coli 0157:H7	1.0	cases per 100,000 population	1.0	2008	90.0	0.0	2003
10-1c [*]	Listeria monocytogenes	0.25	cases per 100,000 population	0.51	2008	104.0	0.2	2003
10-1d [*]	Salmonella species	6.8	cases per 100,000 population	12.3	2008	80.9	9.3	2003
10-2	Reduce outbreaks of infections caused by key foodborne bacteria							
10-2a ^{**}	Escherichia coli 0157:H7	11	outbreaks per year	1	2008	-90.9	0	2005
10-2b [*]	Salmonella serotype Enteritidis	22	outbreaks per year	0	2008	-100.0	0	2005

*Davidson County has met this objective.

^{*}Davidson County has worsened since last report.

^{**}Davidson County has met this objective, but has also worsened since last report.

HIV and Sexually Transmitted Diseases

The proportion of adults in Davidson County with tuberculosis who have been tested for HIV was 96.1% in 2008, 13.1% higher than the Healthy People 2010 goal. **{Objective 13-11}**

The rate of new cases of primary and secondary syphilis in Davidson County in 2007 was 12.2 per 100,000 population, which was 61 times higher than the Healthy People 2010 goal of 0.2 per 100,000. The 2007 rate was almost 5 times higher than the 2.5 cases per 100,000 population in 2004. **{Objective 25-3}**

In 2007, among adolescents in Davidson County ages 15 to 24, 19.5% of females and 26.8% of males tested positive for *Chlamydia trachomatis* infections, 6.5 times and 8.9 times higher than the goal of 3.0% respectively. **{Objectives 25-1b, 25-1c}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
13-1	Reduce AIDS among adolescents and adults	1.0	per 100,000 population	807.6	2008	80660.0	N/A	N/A
13-2 [±]	Reduce the number of new AIDS cases among adolescent and adult men who have sex with men	13,385	new cases	72	2008	-99.5	N/A	N/A
13-3 [±]	Reduce the number of new AIDS cases among females and males who inject drugs	9,075	cases	18	2008	-99.8	N/A	N/A
13-4 [±]	Reduce the number of new AIDS cases among adolescent and adult men who have sex with men and inject drugs	1,592	cases	6	2007	-99.6	N/A	N/A
13-11 ^{**}	Increase the proportion of adults with tuberculosis (TB) who have been tested for HIV	85.0	percent	96.1	2008	13.1	100.0	2005
13-14	Reduce deaths from HIV infection	0.7	deaths per 100,000 population	8.5	2007	1114.3	12.4	2003
25-1	Reduce the proportion of adolescents and young adults with <i>Chlamydia trachomatis</i> infections							
25-1a	Females aged 15 to 24 years attending family planning clinics	3.0	percent	14.2	2007	373.3	N/A	N/A
25-1b	Females aged 15 to 24 years attending STD clinics	3.0	percent	19.5	2007	550.0	N/A	N/A
25-1c	Males aged 15 to 24 years attending STD clinics	3.0	percent	26.8	2007	793.3	N/A	N/A
25-2 [^]	Reduce gonorrhea	19.0	new cases per 100,000 population	221.5	2007	1065.8	207.9	2004
25-3 [^]	Eliminate sustained domestic transmission of primary and secondary syphilis	0.2	cases per 100,000 population	12.2	2007	6000.0	2.5	2004
25-9 [*]	Reduce congenital syphilis	1.0	new cases per 100,000 live births	0.0	2007	-100.0	44.4	2004
25-11	Increase the proportion of adolescents who abstain from sexual intercourse or use condoms if currently sexually active	95.0	percent	82.3	2007	-13.4	N/A	N/A

*Davidson County has met this objective.

[^]Davidson County has worsened since last report.

^{**}Davidson County has met this objective, but has also worsened since last report.

^{N/A}Data for objective were not available at time of previous report.

[±]Federal objective for which data were available. Local benchmark not available.

Heart Disease and Stroke

From 2003 to 2007, there was an 11.4% decrease in the rate of deaths due to coronary heart disease. The 2007 rate of 171.8 deaths per 100,000 population was 3.5% higher than the national goal. **{Objective 12-1}**

The rate of deaths from stroke decreased 27.1% from 2003 to 2007. The 2007 rate of 49.5 deaths per 100,000 population was 3.1% higher than the Healthy People 2010 goal. **{Objective 12-7}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
12-1	Reduce coronary heart disease deaths ¹	166.0	deaths per 100,000 population	171.8	2007	3.5	194.0 [‡]	2003
12-6	Reduce hospitalizations of older adults with congestive heart failure as the principal diagnosis							
12-6a	Adults aged 65 to 74 years	6.5	hospitalizations per 1,000 population	8.7	2007	33.8	10.5	2002
12-6b	Adults aged 75 to 84 years	13.5	hospitalizations per 1,000 population	16.2	2007	20.0	22.5	2002
12-6c	Adults aged 85 years and older	26.5	hospitalizations per 1,000 population	32.0	2007	20.8	36.4	2002
12-7	Reduce stroke deaths	48.0	deaths per 100,000 population	49.5	2007	3.1	67.9	2003

¹Only includes ICD-10 codes I11, I20-I25, and does not encompass all deaths labeled 'heart disease' by group codes.

[‡]2003 data were recalculated using new methods. See technical notes for details.

Injury and Violence Prevention

In 2007, the death rate from firearms was 14.9 deaths per 100,000 population, 3.6 times higher than the national goal. **{Objective 15-3}**

The death rate due to poisoning in Davidson County was 10 times higher than the Healthy People 2010 goal. **{Objective 15-8}**

The unintentional injury death rate in Davidson County was 45.6 deaths per 100,000 population. This rate was 2.6 times higher than the national goal. **{Objective 15-13}**

The death rate from motor vehicle crashes in 2007 was 14.1 deaths per 100,000 population, 53.3% higher than the national goal. **{Objective 15-15a}**

The goal for deaths from homicide was 3.0 deaths per 100,000 population. In 2007, the homicide death rate in Davidson County was 12.8 deaths per 100,000 population, 4.3 times higher than the goal. **{Objective 15-32}**

Weapon carrying by adolescents on school property increased 50.0% from 2003 to 2007, and the 2007 proportion of 6.0% was 22.4% higher than the goal. **{Objective 15-39}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
15-1	Reduce hospitalizations for nonfatal head injuries	45.0	hospitalizations per 100,000 population	51.8	2007	15.1	116.8	2002
15-2	Reduce hospitalizations for nonfatal spinal cord injuries	2.3	hospitalizations per 100,000 population	5.0	2007	117.4	N/A	N/A
15-3	Reduce firearm-related deaths	4.1	deaths per 100,000 population	14.9	2007	263.4	16.2	2003
15-7**	Reduce nonfatal poisonings	292.0	per 100,000 population	188.1	2007	-35.6	166.6	2002
15-8^	Reduce deaths caused by poisonings	1.5	deaths per 100,000 population	15.3	2007	920.0	13.1	2003
15-9^	Reduce deaths caused by suffocation	3.0	deaths per 100,000 population	5.6	2007	86.7	4.0	2003
15-12*	Reduce hospital emergency department visits caused by injuries	126.0	per 1,000 population	70.0	2007	-44.4	109.0	2002
15-13	Reduce deaths caused by unintentional injury	17.5	deaths per 100,000 population	45.6	2007	160.6	48.3	2003
15-15	Reduce deaths caused by motor vehicle crashes							
15-15a	Reduce deaths caused by motor vehicle crashes	9.2	deaths per 100,000 population	14.1	2007	53.3	16.2	2003
15-16	Reduce pedestrian deaths on public roads	1.0	deaths per 100,000 population	1.7	2007	70.0	2.3	2004
15-25	Reduce residential fire deaths	0.2	deaths per 100,000 population	2.1	2007	950.0	2.2	2003
15-27	Reduce deaths from falls	3.0	deaths per 100,000 population	9.5	2007	216.7	11.7	2003
15-28	Reduce hip fractures among older adults							
15-28a	Females aged 65 years and older	416.0	per 100,000 population	983.2	2007	136.3	1135.9	2002
15-28b*	Males aged 65 years and older	474.0	per 100,000 population	417.4	2007	-11.9	552.2	2002
15-29*	Reduce drownings	0.9	deaths per 100,000 population	0.6	2007	-33.3	1.3	2003
15-30*	Reduce hospital emergency department visits for nonfatal dog bite injuries	114.0	hospital ED visits per 100,000 population	86.0	2007	-24.6	355.7	2002
15-32^	Reduce homicides	3.0	deaths per 100,000 population	12.8	2007	326.7	11.1	2003
15-35*	Reduce the annual rate of rape or attempted rape	0.7	rate per 1,000 persons	0.6	2007	-14.3	N/A	N/A
15-38^	Reduce physical fighting among adolescents	32.0	percent	33.9	2007	5.9	31.0	2003
15-39^	Reduce weapon carrying by adolescents on school property	4.9	percent	6.0	2007	22.4	4.0	2003

*Davidson County has met this objective.

^Davidson County has worsened since last report.

**Davidson County has met this objective, but has also worsened since last report.

Maternal, Infant, and Child Health

Davidson County has failed to meet the national goals for all fetal and infant death objectives. **{Objective 16-1}**

While Davidson County surpassed the goal for child death among 5-9 year olds, the rate among 1-4 year olds was 1.7 times higher than the national goal in 2007. **{Objectives 16-2a, 16-2b}**

The rate of maternal deaths in Davidson County was more than 3 times higher than the national objective. **{Objective 16-4}**

Only slightly more than half of all Davidson County women entered prenatal care during the first trimester of their pregnancy in 2007, a 37.7% decline since 2003. **{Objective 16-6a}**

Davidson County has not yet reached any of the national objectives related to low birth weight or preterm delivery. **{Objectives 16-10, 16-11}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
16-1	Reduce fetal and infant deaths							
16-1a	Fetal deaths at 20 or more weeks of gestation	4.1	per 1,000 live births plus fetal deaths	5.0	2007	22.0	5.9	2003
16-1b	Fetal and infant deaths during perinatal period (28 weeks of gestation to 7 days or more after birth)	4.5	per 1,000 live births plus fetal deaths	7.7	2007	71.1	8.0	2003
16-1c [^]	All infant deaths (within 1 year)	4.5	per 1,000 live births	8.0	2007	78.0	7.8	2003
16-1d	Neonatal deaths (within the first 28 days of life)	2.9	per 1,000 live births	5.1	2007	75.9	5.2	2003
16-1e [^]	Postneonatal deaths (between 28 days and 1 year)	1.2	per 1,000 live births	2.9	2007	141.7	2.6	2003
16-1f	All birth defects	1.1	per 1,000 live births	2.5	2007	127.3	3.0	2003
16-1g [^]	Congenital heart defects	0.38	per 1,000 live births	1.0	2007	163.2	0.9	2003
16-1h	Reduce deaths from sudden infant death syndrome (SIDS)	0.25	per 1,000 live births	0.6	2007	140.0	0.6	2003
16-2	Reduce the rate of child deaths							
16-2a [^]	Children aged 1 to 4 years	18.6	deaths per 100,000 population	31.1	2007	67.2	19.3	2003
16-2b ^{**}	Children aged 5 to 9 years	12.3	deaths per 100,000 population	10.4	2007	-15.4	8.2	2003
16-3	Reduce deaths of adolescents and young adults							
16-3a [^]	Adolescents aged 10 to 14 years	16.8	deaths per 100,000 population	17.0	2007	1.2	11.8	2003
16-3b [^]	Adolescents aged 15 to 19 years	39.8	deaths per 100,000 population	74.2	2007	86.4	63.5	2003
16-3c	Young adults aged 20 to 24 years	49.0	deaths per 100,000 population	98.9	2007	101.8	112.8	2003

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
16-4	Reduce maternal deaths	3.3	deaths per 100,000 live births	10.0	2007	203.0	11.2	2003
16-6	Increase the proportion of pregnant women who receive early and adequate prenatal care							
16-6a [^]	Care beginning in first trimester of pregnancy	90.0	percent of live births	53.9	2007	-40.1	86.5	2003
16-6b [^]	Early and adequate prenatal care	90.0	percent of live births	56.2	2007	-37.6	81.0	2003
16-9	Reduce Cesarean births among low-risk (full-term, singleton, vertex presentation) women							
16-9a	Women giving birth for the first time	15.0	percent of live births	33.7	2007	124.7	9.7 [‡]	2003
16-9b	Prior cesarean birth	63.0	percent of live births	88.0	2007	39.7	94.4	2003
16-10	Reduce low birth weight (LBW, <2500g) and very low birth weight (VLBW, <1500g)							
16-10a	Low birth weight (LBW)	5.0	percent of live births	9.3	2007	86.0	9.5	2003
16-10b	Very low birth weight (VLBW)	0.9	percent of live births	1.7	2007	88.9	1.7	2003
16-11	Reduce preterm births							
16-11a	Total preterm births	7.6	percent of live births	11.2	2007	47.4	11.2	2003
16-11b [^]	Live births at 32 to 36 weeks of gestation	6.4	percent of live births	9.1	2007	42.2	8.7	2003
16-11c	Live births at less than 32 weeks of gestation	1.1	percent of live births	2.0	2007	81.8	4.4	2003
16-17	Increase abstinence from alcohol, cigarettes, and illicit drugs among pregnant women							
16-17c	Cigarette smoking	99.0	percent	89.5	2007	-9.6	90.6	2003

[^]Davidson County has worsened since last report.

[‡]Davidson County has met this objective, but has also worsened since last report.

[‡]2003 data were recalculated using new methods. See technical notes for details.

Immunization and Infectious Diseases

In adults aged 19 to 24 years, the rate of reported new cases of Hepatitis B infection in Davidson County in 2008 surpassed the Healthy People 2010 goal. **{Objective 14-3a}**

Davidson County achieved effective vaccine coverage levels for universally recommended vaccines among children aged 19 to 35 months. In 2008, the percentage of children immunized in Davidson County who received all recommended vaccines (81.7%) exceeded the Healthy People 2010 goal (80.0%) by 2.1%. **{Objective 14-24a}**

The level of reported invasive penicillin-resistant pneumococcal infections in children under 5 years of age and adults aged 65 years and older exceeded the Healthy People 2010 objectives. Among children under 5 years of age, Davidson County had 0 cases in 2008; the goal was 6.0 cases per 100,000 population. Among adults aged 65 and older, the goal was surpassed by 78.6% (Davidson County – 1.5 cases per 100,000 population; objective 7.0 cases per 100,000 population). **{Objectives 14-5c, 14-5d}**

In 2008, there were 11.5 new cases of tuberculosis per 100,000 population in Davidson County. This did not meet the Healthy People 2010 goal of 1.0 new case per 100,000 population. **{Objective 14-11}**

The percentage of non-institutionalized adults who received the influenza vaccine annually in Davidson County in 2008 (72.9%) was 19.0% lower than the Healthy People 2010 objective (90.0%). **{Objective 14-29a}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
14-1	Reduce or eliminate indigenous cases of vaccine-preventable diseases							
14-1a*	Congenital rubella syndrome (children under age 1 year)	0	Number of cases	0	2008	0.0	0	2003
14-1b*	Diphtheria (persons under age 35 years)	0	Number of cases	0	2008	0.0	0	2003
14-1c*	Haemophilus influenzae type B (children under age 5 years)	0	Number of cases	0	2008	0.0	0	2003
14-1d*	Hepatitis B (persons aged 2 to 18 years)	9	Number of cases	0	2008	-100.0	7	2003
14-1e*	Measles (persons of all ages)	0	Number of cases	0	2008	0.0	0	2003
14-1f*	Mumps (persons of all ages)	0	Number of cases	0	2008	0.0	1	2003
14-1g*±	Pertussis (children under age 7 years)	2000	Number of cases	3	2008	-99.9	3	2003
14-1h*	Polio (wild-type virus)(persons of all ages)	0	Number of cases	0	2008	0.0	0	2003
14-1i*	Rubella (persons of all ages)	0	Number of cases	0	2008	0.0	0	2003
14-1j*	Tetanus (persons under age 35 years)	0	Number of cases	0	2008	0.0	0	2003
14-2*	Reduce chronic hepatitis B virus infections in infants and young children (perinatal infections)	400	infections	0	2008	-100.0	2	2003
14-3	Reduce hepatitis B							
	<i>Adults</i>							
14-3a*	19 to 24 years	2.4	rate per 100,000 population	2.1	2008	-12.5	5.7	2003
14-3b*	25 to 39 years	5.1	rate per 100,000 population	2.1	2008	-58.8	6.3	2003
14-3c*	40 years and older	3.8	rate per 100,000 population	2.0	2008	-47.4	4.4†	2003
	<i>High-Risk groups</i>							
14-3d±	Injection drug users	1808	Number of cases	0	2008	-100.0	1	2003
14-3e±	Heterosexually active persons	1240	Number of cases	8	2008	-99.4	6	2003
14-3f±	Men who have sex with men	1808	Number of cases	0	2008	-100.0	1	2003
14-3g±	Occupationally exposed workers	62	Number of cases	0	2008	-100.0	1	2003
14-4*	Reduce bacterial meningitis in young children	8.6	New cases per 100,000 children aged 1 through 23 months	0.0	2008	-100.0	N/A	N/A
14-5	Reduce invasive pneumococcal infections, <i>New invasive pneumococcal infections</i>¹							
14-5a*	Children under age 5 years	46.0	rate per 100,000 population	18.0	2008	-60.9	7.7	2003
14-5b	Adults aged 65 years and older	42.0	rate per 100,000 population	44.0	2008	4.8	40.5	2003
	Reduce invasive pneumococcal infections, <i>Invasive penicillin-resistant pneumococcal infections</i>²							
14-5c*	Children under age 5 years	6.0	rate per 100,000 population	0.0	2008	-100.0	2.6	2003
14-5d*	Adults aged 65 years and older	7.0	rate per 100,000 population	1.5	2008	-78.6	15.6	2003
14-6*	Reduce hepatitis A	4.5	new cases per 100,000 population	0.85	2008	-81.1	2.1	2003
14-7*	Reduce meningococcal disease	1.0	new cases per 100,000 population	0.51	2008	-49.0	0.2	2003
14-8*	Reduce Lyme disease	9.7	new cases per 100,000 population	0.17	2008	-98.2	0.3	2003
14-9*	Reduce hepatitis C	1.0	new cases per 100,000 population	0.0	2008	-100.0	0.5	2003
14-11	Reduce tuberculosis	1.0	new cases per 100,000 population	11.5	2008	1050.0	11.4	2005

Table continued on page 16

Immunization and Infectious Diseases

Table continued from page 15

14-16*	Reduce invasive early onset group B streptococcal disease	0.5	new cases per 100,000 population	0.0	2008	-100.0	0.7	2003
14-17**	Reduce hospitalizations caused by peptic ulcer disease in the United States	46.0	hospitalizations per 100,000 population	43.6	2007	-5.2	2.9	2002
14-22	Achieve and maintain effective vaccination coverage levels for universally recommended vaccines among young children							
	<i>Increase in and Maintenance of Vaccination Coverage Levels Among Children Aged 19 to 35 Months</i>							
14-22a	4 doses diphtheria-tetanus-acellular pertussis (DTaP) vaccine	90.0	percent	85.2	2008	-5.3	90.9	2004
14-22b**	3 doses Haemophilus influenzae type b (Hib) vaccine	90.0	percent	91.3	2008	1.4	96.4	2004
14-22c**	3 doses hepatitis B (hep B) vaccine	90.0	percent	91.3	2008	1.4	94.9	2004
14-22d**	1 dose measles-mumps-rubella (MMR) vaccine	90.0	percent	91.3	2008	1.4	95.2	2004
14-22e**	3 doses polio vaccine	90.0	percent	91.3	2008	1.4	96.2	2004
14-22f**	1 dose varicella vaccine	90.0	percent	92.2	2008	2.4	94.0	2004
14-24	Increase the proportion of young children and adolescents who receive all vaccines that have been recommended for universal administration for at least 5 years							
14-24a**	Children aged 19 to 35 months who receive the recommended vaccines (4DTaP, 3 polio, 1 MMR, 3 Hib, 3 hep B)	80.0	percent	81.7	2008	2.1	89.7	2004
14-29	Increase the proportion of adults who are vaccinated annually against influenza and ever vaccinated against pneumococcal disease							
	<i>Noninstitutionalized adults aged 65 years and older</i>							
14-29a	Influenza vaccine	90.0	percent	72.9	2008	-19.0	67.3	2001
14-29b	Pneumococcal vaccine	90.0	percent	66.2	2008	-26.4	57.9	2001
14-30	Reduce vaccine-associated adverse events							
14-30a*	Eliminate vaccine-associated paralytic polio (VAPP)	0	Number of cases	0	2008	0.0	0	2003

*Davidson County has met this objective.

¹All new invasive pneumococcal infections including those that are drug-resistant.

²Those reported in NEDSS as "drug-resistant".

[†]Davidson County has worsened since last report.

^{**}Davidson County has met this objective, but has also worsened since last report.

^{N/A}Data for objective were not available at time of previous report.

⁼Federal objective for which data were available. Local benchmark not available.

[‡]2003 data were recalculated using new methods. See technical notes for details.

Mental Health and Mental Disorders

In 2007, deaths from suicide in Davidson County declined 20.6% from 2003, but the rate was more than twice the Healthy People goal. **{Objective 18-1}**

Since 2003, suicide attempts by adolescents increased nearly 55.7%, and the current 2007 rate was more than ten times higher than the Healthy People goal. **{Objective 18-2}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
18-1	Reduce the suicide rate	5.0	deaths per 100,000 population	10.4	2007	108.0	13.1	2003
18-2	Reduce the rate of suicide attempts by adolescents	1.0	percent based on 12 month average	12.3	2007	1130.0	7.9	2003

*Davidson County has worsened since last report.

Nutrition, Overweight, and Physical Activity and Fitness

In 2008, 39.5% of Davidson County adults reported being at a healthy weight, a percentage that was 34.2% below the Healthy People 2010 goal of 60.0%. **{Objective 19-1}**

The proportion of obese adults in Davidson County was 75.3% higher than the Healthy People 2010 goal in 2008. **{Objective 19-2}**

The proportion of children aged 6 to 11 years that were overweight or obese was 4.8 times higher than the Healthy People 2010 objective. **{Objective 19-3a}**

In 2007, 31.3% of adolescents participated in daily physical education classes, 37.4% below the goal of 50.0%. **{Objective 22-9}**

The percentage of adolescents that reported television viewing of 2 or fewer hours on school days was 63.8% in 2007, surpassing the Healthy People 2010 goal by 14.9%. **{Objective 22-11}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
19-1^	Increase the proportion of adults who are at a healthy weight	60.0	percent	39.5	2008	-34.2	40.9	2001
19-2^	Reduce the proportion of adults who are obese	15.0	percent	26.3	2008	75.3	19.1	2001
19-3	Reduce the proportion of children and adolescents who are overweight or obese							
19-3a	Children aged 6 to 11 years	5.0	percent	24.1	2008	382.0	N/A	N/A
22-9^	Increase the proportion of adolescents who participate in daily school physical education	50.0	percent	31.3	2007	-37.4	32.0	2003
22-11	Increase the proportion of adolescents who view television 2 or fewer hours on a school day	75.0	percent	63.8	2007	-14.9	51.0	2003

^Davidson County has worsened since last report.

Respiratory Diseases

In the year 2007, Davidson County met or exceeded the Healthy People 2010 goals for the reduction of asthma deaths among children under the age of 5 years, children aged 5 to 14 years, and adults aged 35 to 64 years.

{Objectives 24-1a, 24-1b, 24-1d}

The rate of asthma deaths among adolescents and adults aged 15 to 34 years in 2007 represented a 4-fold increase from the rate in 2003, and was 11.9 times higher than the Healthy People 2010 goal. **{Objective 24-1c}**

The rate of hospitalizations for asthma among children aged under 5 years was 32.4% lower than the goal in 2007. **{Objective 24-2a}**

In 2007, the rate of hospital emergency department visits for asthma among children and adults aged 5 to 64 years was 3.4% higher than the Healthy People 2010 goal. **{Objective 24-3b}**

Davidson County surpassed the Healthy People 2010 goal for reducing deaths from chronic obstructive pulmonary disease among adults by 21.7%. **{Objective 24-10}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
24-1	Reduce asthma deaths							
24-1a*	Children under age 5 years	1.0	deaths per million	0.0	2007	-100.0	0.0	2003
24-1b*	Children aged 5 to 14 years	1.0	deaths per million	0.0	2007	-100.0	14.2	2003
24-1c^	Adolescents and adults aged 15 to 34 years	2.0	deaths per million	23.7	2007	1085.0	5.4	2003
24-1d*	Adults aged 35 to 64 years	9.0	deaths per million	8.7	2007	-3.3	31.4	2003
24-1e^	Adults aged 65 years and older	60.0	deaths per million	76.8	2007	28.0	46.7	2003
24-2	Reduce hospitalizations for asthma							
24-2a**	Children under age 5 years	25.0	hospitalizations per 100,000 population	16.9	2007	-32.4	16.5	2002
24-2b^	Children and adults aged 5 to 64 years	7.7	hospitalizations per 100,000 population	11.6	2007	50.6	10.4	2002
24-2c^	Adults aged 65 years and older	11.0	hospitalizations per 100,000 population	23.6	2007	114.5	18.6	2002
24-3	Reduce hospital emergency department visits for asthma							
24-3a*	Children under age 5 years	80.0	hospital ED visits per 100,000 population	40.7	2007	-49.1	170.8	2002
24-3b	Children and adults aged 5 to 64 years	50.0	hospital ED visits per 100,000 population	51.7	2007	3.4	66.1	2002
24-3c^	Adults aged 65 years and older	15.0	hospital ED visits per 100,000 population	16.4	2007	9.3	15.8	2002
24-10*	Reduce deaths from chronic obstructive pulmonary disease (COPD) among adults	60.0	deaths per 100,000 adults (aged 45 and	47.0	2007	-21.7	137.8	2003

*Davidson County has met this objective.

^Davidson County has worsened since last report.

**Davidson County has met this objective, but has also worsened since last report.

Substance Abuse and Tobacco Use

Rates of alcohol-related deaths in Davidson County decreased 82.1% from 2004 to 2007. **{Objective 26-1a}**

Rates of drug-related deaths in Davidson County increased from 12.8 deaths per 100,000 in 2003 to 15.1 deaths per 100,000 in 2007, an increase of 17.9%. The 2007 rate was 15 times higher than the Healthy People 2010 goal. **{Objective 26-3}**

The average age of first use of alcohol and marijuana among adolescents in Davidson County was 2 and 3 years younger than the Healthy People 2010 goal respectively. **{Objective 26-9a, 26-9b}**

In 2007, the proportion of adolescents who reported marijuana use in the past 30 days was 21.7%, 31 times higher than the Healthy People 2010 goal of 0.7%. **{Objective 26-10b}**

The percent of adolescents who reported smoking cigarettes in the past month was 33.1% higher than the Healthy People objective. **{Objective 27-2b}**

The 2008 rate of 49.2% was 34.4% below the goal, however, the percentage of adult smokers in Davidson County who stopped smoking for 1 day or longer because they tried to quit decreased 23.4% from 2001 to 2008. **{Objective 27-5}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
26-1	Reduce deaths and injuries caused by alcohol and drug-related motor vehicle crashes							
26-1a*	Alcohol-related deaths	4.0	deaths per 100,000 population	1.5	2007	-62.5	8.4	2004
26-2	Reduce cirrhosis deaths	3.0	deaths per 100,000 population	10.2	2007	240.0	13.4	2003
26-3^	Reduce drug-related deaths	1.0	deaths per 100,000 population	15.1	2007	1410.0	12.8	2003
26-6*	Reduce the proportion of adolescents who report that they rode, during the previous 30 days, with a driver who had been drinking alcohol	30.0	percent	9.5	2007	-68.3	24.0	2003
26-9	Increase the age and proportion of adolescents who remain alcohol and drug free							
	<i>Increase in Average Age of First Use in Adolescents aged 12 to 17 years</i>							
26-9a	Alcohol	16.1	average age in years	14.2	2007	-11.8	N/A	N/A
26-9b	Marijuana	17.4	average age in years	14.1	2007	-19.0	N/A	N/A
	<i>Increase in High School Seniors Never Using Substances</i>							
26-9c	Alcoholic beverages	29.0	percent	25.9	2007	-10.7	N/A	N/A
26-10	Reduce past-month use of illicit substances							
26-10b	Reduce the proportion of adolescents reporting use of marijuana during the past 30 days	0.7	percent	21.7	2007	3000.0	25.0†	2003
26-11	Reduce the proportion of persons engaging in binge drinking of alcoholic beverages							
	<i>Reduction in adults and adolescents engaging in binge drinking during the past month</i>							
26-11c	Adults aged 18 years and older	6.0	percent	8.5	2008	41.7	16.0	2001
26-11d	Adolescents aged 12 to 17 years	2.0	percent	19.0	2007	850.0	N/A	N/A
26-15	Reduce the proportion of adolescents who use inhalants	0.7	percent of adolescents aged 12 to 17 years	11.1	2007	1485.7	N/A	N/A
27-1	Reduce tobacco use by adults							
27-1a	Cigarette smoking	12.0	percent of adult population (18+)	22.4	2008	86.7	26.2	2001
27-2	Reduce tobacco use by adolescents							
27-2b	Smoked cigarettes in past month	16.0	percent of students in grades 9 through 12	21.3	2007	33.1	23.0	2003
27-2c^	Used smokeless tobacco in past month	1.0	percent of students in grades 9 through 12	4.9	2007	390.0	4.0	2003
27-2d^	Smoked cigars in the past month	8.0	percent of students in grades 9 through 12	16.3	2007	103.8	15.0	2003
27-5^	Increase smoking cessation attempts by adult smokers	75.0	percent of adult smokers aged 18 years and older who stopped smoking for 1 day or longer because they were trying to quit	49.2	2008	-34.4	64.2	2001

*Davidson County has met this objective.

^Davidson County has worsened since last report.

^{N/A}Data for objective were not available at time of previous report.

†2003 data were recalculated using new methods. See technical notes for details.

Oral Health

In 2008, 58.3% of adults reported never having a permanent tooth extracted due to dental caries or periodontal disease, exceeding the Healthy People 2010 goal of 42.0% of adults. **{Objective 21-3}**

Despite the reduction in tooth extractions due to dental caries, 20.5% of Davidson County adults report having had all their natural teeth extracted; slightly above the objective goal of 20.0%. **{Objective 21-4}**

#	Objective	Goal	Unit	Davidson	Year	% difference	Davidson	Year
21-3*	Increase the proportion of adults who have never had a permanent tooth extracted because of dental caries or periodontal disease	42.0	percent	58.3	2008	38.8	N/A	N/A
21-4	Reduce the proportion of older adults who have had all their natural teeth extracted	20.0	percent	20.5	2008	2.5	N/A	N/A

*Davidson County has met this objective.

^{N/A}Data for objective were not available at time of previous report.

Appendix

Data and Program Sources

Objective 1: Access to Quality Health Services

- Hospital Discharge Data
- Behavioral Risk Factor Surveillance System (BRFSS)

Objective 2: Cancer

- Vital Statistics
- Cancer Registry from the Tennessee Department of Health (TDH)
- BRFSS

Objective 3: Chronic Kidney Disease and Diabetes

- Vital Statistics
- United States Renal Data System (www.usrds.org)

Objective 4: Education and Community-Based Programs and Environmental Health

- School Nursing Program at the Metropolitan Public Health Department (MPHD)
- Vital Statistics
- National Electronic Disease Surveillance System (NEDSS)
- Metropolitan Schools (<http://edu.reportcard.state.tn.us/pls/apex/f?p=200:1:4298538456416444>)
- Lead Program (TDH)

Objective 5: Family Planning

- Vital Statistics
- Pregnancy Data (TDH)
- Youth Risk Behavioral Survey (YRBS)

Objective 6: Food Safety

- NEDSS

Objective 7: HIV and Sexually Transmitted Diseases

- BRFSS
- Tuberculosis Program (MPHD)
- Vital Statistics
- National Electronic Telecommunications System for Surveillance (NETSS)
- Sexually Transmitted Disease Management Information System (STDMIS)
- Ryan White

Objective 8: Heart Disease and Stroke

- Vital Statistics
- Hospital Discharge
- BRFSS

Appendix (continued)

Objective 9: Immunization and Infectious Diseases

- NEDSS
- BRFSS
- Tuberculosis Program (MPHD)
- Hospital Discharge
- National Immunization Survey
- Immunization Program (MPHD)
- Immunization Program (TDH)

Objective 10: Injury and Violence Prevention

- Hospital Discharge
- Vital Statistics
- YRBS
- Metropolitan Police Department

Objective 11: Maternal, Infant, and Child Health

- Vital Statistics
- BRFSS

Objective 12: Mental Health and Mental Disorders

- Vital Statistics
- YRBS

Objective 13: Nutrition, Overweight, Physical Activity, and Fitness

- BRFSS
- YRBS

Objective 14: Respiratory Disease

- Vital Statistics
- Hospital Discharge

Objective 15: Substance Abuse and Tobacco Use

- Fatality Analysis Reporting System (FARS) (www-fars.nhtsa.dot.gov)
- Vital Statistics
- BRFSS
- YRBS

Objective 16: Oral Health

- BRFSS

Technical Notes

Objectives 10-1a-d; Objective 14-3: Data for numbers and incidence rates of infectious disease (Objectives 14-1 through 14-9) and food borne pathogens (Objectives 10-1a through 10-1d) were obtained by querying the NEDSS database using the following methodology. First, a report was generated in the NEDSS system from the reports template entitled, “Line List of Individual Cases with Program Area and Jurisdiction Security.” Under the “Basic Filter” tab, the notifiable disease to be analyzed was selected. Under the “Column Selection” tab, the following columns were added to the report: age reported, age reported unit, case status, city, condition, county, sex, diagnosis date, person name, street address 1, and zip code. The report is saved to file and opened. Then, cases are sorted by “diagnosis date” and those with diagnosis dates within the calendar year of 2008 were selected. Next 2008 cases were sorted by “case status.” Only those with a “case status” of confirmed were selected. Then those cases were sorted by “county” to confirm only Davidson County cases were present for further analysis. Finally, all 2008 confirmed cases from Davidson County were sorted by “person name” and duplicate entries were excluded from final analysis.

Objectives 14-3a-c: Rates from a previous MPHD publication of The Healthy People 2010 Report (June 2006) were changed due to erroneously reported rates of acute hepatitis B infections. The methodology outlined for data extraction from the NEDSS database for 2008 data was also used for 2003 data for this report.

Objective 12-1: This objective only includes coronary heart disease deaths, which are a subset of all deaths from heart disease. In a previous publication, the rate reported for 2003 was erroneously based on the heart disease group code. For this publication, both the 2008 and 2003 rates were calculated using ICD-10 codes I11, I20-I25.

Objective 16-9a: This objective should include only women who are full-term, singleton, and vertex presentation. In the previous version of this report, the calculated percentage did not properly restrict the denominator, making the percentage reported an underestimate. This has been corrected for 2003 data, and calculated correctly for 2007 data.



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The Healthy People 2010 Report

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