

# FIREARM SAFETY IN AMERICA

THE National Center for Health Statistics' (NCHS) most recent "Deaths From 282 Selected Causes, By 5-Year Age Groups, Race, and Sex" data covers calendar year 1996. The National Safety Council's (NSC) "Accident Facts: 1997 Edition" provides certain data for years 1903-1995 (and estimates for 1996 and 1997). Facts below, relating to 1996, are based upon NCHS data. Those relating to trends over various periods of time are based additionally on NCHS and NSC data for previous years. NSC's estimates, often in years past significantly in error, are not used herein.

## Highlights

- There are fewer fatal firearm accidents today than ever before. The annual number of fatal firearm accidents fell to an all-time low in 1996.
- Fatal firearm accidents have been decreasing for decades. They've decreased 65% since 1930, while the U.S. population has more than doubled and the number of guns has more than quadrupled. They decreased 7% from 1995-1996 alone, 22% during the last decade.
- The fatal firearm accident rate is also at an all-time low, having declined 88% since the all-time high in 1903, 33% during the last decade, and 20% in the last year.
- Firearm accidents account for only 1% of fatal accidents and only 0.05% of all deaths in the U.S.
- Fatal firearm accidents among children are at an all-time low, down 75% since 1975.

## Annual fatal accident numbers

In 1996 fatal firearm accidents fell to an all-time annual low, 1,134, a 7% decrease from 1995; a 22% decrease from 1986. Since 1930, fatal firearm accidents have decreased 65%, while the U.S. population has more than doubled and the number of firearms has more than quadrupled. (Population: Census Bureau; Firearms: BATF) Other fatal accidents: motor vehicles (43,649), falls (14,986), poisoning (9,510), fire (3,741), drowning (3,488), suffocation on ingested object (3,206), and medical mistakes (2,919).

## 1995-1996 Trends

From 1995-1996, the annual number of fatal firearm accidents decreased 7% (from 1,225 to 1,134). By comparison, the number of fatal motor vehicle accidents *increased* (43,363 to 43,649), as did accidental deaths due to falls (13,986 to 14,986), poisoning (9,072 to 9,510), suffocation on ingested object (3,185 to 3,206) and medical misadventures (2,712 to 2,919). Decreasing slightly were accidental deaths due to fires (3,761 to 3,741) and drowning (3,790 to 3,488).

## Fatal accidents as percentages of accidental deaths nationwide

Of 94,948 fatal accidents nationwide in 1996: firearms (1%), motor vehicles (46%), falls (16%), poisonings (10%), fires (4%), drownings (4%), chokings on ingested objects (3%), and medical mistakes (3%).

## Fatal accidents as percentages of all deaths nationwide

Of 2,314,690 deaths nationwide in 1996, fatal firearm accidents accounted for 0.05%. Other accidents: motor vehicles (2%), falls (0.6%), poisoning (0.4%), fire (0.2%), drowning (0.2%), suffocation on ingested object (0.1%), and medical mistakes (0.1%).

## Annual fatal accident rates

In 1996 the fatal firearm accident rate fell to an all-time low (0.4 per 100,000 pop.), an 88% decrease since 1904. Other rates: motor vehicles (16.5), falls (5.6), poisoning (3.6), fire (1.4), drowning (1.3), suffocation on ingested object (1.2), and medical mistakes (1.1%).

## The anti-gun CDC's "Cars & Guns" comparison

In 1996, Congress passed legislation to curtail the federal Centers for Disease Control and Prevention's (CDC) repeated use of the taxpayers' money to fund politically-motivated, scientifically inept "studies" by researchers with a known anti-firearm bias. In one of its most blatant attempts to promote "gun control," the CDC claimed that licensing of gun owners and registration of firearms would reduce firearms accidents because licensing of drivers and registration of cars allegedly caused fatal motor vehicle accidents to decline between 1968 and 1991. The claim was a complete fraud, for the following reasons:

- Between 1968-1991, without gun registration and gun owner licensing, the fatal firearms accident rate dropped 50%, the motor vehicle accident rate only 37%. The firearms rate declined *more*, and the motor vehicle rate declined *less*, than the other three major accident types: work-related (down 49%), home (down 41%) and other public non-motor-vehicle (down 38%). Today, firearm accidents continue to decline, while motor vehicle accidents are rising.

- Driver licensing and vehicle registration laws were imposed mostly before World War II and motor vehicle fatal accident rates didn't begin declining until 1970. Driver licensing and vehicle registration laws were imposed to generate revenue, not for safety. Motor vehicle accidents rose sharply after the 1930s, when most vehicle registration and driver licensing laws were imposed, and have increased each year since 1992. By comparison, fatal firearm accidents have decreased.

## Fatal firearm accidents among children

Fatal firearm accidents fell to 138 in 1996, an all-time low; motor vehicles (3,015), drowning (966), fires (761), suffocation on ingested object (211), falls (111), poisoning (109) and medical mistakes (94). Since 1975, fatal firearm accidents have decreased 75%, 24% since 1995. **As a percentage of accidental deaths**—Of 6,384 fatal accidents, firearms were involved in 2%, motor vehicles (47%), drownings (15%), fires (12%), suffocation on ingested object (3%), falls (2%), poisonings (2%) and medical mistakes (2%). **As a percentage of all deaths**—Of 42,765 deaths in 1996, firearm accidents accounted for 0.3%, motor vehicles (7%), drowning (2%), fires (2%), suffocation on ingested object (0.5%), falls (0.3%), poisoning (0.3%), and medical mistakes (0.2%).

## Why have firearm accidents among children declined?

The Oct. 1, 1997 issue of the *Journal of the American Medical Association* presented a study that concluded that so-called "Child Access Prevention" (CAP) laws, imposed in 12 states between 1989-1993, were responsible for decreases in fatal firearm accidents among children. The article was written by individuals from the Harborview Injury Prevention and Research Center, a group active in the HELP (Handgun Epidemic Lowering Plan) Network, an anti-gun organization geared to "changing society's attitude toward guns so that it becomes socially unacceptable for private citizens to have handguns." Among the study's flaws, it ignored the fact that the decline in fatal firearm accidents among children began in the mid-1970s, not in 1989, when "CAP" laws started to be imposed. It ignored the fact that the decrease in fatal firearm accidents among children has been nationwide, not only in the 12 CAP states. And it ignored the fact that in 1989, not only were "CAP" laws starting to be imposed (ultimately in 12 states), NRA's Eddie Eagle Gun Safety Program (discussed below) was introduced (ultimately nationwide). (*For more information, please refer to the NRA-ILA "Child Access Prevention Laws" Fact Sheet.*)

## How anti-gun groups grossly exaggerate the number of gun accidents involving children

Anti-gun groups such as the Children's Defense Fund have deceptively claimed that firearms are involved in the deaths of 10 "children" every day, 5,000-plus "children" every year. They do so by defining "children" to include anyone under age 20, because 85% of firearm-related deaths (homicides, suicides and accidents) in that age group are accounted for by juveniles and young adults ages 15-19. In 1996, there were 4,613 firearm deaths among persons ages 0-19: 692 (15%) among children and 3,921 (85%) among juveniles and adults ages 15-19. Firearm deaths among 15-19-year olds included homicides (2,457, 63%), suicides (1,147, 29%), accidents (238, 6%), and those unexplained (79, 2%). Among children, firearm deaths included homicides (379, 55%), suicides (162, 23%), accidents (138, 20%) and those unexplained (13, 3%). Anti-gun groups often compare the total number of firearm homicides, suicides and accidents (called "deaths due to gunfire" and compare that number to the number of deaths due to certain diseases or accidents, declaring that "gunfire" is the "xth leading" cause of death among "children." Often, they further skew their computations by excluding deaths among persons under one year old, which rarely involve firearms.

## The cost of firearms injuries

Recently, anti-gun activists have renewed earlier efforts to promote lawsuits against firearm manufacturers, seeking to hold them financially liable for injuries related to the criminal or negligent misuse of firearms. In 1998, several U.S. cities filed or threatened to file such lawsuits, though courts have previously rejected such cases as groundless. (See NRA-ILA "Product Liability" Fact Sheet) The cities allege that manufacturers should be liable for the cost of medical treatment of firearm injuries. The cost of medical treatment of firearm injuries was roughly \$1.4 billion in 1990 (Wendy Max and Dorothy P. Rice, "Shooting in the Dark: Estimating the Cost of Firearm Injuries," *Health Affairs*, Vol. 12, No. 4, Winter 1993, p.171.), roughly one-fifth of 1% of the nation's medical costs (Dept. of Commerce, *Statistical Abstract of the United States 1997*, p. 112.). Medical costs of motor vehicle accidents reached \$21.2 billion in 1996. (NSC) Not measured are medical costs not incurred by persons who use firearms to prevent violent crimes and associated injuries, or benefits achieved because armed citizens deter some criminals, facilitate the arrest of others, and fatally shoot other criminals in self-defense. Criminologist Gary Kleck's analysis of national crime victimization surveys indicates that people who use firearms for self-defense are less likely to be injured than people who use other, or no, means of defense. (Kleck, *Targeting Guns*, N.Y.: Aldine deGruyter, 1997, pp. 184, 190.)

## Education is the key

Voluntary firearms safety training, not government intrusion, has caused firearms accidents to decline. Nationwide, 39,000 NRA Instructors and Coaches conduct firearm safety and proficiency programs reaching more than 700,000 program participants annually. Young Americans benefit from learning firearms safety in NRA programs offered through civic groups such as the Boy Scouts, Jaycees, and the American Legion, and schools. (For more information, call NRA's Education and Training Division, at 703-267-1500.)

NRA's Eddie Eagle® Gun Safety Program teaches schoolchildren pre-K through 6th grade that if they encounter firearms without supervision they should "**STOP! Don't Touch. Leave The Area. Tell An Adult.**" Since 1988, Eddie Eagle has been used by more than 10,000 schools and law enforcement agencies to reach more than 12 million children. In 1993, Eddie Eagle's creator, later NRA President, Marion Hammer, received the National Safety Council's Citation for Outstanding Community Service. In 1994, Eddie Eagle received The National School Public Relations Association Golden Achievement Award, and the American Legion passed a resolution encouraging its posts and departments to introduce Eddie Eagle to schools and law enforcement agencies. In 1995, the program received the Legion's National Education Award, honoring NRA for its active role in preventing accidents among children; the Legion's Child Welfare Foundation awarded it a \$25,000 grant to assist law enforcement agencies in teaching Eddie Eagle's safety message. Nine state legislatures have passed resolutions or enacted bills, and governors in three states have issued proclamations, commending the program. In Florida, then-Governor Lawton Chiles

proclaimed Dec. 1-7, 1996, Eddie Eagle Gun Safety Week. In 1996, the National Safety Council's Youth Activities Division's Awards & Recognition Committee gave the program its "Award of Merit" for "outstanding contribution for programs and/or activities that promote safety and health, save lives, lessen injury and reduce economic loss." *(For more information, call NRA's Eddie Eagle Department, 703-267-1573 or [NRA.Org/Eddie.Main.HTML](http://NRA.Org/Eddie.Main.HTML))*

My name is Avid Reza and I am a medical student at the Medical College of Wisconsin. I am here today representing the student chapters of Physicians for Social Responsibility and the American Medical Student Association. As future physicians we are concerned about the problem of firearm injuries and believe it is time to take steps to prevent these unnecessary deaths and disabilities. A “locking device” is one step towards preventing these deaths. We have learned some facts that we think will help you make an educated decision:

**Fact:** The most recent available national data indicates that each year there are over 35,000 firearm deaths due to interpersonal violence, suicidal behavior, and accidental circumstances.

**Fact:** Nationally, firearm injuries are among the top 10 leading causes of deaths among 1 to 64 year olds, but the 2nd leading cause of death for 10 to 24 year olds.

**Fact:** In Wisconsin, recent available data indicates that between 1994 and 1997, there were over 1,500 firearm deaths. In another words, every day between 1 to 2 people die here in Wisconsin as a result of firearms.

**Fact:** Studies have shown that for every firearm death, there is estimated to be 3 non-fatal firearm injuries treated in emergency departments.

**Fact:** It has been estimated that over 80% of the medical costs of treating firearm injuries are paid by tax-payer dollars.

After hearing these facts, I hope you will be appalled when I tell you that teddy bears are more heavily regulated than firearms. As far as I know, there have been no teddy bear-related deaths. I think it is time that we find ways to make firearms safer as we do for all other consumer products. We are not talking about gun control today, we are simply discussing safety. “Locking devices” have the potential to save lives by preventing the child who stumbles upon a gun and accidentally shoots himself, or by giving a second chance to the impulsive adolescent who finds his parents’ gun and tries to commit suicide, or by preventing incidences like Paducah, Kentucky so that a child is less likely able to take an operable gun to school and kill innocent children. In addition, it is important to monitor the number of lives saved and injuries prevented as a result of this policy. Furthermore, it is important that we continue to examine other methods of preventing these injuries. I hope that you will use your vote today to save lives. And please remember that whatever you hear today against this measure, think to yourself is it more important than saving a life.

# NATIONAL RIFLE ASSOCIATION OF AMERICA

## POLITICAL VICTORY FUND

INSTITUTE FOR LEGISLATIVE ACTION  
11250 WAPLES MILL ROAD  
FAIRFAX, VIRGINIA 22030-7400



### MEMORANDUM IN OPPOSITION

TO: The Honorable Gary R. George, Chair  
ALL MEMBERS OF THE SENATE JUDICIARY COMMITTEE

DATE: March 16, 1999

SUBJECT: **Senate Bill 6:**  
AN ACT ... relating to the transfer of firearms and providing a penalty.

The gun-owning community is deeply concerned with the accidental fatality of any child -- regardless of cause -- but especially in firearm related cases. Legislation (S.B. 6) has been introduced that unnecessarily mandates storage of firearms within the home in a misguided attempt to reduce accidental deaths.

The National Rifle Association, on behalf of our Wisconsin members, respectfully object to the passage of the above-referenced bill S.B. 6. Passage of this bill will negatively affect both law-abiding citizens who keep firearms for self-defense and hunters in Wisconsin by mandating the purchase of an additional, unnecessary, and potentially unsafe locking device with the legal purchase of a handgun.

The Wisconsin legislature has debated the issue of gun safety many times, and has passed several laws on the subject, including criminal sanctions if a child gains unlawful access to a firearm (§948.55, Wisc. Stat. Ann). According to the National Safety Council, deaths of Wisconsin children due to accidental firearms discharges has decreased over the past five years.

The National Rifle Association has been teaching gun safety to children and adults for more than one hundred years. Through our research and teaching, NRA instructors have come to realize that firearms safety is a complex issue requiring reasoning and adaptation to circumstances, and is certainly not achieved by the "one size fits all" approach of S.B. 6.

As testimony demonstrates, over reliance on mechanical trigger locking devices may increase the likelihood of accidents. Further, the approach of S.B. 6 — to fine the seller for not furnishing a trigger lock at the time of sale — increases the retail cost of firearms, not the safety of Wisconsin children.

Accidents of any kind usually involve some ignorance and negligence. To attack that issue, education on the hazards of improper firearms storage has proven very beneficial. Accidental deaths nationwide due to firearms discharges has decreased over 50% over the past three decades due to firearms safety programs like NRA's "Eddie Eagle Gun Safety Program." In fact, 261,862 Wisconsin children have been reached with the "Eddie Eagle" gun safety message through schools, law enforcement and civic groups since 1993.

**For the above stated reasons, we urge you to vote against this bill.**

Respectfully submitted,  
Mary Anne Bradfield  
Wisconsin State Liaison

# State Medical Society of Wisconsin

*Working Together, Physicians Can Determine the Path of Medicine*



## Firearm Facts

### Deaths Caused by Firearms

Source: Wisconsin Center for Health Statistics, Department of Health and Family Services

Wisconsin: 1996 = 498 total  
15 accidental  
341 suicides  
139 homicides  
3 undetermined

For persons age 19 and younger = 75 total  
8 accidental  
32 suicides  
34 homicides  
1 undetermined

Brown County: 1996 10 total  
9 suicides  
1 homicide

For persons age 19 and younger 1 total which was a suicide

JOHN D. RIESCH, MD, *President*  
JACK M. LOCKHART, MD, *President-Elect*  
JOHN E. PATCHETT, JD, *Executive Vice President*  
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Conversation w/ SB 6

Loralee Brummond

Log Analyst (Civilian)

267-3622

State Patrol

Not taking an official position

Bill is a good start

State Patrol would not oppose the  
additional cost (\$15-\$20 per  
firearm)

would be glad to assist us from  
a technical standpoint

could connect us w/ Academy  
(Major Zuelsdorf)

State Patrol already

Purchases trigger locks - most recently Rugers  
in bulk (400-500 at a time)

provides trigger locks for officers  
each time a weapon is purchased

\* will send me official state patrol policy  
regarding trigger locks

Southeastern Wisconsin Firearm Fatalities  
The First Annual Report of the  
Firearm Injury Reporting System (FIRS)

December 1998

Acknowledgements

The information in this report is the result of a successful collaboration between medical examiners/coroners, law enforcement, the Wisconsin State Crime Laboratory and the Firearm Injury Center. We would like to thank our general and technical advisory boards, whose insightful comments and suggestions helped shape this report. For providing epidemiologic consultation, and review of this report, we are indebted to Dr. Garen Wintemute, Director of the Violence Prevention Research Program at the University of California at Davis. Finally, we recognize the Joyce Foundation, for continuing to support our mission to reduce firearm injuries and deaths.

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## **Executive Summary**

Reports and studies continue to accumulate which demonstrate high mortality and costs associated with firearm injuries.<sup>1</sup> Unfortunately, there are few studies that comprehensively examine firearm injuries in a defined population. This is largely due to the lack of linked data.<sup>2</sup> Population-based surveillance over time for both fatal and non-fatal firearm injuries is necessary for the useful evaluation of prevention programs and for the generation of new prevention strategies.

### **Southeastern Wisconsin Firearm Fatalities**

**The First Annual Report of the Firearm Injury Reporting System (FIRS)** presents information collected in the fourth year of the Firearm Injury Reporting System, a comprehensive firearm fatality surveillance system. The Medical College of Wisconsin Firearm Injury Center (FIC) houses the FIRS, and with support in part from the Joyce Foundation, the FIRS includes data on all firearm fatalities (homicides, suicides, unintentional and undetermined) from Milwaukee County since 1991 and from 7 Southeastern Wisconsin counties since 1994.

The FIRS utilizes the public health model as a framework for data collection. Until recently, information on firearm injuries and deaths has been fragmented, placing firearm suicides with mental health professionals, homicides with criminal justice officers, and "accidents" with safety leaders. The public health approach is broader and considers all firearm injuries and deaths to be part of the same problem. Utilizing the framework of host (victim), agent/vehicle (firearm), and environment provides a complete and accurate picture of the firearm injury problem and allows for a detailed examination of trends. The FIRS enlists medical examiners and coroners for information on the victim, local law enforcement for environmental information, and the Wisconsin State Crime Laboratory for specifics on the firearm.

The medical examiners (Kenosha, Milwaukee, Racine and Waukesha counties) and coroners (Ozaukee, Sheboygan, Washington and Walworth counties) act as lead reporting agencies. Demographic information on the victim (host), as well as toxicological and anatomic findings, and any indication of firearm ownership (when the firearm is identified) is collected.

The medical examiner/coroner data is linked to respective law enforcement agencies for environmental information on the fatal event. Demographic information on perpetrators, as well as weapon information and uniform crime report data is collected on closed cases.

An additional linkage is made with the crime laboratory that serves the 8 Southeastern Wisconsin counties to gather information on the (agent/vehicle) firearm. Specifics such as make, model, caliber, barrel length, magazine capacity, and importer are gathered on each firearm submitted to the crime lab. Information is obtained on the caliber and type of casings and bullets submitted to the crime lab in connection with firearm fatalities.

Future plans include expanding the FIRS statewide, developing a non-fatal firearm injury reporting system, increasing geographic mapping, linking data from the Bureau of Alcohol, Tobacco, and Firearm's (ATF) Project Lead to trace firearm incident guns to the point of first purchase and first owner, and linking data from the judicial system on the disposition of criminal cases.

Statewide FIRS expansion will add an additional 64 medical examiners/coroners, several hundred law enforcement agencies and a crime laboratory. Currently, about half of the firearm deaths in Wisconsin occur in the southeastern part of the state. By adding the other half of the deaths to the reporting system, we will have a comprehensive understanding of the firearm fatality problem in Wisconsin.

Non-fatal firearm injuries present another challenge, as firearm injury reporting practices are not clear, reporting compliance varies, and linking hospital and law enforcement records is time consuming and for the most part unprecedented. The Office of Health Care Information (OHCI) collects and reports statewide hospital discharge information. The data indicates that over half, (56%) of the firearm injuries in Wisconsin are admitted to two FIC affiliated hospitals. Based on this information, a Milwaukee County pilot project of non-fatal firearm injuries will be initiated with Froedtert Memorial Lutheran Hospital and Children's Hospital of Wisconsin. Step two will expand the non-fatal system to Southeastern Wisconsin. By adding three additional hospitals to the reporting system, 68% of the state's firearm injuries will be captured.

Geographic Information System software provides valuable information for specific geographic areas with regard to firearms surveillance and injury prevention. Current projects include mapping the firearm injury site; future projects include mapping the victim's residence, perpetrator's residence, and where the firearm was first purchased.

The linkage with ATF's Project Lead will expand the reporting system to include additional information on the firearm. This new linkage in addition to the links with medical examiners/coroners, law enforcement and the crime lab will result in the most comprehensive reporting system of firearm deaths in the United States.

The tables in this publication summarize data for Southeastern Wisconsin for calendar years 1994-1996. 1997 data is highlighted in the Historical Data section. The tables are grouped according to the elements of the public health model. Note that Vital Statistics data is reported using residence of the decedent, and FIRS data is reported using location of the firearm fatality.

The Firearm Injury Center is dedicated to the reduction of firearm injuries and deaths. Comprehensive, objective, accurate information and analysis of firearms and related morbidity and mortality is available through the Firearm Injury Reporting System. The FIC collaborates with policy makers, community-based organizations and agencies, and with individuals at local, regional and national levels to support effective prevention strategies.

For further information please contact:

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## General Trends

Wisconsin's rate of firearm mortality was 37th among the fifty states in 1996.<sup>3</sup>

In 1996, 47% of all Wisconsin firearm fatalities occurred in Southeastern Wisconsin.<sup>4</sup>

Between 1994 and 1997, death rates in Southeastern Wisconsin from firearm homicides decreased from 6.5 to 5.4 per 100,000.

In Southeastern Wisconsin from 1994-1997, 45% of firearm fatalities were suicides.

In Milwaukee County from 1994-1997, suicides accounted for approximately 1/3 of firearm fatalities; in the 7 other Southeastern Wisconsin counties, suicides accounted for three-quarters of firearm deaths.

Unintentional/undetermined firearm fatalities accounted for about 2% of all firearm fatalities in Southeastern Wisconsin for 1994-1997.

The percentage of fatalities from 1994-1996 involving a handgun (of cases with firearm information) ranged from 97% for urban homicides, 75% for rural homicides, 68% for urban suicides and 58% for rural suicides.

## SELECTED FINDINGS

Urban and rural suicide rates for 15-24 year old males (16.0 and 13.5 per 100,000) were not significantly different.

As education level increases, the proportion of homicide among all firearm fatalities decreases, while the proportion of firearm suicides increases, indicating increased intrapersonal violence.

Milwaukee County homicide victims positive for alcohol decreased from 62% in 1991-93 to 48% in 1994-96 ( $p=.01$ ), and the percent positive for marijuana increased from 9% to 19% ( $p<.02$ ).

The distribution of handguns most frequently used in firearm deaths 1994-1996 by manufacturer was:

- Urban Homicides- Smith and Wesson, Glock, and Taurus
- Urban Suicides- Smith and Wesson, Sturm Ruger, and Colt
- Rural Suicides- Colt, Sturm Ruger, and Smith and Wesson

In cases of firearm homicide/suicide where the firearm owner was known, the offender (suicide victim) owned the firearm 77.8% of the time.

## Overview of Tables

### Historical Data

Table 1 presents the number and type of firearm deaths by County for years 1994-1997. Table 2 shows homicide and suicide rates by county for years 1994-1997. All death rates are per 100,000. Average rates for the 4-year period are also given. These are the only references to 1997 data, which are preliminary at the time of publication. The majority of the report concentrates on data years 1994-1996. Map 1 is a geographic review of death rates for homicides and suicides in eight southeastern Wisconsin counties, 1994-1996.

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### Summary of Host (Victim) Data

This section examines distributions of victim based homicide and/or suicide data. Table 3 presents a count of victim deaths by gender. Milwaukee County is compared to seven Southeastern Wisconsin counties. Figures 1 and 2 both show firearm death rates. Figure 1 examines homicide death rates by 5-year age groups, and figure 2 examines suicide death rates by 5-year age groups. Table 4 presents the number and death rates by race and compares urban counties: Milwaukee, Racine and Kenosha. Percentage of victims positive for drugs or alcohol for urban versus rural residence is presented in table 5. An urban county is defined as having one or more cities with a population over 80,000. Kenosha, Milwaukee and Racine counties are defined as urban, and Waukesha, Ozaukee, Sheboygan, Walworth and Washington counties are defined as rural. Education level in relation to homicides and suicides is examined in figures 3 and 4.

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### Summary of Environmental Data

Environmental data is broken into two sub groups, exhibiting perpetrator demographics for homicides and circumstantial information for firearm fatalities. Tables 6 & 7 present data on age and perpetrator characteristics. Table 8 depicts characteristics of homicide/suicide cases, 1991-1996. Included is the relationship of victims to perpetrators, cases involving alcohol, other circumstances and indications of firearm ownership. Tables 9 & 10 indicate incident location of firearm homicides and suicides. Figures 5 & 6 examine the relationship of female and male victims to their perpetrators. Map 2a shows the fatality distribution for firearm homicides, suicides, unintentional and undetermined deaths for Milwaukee County victims, and map 2b breaks out firearm homicides and suicides. These maps examine the place of injury for Milwaukee County from 1991-1996. Place of injury was available for 72% of the fatalities during this time period, and 90% of these addresses could be mapped.

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### Summary of Agent/Vehicle (Firearm) Data

Specific data for weapons used in firearm fatalities is examined. Figures 7 and 8 show type of firearm. Figure 7 presents county specific handgun versus long gun usage and figure 8 examines the urban versus rural differences. Both figures define type of firearm as being a handgun or long gun (defined by barrel length inches). Table 11 examines the distribution of the most commonly used firearms by manufacturer for homicides and suicides. Table 12 examines the most commonly used handguns in city of Milwaukee homicides by manufacturer and model. Table 13 shows the percent of unauthorized usage of handguns by suicide victims and homicide perpetrators for individuals under 18. Table 14 reviews the caliber of handguns used in Milwaukee County homicides for 1991-1996.

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### Data Limitations and Caveats

It is the mission of the Firearm Injury Center to provide comprehensive, objective, accurate information and analysis of firearms and related morbidity and mortality. There are, however, a number of instances where timeliness affects the surveillance process. First, only cleared cases are abstracted. According to the Homicide in Wisconsin 1961-1997 Report,<sup>5</sup> a homicide is "cleared" when law enforcement makes an arrest. A substantial amount of time can pass for a case to clear, making timely reporting an issue. For this reason, FIRS is retrospective. There are cases that for various reasons never clear, and in those instances, it is the policy of the FIC to wait two years before labeling that information lost to follow up.

Second, the Uniform Crime Report (UCR) is a system for collecting crime and arrest information. Local law enforcement submits data to the state. In Wisconsin, the Department of Justice Assistance houses the UCR. The information is then reported to the Federal Bureau of Investigation (FBI). Within the UCR there is a Supplemental Homicide Report which provides incident information on homicides. Limitations to the report include the fact that the system is voluntary, and that the report must be submitted within 72 hours of the incident. Reporting elements such as circumstances can change as new or updated information appears in an investigation.

Another important limitation is the availability of information. One example is probation and parole information. While having previous and current probation and parole information on perpetrators is helpful, it is not consistently reported, and therefore the FIRS reports this information as unknown. (See table 7)

Additionally, the crime laboratory does not routinely receive evidence related to suicides and may not receive evidence of firearm related crimes in all cases.

Third, working definitions of homicide and the characterization of intent may vary among jurisdictions. For instance, "homicide" may be neutrally defined to include all cases where one person kills another, or it may be defined to exclude cases where an unintentional firearm discharged by one person results in the death of another, i.e., an "accident." Note also that the term "perpetrator" may refer to criminal suspects other than the shooter in closed cases.

## Historical Data

**Table 1. Number and Type of Firearm Deaths by County 1994-1997**

County	Type of Death	1994	1995	1996	1997	Total
<b>Kenosha</b>	Homicide	1	3	1	2	7
	Suicide	6	5	5	4	20
	Unint./Undet.	0	1	0	0	1
<b>Milwaukee</b>	Homicide	107	103	108	89	407
	Suicide	55	48	54	33	190
	Unint./Undet.	3	4	1	1	9
<b>Ozaukee</b>	Homicide	0	0	0	0	0
	Suicide	2	3	2	0	7
	Unint./Undet.	1	0	0	0	1
<b>Racine</b>	Homicide	17	8	10	10	45
	Suicide	13	10	8	11	42
	Unint./Undet.	1	0	2	0	3
<b>Sheboygan</b>	Homicide	0	1	1	0	2
	Suicide	8	4	4	8	24
	Unint./Undet.	1	0	0	0	1
<b>Walworth</b>	Homicide	0	1	1	2	4
	Suicide	7	5	6	8	26
	Unint./Undet.	0	0	0	1	1
<b>Washington</b>	Homicide	0	0	0	1	1
	Suicide	8	9	7	3	27
	Unint./Undet.	1	0	0	0	1
<b>Waukesha</b>	Homicide	2	0	3	3	8
	Suicide	15	16	20	13	64
	Unint./Undet.	0	0	0	0	0
<b>All</b>	Homicide	127	116	124	107	474
	Suicide	114	100	106	80	400
	Unint./Undet.	7	5	3	2	17
<b>Total</b>	All Deaths	248	221	233	189	891

Classification of death is made by the medical examiner/coroner. Unint./Undet. is the category for unintentional or "accidental" firearm deaths and deaths where circumstances are unclear.

Data are taken from the Firearm Injury Reporting System. At this time, 1997 firearm mortality data is preliminary. 1997 data indicate a decline for all firearm fatality categories in Southeastern Wisconsin.

**Table 2. Firearm Homicide and Suicide Rates by County, 1994-1997**

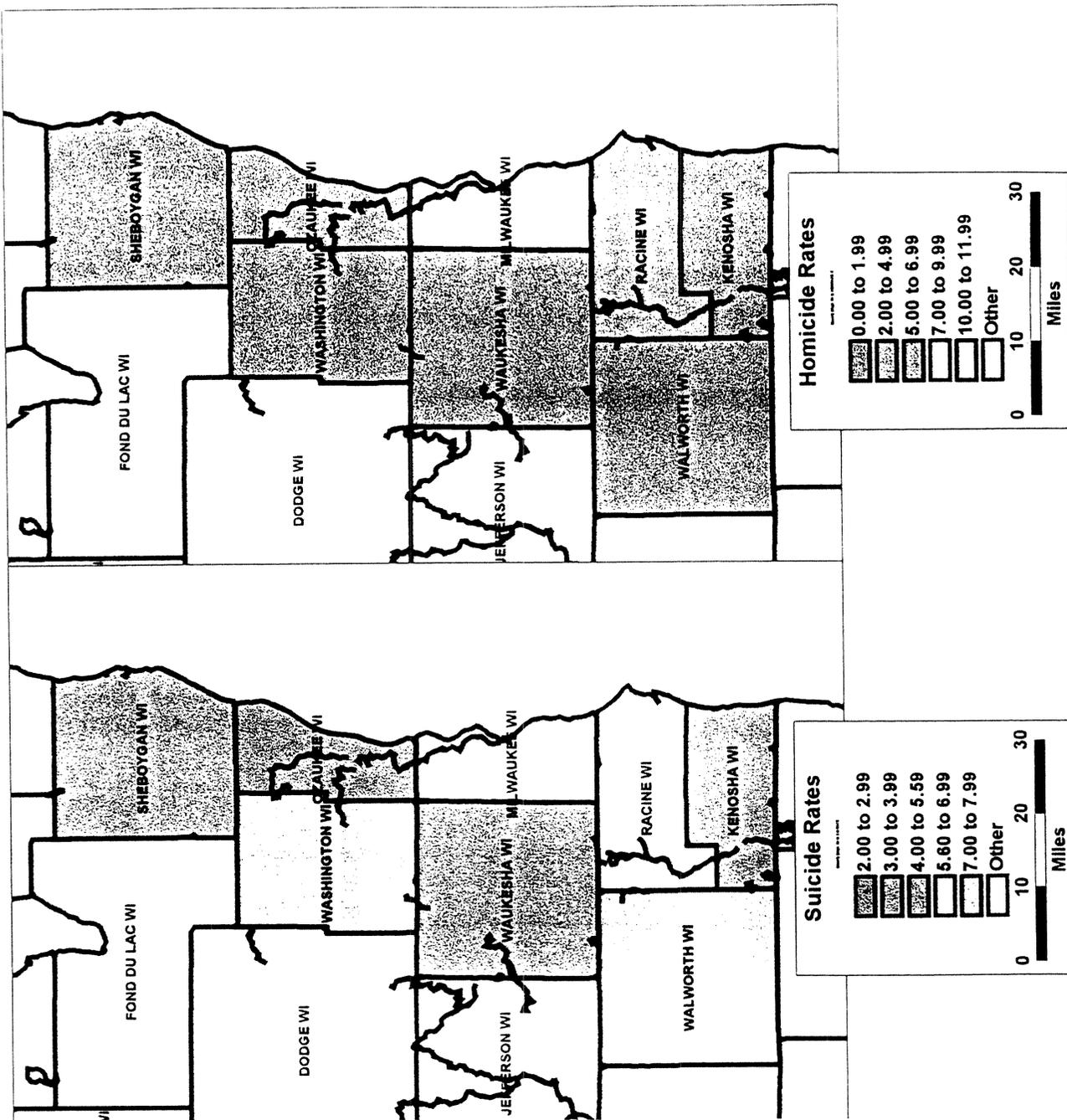
County	Type of Death	1994	1995	1996	1997	Average 1994-97
<b>Kenosha</b>	Homicide	0.7	2.2	0.7	1.4	1.3
	Suicide	4.4	3.6	3.5	2.8	3.6
<b>Milwaukee</b>	Homicide	11.4	11.1	11.8	9.8	11.0
	Suicide	5.9	5.2	5.9	3.6	5.2
<b>Ozaukee</b>	Homicide	0.0	0.0	0.0	0.0	0.0
	Suicide	2.6	3.8	2.5	0.0	2.2
<b>Racine</b>	Homicide	9.3	4.4	5.4	5.4	6.1
	Suicide	7.1	5.4	4.3	5.9	5.7
<b>Sheboygan</b>	Homicide	0.0	0.9	0.9	0.0	0.5
	Suicide	7.5	3.7	3.7	7.3	5.5
<b>Walworth</b>	Homicide	0.0	1.2	1.2	2.4	1.2
	Suicide	8.7	6.1	7.2	9.5	7.9
<b>Washington</b>	Homicide	0.0	0.0	0.0	0.9	0.2
	Suicide	7.5	8.2	6.3	2.7	6.1
<b>Waukesha</b>	Homicide	0.6	0.0	0.9	0.9	0.6
	Suicide	4.5	4.7	5.8	3.7	4.7
<b>All</b>	Homicide	6.5	5.9	6.3	5.4	6.0
	Suicide	5.8	5.1	5.4	4.1	5.1

The rate is the number of reported firearm homicides or suicides occurring in Southeastern Wisconsin per 100,000 people.

Homicide rates range from 11.0 in Milwaukee County (urban), to 0.0 in Ozaukee County (rural). Suicide rates range from 7.9 in Walworth County (rural) to 2.2 in Ozaukee County (rural).

A comparison of Milwaukee County's homicide rate with the seven other counties as well as the difference between Walworth County's suicide rate and those of other counties is significant,  $P < .0001$ .

Map 1. Homicide and Suicide Rates for Southeastern Wisconsin, 1994-1996.



## Summary of Host (Victim) Data

**Table 3. Number of Firearm Deaths by Gender, 1994-1996**

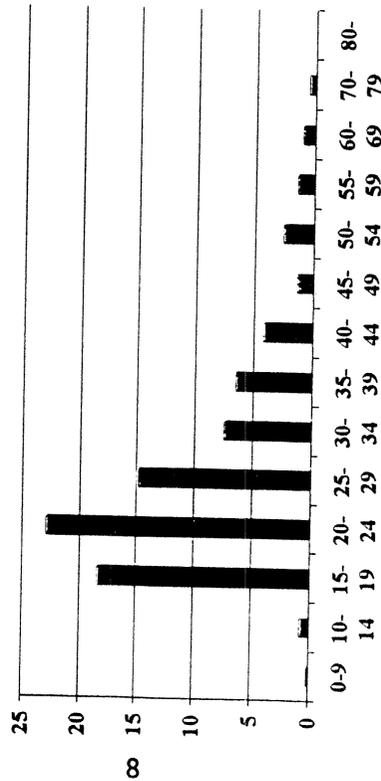
County	Gender	Homicide		Suicide		Unint./Undet.		All	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent
Milwaukee	Male	280	88.1	137	87.3	8	100.0	425	88.0
	Female	38	12.0	20	12.7	0	0.0	58	12.0
Other	Male	39	79.6	148	90.8	7	100.0	194	88.6
	Female	10	20.4	15	9.2	0	0.0	25	11.4
Total	Male	319	86.9	285	89.1	15	100.0	619	88.2
	Female	48	13.1	35	10.9	0	0.0	83	11.8

The "Other" category includes Kenosha, Ozaukee, Racine, Sheboygan, Walworth, Washington and Waukesha counties.

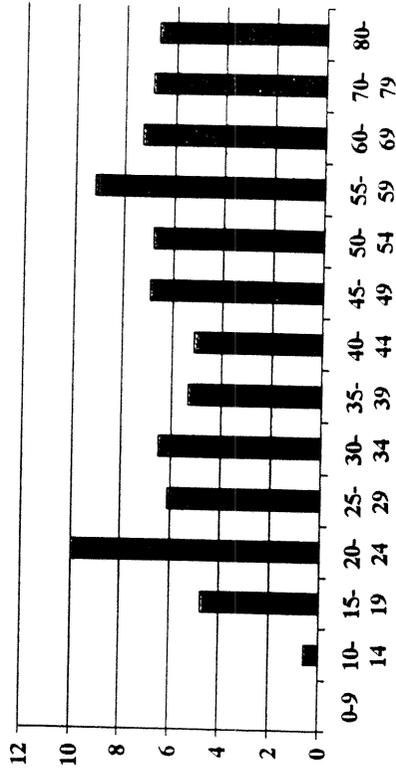
Males, which make up 49% of the total population, account for the majority (88%) of firearm homicide, suicide, unintentional and undetermined victims.

## Figures 1 & 2. Firearm Death Rates

Rate of Firearm-Related Homicides by  
5-Year Age Groups  
Southeastern Wisconsin, 1994-1996



Rate of Firearm-Related Suicides by  
5-Year Age Groups  
Southeastern Wisconsin, 1994-1996



The figures examine homicide and suicide death rates (per 100,000 people). Analysis shows the highest homicide death rate among 15-24 year olds, a trend seem locally and nationally. In contrast, suicide death rates have two peaks, 20-24 and 55-59 year olds.

**Table 4. Number of Firearm Deaths and Death Rates by Race for Milwaukee, Racine and Kenosha Counties, 1994-1996\***

County	Race	Homicide		Suicide		Unint./Undet.		All Deaths	
		Number	Rate	Number	Rate	Number	Rate	Number	Rate
Milwaukee	White	70	3.4	133	6.5	3	0.1	206	10.0
	Black	241	37.3	22	3.4	5	0.8	268	41.4
	Other	7	3.0	2	0.8	0	0.0	9	3.8
Racine	White	11	2.3	30	6.2	2	0.4	43	8.9
	Black	23	35.6	1	1.5	1	1.5	25	38.6
	Other	1	2.4	0	0.0	0	0.0	1	2.4
Kenosha	White	2	0.5	15	3.8	0	0.0	17	4.3
	Black	3	14.6	1	4.9	0	0.0	4	19.5
	Other	0	0.0	0	0.0	1	3.7	1	3.7

\* Only one non-white death occurred outside of these three counties during this time period.

Homicide rates are higher for blacks than whites in all three urban counties. In Milwaukee County, blacks have 10 times the homicide rate of whites, and in Racine and Kenosha County those rates increase to 15 and 29 times that of the white homicide rate respectively.

Suicide rates are virtually the same for whites in Milwaukee and Racine County, however, the suicide rate for whites in Milwaukee County is almost double that of black residents and four times that of blacks in Racine County. Kenosha County experiences a different trend with little difference in suicide rates between blacks and whites, 4.9 and 3.8 respectively.

**Table 5. Percentage of Firearm Fatality Victims Positive for Drugs or Alcohol by Urban/Rural Residence 1994-1996 \***

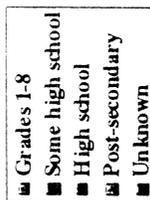
	Urban Homicide		Urban Suicide		Rural Suicide	
	Number	Percent	Number	Percent	Number	Percent
<b>Alcohol Info. Available</b>	344	96.1	188	92.2	94	81.0
<b>Drug Info. Available</b>	342	95.5	179	87.8	91	78.5
<b>Alcohol</b>	136	39.5	84	44.7	21	22.3
<b>Cocaine or metabolites</b>	109	31.9	5	2.8	3	3.3
<b>Opiates or metabolites</b>	8	2.3	4	2.2	5	5.5
<b>Marijuana</b>	83	24.3	18	10.1	6	6.6
<b>Any drug</b>	163	47.7	24	13.4	13	14.3
<b>Alcohol or drug</b>	220	64.3	94	52.5	27	29.7

\*Urban counties (Milwaukee, Racine, and Kenosha counties) are defined as having at least one city with a population over 80,000.

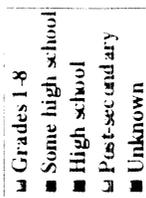
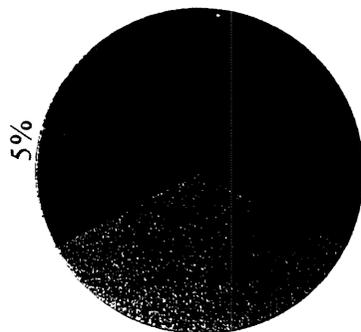
Alcohol is twice as common in urban suicide victims as rural suicide victims, and alcohol or drugs are found in over half of urban suicide and homicide victims, and in almost one third of rural suicide victims. The percentage of urban homicide victims positive for cocaine is more than eleven times that of urban suicides and nine times that of rural suicide victims. Twice as many urban homicide victims as urban suicide victims are positive for marijuana.

**Figures 3 & 4. Education Level, 1994-1996**

**Firearm Homicide Deaths by Educational Level**



**Firearm Suicide Deaths by Educational Level**



Data above indicate that a larger percentage of firearm suicide victims have higher education levels than firearm homicide victims. Three times as many firearm suicide victims as homicide victims have a post-secondary education, while three times as many firearm homicide victims as suicide victims have some high school education. Greater proportions of firearm homicide victims are dying before they enter post-secondary school (interpersonal violence) and firearm suicide victims are dying once in post-secondary school (intrapersonal violence).

## Summary of Environmental Data

### Perpetrator Demographics

**Table 6. Age Comparison of Perpetrators and Firearm Homicide Victims  
1994-1996**

---

Age	Perpetrators		Homicide Victims	
	Number	Percent	Number	Percent
1-9	0	0.0	2	0.5
10-14	9	1.6	4	1.1
15-19	229	39.8	82	22.3
20-24	185	32.2	94	25.6
25-29	71	12.3	66	18.0
30-34	23	4.0	38	10.4
35-39	11	1.9	35	9.5
40-44	11	1.9	21	5.7
45-49	11	1.9	6	1.6
50-59	10	1.7	12	3.3
60-69	1	0.2	5	1.4
70 and over	3	0.5	2	0.5
Unknown	11	1.9	0	0.0
<b>Total</b>	<b>575</b>	<b>100.0</b>	<b>367</b>	<b>100</b>

Analysis is for all eight counties in FIRS.

More than one perpetrator may be identified in a homicide case, thus the difference in the total number of perpetrators and homicide victims.

Overall the majority of the homicide victims and perpetrators are 15- 24 year olds. The highest percent (39.8%) of perpetrators are 15-19 year olds and the highest percent of the victims (25.6%) are 20-24 year olds.

**Table 7. Characteristics of Perpetrators, 1994-1996**

	<b>Number</b>	<b>Percent</b>
<b>Sex</b>		
Male	549	95.5
Female	22	3.8
Unknown	4	0.7
<b>Race</b>		
White	96	16.7
Black	435	75.7
Other	11	1.9
Unknown	33	5.7
<b>Education</b>		
Grades 1-8	32	5.6
Some high school	224	39.0
High-school	102	17.7
Post-secondary	18	3.1
Unknown	199	34.6
<b>Previous/current Parole</b>		
Yes	38	6.6
No	166	28.9
Unknown	371	64.5
<b>Previous/current Probation</b>		
Yes	82	14.3
No	164	28.5
Unknown	329	57.2

Analysis is for all eight counties in FIRS.

The collection of perpetrator demographics is less consistently reported than that of victims. For this reason, over one third of the education levels are unknown and almost two thirds of the probation and parole status are unknown. The data does indicate that one-fifth of perpetrators have been or are currently on probation or parole.

## Circumstantial Data

**Table 8. Firearm Homicide/Suicide Characteristics 1991-1996**

	<b>Number</b>	<b>Percent</b>
<b>Type of Relationship</b>		
Spouse	8	36.4
Ex-Spouse	1	4.5
Boy/Girlfriend	4	18.2
Friend/Acquaintance	4	18.2
Children	3	13.6
Co-Habitant	1	4.5
Unknown	1	4.5
<b>Cases Involving Alcohol</b>		
Yes	11	28.2
No	23	60.0
No Toxicology Test Done	5	12.8
<b>Circumstances *</b>		
Divorce/Separation	5	29.4
Other Argument	4	23.5
Unknown	3	17.6
Lovers Triangle	2	11.8
Mercy Killing	1	5.9
All other Non-Felony	1	5.9
Hostage/Kidnapping	1	5.9
<b>Incident Firearm Owner</b>		
Unknown	9	53.0
Perpetrator (suicide victim)	7	41.2
Perpetrator's Father	1	5.8

\* Derived from the Uniform Crime Report (UCR).

Data are from Milwaukee homicide/suicides cases from 1991-1996 and the seven other Southeastern Wisconsin counties from 1994-1996.

Over half of the relationships are characterized as a current spouse or girl/boyfriend, and almost one third of the circumstances involve a divorce or separation.

Cases involving alcohol apply to both the homicide and suicide victim.

Firearm ownership is difficult to determine without a firearm trace; therefore over half of the cases have an unknown firearm owner. However, in cases where the firearm owner is known, 77.8% of the firearms are owned by the perpetrator or suicide victim.

**Table 9. Location of Firearm Homicides\* 1994-1996**

---

<b>Location</b>	<b>Number</b>	<b>Percent</b>
Roadway/parking lot/garage	147	40.1
Victim's residence	72	19.6
Offender's residence	24	6.5
Other residence	43	11.7
Motor vehicle	28	7.6
Bar/night club/restaurant	12	3.3
Convenience store/gas station	7	1.9
Field/woods/park	10	2.7
Other/unknown	24	6.6

\*Derived from classifications from the Uniform Crime Report (UCR).

**Table 10. Location of Firearm Suicides\* 1994-1996**

---

<b>Location</b>	<b>Number</b>	<b>Percent</b>
Victim's residence/yard/garage	236	73.8
Park	17	5.3
Residence of family member	13	4.1
Residence of friend	12	3.8
Roadway/sidewalk	9	2.8
Other	33	10.3

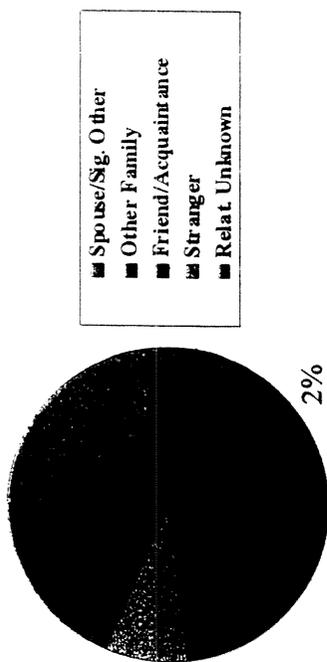
\*Based on information from medical examiners/coroners.

Both analyses are for the eight counties in FIRS.

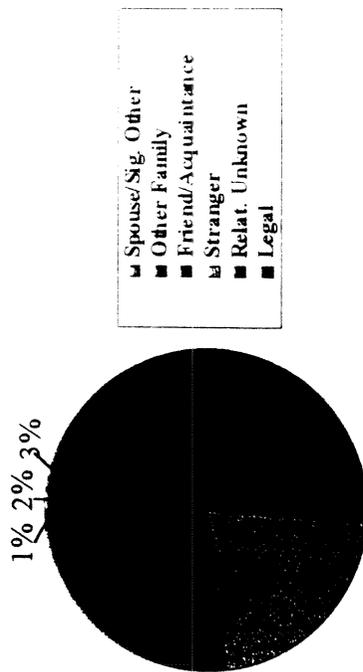
The most common place for homicides to occur is on a roadway, parking lot or garage; however, almost three-quarters of suicides occur in the victim's residence.

**Figures 5 & 6. Relationship of Firearm Victim to Perpetrator**

Relationship of Female Homicide Victims to Perpetrators

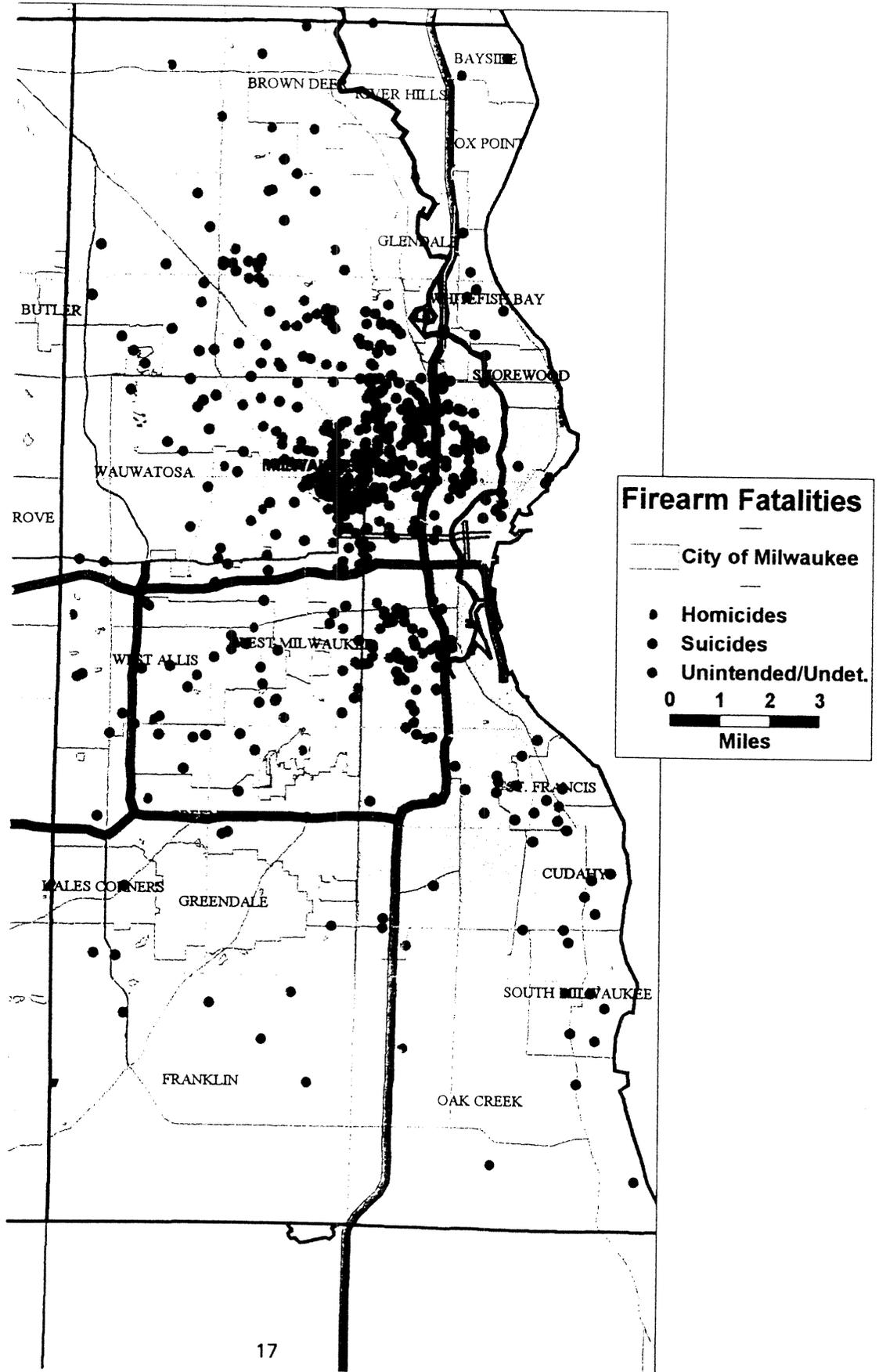


Relationship of Male Homicide Victims to Perpetrators

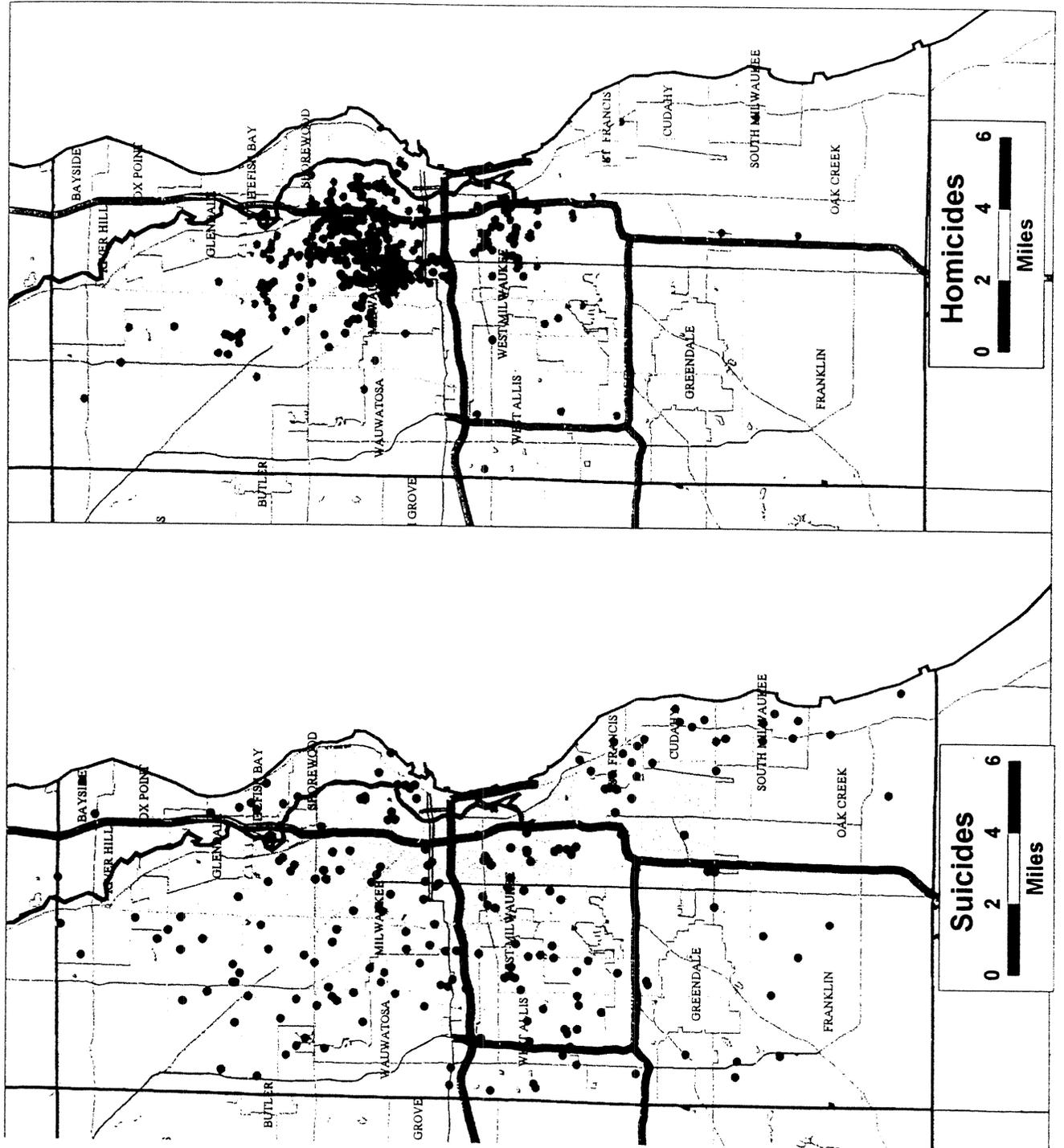


The largest portion of perpetrators for female homicides (40%) is a spouse or significant other versus only 2% for male victims. In comparison, the perpetrator relationship for the majority of male victims (46%) is a friend or acquaintance. Strangers are involved in more than 2.5 times the percentage of male as female homicides, 22% versus 8% respectively. Relationships that are categorized as unknown, may be due to the “uncleared” status of a case.

Map 2a. Place of Firearm Fatality, Milwaukee County 1991-1996.

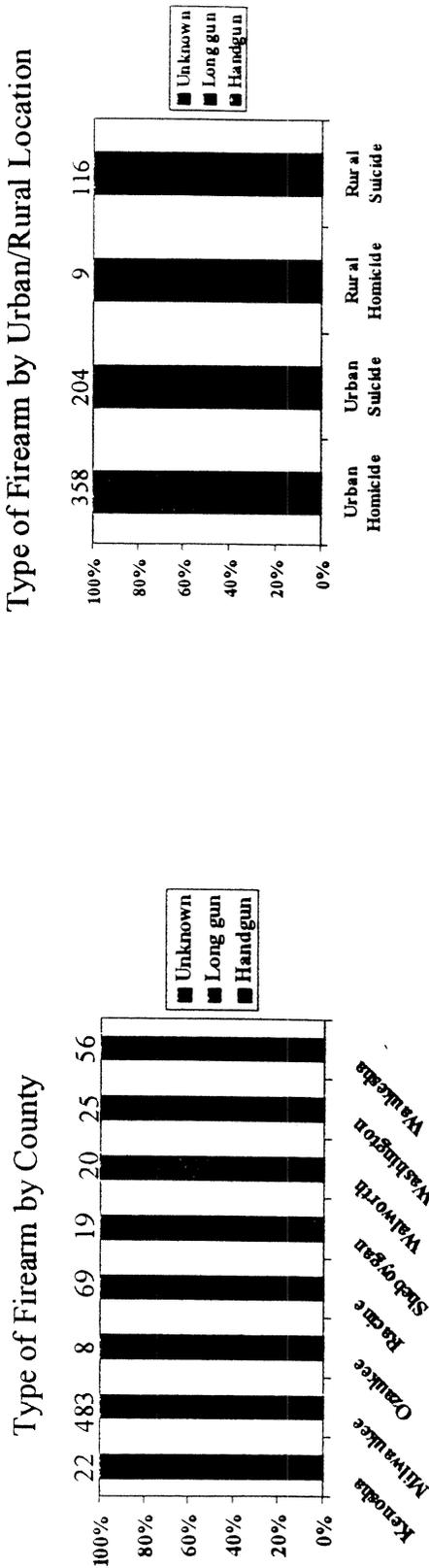


Map 2b. Place of Firearm Homicide and Suicide, Milwaukee County 1991-1996



## Summary of Agent/Vehicle (Firearm) Data

Figures 7 & 8. Firearm Type



By examining county specific and urban versus rural type of firearms, two patterns emerge. The urban versus rural comparison of firearm type indicates that the firearm usage is predominately handguns in all locations, regardless of type of death. However, by examining the county specific firearm type, there are three counties (Kenosha, Washington and Sheboygan) where long guns (rifles and shot guns) are predominately used.

**Definition:** A handgun is a firearm that can be fired using one hand and has a barrel length less than 18 inches long.

**Table 11. Manufacturers of Handguns Used Most Often in Firearm Deaths for Urban and Rural Counties, 1994-1996 \***

<b>Urban Homicides</b>	
Smith & Wesson	12
Glock	9
Taurus	6
Davis Industries	5
Raven	5
Sturm Ruger	5
Firearms Import & Export	4
Jennings Firearms, Inc.	4
Lorcin Engineering Co.	3
Norinco	3
SWD Industries	3
<b>Urban Suicides</b>	
Smith & Wesson	28
Sturm Ruger	15
Colt	11
Beretta	8
Taurus	8
Harrington & Richardson	5
Glock	4
Arminius	3
High Standard	3
Phoenix Arms	3
Raven	3
<b>Rural Suicides</b>	
Colt	13
Sturm Ruger	13
Smith & Wesson	9
Taurus	5

\*Numbers do not reflect handguns used in justifiable homicides.

**Table 12. Handguns Used Most Frequently in City of Milwaukee Homicides, 1991-1996**

<b>Manufacturer and Model*</b>	<b>Number</b>	<b>Percent of Total**</b>
Phoenix Arms Raven/Raven MP-25	10	6.5
Davis Industries P380	8	5.2
Glock 22	6	3.9
Firearms Import & Export Titan	4	2.6
Firearms Import & Export Titan Tiger	4	2.6
Lorcin Engineering Co. L380	4	2.6
SWD Industries M-11	4	2.6

\* At least four handguns.

\*\* Of 154 weapons with manufacturer and model information.

This analysis is consistent with an article by Firearm Injury Center staff,<sup>6</sup> documenting the most common handguns used in city of Milwaukee homicides. Current data reinforces findings that the 25-caliber handgun from Raven/Phoenix is the most frequently used handgun. Data also suggests as examined in table 14, that medium and large caliber handguns are becoming the homicide weapons of choice. This pattern is seen in the emergence of Davis Industries P380 and Glock 22 as the second and third most frequently used handgun.

**Table 13. Persons Under 18 Using Handguns, 1994-1996**

	<b>1994-1996</b>	
	<b>Total Number Under Age 18</b>	<b>Number and (%) Handguns</b>
<b>Suicide Victims</b>		
Urban	11	7 (63)
Rural	4	2 (50)
All	15	9 (60)
<b>Homicide Perpetrators*</b>	95	92 (97)

\*Homicides in which all perpetrators are under the age of 18 are included.

Almost two-thirds of suicide victims under age eighteen use a handgun, and almost all homicide perpetrators under age 18, use a handgun. State and federal law generally prohibit possession or purchase of handguns by persons under 18 years of age.

**Table 14. Caliber of Handguns for Milwaukee County Homicides**

Caliber	1991	1992	1993	1994	1995	1996	1991-1996
<b>Small</b>							
.22 caliber	16	11	13	8	8	9	65
.25 caliber	16	15	12	6	10	5	64
Total Small Caliber	32	26	25	14	18	14	129
% Small Caliber	32.3%	28.0%	26.9%	14.6%	24.7%	16.7%	24.0%
<b>Medium</b>							
.32 caliber	5	6	6	5	5	5	32
.357/.38 caliber	25	24	21	27	18	18	133
.380 caliber	13	14	15	15	9	11	77
9 mm caliber	18	19	20	24	18	23	122
Total Medium Caliber	61	63	62	71	50	57	364
% Medium Caliber	61.6%	67.7%	66.7%	74.0%	68.5%	67.9%	67.7%
<b>Large</b>							
.40 caliber	0	0	3	5	3	5	16
.44 caliber	1	0	3	4	0	2	10
.45 caliber	5	4	0	2	2	6	19
Total Large Caliber	6	4	6	11	5	13	45
% Large Caliber	6.1%	4.3%	6.5%	11.5%	6.9%	15.5%	8.4%
<b>Total</b>	<b>99</b>	<b>93</b>	<b>93</b>	<b>96</b>	<b>73</b>	<b>84</b>	<b>538</b>

The percent distribution of small caliber handguns drops almost in half, medium caliber handguns increase over ten percent, and large caliber handguns more than double between 1991 and 1996.

Handgun caliber is based on homicide firearm used or an estimation of the firearm used.

## Appendices

### FIRS Abstraction Forms

The following are samples of the abstraction forms that the Firearm Injury Center uses when collecting information from the collaborating agencies. Forms are designed to be filled out either by a FIC staff person or can be sent to a medical examiner/coroner or law enforcement officer to be filled out and sent back to the Center. Instructions are included for both forms. The crime laboratory form is designed to be filled out by a staff person reviewing individual firearm cases.

For cases ruled a suicide there is a supplemental form to fill out to more specifically characterize the suicide event.

Future steps include automating this process to decrease firearm injury reporting time.

MEDICAL EXAMINER/CORONER REPORT

Medical Examiner/Coroner Identification:

Name \_\_\_\_\_ Title \_\_\_\_\_ County \_\_\_\_\_  
Phone \_\_\_\_\_ Fax # \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE ONLY  
SE-FIRS # \_\_\_\_\_  
Abstractor ID \_\_\_\_\_

1. ME/CO Case Number \_\_\_\_\_

Type of Death

1. Homicide 2. Suicide 3. Unintended 4. Undetermined  
Death occurred at work? Yes No

Decedent Information:

Last Name \_\_\_\_\_  
First Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, ZIP \_\_\_\_\_

Sex 1. Male 2. Female

5. Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ (DOB)

Age \_\_\_\_\_ Years

7. Marital Status 1. Married 2. Never Married  
3. Divorced 4. Separated 5. Widowed

8. Education \_\_\_\_\_ Grade K-12 \_\_\_\_\_ College 1-5+

Race 1. White 2. Black 3. Asian or Pacific Islander  
4. Native Am./Alaskan Native 5. Other \_\_\_\_\_

10. Hispanic 1. Yes 2. No

11. Occupation 1. Professional, technical, managerial  
2. Clerical/Sales 3. Service 4. Agri, Fish, Forest 5. Processing  
6. Machine Trades 7. Benchwork 8. Structural work 9. Misc.  
10. Student 11. Unemployed, SSI 12. Self-employed 13. Retired  
14. Homemaker 15. Unknown

12. Location Death Occurred 1. Scene of Injury 2. DOA  
3. Hospital (Specify) \_\_\_\_\_ 4. Rehab/home

13. Date \_\_\_\_\_ Time \_\_\_\_\_ Location \_\_\_\_\_

Found \_\_\_\_\_

Injured \_\_\_\_\_

Pronounced \_\_\_\_\_

14. Police Agency \_\_\_\_\_ County \_\_\_\_\_

15. Type of Firearm 1. Handgun 2. Shotgun  
3. Rifle 4. Unknown

16. Specifications on Firearm:  
Make \_\_\_\_\_ Type \_\_\_\_\_ Model \_\_\_\_\_  
Caliber \_\_\_\_\_ Serial \_\_\_\_\_  
Barrel Length \_\_\_\_\_ Importer \_\_\_\_\_

17. Number of Bullets Recovered? \_\_\_\_\_

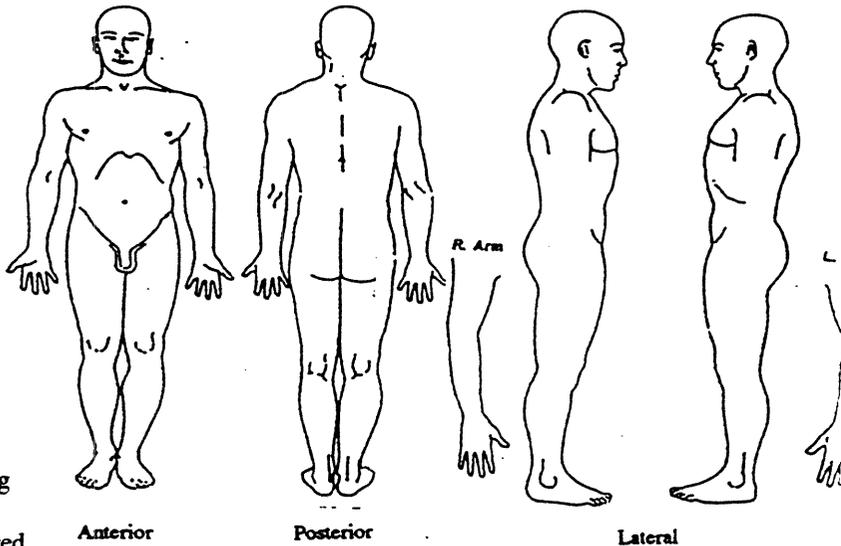
18. Is the Owner of the Firearm Known?  
1. Yes 2. No If yes, who \_\_\_\_\_

19. Premises 1. Victim's residence/yard/garage 2. Family member's residence/yard/garage 3. Residence of friend  
4. Tavern/bar/night club 5. Roadway/ street/sidewalk 6. Park  
7. Motor vehicle 8. Convenience store/grocery/gas station  
9. Other \_\_\_\_\_

20. Deaths Associated with Incident  
(Specify number, 1 if single death) \_\_\_\_\_

21. Number of Projectiles? \_\_\_\_\_

22. Final Anatomic Findings -- Gunshot Wounds  
(Mark entrance wounds with an "x" and exit wounds with an "o")



23. Cause of Death \_\_\_\_\_

24. Due to \_\_\_\_\_ 2. DOA

25. Other Significant Conditions \_\_\_\_\_

Toxicology Report

26. Alcohol 1. Yes 2. No 3. Unk 4. NA  
If yes, Level \_\_\_\_\_  
27. Cocaine 1. Yes 2. No 3. Unk 4. NA  
28. Cocaine metabolites 1. Yes 2. No 3. Unk 4. NA  
29. Opiates 1. Yes 2. No 3. Unk 4. NA  
30. Opiate metabolites 1. Yes 2. No 3. Unk 4. NA  
31. Marijuana 1. Yes 2. No 3. Unk 4. NA  
32. Other 1. Yes 2. No 3. Unk 4. NA  
If yes, Specify \_\_\_\_\_

33. Notes from investigation (data on others injured, alcohol use, circumstances, perpetrator, relationship, weapon)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

34. Attach photocopy of the Original Certificate of Death

35. If SUICIDE, fill out supplemental suicide report

# Instructions for ME Report Data Abstraction

Please direct questions to Carrie Nie, Project Director.

Firearm Injury Surveillance System (414) 257-6694

1. **ME Case Number**  
Record the me/co case number for the victim. Cross-reference with numbers on the file folder and the report.
2. **Type of Death**  
Take this information from the report cover sheet.  
Indicate if the injury occurred at work.\*
3. **Decedent Information**  
Please write in any combined ( Mary Ann) hyphenated names (Smith-Jones) or aliases that are indicated on the report cover sheet.\*
4. **Sex**  
As indicated on the report cover sheet.\*
5. **Date of Birth**  
Specify month, day, and year as indicated on the report cover sheet.\*
6. **Age**  
As indicated on the report cover sheet.\*
7. **Marital Status**  
As indicated on the report cover sheet.\*
8. **Education**  
Indicate the highest elementary or grade school year (0-12) completed or highest year of college study (1-5+) as indicated on the *Original Certificate of Death (21. Education Highest Grade Completed)*
9. **Race**  
Select the race indicated on the report cover sheet.\*
10. **Hispanic**  
Enter as indicated on the report cover sheet. Cross reference with the *Original Certificate of Death (19. Hispanic Origin)*.
11. **Occupation**  
Record the occupation indicated on the report cover sheet.\* Do not assume that anyone over 55 has retired. Read carefully to accurately enter the work status at the time of their death. This information, when available, is indicated on the *Original Certificate of Death*.
12. **Location Death Occurred**  
Record information verbatim from the report cover sheet.
13. **Date/Time/Location**  
Record this information verbatim from the report cover sheet.  
Record as much information as possible (i.e. precise time of injury is unknown in many suicide cases). Be sure to include street address and zip code for location.
14. **Police Agency**  
Indicate the Law Enforcement agency responsible for the death investigation. Be complete: Sheriff, County name, City/Municipality name, etc.
15. **Type of Firearm**  
Handgun, shotgun, rifle, or unknown firearm is usually indicated on the report cover sheet. Weapon distinction should be abstracted verbatim. This determination must not be based on the abstractor's presumption.
16. **Specifications on Firearms**  
Read both the report cover sheet and narrative reports to obtain as much information as possible. Example:

Make - Raven

Type - semi-automatic pistol

Model - MP25

Caliber - .25ACP

Serial Number

Barrel Length - 2.5"

Importer - Jones's Gun Shop (include city, state)

## 17. Number of Bullets Recovered

Indicate the # of bullets recovered during the autopsy. Also note any others mentioned in the narrative report (i.e. found in the victims clothing). Enter "O" if bullets were not recovered.

## 18. Is the Owner of the Firearm Known?

Indicate if the owner of the firearm is known. This would be in the narrative report. (Victim, mother, father, friend)

## 19. Premises

This information is indicated on the report cover sheet or in the narrative report. Use "other" and briefly describe the circumstances if uncertain.

## 20. Deaths Associated with Incident

If the decedent named above was the only incident victim enter "1". If the incident resulted in two or more deaths, list number of victims.

## 21. Number of Projectiles

Note the number of projectiles. One may have one projectile causing more than one entrance/exit wound.

## 22. Final Anatomic Findings Data-Gunshot Wounds

Mark all entrance wounds with an "X" and all exit wounds with an "O" on the appropriate (posterior, anterior or lateral) anatomical drawing.

## 23. Cause of Death

Record this information verbatim from the *Original Certificate of Death (46. Part I)*. Copy all causes just as listed on the *Death Certificate*.

## 24. Due To

Record this information verbatim from the *Original Certificate of Death (46. Part I)*. Copy all "due to or as a consequence of" just as listed on the *Death Certificate*.

## 25. Other Significant Conditions

Record this information verbatim from the *Original Certificate of Death (46. Part II)*. Copy all significant conditions just as listed on the *Death Certificate*.

## 26-32. Toxicology Report

Indicate positive test results by circling yes and negative results by circling no. Note any additional drugs (i.e. Phenobarbital, diazepam) that were found. If a toxicology screen was not done circle "4."

## 33. Notes From Investigation

Briefly describe the circumstances of the incident.

## 34. Attach Photocopy of Original Certificate of Death

Please staple a photocopy to this form.

## 35. If SUICIDE, fill out the supplemental suicide report

\* Cross-reference these data elements with information listed on the *Original Certificate of Death*. Please note any discrepancies or additional information from either source.

# Supplemental Suicide Report

## Medical Examiner/Coroner Identification:

Name \_\_\_\_\_ Title \_\_\_\_\_ County \_\_\_\_\_  
Phone \_\_\_\_\_ Fax # \_\_\_\_\_ Date \_\_\_\_\_

## OFFICE USE ONLY

SE-FIRS # \_\_\_\_\_ - \_\_\_\_\_  
Abstractor ID \_\_\_\_\_

	YES	NO	UNKNOWN
1. History of Depression?	1	2	3
2. History of other Mental Illness?	1	2	3
3. History of Drug Problem?	1	2	3
4. Serious Physical Illness?	1	2	3
5. Left Suicide Note?	1	2	3
6. Date Gun Purchased?	1	2	3
7. Date Ammo Purchased?	1	2	3
8. Stated Attempt?	1	2	3
9. Previous Suicide Attempt?	1	2	3
10. Lover/Relationship Problem?	1	2	3
11. Other Precipitating Event?	1	2	3
12. Guns in Home?	1	2	3
13. Incident Gun Stored locked up?	1	2	3
14. Incident Gun Stored Loaded?	1	2	3

Victim Name \_\_\_\_\_ Type Death \_\_\_\_\_ FIRS Case # \_\_\_\_\_  
 DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_ County \_\_\_\_\_ Abstractor \_\_\_\_\_

**LAW ENFORCEMENT REPORT**

1. Incident number \_\_\_\_\_ 2. Crime Lab Case Number \_\_\_\_\_ 3. Murder/Suicide # \_\_\_\_\_

Perpetrator Info.	Perpetrator 1	Perpetrator 2	Perpetrator 3	Perpetrator 4
Last Name				
First Name, MI				
Street Address				
City, State, Zip				
Date of Birth				
Age				
Sex (M/F)				
Race(W/B/A/N/O)				
Hispanic (Y/N)				
Marital Status (M/NM/D/S/W)				
Education(G K.- 12) (C 1-5+)				
Occupation				
Parole (Y/N)				
Probation (Y/N)				
Final Disposition				

Weapon Recovered 1. Yes 2. No → Date Weapon Recovered? \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Description of Firearm 1. Handgun 2. Unknown  
 3. Shotgun 4. Rifle 6. Bullets Recovered 1. Yes 2. No

Firearm Info	Caliber	Make	Type	Model	Serial Number	Barrel Length	Incident/ Scene	Property Inventory #
Weapon 1								
Weapon 2								
Weapon 3								
Weapon 4								

7. Owner of firearm known? 1. Yes 2. No  
 If yes- who \_\_\_\_\_

8. Location prior to injury \_\_\_\_\_  
 Circumstances prior to injury \_\_\_\_\_

9. Location of injury \_\_\_\_\_  
 Circumstances of injury \_\_\_\_\_

10. Situation (UCR) 1. sgl V/sgl O 2. sgl V/uk O  
 3. sgl V/mult O 4. mult V/sgl O 5. mult V/uh O  
 6. mult V/mult O

11. Weapon (UCR) \_\_\_\_\_

12. Relationship of Victim to Perpetrator (UCR) \_\_\_\_\_

13. Location of Homicide (UCR) \_\_\_\_\_

14. Circumstances (UCR) \_\_\_\_\_

15. Offender Outcome (UCR) \_\_\_\_\_

16. Alcohol/Drug Involvement (UCR) \_\_\_\_\_

17. Describe the circumstances surrounding this incident:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



# Instructions for Law Enforcement Report Data Abstraction

Please direct questions to Carrie Nie, Project Director  
Firearm Injury Surveillance System (414) 257-6694

1. **Incident Number**  
The law enforcement (LE) agency's internal identifying number related to the victim's death.
2. **Crime Lab (R-Number)**  
If the weapon(s), bullet(s) and/or casing(s) have been sent to the Southeastern Wisconsin Crime Laboratory, record the R-Number that corresponds to this case. Indicate if evidence was recovered by your law enforcement agency and not sent to the Crime Lab.
3. **Murder/Suicide Number**  
Milwaukee County's internal number for victims death.
4. **Weapon Recovered**  
Answer "yes" if any weapon(s) was/were recovered at the scene or during the investigation of this incident. Remember that any weapon related to this incident should be included, not just weapon(s) that fired fatal bullet(s). Also include date weapon was recovered.
5. **Description of Firearm**  
If the weapon responsible for this firearm death has been recovered, circle the type recovered.
6. **Bullets Recovered**  
Answer "yes" if bullet(s) were recovered at the scene, in the victim's clothing, during surgery, or during the autopsy. Be sure to include any bullet(s) found in unusual places such as dashboards, the side of a building, inside a vehicle, etc.
7. **Owner of firearm**  
Answer "yes" or "no" regarding the owner of firearm involved in incident. If owner is known include persons name. Take this information from the property report.
8. **Location prior to injury**  
Specify the location of the victim prior to the injury (i.e. victim or perpetrator's residence, vehicle, nightclub, convenience store, street, etc.).  
  
**Circumstances prior to injury**  
Recount circumstances prior to the firearm injury (i.e. robbery, argument over money or property, juvenile gangs, lover's triangle, hunting accident, child playing with a gun, etc.).
9. **Location of injury**  
Specify the location of the victim when injured (i.e. victim or perpetrator's residence, vehicle, nightclub, convenience store, street, etc.).  
  
**Circumstances of injury**  
Recount circumstances at the time of the firearm injury (i.e. robbery, argument over money or property, juvenile gangs, lover's triangle, hunting accident, child playing with a gun, etc.).
10. **Situation (UCR)**  
Take this information directly from the law enforcement agency's UCR report.
11. **Weapon (UCR)**  
Take this information directly from the law enforcement agency's UCR report.
12. **Relationship of Victim to Perpetrator (UCR)**  
Take this information directly from the law enforcement agency's UCR report.
13. **Location of Homicide (UCR)**  
Take this information directly from the law enforcement agency's UCR report.
14. **Circumstances (UCR)**  
Take this information directly from the law enforcement agency's UCR report.
15. **Offender Outcome (UCR)**  
Take this information directly from the law enforcement agency's UCR report.
16. **Alcohol/ Drug Involvement (UCR)**  
Take this information directly from the law enforcement agency's UCR report.
17. **Describe the Incident/Circumstances**  
Provide a brief description of the circumstances surrounding the incident.

## Firearm Information

Record all available information regarding the weapon(s). Specific, detailed information is very important. Example:

Make - Raven  
Type - semi-automatic pistol  
Model - MP-25  
Caliber - .25ACP  
Serial Number- XX1234  
Barrel Length - 2.5 inches  
Property Inventory #

Incident or Scene - if multiple weapons were recovered, indicate those involved in actual incident (the firearm(s) causing the victim's death) and those recovered at the scene (firearm(s) that did not fire fatal bullet(s)).

## Perpetrator Information

Record all available information relevant to the perpetrator's name, address, DOB, age, sex, race, marital status, education, and occupation. Indicate "yes" if the perpetrator is or has ever been on parole or probation. Final disposition should describe the perpetrator's legal status (ie. arrest warrant issued, detained at a youth facility, charged with first-degree homicide, justifiable homicide) at the time this form is completed.

Victim Name \_\_\_\_\_ Type Death \_\_\_\_\_ FIRS Case # \_\_\_\_\_  
 DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_ County \_\_\_\_\_ Abstractor \_\_\_\_\_

**CRIME LAB REPORT**

Crime Lab R No. \_\_\_\_\_ Police Agency \_\_\_\_\_ Law Enforcement No. \_\_\_\_\_

Firearm specs	Weapon 1	Weapon 2	Weapon 3	Weapon 4	Weapon 5
Caliber					
Make					
Type					
Model					
Serial Number					
Magazine Type					
Mag Capacity					
Barrel Length					
Loaded Chamber Indicator					
Incident/Scene					
Safety (type)	Safety Work?				
Safety (type)	Safety Work?				
Importer: City, State					
Estimated Caliber of Incident Weapon					

Bullets Recovered	Caliber	Type	Weight	Victim/Scene
Bullet 1				
Bullet 2				
Bullet 3				
Bullet 4				
Bullet 5				

Casings Recovered	Caliber	Type	Headstamp	Finish
Casing 1				
Casing 2				
Casing 3				
Casing 4				
Casing 5				

## The Firearm Injury Center Staff

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*The Firearm Injury Center is dedicated to the reduction of firearm injuries and deaths. The Center provides comprehensive objective, accurate information and analysis of firearms and related morbidity and mortality. The Center collaborates with policy makers, community-based organizations and agencies, and with individuals at local, regional and national levels to support effective prevention strategies.*

## References

1. Max W and Rice DP. Shooting in the dark: estimating the cost of firearm injuries. *Health Aff (Milwood)* 1993; 12: 171-185.
2. Teret SP, Wintemute, GJ, Belison, PL. The Firearm Fatality Reporting System. *JAMA*. 1992; 267 22: 3073-3074.
3. Peters KD, Kochanek SL. Deaths: Final Data for 1996. National vital statistics reports; vol. 47 no. 9. Hyattsville, Maryland: National Center for Health Statistics. 1998
4. Knapton J. Wisconsin Deaths 1996. Madison, Wisconsin: Center for Health Statistics; Division of Health. 1997.
5. Homicide in Wisconsin 1961-1997. Wisconsin Office of Justice Assistance. Statistical Analysis Center. 1998.
6. Hargarten SW, Karlson TA, O'Brien ME, Hancock J and Quebbeman E. Characteristics of Firearms Involved in Fatalities. *JAMA*. 1996; 275 1: 42-45.