Aside from the fear, isolation, or the loss of a loved one that violence imposes on many Americans, the financial burden placed on taxpayers through medical costs is significant. This fact sheet provides statistical information on the monetary impact of treating the "typical" gunshot victim in the United States. Data are provided on cost of direct medical services, lost wages and quality of life, cost to government assistance agencies and insurance firms, and financial difficulties placed on individual trauma centers. (RB)
In addition to the fear, isolation, or the loss of a loved one that violence imposes on many Americans, Americans also pay a financial price for the gun violence epidemic. The taxpaying public pays most of the medical costs for shooting victims.

In 1992, the cost of direct medical spending, emergency services and claims processing for the victims of gun violence nationwide totalled approximately $3 billion.\(^1\)

Lost wages cost approximately $34 billion more. Quality of life losses totalled approximately $80 billion.\(^1\) Preventing firearms violence will not only save lives, it will save money.

In a study of 44 acute care children's hospitals, average hospital charges alone for treating a child wounded by gunfire were more than $14,000. About half of the bills were paid by Medicaid or assumed as charity care by the hospitals.\(^2\)

The $14,000 price tag for each gunshot victim treated does not include medical professional fees, or the substantial cost of rehabilitation services necessary for many gunshot victims.

The average cost of medical treatment for one hospitalized gunshot wound patient among all age groups is over $33,000.\(^1\) According to the General Accounting Office (GAO), approximately 80% of patients who suffer injuries from violence are uninsured or eligible for government medical care cost assistance.\(^3\)

Treating gunshot injuries affects all aspects of care within a hospital and uses resources disproportionately.

In one California hospital with a trauma center, severely injured patients are moved out of the Intensive Care Unit early in order to make room for new arrivals with gunshot wounds, elective surgeries are routinely canceled because of emergency patients, and surgical residents often do not have time for non-trauma work.\(^3\)

Individual trauma centers lose millions of dollars annually treating gunshot wound patients.\(^5,6\)

If the government does not reimburse a trauma center for the cost of treating shooting victims, the hospital must simply absorb the loss. If the losses are too great, the hospital will be forced to close the trauma center, decreasing the number of Americans who have access to high quality emergency care. In Los Angeles County from 1985 to 1989, 10 of 23 trauma centers closed for financial reasons.\(^4\)

None of the federal taxes on guns are designated for the medical care of victims of gun violence. In fact, all of the revenues from the firearm excise tax are required to go to hunting-related activities.\(^7\)

This tax structure is based on the premise that gun ownership affects only the gun owner and that guns are used just for sporting purposes. Instead, guns and gun violence are issues of public health, public safety, and the public purse. Imposing additional taxes on firearms and ammunition to fund medical care for gun-related injuries may reduce gun sales.
REFERENCES


7. BATF Public Affairs Office, Washington, D.C.