(A) Policy Statement

The Trauma Registry collects and stores information on trauma patients, prepares reports on data collected, and provides information for Quality Assurance and Clinical Research for the medical staff and other departments at UTMC.

(B) Purpose of Policy

To maintain a consistent manner of identifying trauma patients for the Trauma Registry.

(C) Procedure

1. Identification of cases for inclusion in the data base.
   a. The trauma registry shall include data on the following:
      * All Trauma Activations, Level I or II
      * Transferred into or out of acute care facility regardless of LOS at transferring facility or mode of transfer
      * All trauma patients with an appropriate mechanism of injury who are admitted to UTMC (Floor, ICU, OR, OPS, GI, or direct admit) with one of the following criteria (or are transferred to another facility) or are dead on arrival/death after attempted resuscitation

Inclusion Criteria

<table>
<thead>
<tr>
<th>International Classification of Disease, Tenth Revision, Clinical Modification (ICD-10-CM) -</th>
<th>ICD-10-CM Diagnoses Descriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>J70.5</td>
<td>Respiratory conditions due to smoke inhalation</td>
</tr>
<tr>
<td>S00-S99</td>
<td>With 7th character modifiers of A, B or C. Injuries to specific body parts-Initial encounter</td>
</tr>
<tr>
<td>T07</td>
<td>Unspecified multiple injuries</td>
</tr>
<tr>
<td>T14</td>
<td>Injury of unspecified body region</td>
</tr>
<tr>
<td>T20-T28</td>
<td>With 7th character modifier of A only (burns by specific body parts-Initial encounter</td>
</tr>
<tr>
<td>T30-T32</td>
<td>Burns of multiple &amp; unspecified body regions by TBA percentage</td>
</tr>
<tr>
<td>T33-T34</td>
<td>Frostbite with A modifier only</td>
</tr>
<tr>
<td>T59</td>
<td>A modifier only</td>
</tr>
<tr>
<td>T68-T69</td>
<td>Hypothermia &amp; Other effect of reduced temperature</td>
</tr>
<tr>
<td>T70.4; T70.8; T70.9</td>
<td>Effects of high pressure fluids, air and water pressure</td>
</tr>
<tr>
<td>T71</td>
<td>Asphyxiation</td>
</tr>
</tbody>
</table>
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Trauma Registry
Page 2

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>T74</td>
<td>Physical abuse, confirmed; shaken infant syndrome</td>
</tr>
<tr>
<td>T75.0, T75.1 &amp; T75.4</td>
<td>Lightening, Electrocution, Drowning; A modifier only</td>
</tr>
<tr>
<td>T79.A1-T79.A9</td>
<td>Traumatic compartment syndrome-initial encounter with 7th modifier of A only</td>
</tr>
</tbody>
</table>

2. Case Finding/Data Sources:
   a. Admitting Office: All admission sheets will be reviewed to identify Admission diagnosis of trauma.
      1) Emergency Department
   b. The Trauma Criteria sheet will be completed to identify all Trauma Alerts/Consults, DOA, DAA, & Transfers associated with a trauma diagnosis.
   c. Concurrent data collection by TNC and TCM on Trauma Rounds.
   d. In addition, dData sources include pre-hospital and hospital medical records.

3. Maintenance of Trauma Registry
   a. Data Entry Storage
      1) All information will be entered into the computer on all cases, followed by complete information from trauma abstract.
      2) A hard copy of all data sheets will be stored in the Trauma Registry office file according to month of discharge for at least 14 months.
   3) Generation of Reports
      a. Standard reports will be generated on a monthly or quarterly basis for needs of Trauma Committee
      b. Trauma Registry request files will be maintained.
      Information to be included in request:
      i. Date of request
      ii. Topic of report
      iii. Period covered in report
      iv. Variables included in report
      v. Person/persons requesting report
      vi. Purpose of report
      vii. Date needed

Approved by:

Kristin Calkins, RN, BSN
Director, Trauma

Review/Revision Date:

11/1/2007
11/15/2010
4/25/14
7/1/2017

Monceca Smith, MSN, RN
Director of Nursing/Chief Nursing Officer

Next Review Date: 7/1/2020

Policies Superseded by This Policy: 43-1

Related forms: Trauma Abstract, Trauma Alert Criteria/Trauma Consult, H/P