

PURPOSE:

The purpose of this policy is to establish a data management program to assist trauma centers and the SJCEMSA in monitoring, evaluating and improving the delivery of hospital and pre-hospital trauma services.

AUTHORITY:

Health and Safety Code, Division 2.5, Sections 1797.220, 1798, 1798.162, 1798.163, 1798.164, 1798.165, 1798.168, 1798.170, and 1798.172. California Code of Regulations, Title 22, Division 9, Chapter 7.

DEFINITIONS:

- A. "SJCEMSA" means the San Joaquin County Emergency Medical Services Agency.

POLICY:

- I. The SJCEMSA in consultation with the designated trauma centers shall select trauma registry software to be used by the SJCEMSA and designated trauma centers for the collection, management and reporting of trauma patient data.
- II. Pertinent prehospital patient care record data shall be entered into the trauma registry by the trauma center.
- III. Designated trauma centers shall create a trauma registry record for:
 - A. Each major trauma patient transported to their facility by ground or air ambulance;
 - B. Each major trauma patient transferred to their facility from another hospital;
 - C. Each patient presenting themselves to the trauma center, who upon assessment by emergency personnel is determined to meet triage criteria as a major trauma patient.
- IV. The trauma registry maintained by the trauma centers shall meet all American College of Surgeons Committee on Trauma recommendations included in the most recent edition of resources for Optimal Care of the Injured Patient and shall at a minimum include the following data elements:

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- A. Patient identification information:
 - 1. Name;
 - 2. Date of Birth;
 - 3. Unique trauma registry identification number;
- B. Pre-hospital data:
 - 1. Transportation mode;
 - 2. Transport agency;
 - 3. Care provided;
 - 4. Pre-hospital vital signs;
- C. Emergency department data:
 - 1. Date and time of arrival in the emergency department (trauma resuscitation area);
 - 2. Time of trauma team notification;
 - 3. Trauma team activation level;
 - 4. Time trauma team surgeon arrived in trauma resuscitation area;
 - 5. Name of surgeon or physician trauma team leader;
 - 6. Name of admitting physician;
 - 7. Patient vital signs at:
 - a. Time of arrival in trauma resuscitation area;
 - b. One hour after emergency department arrival;
 - c. Time of emergency department discharge;
 - 8. Patient treatment within the emergency department;
 - 9. Time discharged from the emergency department;
 - 10. Emergency department discharge disposition;
- D. Hospital data:
 - 1. Date of initial admission;
 - 2. Number of days in intensive care;
 - 3. Date of discharge;
 - 4. Diagnosis data;
 - a. ICD-9;
 - b. AIS-90
 - c. AIS and region;
 - d. Injury severity scores;
 - i. ISS
 - ii. RTS
 - iii. TRISS
 - e. Clinical and procedure data;
- E. Discharge data including;
 - 1. Discharge disposition;

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- 2. Discharge outcome;
 - 3. Discharge date and time;
 - F. Quality Improvement Indicators;
 - G. Patient financial data:
 - 1. Charges;
 - 2. Payments;
 - 3. Payer source.

- V. Designated trauma centers shall submit trauma registry data to the SJCEMSA on a monthly basis.

- VI. The SJCEMSA will endeavor to provide and obtain trauma registry data for patients transported or transferred to trauma centers located outside of San Joaquin County consistent with established inter-county trauma system agreements.

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