

On May 7th, Ramzi Nimry (Trauma System PI Manager) provided an ImageTrend registry training at Decatur County Memorial Hospital in Greensburg, IN.

On May 13th, Ramzi Nimry (Trauma System PI Manager) provided an ImageTrend registry training at St. Vincent Randolph Hospital in Winchester, IN.

On May 15th, Ramzi Nimry (Trauma System PI Manager) provided an ImageTrend registry training at IU Health LaPorte Hospital in LaPorte, IN.

On May 26th, Katie Hokanson (Director, Division of Trauma and Injury, Camry Hess, Database Analyst Epidemiologist and Ramzi Nimry (Trauma System PI Manager) attended the Traffic Records Coordinating Committee (TRCC) meeting at the Indiana Government Center South in Indianapolis, Indiana.

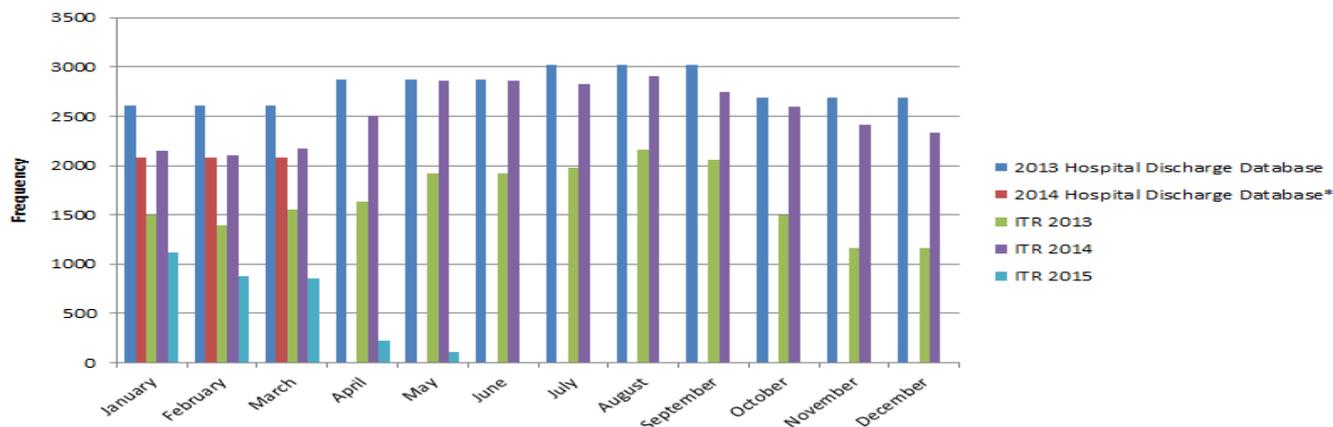


The Indiana Trauma Registry (ITR) monthly report is a dashboard style report for the Indiana Criminal Justice Institute (ICJI) and any other party concerned about trauma in Indiana. This report highlights the four data quality measures for the ICJI grant: completeness, timeliness, uniformity, and integration. This report uses data within the ITR, with an emphasis on motor vehicle collisions (MVC).

### Completeness

The Hospital Discharge database, also maintained by the ISDH, contains all records of patients cared for in Indiana hospitals. We compared patient records from the ITR with the Hospital Discharge database to know how complete is the ITR's data. 2014 Hospital Discharge data is not available to the ISDH at this time.

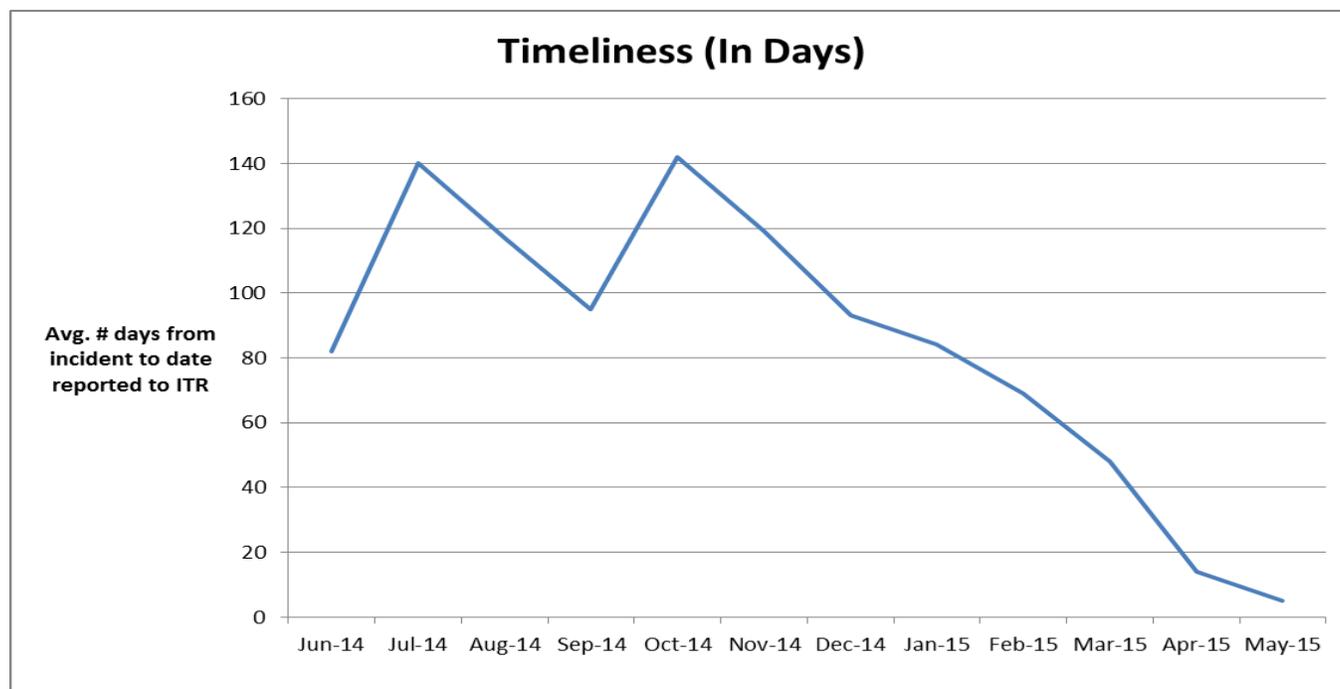
**2013-2015 Hospital Discharge and ITR**



### Timeliness

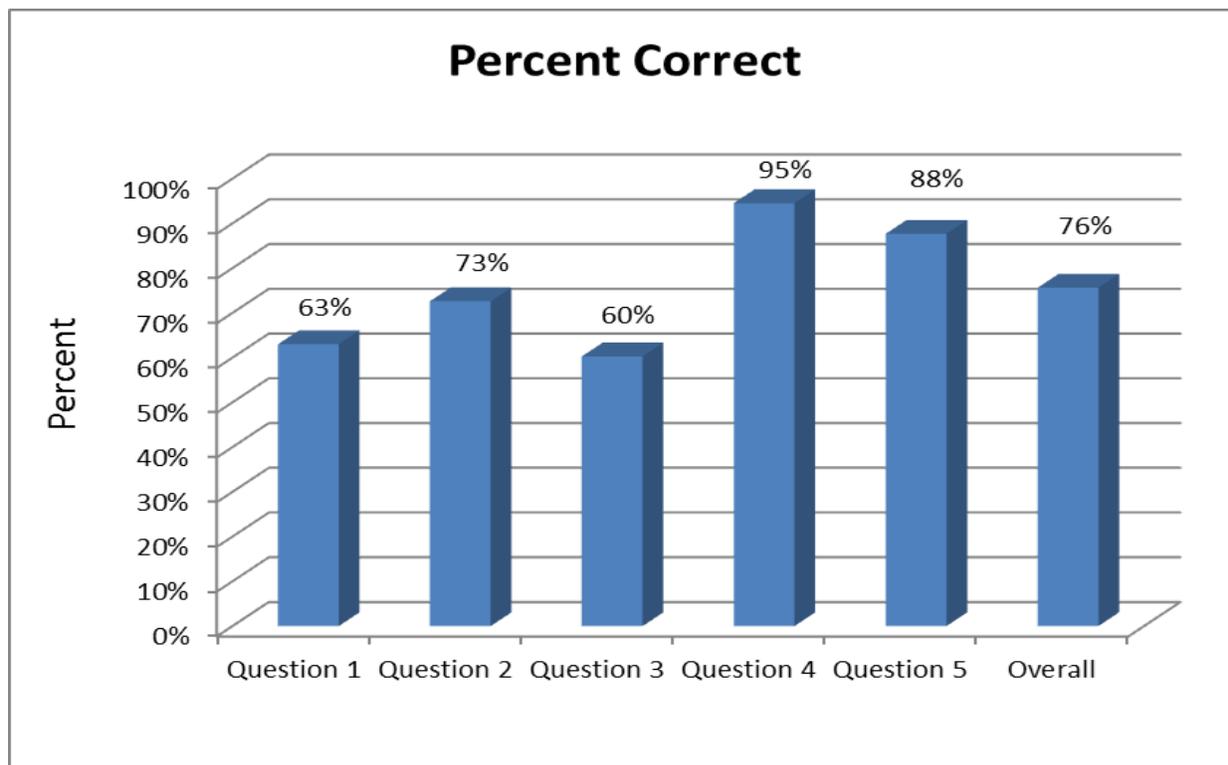
Timeliness increases as facilities wait until the data submission deadline to submit data to the ITR. Hospitals are asked to report data on the national trauma (TQIP) reporting schedule.

The decrease in timeliness from October 2014 until May 2015 is due to only timely reports being provided to the ITR during this time frame, typically from non-trauma hospitals and early reporting trauma centers.



### Uniformity

In May we sent out the fifteenth monthly quiz for the inter-rater reliability study. Seventy-three registrars completed the quiz from 55 hospitals. The percent of correct answers was 76% for the entire quiz and the average free-marginal Kappa (measure of consistency) 0.427. We plan to collect data for four months and track trends in percent of correct answers by individuals and as a group over time as well as their consistency. Other activities to improve the uniformity of data includes trauma registrar training throughout the state and at the Indiana State Department of Health.

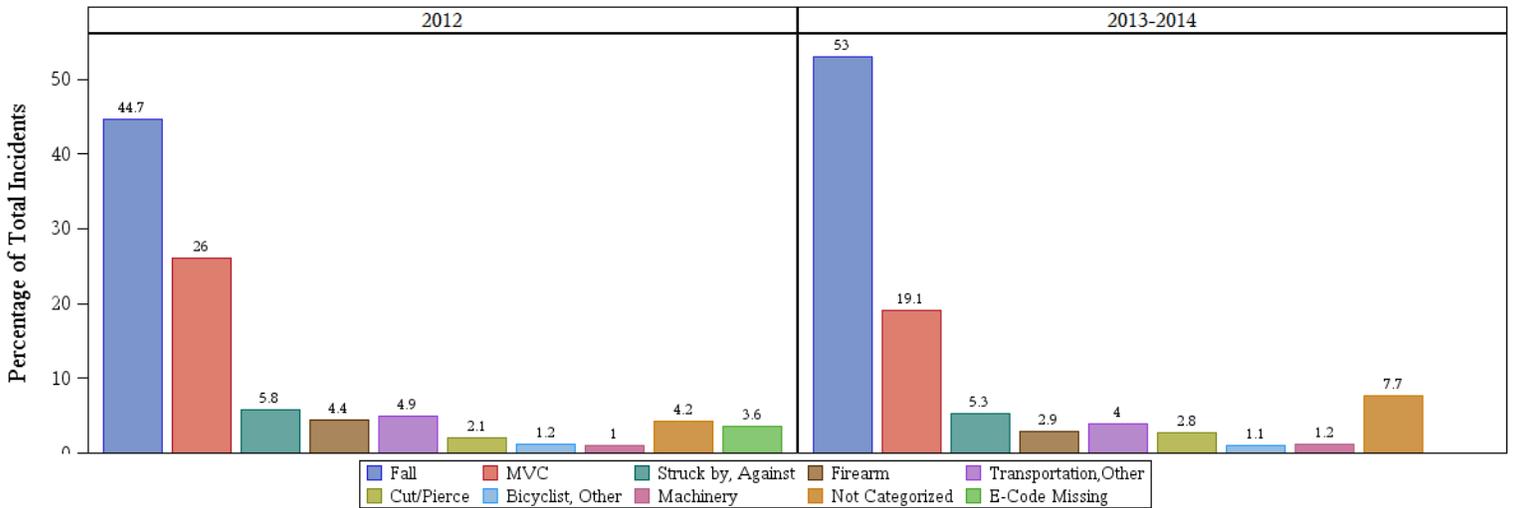


### Integration

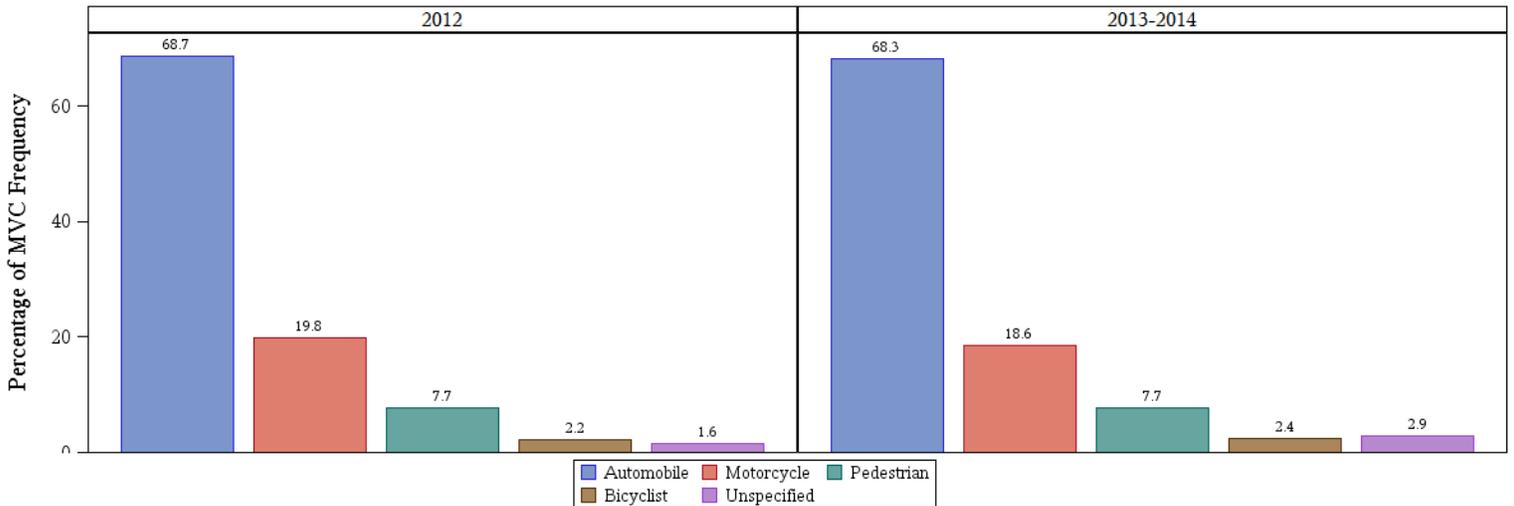
The number of linked EMS to trauma cases was 200 for Q4 2014 data. Trauma data is due on a quarterly basis. Integration for Q1 2015 data will be available in the August 2015 report.

### Accessibility

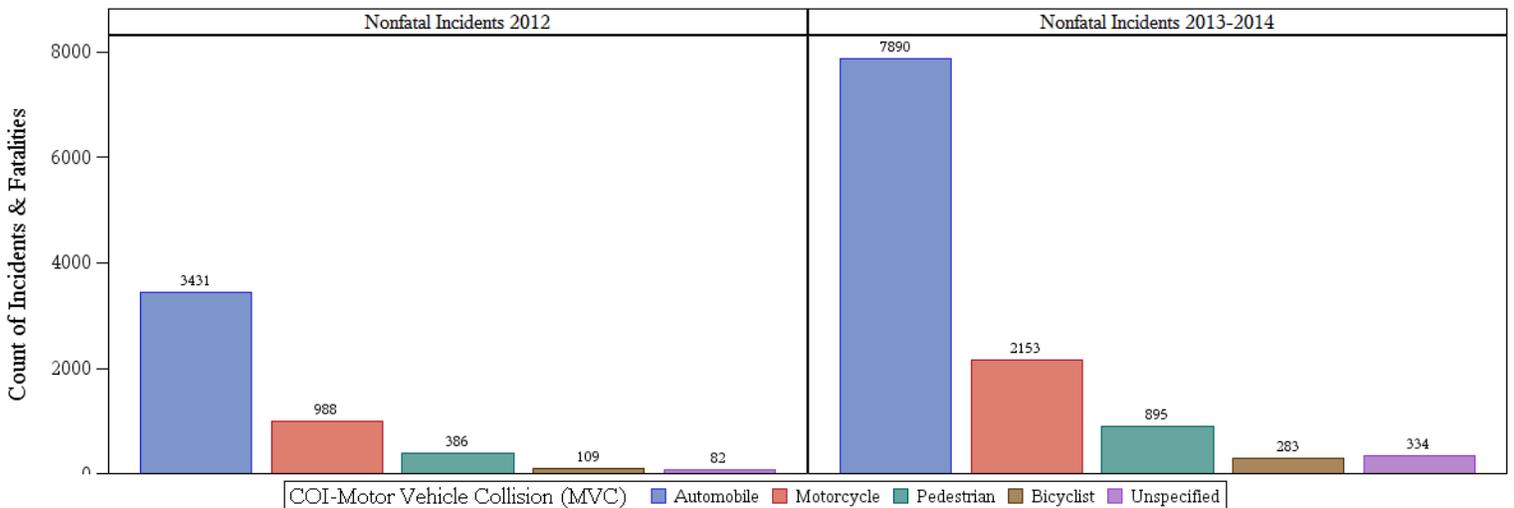
The average days to delivery of aggregate data was 10 days. No identifiable requests were submitted.



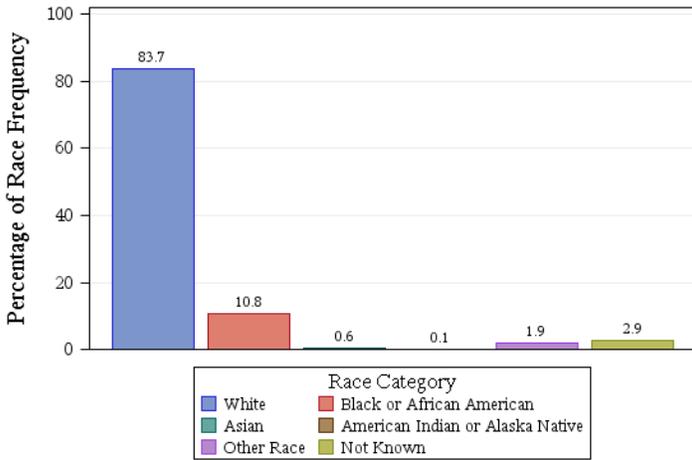
<1% of COI: Pedestrian (Other), Natural/Environmental, Overexertion, Fire/Burn, and Bites/Stings  
**COI-Motor Vehicle Collision (MVC)**



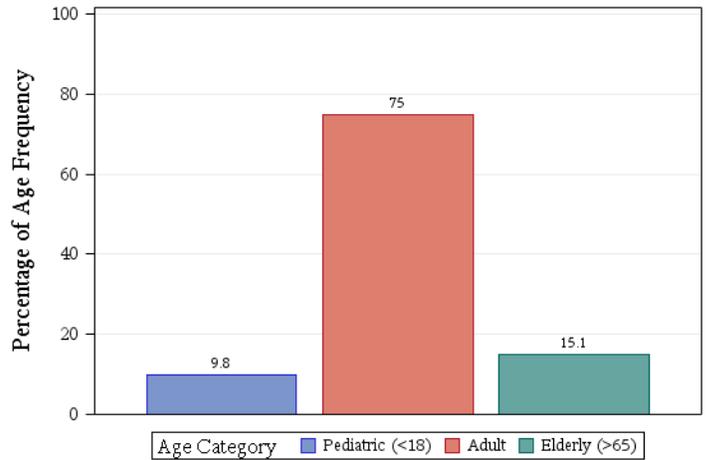
**COI-MVC Nonfatal Incidents and Fatal Incidents**



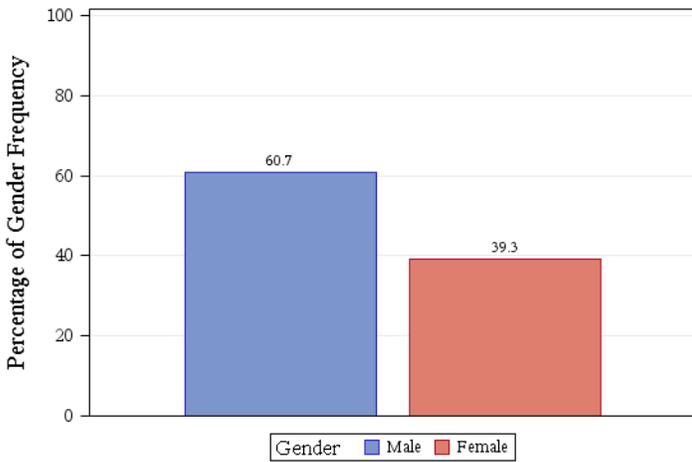
### Race



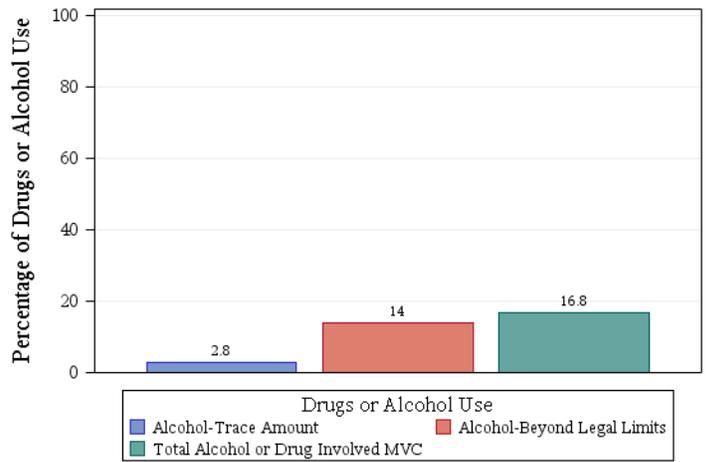
### Age



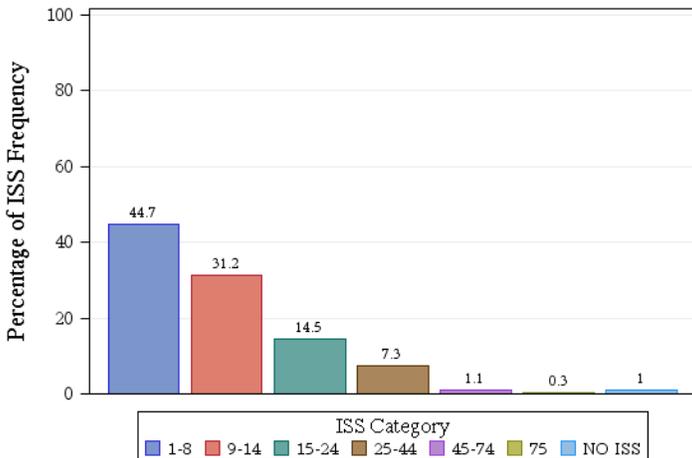
### Gender



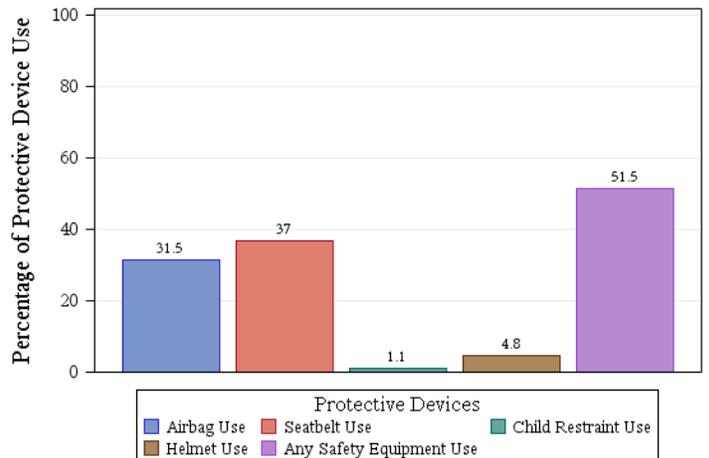
### Drug & Alcohol Use



### Injury Severity Score

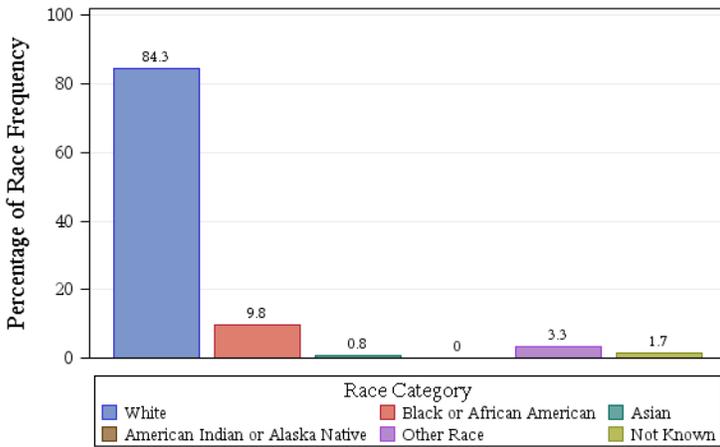


### Protective Devices

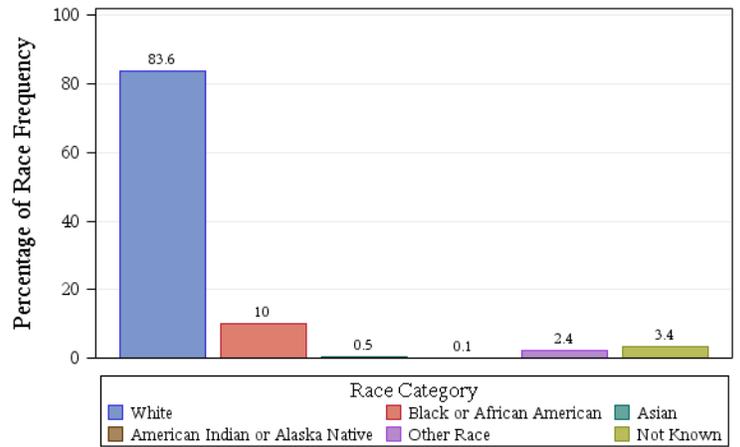


Injury Severity Score (ISS) is a measure of how bad the injury is. Scores over 15 are considered major trauma. A score of 75 is considered not survivable.

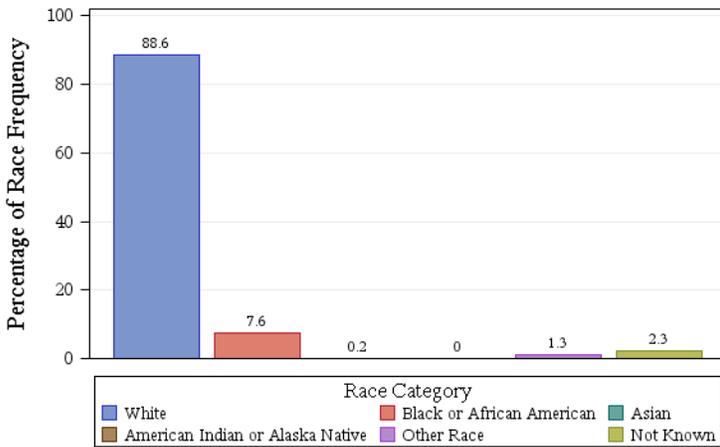
2012



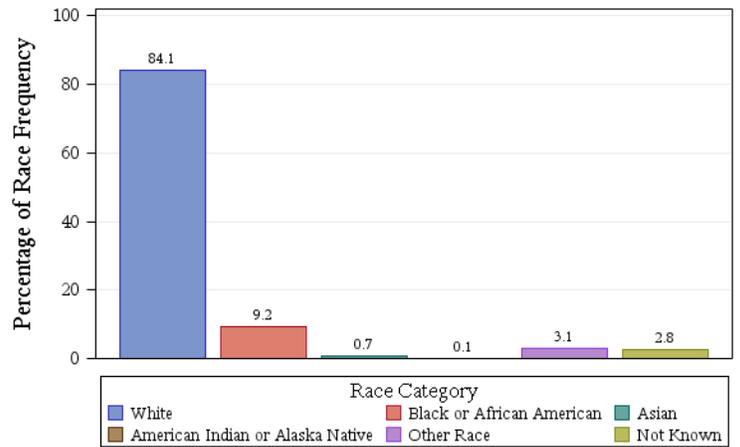
2013-2014



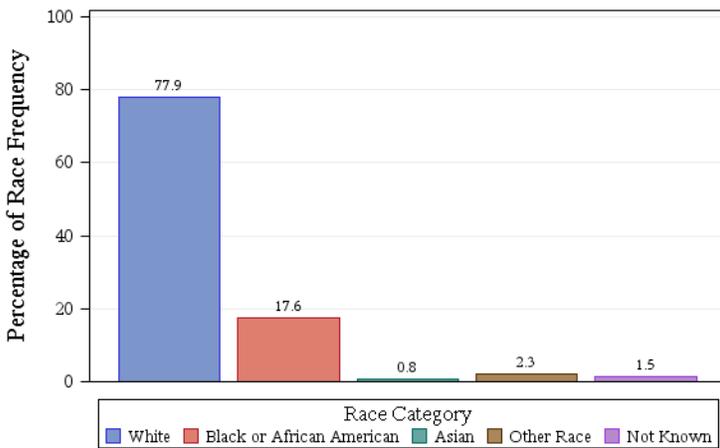
Motorcycle  
2012-2014



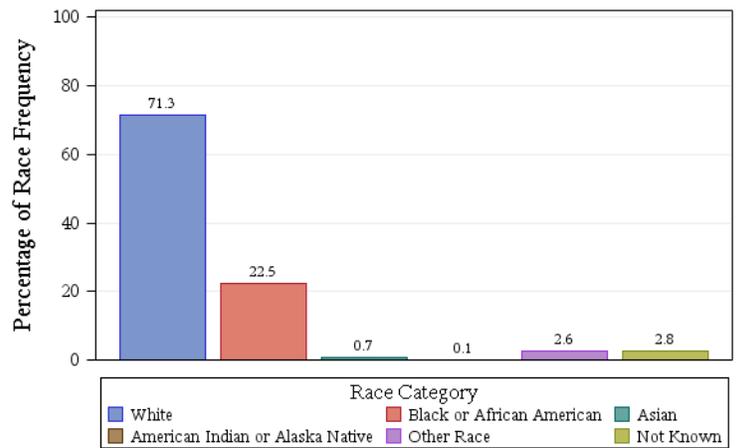
Automobile  
2012-2014



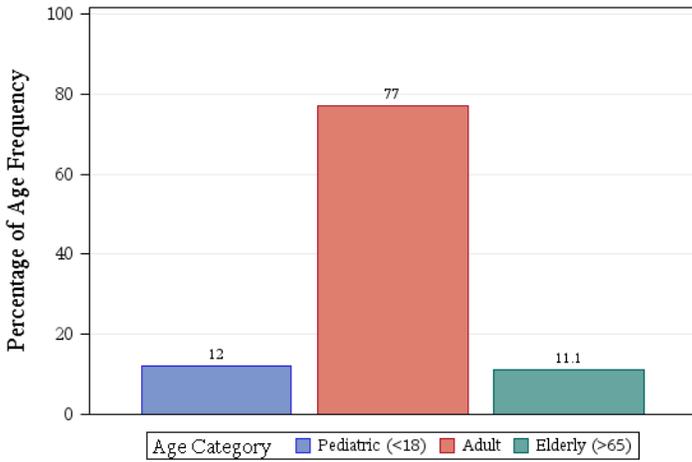
Bicyclist  
2012-2014



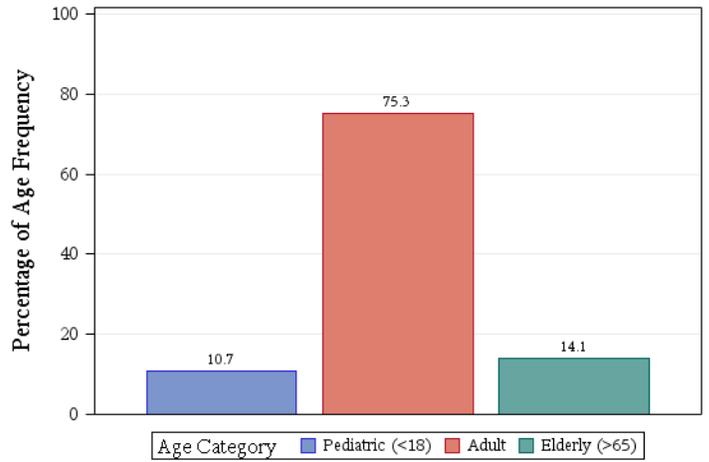
Pedestrian  
2012-2014



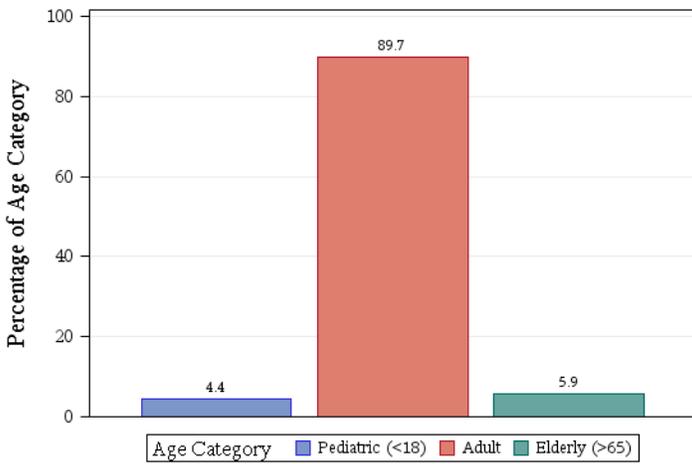
**2012**



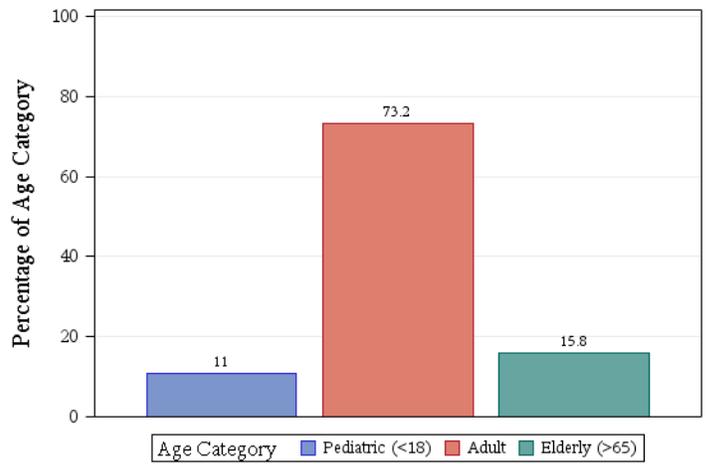
**2013-2014**



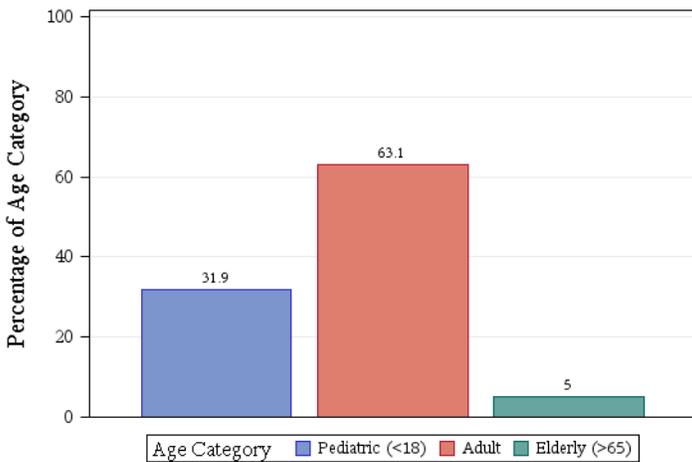
**Motorcycle  
2012-2014**



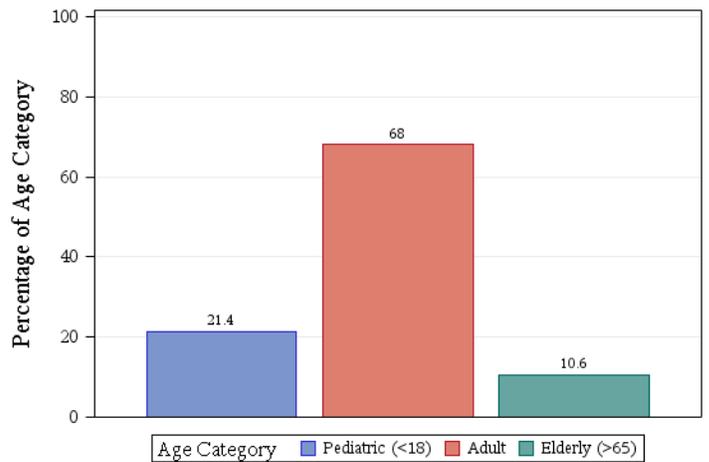
**Automobile  
2012-2014**



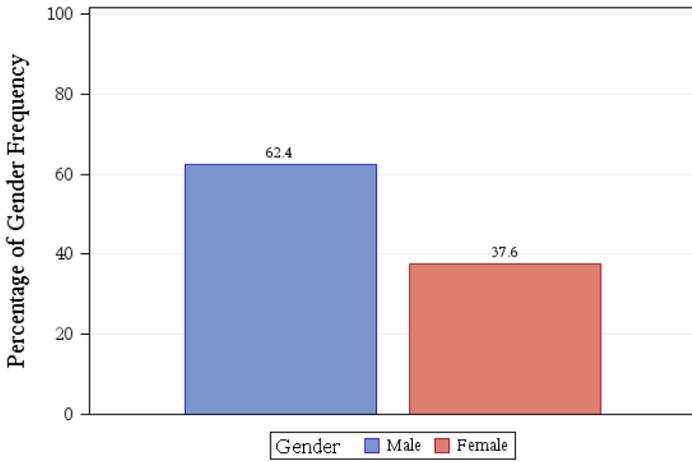
**Bicyclist  
2012-2014**



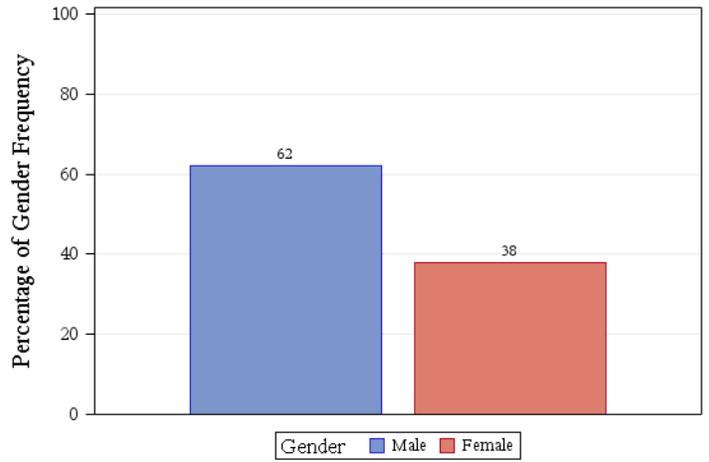
**Pedestrian  
2012-2014**



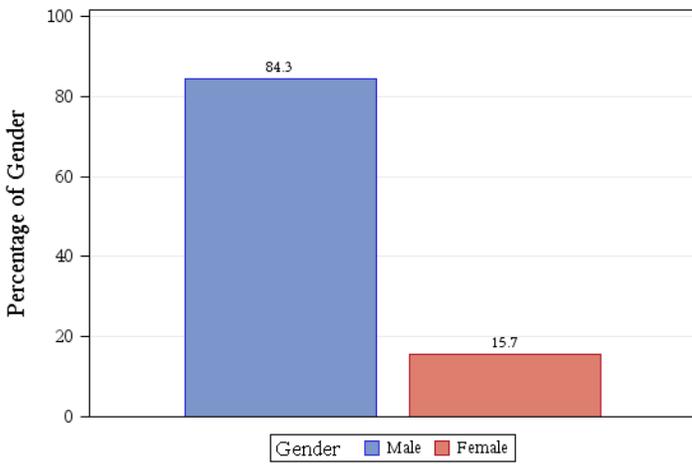
2012



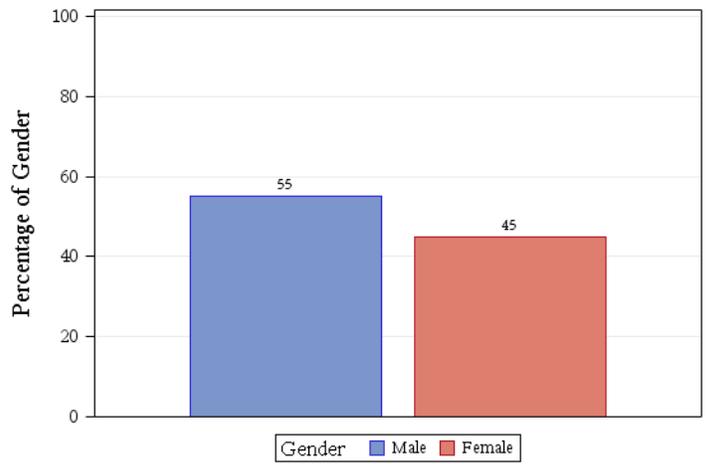
2013-2014



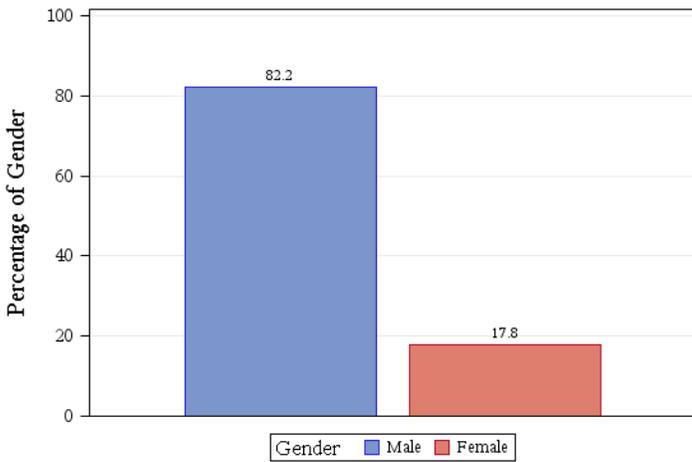
Motorcycle  
2012-2014



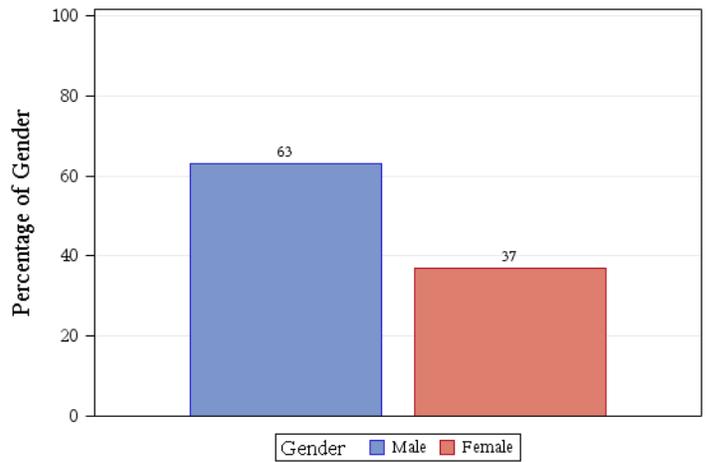
Automobile  
2012-2014



Bicyclist  
2012-2014

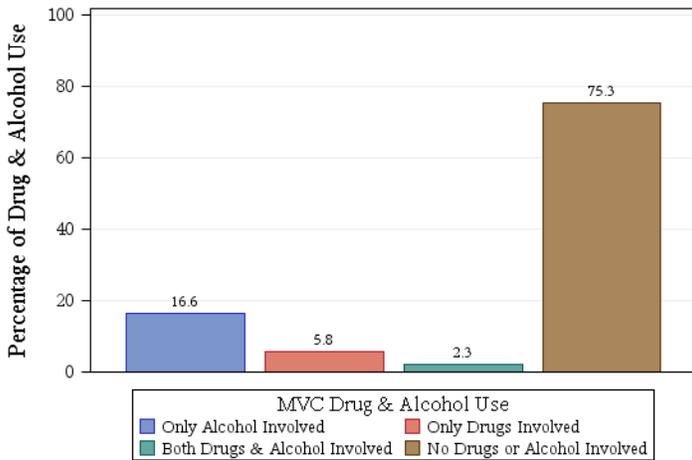


Pedestrian  
2012-2014

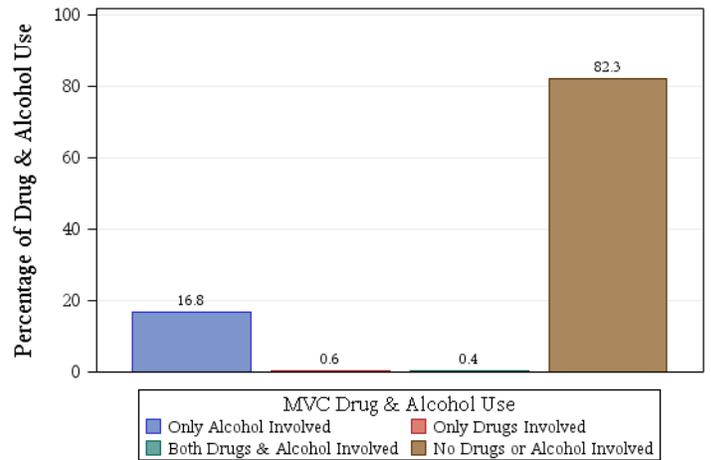


**January 2012 to May 2015 16986 Incidents**  
**Drug & Alcohol Use- Motor Vehicle Collision**

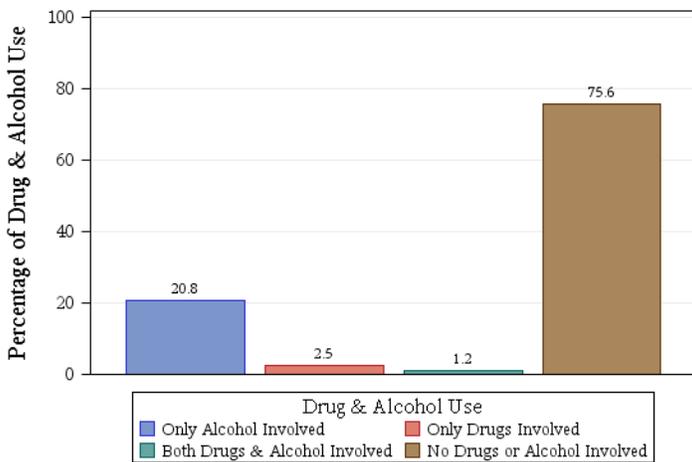
**2012**



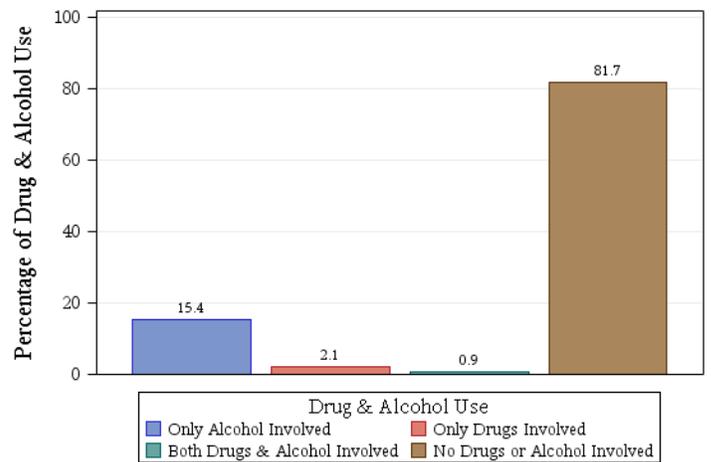
**2013-2014**



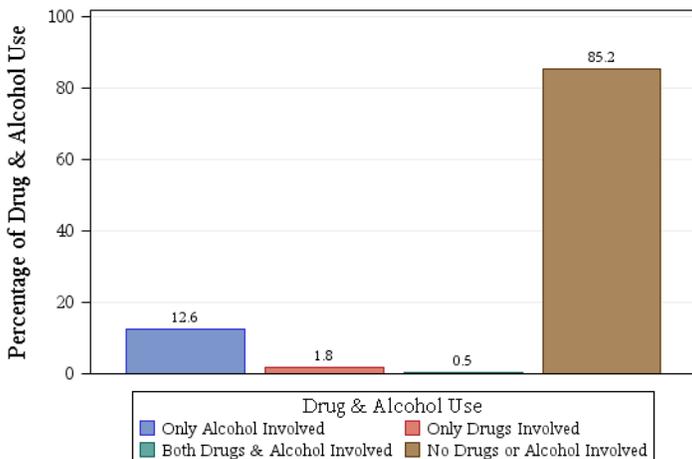
**Motorcycle**  
**2012-2014**



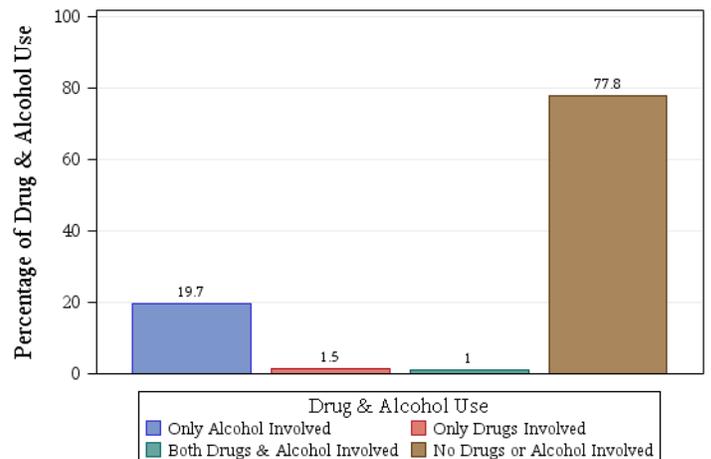
**Automobile**  
**2012-2014**



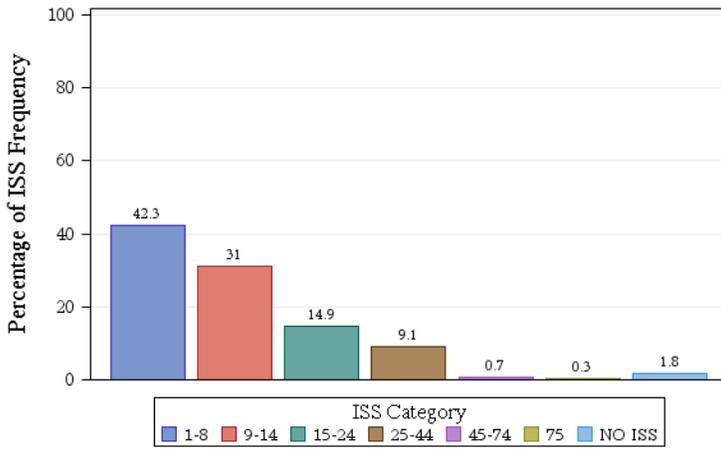
**Bicyclist**  
**2012-2014**



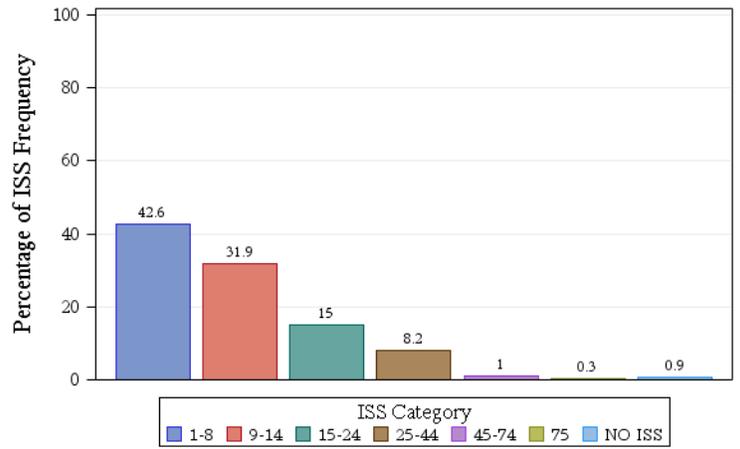
**Pedestrian**  
**2012-2014**



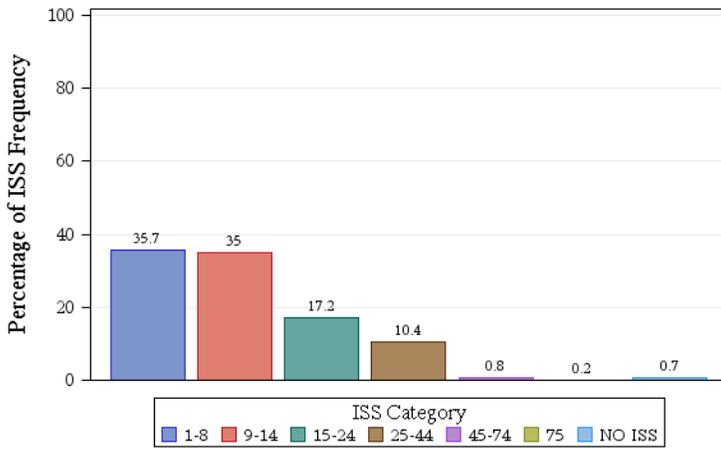
**2012**



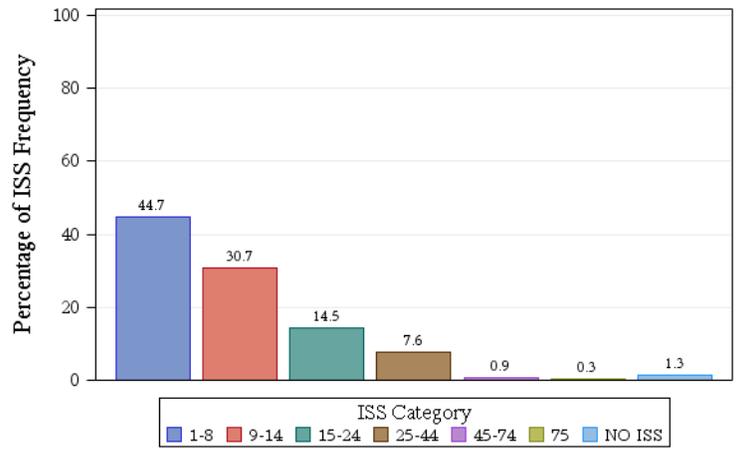
**2013-2014**



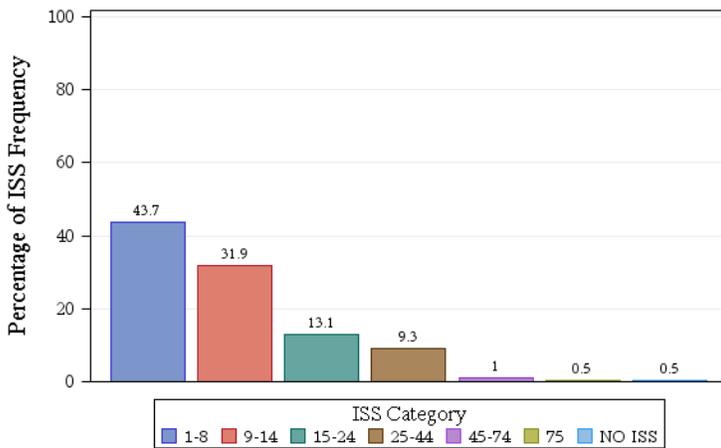
**Motorcycle  
2012-2014**



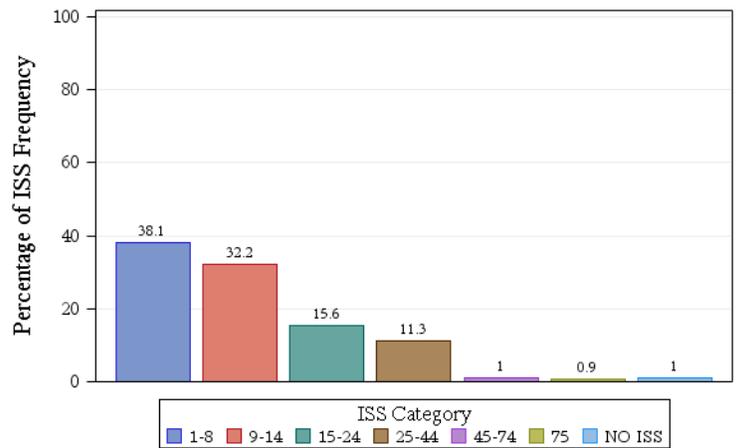
**Automobile  
2012-2014**



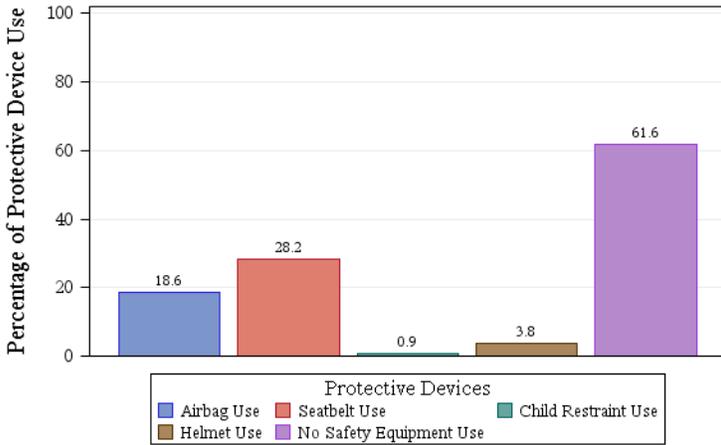
**Bicyclist  
2012-2014**



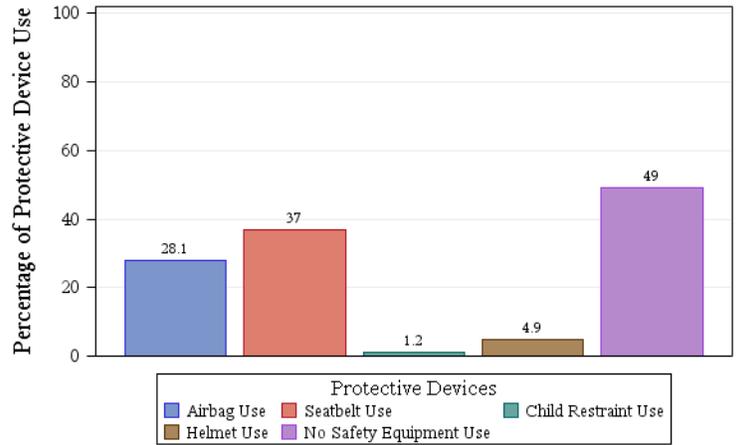
**Pedestrian  
2012-2014**



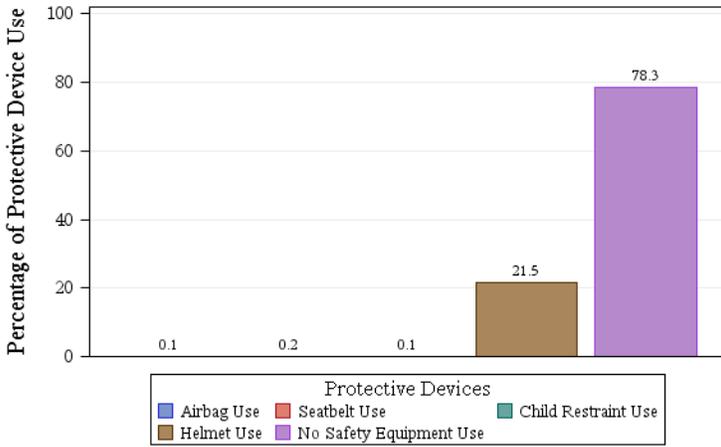
**2012**



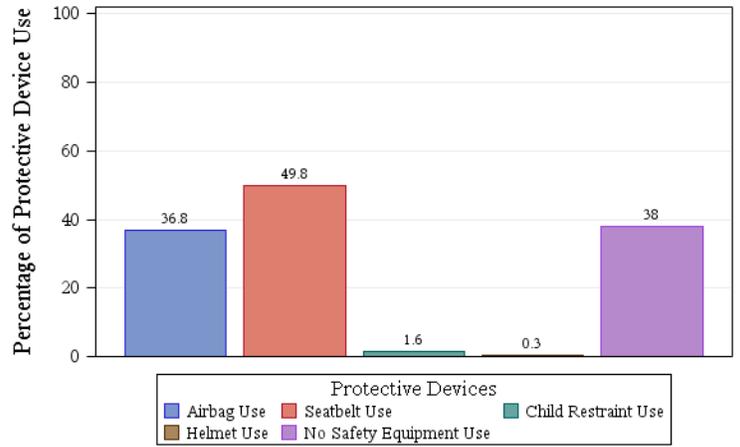
**2013-2014**



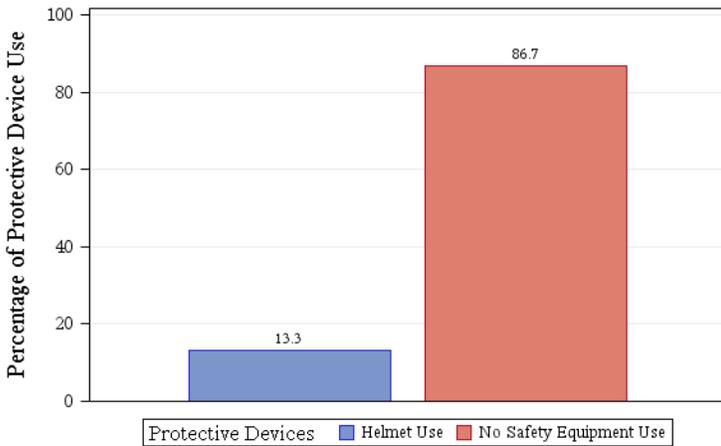
**Motorcycle  
2012-2014**



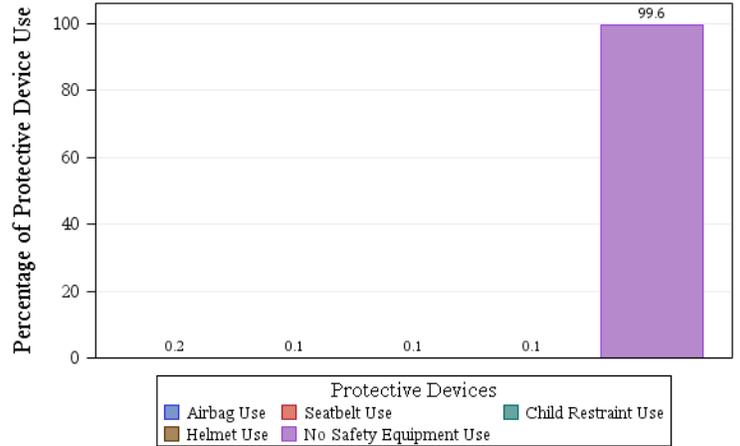
**Automobile  
2012-2014**



**Bicyclist  
2012-2014**



**Pedestrian  
2012-2014**



### Indiana Trauma Registry, June 1, 2014 - May 31, 2015 MVC involving Drugs or Alcohol By Public Health Preparedness Districts

