**OBJECTIVE & GUIDELINES:**

* Meet the American College of Surgeons recommendation for trauma registry data validation to ensure data entry reliability and accuracy.
* A monthly audit will be performed on 5-10% of all trauma patient records to determine abstracting/data entry accuracy.

**Process by which charts/abstracts are to be reviewed**:

* A random selection of 5-10% of patients for the prior month will be made by the Trauma Registrar
* A report based on the listed data points will be compared to the findings of the Trauma PI RN or Trauma Program Manager
* The total number of data points (11-12 depending on scene or hospital referrals) will be multiplied by the total number of patients to be reviewed (for example, 11 data points x 4 patients = 44 possible data points)
* The total number of correct data points will be divided by the number of possible to identify our % accuracy (for example, 40 divided by 44 would = 91% accuracy)
* This % each month will be tracked and monitored to ensure we are achieving greater than or equal to 90% accuracy each month

**Registry data points to be re-ABStracted:**

**(11- 12 DATA POINTS RANDOMLY CHOSEN FOR REVIEW)**

* MRN
* Name
* Date Of Birth
* Race(Text)
* Sex
* Injury Date
* Injury Time
* Injury E-Code
* E849 Code
* City of Injury(text)
* Safety Equipment
* Work Related?
* Industry
* Occupation
* Arrival Mode
* Pre-Hospital EMS Agency
* ED Stay
* ED Date of Arrival
* ED Time of Arrival
	+ Vitals
	+ SBP
	+ HR
	+ RR
	+ O2 SATS
	+ GCS
	+ TEMP
	+ TEMP SOURCE (TEXT)
	+ ED Disposition (TEXT)
* IP Discharge Disposition
* Diagnoses
* AIS 2005 code/text
* ICD-9 code/text