

On April 7th, Ramzi Nimry (Trauma System PI Manager) attended/was a vendor at the Indiana Public Health Week at IU Memorial Union in Bloomington.

On April 12th, Ramzi Nimry (Trauma System PI Manager) trained Monroe Hospital in Bloomington, IN on the trauma registry.

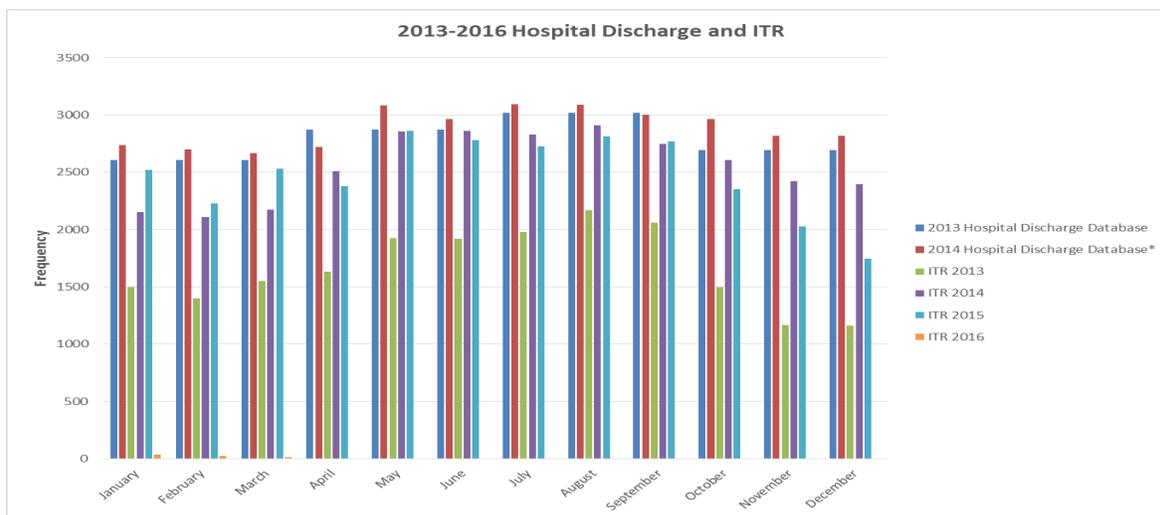
On April 15th, Katie Hokanson (Director), Camry Hess (Database Analyst) and Ramzi Nimry (Trauma System PI Manager) attended the Indiana State Trauma Care Committee (ISTCC) meeting and the Indiana Trauma Network (ITN).

On April 28th, Camry Hess (Database Analyst) and Ramzi Nimry (Trauma System PI Manager) attend the District 10 Trauma Regional Advisory Council (TRAC) at St. Mary's Medical Center in Evansville, IN.

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, integration and accessibility. This report uses data within the ITR, with an emphasis on motor vehicle collisions (MVC).

Completeness

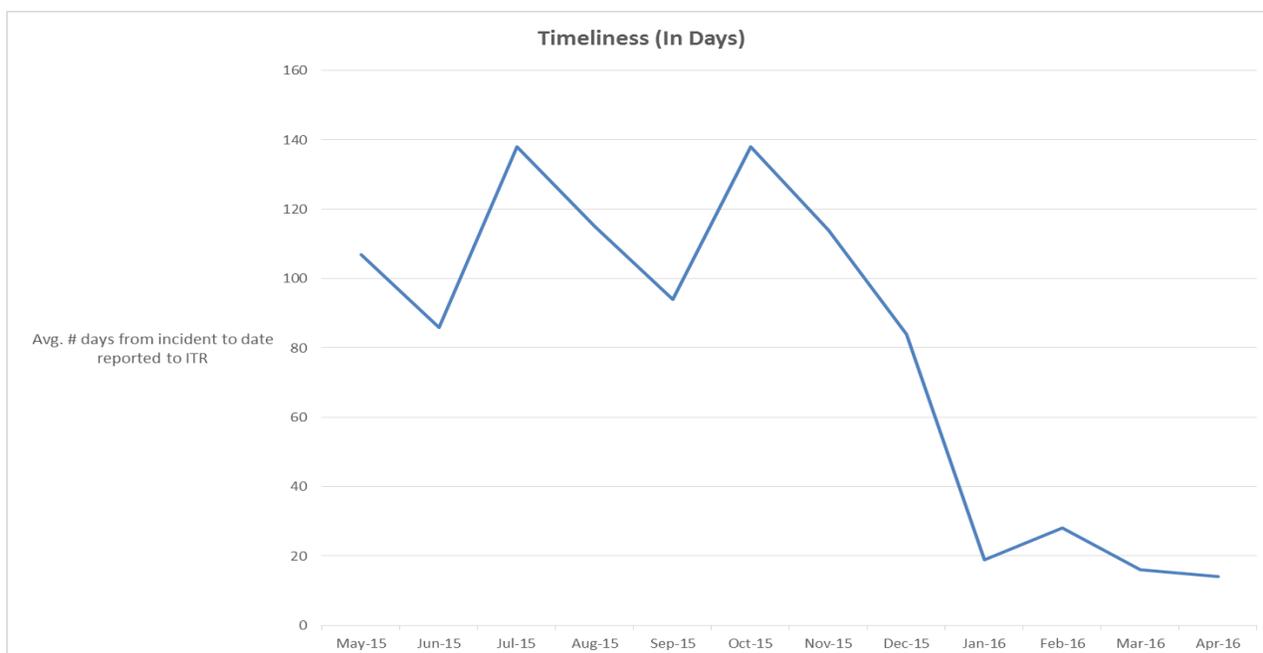
The Hospital Discharge database, also maintained by the ISDH, contains all records of patients cared for in Indiana hospitals. We compared patient records from the ITR with the Hospital Discharge database to know how complete is the ITR's data.



Timeliness

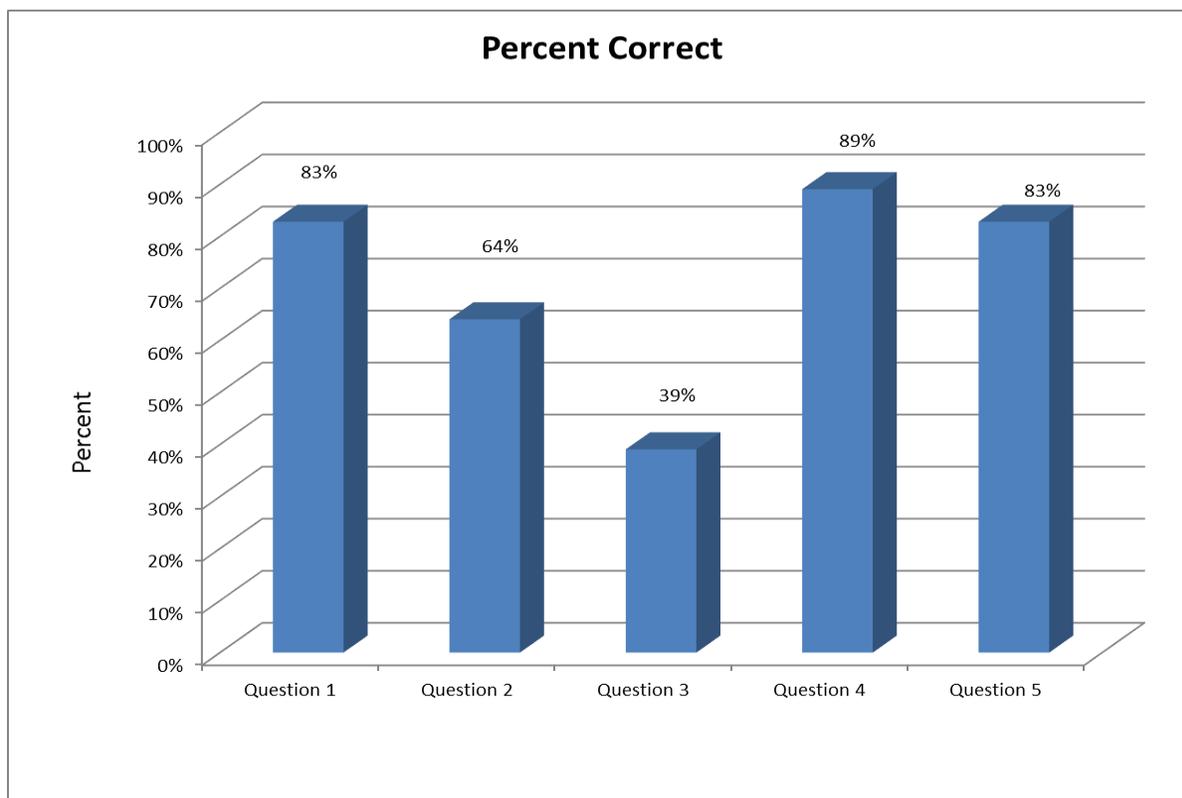
Timeliness increases as facilities wait until the data submission deadline to submit data to the ITR. Hospitals are asked to report data on the national trauma (TQIP) reporting schedule.

The decrease in timeliness from December 2015 until April 2016 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 December we sent out the twenty-fourth monthly quiz for the inter-rater reliability study. Sixty-four registrars completed the quiz from 45 hospitals. The percent of correct answers was 72% for the entire quiz and the average free-marginal Kappa (measure of consistency) 0.47. 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

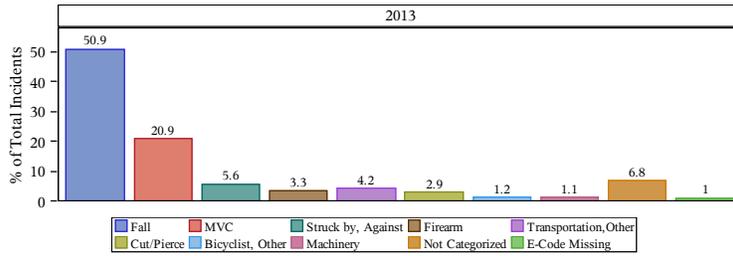
The number of linked EMS to trauma cases was 500 for Q3 2015 data. Trauma data is due on a quarterly basis.

Accessibility

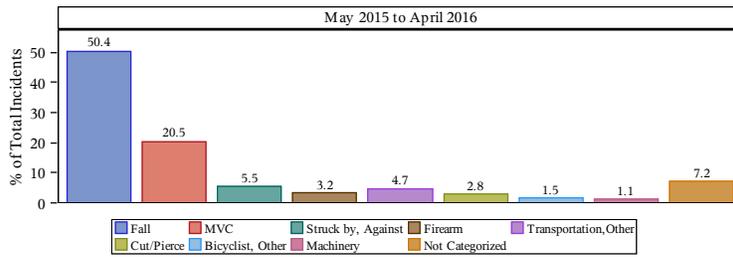
The average time to complete data requests was 0.5 days for identifiable requests (2 requests). There were no aggregate or self-report requests during April.

May 2015 to April 2016 **25457 Incidents**
January 2013 to December 2013 **23623 Incidents**
Cause of Injury (COI)

Cause of Injury (COI)

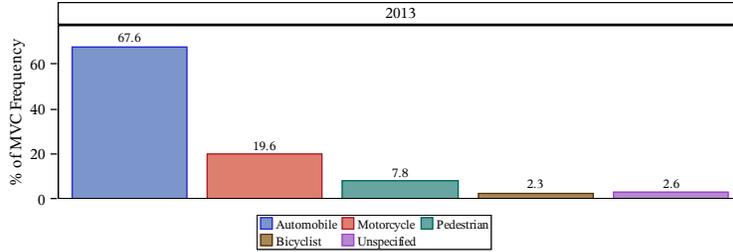


<1% of COI: Pedestrian (Other), Natural/Environmental,
 Overexertion, Fire/Burn, and Bites/Stings
 Cause of Injury (COI)

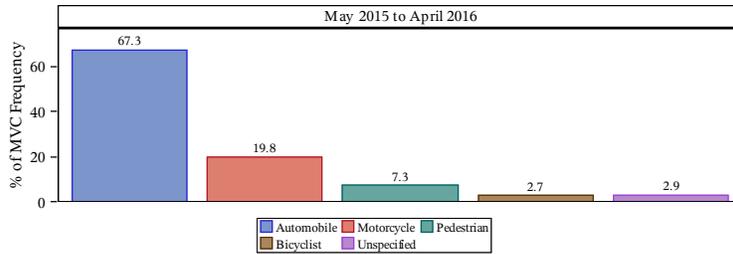


<1% of COI: Pedestrian (Other), Natural/Environmental,
 Overexertion, Fire/Burn, and Bites/Stings

COI-Motor Vehicle Collision (MVC)

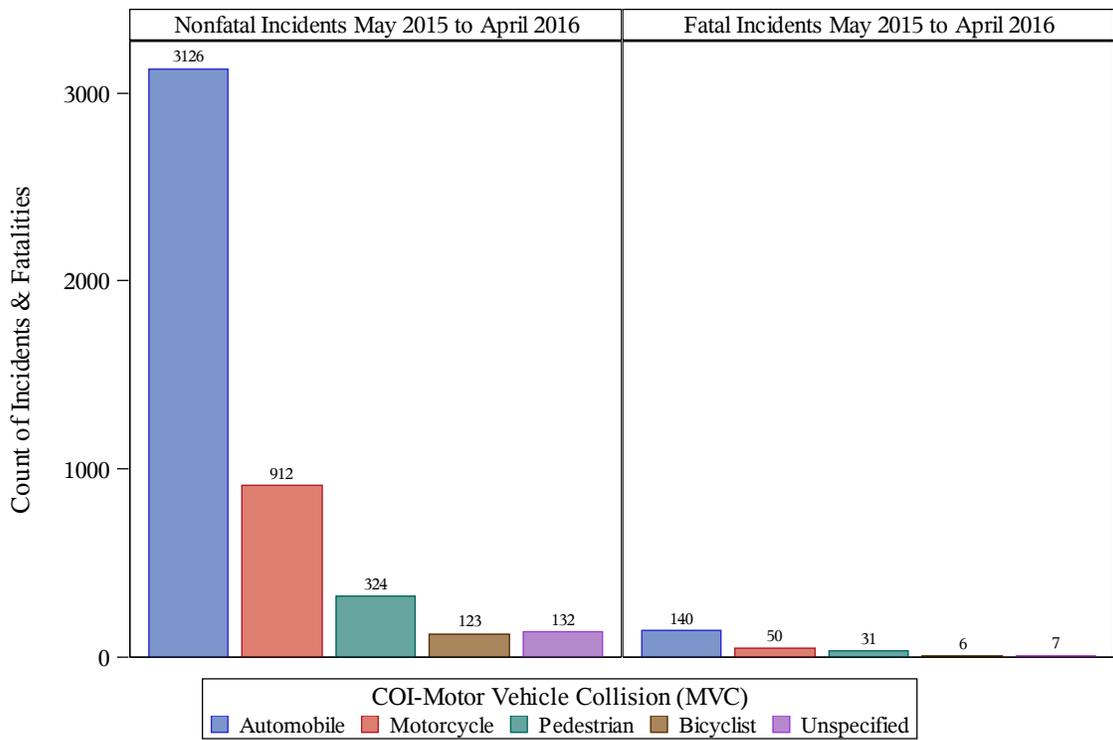
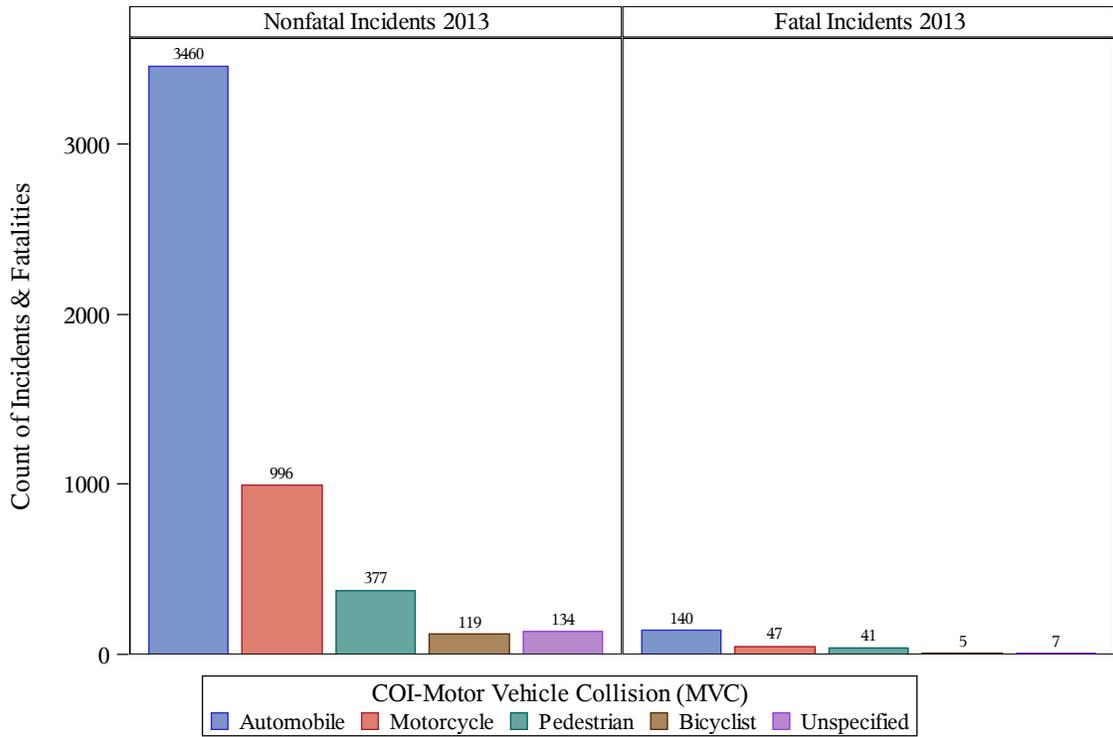


COI-Motor Vehicle Collision (MVC)



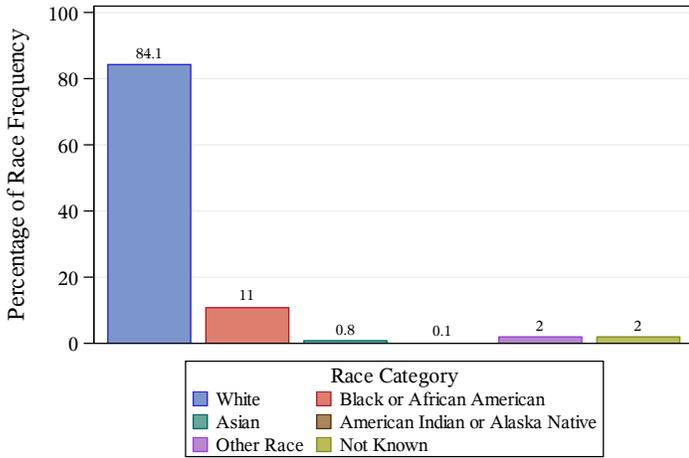
May 2015 to April 2016 **4851 Incidents**
January 2013 to December 2013 **5326 Incidents**
Motor Vehicle Collision

COI-MVC Nonfatal Incidents and Fatal Incidents

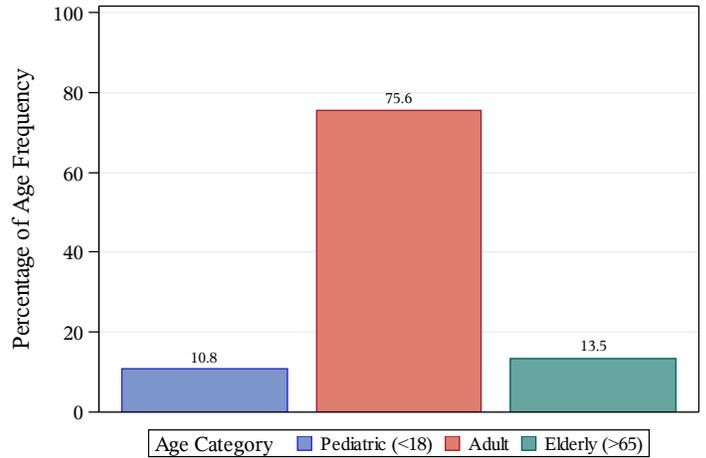


Motor Vehicle Collision

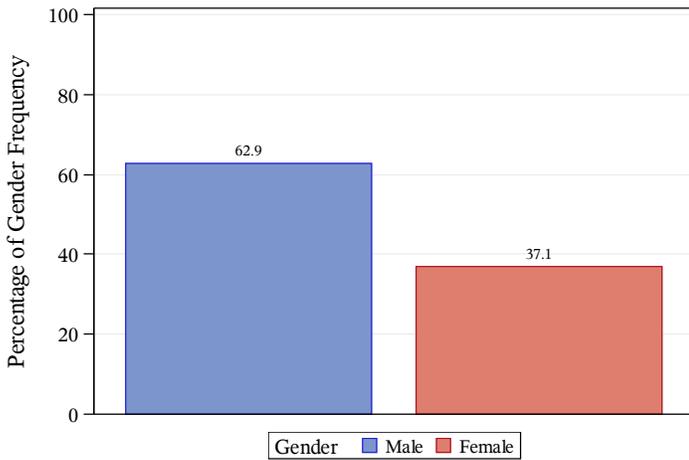
Race



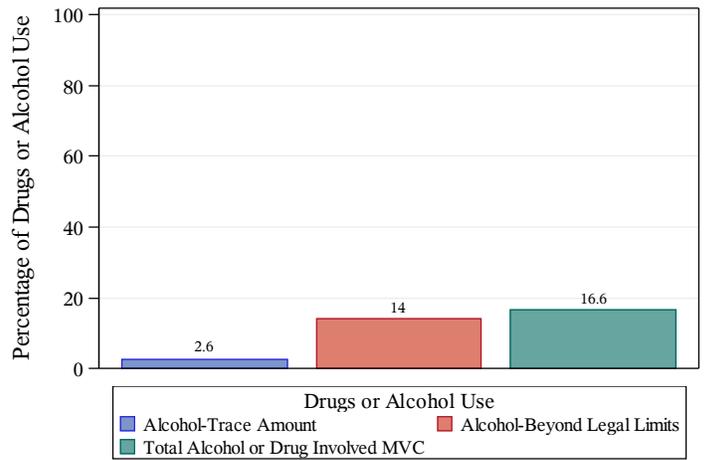
Age



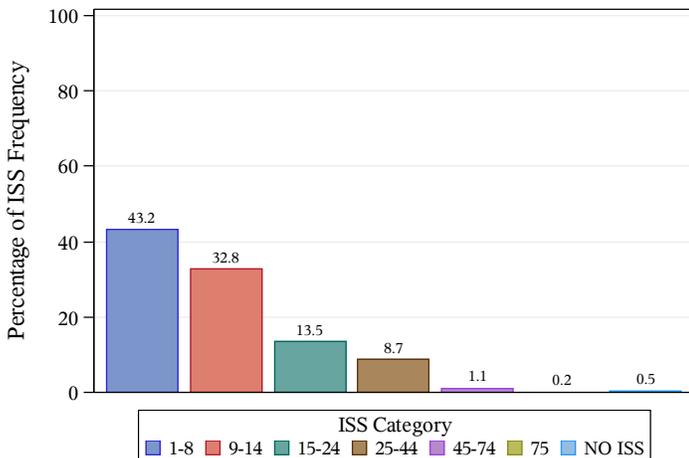
Gender



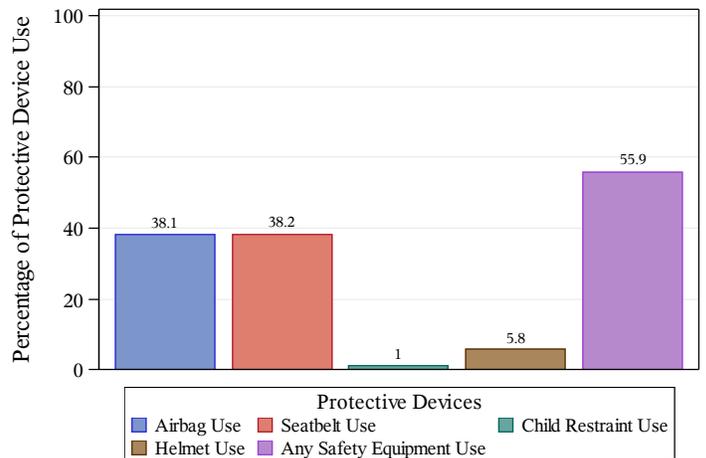
Drug & Alcohol Use



Injury Severity Score

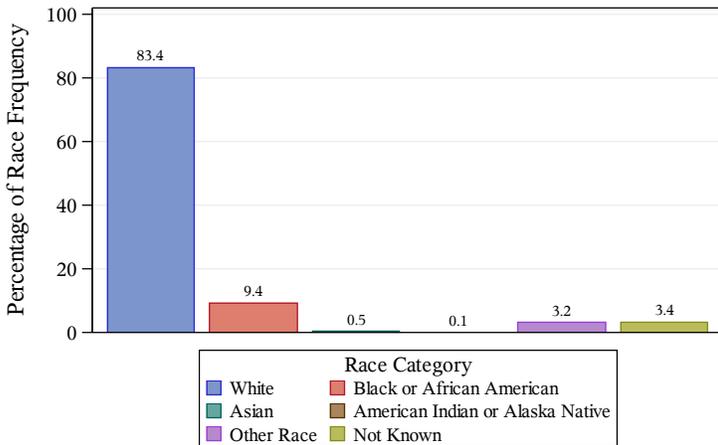


Protective Devices

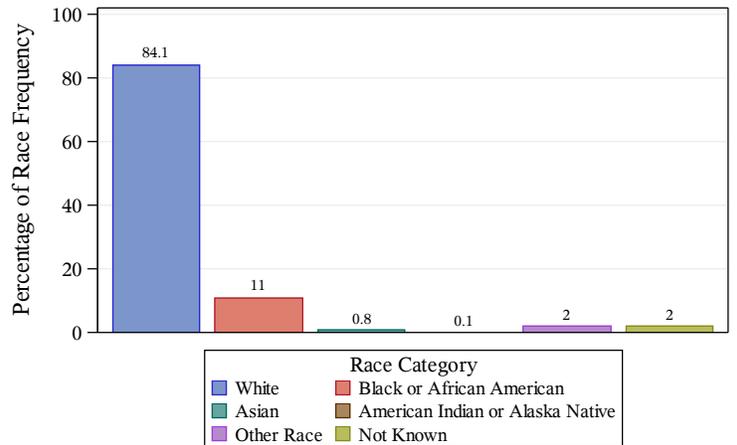


Injury Severity Score (ISS) is a measure of how bad the injury is. Scores over 15 are considered major trauma. A score of 75 is considered not survivable.

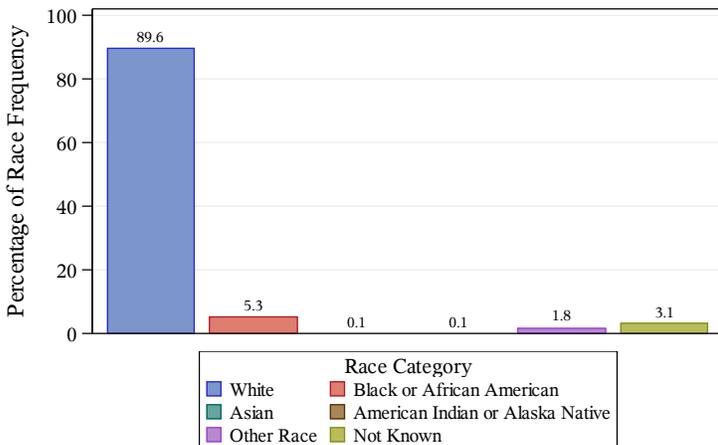
2013



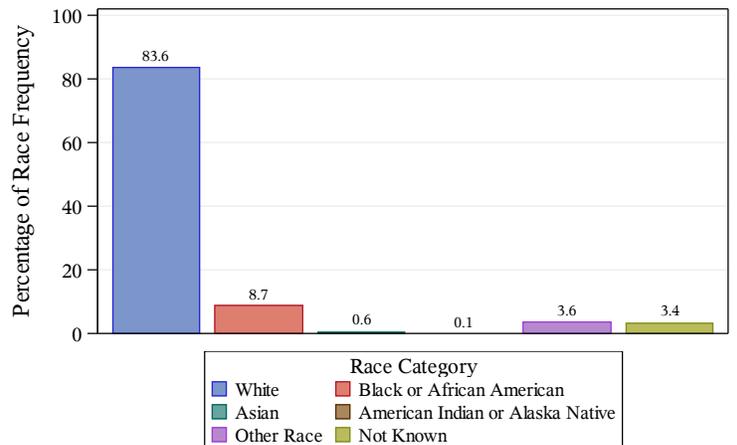
May 2015 to April 2016



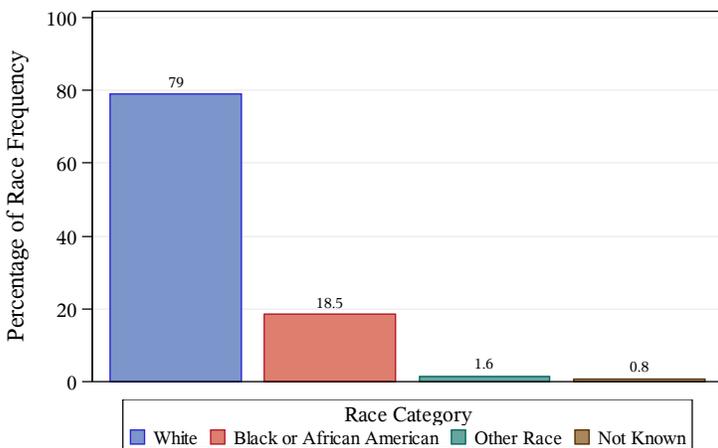
**Motorcycle
May 2015 to April 2016**



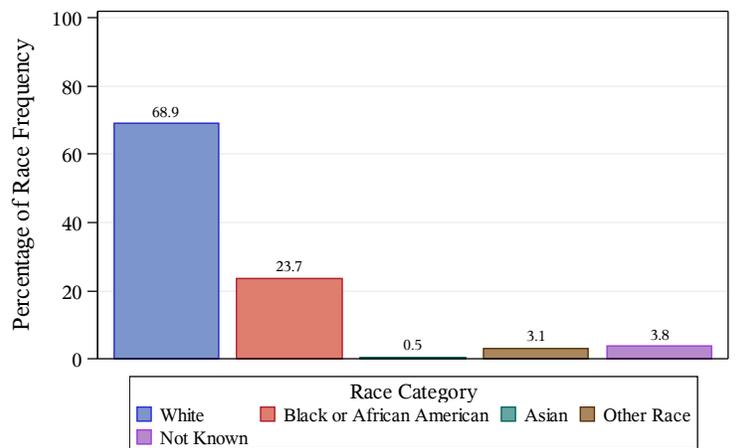
**Automobile
May 2015 to April 2016**



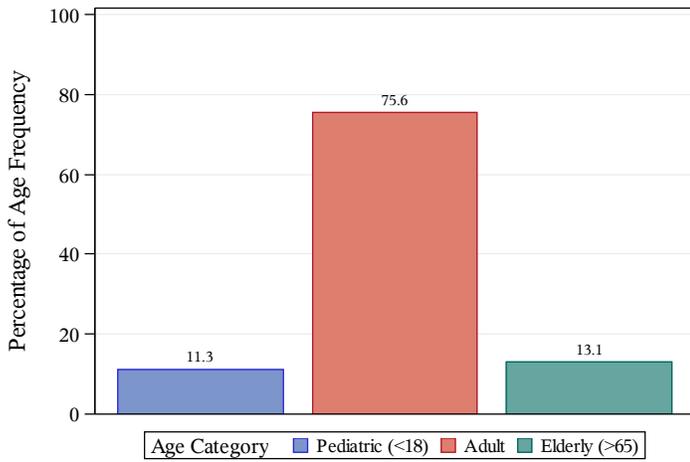
**Bicyclist
May 2015 to April 2016**



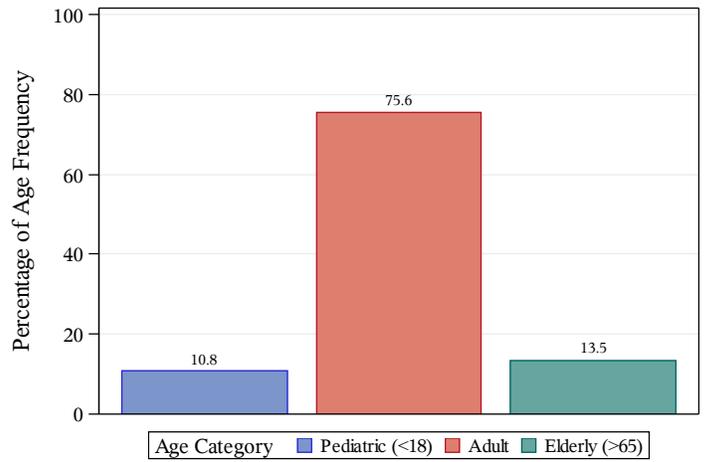
**Pedestrian
May 2015 to April 2016**



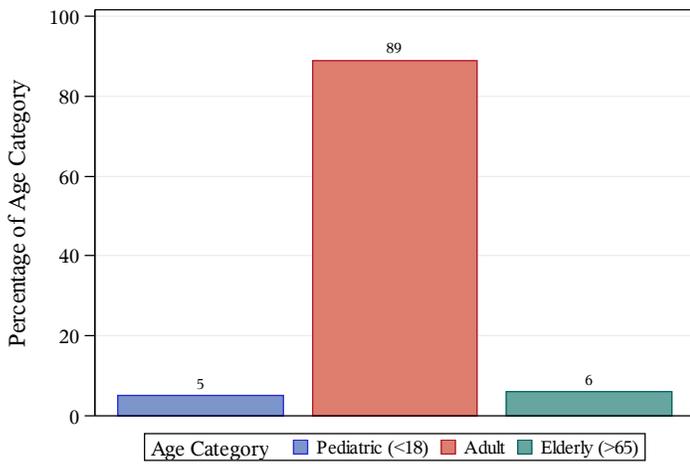
2013



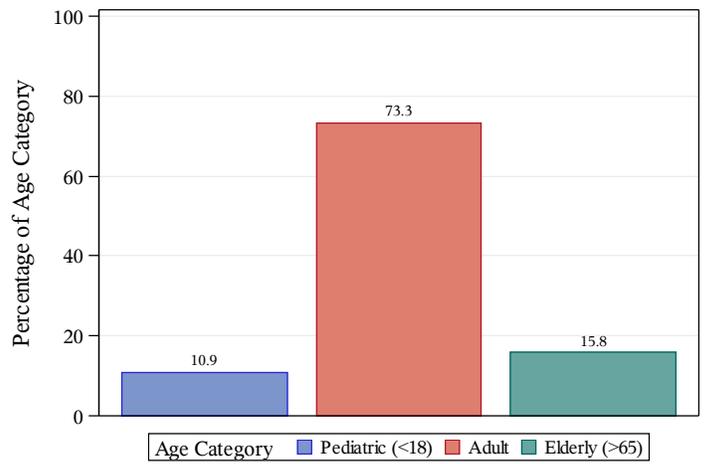
May 2015 to April 2016



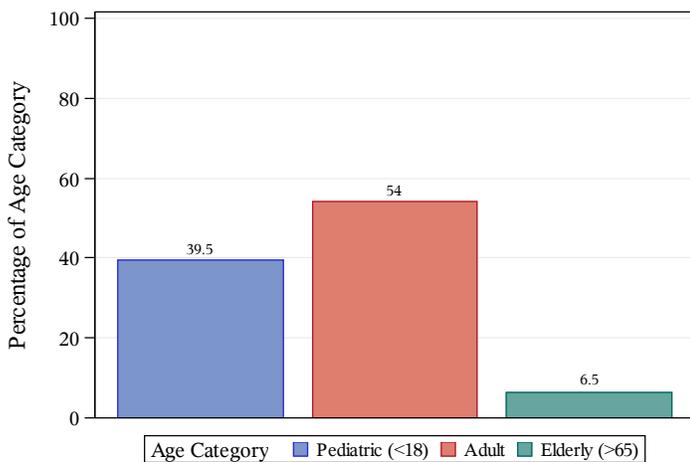
Motorcycle
 May 2015 to April 2016



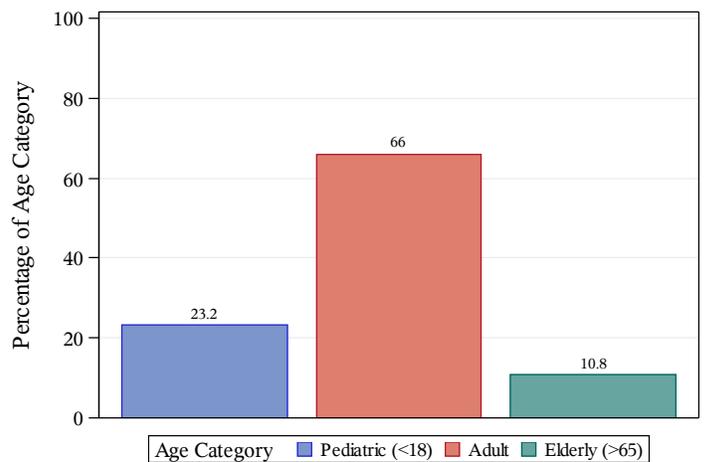
Automobile
 May 2015 to April 2016



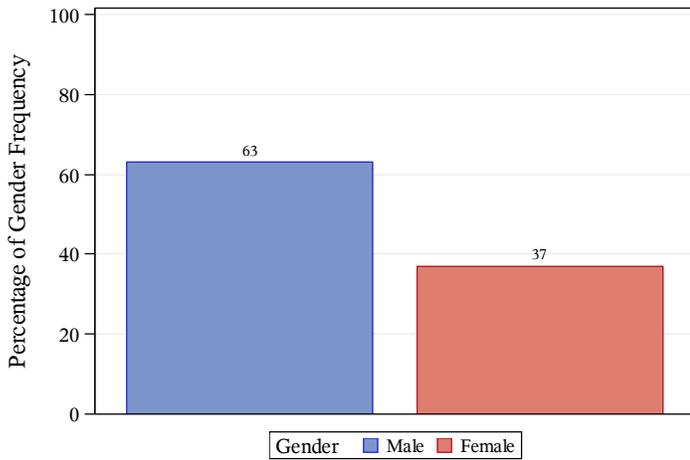
Bicyclist
 May 2015 to April 2016



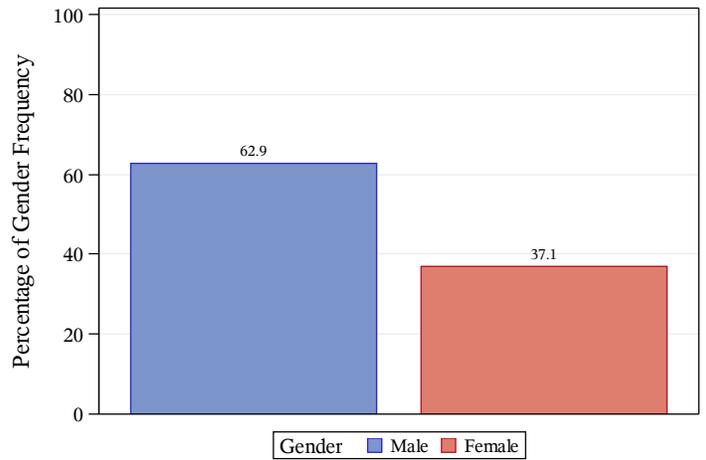
Pedestrian
 May 2015 to April 2016



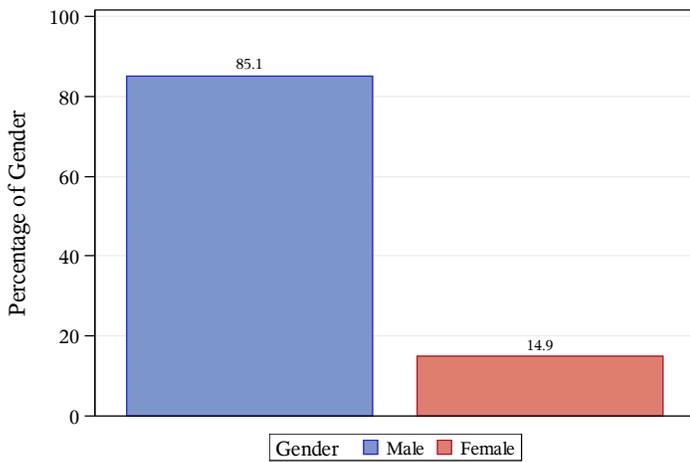
2013



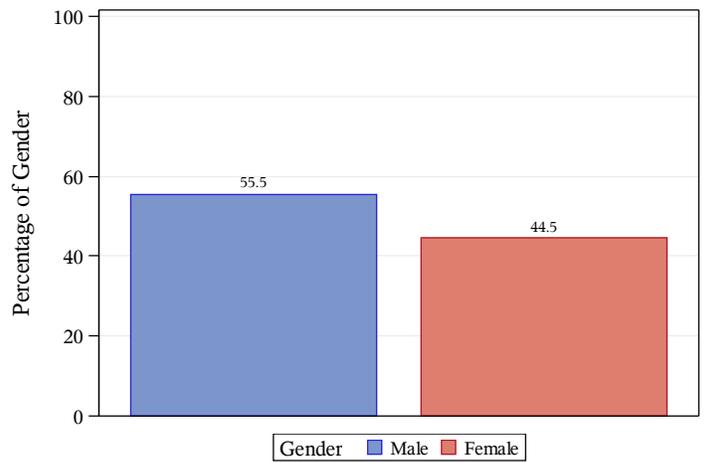
May 2015 to April 2016



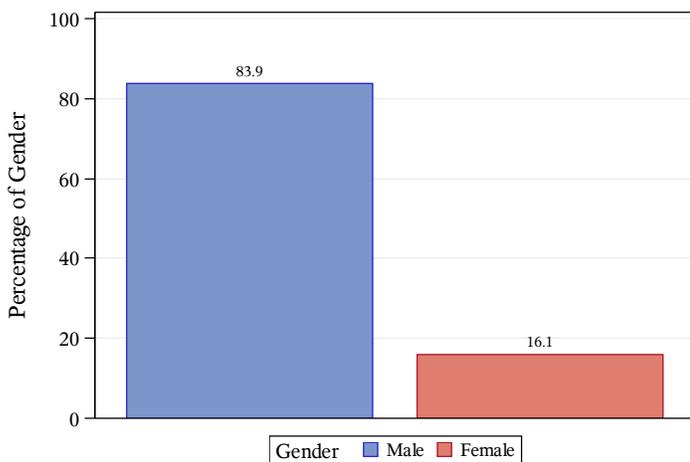
Motorcycle
May 2015 to April 2016



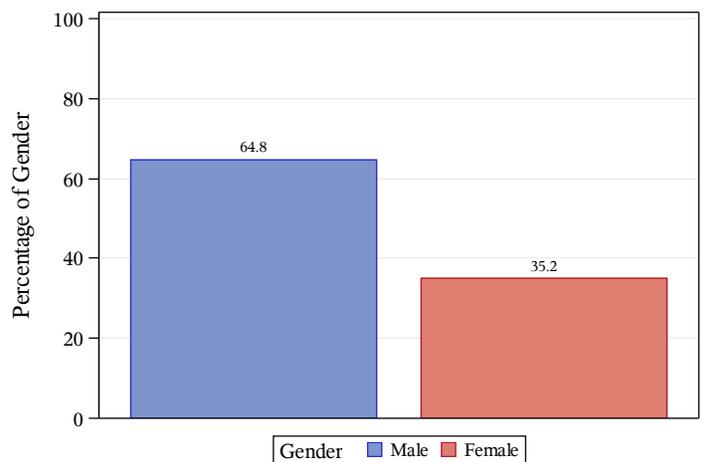
Automobile
May 2015 to April 2016



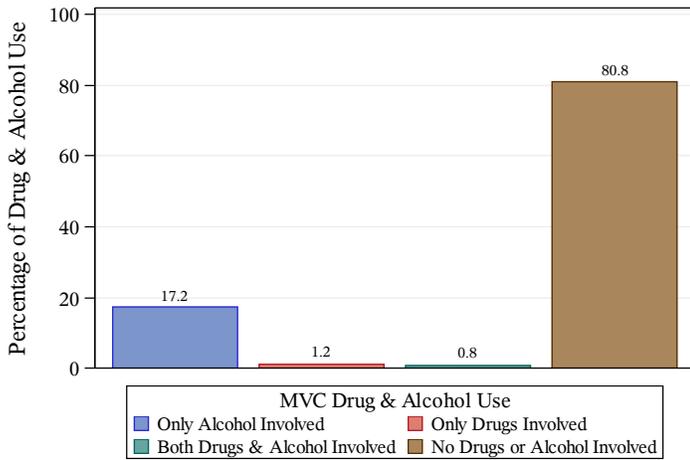
Bicyclist
May 2015 to April 2016



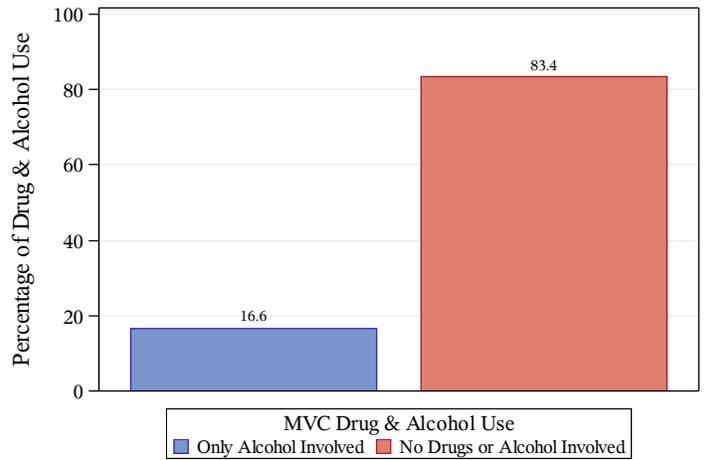
Pedestrian
May 2015 to April 2016



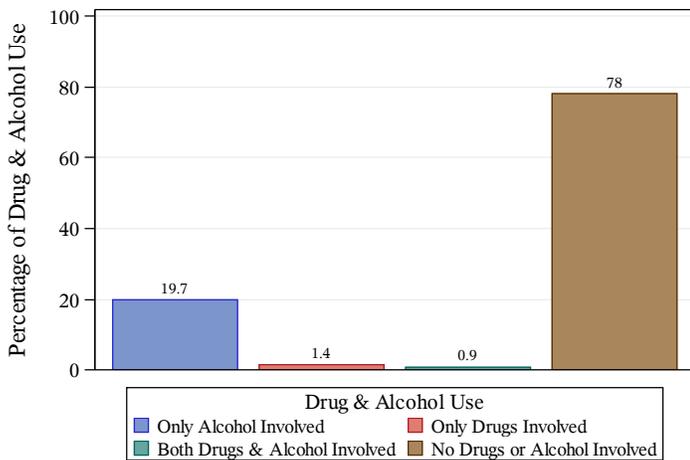
2013



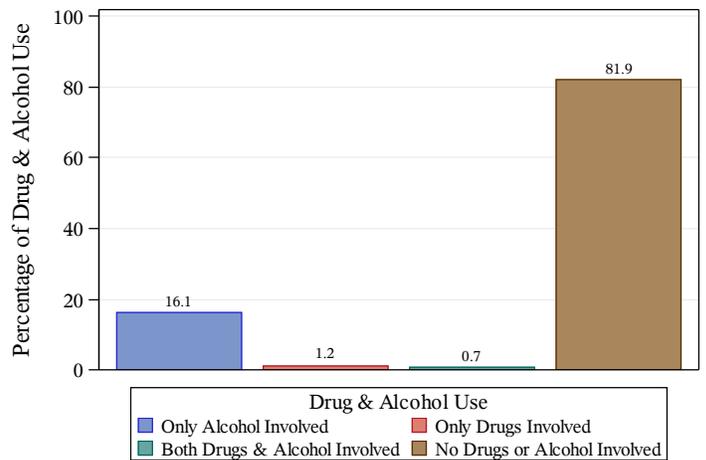
May 2015 to April 2016



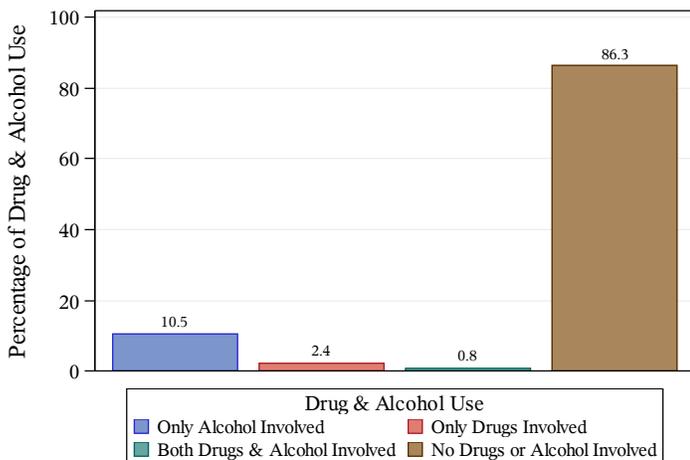
Motorcycle
 May 2015 to April 2016



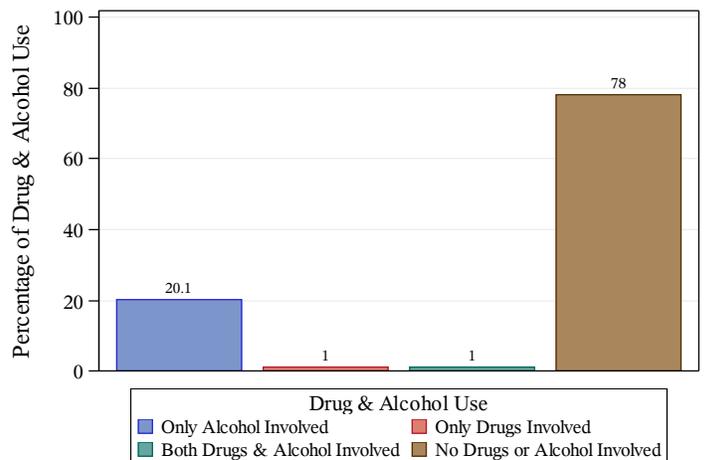
Automobile
 May 2015 to April 2016



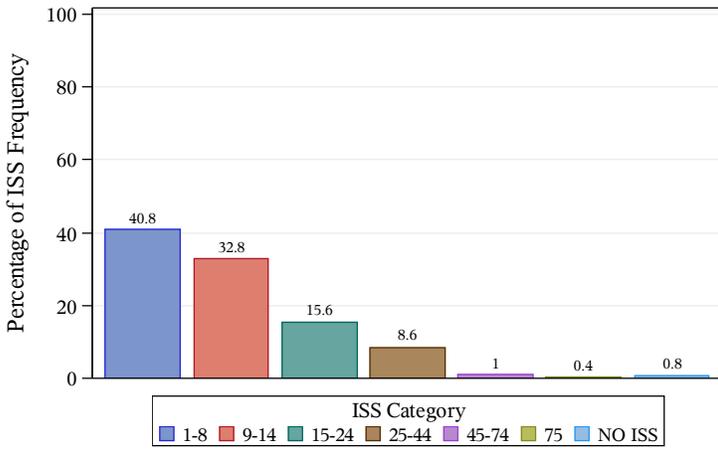
Bicyclist
 May 2015 to April 2016



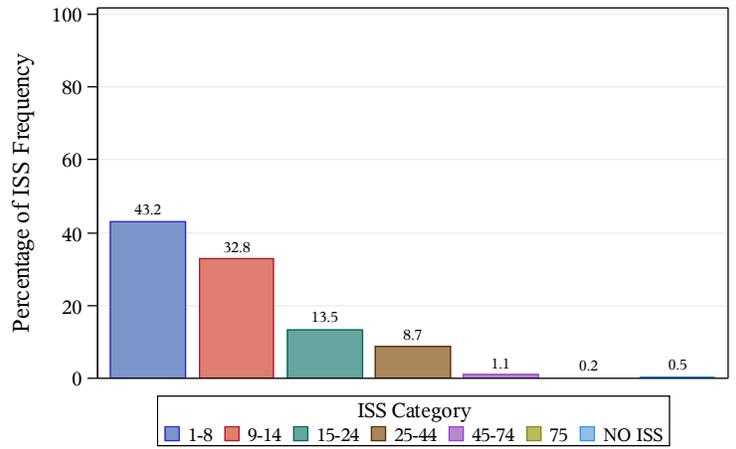
Pedestrian
 May 2015 to April 2016



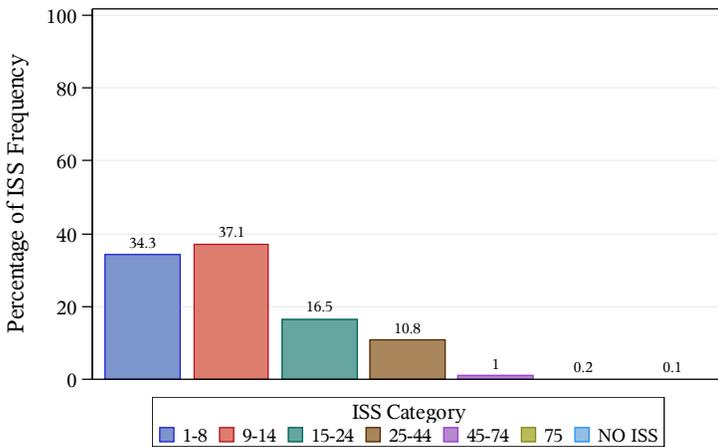
2013



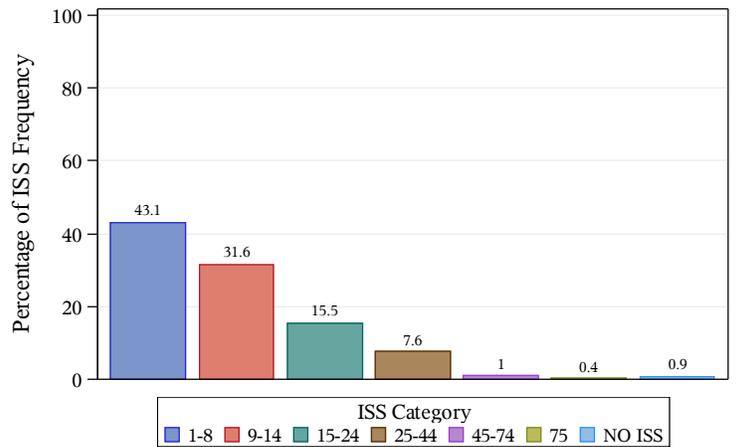
May 2015 to April 2016



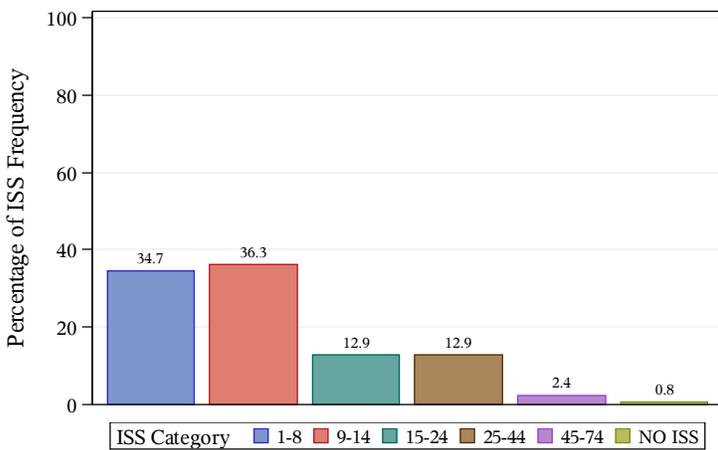
**Motorcycle
 May 2015 to April 2016**



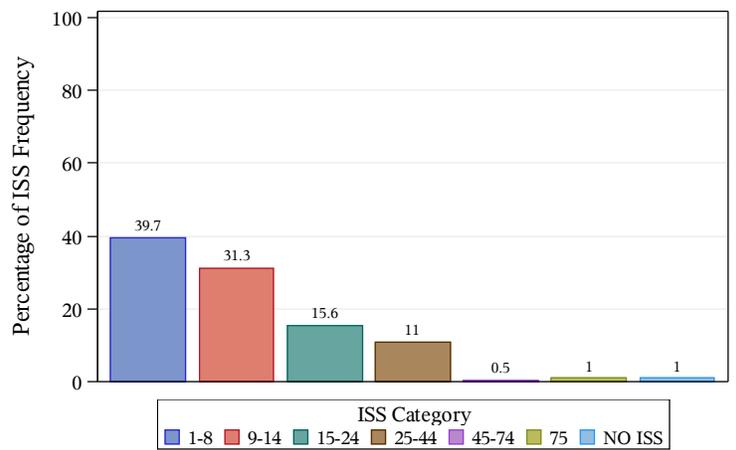
**Automobile
 May 2015 to April 2016**



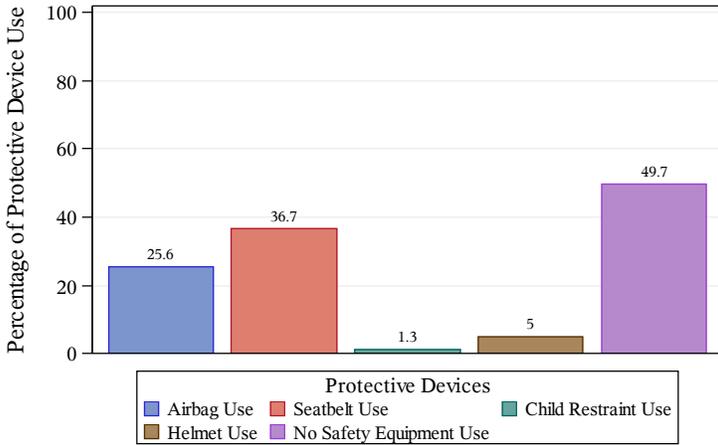
**Bicyclist
 May 2015 to April 2016**



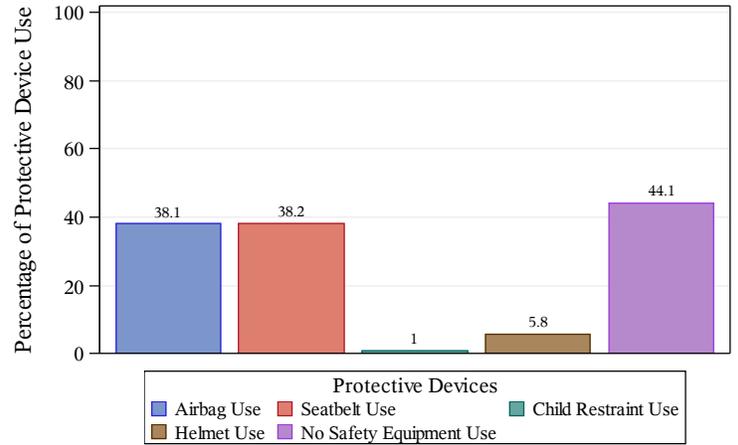
**Pedestrian
 May 2015 to April 2016**



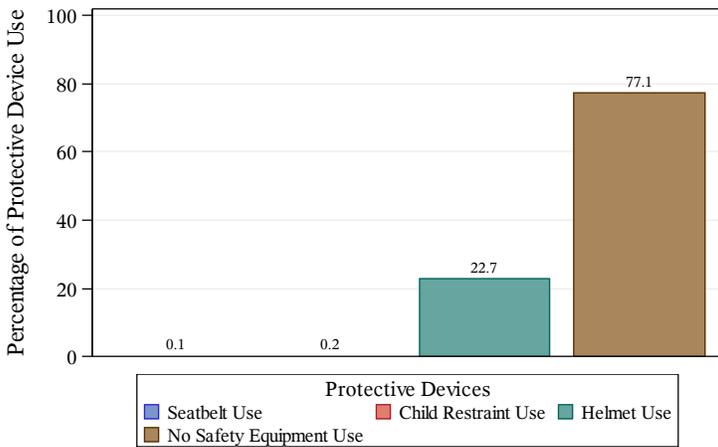
2013



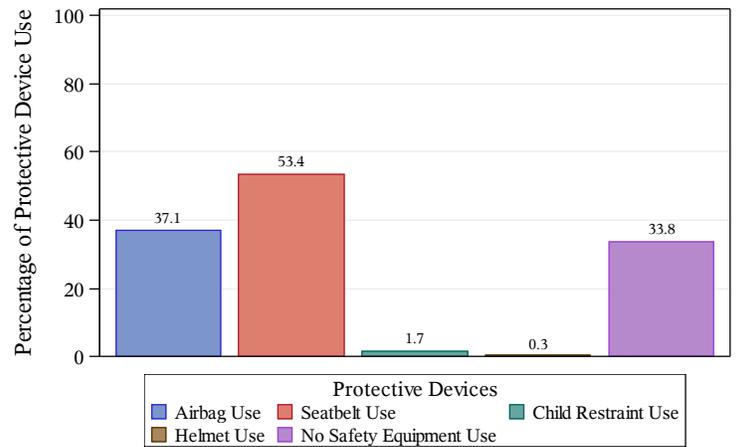
May 2015 to April 2016



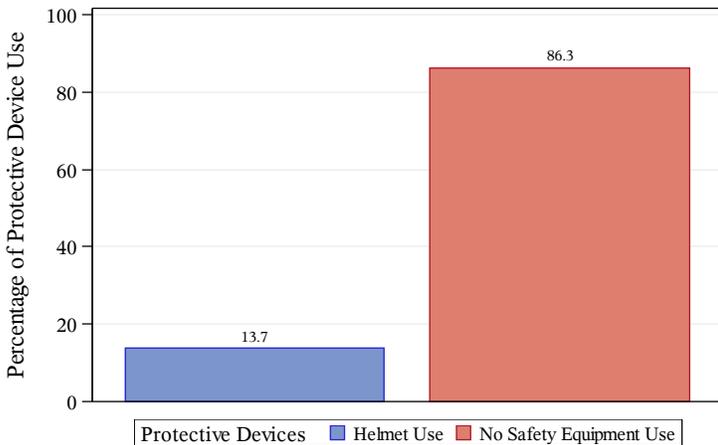
**Motorcycle
 May 2015 to April 2016**



**Automobile
 May 2015 to April 2016**



**Bicyclist
 May 2015 to April 2016**



**Pedestrian
 May 2015 to April 2016**

