

On January 4th, Ramzi Nimry (Trauma System PI Manager) met with Navion and St. Vincent Peyton Manning Children's Hospital to discuss the Indiana Trauma (Patient) Registry.

On January 11th, Ramzi Nimry (Trauma System PI Manager) went to St. Vincent Frankfort Hospital to train them on the Indiana Trauma (Patient) Registry.

On January 23rd, Ramzi Nimry (Trauma System PI Manager) attended the Pediatric Emergency Care Coordinator Advisory Committee at Indianapolis EMS headquarters.

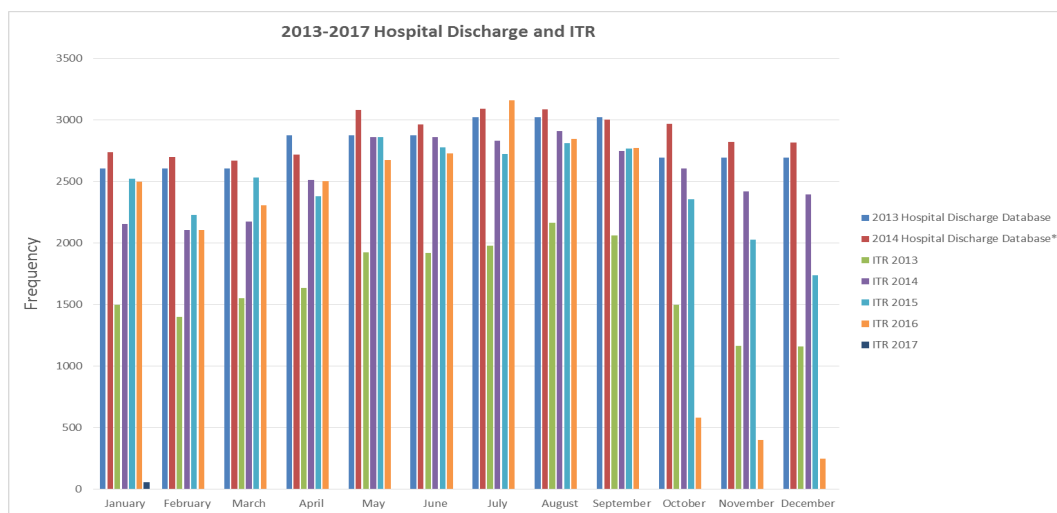
On January 25th, Katie Hokanson (Director) and Ramzi Nimry (Trauma System PI Manager) attended the Designation Subcommittee at Eskenazi Health.

On January 26th, Katie Hokanson (Director) and Ramzi Nimry (Trauma System PI Manager) attended the District 10 Trauma Advisory Council at Memorial Hospital and Health Care Center (Memorial Lodge) in Jasper, 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

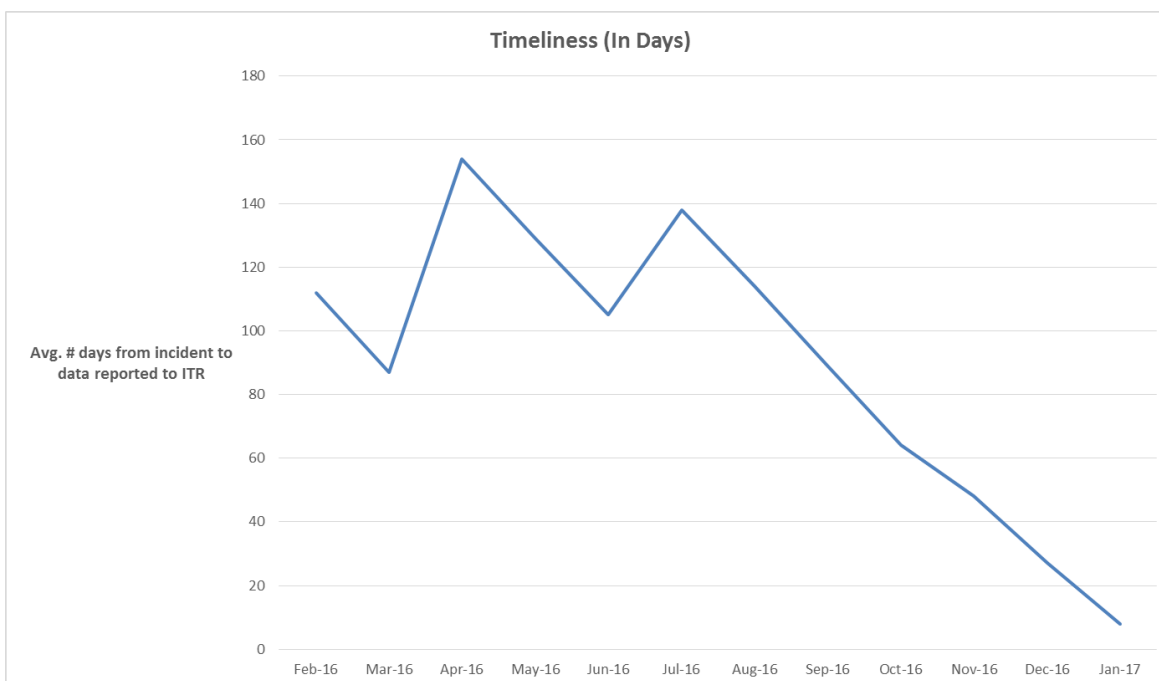
The Hospital Discharge database, also maintained by the ISDH, contains all records of patients cared for in Indiana hospitals. We compared patient records from the ITR with the Hospital Discharge database to know how complete is the ITR's data.



Timeliness

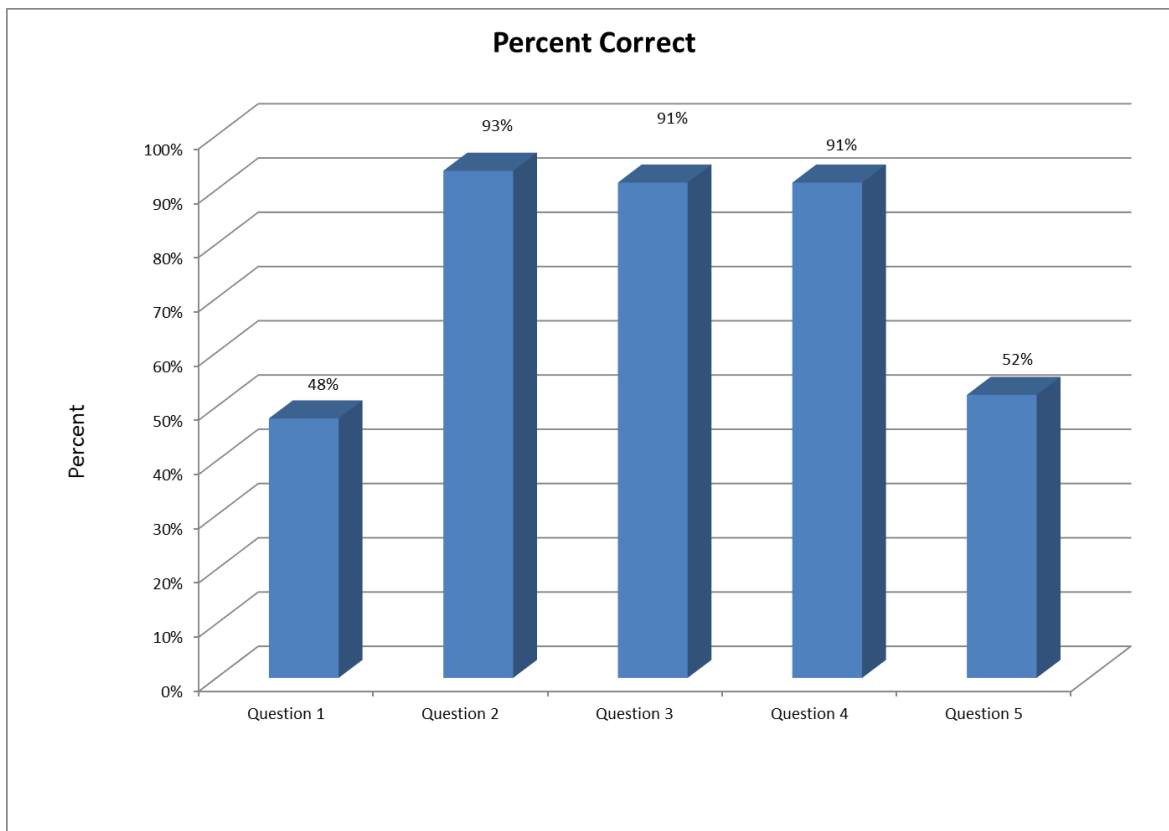
Timeliness increases as facilities wait until the data submission deadline to submit data to the ITR. Hospitals are asked to report data on the national trauma (TQIP) reporting schedule.

The decrease in timeliness from October 2016 until January 2017 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 January we sent out the thirty-third monthly quiz for the inter-rater reliability study. Forty-six registrars completed the quiz from 32 hospitals. The percent of correct answers was 75% for the entire quiz and the average free-marginal Kappa (measure of consistency) 0.32. 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

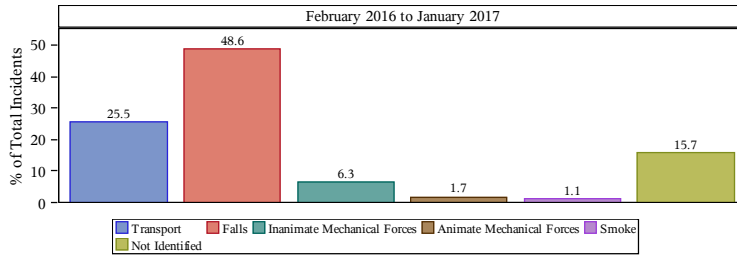
The number of linked EMS to trauma cases was 2,101 for Q2 2016 data. Trauma data is due on a quarterly basis.

Accessibility

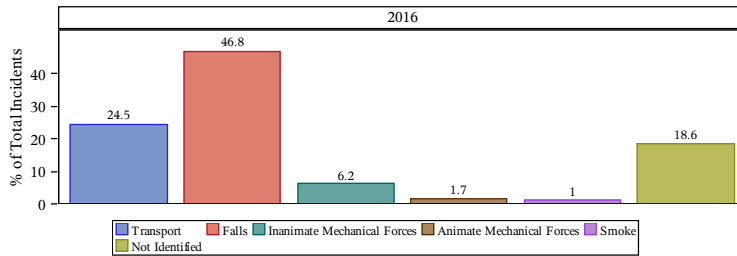
The average time to complete data requests was 4 days for aggregate requests (2 total). There were no identifiable or self-requests during January.

Cause of Injury (COI)

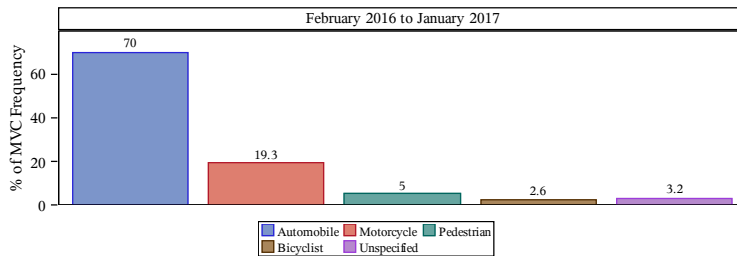
Cause of Injury (COI)



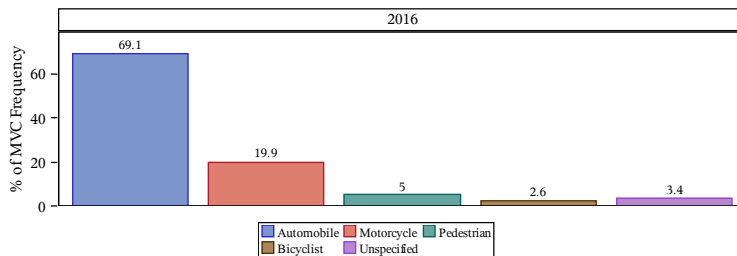
Cause of Injury (COI)



COI-Motor Vehicle Collision (MVC)

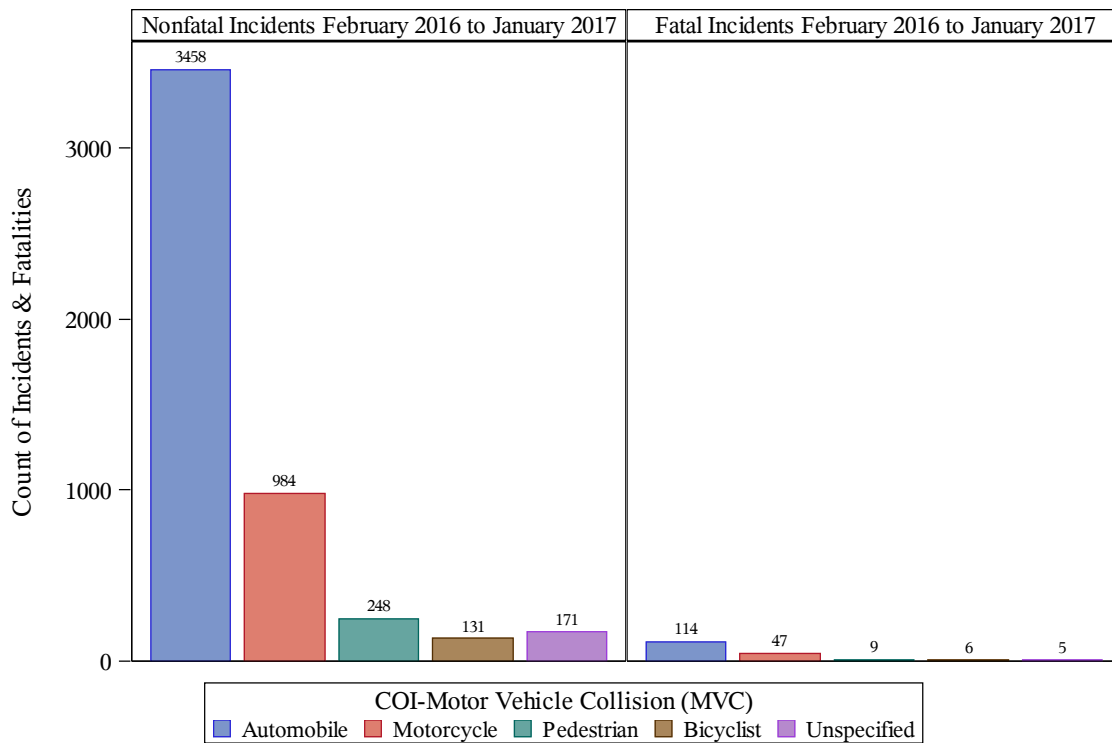
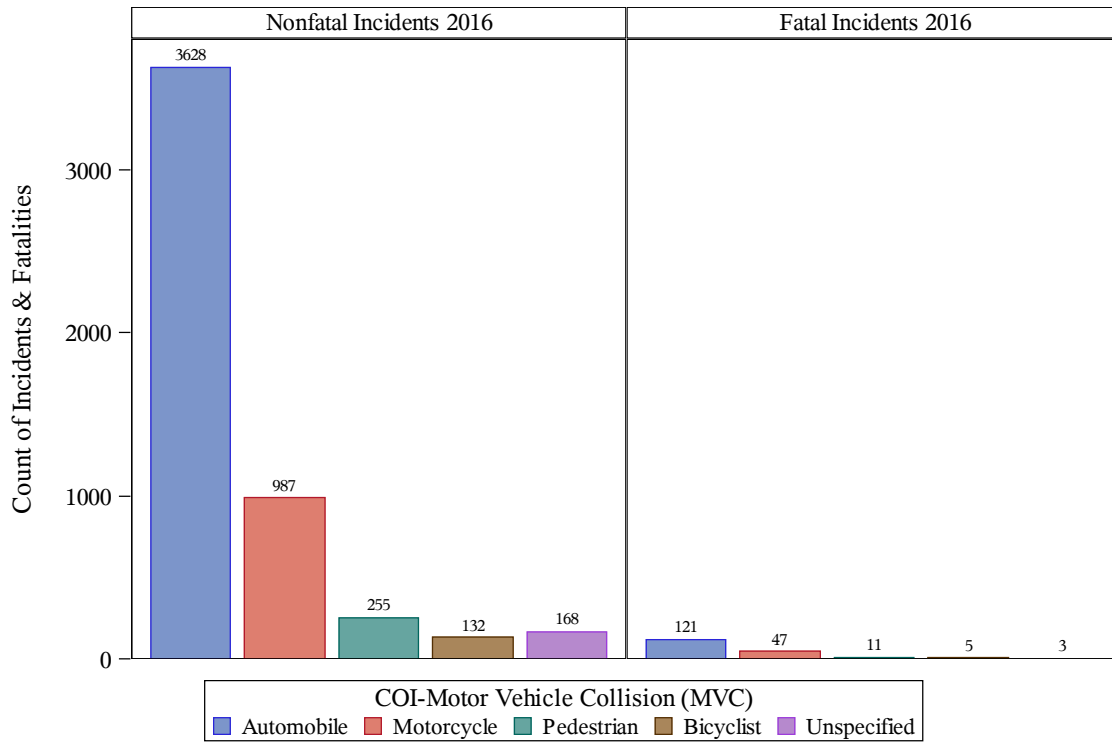


COI-Motor Vehicle Collision (MVC)



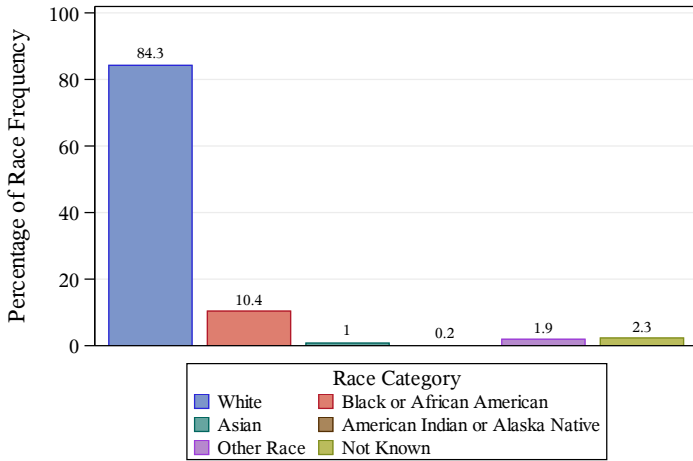
Motor Vehicle Collision

COI-MVC Nonfatal Incidents and Fatal Incidents

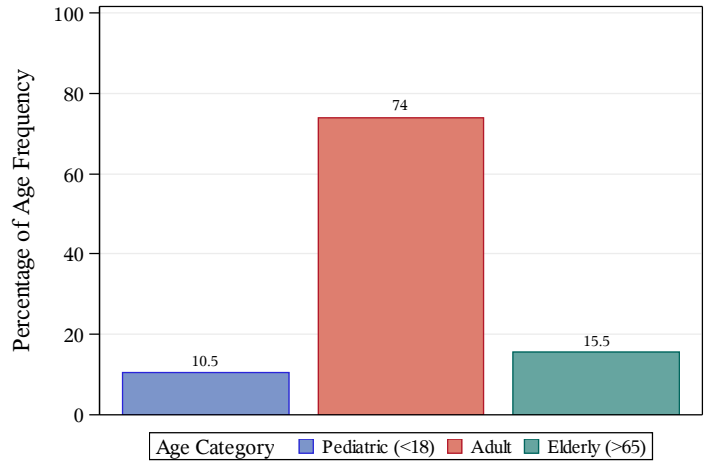


Motor Vehicle Collision

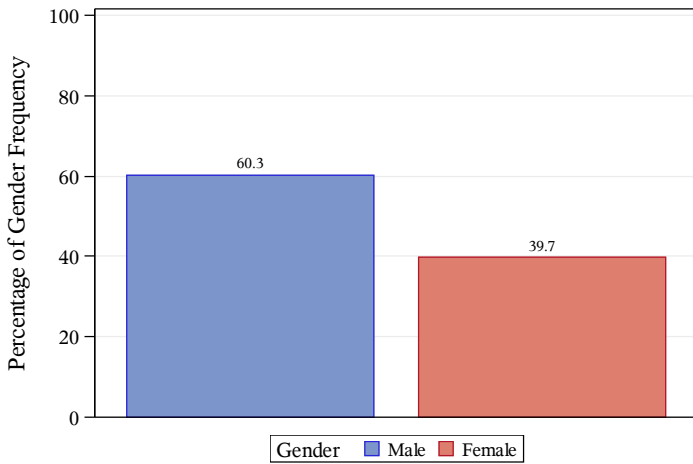
Race



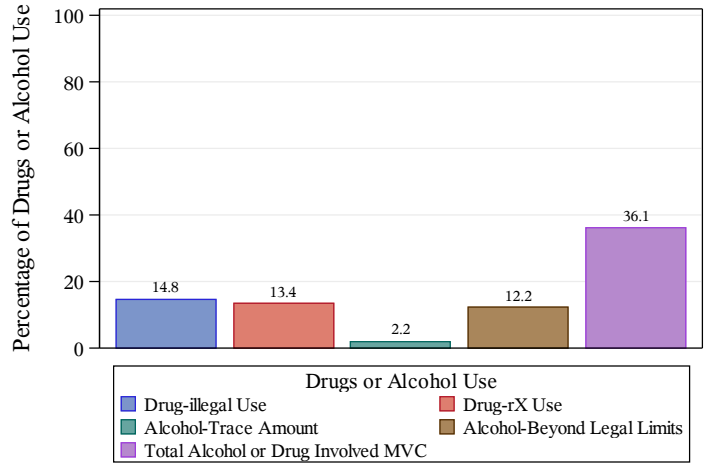
Age



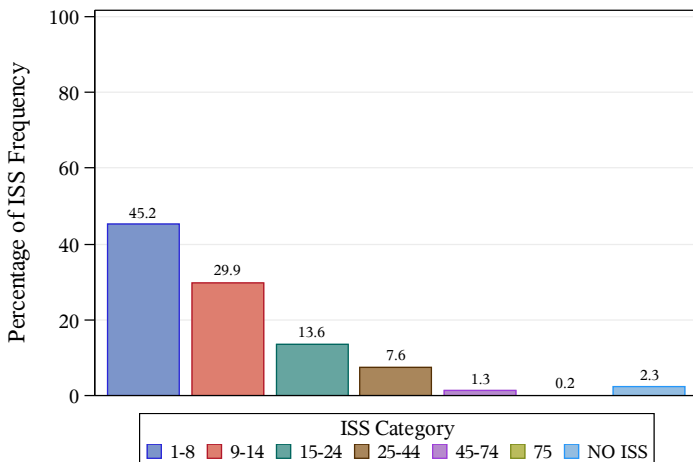
Gender



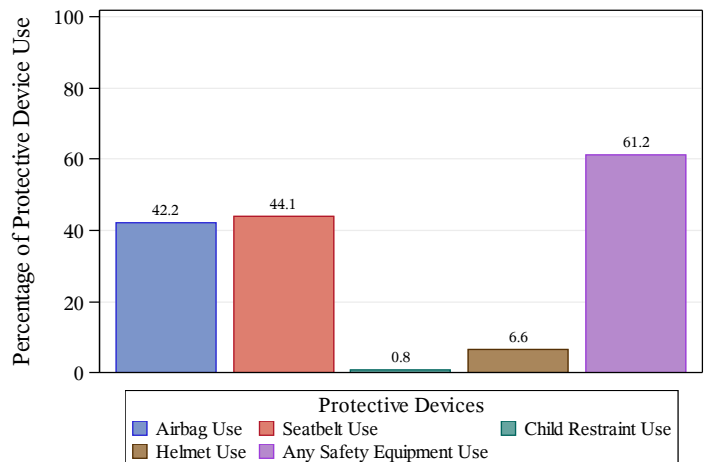
Drug & Alcohol Use



Injury Severity Score



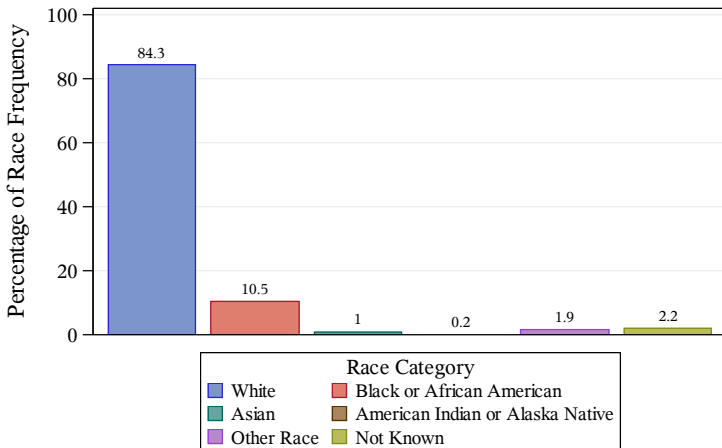
Protective Devices



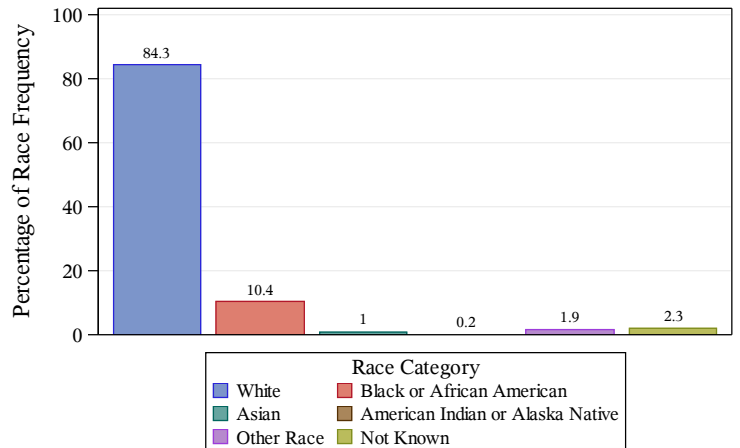
Injury Severity Score (ISS) is a measure of how bad the injury is. Scores over 15 are considered major trauma. A score of 75 is considered not survivable.

Race- Motor Vehicle Collision

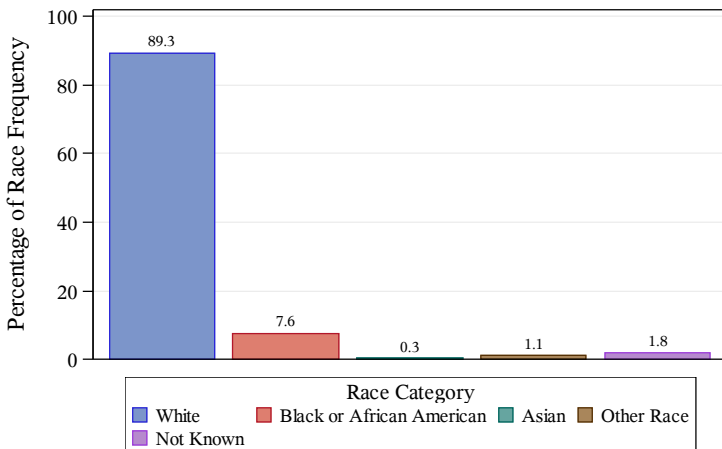
2016



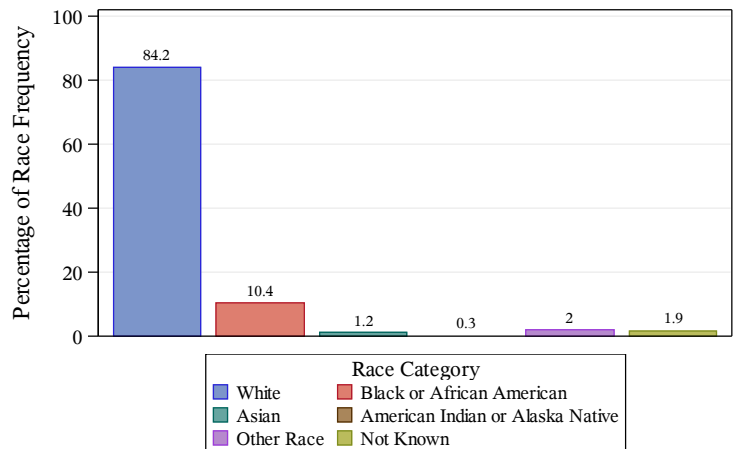
February 2016 to January 2017



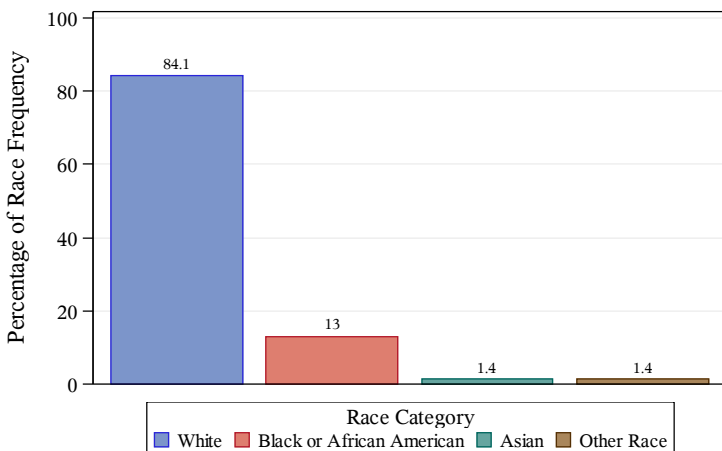
Motorcycle
February 2016 to January 2017



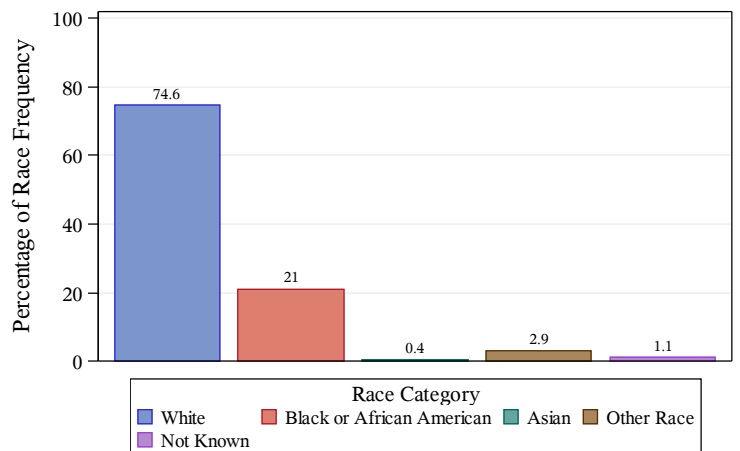
Automobile
February 2016 to January 2017



Bicyclist
February 2016 to January 2017

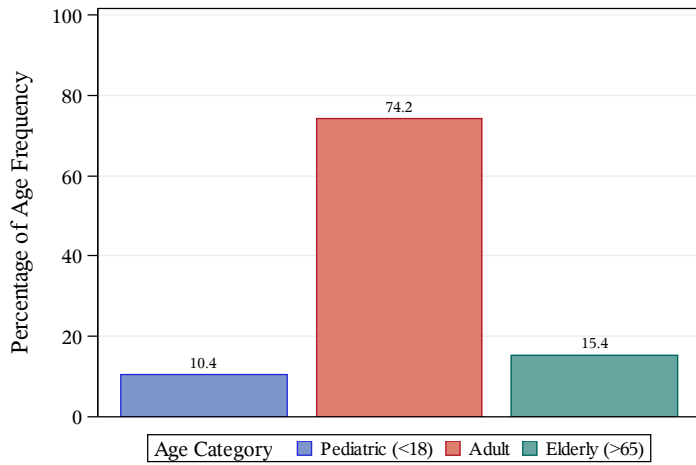


Pedestrian
February 2016 to January 2017

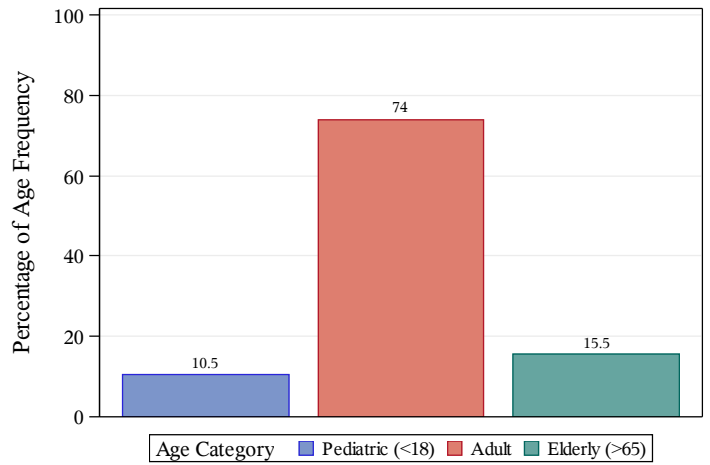


Age- Motor Vehicle Collision

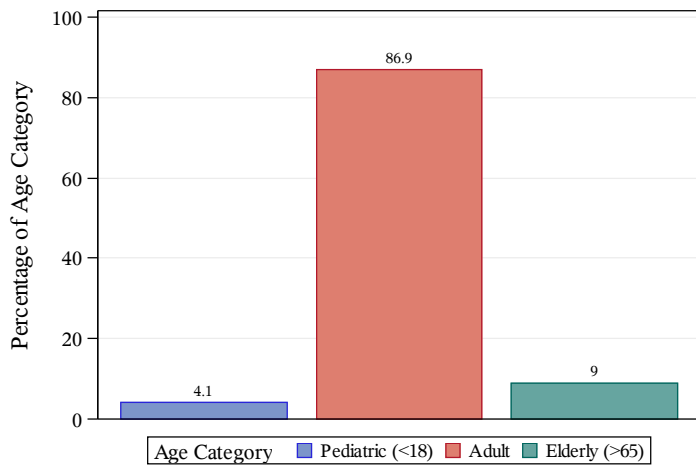
2016



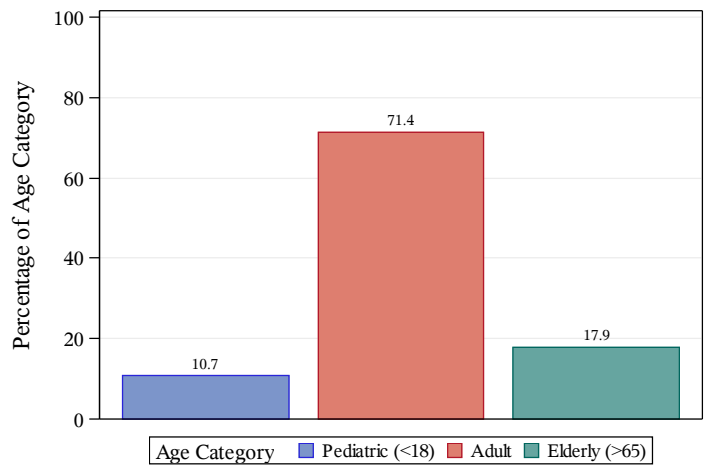
February 2016 to January 2017



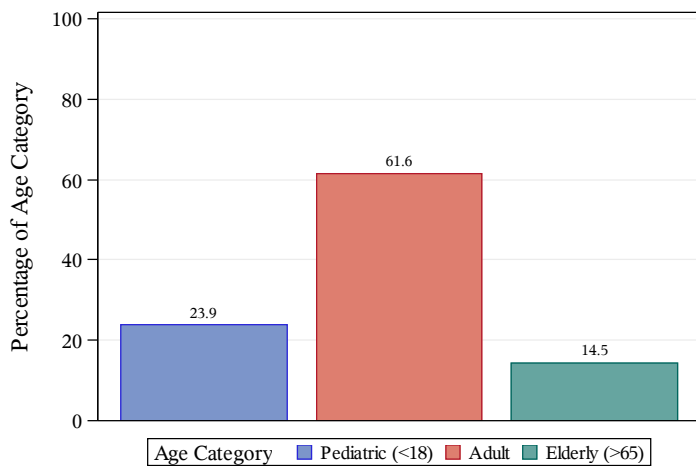
Motorcycle
February 2016 to January 2017



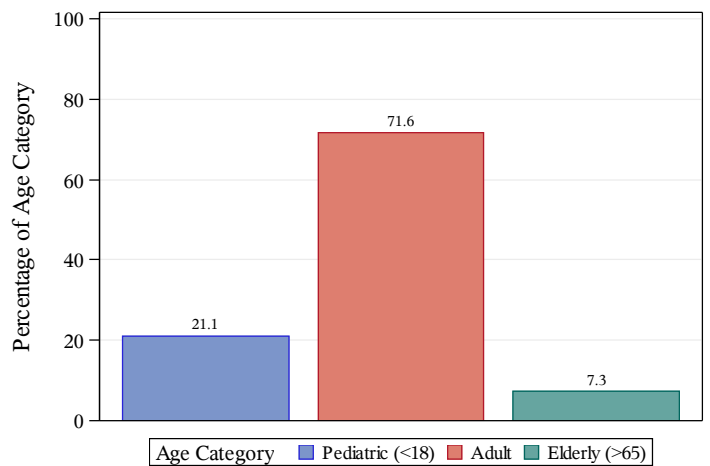
Automobile
February 2016 to January 2017



Bicyclist
February 2016 to January 2017

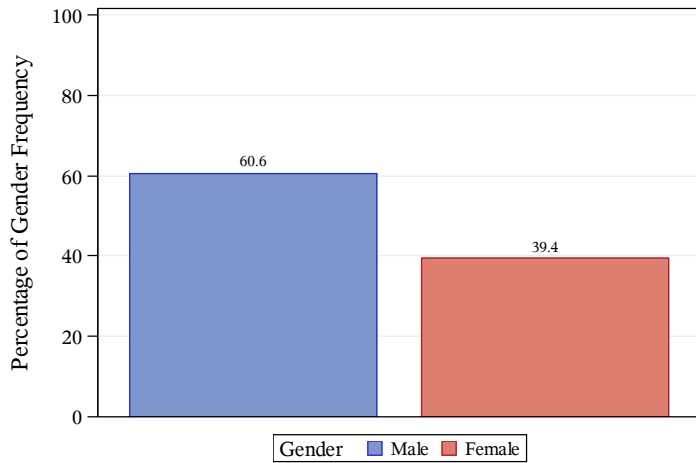


Pedestrian
February 2016 to January 2017

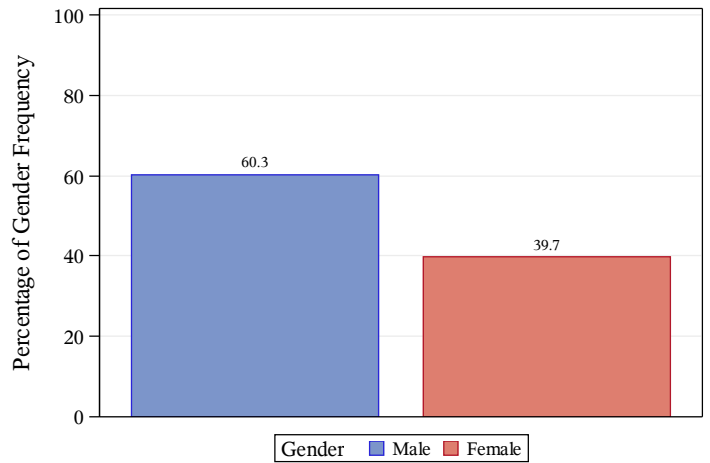


Gender- Motor Vehicle Collision

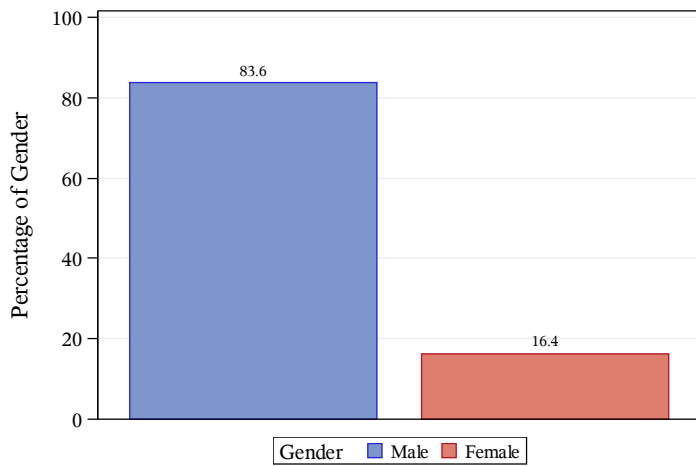
2016



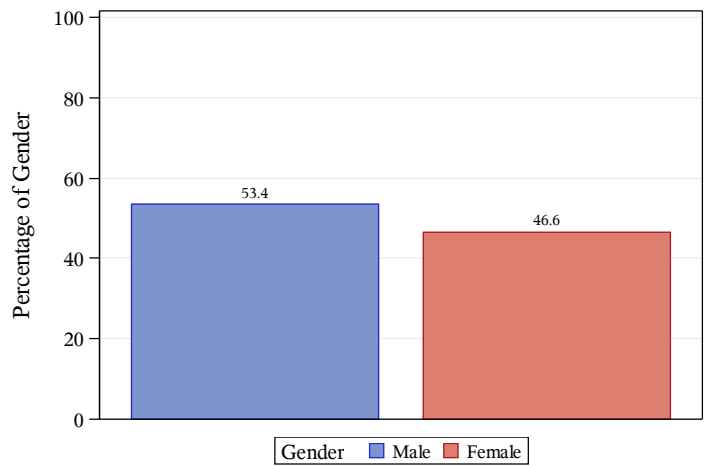
February 2016 to January 2017



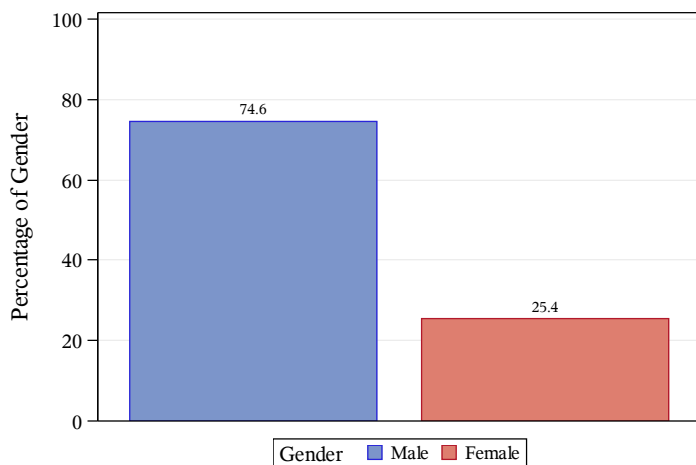
Motorcycle
February 2016 to January 2017



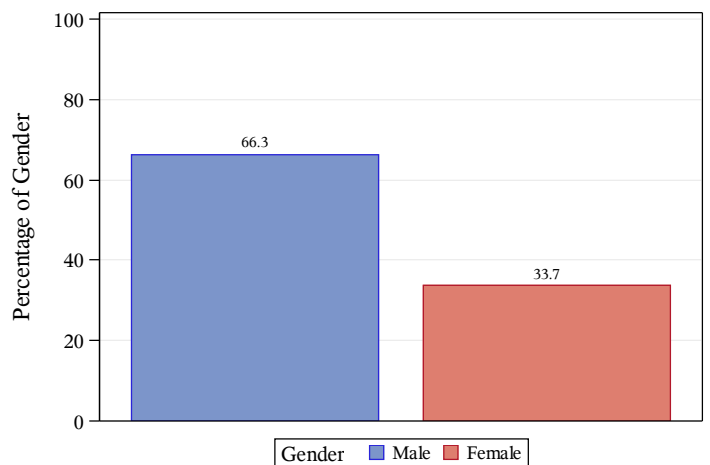
Automobile
February 2016 to January 2017



Bicyclist
February 2016 to January 2017

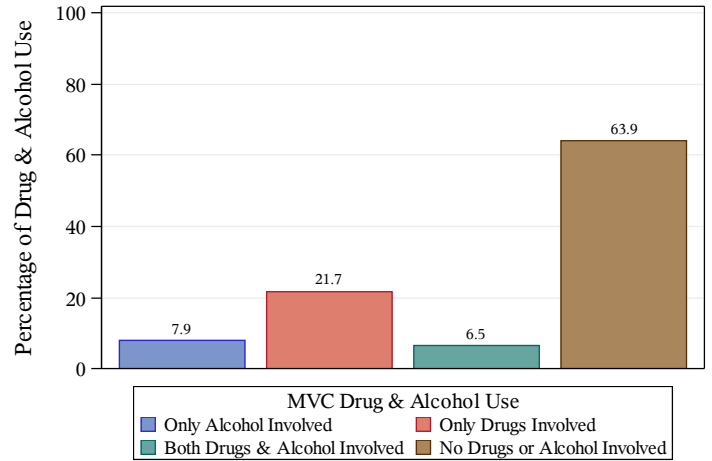
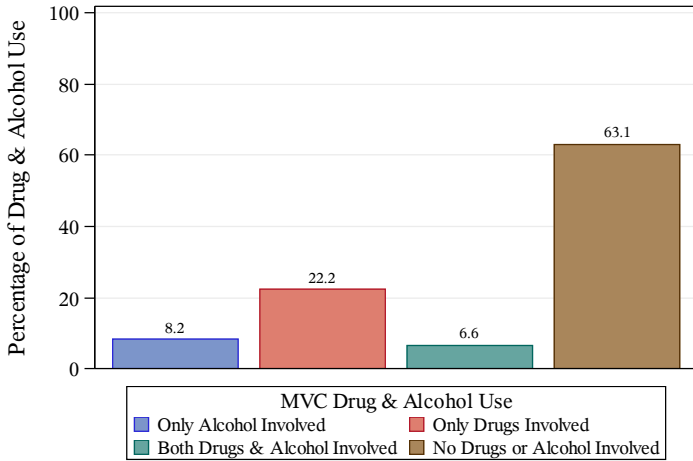


Pedestrian
February 2016 to January 2017



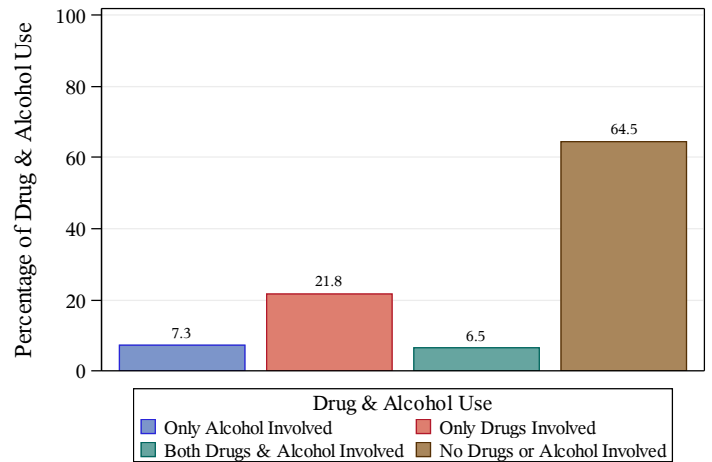
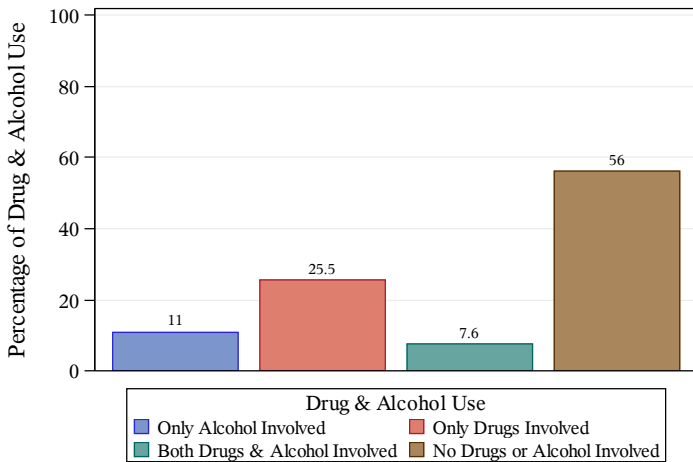
2016

February 2016 to January 2017



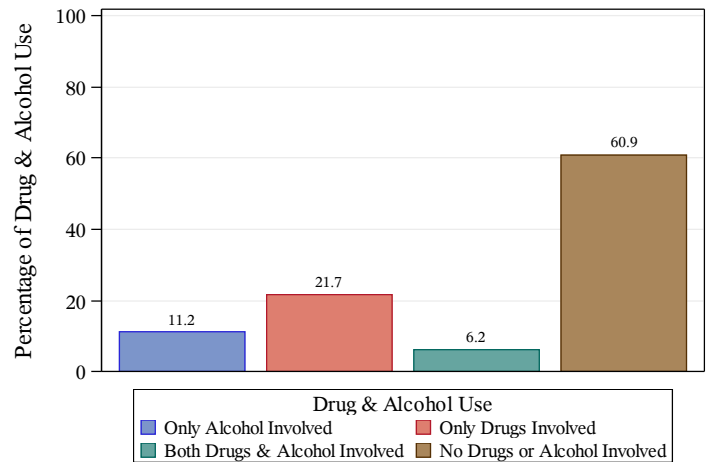
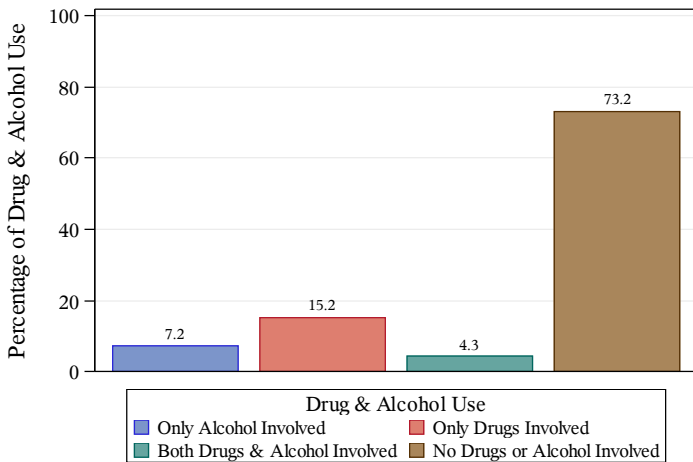
Motorcycle
 February 2016 to January 2017

Automobile
 February 2016 to January 2017



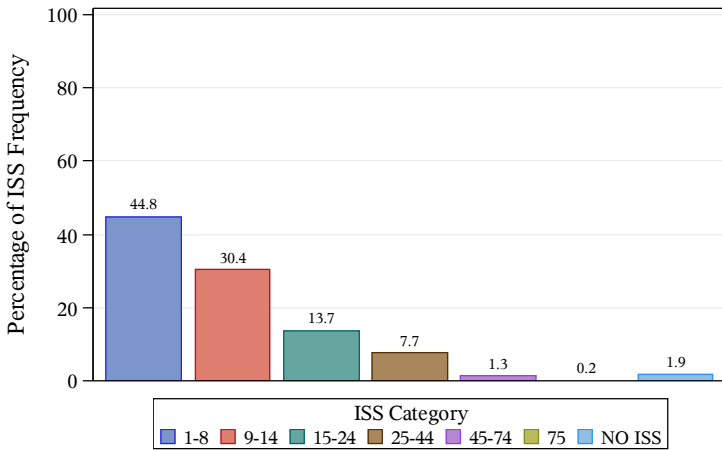
Bicyclist
 February 2016 to January 2017

Pedestrian
 February 2016 to January 2017

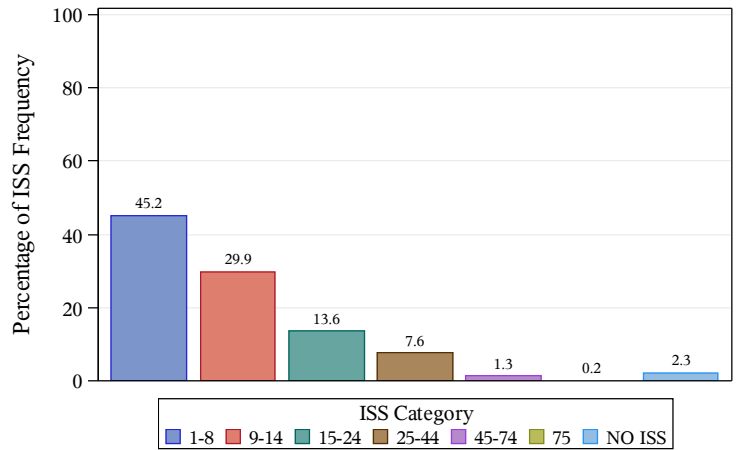


Injury Severity Score- Motor Vehicle Collision

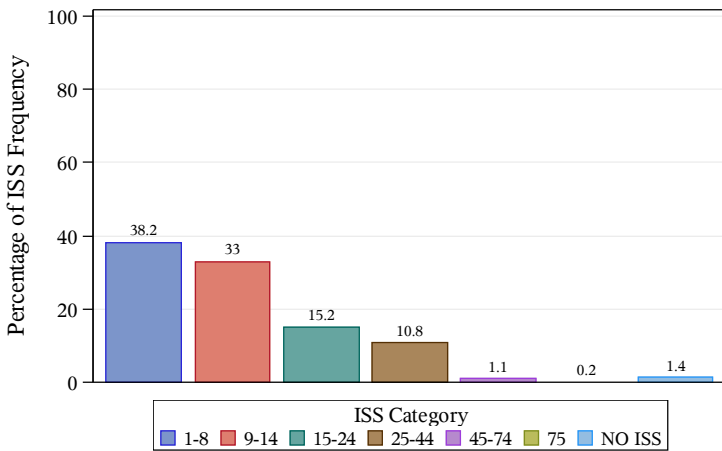
2016



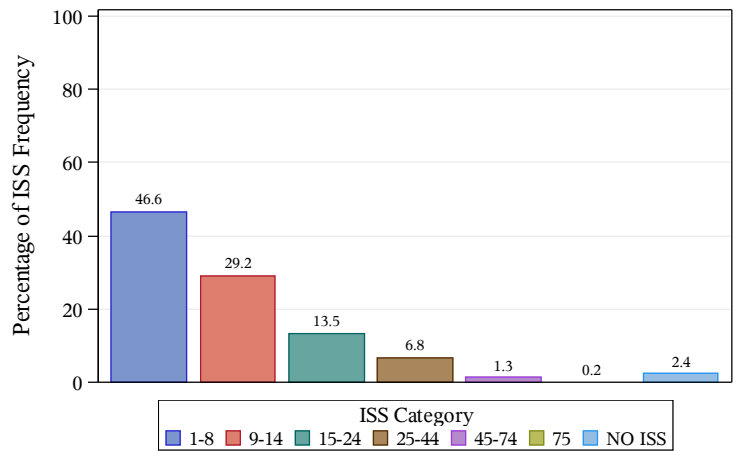
February 2016 to January 2017



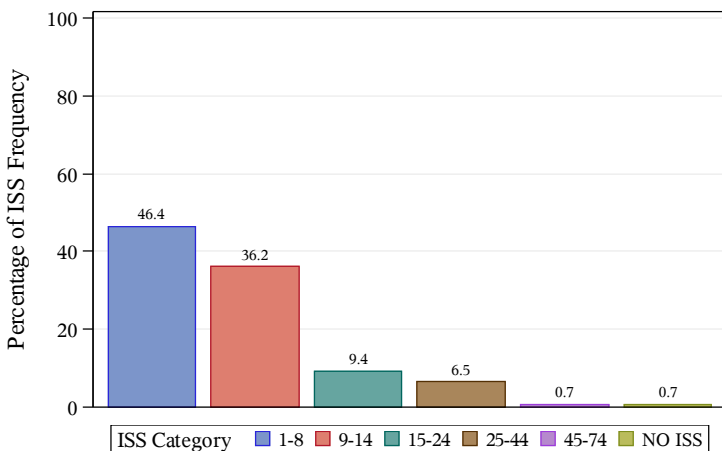
Motorcycle
February 2016 to January 2017



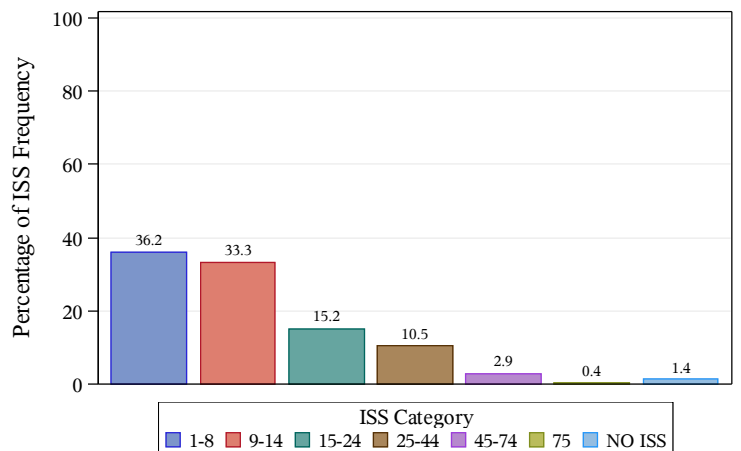
Automobile
February 2016 to January 2017



Bicyclist
February 2016 to January 2017

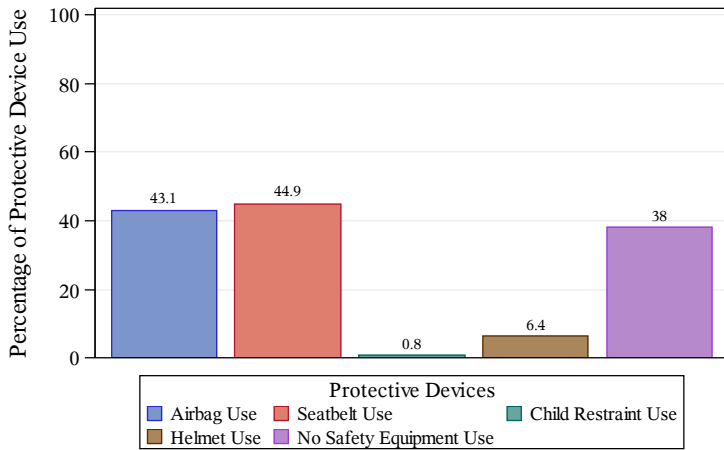


Pedestrian
February 2016 to January 2017

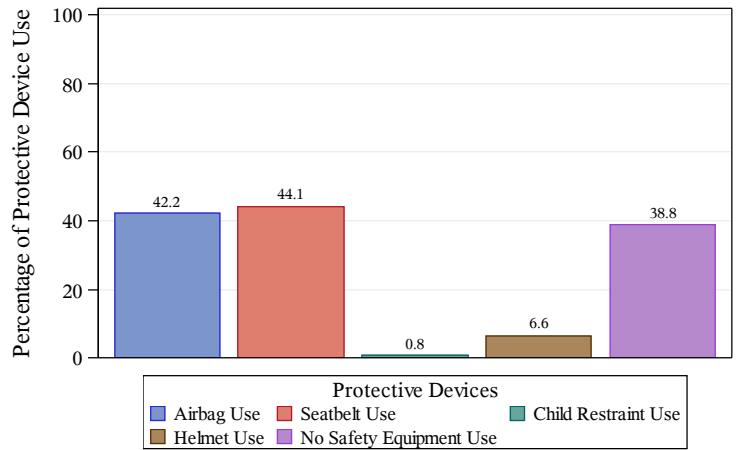


Protective Devices- Motor Vehicle Collision

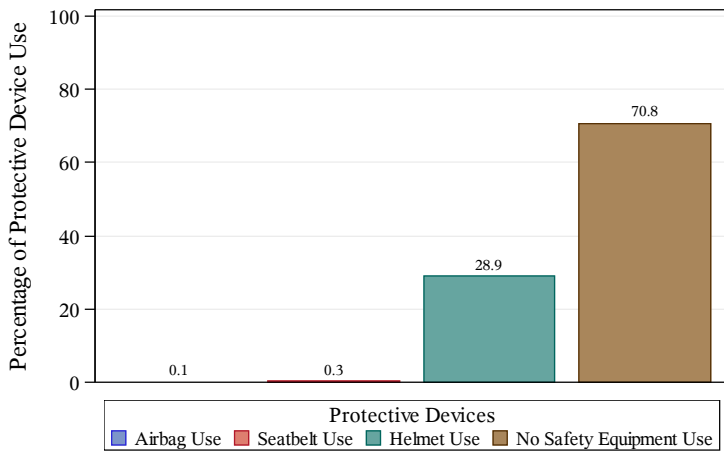
2016



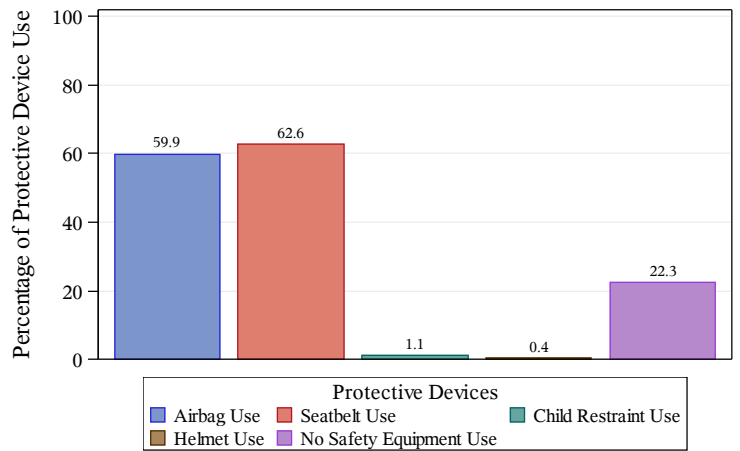
February 2016 to January 2017



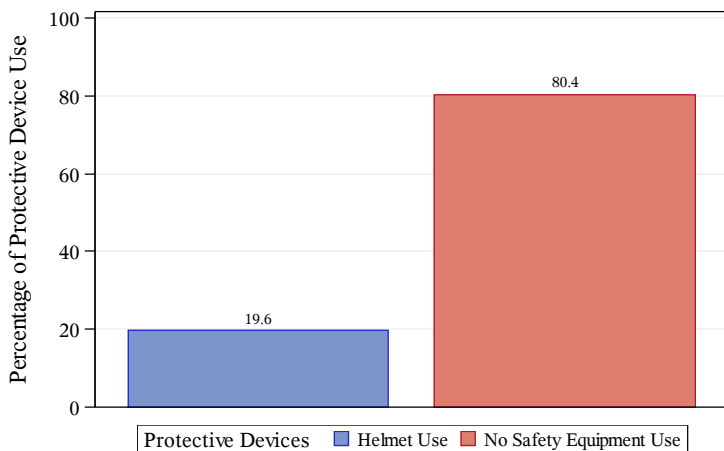
Motorcycle
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Bicyclist
February 2016 to January 2017



Pedestrian
February 2016 to January 2017

