Beginning on October 3rd, Camry Hess (Database Analyst), pulled quarter 2 2014 data and wrote the quarterly statewide data report.

On October 14th, Murray Lawry (EMS Registry Manager) attended the ImageTrend State Council meeting.

Murray Lawry and Katie Gatz (Division Director) attended and participated in the EMS Commission meeting on October 17th in Fishers, IN.

Camry Hess and Ramzi Nimry (Trauma Registry Manager) attended the Eskenazi Trauma/ Surgical Critical Care Symposium on Friday, October 24th. Art Logsdon (Assistant Commissioner), presented an Indiana Trauma System Update.

Ramzi Nimry trained throughout the month of October on the Patient Registry.

The 2013 data presented in this report is now complete.

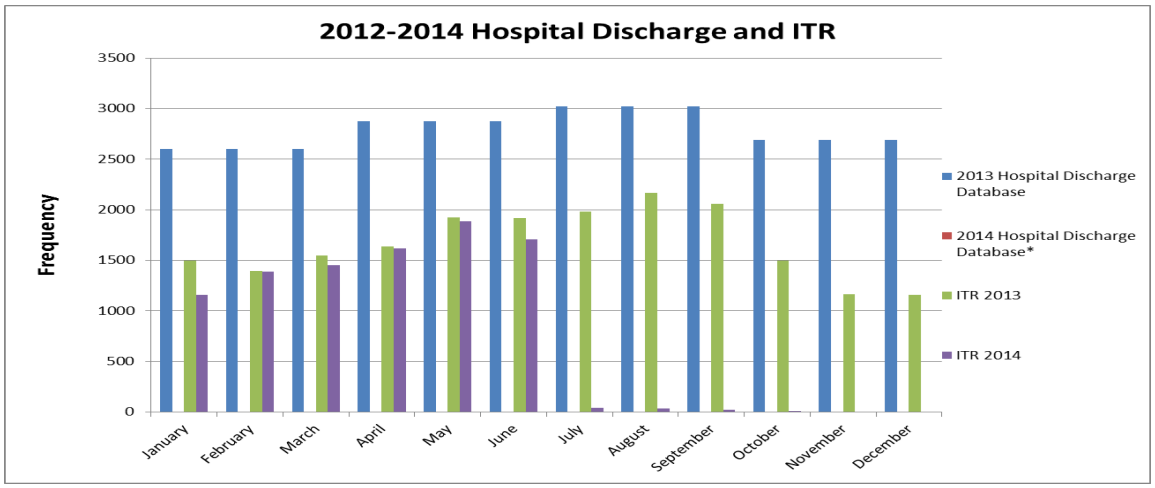
Indiana Trauma Registry

Monthly Report for October 2014

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

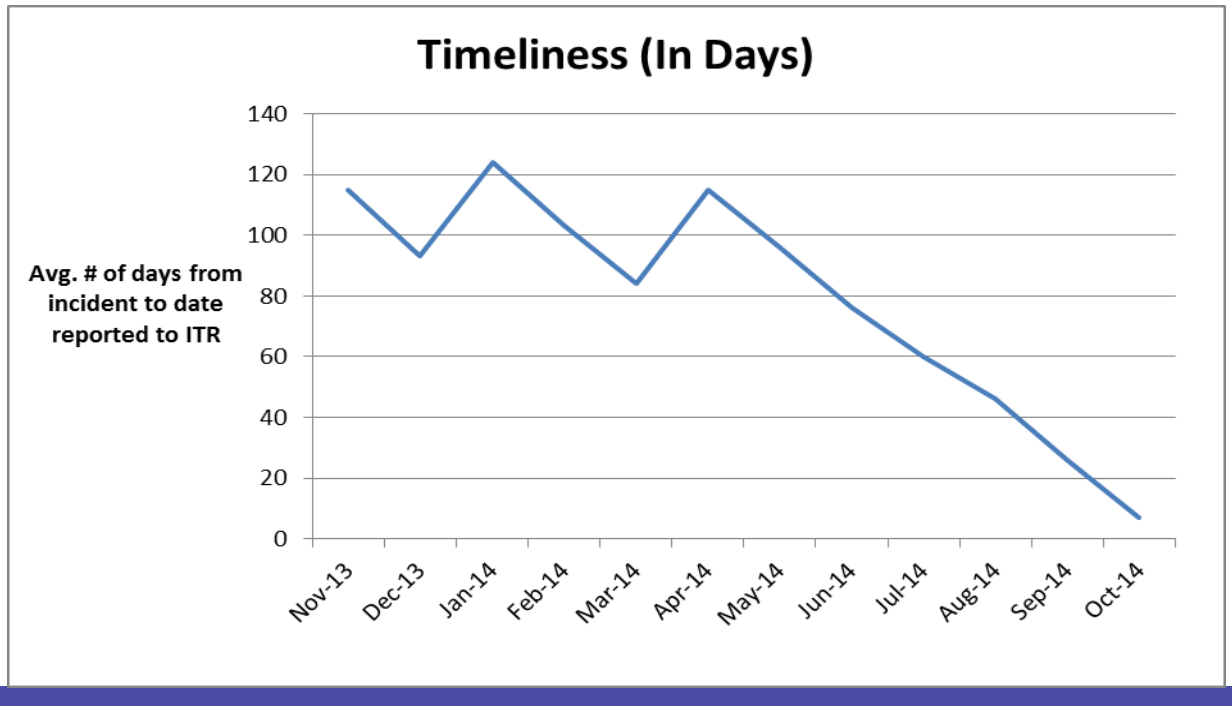
The Hospital Discharge database, also maintained by the ISDH, contains all records of patients cared for in Indiana hospitals. We compared patient records from the ITR with the Hospital Discharge database to know how complete is the ITR's data. 2014 Hospital Discharge data is not available to the ISDH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



Timeliness

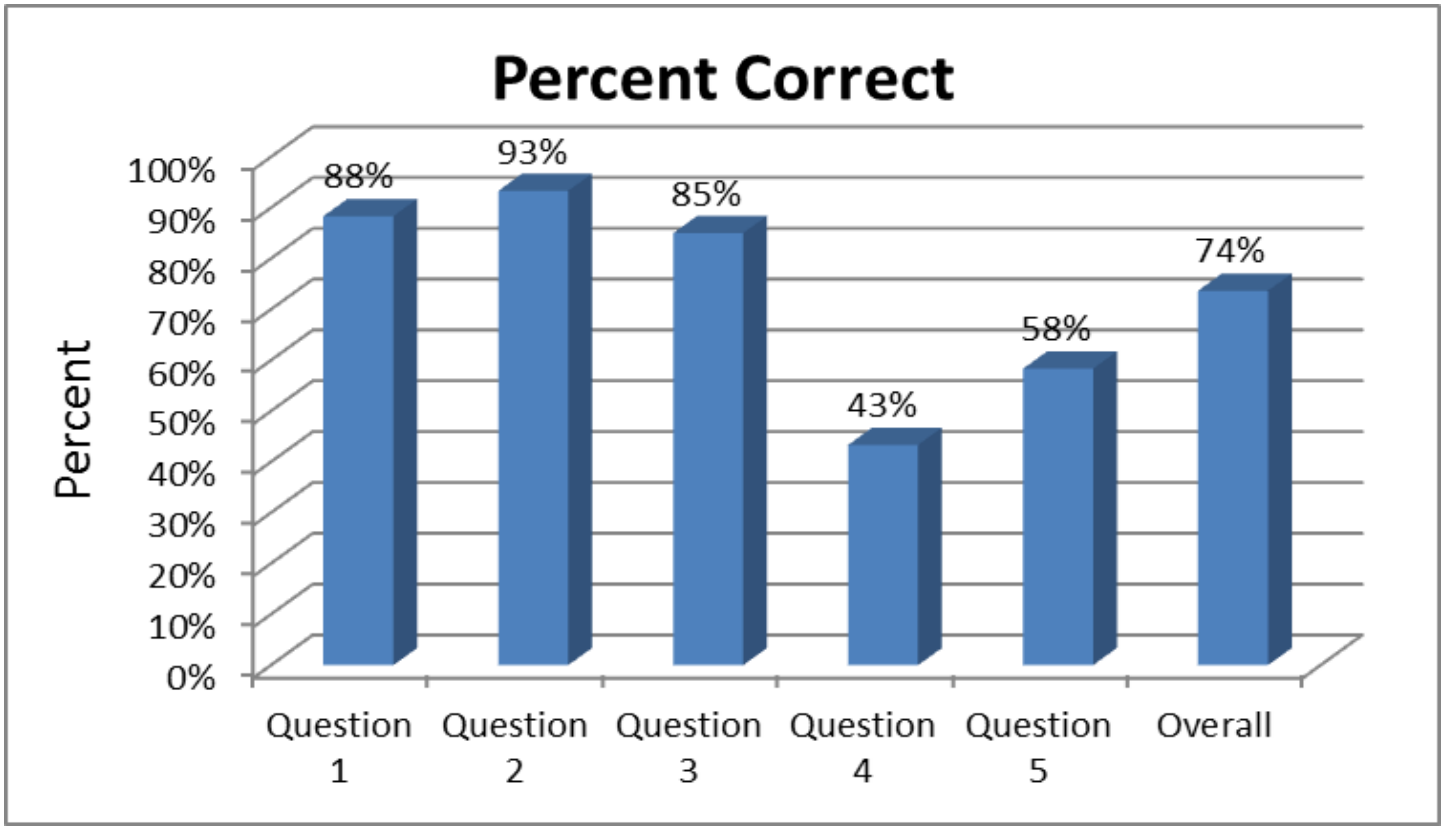
Timeliness increases as facilities wait until the data submission deadline to submit data to the ITR. Hospitals are asked to report data on the national trauma (TQIP) reporting schedule.

The decrease in timeliness from May 2014 until October 2014 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

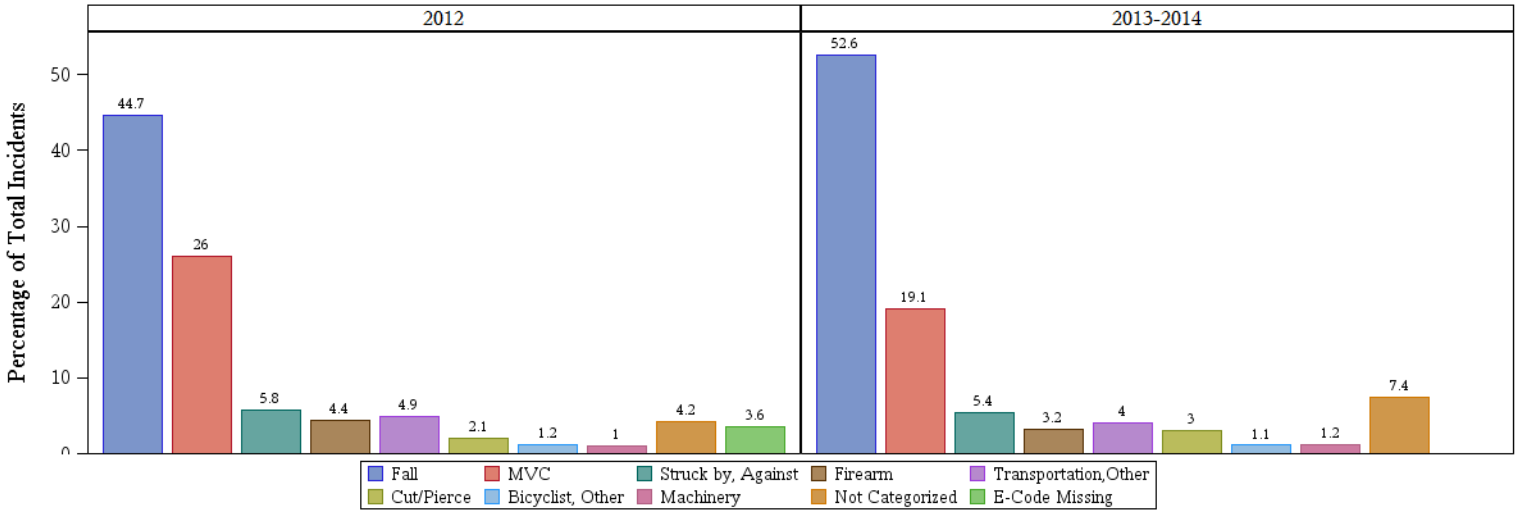
In October we sent out the ninth monthly quiz for the inter-rater reliability study. Sixty registrars completed the quiz from 50 hospitals. The percent of correct answers was 74% for the entire quiz and the average free-marginal Kappa (measure of consistency) 0.42. We plan to collect data for four months 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

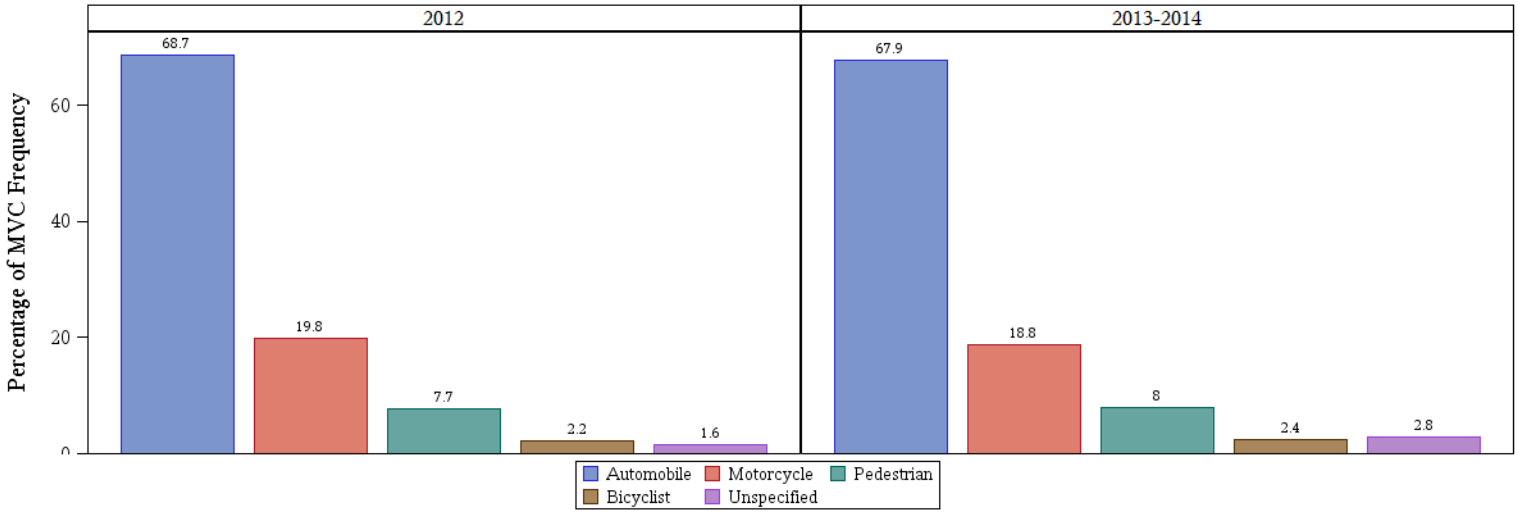
The percent of linked trauma cases that were transported by EMS services was 37.2%. This percent is calculated on a quarterly basis. This percentage is part of the baseline measurement from which we will track changes over the next year.

Cause of Injury (COI)

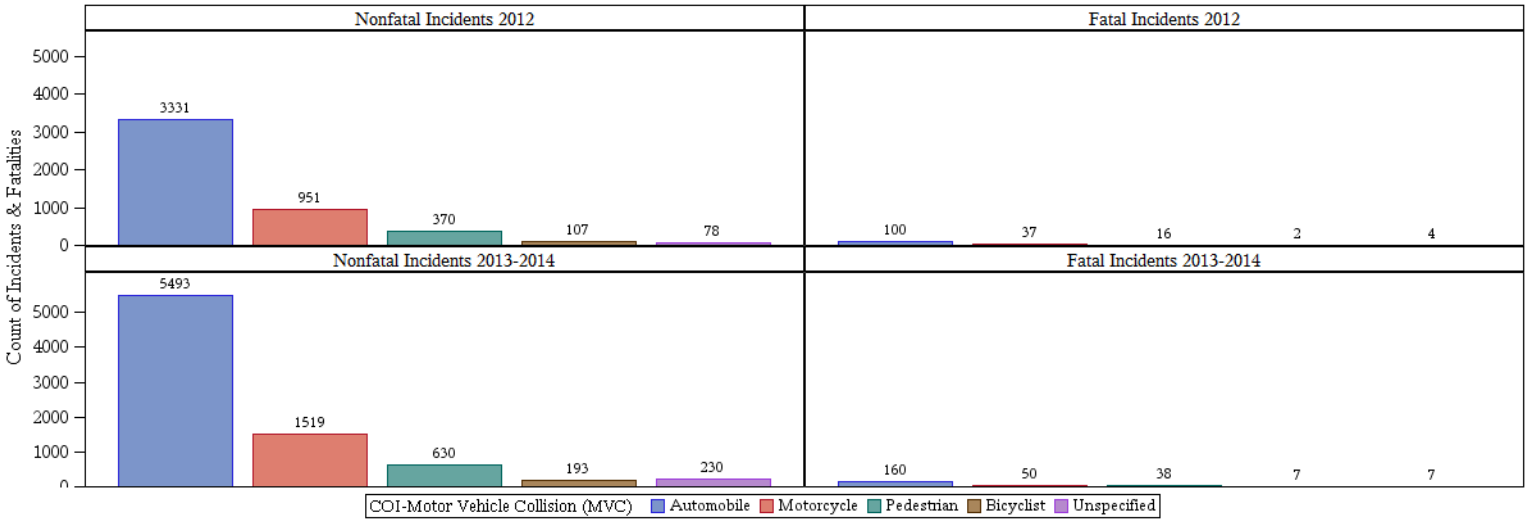


<1% of COI: Pedestrian (Other), Natural/Environmental, Overexertion, Fire/Burn, and Bites/Stings

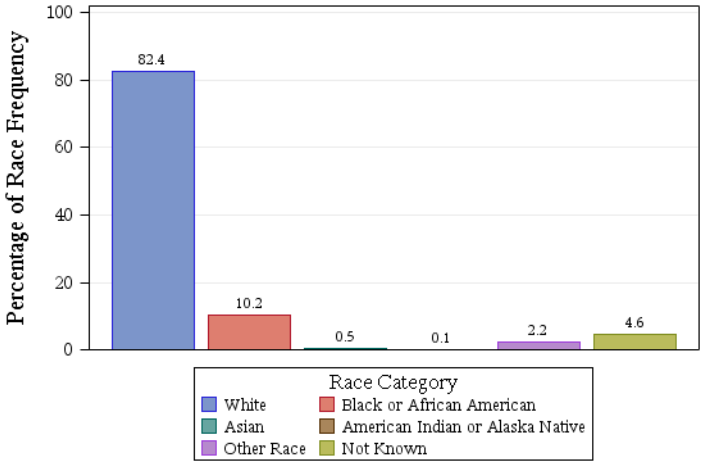
COI-Motor Vehicle Collision (MVC)



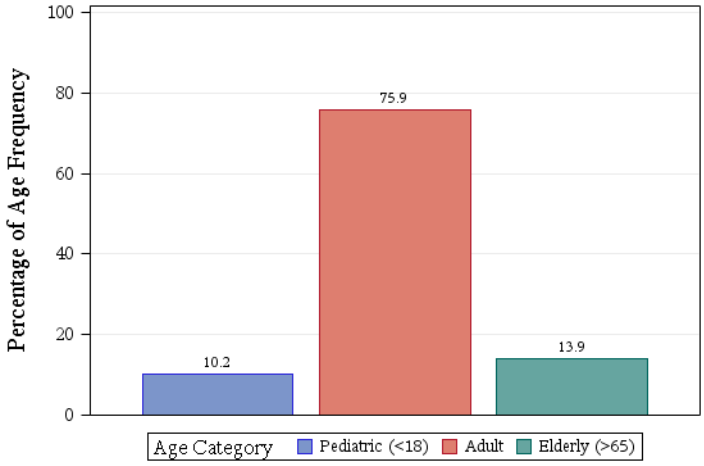
COI-MVC Nonfatal Incidents and Fatal Incidents



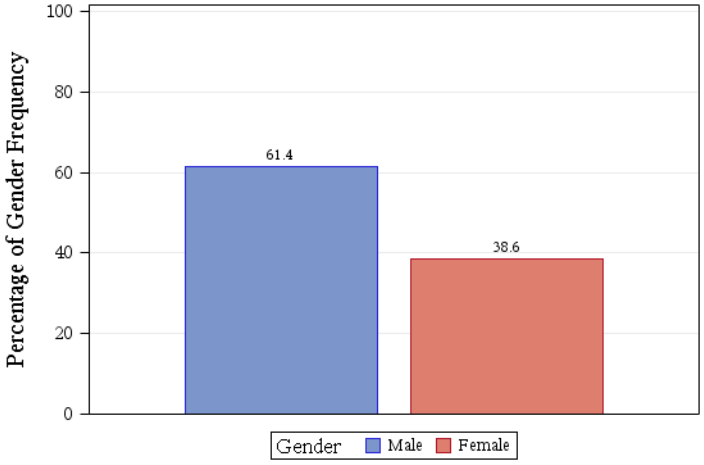
Race



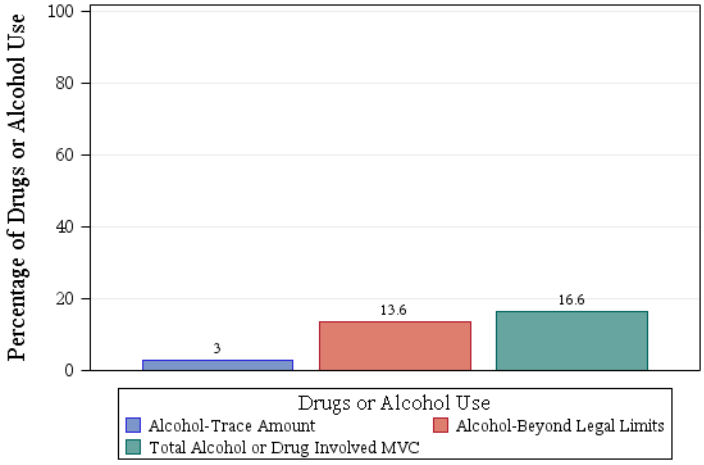
Age



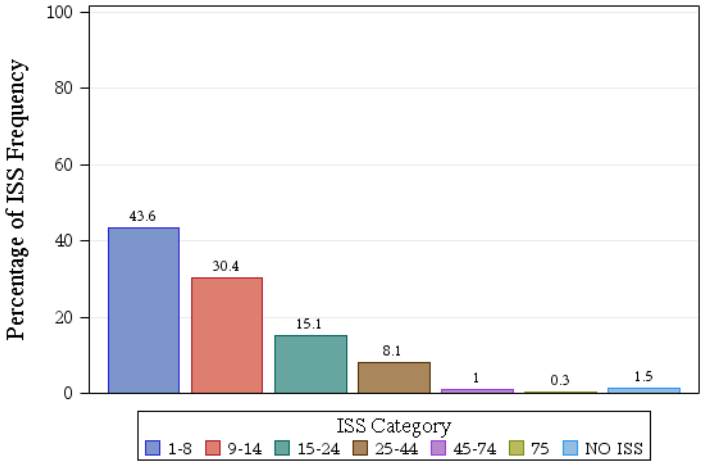
Gender



Drug & Alcohol Use

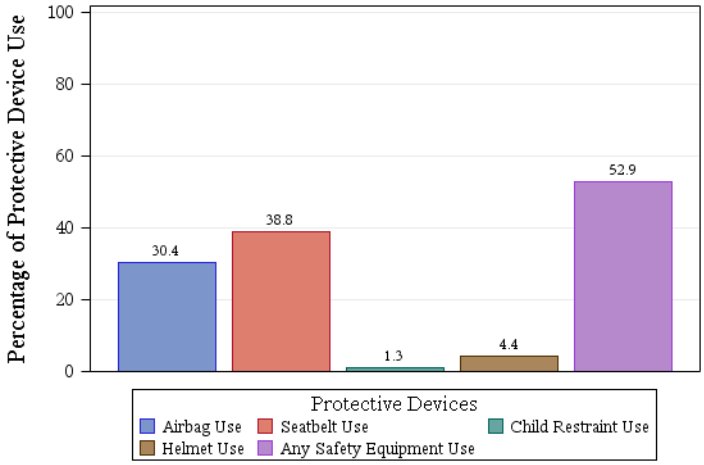


Injury Severity Score

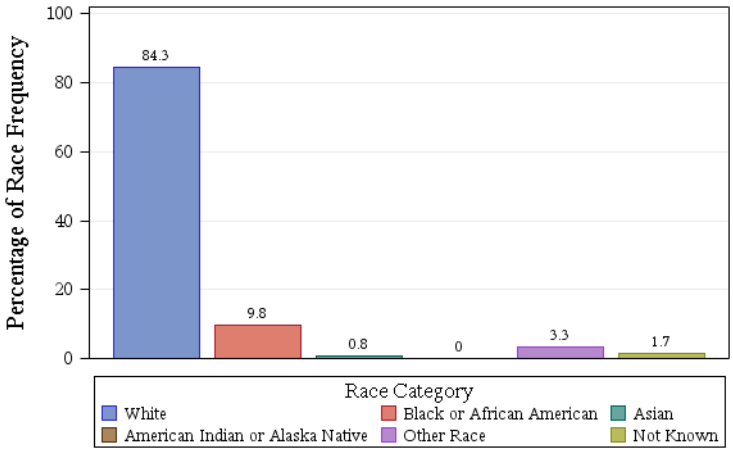


Injury Severity Score (ISS) is a measure of how bad the injury is. Scores over 15 are considered major trauma. A score of 75 is considered not survivable.

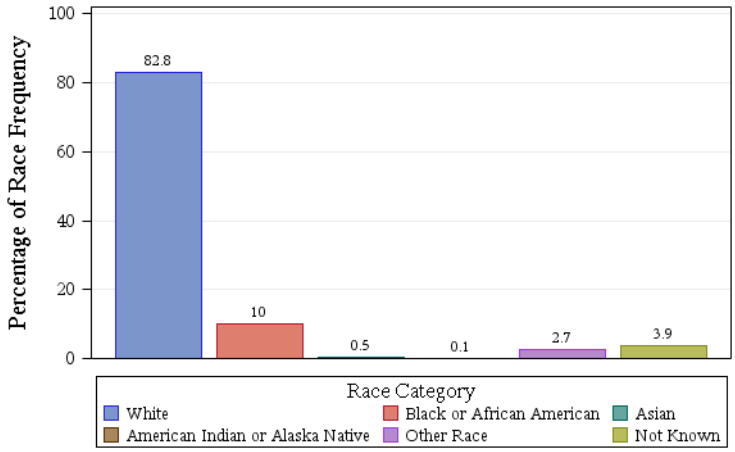
Protective Devices



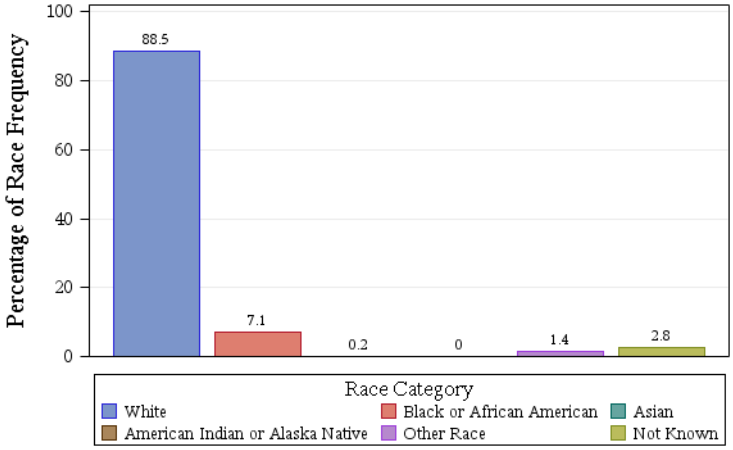
2012



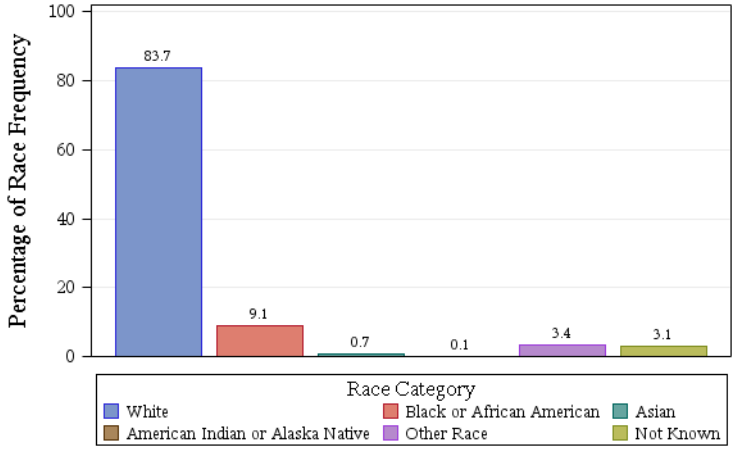
2013-2014



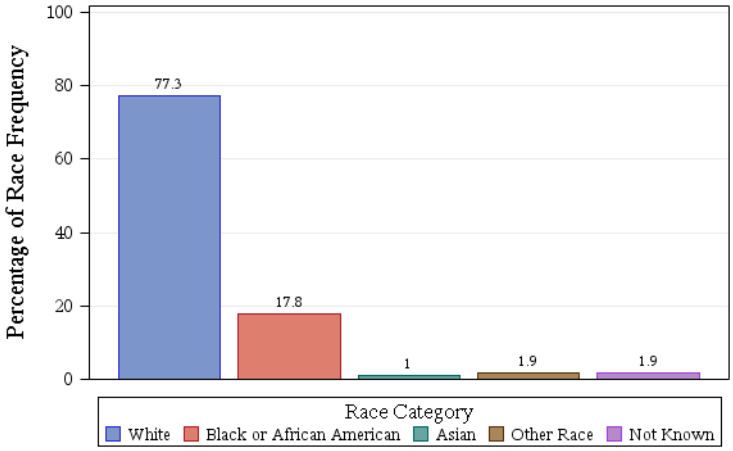
Motorcycle
2012-2014



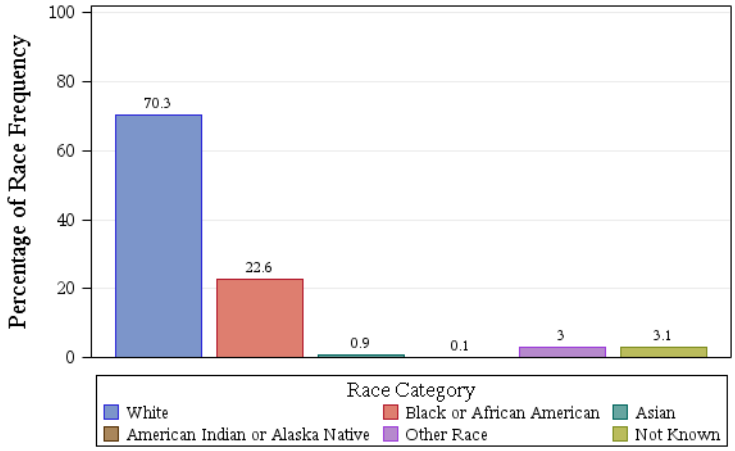
Automobile
2012-2014



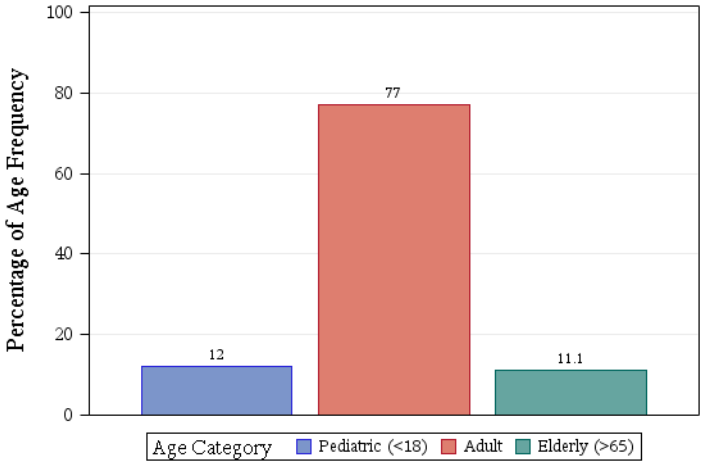
Bicyclist
2012-2014



Pedestrian
2012-2014



2012



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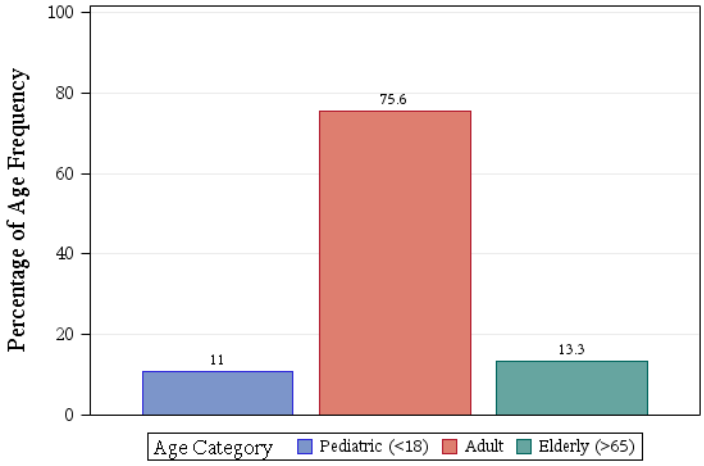
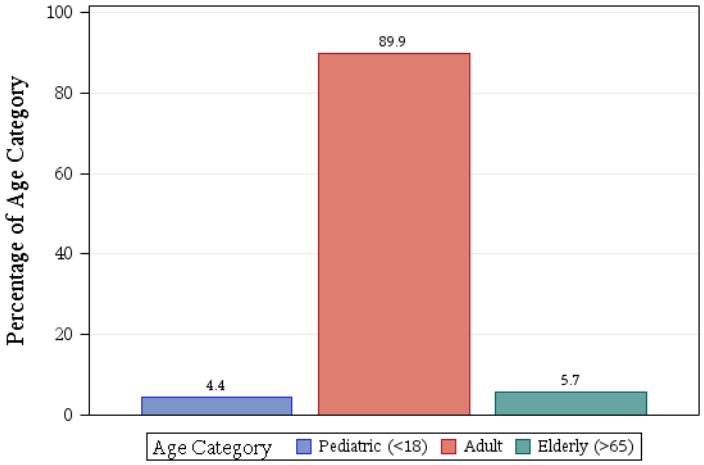
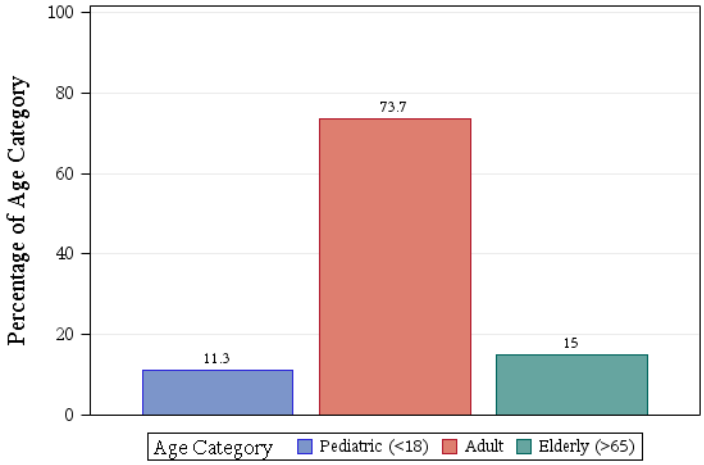


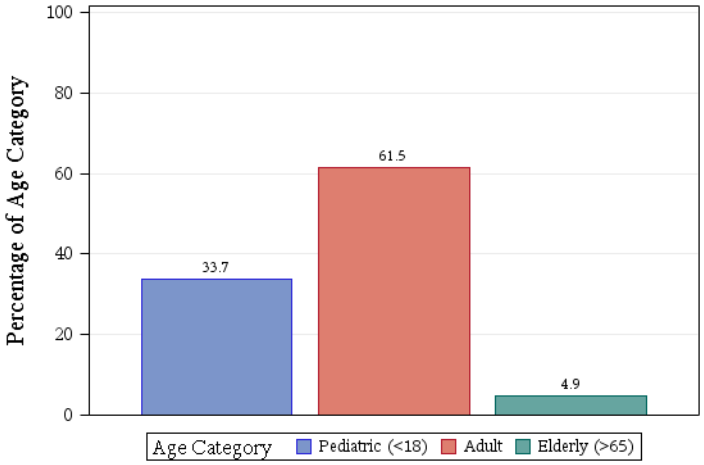
Motorcycle
2012-2014



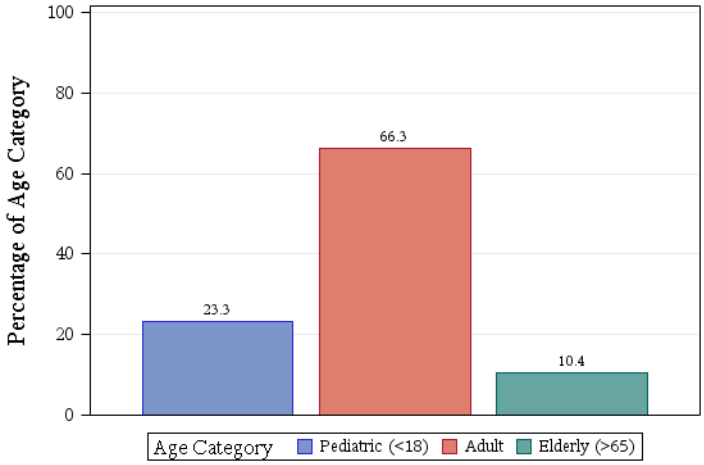
Automobile
2012-2014



Bicyclist
2012-2014

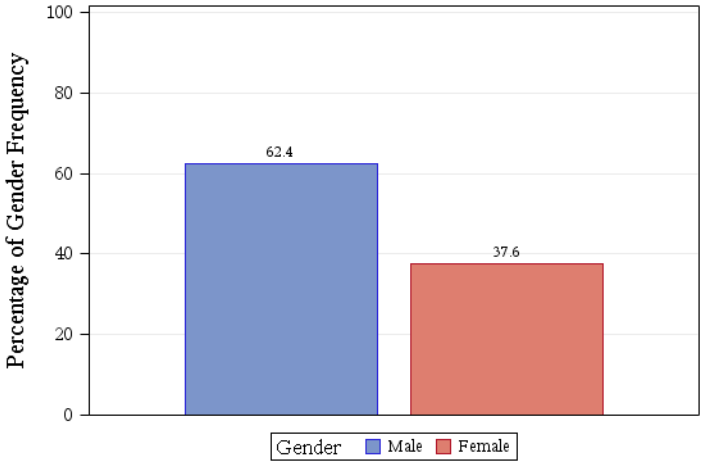


Pedestrian
2012-2014

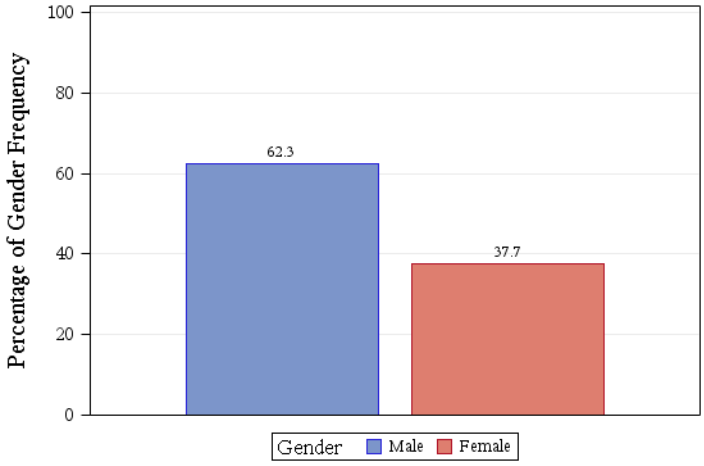


Gender- Motor Vehicle Collision

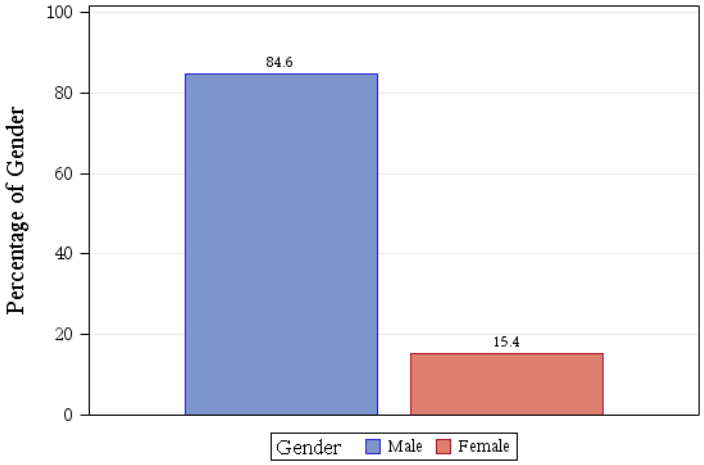
2012



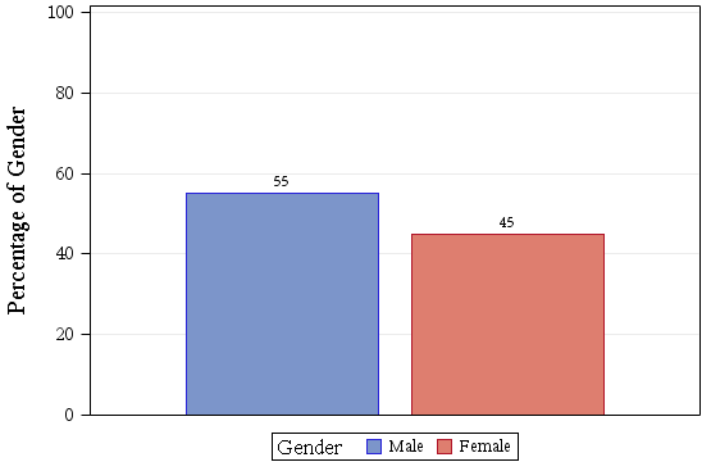
2013-2014



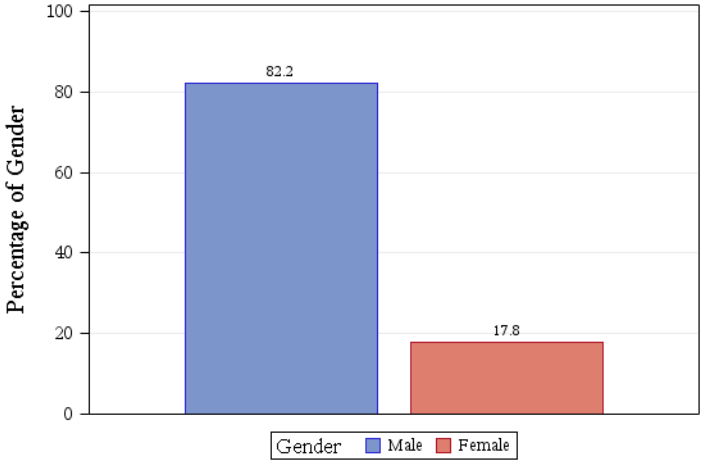
Motorcycle
2012-2014



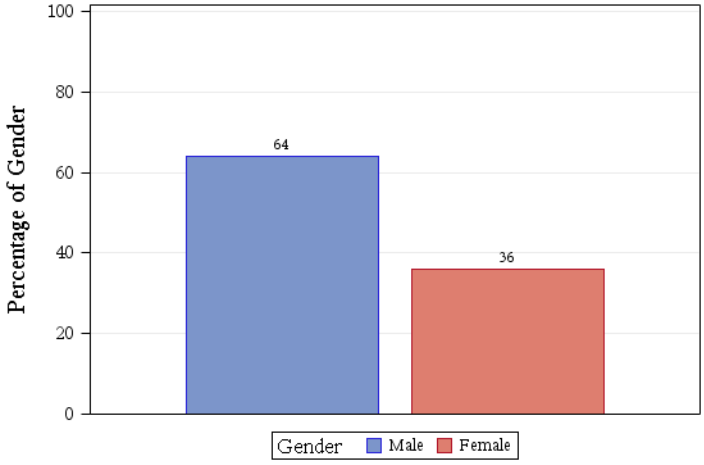
Automobile
2012-2014



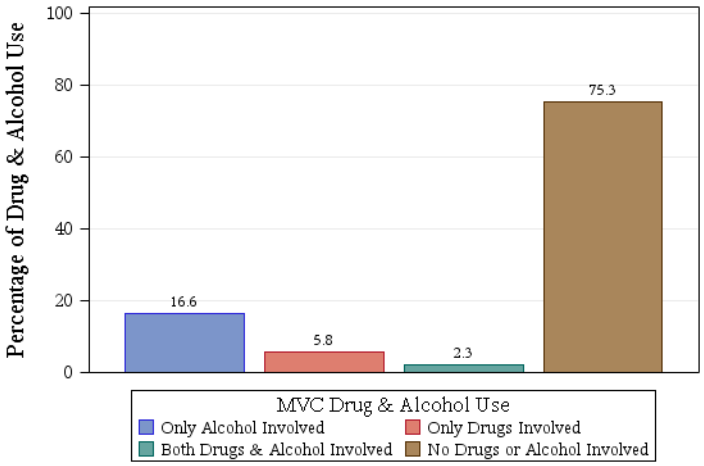
Bicyclist
2012-2014



Pedestrian
2012-2014



2012



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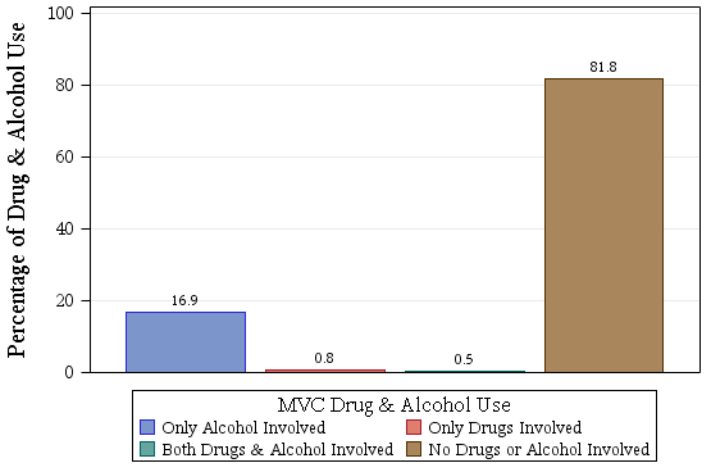
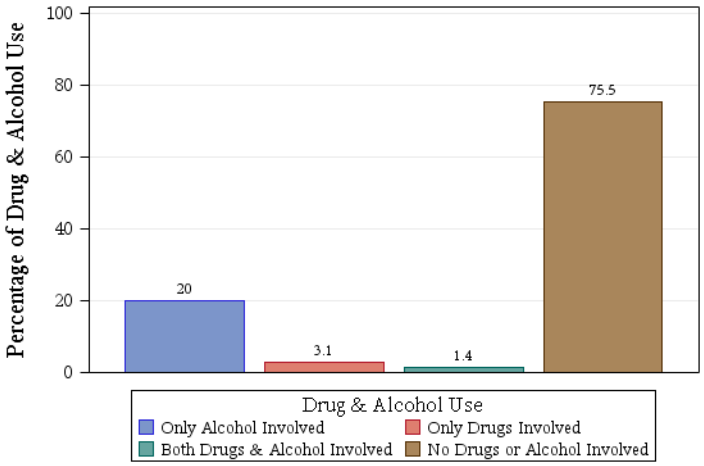
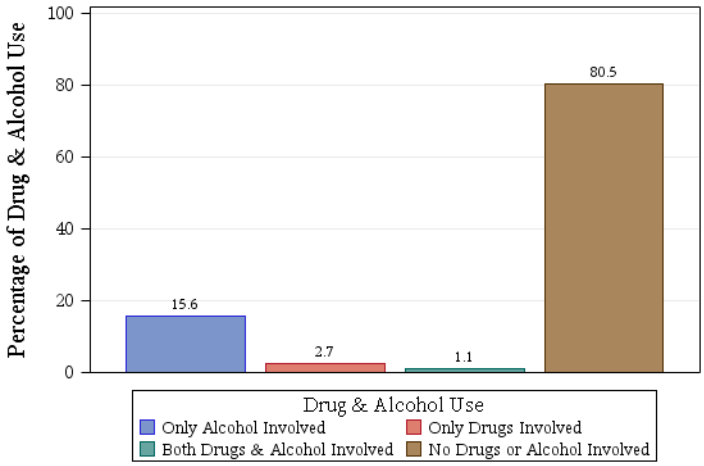


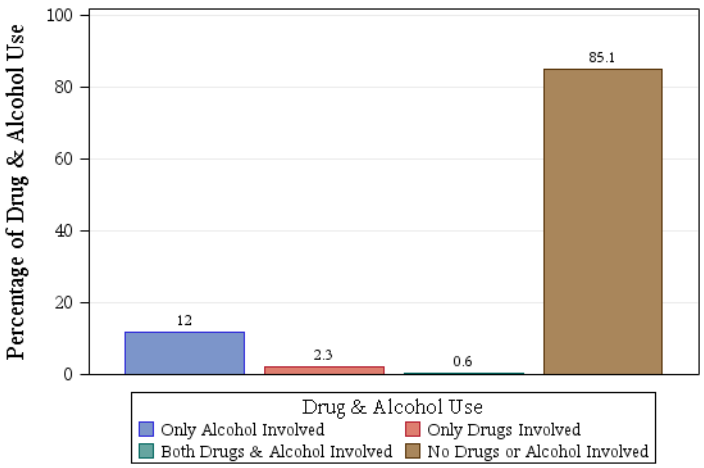
Motorcycle
2012-2014



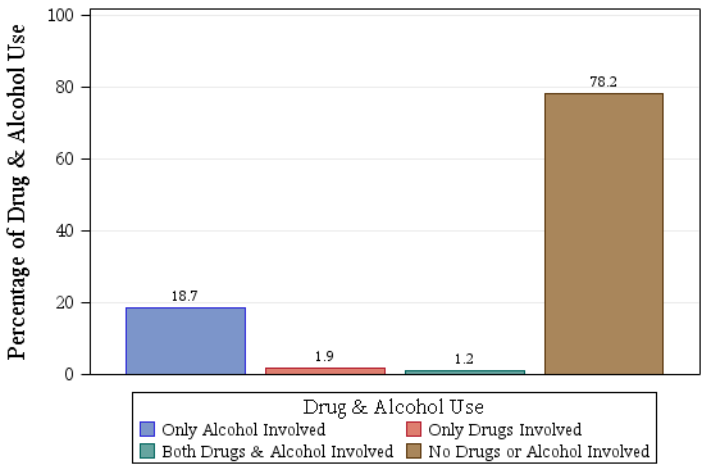
Automobile
2012-2014



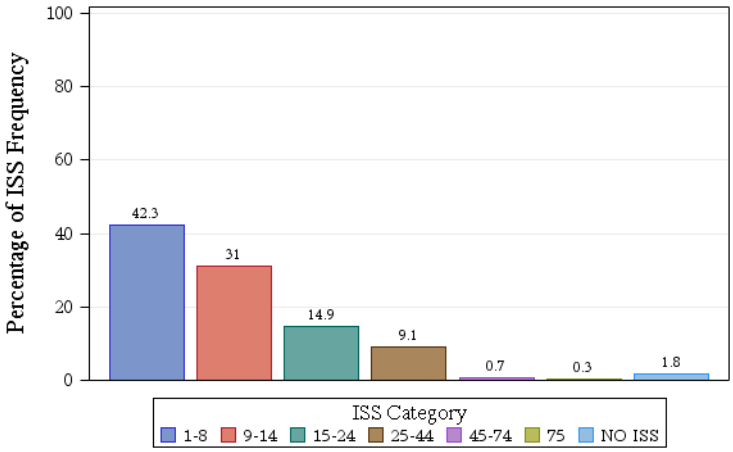
Bicyclist
2012-2014



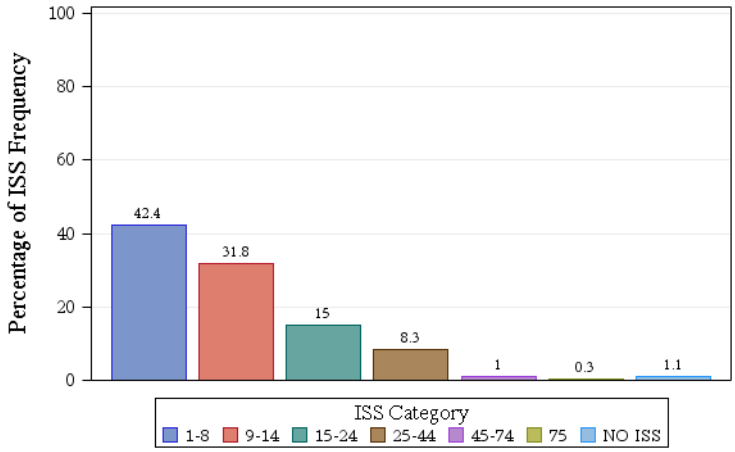
Pedestrian
2012-2014



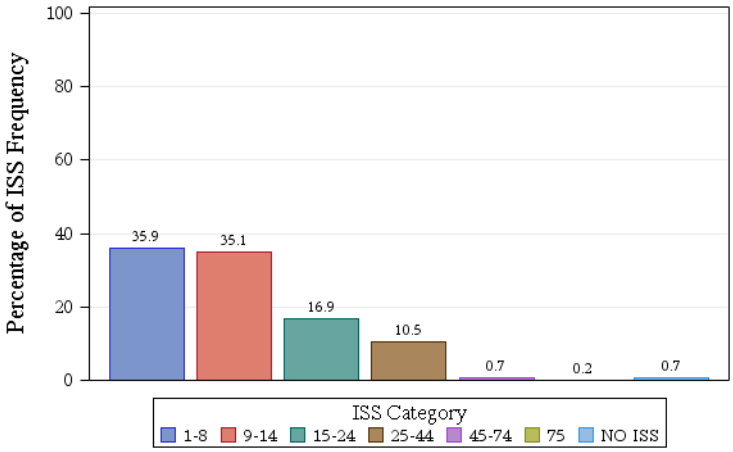
2012



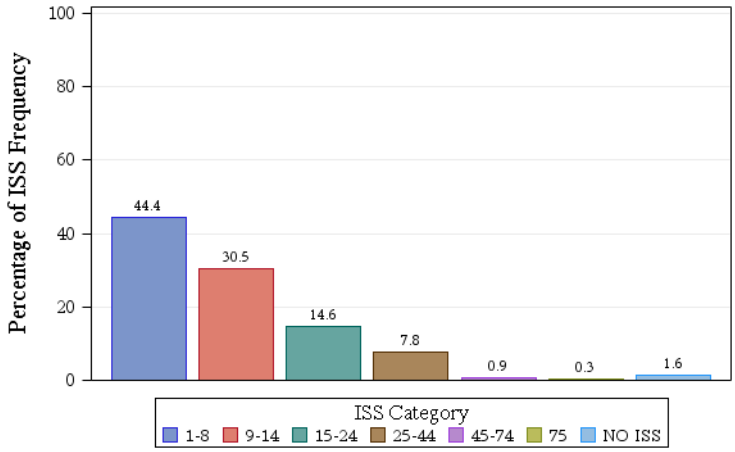
2013-2014



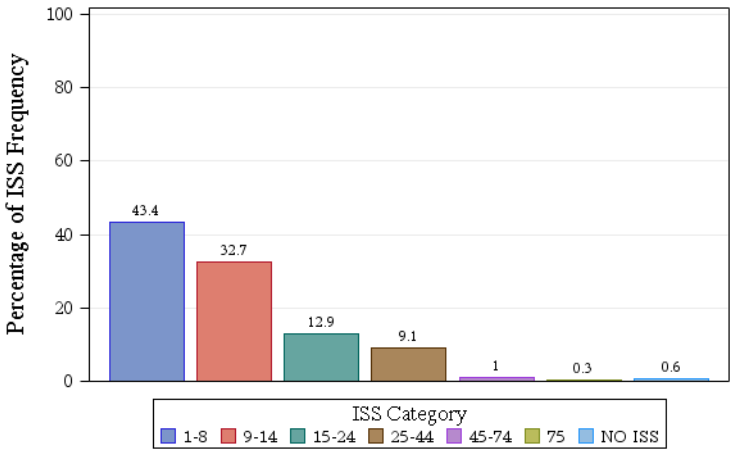
Motorcycle
2012-2014



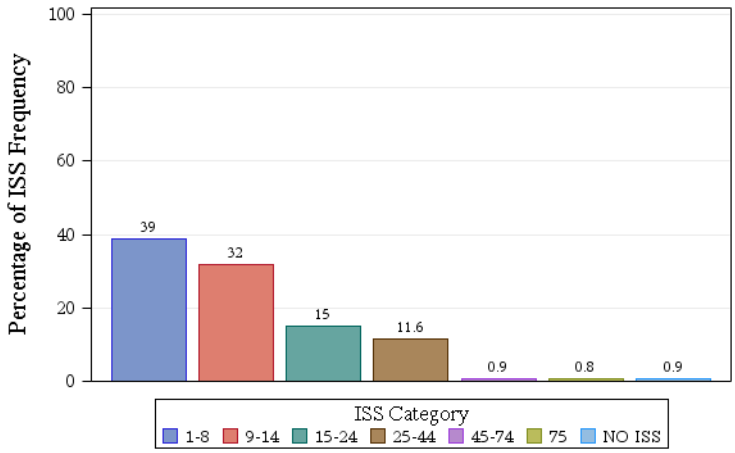
Automobile
2012-2014



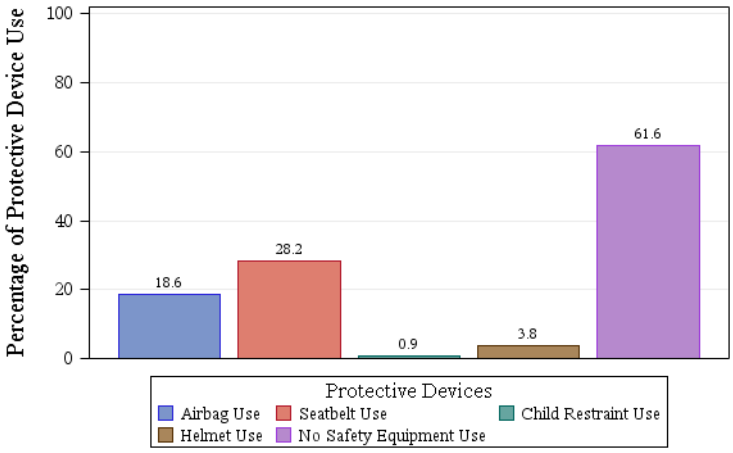
Bicyclist
2012-2014



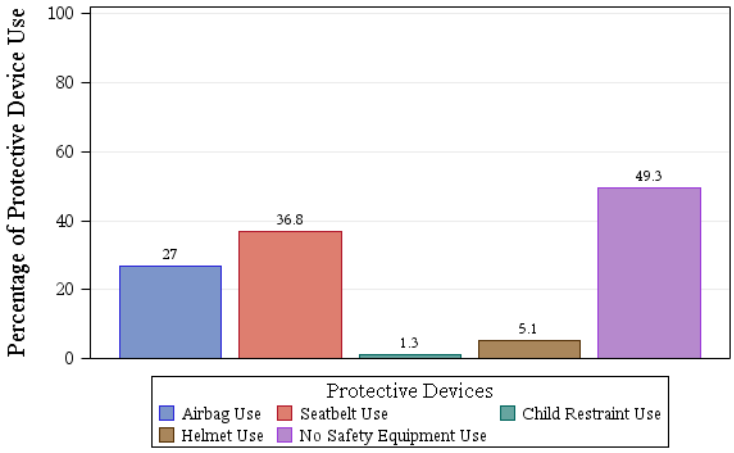
Pedestrian
2012-2014



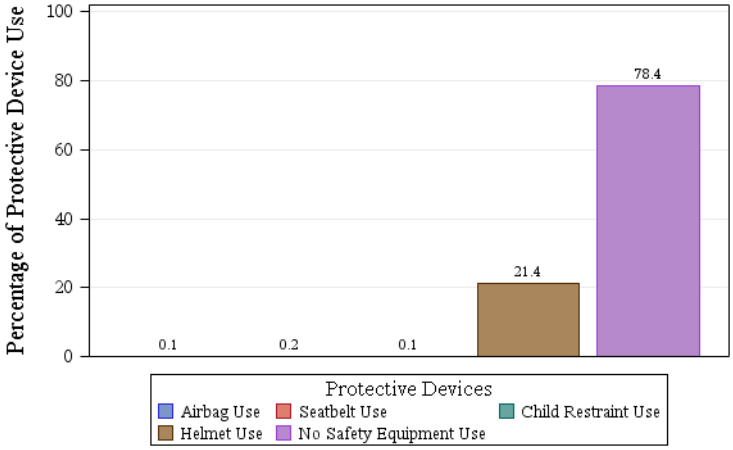
2012



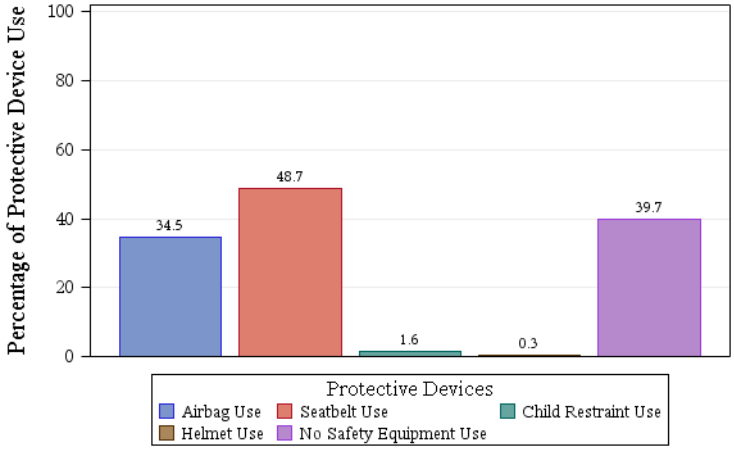
2013-2014



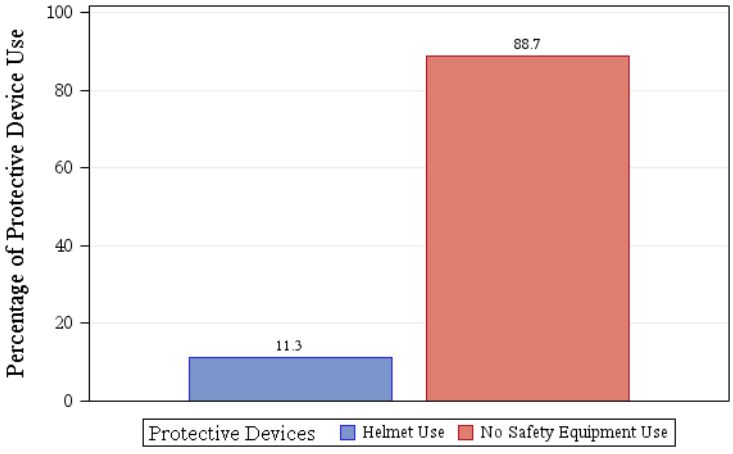
Motorcycle
2012-2014



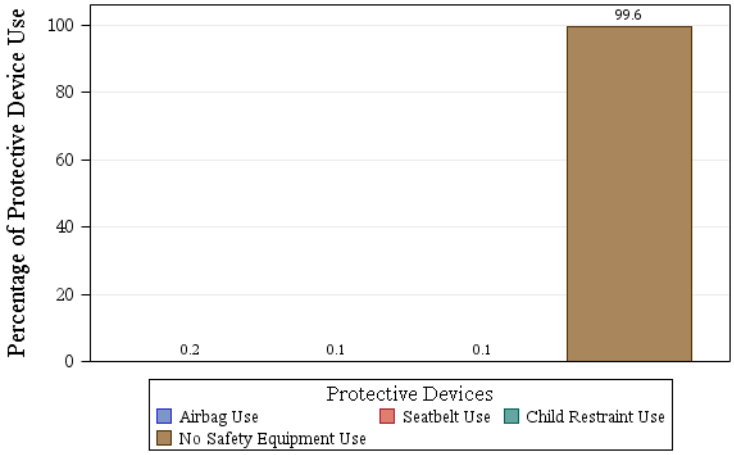
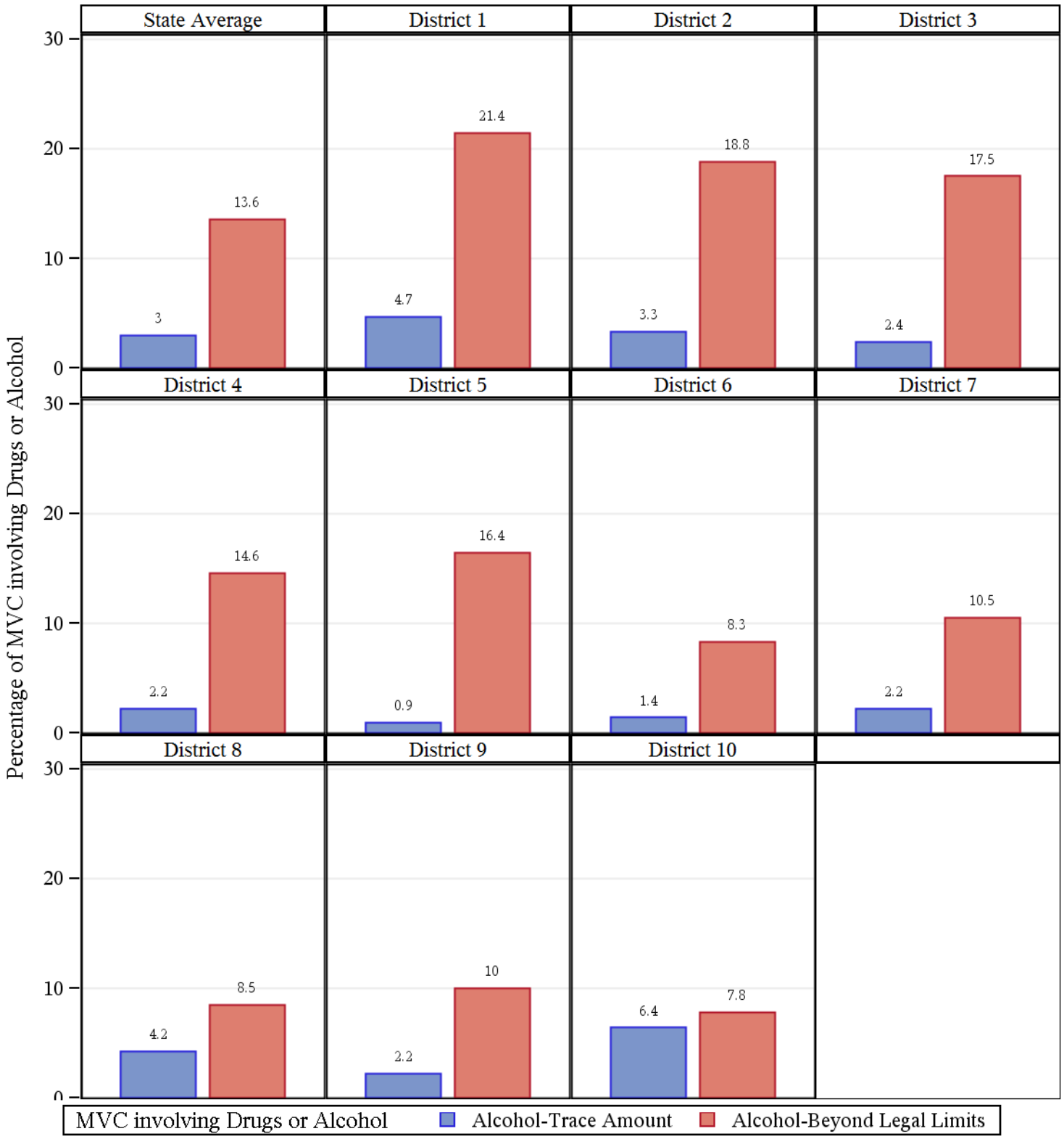
Automobile
2012-2014



Bicyclist
2012-2014



Pedestrian
2012-2014



Indiana Trauma Registry, November 1, 2013 - October 31, 2014
MVC involving Drugs or Alcohol By Public Health Preparedness Districts