

As an expansion to my role I have been training Indiana coroners on the Indiana Coroner Case Management System while continuing to train hospitals on the Indiana Trauma Registry.-Ramzi

On December 6th, Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended Drugs: The real deal, a conversation with the Coroner and County EMS Director (LaPorte County).

On December 14th, Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended the District 3 Trauma Regional Advisory Council in Fort Wayne.

On December 15th, Camry Hess (Data Analyst) and Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended the Indiana State Trauma Care Committee and Indiana Trauma Network meeting.

On December 19th, Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended the District 3 Trauma Regional Advisory Council in South Bend.

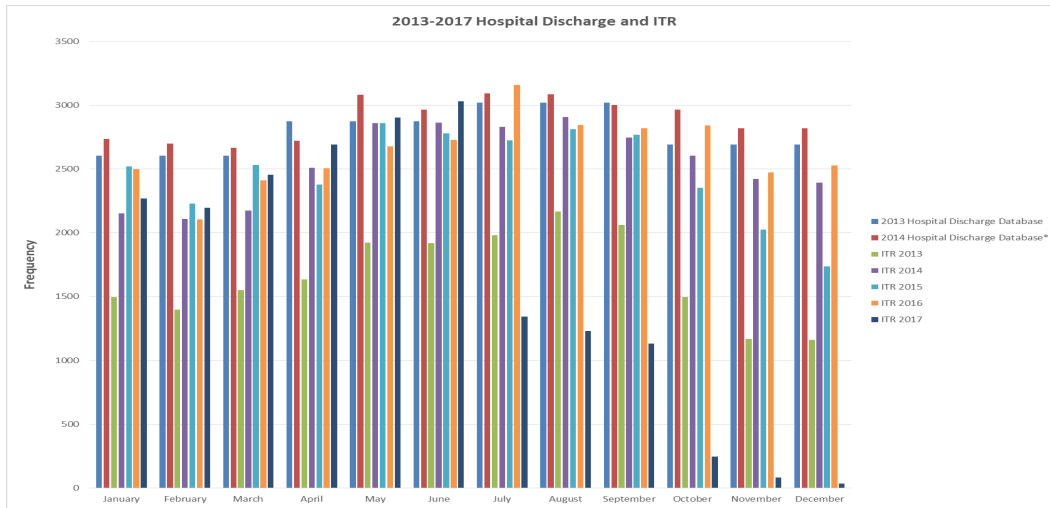
On December 20th, Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended the District 5 Trauma Regional Advisory Council in Indianapolis.

On December 22nd, Ramzi Nimry (Statewide Trauma System Development and Training Manager) trained Fayette Regional Hospital on the trauma registry.

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

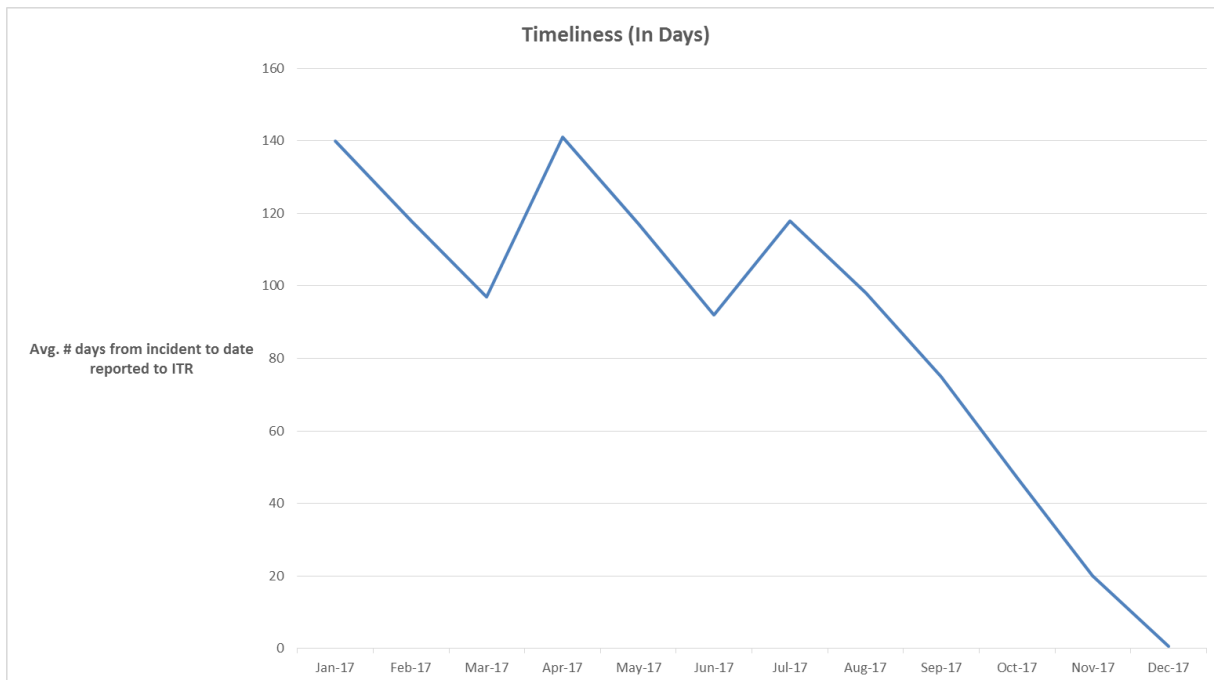
The Hospital Discharge database, also maintained by the ISDH, contains all records of patients cared for in Indiana hospitals. We compared patient records from the ITR with the Hospital Discharge database to know how complete is the ITR's data.



Timeliness

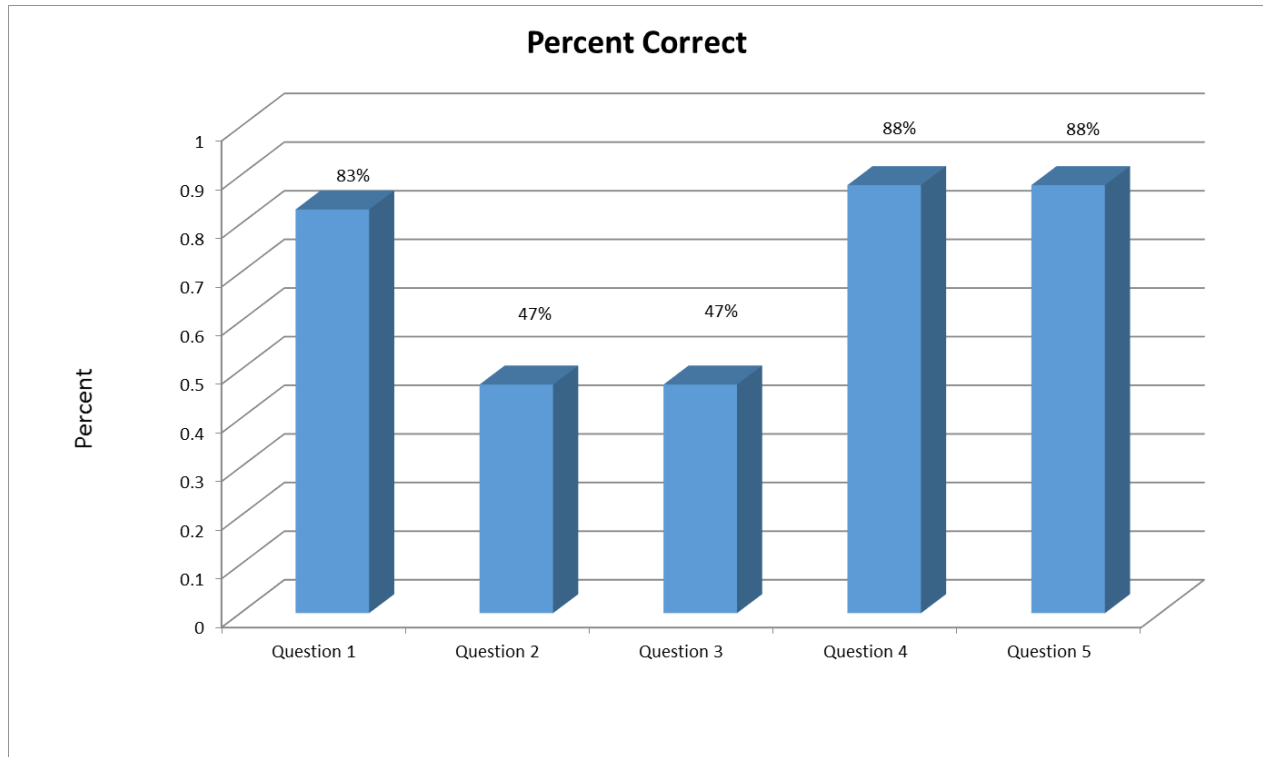
Timeliness increases as facilities wait until the data submission deadline to submit data to the ITR. Hospitals are asked to report data on the national trauma (TQIP) reporting schedule.

The decrease in timeliness from September 2017 until December 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 December we sent out the forty-fourth monthly quiz for the inter-rater reliability study. There were 61 participants from 38 hospitals who completed the quiz. The percent correct was 71% and the free-marginal kappa was 0.43. 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

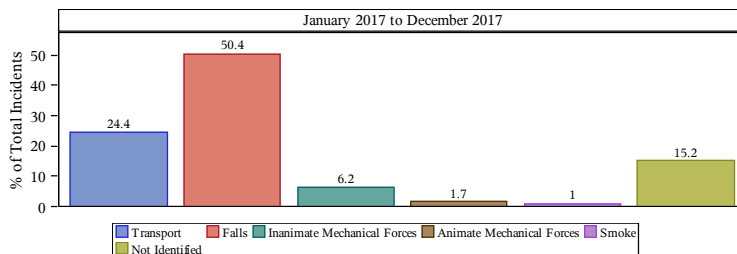
The number of linked EMS to trauma cases was 3,184 for Q1 2017 data. Trauma data is due on a quarterly basis.

Accessibility

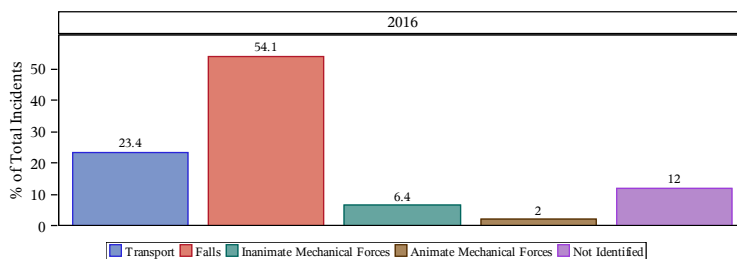
The average time to complete data requests was 1.3 days for aggregate requests (3 total), 3 days for self-reports (1 total), and 1 day for identifiable reports (1 report).

Cause of Injury (COI)

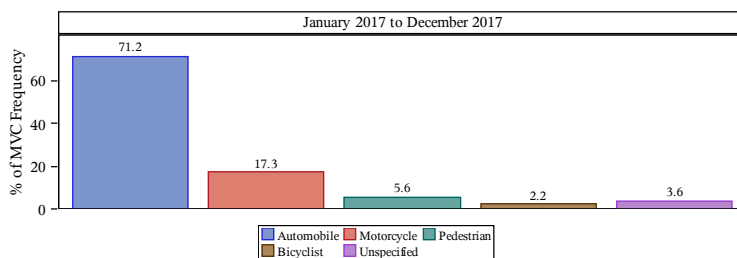
Cause of Injury (COI)



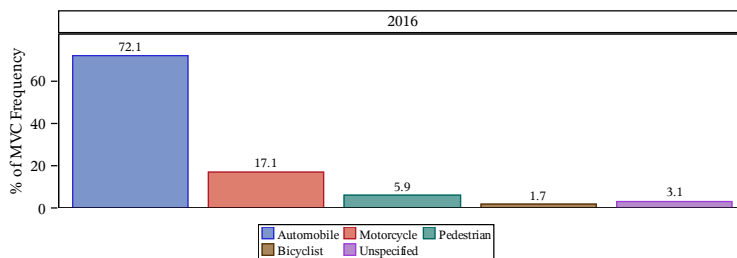
Cause of Injury (COI)



COI-Motor Vehicle Collision (MVC)

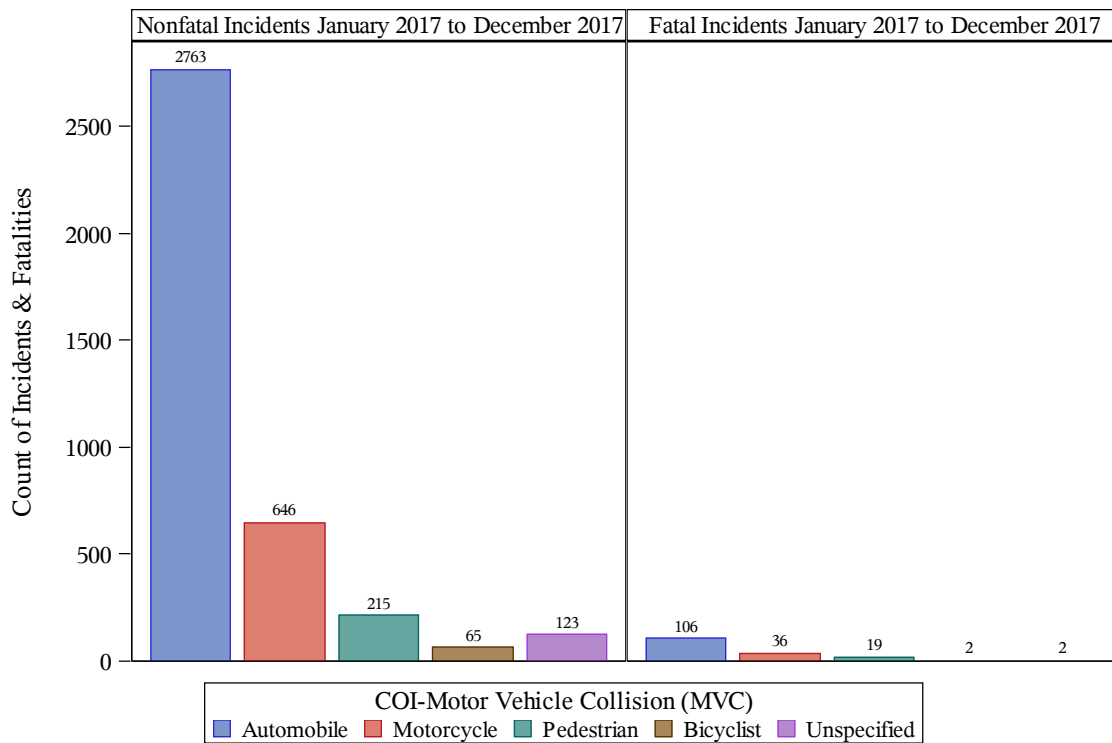
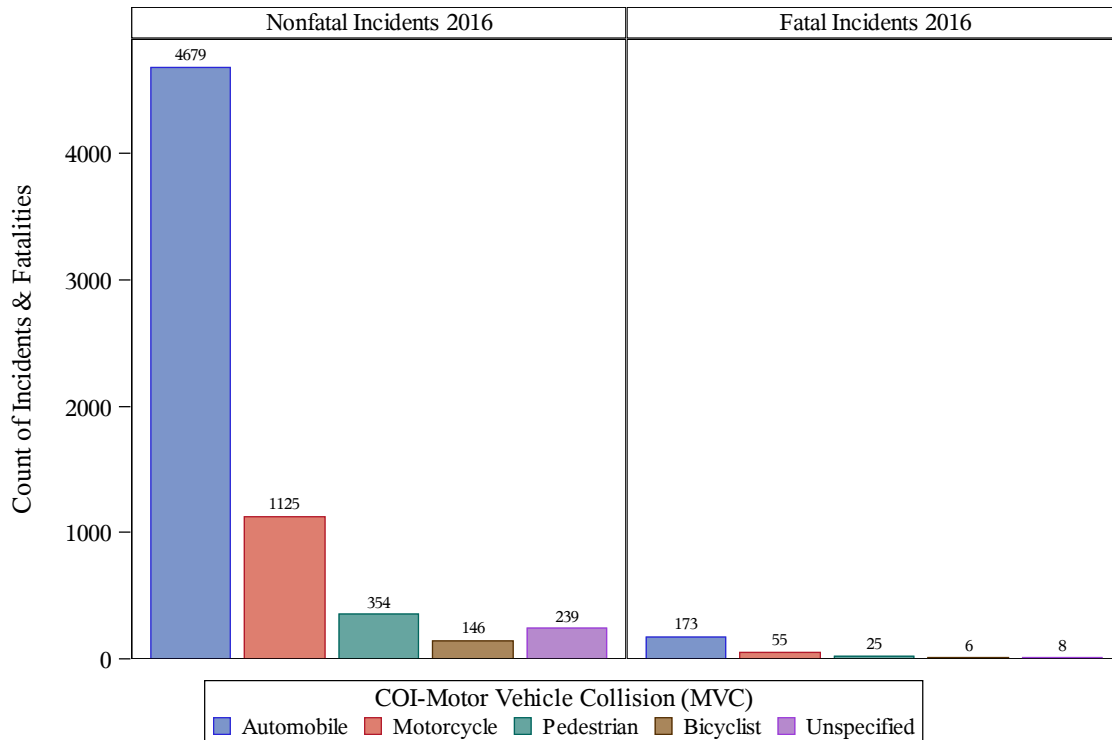


COI-Motor Vehicle Collision (MVC)

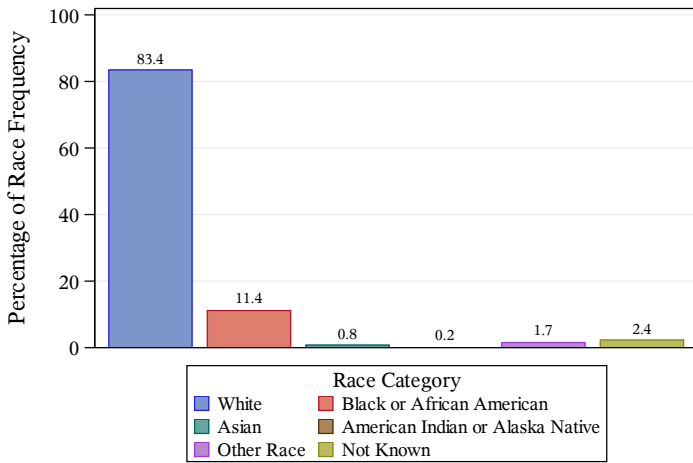


Motor Vehicle Collision

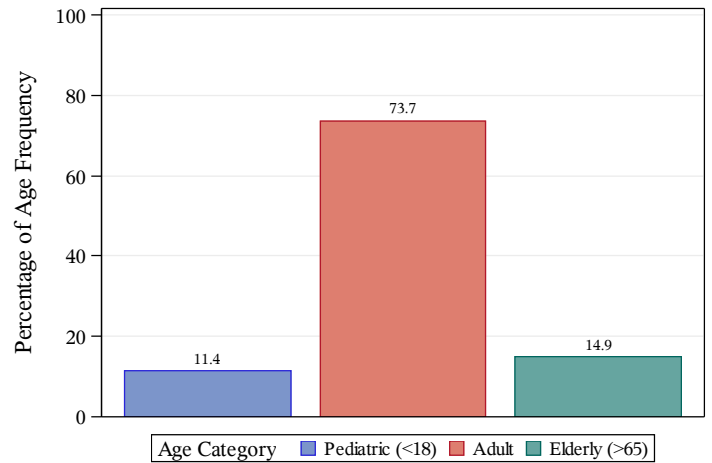
COI-MVC Nonfatal Incidents and Fatal Incidents



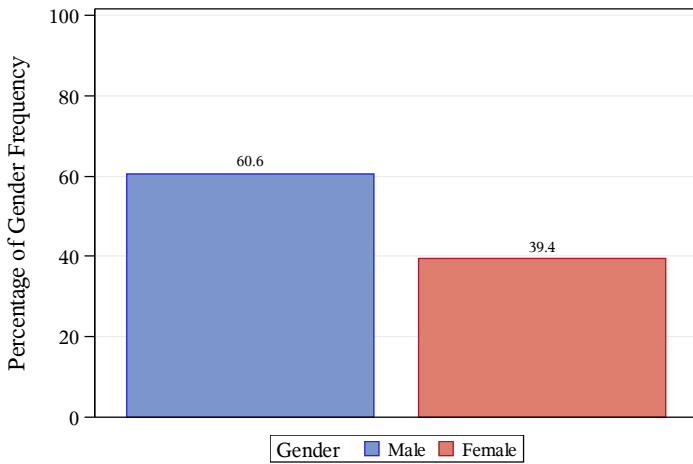
Race



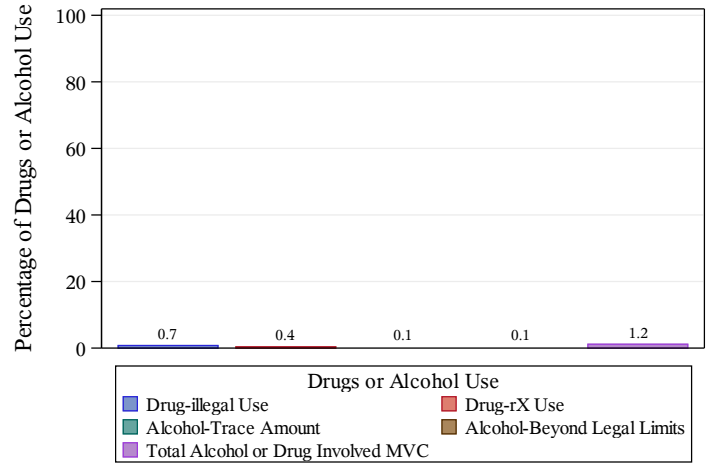
Age



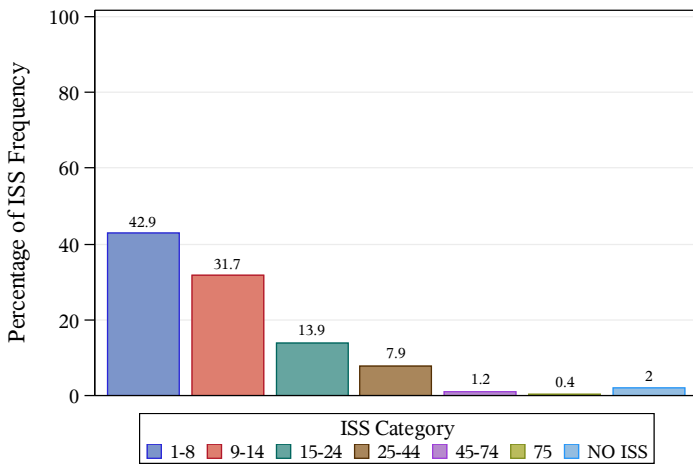
Gender



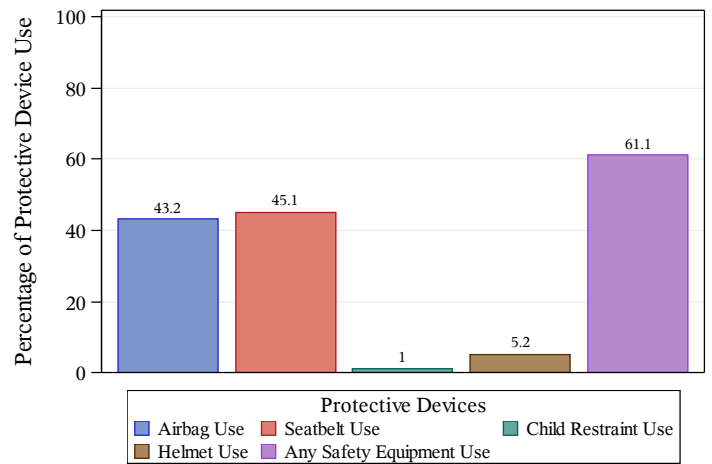
Drug & Alcohol Use



Injury Severity Score

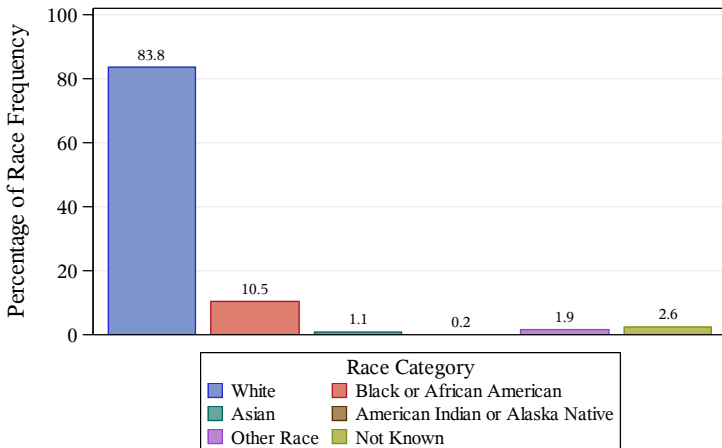


Protective Devices

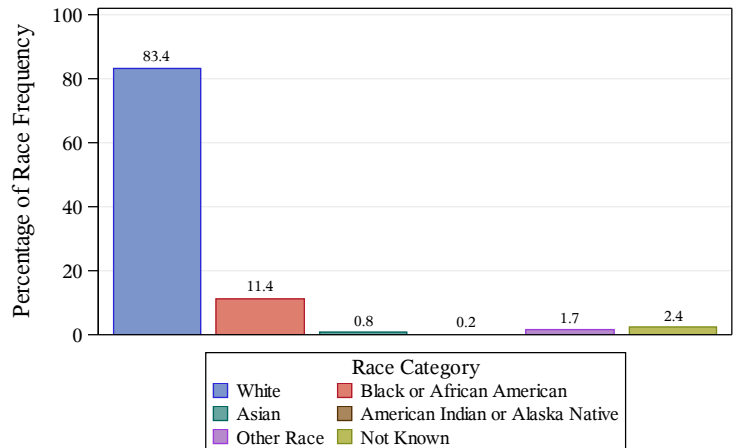


Injury Severity Score (ISS) is a measure of how bad the injury is. Scores over 15 are considered major trauma. A score of 75 is considered not survivable.

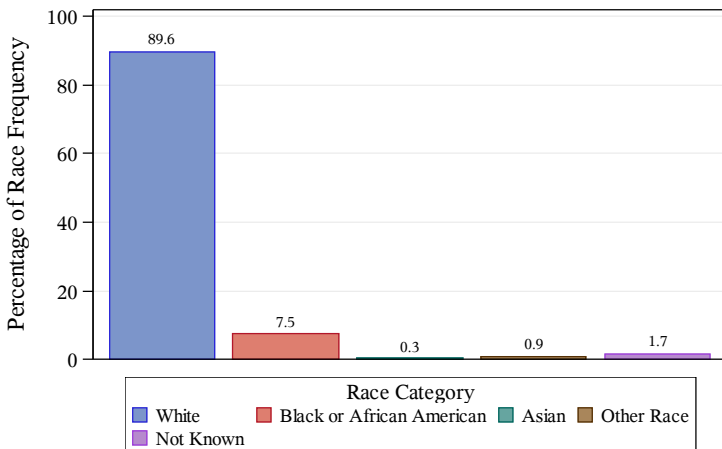
2016



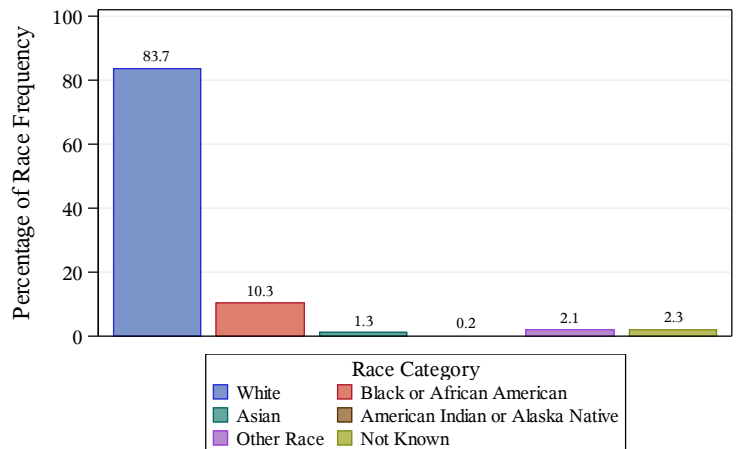
January 2017 to December 2017



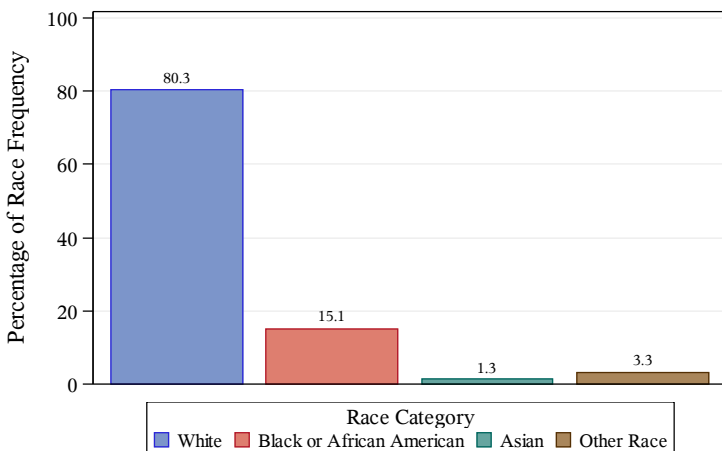
Motorcycle
January 2017 to December 2017



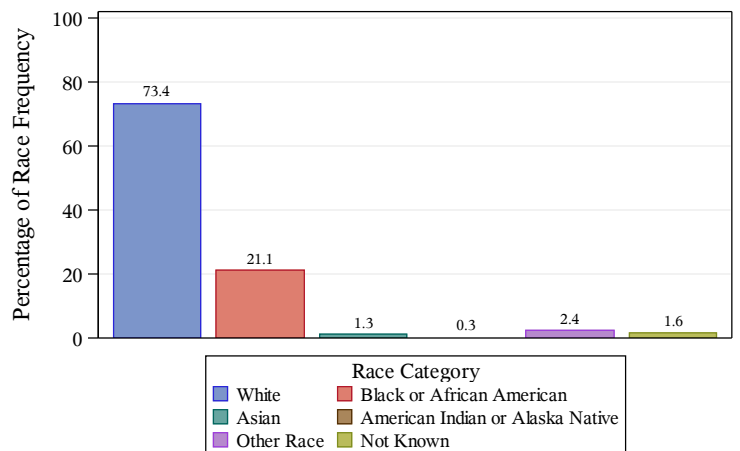
Automobile
January 2017 to December 2017



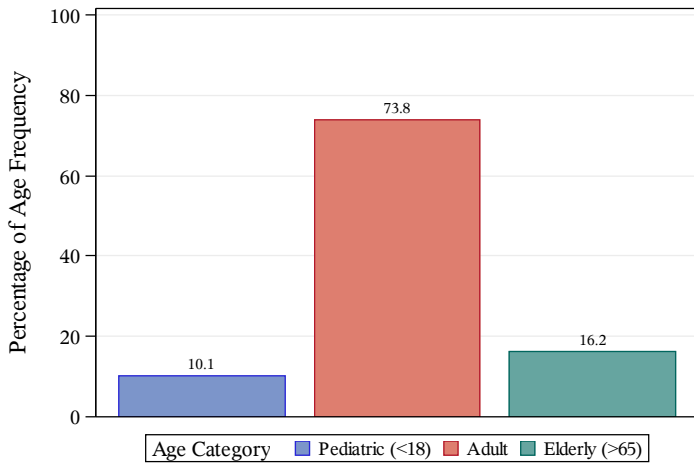
Bicyclist
January 2017 to December 2017



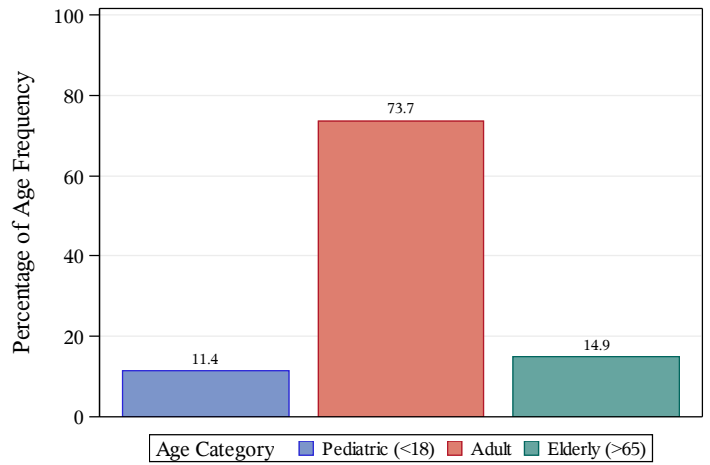
Pedestrian
January 2017 to December 2017



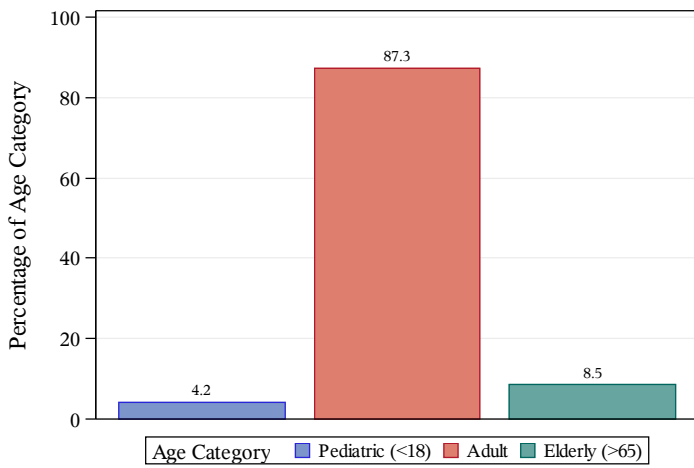
2016



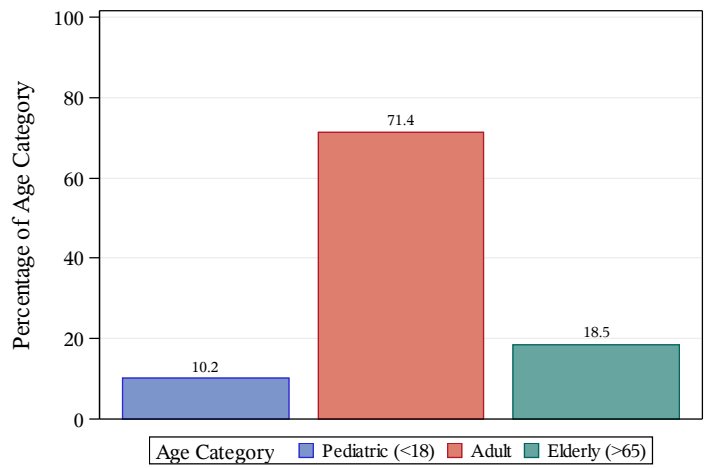
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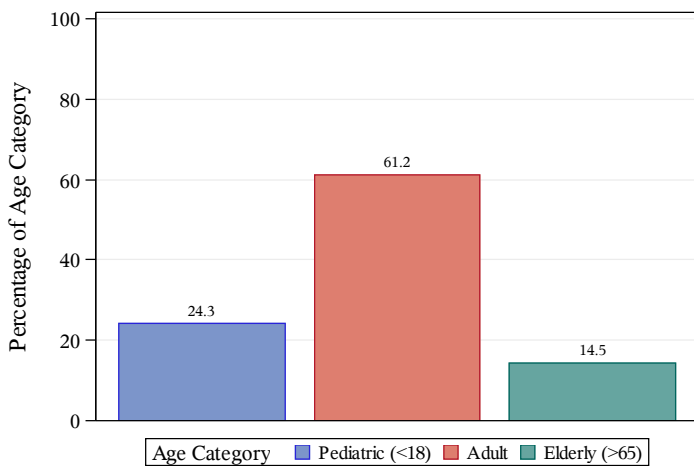
Motorcycle
 January 2017 to December 2017



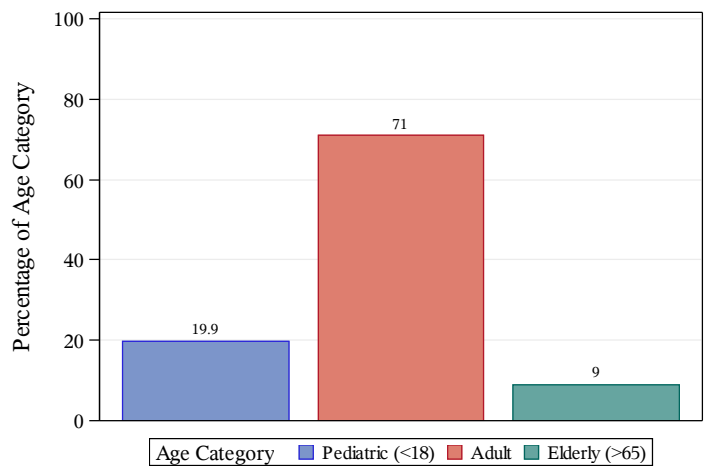
Automobile
 January 2017 to December 2017



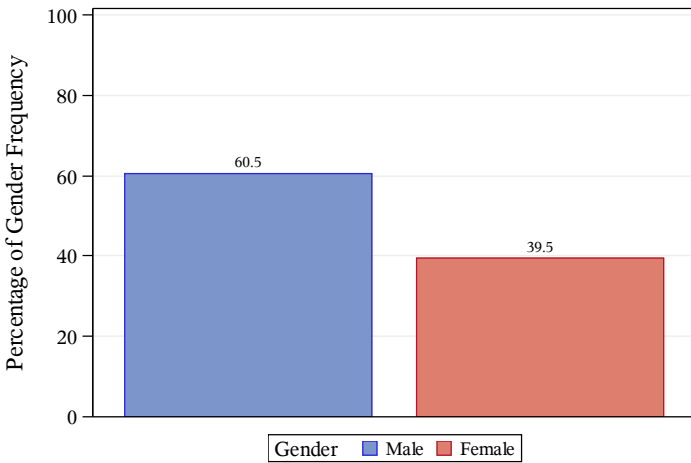
Bicyclist
 January 2017 to December 2017



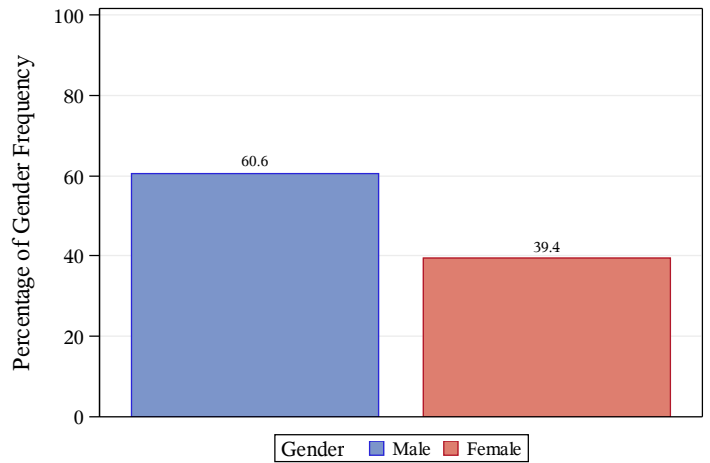
Pedestrian
 January 2017 to December 2017



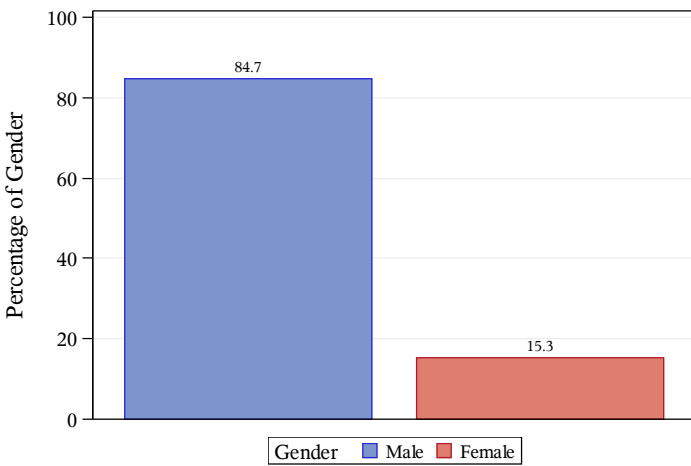
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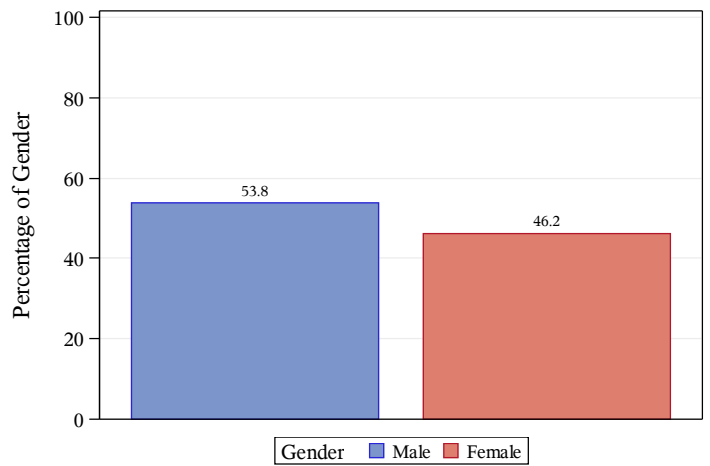
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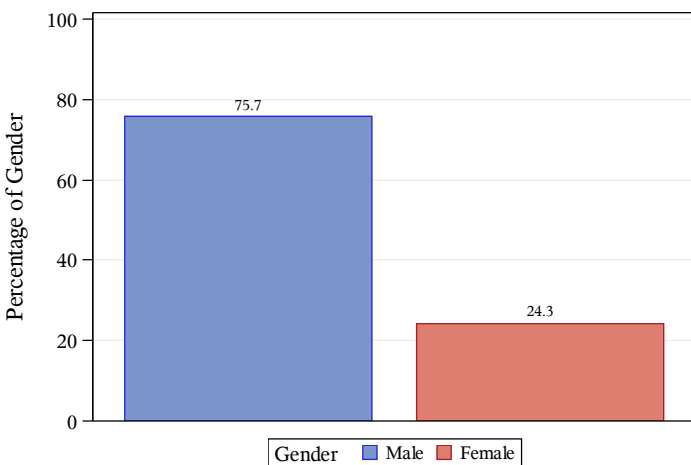
Motorcycle
January 2017 to December 2017



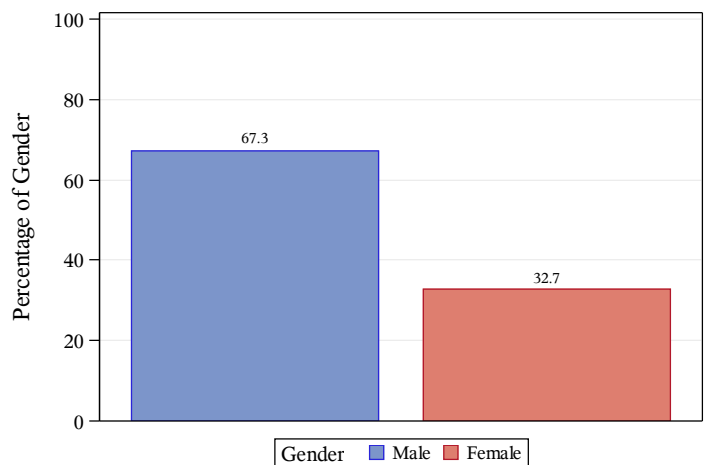
Automobile
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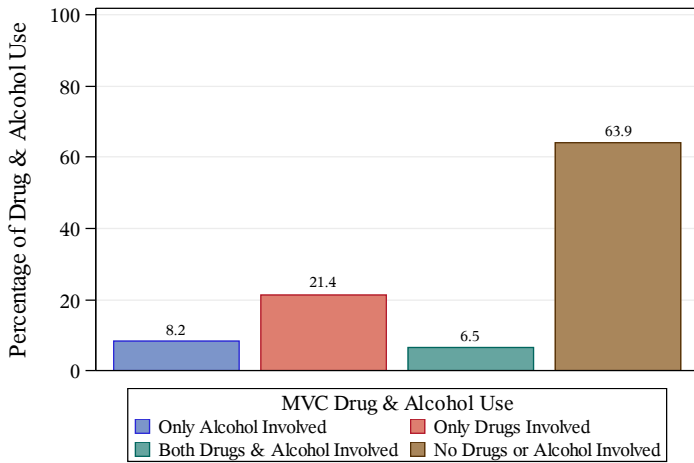
Bicyclist
January 2017 to December 2017



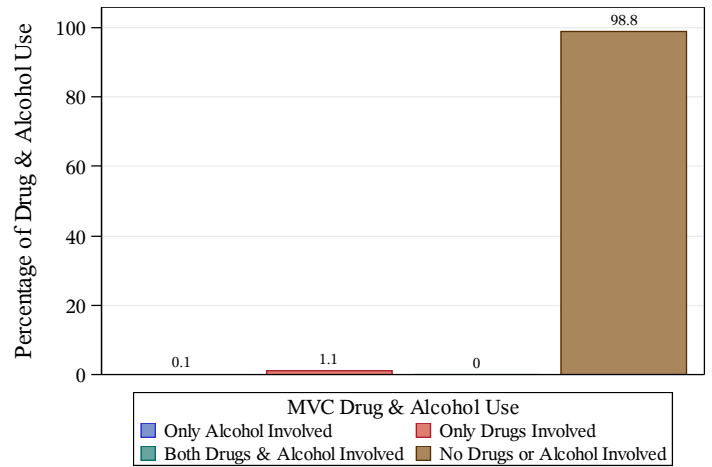
Pedestrian
January 2017 to December 2017



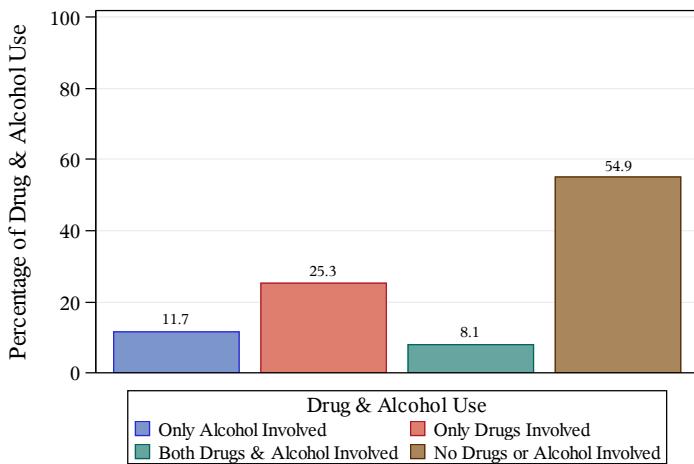
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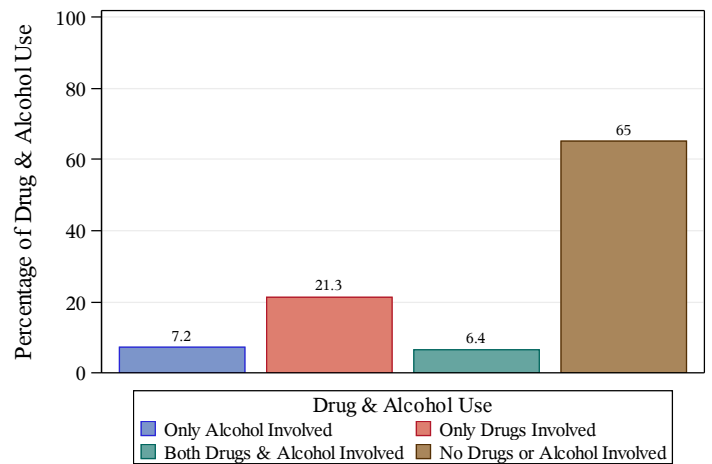
January 2017 to December 2017



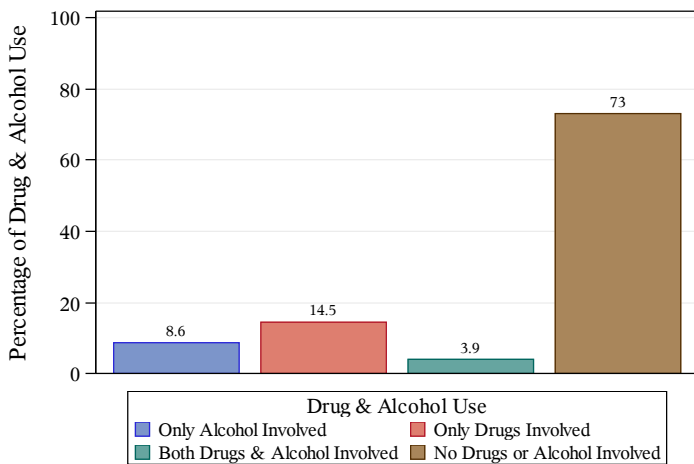
Motorcycle
 January 2017 to December 2017



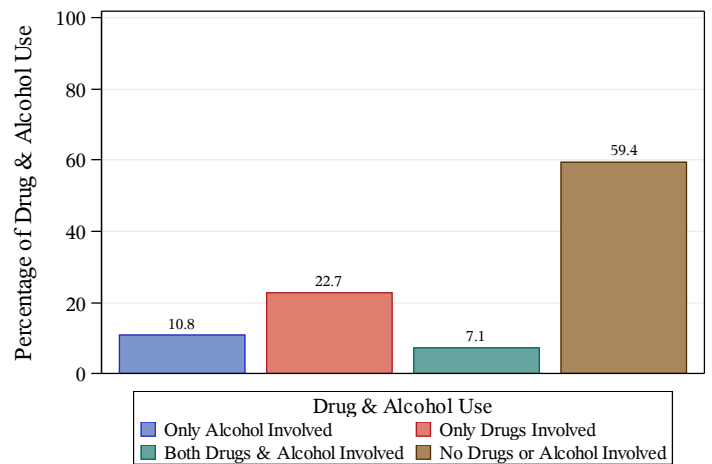
Automobile
 January 2017 to December 2017



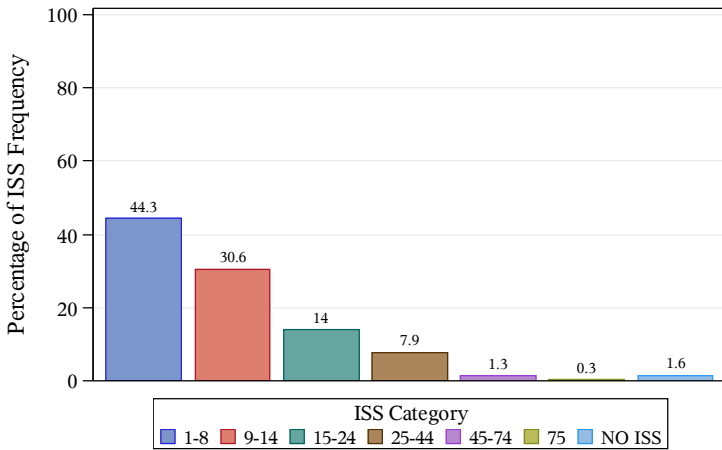
Bicyclist
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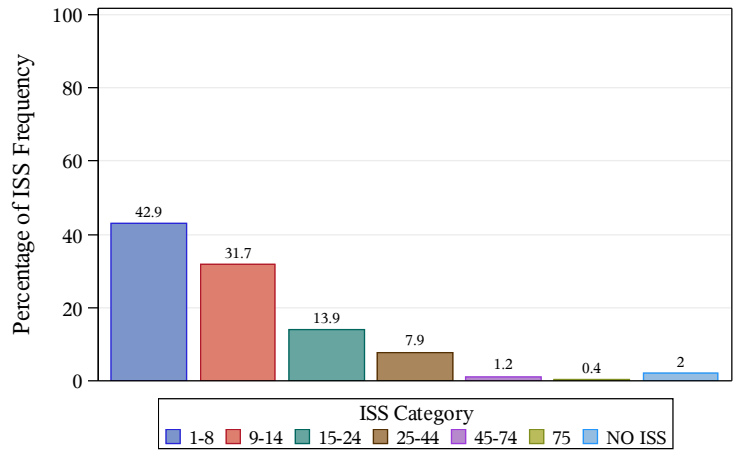
Pedestrian
 January 2017 to December 2017



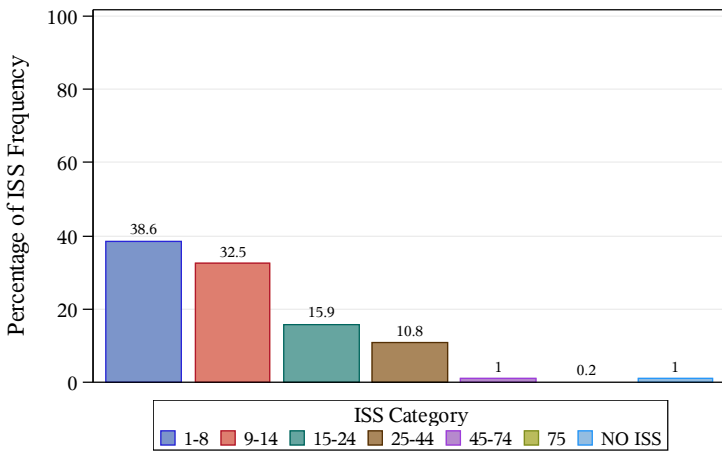
2016



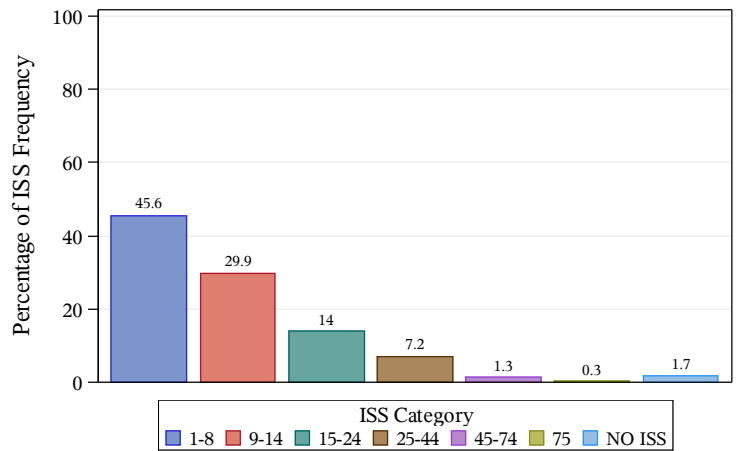
January 2017 to December 2017



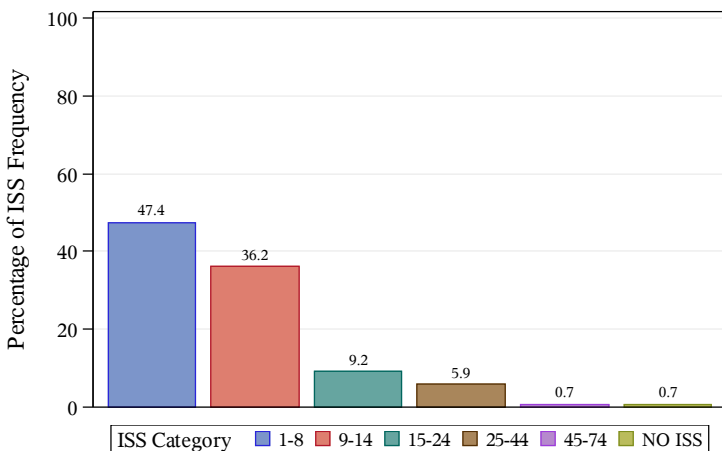
Motorcycle
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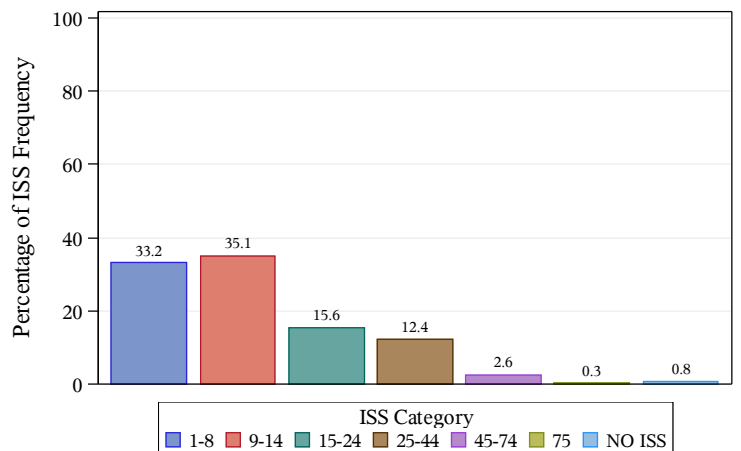
Automobile
 January 2017 to December 2017



Bicyclist
 January 2017 to December 2017

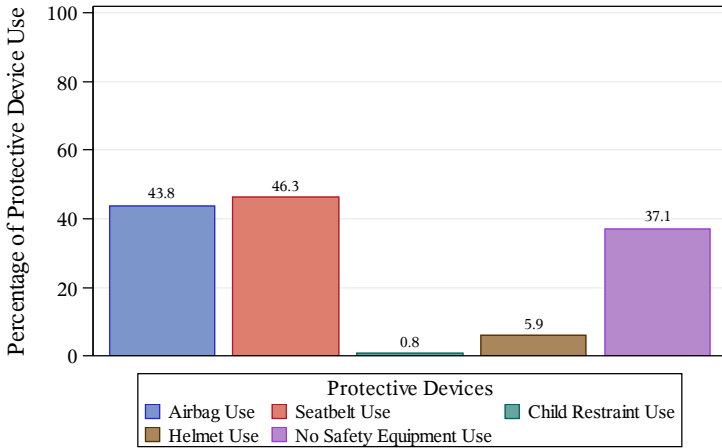


Pedestrian
 January 2017 to December 2017

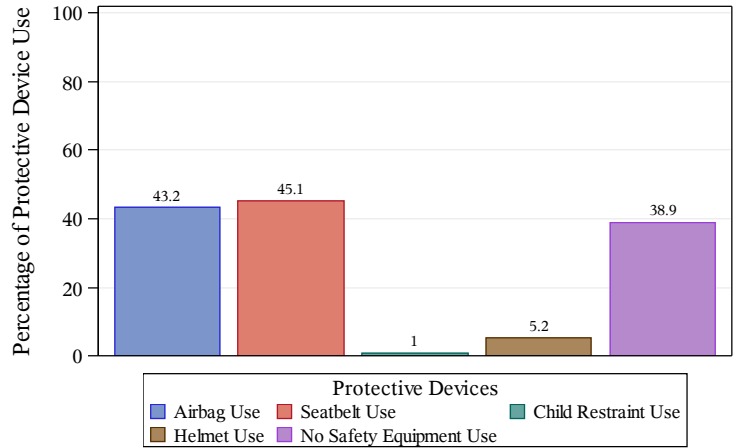


Protective Devices- Motor Vehicle Collision

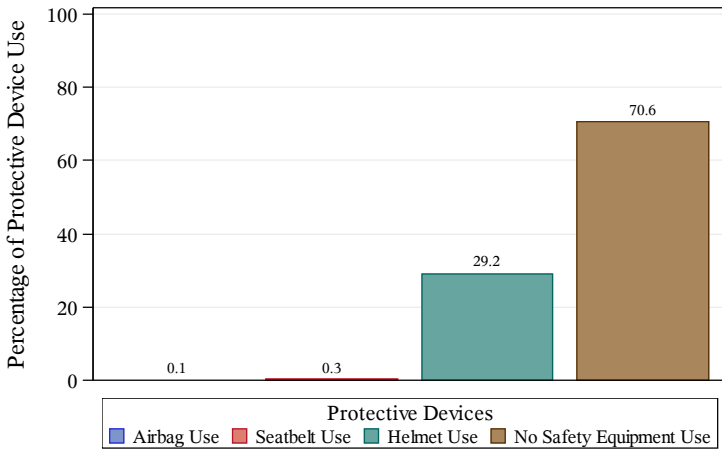
2016



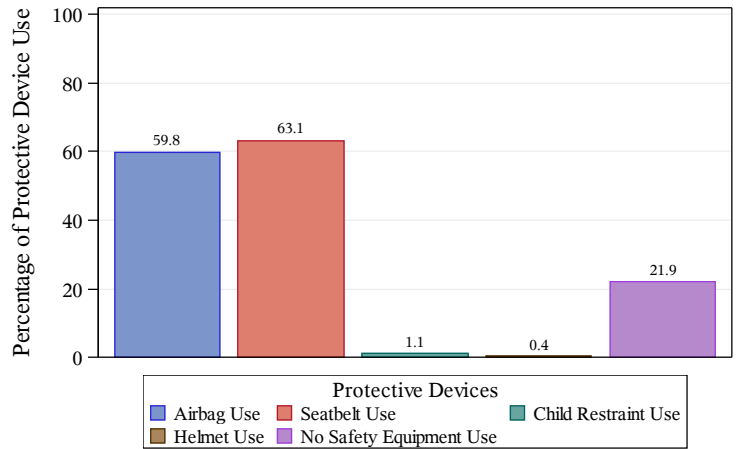
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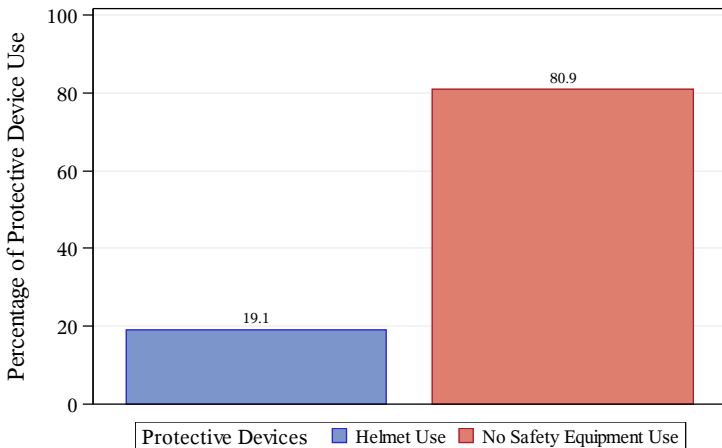
Motorcycle
January 2017 to December 2017



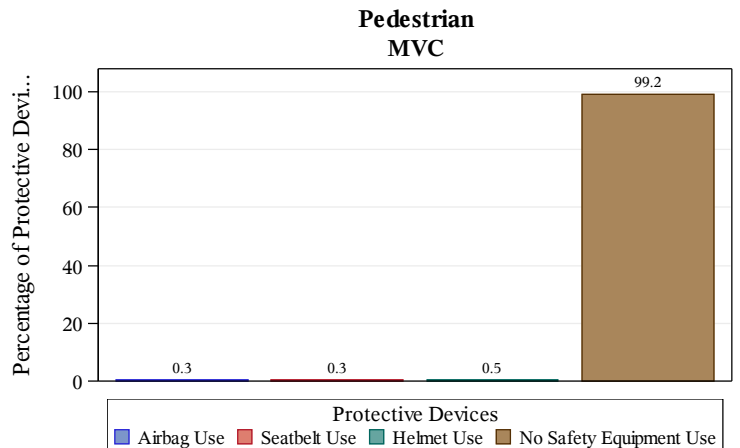
Automobile
January 2017 to December 2017

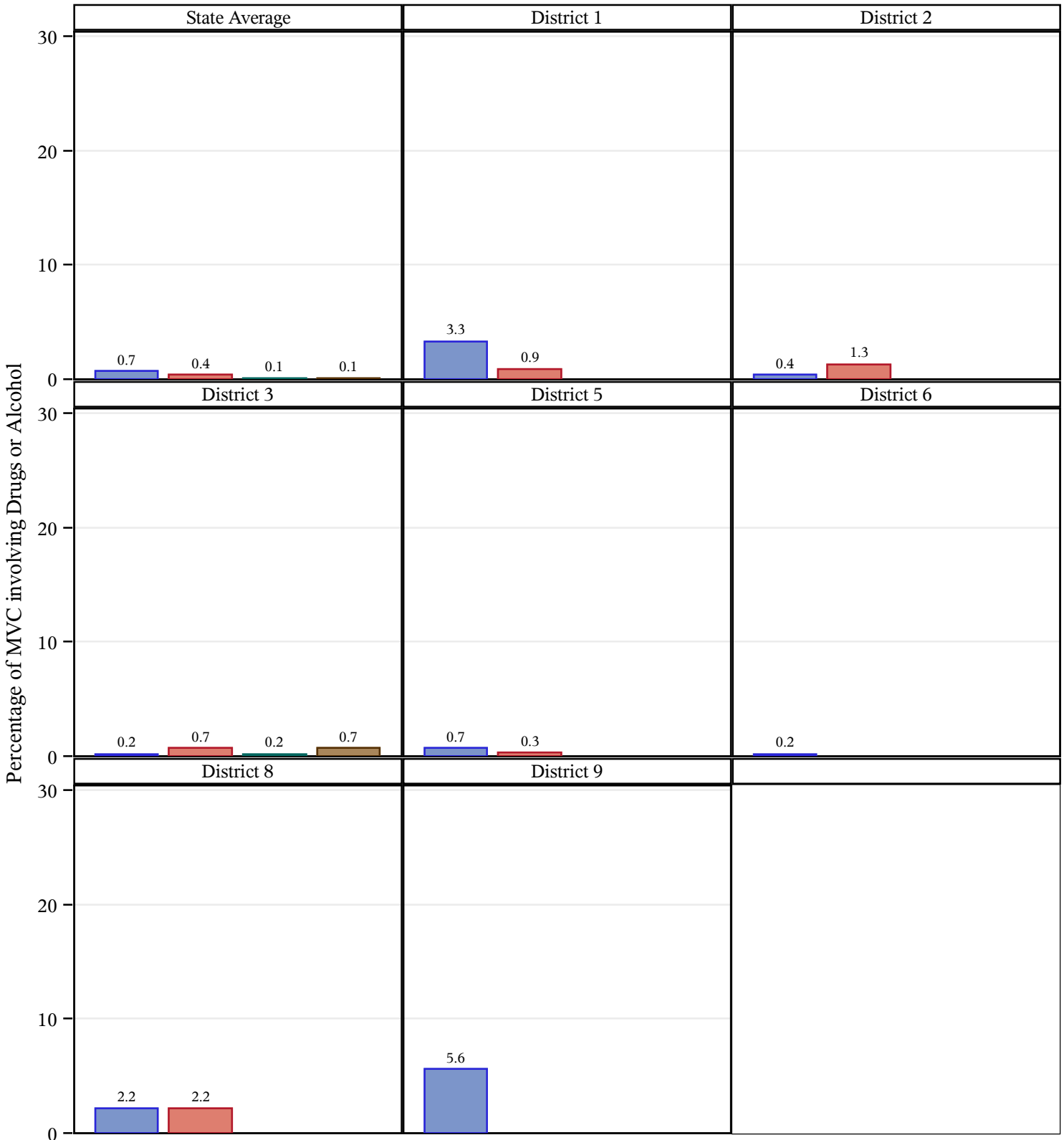


Bicyclist
January 2017 to December 2017



Pedestrian
January 2017 to December 2017





MVC involving Drugs or Alcohol

- Drug-illegal Use
- Drug-rX Use
- Alcohol-Trace Amount
- Alcohol-Beyond Legal Limits