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

On July 2, Ramzi Nimry (Statewide Trauma System Development and Training Manager) trained the Washington County coroner on the Indiana Coroner Case Management System (INCCMS).

On July 12, Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended the District 10 TRAC at Memorial Hospital and Health Care Center in Jasper, IN.

On July 17, Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended the ISDH/IDHS Regional Meeting in Plymouth, IN.

On July 20, Ramzi Nimry (Statewide Trauma System Development and Training Manager) presented at the INVDRS Advisory Board Meeting.

On July 24, Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended the PECC Advisory Board Meeting at Indianapolis EMS.

On July 25, Ramzi Nimry (Statewide Trauma System Development and Training Manager) attended the ISDH/IDHS Regional Meeting in Indianapolis, IN.

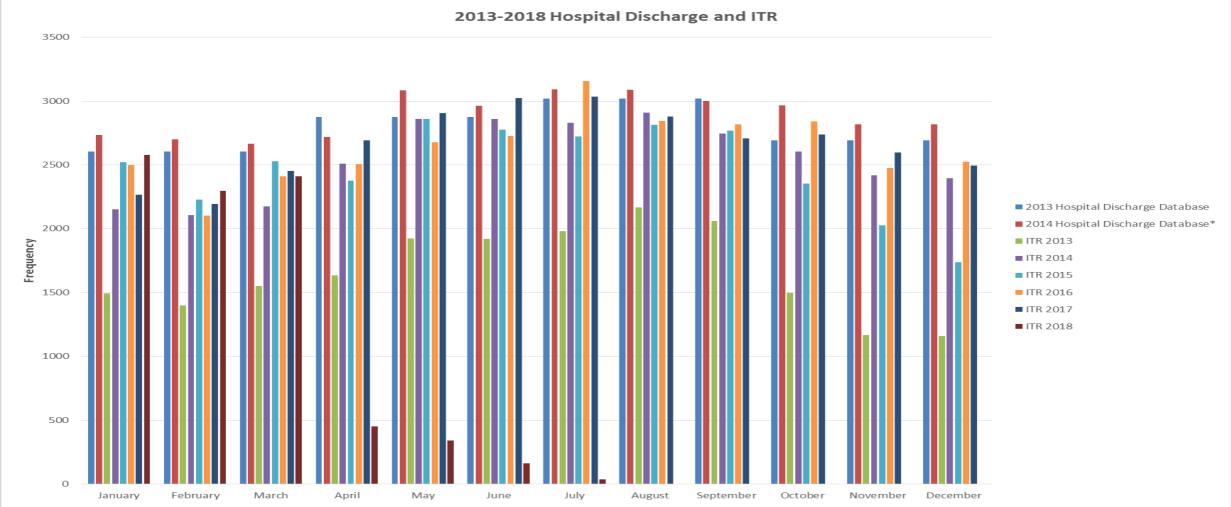
# Indiana Trauma Registry

## Monthly Report for July 2018

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

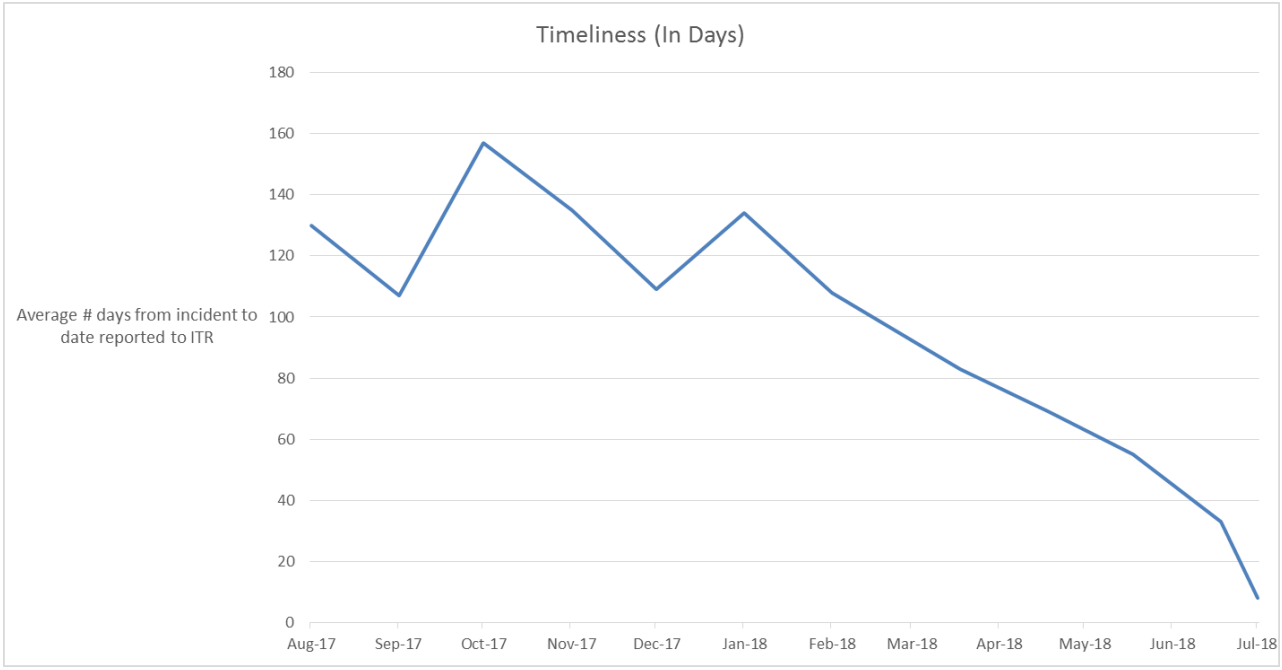
The Hospital Discharge database, also maintained by the ISDH, contains all records of patients cared for in Indiana hospitals. We compared patient records from the ITR with the Hospital Discharge database to know how complete is the ITR's data.




## Timeliness

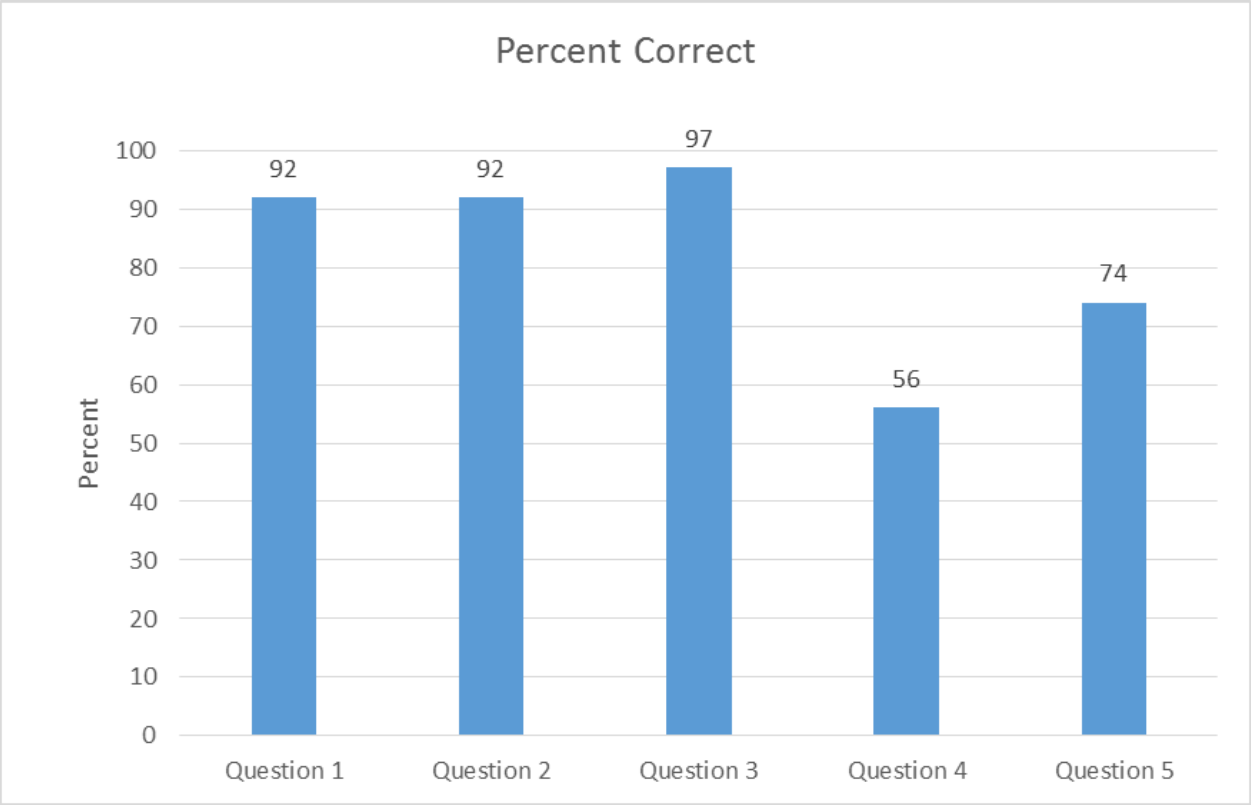
Timeliness increases as facilities wait until the data submission deadline to submit data to the ITR. Hospitals are asked to report data on the national trauma (TQIP) reporting schedule.

The decrease in timeliness from June 2018 until July 2018 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 May we sent out the forty-eighth monthly quiz for the inter-rater reliability study. There were 39 participants from 30 hospitals who completed the quiz. The percent correct was 82% and the free-marginal kappa was 0.57. 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

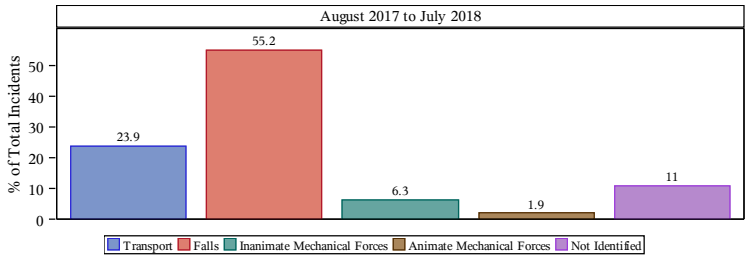
The number of linked EMS to trauma cases was 2,197 for Q3 2017 data. Trauma data is due on a quarterly basis.

# Accessibility

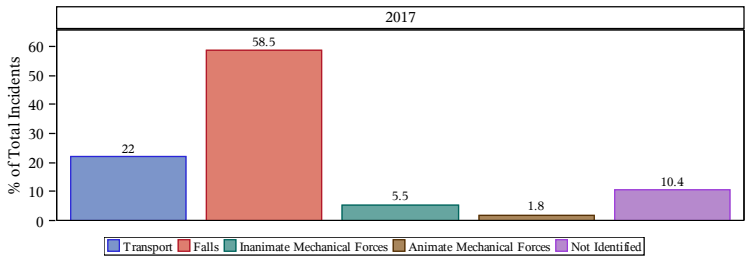
The average time to complete data requests was 2 days for aggregate requests (3 total). There were no self reports or identifiable requests.

***January 2017 to December 2017 39700 Incidents***
***August 2017 July 2018 26825 Incidents***
***Cause of Injury (COI)***

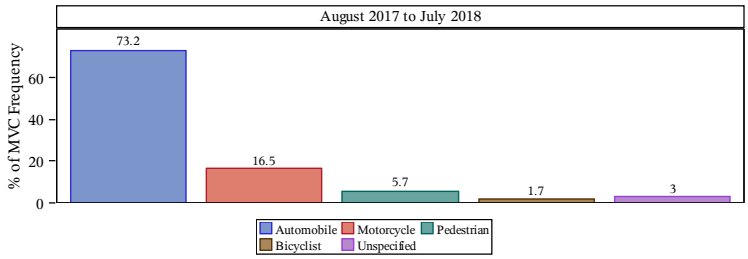
Cause of Injury (COI)



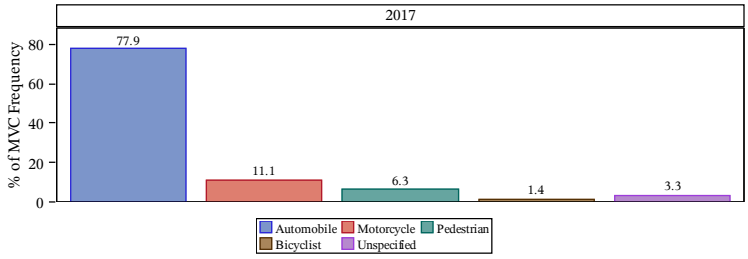

Cause of Injury (COI)




## COI-Motor Vehicle Collision (MVC)

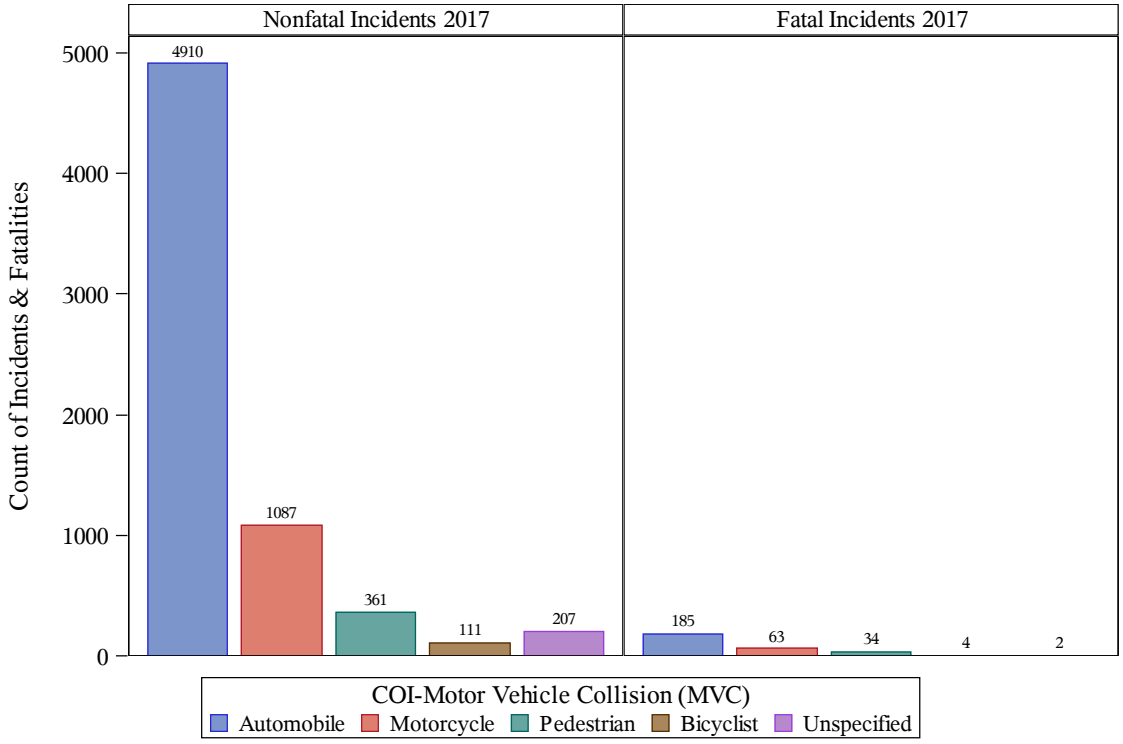


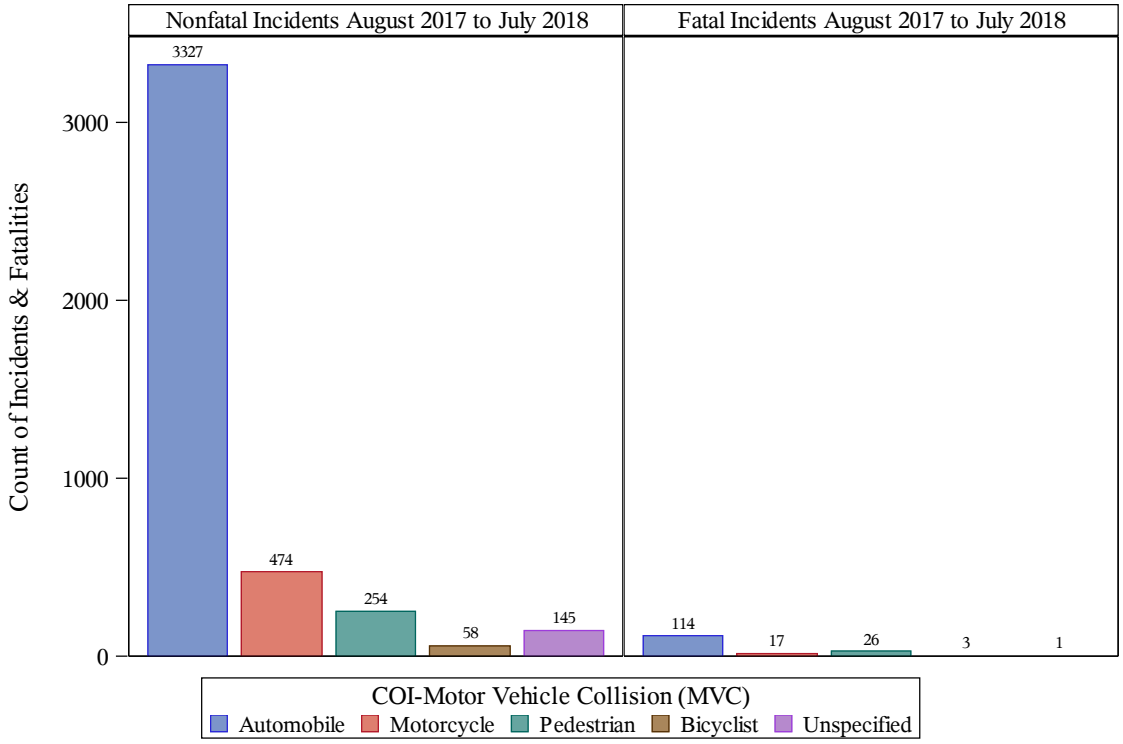

## COI-Motor Vehicle Collision (MVC)



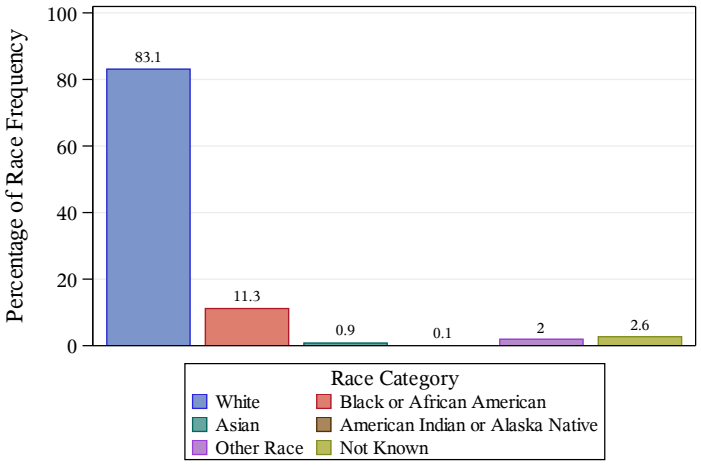
***August 2017 to July 2018 4419 Incidents***
***January 2017 to December 2017 6970 Incidents***
***Motor Vehicle Collision***

## COI-MVC Nonfatal Incidents and Fatal Incidents

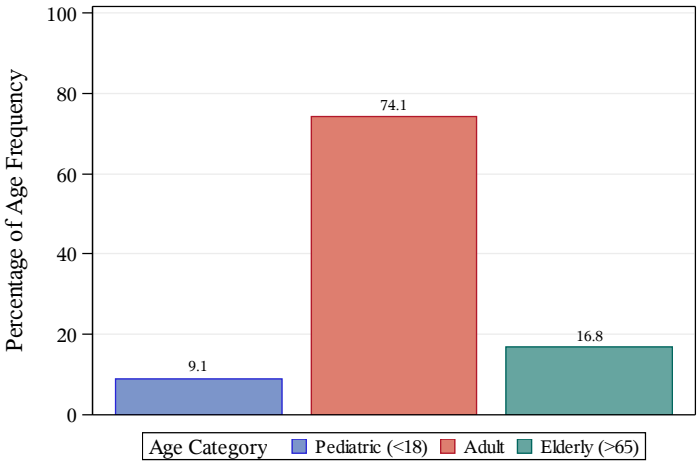


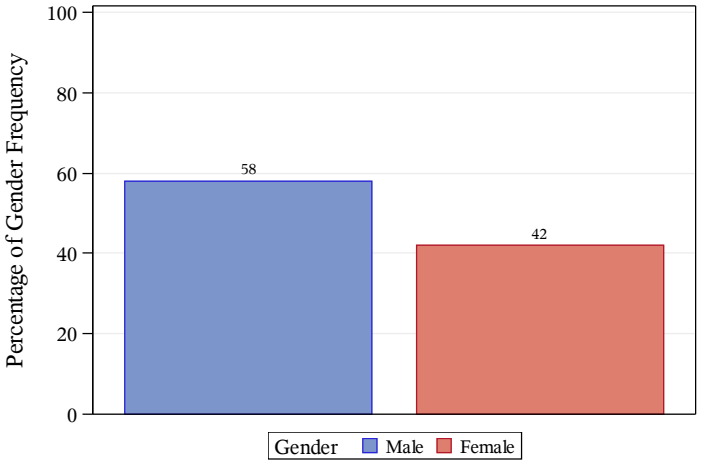
## Race



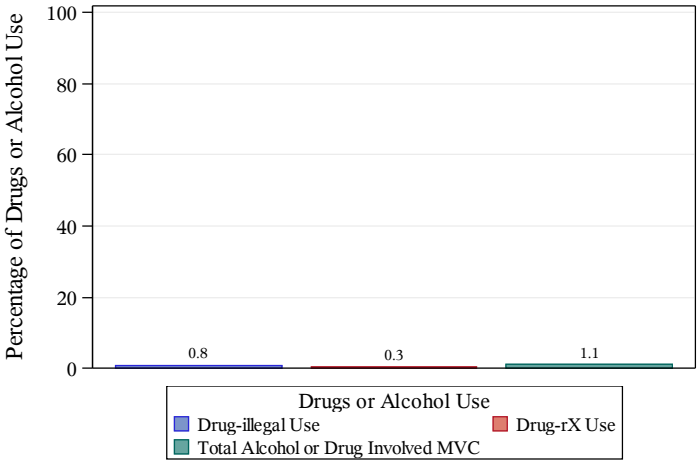

## Age



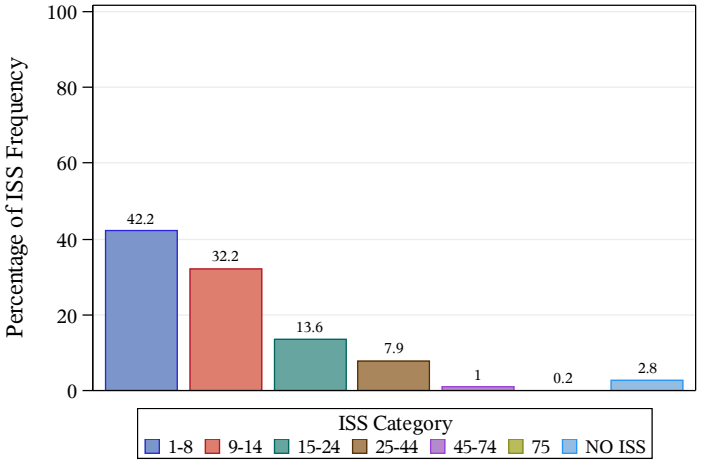

## Gender



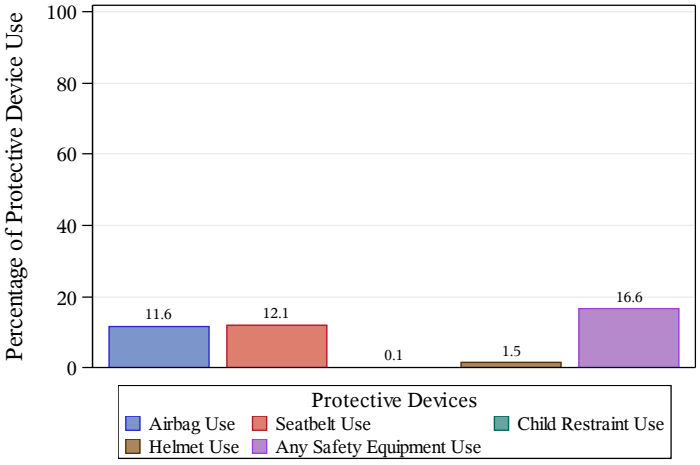

## Drug & Alcohol Use




## Injury Severity Score

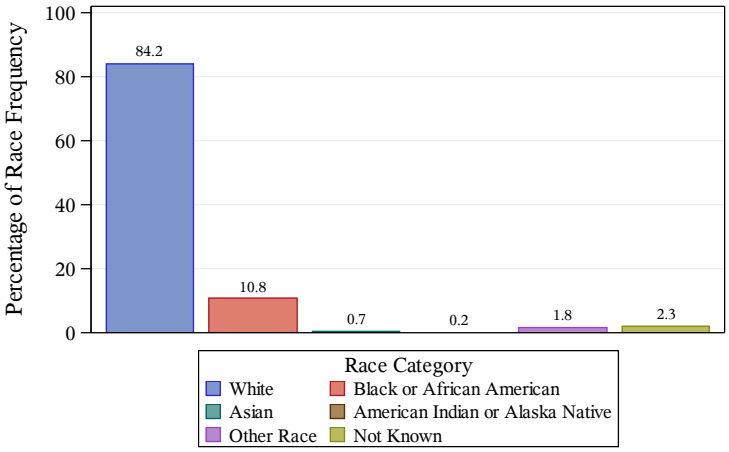



## Protective Devices

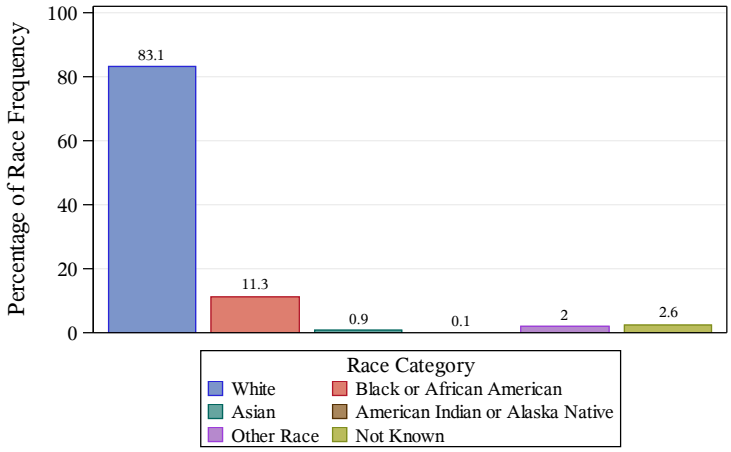



Injury Severity Score (ISS) is a measure of how bad the injury is. Scores over 15 are considered major trauma. A score of 75 is considered not survivable.

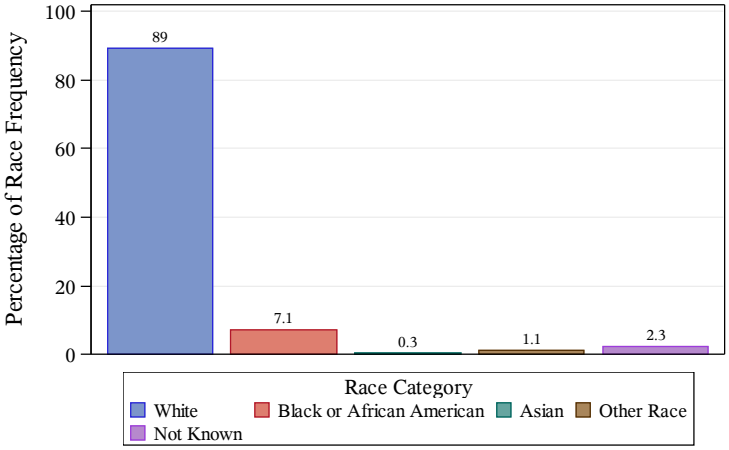
## 2017



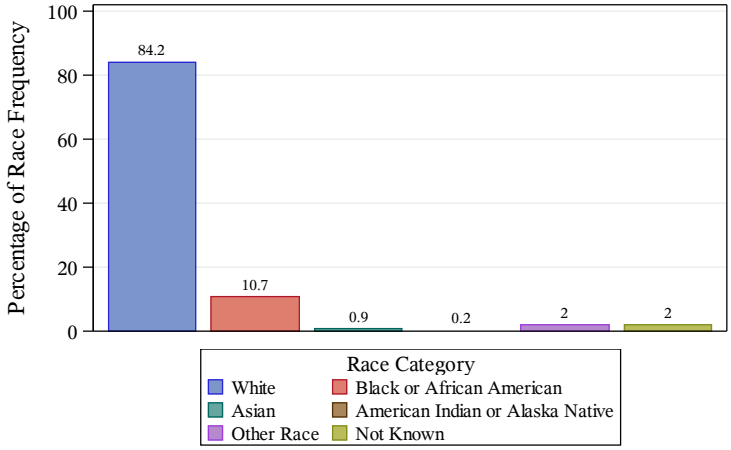

## August 2017 to July 2018



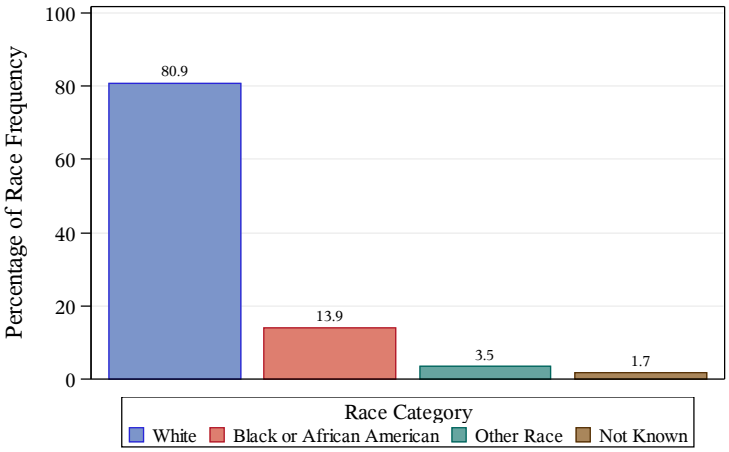

## Motorcycle
### August 2017 to July 2018



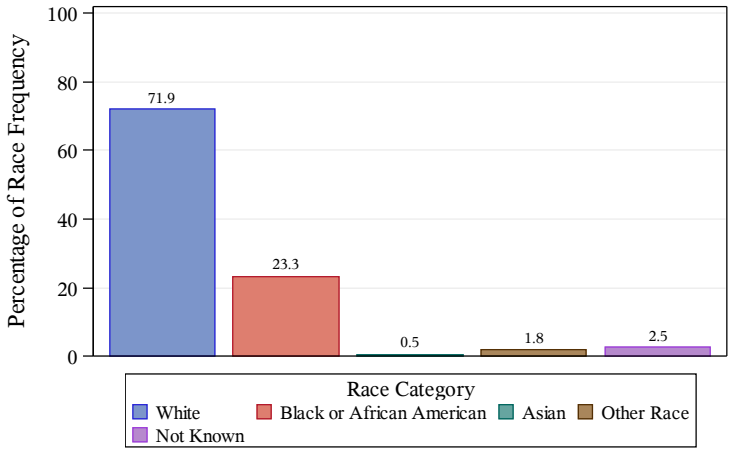

## Automobile
### August 2017 to July 2018



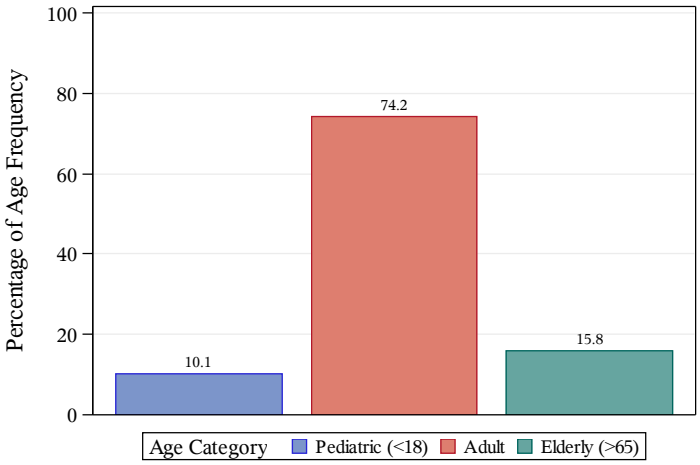

## Bicyclist
### August 2017 to July 2018



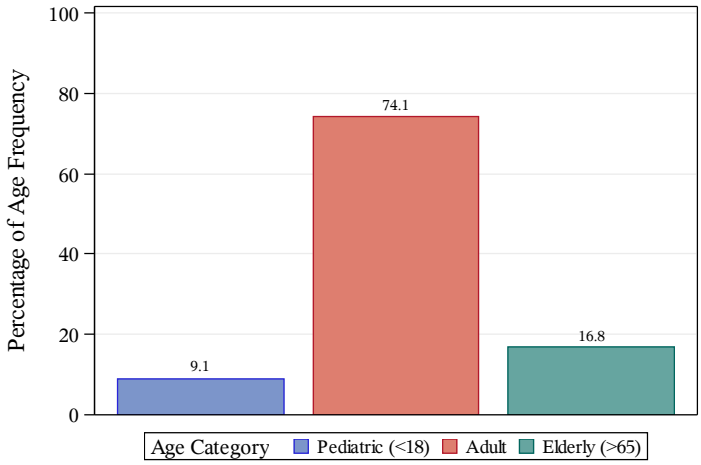

## Pedestrian
### August 2017 to July 2018



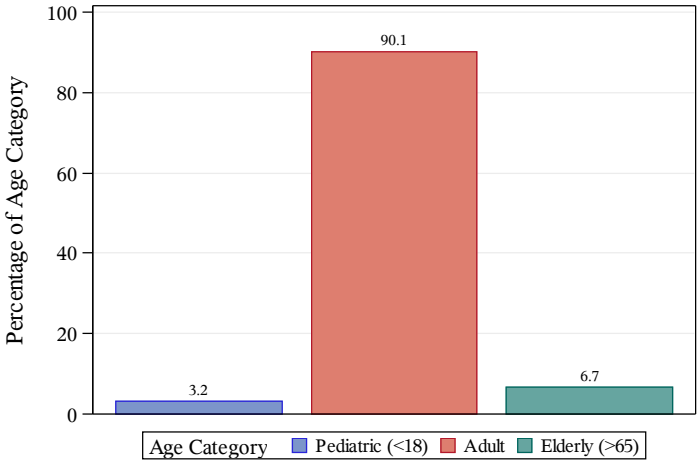
## 2017



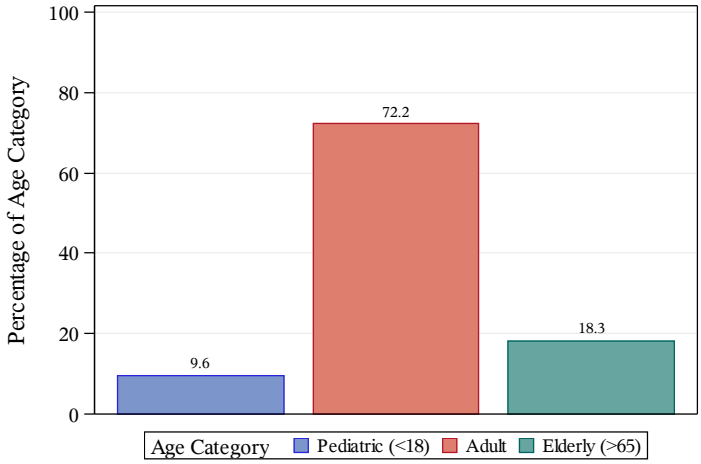

## August 2017 to July 2018




## Motorcycle
### August 2017 to July 2018




## Automobile
### August 2017 to July 2018




## Bicyclist
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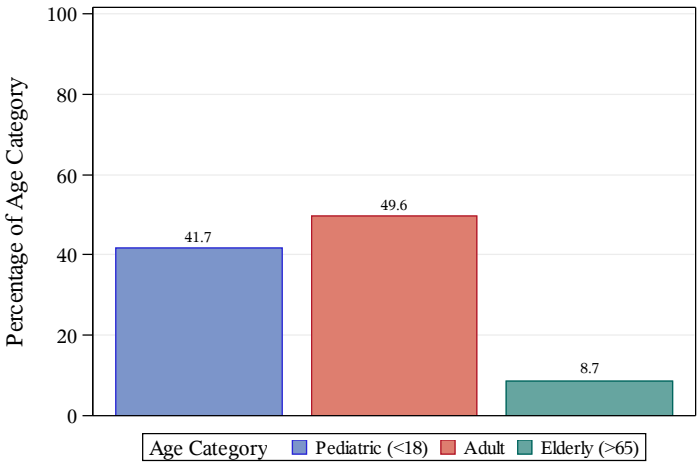
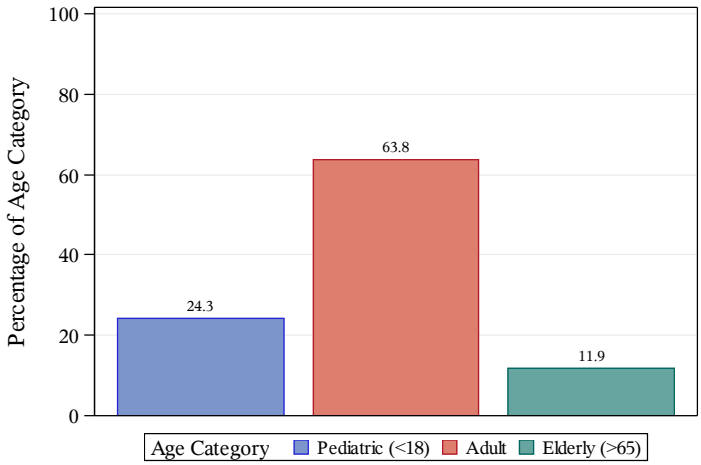
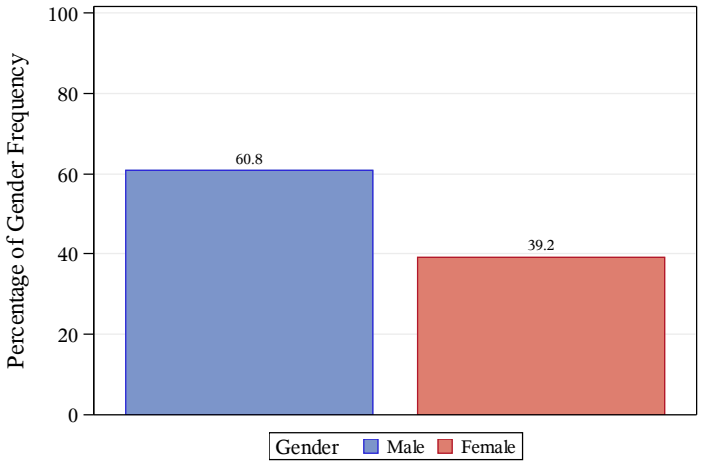


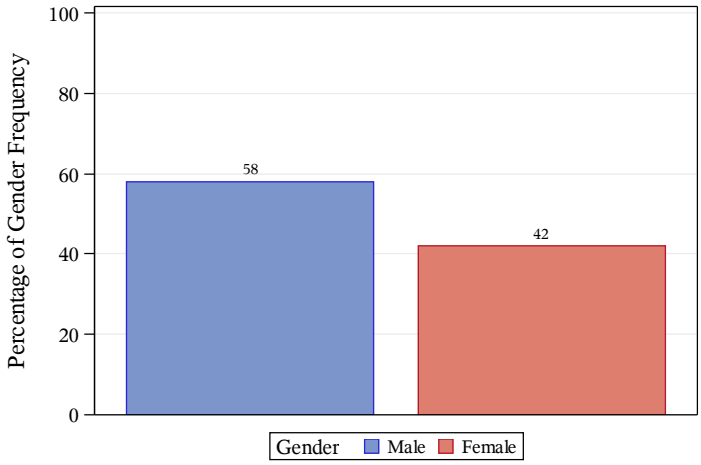

## Pedestrian
### August 2017 to July 2018



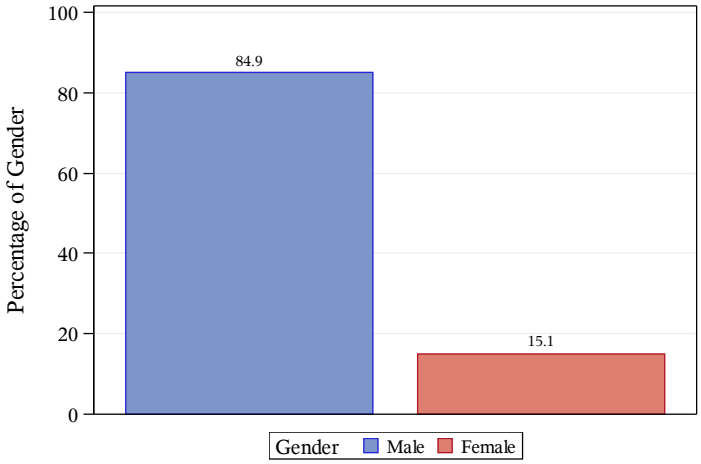
## 2017



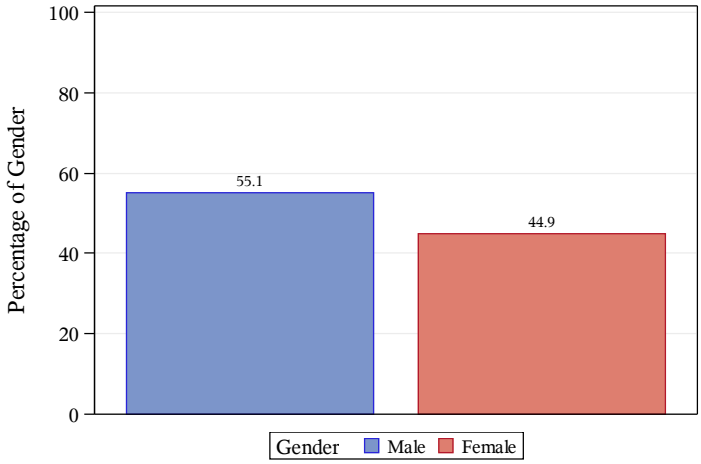

## August 2017 to July 2018



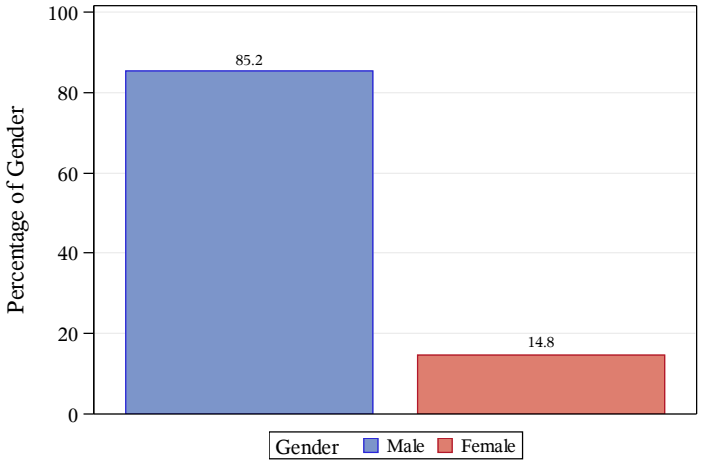

## Motorcycle
### August 2017 to July 2018



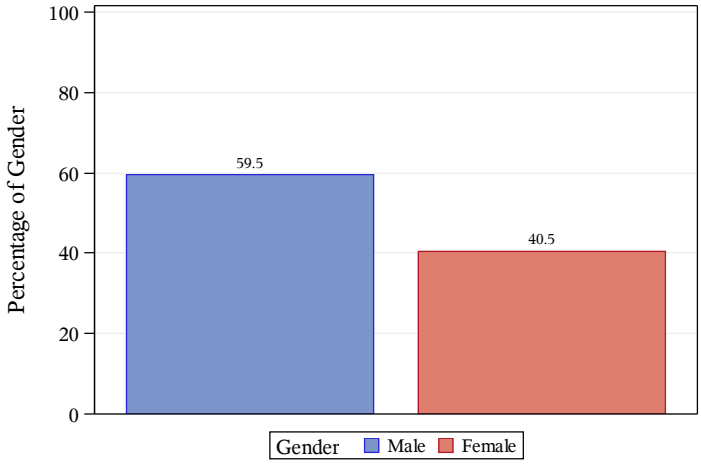

## Automobile
### August 2017 to July 2018



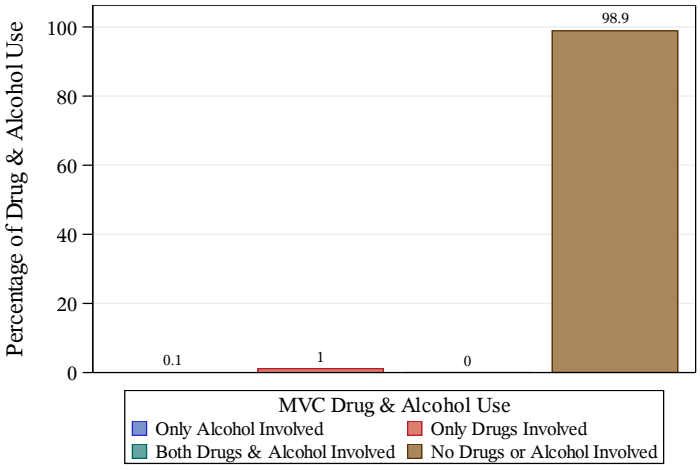

## Bicyclist
### August 2017 to July 2018



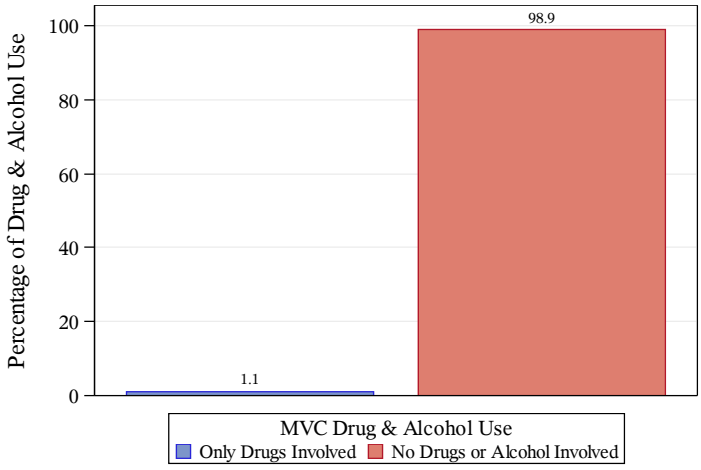

## Pedestrian
### August 2017 to July 2018



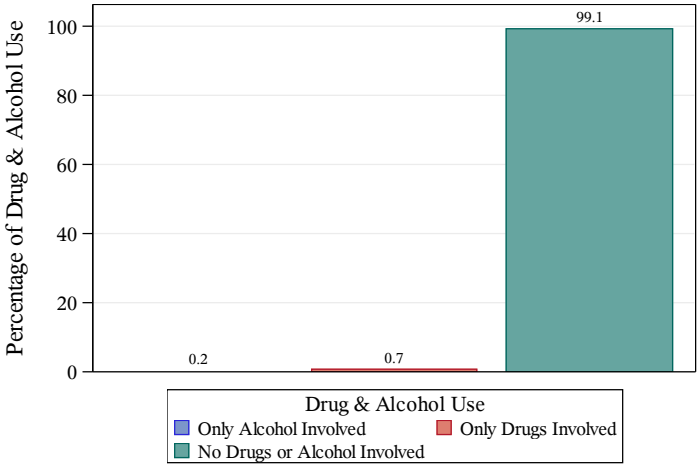
## 2017



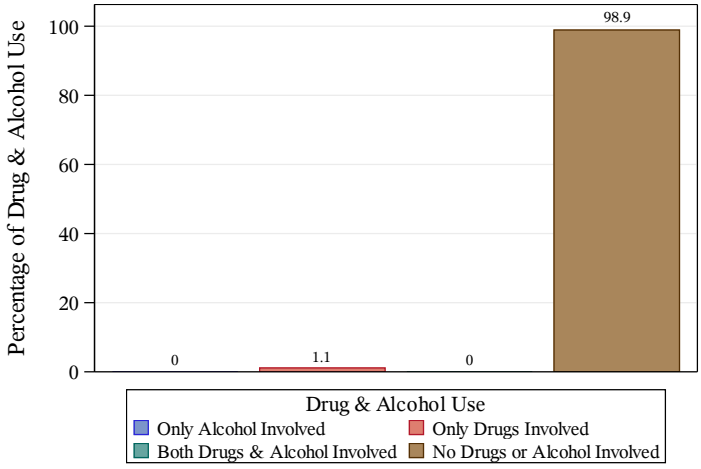

## August 2017 to July 2018



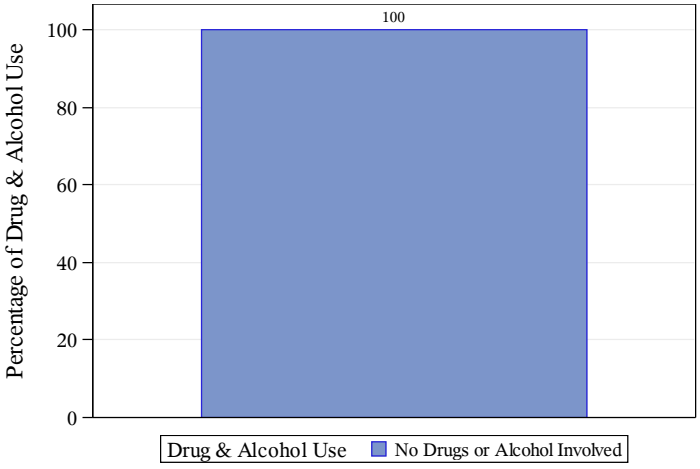

## Motorcycle
### August 2017 to July 2018



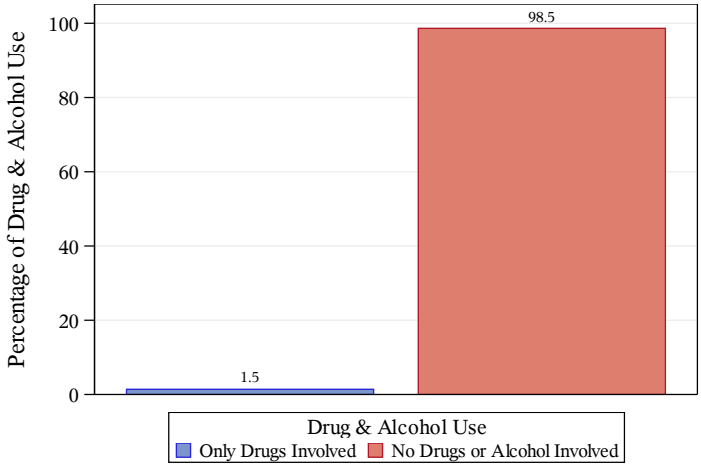

## Automobile
### August 2017 to July 2018



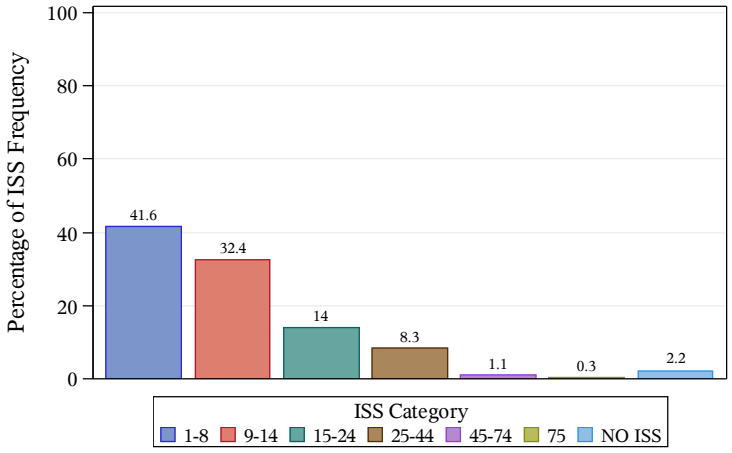

## Bicyclist
### August 2017 to July 2018



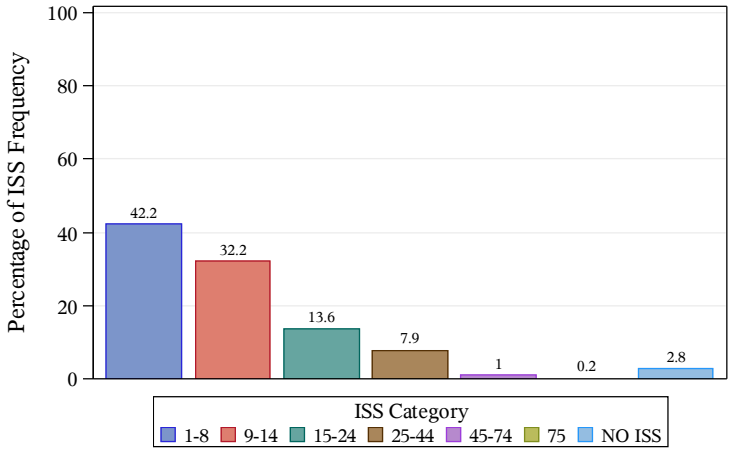

## Pedestrian
### August 2017 to July 2018



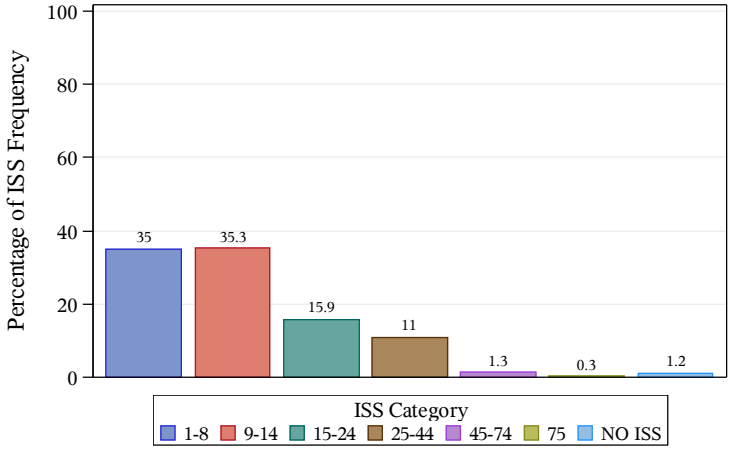
## 2017



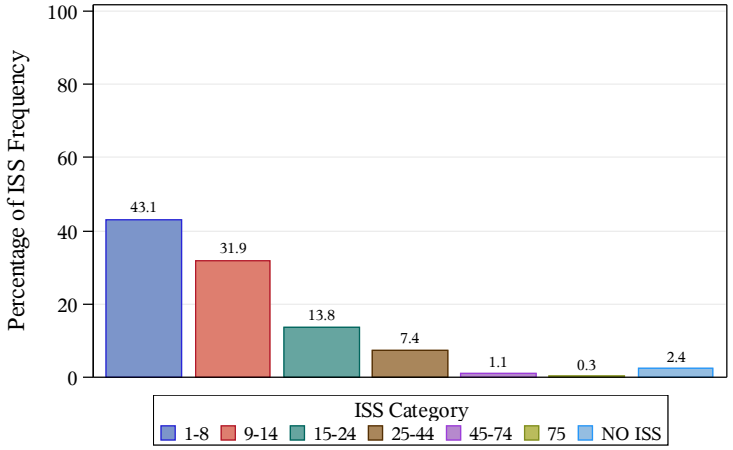

## August 2017 to July 2018



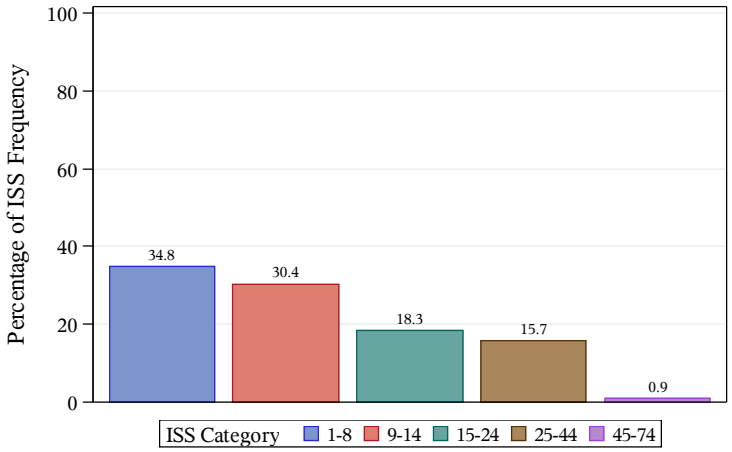

## Motorcycle
### August 2017 to July 2018



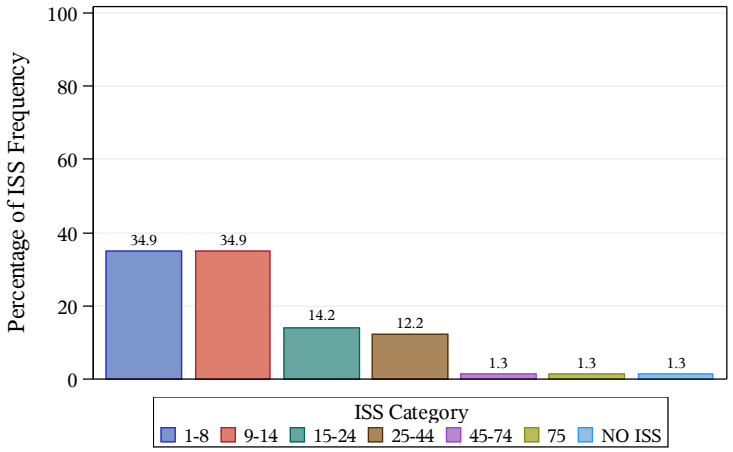

## Automobile
### August 2017 to July 2018



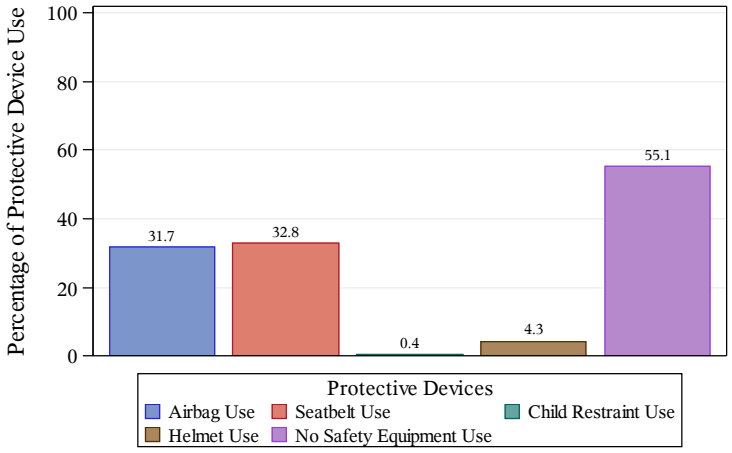

## Bicyclist
### August 2017 to July 2018



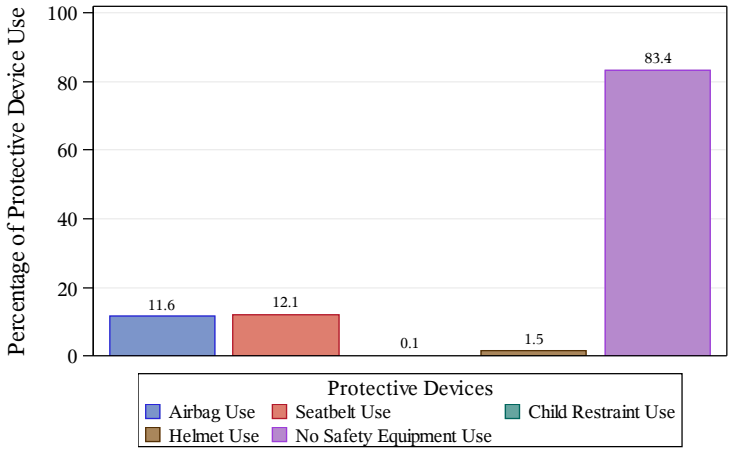

## Pedestrian
### August 2017 to July 2018



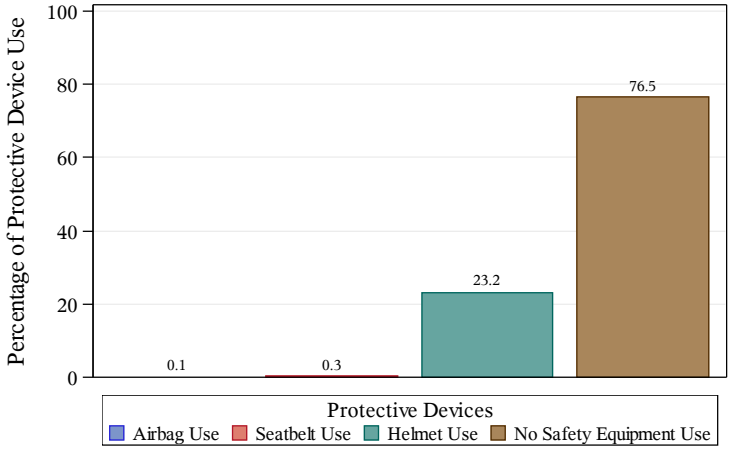
## 2017



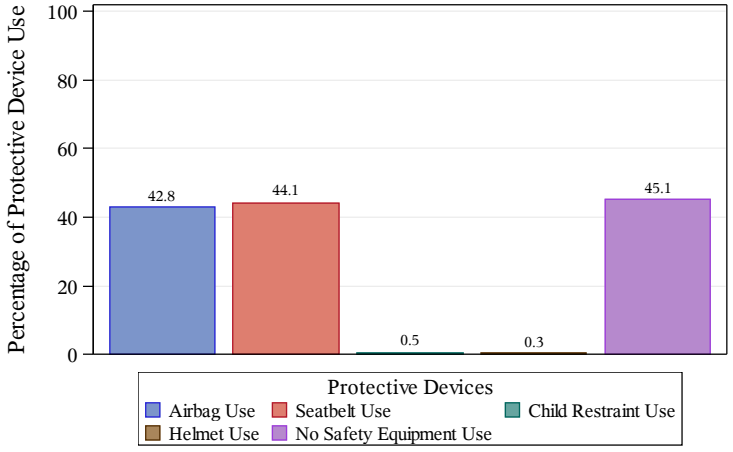

## July 2017 to June 2018



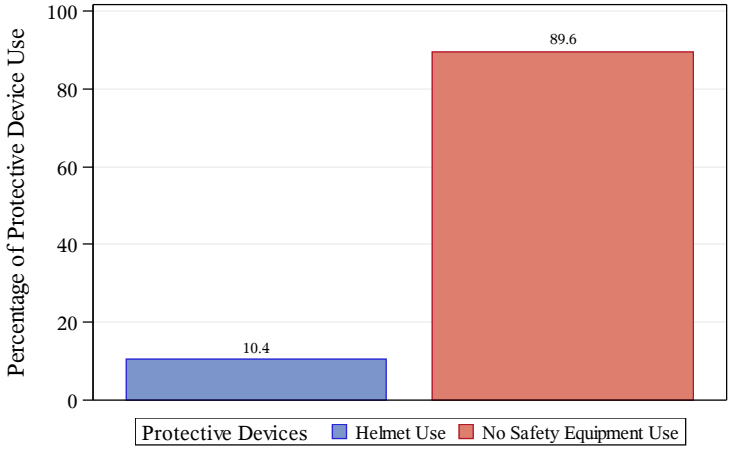

## Motorcycle
### August 2017 to July 2018



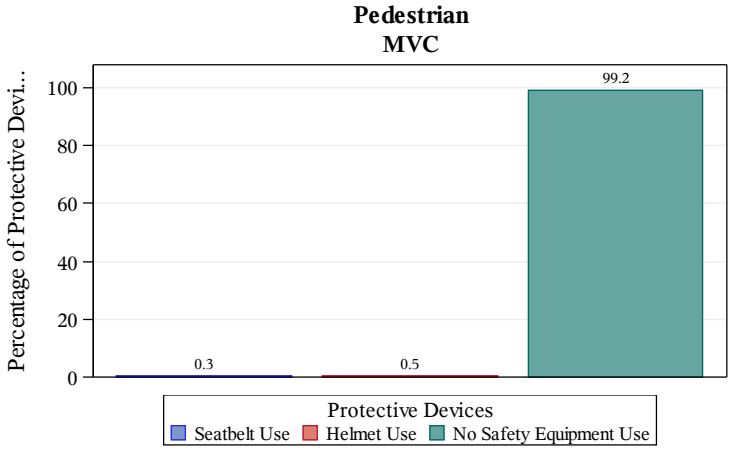

## Automobile
### August 2017 to July 2018

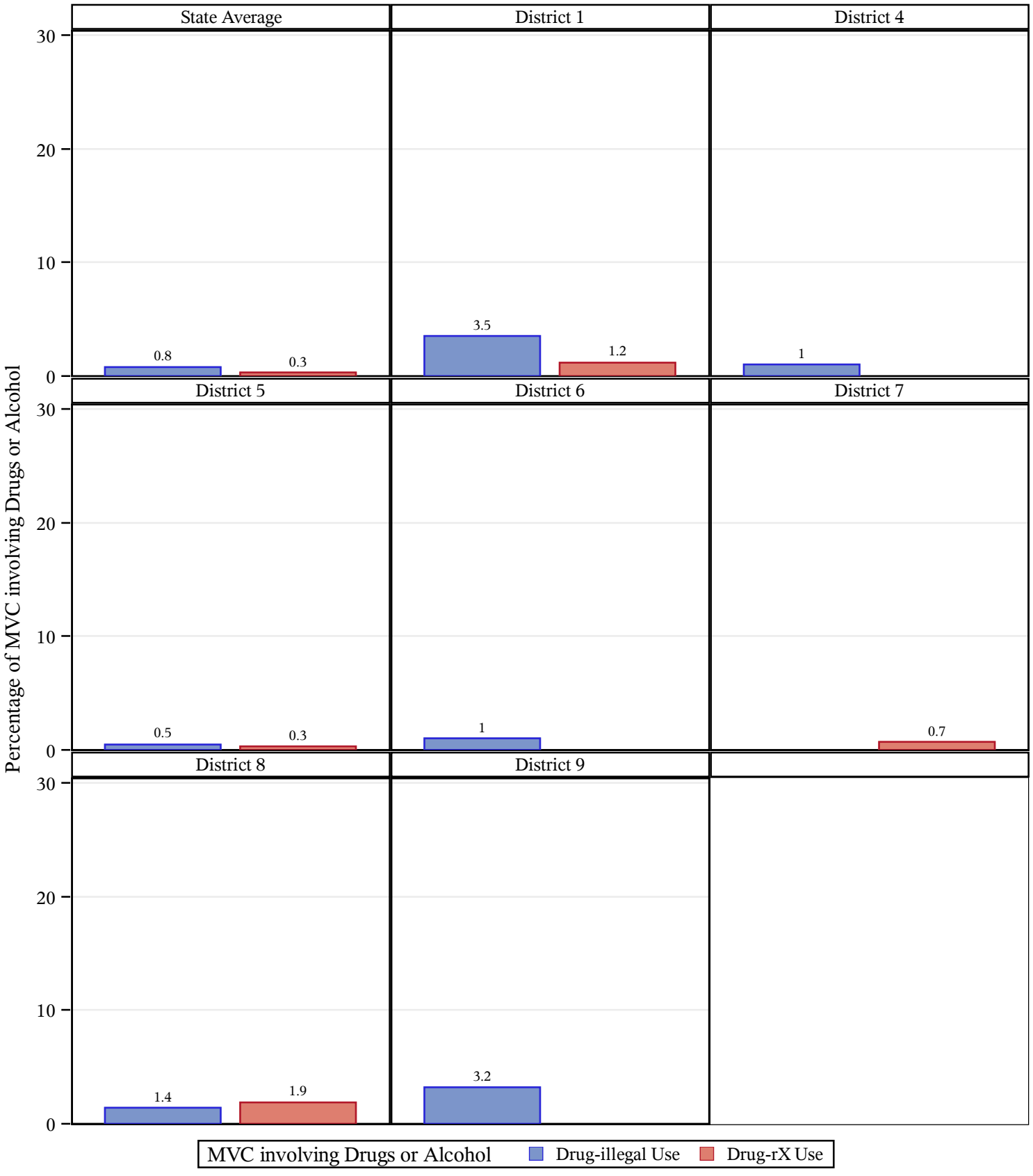



## Bicyclist
### August 2017 to July 2018




## Pedestrian
### August 2017 to July 2018




State Average
District 1
District 4
District 5
District 6
District 7
District 8
District 9
Percentage of MVC involving Drugs or Alcohol
0
10
20
30
0.8
0.3
3.5
1.2
1
0.5
0.3
1
0.7
1.4
1.9
3.2
MVC involving Drugs or Alcohol
Drug-illegal Use
Drug-rX Use