

On December 10th, Camry Hess (Database Analyst) attended and participated in the epidemiologist collaborative meeting at the Indiana State Department of Health (ISDH).

On December 12th, Murray Lawry (EMS Registry Manager), Ramzi Nimry (Trauma Registry Manager), and Katie Hokanson (Director) attended the EMS commission meeting in Brownsburg, IN.

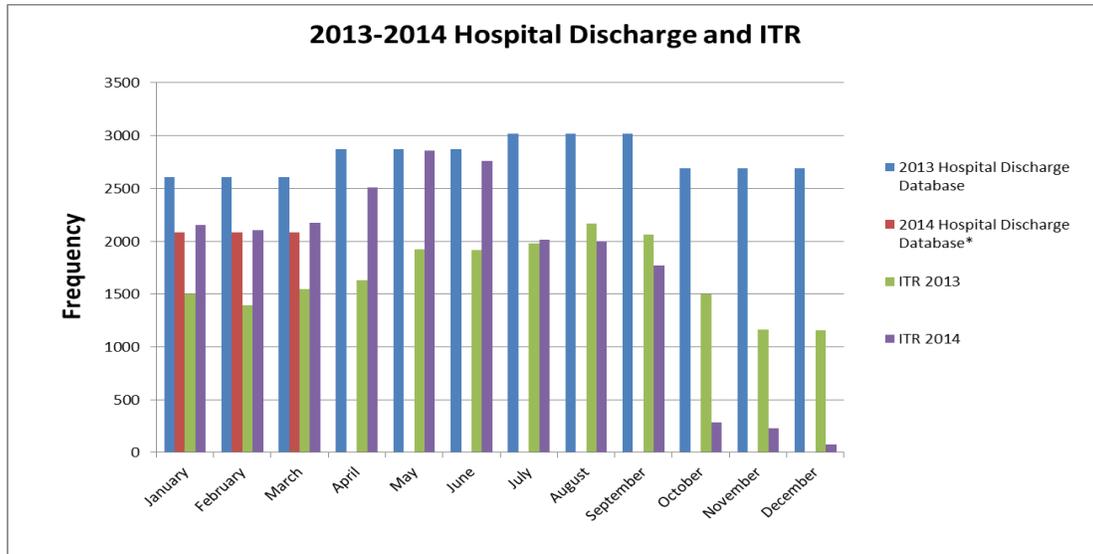
On December 17th and 18th, Ramzi Nimry, Murray Lawry and Camry Hess attended ImageTrend Patient Registry training.

On December 19th, Murray Lawry and Ramzi Nimry attended the Indiana Community Paramedic-Mobile Integrated Health Symposium at the Palms Banquet & Conference Center in Plainfield, 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, and integration. This report uses data within the ITR, with an emphasis on motor vehicle collisions (MVC).

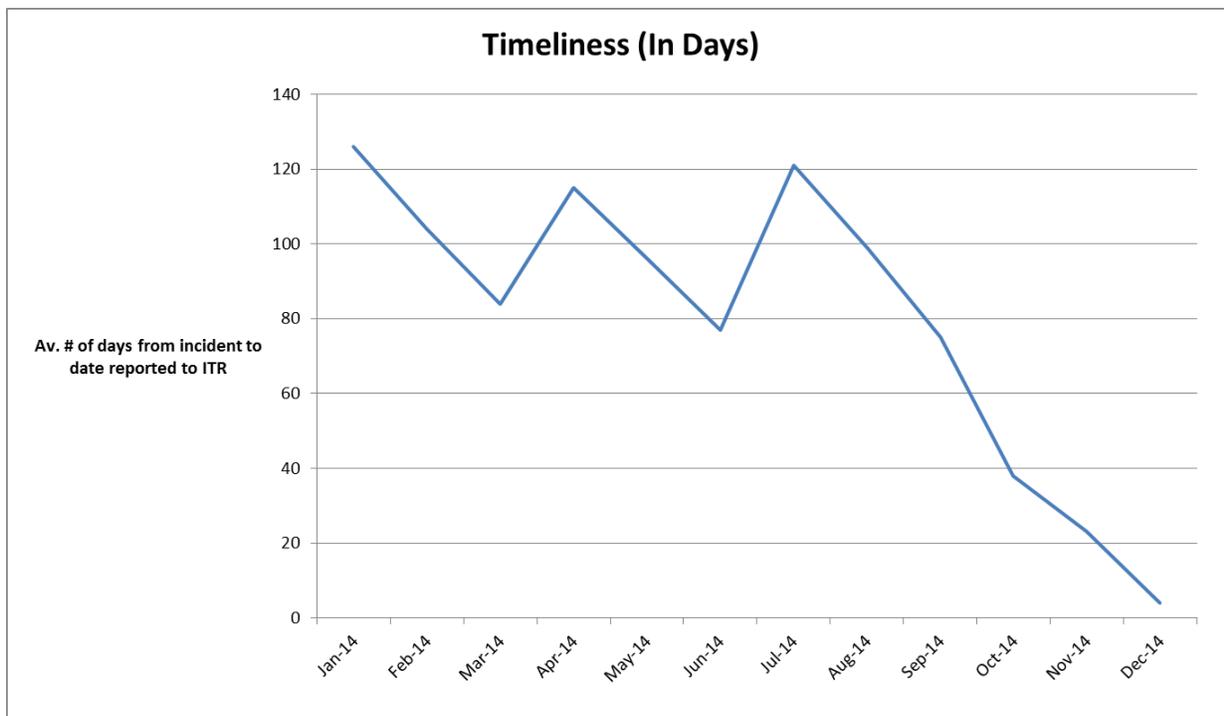
Completeness

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.



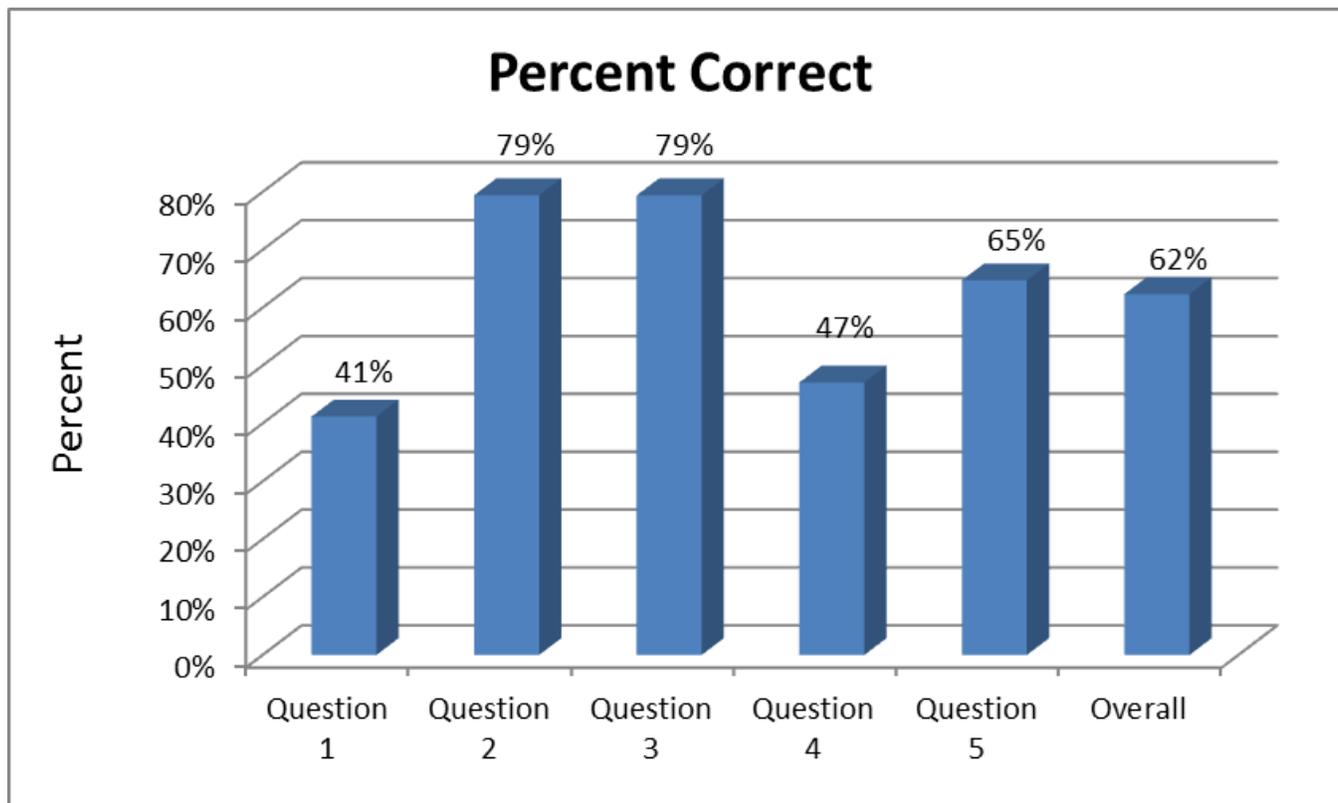
Timeliness increases as facilities wait until the data submission deadline to submit data to the ITR. Hospitals are asked to report data on the national trauma (TQIP) reporting schedule.

The decrease in timeliness from July 2014 until December 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.



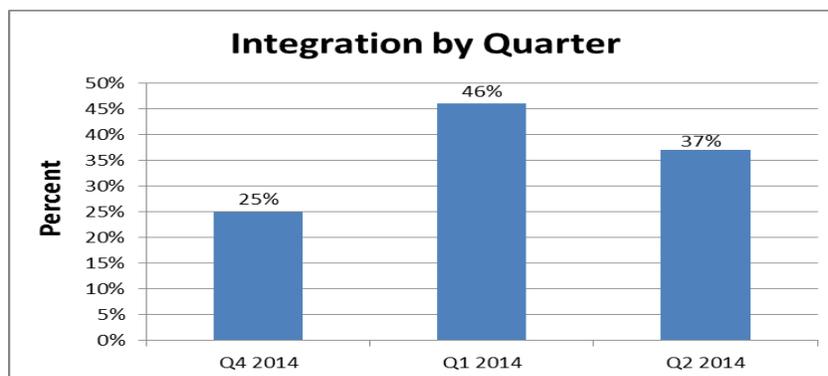
Uniformity

In December we sent out the tenth monthly quiz for the inter-rater reliability study. Fifty-four registrars completed the quiz from 54 hospitals. The percent of correct answers was 62% for the entire quiz and the average free-marginal Kappa (measure of consistency) 0.36. 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

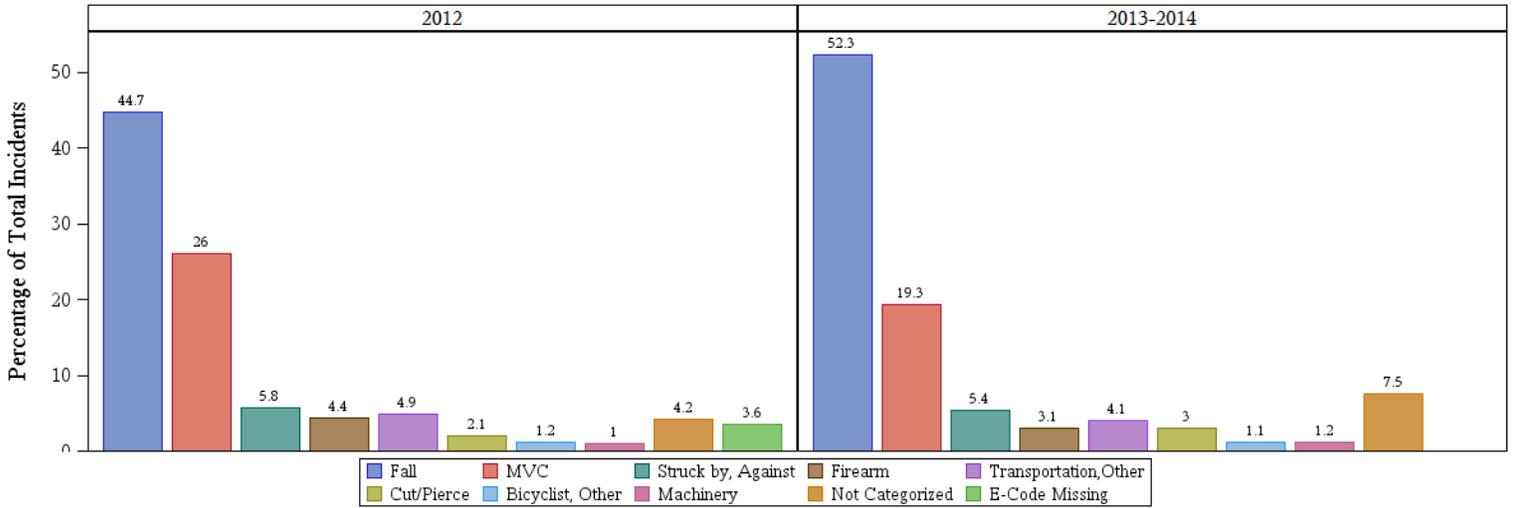
The percent of linked trauma cases that were transported by EMS services was 37.2% for Quarter 2 2014. The data for this parameter is reported and calculated on a quarterly basis. Quarter 3 2014 data is due on January 15, 2015, and this measurement for quarter 3 will be presented in the February 2015 report. The chart below shows integration for Quarter 4 2013 through Quarter 2 2014.



Accessibility

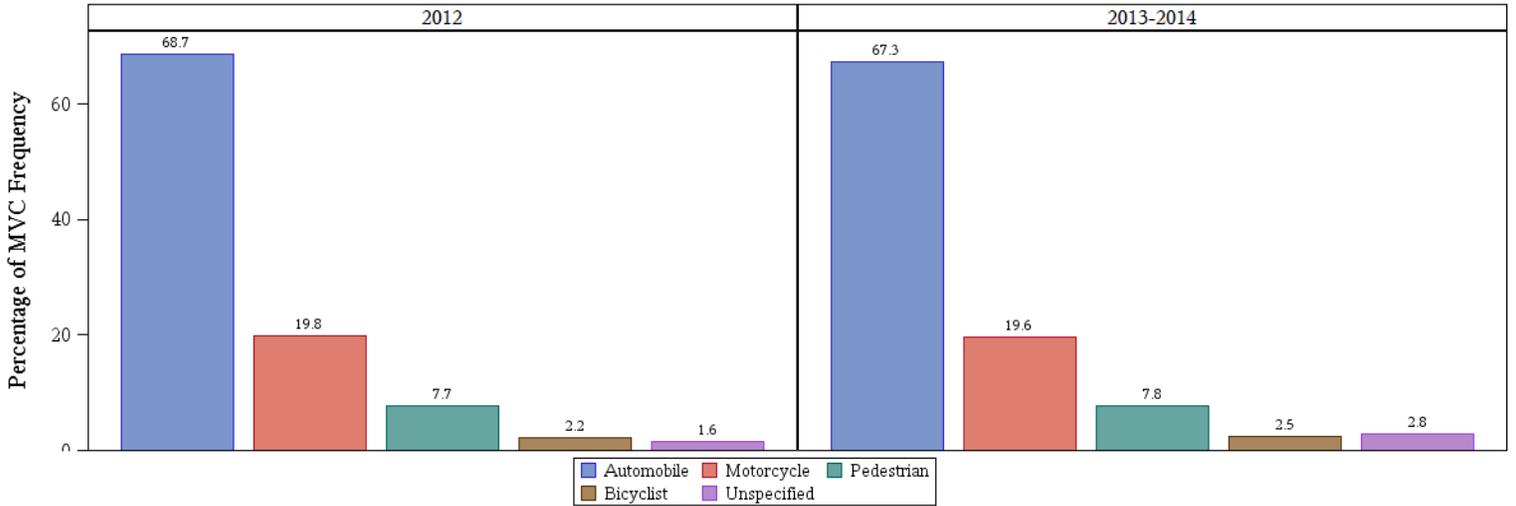
There was no average for neither aggregate nor non-aggregate data requests because no data request forms were completed during the month of December.

Cause of Injury (COI)

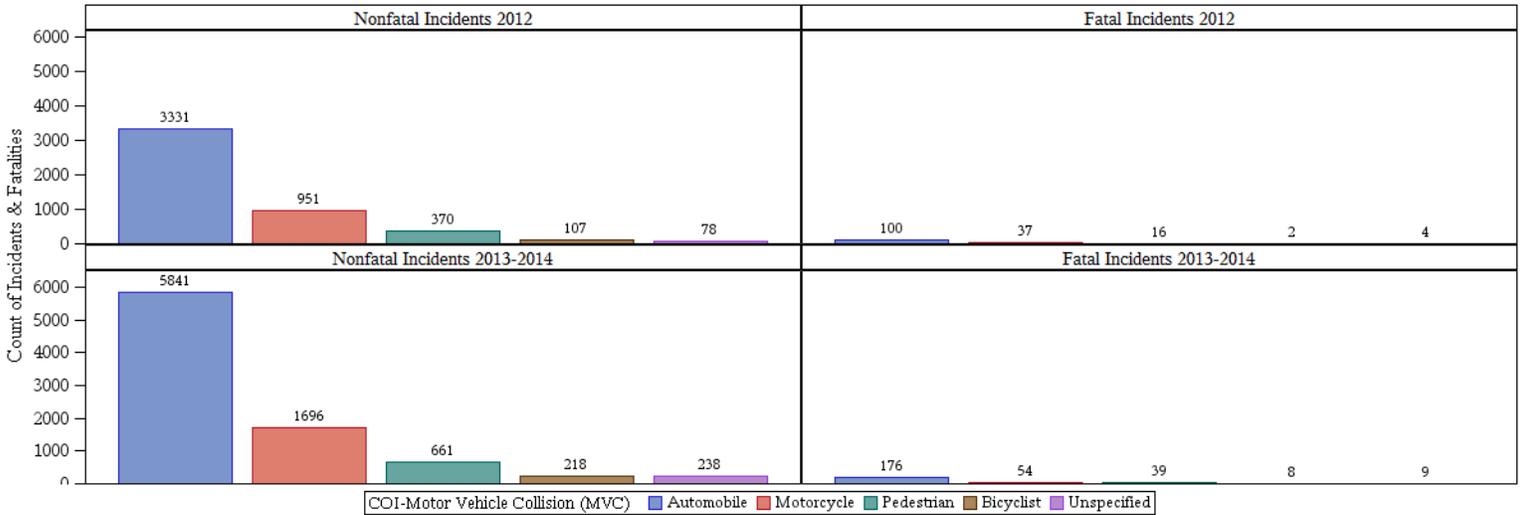


<1% of COI: Pedestrian (Other), Natural/Environmental, Overexertion, Fire/Burn, and Bites/Stings

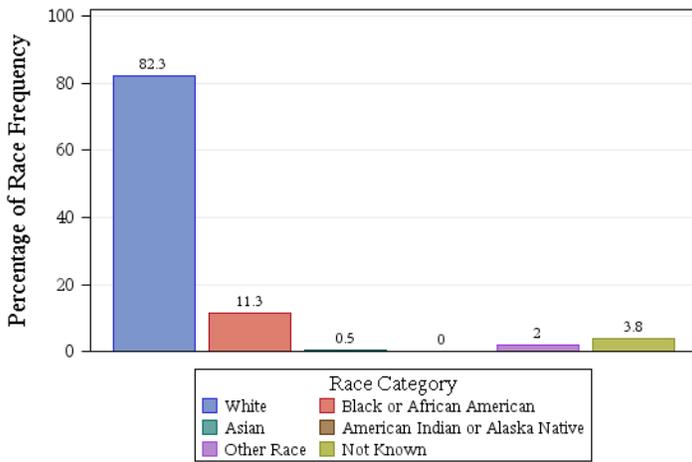
COI-Motor Vehicle Collision (MVC)



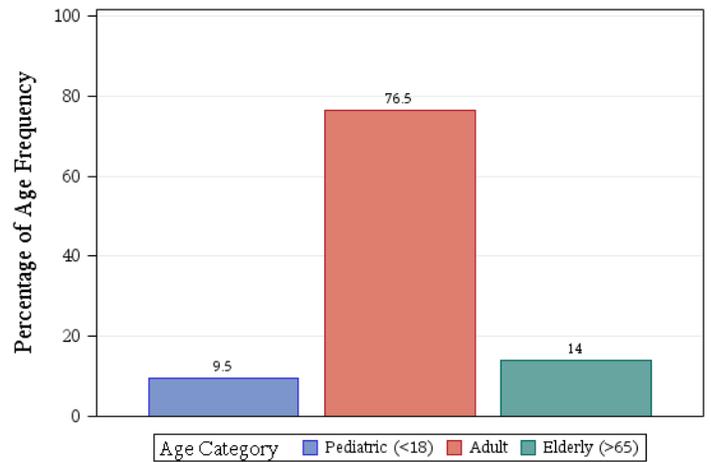
COI-MVC Nonfatal Incidents and Fatal Incidents



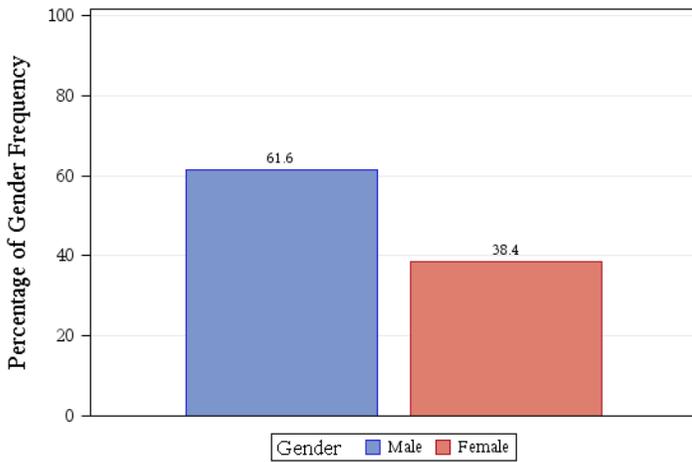
Race



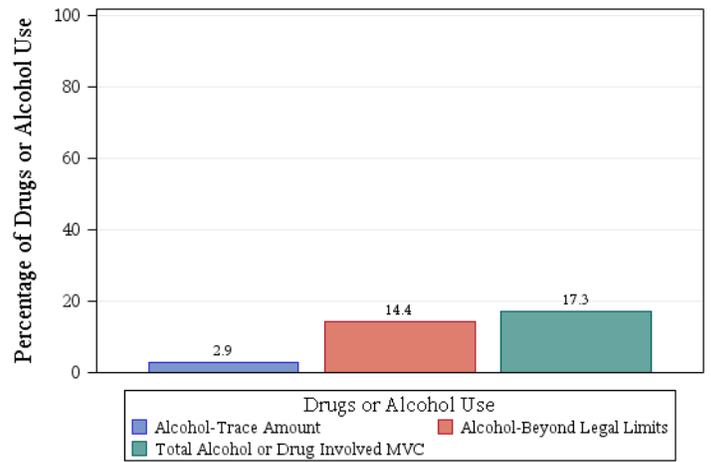
Age



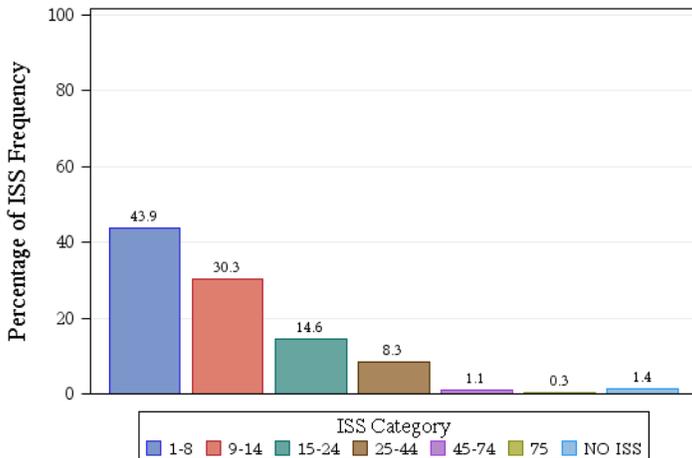
Gender



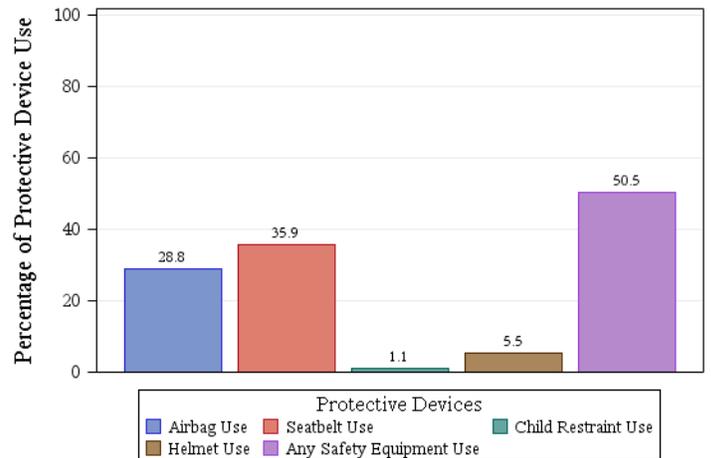
Drug & Alcohol Use



Injury Severity Score

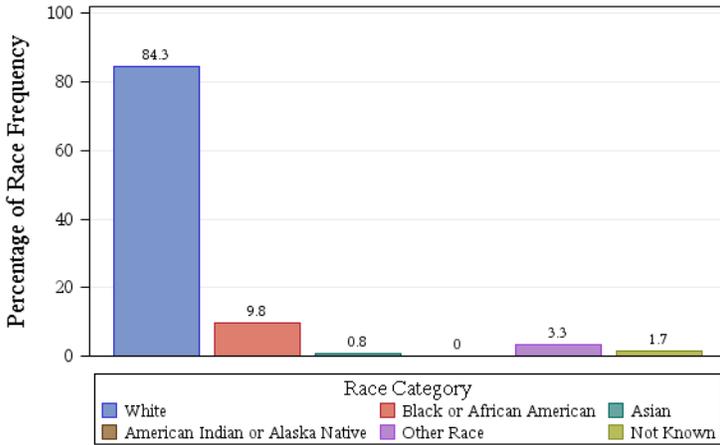


Protective Devices

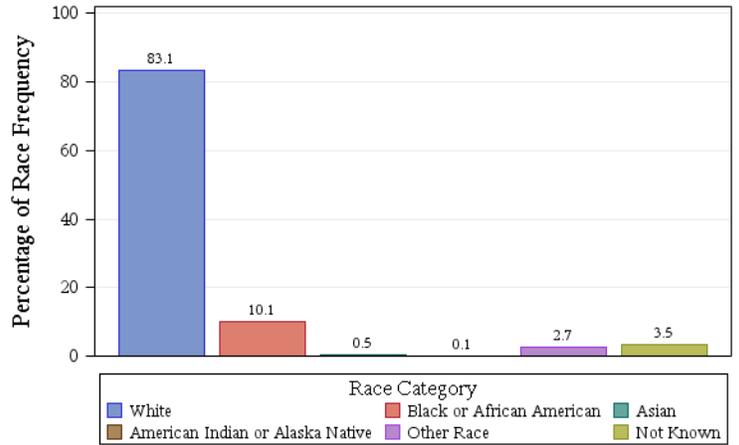


Injury Severity Score (ISS) is a measure of how bad the injury is. Scores over 15 are considered major trauma. A score of 75 is considered not survivable.

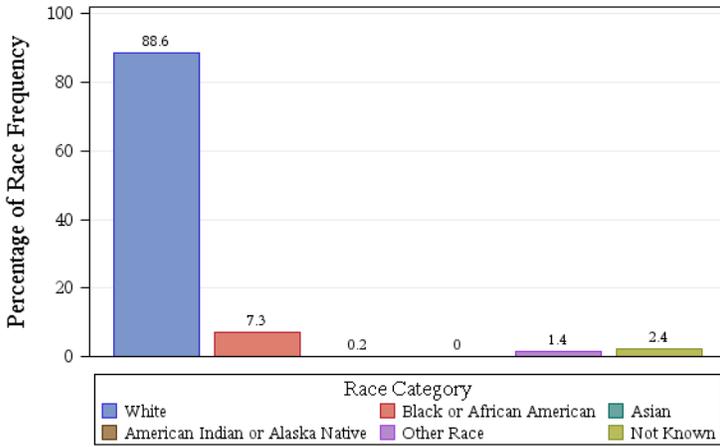
2012



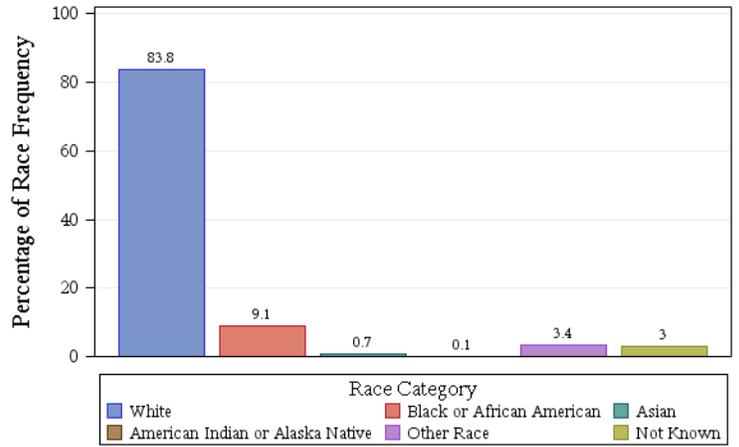
2013-2014



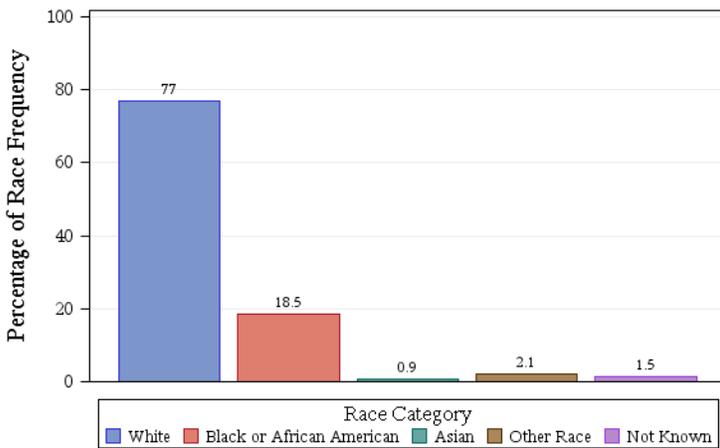
**Motorcycle
2012-2014**



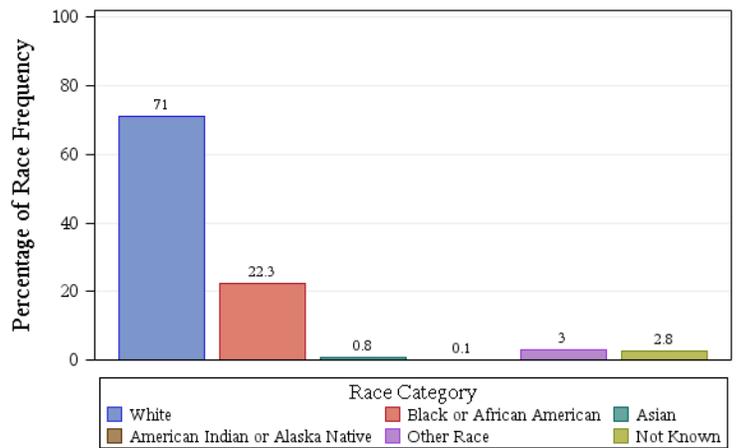
**Automobile
2012-2014**



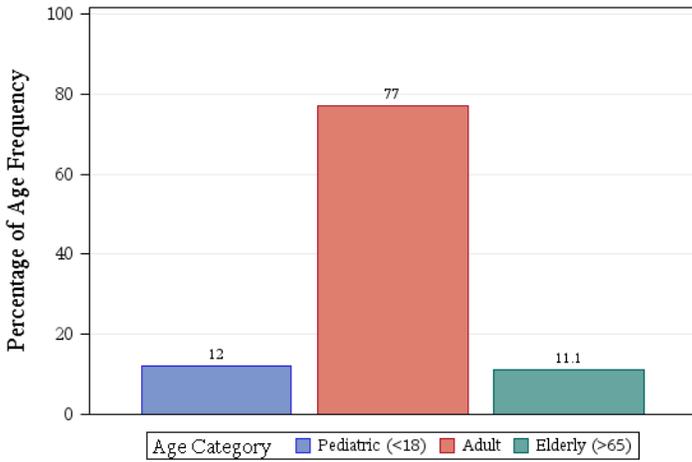
**Bicyclist
2012-2014**



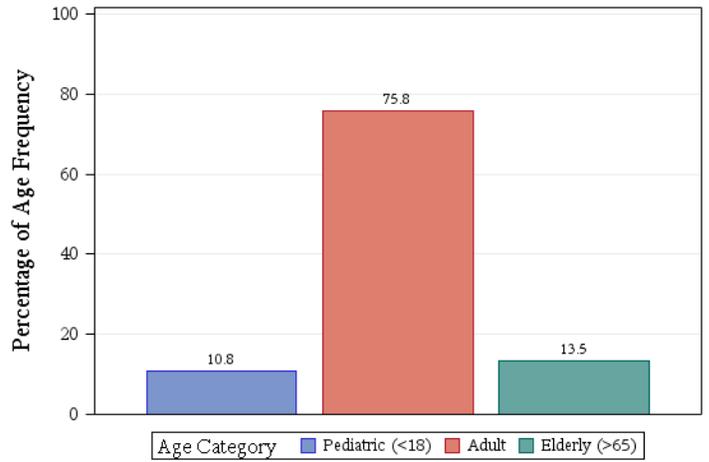
**Pedestrian
2012-2014**



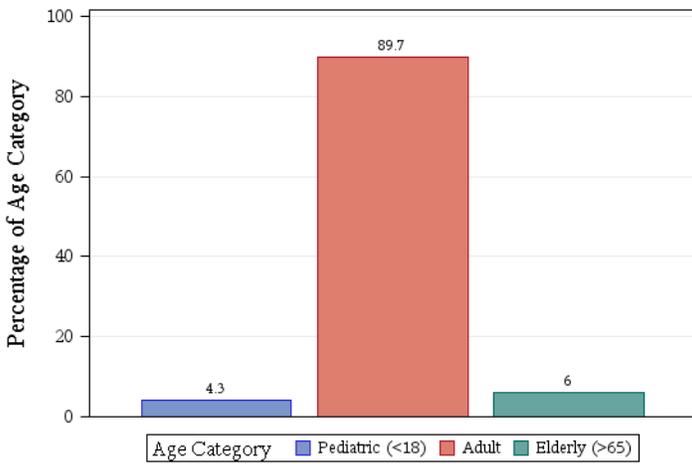
2012



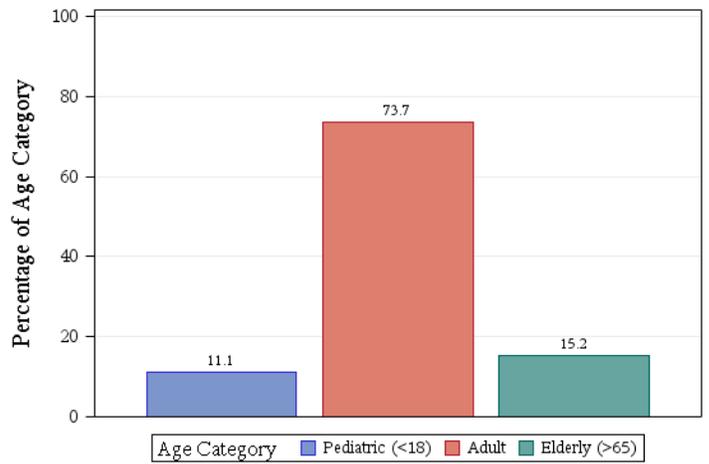
2013-2014



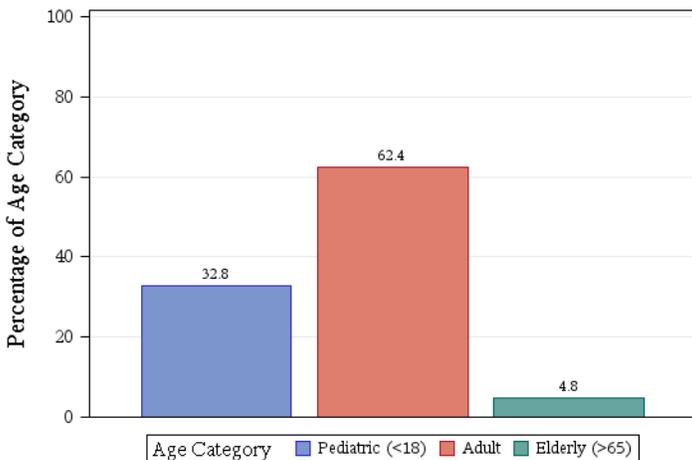
Motorcycle
2012-2014



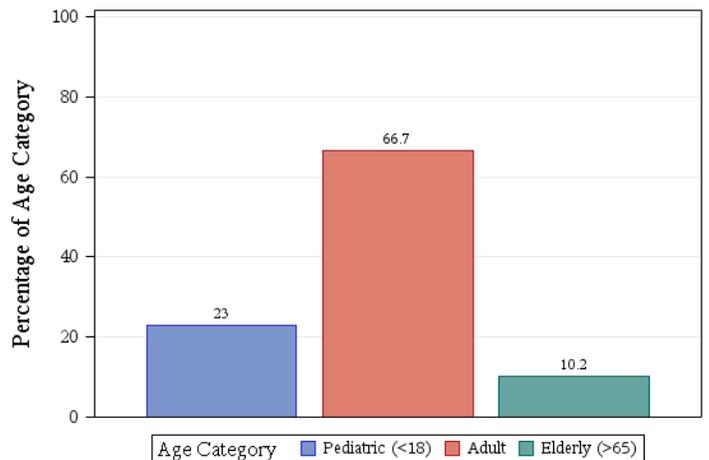
Automobile
2012-2014



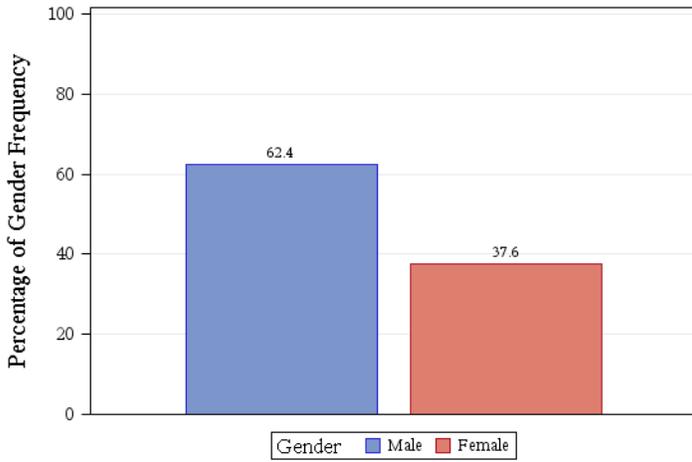
Bicyclist
2012-2014



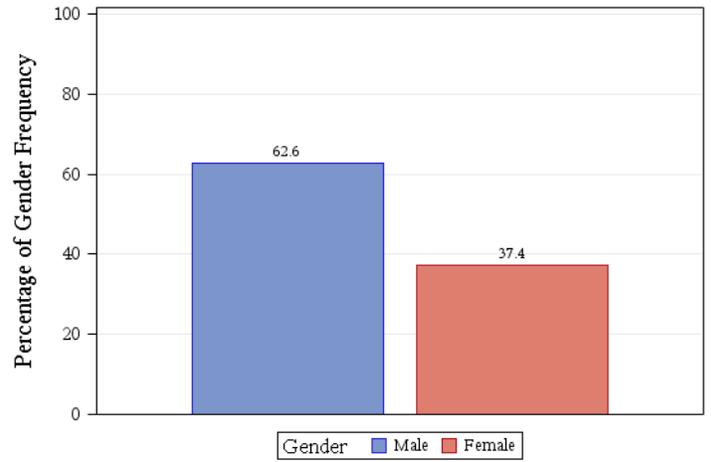
Pedestrian
2012-2014



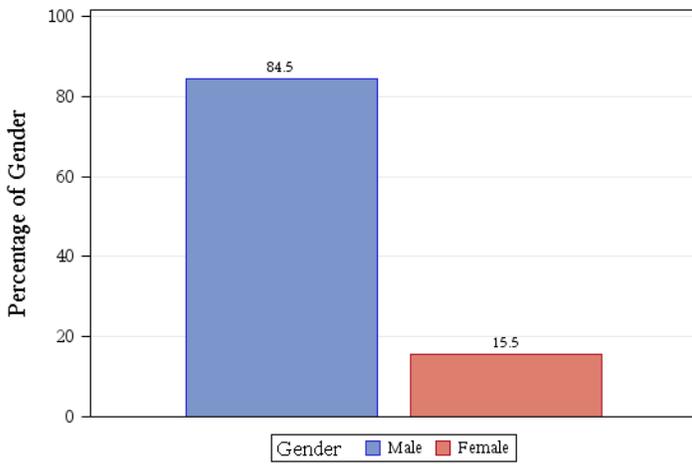
2012



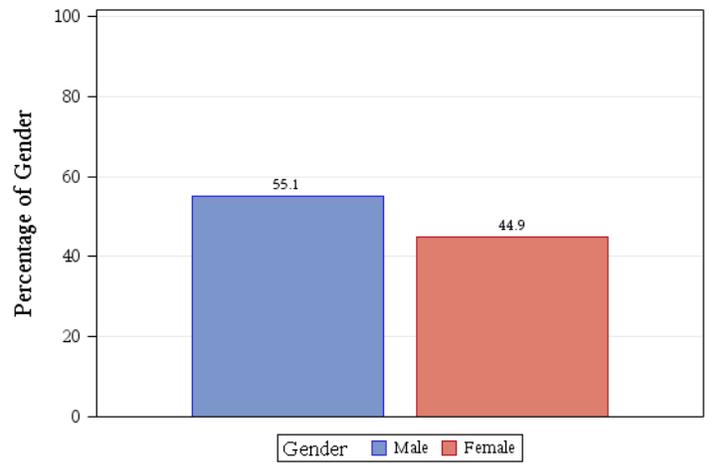
2013-2014



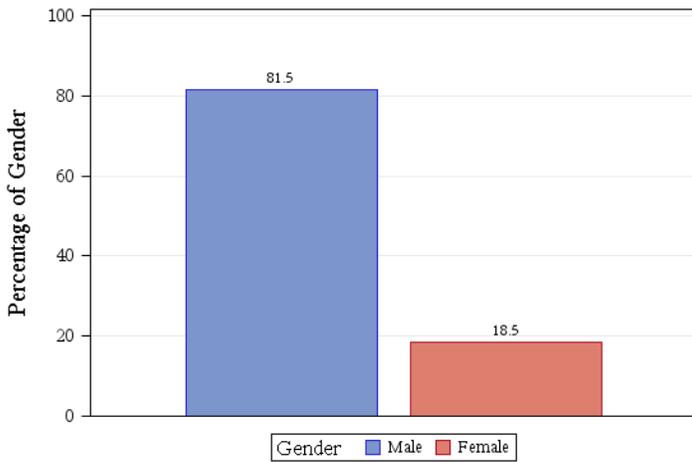
Motorcycle
2012-2014



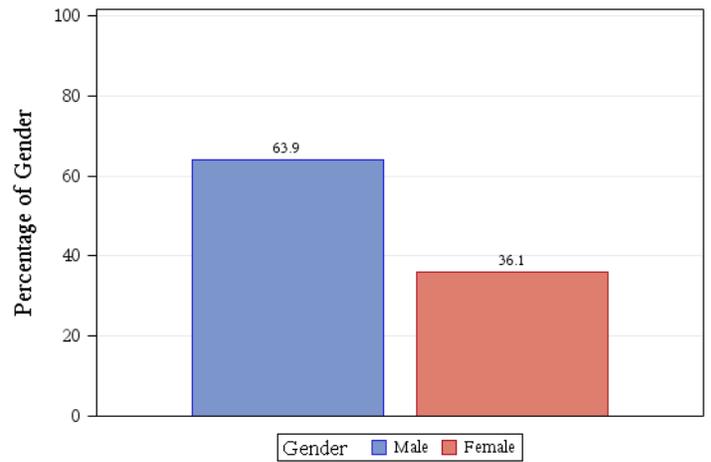
Automobile
2012-2014



Bicyclist
2012-2014

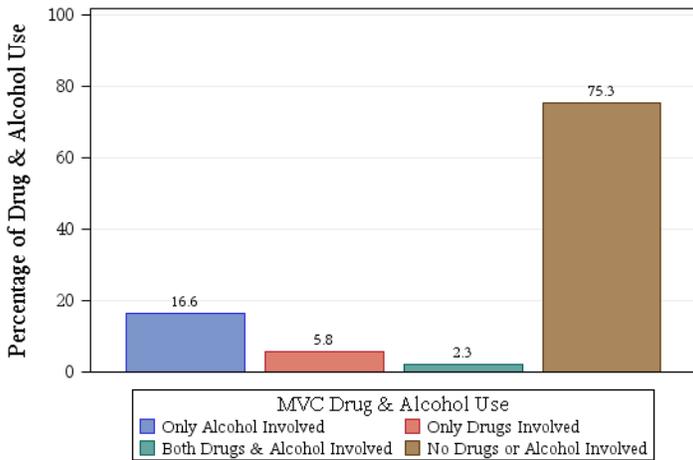


Pedestrian
2012-2014

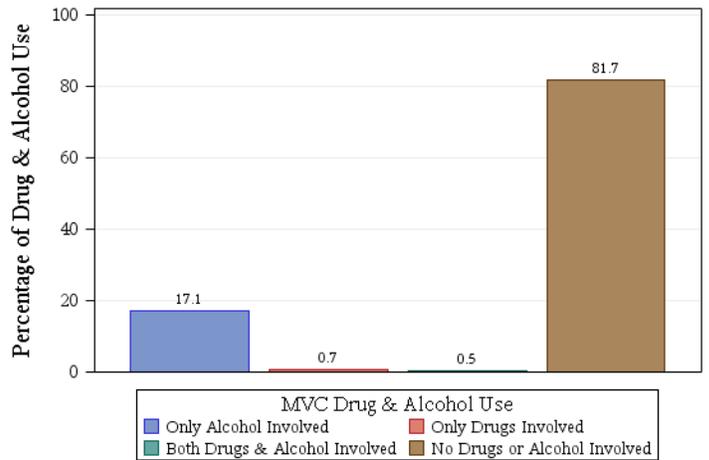


January 2012 to December 2014 13936 Incidents
Drug & Alcohol Use- Motor Vehicle Collision

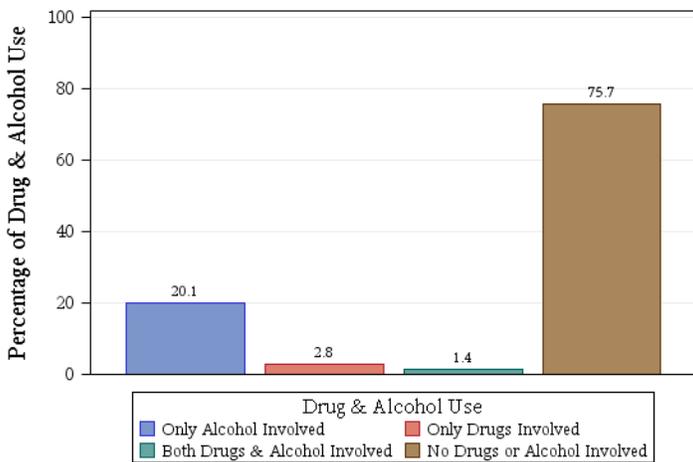
2012



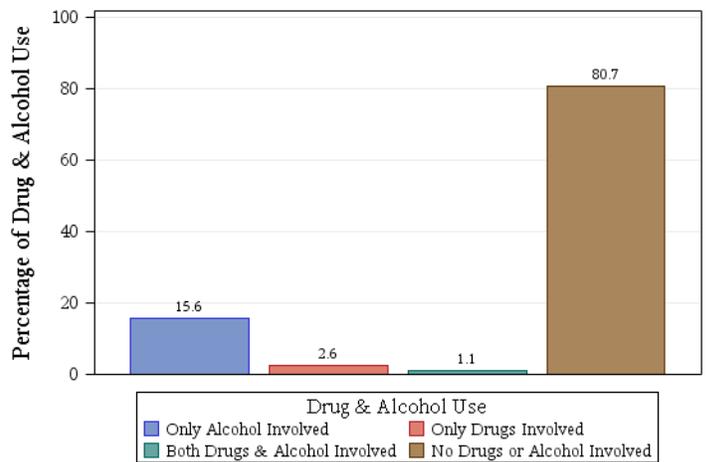
2013-2014



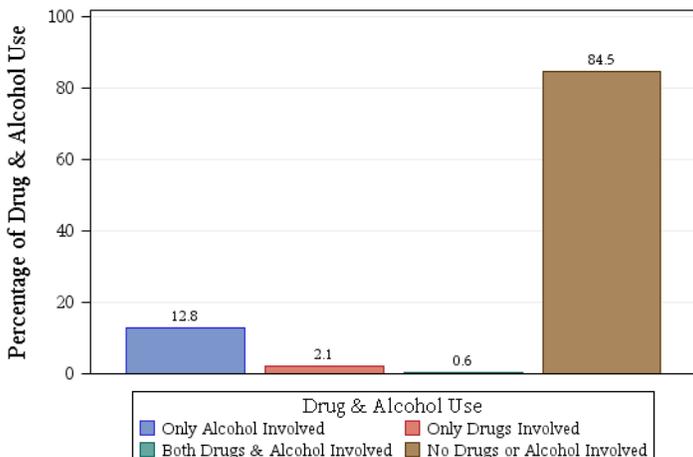
**Motorcycle
2012-2014**



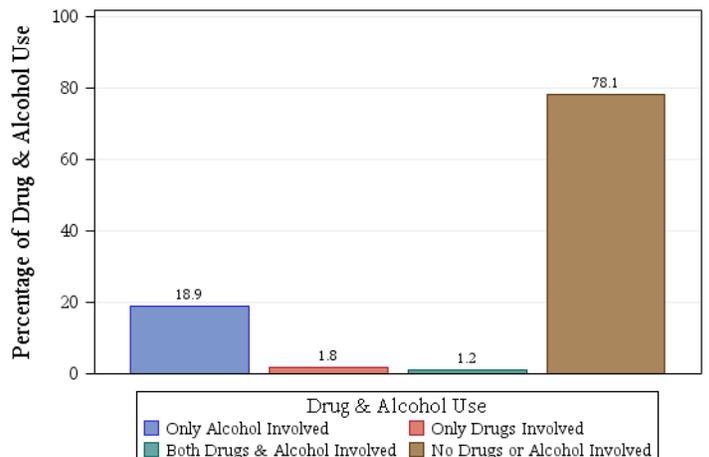
**Automobile
2012-2014**



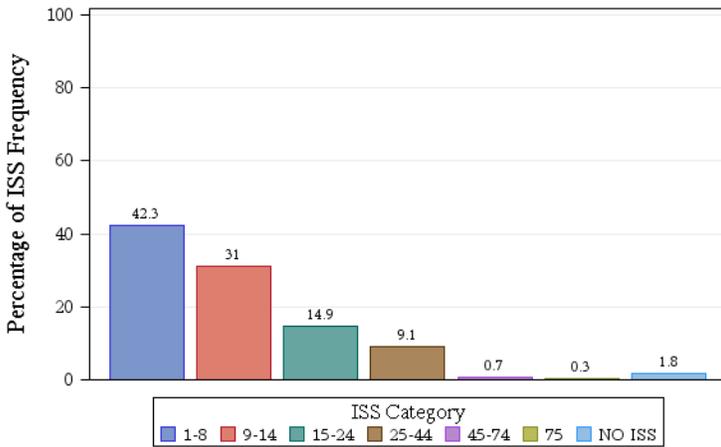
**Bicyclist
2012-2014**



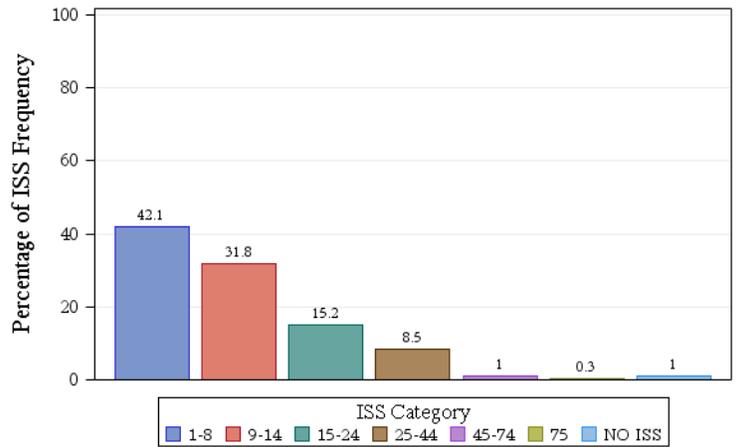
**Pedestrian
2012-2014**



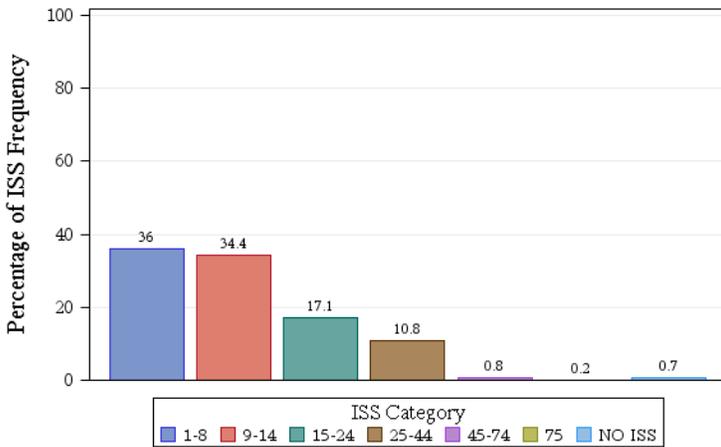
2012



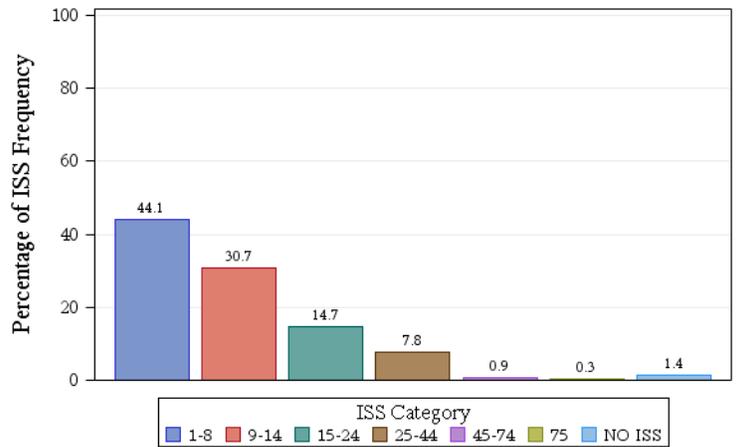
2013-2014



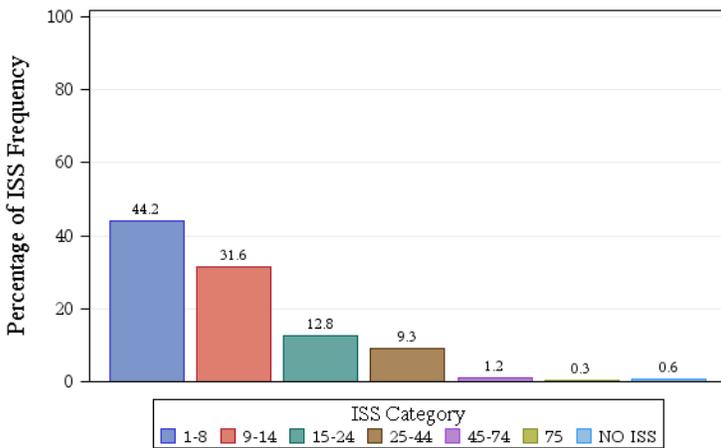
**Motorcycle
2012-2014**



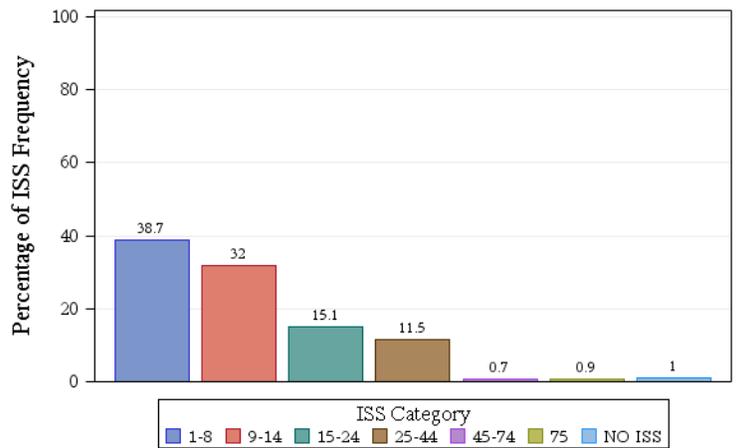
**Automobile
2012-2014**



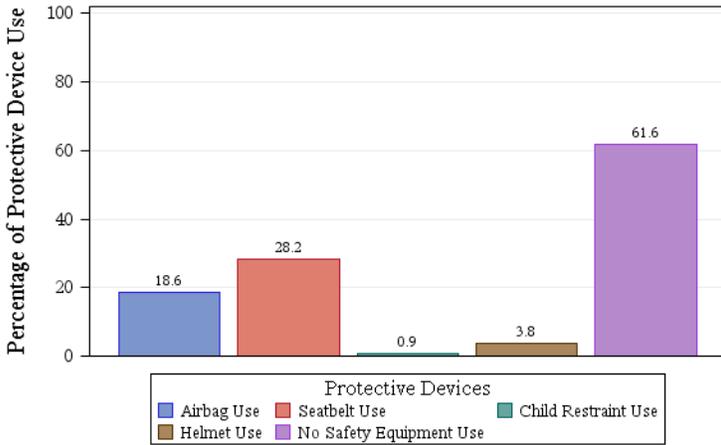
**Bicyclist
2012-2014**



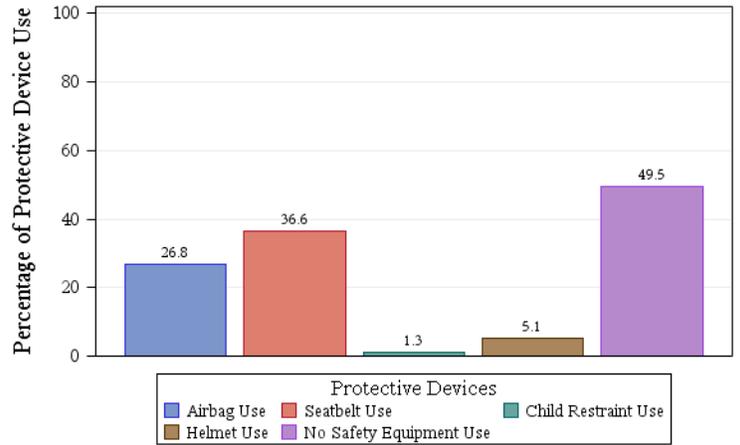
**Pedestrian
2012-2014**



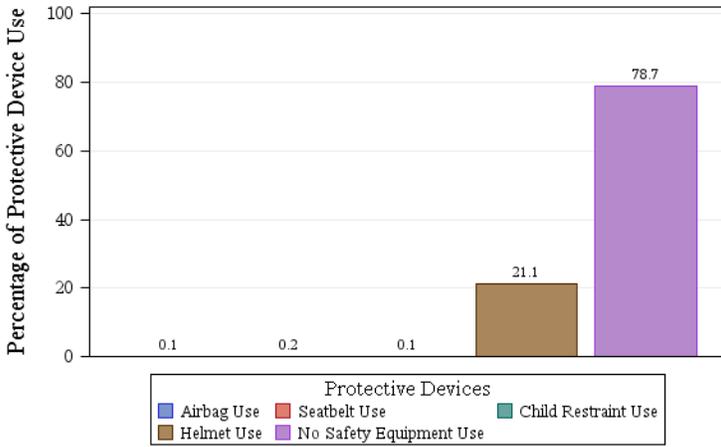
2012



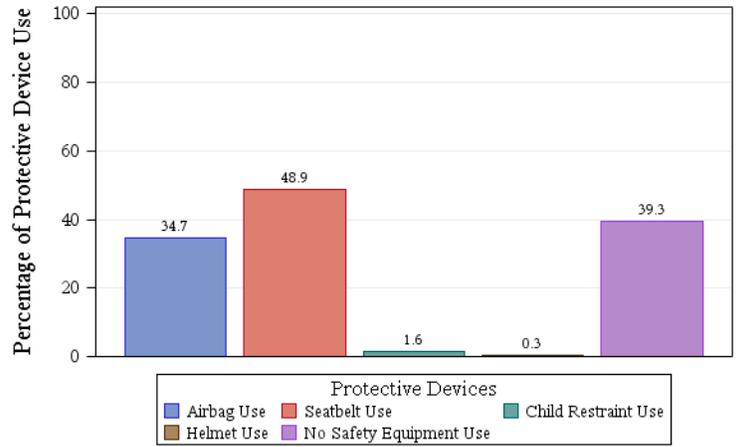
2013-2014



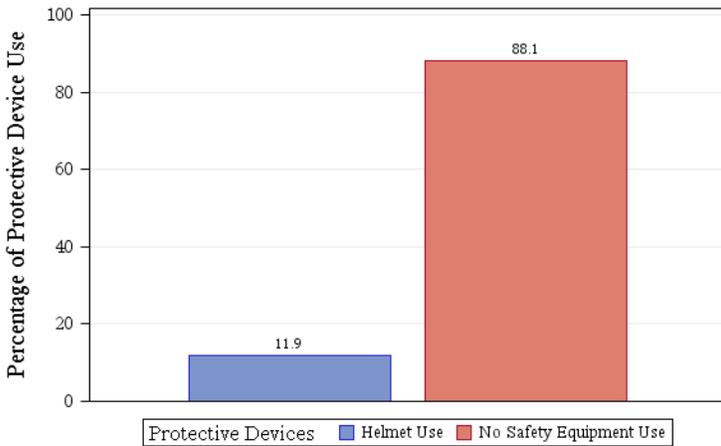
**Motorcycle
2012-2014**



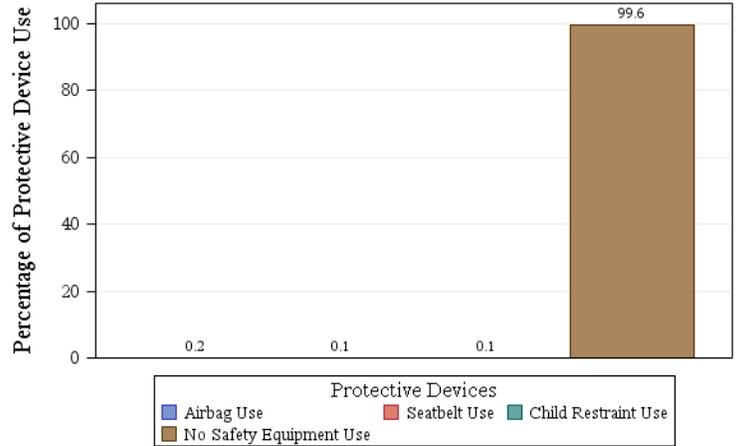
**Automobile
2012-2014**



**Bicyclist
2012-2014**



**Pedestrian
2012-2014**



Indiana Trauma Registry, January 1, 2014 - December 31, 2014 MVC involving Drugs or Alcohol By Public Health Preparedness Districts

