2013 Trauma Registry Data Elements (NTDB)

**Demographic Information**
- Patient’s Home Zip Code
- Patient’s Home Country
- Patient’s Home State
- Patient’s Home County
- Patient’s Home City
- Alternate Home Residence
- Date of Birth
- Age
- Age Units
- Race
- Ethnicity
- Gender

**Injury Information**
- Injury Incident Date
- Injury Incident Time
- Work-Related
- Patient’s Occupational Industry
- Patient’s Occupation
- Primary E-Code
- Location E-Code
- Additional E-Code
- Incident Location Zip Code
- Incident Country
- Incident State
- Incident County
- Incident City
- Protective Devices
- Child Specific Restraint
- Airbag Deployment

**EMS/Acute Care Information**
- EMS Unit Departure Time from Scene or Transferring Facility
- Transport Mode
- Other Transport Mode
- Initial Field Systolic Blood Pressure
- Initial Field Pulse Rate
- Initial Field Respiratory Rate
- Initial Field Oxygen Saturation
- Initial Field GCS – Eye
- Initial Field GCS – Verbal
- Initial Field GCS – Motor
- Initial Field GCS – Total

**Initial Assessment Information**
- Initial ED/Hospital Systolic Blood Pressure
- Initial ED/Hospital Pulse Rate
- Initial ED/Hospital Temperature
- Initial ED/Hospital Respiratory Rate
- Initial ED/Hospital Respiratory Assistance
- Initial ED/Hospital Oxygen Saturation
- Initial ED/Hospital Supplemental Oxygen
- Initial ED/Hospital GCS – Eye
- Initial ED/Hospital GCS – Verbal
- Initial ED/Hospital – Motor
- Initial ED/Hospital – Total
- Initial ED/Hospital GCS Assessment Qualifiers

**Diagnosis Information**
- Injury Diagnoses
- AIS Predot Code
- AIS Severity
- ISS Body Region
- AIS Version
- Locally Calculated ISS

**Co-Morbidity Information**
- Co-Morbid Conditions

**Procedures Information**
- Hospital Procedures
- Hospital Procedure Start Date
- Hospital Procedure Start Time

**Complications / PI Information**
- Hospital Complications

**Outcome Information**
- Total ICU Length of Stay
- Total Ventilator Days
- Hospital Discharge Date
- Hospital Discharge Time
- Hospital Discharge Disposition
- Primary Method of Payment

**Indiana-Specific Data Element**
- Medical Record Number