

Katie Gatz, interim division director, attended the first EMS Forum hosted by the Indiana Department of Homeland Security on March 6th. The EMS Forum programs are designed for EMS providers from around the state to provide feedback to the IDHS. The Division of Trauma and Injury Prevention staff has attended the forums to provide additional insight into data collection and to hear some of the ongoing issues in pre-hospital care.

On March 7th, Katie hosted a training on the Indiana Trauma Registry. The sessions were attended by 8 people during the hospital morning session and by 4 people during the EMS afternoon session. Katie had a meeting at the Rehabilitation Hospital of Indiana on March 12th to discuss the technical aspects of submitting rehab data directly into the trauma registry.

Camry Hess, trauma registry database analyst, and Katie spoke with Jose Thomaz via conference call to discuss the tools utilized by CODES to probabilistically match data. Camry has been researching and evaluating different matching tools to identify what program would be most useful to the trauma registry for probabilistic linking purposes.

Jessica Skiba, injury prevention epidemiologist, hosted the first Injury Prevention Advisory Council (IPAC) meeting of the year on March 20th at the ISDH offices. The meeting was well attended and the group networked, discussed 2012 data, and conversed about the future of the group. IPAC will ultimately work to evaluate best practices and evidence-based programs to reduce injury morbidity and mortality in Indiana.

The division presented a FARS data request to the Data Release Committee on March 26 so that the FARS team can have access to patient identifiable motor vehicle traffic data from the Indiana Trauma Registry.

During the week of March 24th through the 28th, Katie and Murray Lawry, EMS registry manager, traveled the northern part of Indiana to train Pre-Hospital providers, hospitals, and rehabilitation hospitals on how to use the Indiana Trauma Registry. On Monday, March 24th, Katie & Murray traveled to Anderson where they trained 10 users on the trauma registry and 17 users on the EMS registry. On Tuesday, March 25th, they traveled to Fort Wayne where they trained 15 users on the trauma registry and 4 users on the EMS registry. On Wednesday, March 26th, they traveled to South Bend where they trained 8 users on the trauma registry and 7 users on the EMS registry. On Thursday, March 27th, Katie & Murray travel to Crown where they trained 10 users on the trauma registry and 11 users on the EMS registry. On the last day of the tour, Friday, March 28th, they traveled to Lafayette where they trained 8 users on the trauma registry and 7 users on the EMS registry.

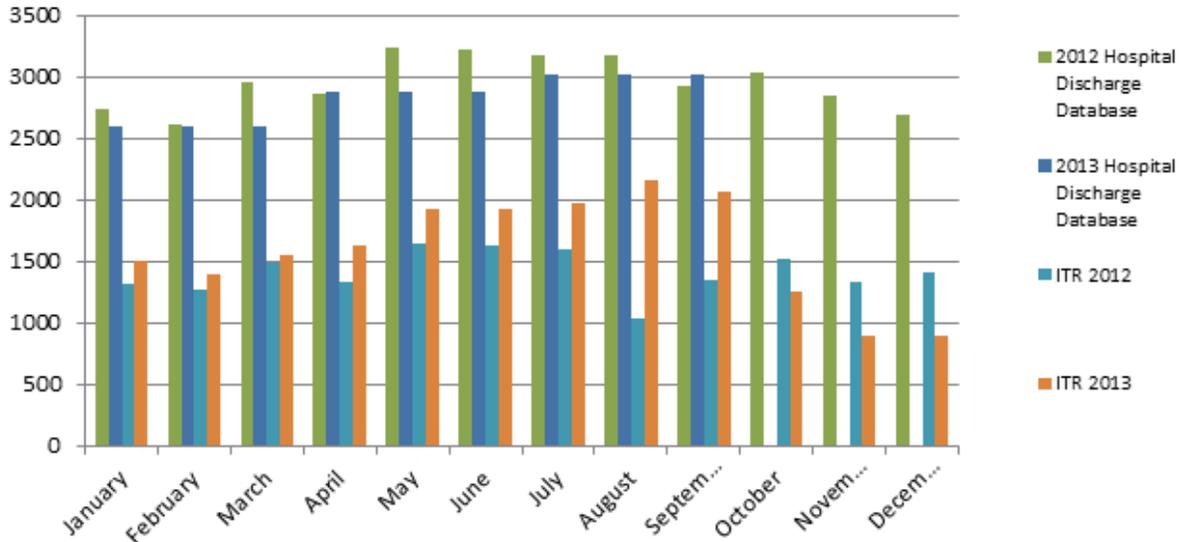
On March 31, Jessica and Katie attended a meeting at IU Health– Riley Hospital for children to discuss a potential collaborative research project regarding pediatric sports abdominal injuries.

The 2013 data presented in this report will be complete on May 1, 2014.

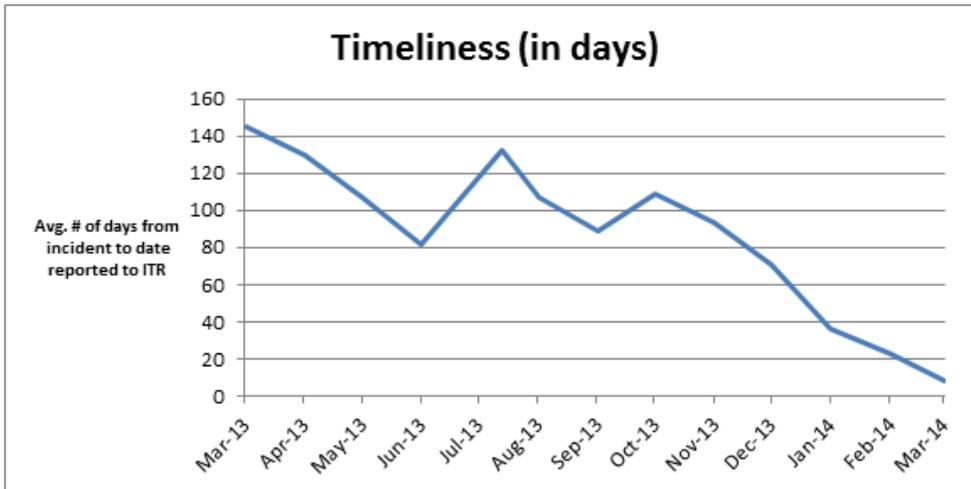
The Indiana Trauma Registry (ITR) monthly report is a dashboard style report for the Indiana Criminal Justice Institute (ICJI) and any other party concerned about trauma in Indiana. This report highlights the three data quality measures for the ICJI grant: completeness, timeliness, and uniformity. This 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.



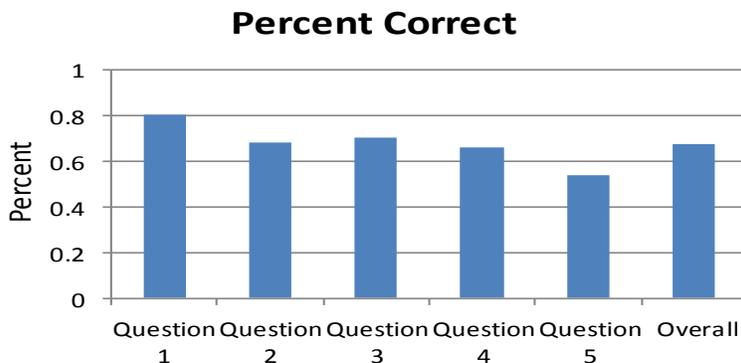
Timeliness



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.

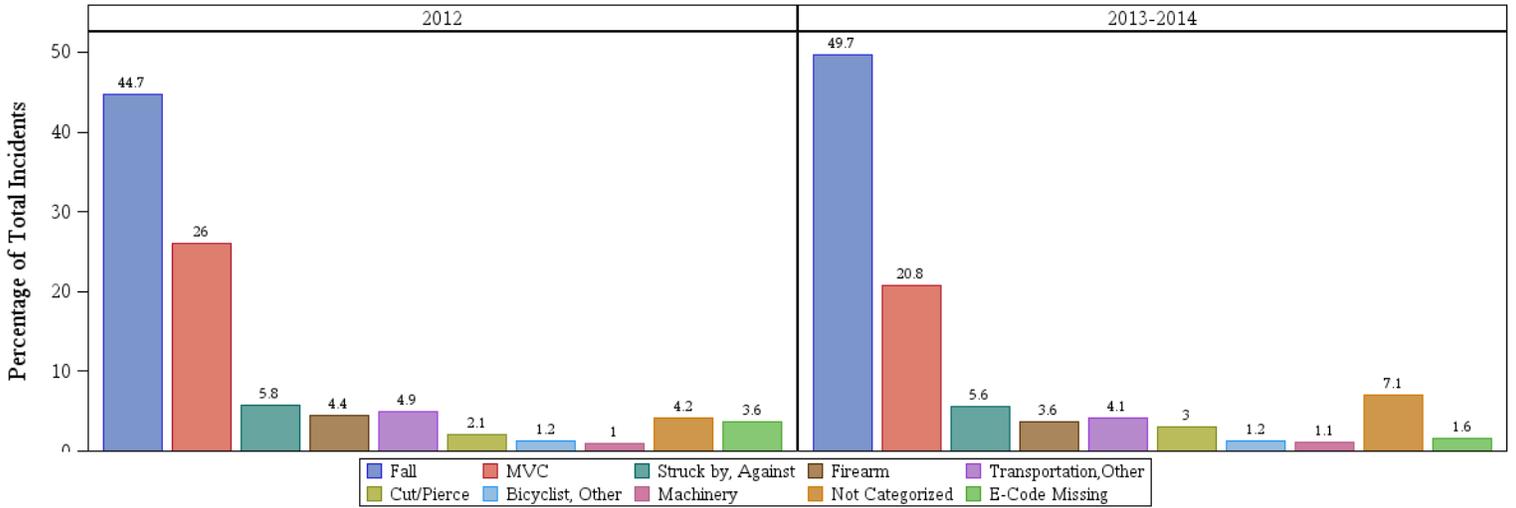
The decrease in timeliness from July 2013 until March 2014 is due to only timely reports being provided to the ITR during this time frame, typically from non-trauma hospitals and early reporting trauma centers.

Uniformity



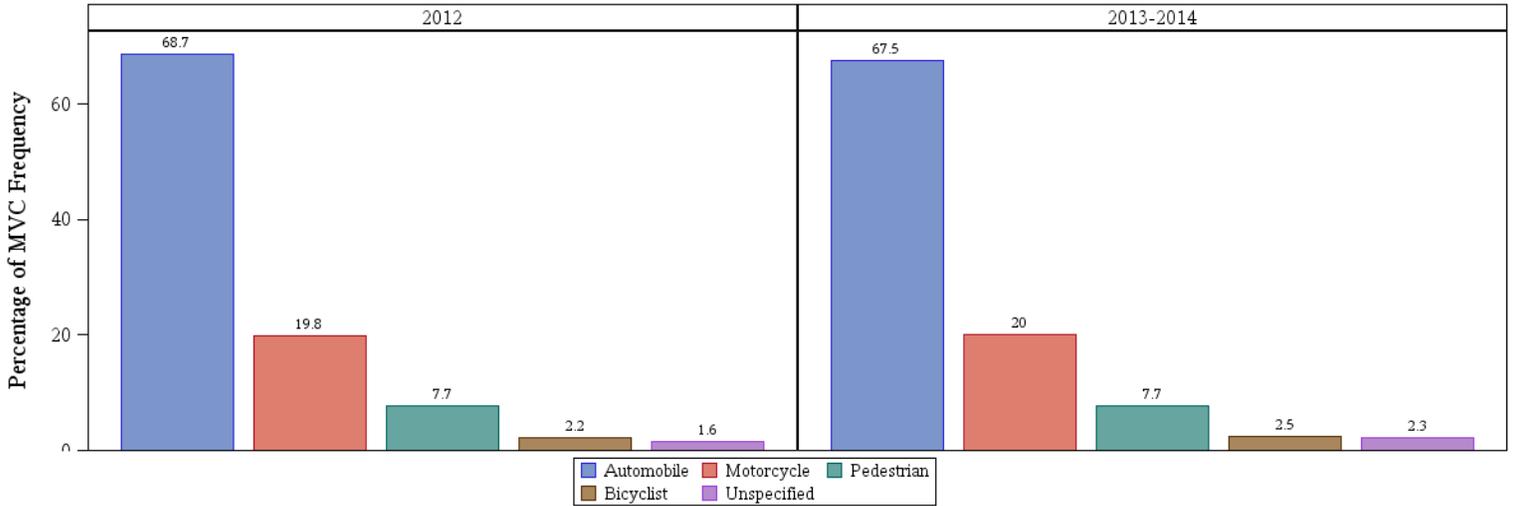
In March we sent out the second monthly quiz for the inter-rater reliability study. Sixty registrars completed the quiz from 50 hospitals. The percent of correct answers was 69.3% for the entire quiz and the average free-marginal Kappa (measure of consistency) 0.435. We plan to collect data for four 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 investigating integration of trauma and EMS data by exploring options to link trauma and EMS data and working with EMS providers to submit valid Hospital Facility ID codes.

Cause of Injury (COI)

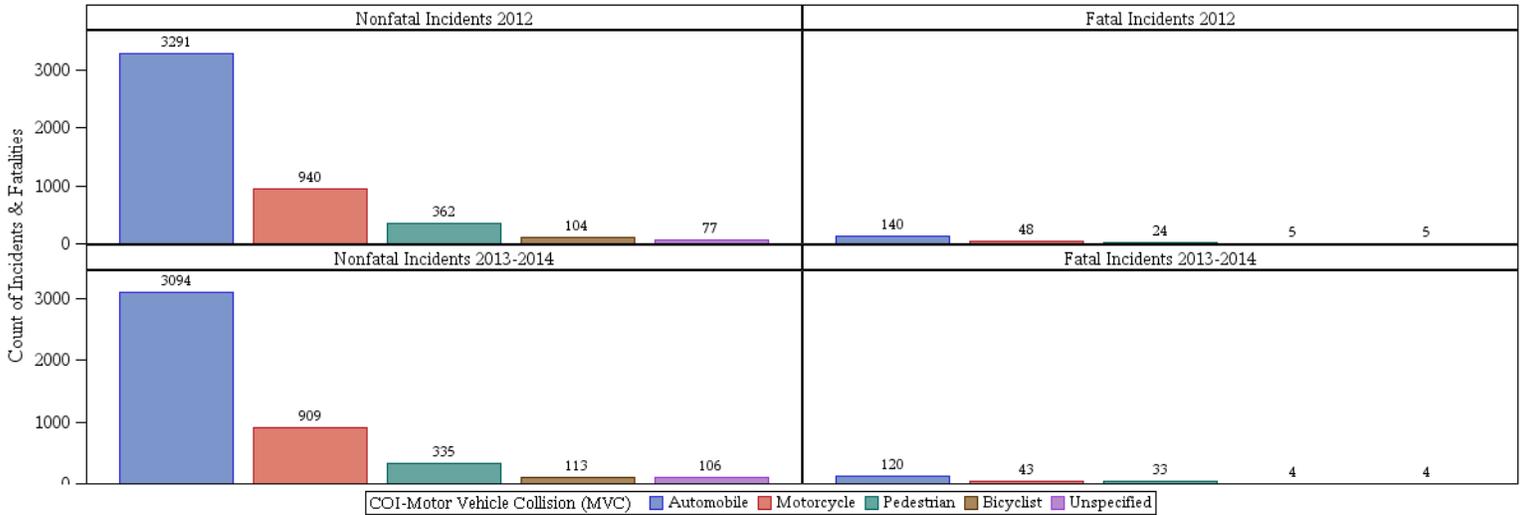


<1% of COI: Pedestrian (Other), Natural/Environmental, Overexertion, Fire/Burn, and Bites/Stings

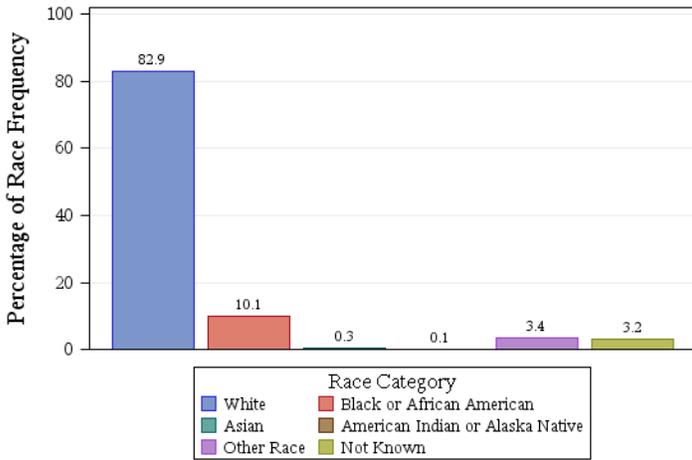
COI-Motor Vehicle Collision (MVC)



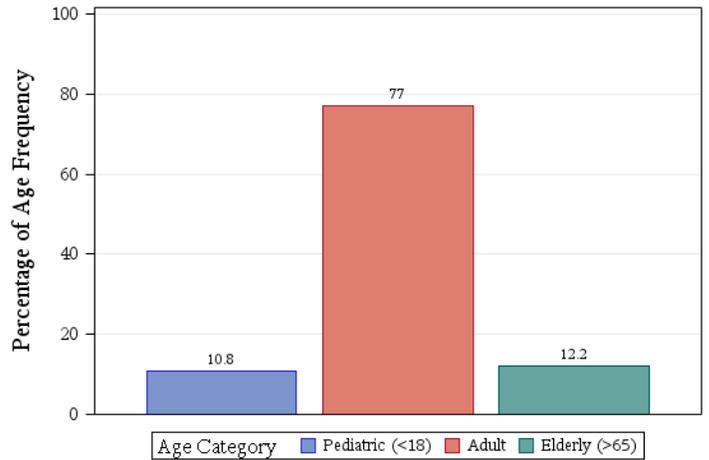
COI-MVC Nonfatal Incidents and Fatal Incidents



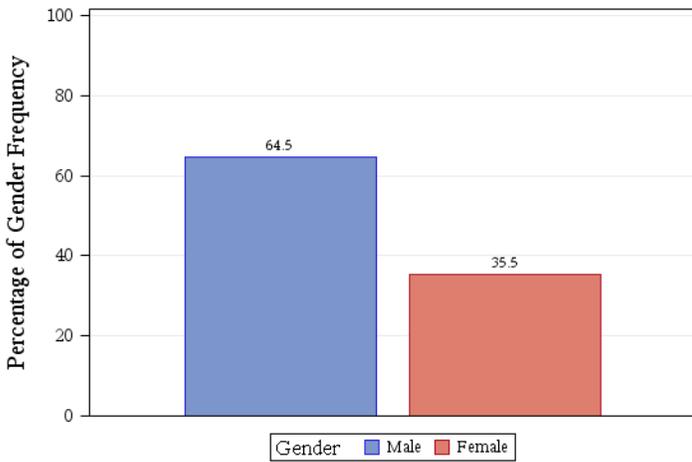
Race



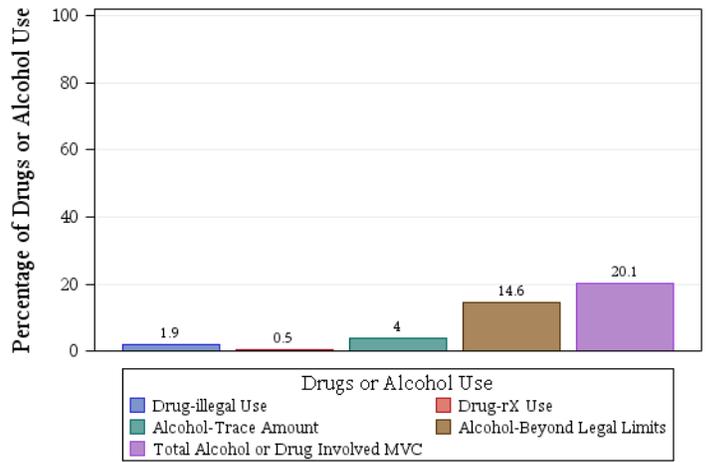
Age



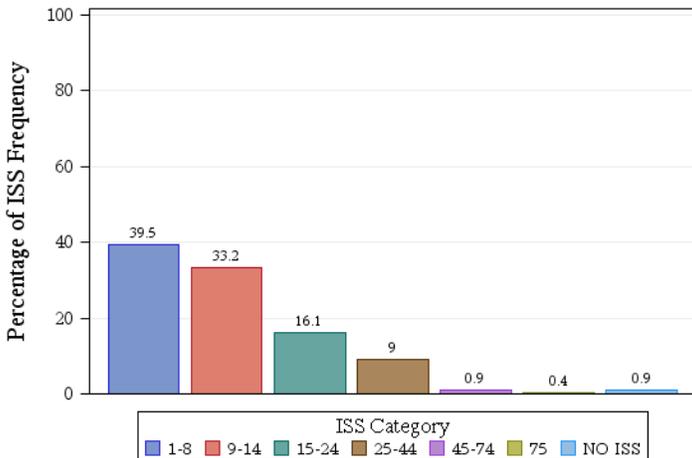
Gender



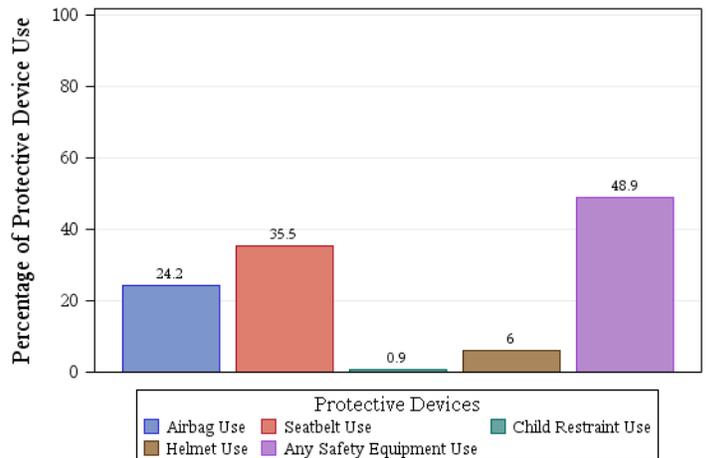
Drug & Alcohol Use



Injury Severity Score

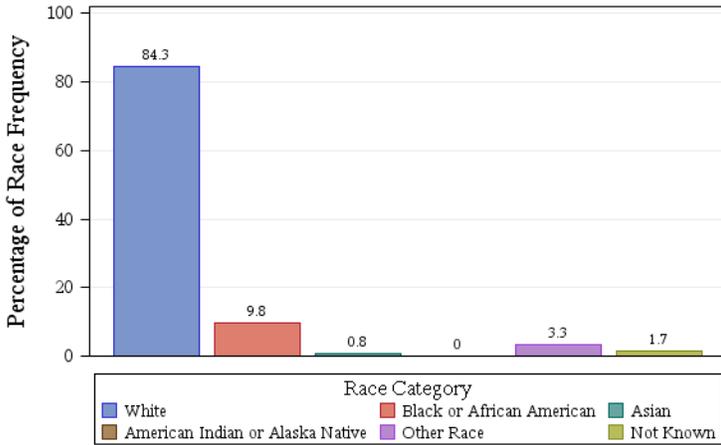


Protective Devices

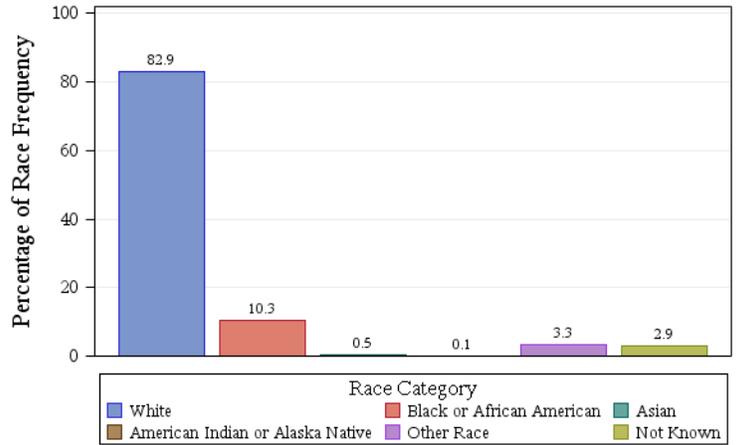


Injury Severity Score (ISS) is a measure of how bad the injury is. Scores over 15 are considered major trauma. A score of 75 is considered not survivable.

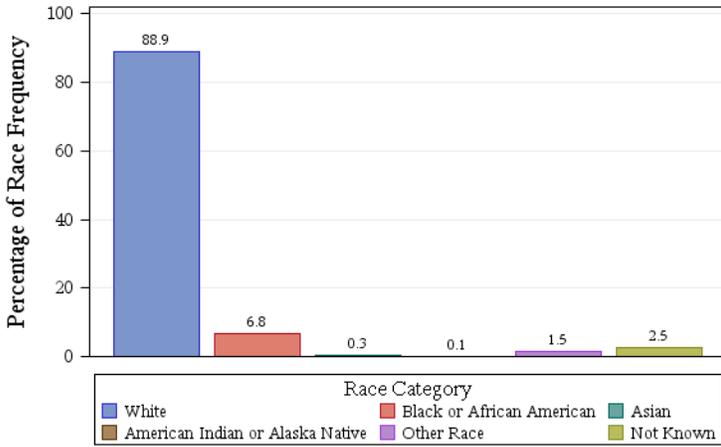
2012



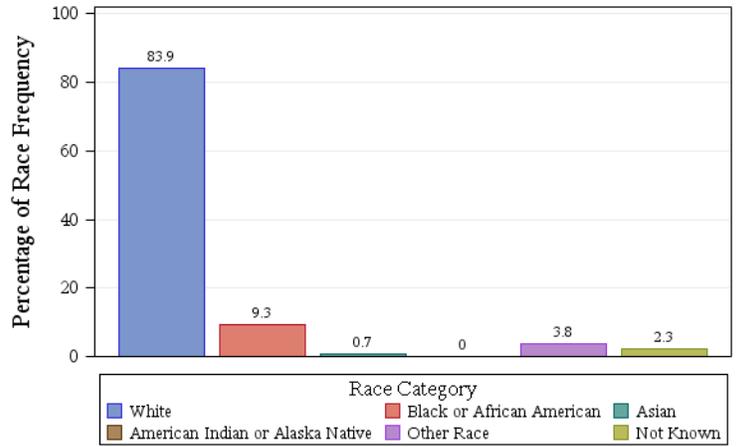
2013-2014



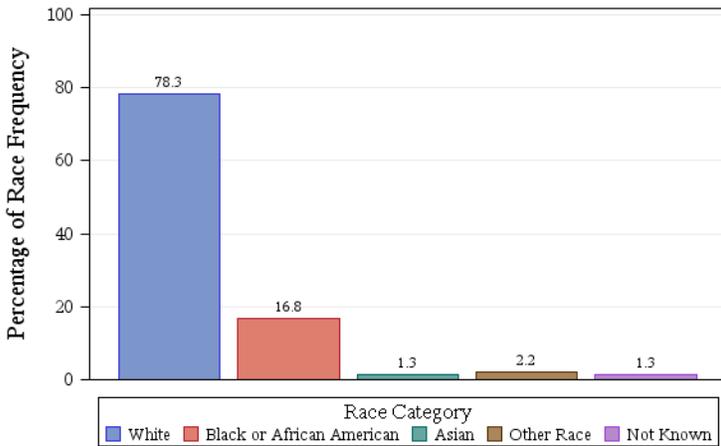
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2012-2014**



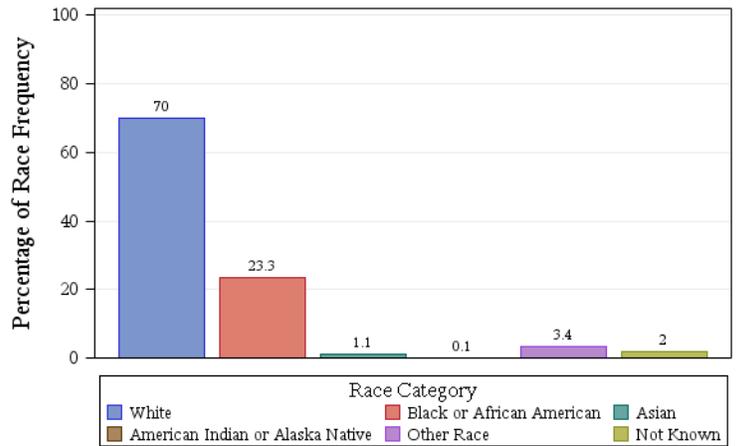
**Automobile
2012-2014**



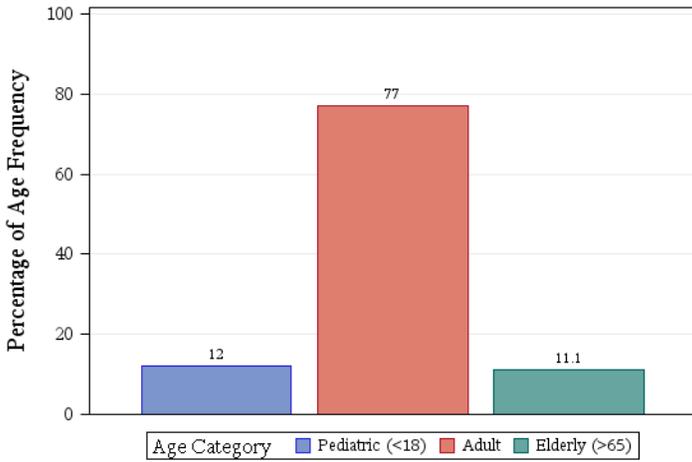
**Bicyclist
2012-2014**



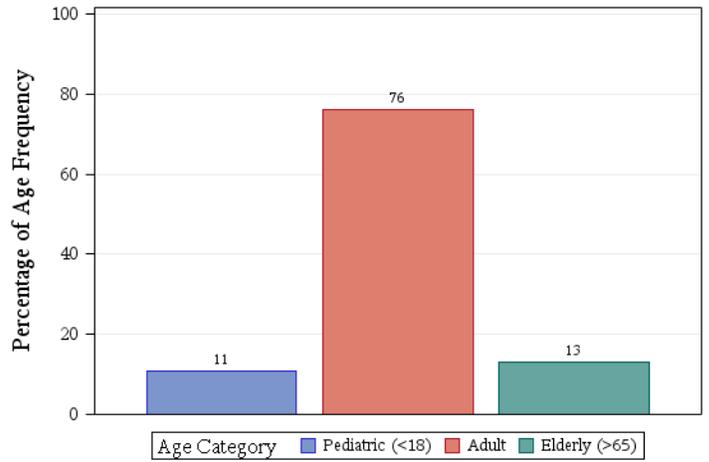
**Pedestrian
2012-2014**



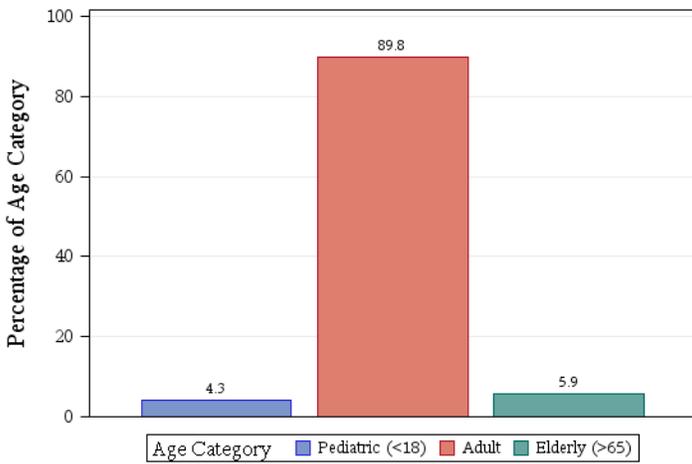
2012



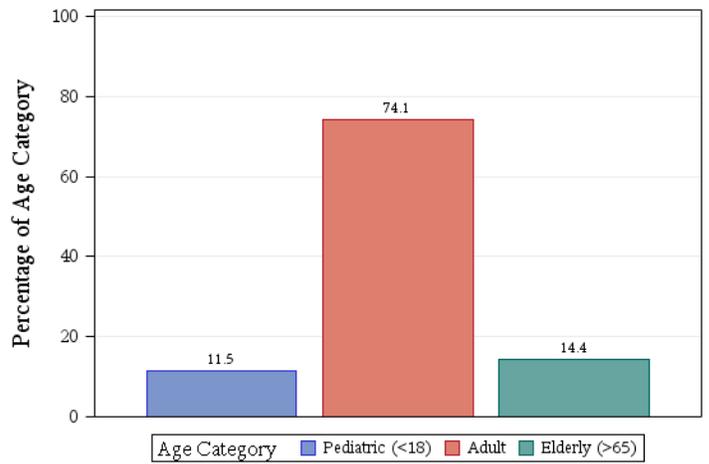
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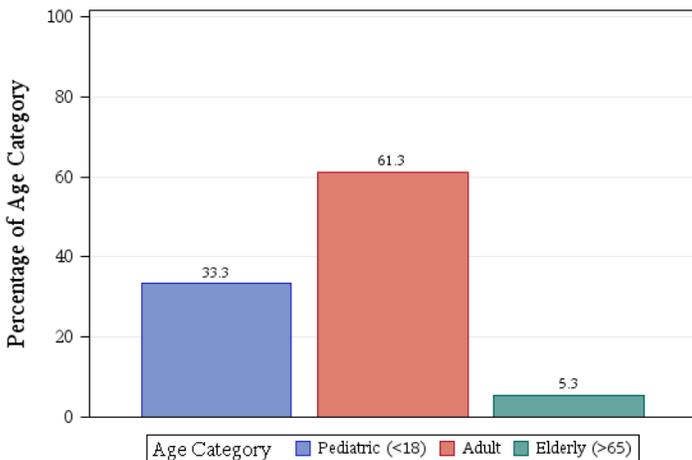
Motorcycle
2012-2014



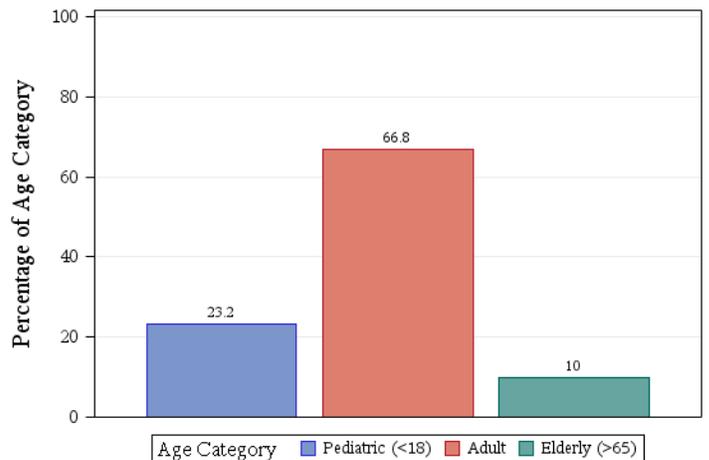
Automobile
2012-2014



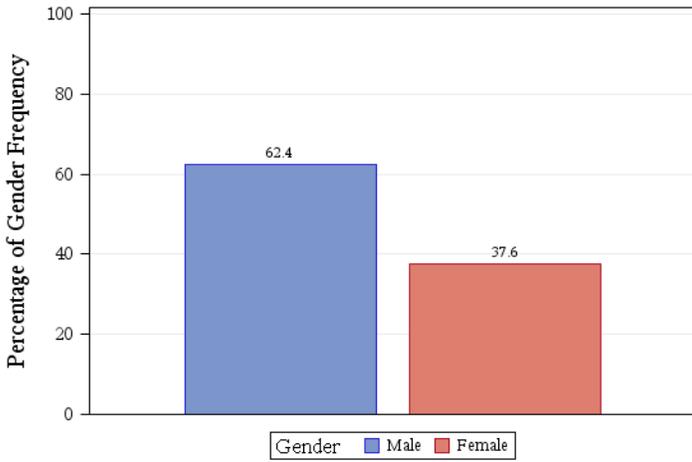
Bicyclist
2012-2014



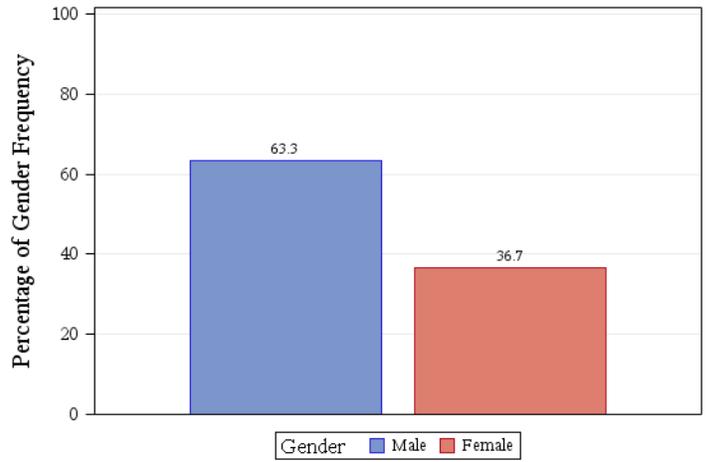
Pedestrian
2012-2014



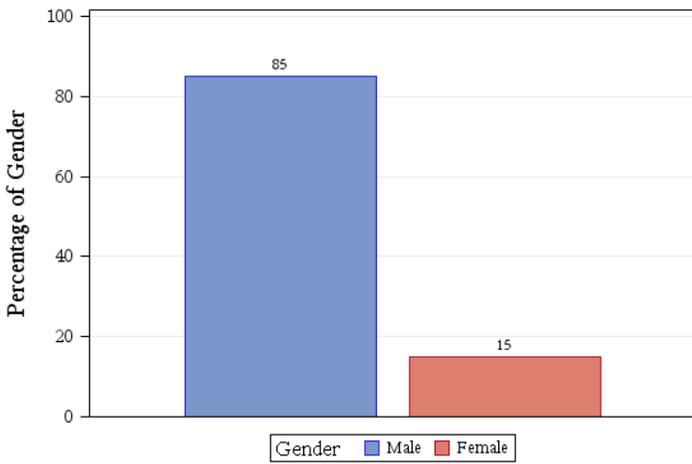
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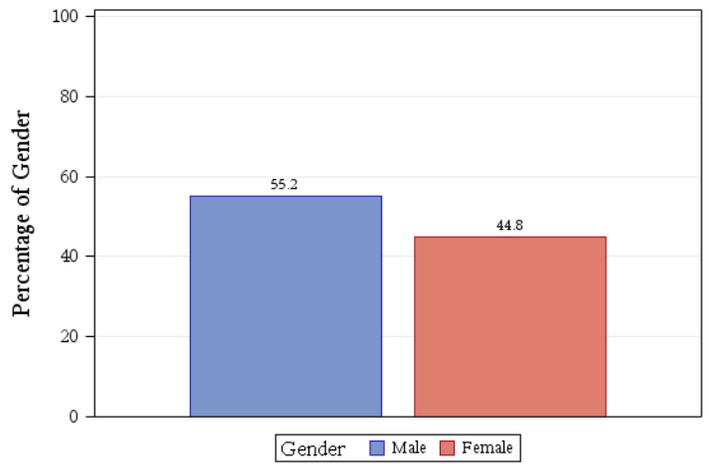
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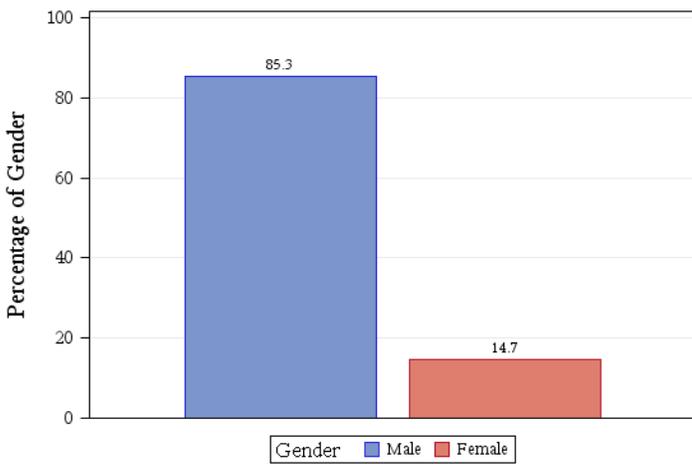
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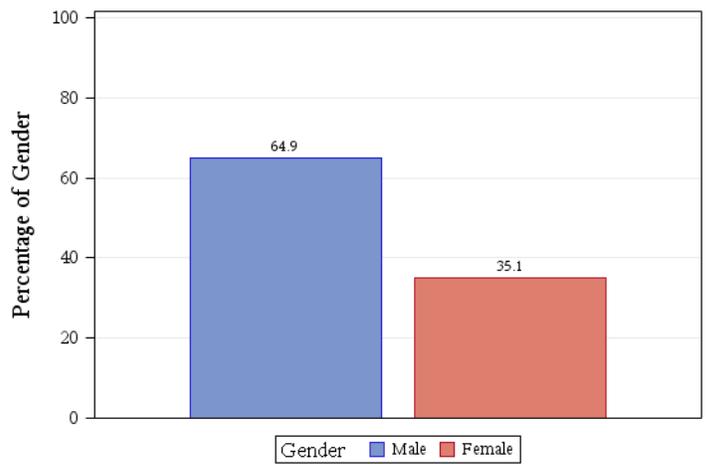
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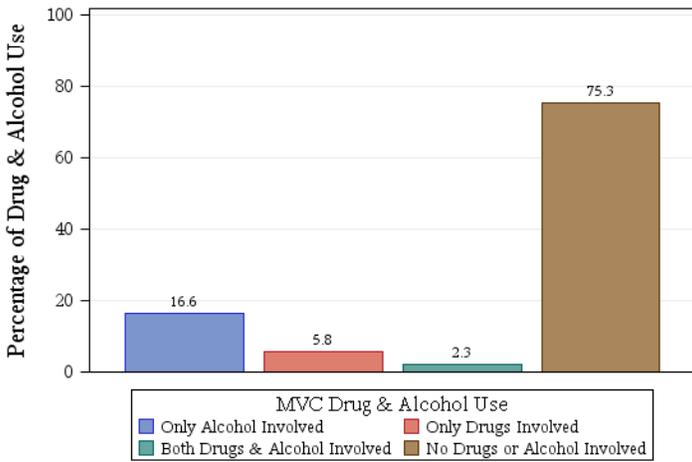
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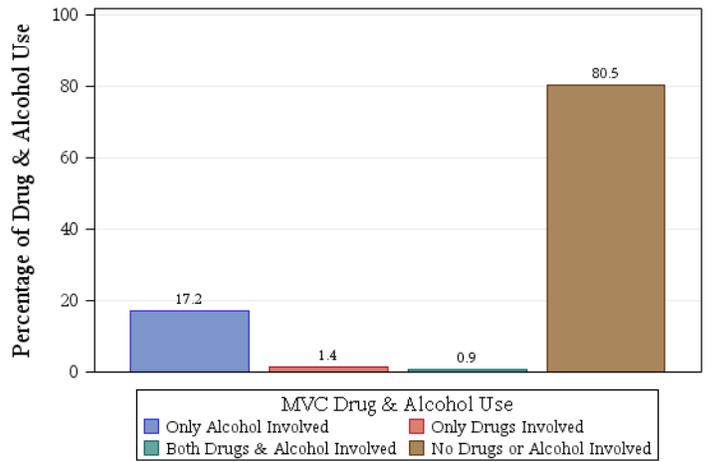
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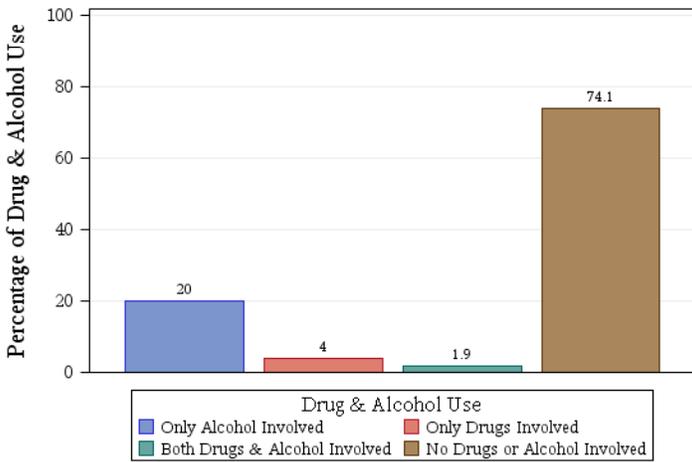
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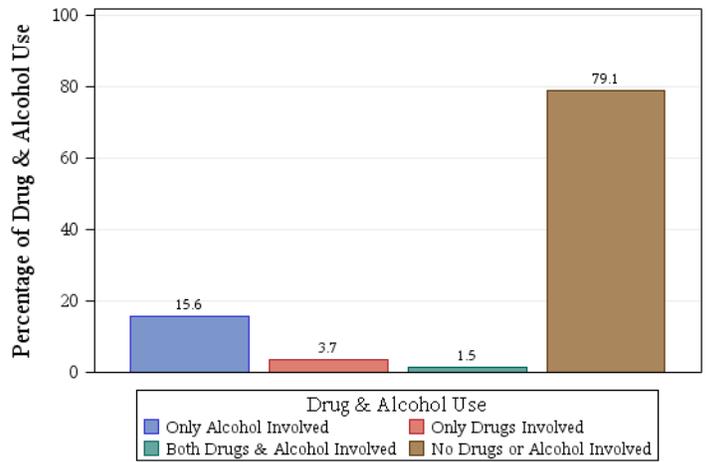
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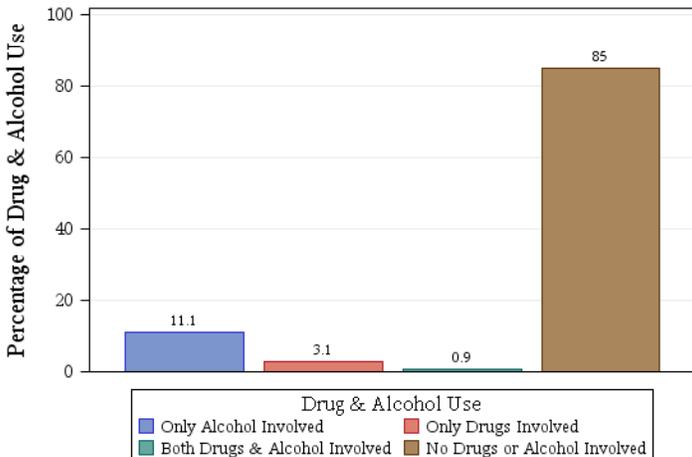
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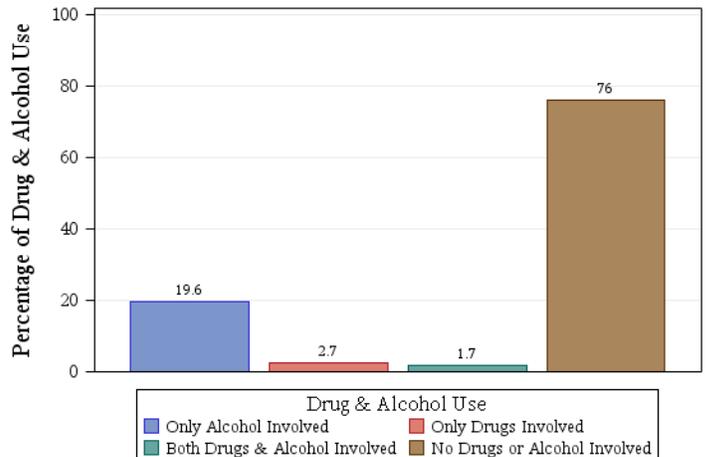
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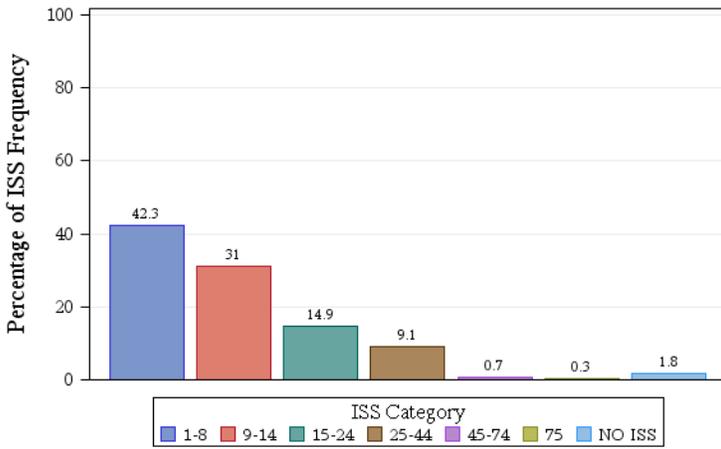
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2012-2014**



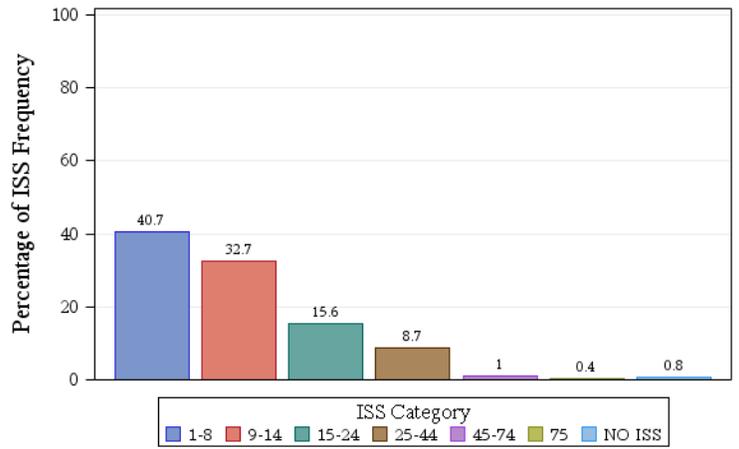
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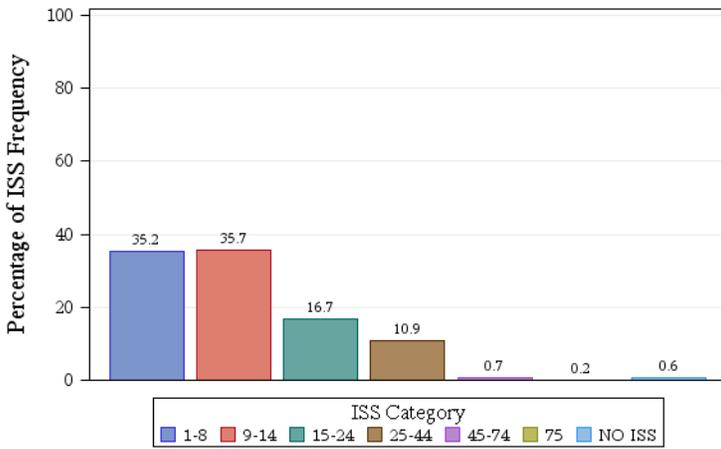
2012



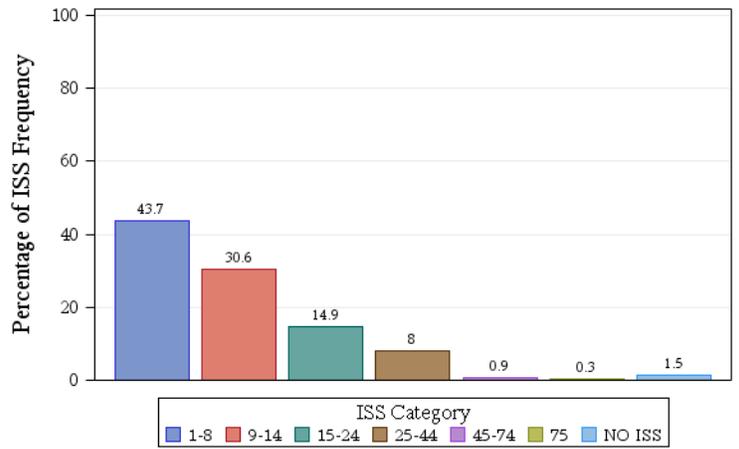
2013-2014



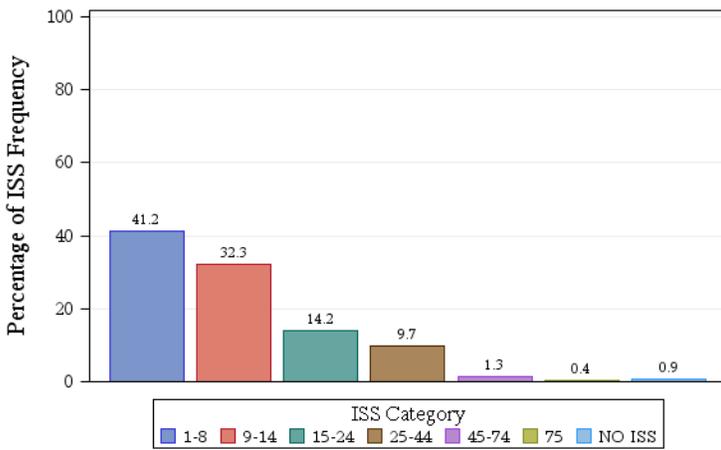
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2012-2014**



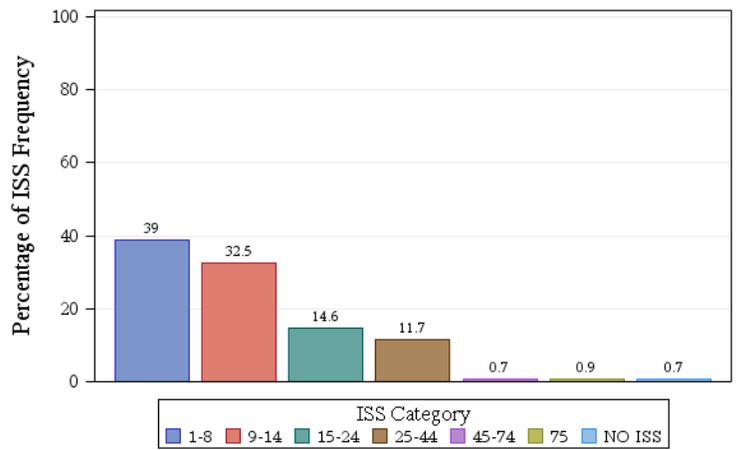
**Automobile
2012-2014**



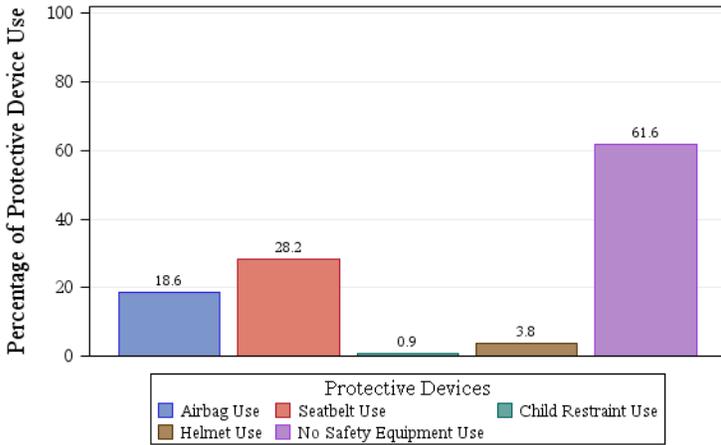
**Bicyclist
2012-2014**



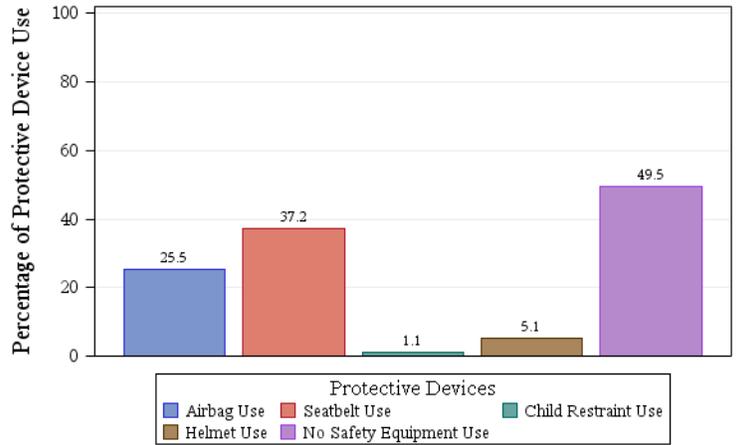
**Pedestrian
2012-2014**



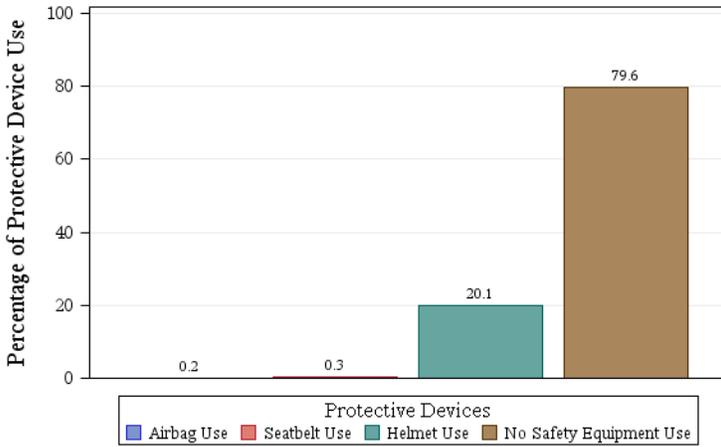
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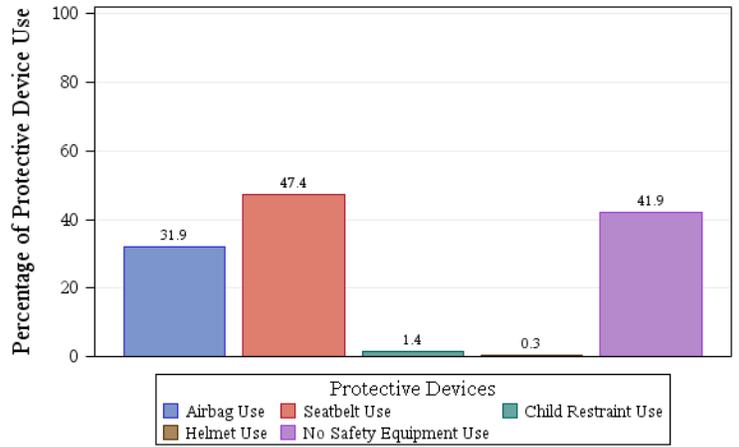
2013-2014



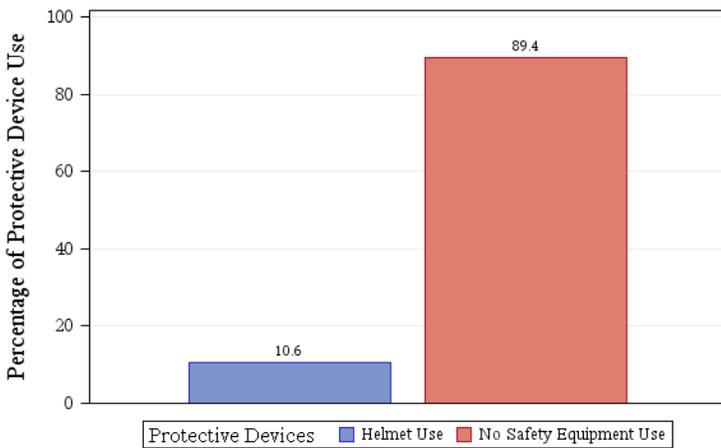
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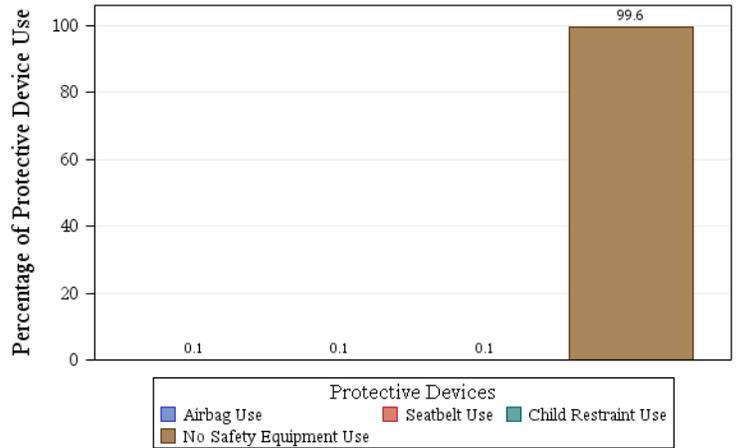
**Automobile
2012-2014**



**Bicyclist
2012-2014**



**Pedestrian
2012-2014**



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

