

Arkansas Trauma Registry NEWSLETTER



Issue 19 | May 1, 2020

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THANK YOU *To our*
**HEALTHCARE HEROES &
FIRST RESPONDERS.**

TRAUMA BAND 411

- **Who gets a trauma band?**

Trauma bands shall be placed on all trauma patients. Patients arriving by an emergency medical service (ground or air) should have a trauma band on arrival. Patients presenting as walk-in or by POV with a trauma, or if EMS did not place a band, shall have a trauma band placed by the ED staff and recorded in the patient care record. A patient being transferred to an acute care facility or burn center must have a trauma band on and recorded before they leave the facility.

- **What if a patient lives in Arkansas, but is injured in another state?**

Issue of Residence: Any Arkansas resident, no matter where the injury occurred, should be included in the Arkansas Trauma Registry IF they meet our inclusion criteria. If a non-Arkansas resident presents to an Arkansas Trauma Center, within the state of Arkansas, they should be included in the Arkansas Trauma Registry IF they meet our inclusion criteria.

NEW TRAUMA BANDS

Beginning late this summer, you'll start seeing new trauma bands. These new trauma bands will have barcodes that you can scan, provided you have the appropriate scanning technology.

Thank you for all that you do!

COVID-19 AND TRAUMA

A new ICD-10-CM code for a patient with a confirmed COVID-19 diagnosis is available for use; U07.1. This code is available in the Windows (desktop) registry diagnosis menu. Soon, it will also be available in the Web-based registry. In the meantime, use the code Z20.828 (contact with and (suspected) exposure to other viral communicable diseases) if you have a trauma patient that also tests positive for the Novel Coronavirus. But, why would a medical diagnosis be added to a trauma record? According to the American College of Surgeons, COVID-19 could impact trauma patient outcomes and should be recorded. Registry vendors offered a quick response for reporting positive COVID-19 trauma cases by adding the U07.1 to the injury diagnosis menu. If you have questions, contact tqip@facs.org. Or, you may watch a short presentation by [clicking here](#).

*** DATA SUBMISSION SCHEDULE ***

Data submittal will be based on discharges that occur in calendar quarters. The deadline for data submission is 60 days from the close of the quarter*. Arkansas Trauma Registry (ATR) recommends that data records be entered into the registry as close to the discharge date as possible. *Notify trauma registry staff and your ADH Trauma Nurse Coordinator by email if your submission will be late. Please include an estimate of when your submission will be completed.

January 1 through March 31
QTR 1 – May 31

April 1 through June 30
QTR 2 – August 31

July 1 through September 30
QTR 3 – November 30

October 1 through December 31
QTR 4 – March 1

ARKANSAS TRAUMA REGISTRY PATIENT INCLUSION CRITERIA

Follow each step downward to include or exclude patient

START HERE:

Did the patient sustain one or more traumatic injuries within 14 days from initial hospital encounter?

NO →

DO NOT INCLUDE

YES ↓

Does the patient have a primary ICD-10-CM diagnosis code of S00-S99 (with 7th character modifiers of A,B, or C only), T07, T14, T20-T28 (with 7th character modifier of A only), T30-T32, T79.A1-T79.A9 (with 7th character modifier of A only), T59.811A-T59.814A, T59.91XA-T59.94XA (Smoke Inhalation), T75.00XA-T75.01XA (Lightning), T75.1XXA (Drowning and nonfatal submersion), T71.111A-T71.114A, T71.121A-T71.124A, T71.131A-T71.134A, T71.141A-T71.144A, T71.151A-T71.154A, T71.161A-T71.164A, T71.191A-T71.194A, T71.20XA-T71.21XA, T71.221A-T71.224A, T71.231A-T71.234A, T71.29XA, T71.9XXA (Asphyxiation and Strangulation includes Hanging), T75.4XXA Electrocutation, T63.001A Snakebites (venomous) and E-code W54.0XXA Dog bite?¹

NO →

DO NOT INCLUDE¹

¹Do not exclude if there was a Trauma Team Activation. Continue through to step three.

Exclude superficial injuries, late effect codes or foreign bodies

YES ↓

CONTINUE TO STEP 2:

Did the patient's injury result in death in the ED or after admission?²

²*Include all trauma deaths independent of hospital admission or hospital-to-hospital transfer status*

YES →

INCLUDE

NO ↓

Was the patient **directly** admitted (inpatient) to your hospital?

³*Exclude patients with isolated injuries admitted for elective and/or planned surgical intervention*

YES →

INCLUDE

NO ↓

Was the patient admitted to your facility due to their injury?⁴

⁴*Include admits due to missed or delayed diagnosis.*

⁴*Exclude planned readmits, admits via clinic, admits for L&D monitoring, observation more than 24 hours, or admits for any reason other than trauma*

YES →

INCLUDE

NO ↓

CONTINUE TO STEP 3:

Was the Trauma Team activated (includes the trauma surgeon)?⁵

⁵*All activations are included even in the absence of a qualifying ICD 10 diagnosis code*

YES →

INCLUDE

NO ↓

Was the patient transferred⁶ from one acute hospital to another acute care hospital?

⁶*Private vehicle transfers are included*

YES →

INCLUDE

NO ↓

DO NOT INCLUDE patient in the Arkansas Trauma Registry

Residency requirement: Any Arkansas resident, no matter where the injury occurred, should be included in the Arkansas Trauma Registry assuming the patient meets the inclusion criteria and presents to an Arkansas Trauma Center either initially or as a transfer. If a non-Arkansas resident presents to an Arkansas Trauma Center, within the state of Arkansas, they should be included in the Arkansas Trauma Registry assuming the patient meets the inclusion criteria.

ANNOUNCEMENTS

!!! ACS Verification Extensions !!!

The American College of Surgeons (ACS) announced on Tuesday, March 24, 2020, that it will grant all hospitals currently verified by the Committee on Trauma (COT) a one-year extension. In addition, the COT is postponing all scheduled verification site visits for up to one year. Therefore, for facilities due for site visits in 2021, 2022, or 2023, extensions may be requested in order for adequate time to be given to recovery post-COVID-19. More information can be found [here](#).

NEW VALIDATION REPORT FEATURES

The registry validation report is an ever-evolving resource for facilities. As the state registry staff, we are committed to giving facilities the feedback they need to have accurate and reliable data that can drive quality and performance improvement. In the near future we will be adding elements to the validation report aligned with measures the trauma section and the ad hoc data committee of the Trauma Advisory Council have indicated need further study.

The first two metrics added to the report will focus on the ED questions regarding head CT and IV antibiotic administration timing. We will provide more explanation in the email that accompanies the report. If, after getting the reports, questions arise, please contact us.



Upcoming Training and Conferences

All on-site trainings and conferences have been postponed or moved online due to COVID-19. Below are online only training opportunities.

ATS Trauma Registry Courses

Online, available anytime.

Assorted webinars for D.I. products

Online, various scheduled times

ESO Events

Get to know ESO!

*** For more continuing education opportunities, please visit our Arkansas Registrars Check-In Google Group, under the Continuing Education Opportunities post. Please let us know if you need help finding the group or signing up. ***

