Name of Policy:	Trauma Registry	
Policy Number:	3364-141-01	THE UNIVERSITY OF TOLEDO MEDICAL CENTER
Department:	Trauma Department	
Approving Officer:	Chief Nursing Officer	
Responsible Agent:	Director, Trauma Services	
Scope:	The University of Toledo Medical Center (UTMC)	Effective Date: 7/1/2020 Initial Effective Date: 11/1/2007
New policy proposal Minor/technical revision of existing policy Major revision of existing policy X Reaffirmation of existing policy X		

(A) Policy Statement

The Trauma Registry collects and stores information on trauma patients, prepares reports on data collected, and provides information for Quality Assurance and Clinical Research for the medical staff and other departments at UTMC.

(B) Purpose of Policy

To maintain a consistent manner of identifying trauma patients for the Trauma Registry.

(C) Procedure

- 1. Identification of cases for inclusion in the data base.
 - a. The trauma registry shall include data on the following:
 - All Trauma Activations, Level I or II
 - Transferred into or out of acute care facility regardless of LOS at transferring facility or mode of transfer
 - All trauma patients with an appropriate mechanism of injury who are admitted to UTMC (Floor, ICU, OR, OPS, GI, or direct admit) with one of the following criteria (or are transferred to another facility) or are dead on arrival/death after attempted resuscitation

Inclusion Criteria

International Classification	ICD-10-CM Diagnoses Descriptions	
of Disease, Tenth Revision,		
Clinical Modification (ICD-		
10-CM) -		
J70.5	Respiratory conditions due to smoke inhalation	
S00-S99	With 7 th character modifiers of A, B or C. Injuries to specific body parts-Initial	
	encounter	
T07	Unspecified multiple injuries	
T14	Injury of unspecified body region	
T20-T28	With 7 th character modifier of A only (burns by specific body parts-Initial	
	encounter	
T30-T32	Burns of multiple & unspecified body regions by TBA percentage	
T33-T34	Frostbite with A modifier only	
T59	A modifier only	
Т68-Т69	Hypothermia & Other effects of reduced temperature	
T70.4; T70.8; T70.9	Effects of high-pressure fluids, air and water pressure	

T71	Asphyxiation	
T74	Physical abuse, confirmed; shaken infant syndrome	
T75.0, T75.1 & T75.4	Lightening, Electrocution, Drowning; A modifier only	
T79.A1-T79.A9	Traumatic compartment syndrome-initial encounter with 7th modifier of A only	

2. Case Finding/Data Sources:

- a. Admitting Office: All admission sheets will be reviewed to identify admission diagnosis of trauma.
 1) Emergency Department
- b. The Trauma Criteria sheet will be completed to identify all Trauma Alerts/Consults, DOA, DAA, & Transfers associated with a trauma diagnosis.
- c. Concurrent data collection by TNC and TCM on Trauma Rounds.
- d. In addition, dData sources include pre-hospital and hospital medical records.
- 3. Maintenance of Trauma Registry
 - a. Data Entry Storage
 - 1) All information will be entered into the computer on all cases, followed by complete information from trauma abstract.
 - 2) A hard copy of all data sheets will be stored in the Trauma Registry office file according to month of discharge for at least 14 months.
 - 3).
 - 4) Generation of Reports
 - a. Standard reports will be generated on a monthly or quarterly basis for needs of Trauma Committee
 - b. Trauma Registry request files will be maintained.

Information to be included in request:

- i. Date of request
- ii. Topic of report
- iii. Period covered in report
- iv. Variables included in report
- v. Person/persons requesting report
- vi. Purpose of report
- vii. Date needed

Approved by:		Review/Revision Date:
/s/	7/30/2020	11/1/2007 11/15/2010
Kristin Calkins, RN, BSN, Director, Trauma	Date	4/25/14 7/1/2017 7/1/2020
Monecca Smith Chief Nursing Officer and AVP Patient Care Services	Date	-
Review: Nursing Policy Committee Revision Completed By: Kristin Calkins, BSN, RN. Director, Trauma		Next Review Date: 7/1/2023

Policies Superseded by This Policy: 43-1

Related forms: Trauma Abstract, Trauma Alert Criteria/Trauma Consult, H/P