

Date of Request _____ Date Data Required _____

Requestor's Name: _____ Requestor's Organizational Affiliation: _____

Requestor's Phone Number (include area code and extension where applicable)

Phone #: _____ Fax #: _____

E-mail address: _____

Specifications of Data Request:

Date Range: From _____ through _____

Format for delivery of data to requestor: Excel Spreadsheet ASCII File Hard Copy (paper)*

Data delivery mode: e-mail (preferred) U.S. Post* Fax* Other
**cost of these delivery modes will be responsibility of requestor* Specify _____

**Data requests may require a processing fee of \$50/hour.
 The requestor will be advised of this prior to completion of the request.**

Please describe your data request and how the data will be used. Use the following pages to indicate specific data elements you are requesting.

NOTE: There is an approval process for all requests from NORTN, and it is not a foregone conclusion that your request will be approved. Your request may be approved as submitted, may be approved with some modifications, or may be rejected in its entirety. Queries of the regional registry that yield information that would or would tend to identify a patient or provider will not be released. You will be notified of the decision in relation to your request and can expect fulfillment of your request within four weeks of approval. Certain recipients of NORTN trauma registry data are required to share the results of their data analysis with the NORTN PI Subcommittee. If you include data resulting from this request in any type of publication/presentation, you are required to conspicuously cite the Northeastern Ohio Regional Trauma Network as the source of the data.

Please submit the completed request form to: NORTN Data Request c/o ARHA 3200 West Market Street Suite 200 Akron, Ohio 44333

When considering data, keep in mind that other information can be provided based on computations, e.g. Scene Time could be computed based on Scene Arrival Time/Date and Scene Departure Time/Date, and E.D. Length of Stay could be computed based on the same concept. Descriptive statistics, i.e., mean, median, mode, standard deviation, etc., can be provided for any numeric data element. Additional information can be extracted from the regional registry based on existing fields, e.g., injury e-codes can be used to indicate intentionally of an injury. That being said, don't assume you are limited strictly to the data elements listed. Use the 'Other' section for requesting data that is not included in the list of data elements.

Please indicate the data you are requesting by placing an 'X' in the corresponding box. ***Italicized bold-faced*** elements are available for trauma cases as of January 2003. * These data elements can only be used to specify a date range or a time range.

A conference call may be scheduled with the regional trauma data manager to further discuss the potential data elements requested for query.

Regional Data

- Sex
- Race
- Date of Birth*
- Injury Time
- Injury Date
- Age
- Age Units
- Residence Zip Code

Diagnoses Data

- ICD-9/ICD-10 Code
- Diagnoses Description
- ICD-9/ICD-10 Principal Diagnoses Code**
- AIS Code (Abbreviated Injury Score)
- Region
- AIS
- Default ISS (Injury Severity Score)

Procedure Data

- Procedure Code
- Episode
- Location
- ICD-9/ICD-10 Code
- Start Time*
- Start Date*
- Vent Days

EMS

- EMS Runsheet Present**
- Pulse Rate
- Respiratory Rate
- Systolic Blood Pressure
- Glasgow Eye Opening
- Glasgow Verbal Response
- Glasgow Motor Response

Event Data

- Cause of Injury
- Type of Trauma Injury
- Cause of Injury E
- Protective Devices
- Toxicology
- Injury Location (City)
- Injury County or State
- Place of Injury
- Work Related Injury
- Extrication on Scene
- Pre-Existing Conditions (Co-Morbidity)
- Serum Alcohol - ETOH
- Was Patient Transferred
- Mode of Transport
- Time Departing From Referring Hospital*
- Date Departing From Referring Hospital*
- Notify (Dispatch) Time*
- Notify (Dispatch) Date*
- Time Arrived At Scene*
- Date Arrived At Scene*
- Time Leave Scene*
- Date Leave Scene*

- Intubated
- Paralytics

PI/Research Committee Comments: _____

Approved Not Approved Need for Additional Information

Date: _____

Registrar Committee Comments: _____

Approved Not Approved Need for Additional Information

Date: _____

Comments from Executive Board: _____

Approved Not Approved

Chairman of the NORTN Committee Signature:

Data Definitions

Regional Data

Sex = Gender of the patient
 Race = Race of the patient
 * Date of Birth = Patient's date of birth
 * Injury Time = Time injury occurred
 * Injury Date = Date injury occurred
 Age = Numeric value of patient's age at the time of incident
 Age Units = Descriptor of numeric age value in days, weeks, months, years old
 Residence Zip Code = Patient's zip code of residence

Diagnoses Data

ICD-9 Code = International Classification of Diseases codes
 Diagnoses Description = Description of injury diagnoses found
ICD-9 Principal Diagnoses Code = Primary injury diagnosis
 AIS Code = Full abbreviated injury score
 Body Region = Body region injured
 AIS = Single (calculating) digit abbreviated injury score
 ISS = Injury Severity Score

Procedure Data

Procedure Code = Generic operative procedure code
 Episode = Operative episode number
 Location = Location where procedure performed
 ICD-9 = International Classification of Diseases procedure code
 * Start Time = Time procedure began (cut-time for operative procedures)
 * Start Date = Date procedure began
 Vent Days = Number of days patient received ventilator assistance
 ED Chest Tube = Thoracostomy placement to drain blood, fluid or air from around the lungs while in the ED
 ED Fluids = Intravenous fluids administered while in the ED
 ED CPR = Cardiopulmonary resuscitation performed while in the ED
 ED Immobilization = Spinal immobilization applied while in the ED
 ED Thoracentesis = Removal of fluid between the outside of the lungs/wall of the chest while in ED
 ED Computerized Tomography (CAT) of the Head while in the ED
 ED Abdominal Evaluation = CAT of Abdomen, Peritoneal Lavage, Ultrasound/FAST scan while in the ED

EMS

EMS Runsheet Present = A pre-hospital run report was present on the medical record
Adult EMS Field Trauma Triage Criteria = Pre-hospital specified adult trauma triage criteria
Pediatric EMS Field Trauma Triage Criteria = Pre-hospital specified pediatric (<16) trauma triage criteria
 Pulse Rate = Initial pulse obtained at the scene
 Respiratory Rate = Initial respiration rate obtained at the scene
 Systolic Blood Pressure = Initial systolic blood pressure obtained at the scene
 Glasgow Eye Opening = Initial eye opening score obtained at the scene
 Glasgow Verbal Response = Initial verbal response score obtained at the scene
 Glasgow Motor Response = Initial motor response score obtained at the scene
 Intubated = Intubation of airway performed while at the scene
 Paralytics = Paralytics administered while at the scene

Event Data

Cause of Injury = Generic mechanism of injury code
 Type of Trauma Injury = Type of trauma sustained (Blunt, Penetrating, Burn, Asphyxia)
 Cause of Injury E = International Classification of External Cause of Injury
 Protective Devices = Protective devices utilized during traumatic incident
 Toxicology = Laboratory findings of drug use
 Injury Location = City where traumatic incident occurred

Injury County or State = County or State (if county not specified) where incident occurred
 Place of Injury = Location of patient when injury occurred (Home, Street, etc.)
 Work Related Injury = Work relatedness of traumatic incident (Yes, No)
 Extrication on Scene = Was extrication required at the scene of the traumatic incident
 Pre-Existing Conditions = Co-morbidities the patient had prior to the traumatic incident
 Serum Alcohol = Laboratory findings of alcohol use
 Was Patient Transferred = Was the patient transferred from one acute care facility to another (Yes, No)
 Mode of Transport = Mode of transportation to the facility
 * Time Departing From Referring Hospital
 * Date Departing From Referring Hospital
 * Notify (Dispatch) Time = Time the pre-hospital provider was dispatched to the scene
 * Notify (Dispatch) Date = Date the pre-hospital provider was dispatched to the scene
 * Time Arrived At Scene = Time the pre-hospital provider arrived at the scene
 * Date Arrived At Scene = Date the pre-hospital provider arrived at the scene
 * Time Leave Scene = Time the pre-hospital provider departed the scene
 * Date Leave Scene = Date the pre-hospital provider departed the scene

Hospital Data

ED Patient or Direct Admit = Method of admission into acute care facility
 Admit Service = Physician service admitting the patient
 Admit Source = Admission source of the patient (Scene, OH Hospital, Outside OH Hospital)
 * Arrival time at *Your* Hospital = "Your" defined as initial hospital
 * Date arrived at *Your* Hospital = "Your" defined as initial hospital
 * Time entered *Your* ED = "Your" defined as initial hospital ED
 * Date entered *Your* ED = "Your" defined as initial hospital ED
 * Time Discharged from *Your* ED = "Your" defined as initial hospital ED
 * Date Discharged from *Your* ED = "Your" defined as initial hospital ED
 * Inpatient Discharge or Death Time = Time the patient was discharged or died
 * Inpatient Discharge or Death Date = Date the patient was discharged or died
 ED Disposition Code = Location code for immediate placement of the patient following ED care
 In-Patient Disposition = Location code for immediate placement of the patient following in-patient care
 Discharge Destination = Specific destination of the patient for definitive discharge
 Outcome = Patient's outcome upon departure (Alive, Dead)
 * Death Time
 * Death Date
 Donation Status = Determination of request for organ donation
 Organs Donated = Specified organs donated
 Total Hospital Days = Number of days patient within the hospital
 ICU Days = Number of days patient within an intensive care unit
 Step-Down Days = Number of days patient within a step-down nursing unit

ED Vitals

Pulse Rate = Initial pulse obtained while in the ED
 Respiratory Rate = Initial respiration rate obtained while in the ED
 Systolic Blood Pressure = Initial systolic blood pressure obtained while in the ED
 Glasgow Eye Opening = Initial eye opening score obtained while in the ED
 Glasgow Verbal Response = Initial verbal response score obtained while in the ED
 Glasgow Motor Response = Initial motor response score obtained while in the ED
 Temperature = Initial temperature obtained while in the ED
 Intubated = Intubation of airway performed while in the ED
 Paralytics = Paralytics administered while in the ED