



**Arizona State Trauma Registry  
Trauma Registry Users Group (TRUG)**



**Trauma Registry Users Group Meeting Minutes  
Wednesday January 9, 2013 9:30 am – 11:30 am  
Location: Arizona Dept. of Health Services  
150 North 18th Avenue Phoenix AZ 85007  
5th Floor – 540A Conference Room  
Arizona State Trauma Registry Contacts:  
Anita Ray Ng 602-542-1245 [rava@azdhs.gov](mailto:rava@azdhs.gov) or [Anita.Ray.Ng@azdhs.gov](mailto:Anita.Ray.Ng@azdhs.gov)  
Rogelio Martinez 602-542-2246 or [Rogelio.Martinez@azdhs.gov](mailto:Rogelio.Martinez@azdhs.gov)**

ADHS– Anita Ray Ng	Oro Valley Hospital – Rebekah Newton (p)
ADHS – Rogelio Martinez	Oro Valley Hospital – Amber Teichmiller (p)
ADHS – Daniel Didier	Phoenix Children’s Hospital– Danelle Alexander (p)
Banner Good Samaritan – Lori Wass	Scottsdale Healthcare Osborn– Erzsebet Szabo
Banner Good Samaritan – Angela Minchella (p)	Southeast AZ Medical Center- Maria Valles (p)
Banner Good Samaritan – Kathi Coniam (p)	Southeast AZ Medical Center- Olga Rivero (p)
Copper Queen Community Hospital – Claudia Romo (p)	St. Joseph’s Hospital– David Villa
Flagstaff Medical Center– Beth Latrell	St. Joseph’s Hospital– Elisa Flores
Flagstaff Medical Center– Suzanna Hubbard	St. Joseph’s Hospital– Rose Johnson
John C Lincoln North Mountain– Melissa Moyer	St. Joseph’s Hospital– Shawna Hosler
John C Lincoln North Mountain– Sheila Humphries	University of AZ–UNIVERSITY Campus– Bianca Wade (p)
John C Lincoln North Mountain– Xan Hummel	University of AZ–UNIVERSITY Campus– Paul Bowlby (p)
Kingman Regional Medical Center – Elisa Bizon (p)	University of AZ–UNIVERSITY Campus– Julie Lopez (p)
Maricopa Medical Center– Lillian Namagembe (p)	Verde Valley Medical Center– David Guth (p)
Maricopa Medical Center– Linda Tuck (p)	Verde Valley Medical Center– Tish Arwine (p)
Maricopa Medical Center– Starre Haney (p)	White Mountain Regional Medical Center – Hollee Penrod-Simpson
Mountain Vista Medical Center – Nicole Schultis	Yavapai Regional Medical Center– Donna Quay (p)
Northern Cochise – Hollie Roethle	Yuma Regional Medical Center – Genia Sims (p)
Oro Valley Hospital – Curtis Beerens (p)	

- A) Happy New Year! We’ve made amazing progress over the years!
- B) Anita will be leaving the State Trauma Registry Manager position and her last day with ADHS is January 25<sup>th</sup>. The Bureau hopes to hire the position soon, but in the interim, please contact Rogelio Martinez for any trauma registry issues:

Rogelio Martinez  
 EMS Data Quality Assurance Section Chief  
 Bureau of Emergency Medical Services and Trauma System  
 150 N. 18th Avenue, Suite 540  
 Phoenix, Arizona 85007-3248  
 Email: [Rogelio.Martinez@azdhs.gov](mailto:Rogelio.Martinez@azdhs.gov)

Phone: 602-542-2246  
 Mobile: 602-527-5199

- C) Status update on 2013 data entry changes
- 1) Lancet will install the latest picklist updates at the same time that they make our 2013 database changes.
  - 2) To align with NTDB, Height and Weight fields will be added to the Full Data Set entry.
  - 3) Reduced Data Set changes: Based on PI survey results, 4 new fields will be added to the 2013 Reduced Data Set for 2013: Systolic Blood Pressure, Respiratory Rate, GCS Qualifiers and Transfer Delay Reasons
    - Lancet will install the Reduced 2013 changes directly into the state database. These new fields do not need to be entered until 2013 data, but feel free to start early if you'd like.
  - 4) Transfer Delay reasons will be entered by Level III and IV facilities when there is a delay in patient transfer to higher level of care (ex: bad weather, EMS availability, difficulty finding a receiving facility, waiting for testing before transfer, etc.)
  - 5) The 2013 ASTR Data Dictionaries (Full and Reduced) will be emailed out this month
  - 6) Street Location of Injury (free text) – At our last meeting we discussed a possible highway/freeway drop-down menu. Item will be postponed for future discussion.
  - 7) We also discussed a Trauma Team Activation field for the state registry. Item will be postponed for future discussion.
  - 8) 2013 updated documents will be posted on the ADHS website at:  
<http://azdhs.gov/bems/data/ASTR.htm>
- D) State Trauma Registry Inclusion Criteria (follow-up on discussion from last TRUG meeting)
1. TRUG inter-facility transfer inclusion comments were discussed with TEPI advisory committee. TEPI's decision:
    - **2013** inter-facility transfer criteria has been changed back to what we used for 2008-2011 ED/Hospital Arrival Dates:  
 A patient with injury who is transported via EMS transport from one acute care hospital to another acute care hospital;
    - **For 2012 dates only:**  
Level III and Level IV Trauma Centers must report all patients with injury that are transported via EMS to another acute care hospital or trauma center;
  2. For 2013 records, all levels of trauma designation will report inter-facility injury transfers.
  3. The 2013 System Access(Inclusion Criteria) picklist is being updated to reflect these changes.
    - This is a multiple entry field, so please do not forget to select all inclusion criteria that apply. Use the space bar in Trauma One® to select multiple options.

E) ASTR Quarterly Data Submission

Reporting Quarter	ED/Hospital Arrival Dates	ASTR Due Date
Quarter One	January 1 – March 31	July 1 of the same year
Quarter Two	April 1 – June 30	October 1 of the same year
Quarter Three	July 1 – September 30	January 2 of the following year
Quarter Four	October 1 – December 31	April 1 of the following year

1. Quarter 3 2012 was due on January 2, 2013 (ED/Hospital Arrival Dates July - Sept 2012). Thank you to those who have submitted data.
  - If you are ever unable to meet a reporting deadline, please contact ADHS to let us know when to expect the data.
2. Quarter 4 2012 data will be due on April 1, 2013 (ED/Hospital Arrival Dates Oct – Dec 2012).

F) ASTR 2012 Data Validation

1. Full Data Set Validation Tool updates have been received and will be installed at each Full Data Set hospital. Please let ADHS know if you discover any problems.
2. The Reduced Data Set validation tool has been installed in the state database. Instructions will be provided to the Reduced Data Set on how to run regular checks.
3. Q1, Q2 and Q3 2012 validation reports will be distributed to hospitals as they are ready.
4. After Q4 2012 data is received (due April 1), we will start the annual data close-out process. The final deadline for 2012 data corrections will be June 1, 2013 to allow time for annual trauma report completion.
5. Once we go web-based, the goal is to automate validation and have it run at regular intervals so it is an easier process for hospitals and ADHS.

G) Trauma One® Version 4.20 Multi-Site Web-based database

1. Status update – we have not heard anything different from Lancet regarding the web-based system being ready for testing sometime in February. We will keep you posted as more information is available.
2. TRUG members indicated that they must have data security and back-up information provided to their Risk Management/IT Security staff before their hospitals can even consider joining the web-based system. Rogelio will follow up with ADHS IT (who is hosting the data) and Lancet (application design) to obtain more information on these important security details.
3. “Open Record” display preferences for web-based state system – TRUG discussed that a display of last 100 should be fine. Sorted by ED/Hospital Arrival Date and not by Admit Date which is sometimes Not Applicable. Anita emailed the information to Lancet.
  - After the meeting, there was a question emailed regarding how this display change will affect the “unlock” option in Trauma One®. Anita emailed the question to Lancet. TRUG may want to discuss if everyone prefers that option of “locking a record” each time you close it, or if the group would like something different for the web-based system.
4. Suggestion was made that it would be nice to be able to open records within a specific date range. Anita emailed the suggestion to Lancet.
5. Report/population sharing will be much easier in the web-based system. There is an option to keep a report private or share it. The trauma data is never shared, just the report, so when you run a shared report you will only see your hospital's data.
6. Reporting assistance has been requested from several Level IV hospitals. ADHS is working with the TEPI PI committee to create some standard reports that can be distributed to Level III and IV hospitals. Once the reports are created, all you will have to do is add a date range and indicate where to save the file.

H) Status update on AZ-PIERS (EMS database)

1. First EMS data user group meeting is scheduled for January 11<sup>th</sup>
2. Data Dictionary is finalized
3. Hospital dashboard is being revamped to be more user-friendly

4. Ultimate goal is to link ASTR and pre-hospital data for more complete information. Also the possibility of linking to ADOT crash records.
- I) Trauma System Performance Improvement (PI) Initiative
1. TEPI committee – EMS and Trauma Performance Improvement committees are being formed
  2. Focus on Level I and II
  3. Focus on Level III and IV
  4. If you have any suggestions for audit filters or reports that would be useful to your facility, please let ADHS know.
- J) ICD-10 – deadline is October 1, 2014
1. ICD-10 fields are being added to the state web-based database. If your hospital is not entering data into the web-based database at the time your hospital switches to ICD-10, you will need to contact Lancet to upgrade your hospital database.
  2. St. Joseph's is in discussion with a trainer regarding a trauma-specific ICD-10 training. Rose Johnson will let TRUG know if there are spots for other AZ trauma hospitals to pay to attend.
- K) Procedure Coding "Cheat Sheet"
1. Thank you to Sherry/UMC and Rose/St. Joseph's for reviewing the list that was emailed out on the NTDB Google group. We will customize the list and send it out to help registrars with coding.
  2. Keep in mind that the NTDB requirements represent the minimum list of procedures required for the Full Data Set. Your hospital can track any additional procedures you need.
- L) Any other questions / items to discuss?
1. 2012 CE credits will be emailed to TRUG members by the end of the month.
  2. The next Trauma One training has not been scheduled. Date is pending web-based system.
  3. The Age(Years) field is still not calculating correctly for the Reduced Data Set. This item has been forwarded to Lancet for more review.
  4. Flagstaff reported a data download problem. Anita emailed Lancet after the meeting.
- M) 2013 TRUG upcoming meeting schedule
- Wednesday April 17, 2013 / 9:30 – 11:30 am / ADHS 540-A Conference Room
  - Wednesday July 24, 2013 / 9:30 – 11:30 am / ADHS 540-A Conference Room
  - Wednesday October 23, 2013 / 9:30 – 11:30 am / ADHS 540-A Conference Room



## Arizona State Trauma Registry Trauma Registry Users Group (TRUG)



**Trauma Registry Users Group Meeting Minutes**  
**Wednesday April 17, 2013 9:30 am – 11:30 am**  
**Location: Arizona Dept. of Health Services**  
**150 North 18th Avenue Phoenix AZ 85007**  
**5th Floor – 540A Conference Room**  
**Arizona State Trauma Registry Contacts:**  
**Mary Benkert 602-542-1245 [Mary.Benkert@azdhs.gov](mailto:Mary.Benkert@azdhs.gov) or**  
**Rogelio Martinez 602-542-2246 or [Rogelio.Martinez@azdhs.gov](mailto:Rogelio.Martinez@azdhs.gov)**

ADHS– Mary Benkert	Oro Valley Hospital – Rebekah Newton (p)
ADHS – Rogelio Martinez	Phoenix Children’s Hospital– Danelle Alexander (p)
ADHS – Daniel Didier	Scottsdale Healthcare Osborn– Erzsebet Szabo (p)
ADHS – Noreen Adlin	Scottsdale Healthcare Osborn – Jane Burney (p)
Banner Page – Darcie Ruvalcaba (p)	Scottsdale Healthcare Osborn – Karen Helmer (p)
Banner Good Samaritan – Angela Minchella	St. Joseph’s Hospital– David Villa (p)
Banner Good Samaritan – Diana Harris	St. Joseph’s Hospital– Elisa Flores
Banner Good Samaritan – Kathi Coniam	St. Joseph’s Hospital – Michelle Guadnola
Banner Good Samaritan – Martha Brion	St. Joseph’s Hospital– Rose Johnson
Chandler Regional Medical Center – Lori Wass (p)	St. Joseph’s Hospital– Shawna Hosler
Copper Queen Community Hospital – Claudia Romo (p)	Summit Healthcare Regional – Lea Butler (p)
Flagstaff Medical Center– Beth Latrell (p)	Tuba City Regional – Shannon Johnson (p)
Flagstaff Medical Center– Bill Ashland (p)	Tuba City Regional -- Tanya Devon Torres (p)
Flagstaff Medical Center – Sheri Reiff (p)	University of AZ – UNIVERSITY Campus – Amy Finkel (p)
John C Lincoln North Mountain– Sheila Humphries (p)	University of AZ–UNIVERSITY Campus– Bianca Wade (p)
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La Paz Regional Hospital – Maria Martinez (p)	University of AZ–UNIVERSITY Campus– Julie Lopez (p)
Maricopa Medical Center – Claire Holmes (p)	West Valley Hospital – Darlene Rodriguez (p)
Maricopa Medical Center– Lillian Namagembe (p)	White Mountain Regional Medical Center – Hollee Penrod-Simpson (p)
Maricopa Medical Center– Linda Tuck (p)	Yavapai Regional Medical Center– Donna Quay
Maricopa Medical Center– Starre Haney (p)	Yavapai Regional Medical Center – Chris Thompson
Maricopa Medical Center – Tiffany Strever (p)	Yuma Regional Medical Center – Genia Sims (p)
Mountain Vista Medical Center – Nicole Schultis	

**A) Introductions**

Mary Benkert is the new State Trauma Registry Manager. She has been with the Department of Health for 12 years working with the Division of Behavioral Health and the Division of Licensing. Attendees introduced themselves. Chris Thompson is a new Trauma Registrar at Yavapai Regional Medical Center Prescott. Welcome Chris!

**B) ASTR Inclusion Criteria**

Rogelio presented the 2013 Arizona Trauma Registry Inclusion Criteria Schematic (handout). TRUG members found the document to be useful and easy to follow. He solicited input from the group, but said he would prefer not to change the inclusion criteria if possible since this would affect the number and the types of records submitted to ASTR,

making it more challenging to compare multiple years of trauma data. Any changes to the inclusion criteria would have to be approved by the TEPI Advisory Committee.

C) ASTR Quarterly Data Submission

Reporting Quarter	ED/Hospital Arrival Dates	ASTR Due Date
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Quarter Four	October 1 – December 31	April 1 of the following year

Mary reminded the group that QTR4 data for 2012 was due April 1, 2013. Most sites have submitted QTR4. If your site has not submitted QTR4 (or any other 2012 data), please contact Mary and let her know the status.

D) Trauma One® Version 4.20 Multi-Site Web-based database

There was a meeting in reference to this project in April. It has been postponed due to some technical discussions regarding the database management system that will be used. More information will be forthcoming.

E) ASTR 2012 Data Validation

Mary is working on validating all of 2012 data now. Sites should be running validation on the data and making corrections before submitting; most sites are doing this. She is tracking any issues with the both the full data set validation tool and the reduced data set tool. If you find issues/questions, let Mary know and she will work with Lancet. After Q4 2012 data is validated (due April 1) we will start the annual data close-out process. The final deadline for 2012 data corrections will be June 1, 2013 to allow time for annual trauma report completion.

F) Status update on 2013 data entry changes

2013 ASTR Data Dictionary -> Word

Mary has started to convert the ASTR Data Dictionary from Excel to Word format. There will be page breaks after each data element to make updates easier. She will also include the Source Hierarchy for the NTDB elements. At some point she will need TRUG input regarding source documents for the AZ elements. This project will take some time to complete.

Trauma Team Activation information in the state registry

Item will be postponed for future discussion. Rogelio stated that determination of Trauma Team Activation is up to the individual hospitals. In reference to Level III and IV one TRUG member recommended activating as much as possible, better to over-activate than under-activate.

G) Trauma System Performance Improvement (PI) Initiative

Rogelio discussed the beginning of the Trauma System Performance Improvement (PI) Initiative. Benchmarks are Trauma, Stroke, STEMI and OHCA. A small workgroup will meet in late April or early May to discuss the development of some best practices for these four initiatives.

H) Inter-rater reliability (IRR)

ADHS is planning another IRR project, which involves the creation of a sample patient care report that will be entered into Trauma One by each registrar. The submitted records are

scored by ADHS based how the registrar completed the data entry in comparison with the 'best answer' as defined by ADHS. The purpose is to evaluate the amount of agreement between registrars and the degree to which trauma data entry is consistent from one registrar to the next. Rogelio asked the group for date suggestions. Based on TRUG feedback, we will try to schedule something for late July of 2013. It was suggested that we don't use a 'head injury only' scenario, since that has been done. One recommendation was that we use a multi-system patient involving multiple body parts other than the head.

- I) ICD-10 Classes  
Does anyone know of any and is there interest among TRUG members in such a class? Rose from St. Joseph's Hospital will advise of any ICD-10 trainings they are planning. There are a number of TRUG members interested in this training if it were available.
  
- J) Status Update on AZ-PIERS (EMS database)  
Rogelio informed TRUG members of the existence of the Hospital Dashboard. Hospitals can view ePCRs transmitted by EMS crews in the field. Both the hospital and the EMS agency must participate in AZ Piers in order to share data.
  
- K) Other questions: The question was asked about plans for any Trauma One Training this year? Rogelio will check on the possibility of Trauma One training before the end of June. There is interest among TRUG members for both basic training (for new registrars) as well as an advanced training in report-writing. More information to follow.
  
- L) 2013 TRUG upcoming meeting schedule
  - Wednesday July 24, 2013 / 9:30 – 11:30 am / ADHS 540-A Conference Room
  - Wednesday October 23, 2013 / 9:30 – 11:30 am / ADHS 540-A Conference Room



**Arizona State Trauma Registry  
Trauma Registry Users Group (TRUG)**



**Trauma Registry Users Group Meeting Minutes  
Wednesday July 24, 2013 9:30 am – 11:30 am  
Location: Arizona Dept. of Health Services  
150 North 18th Avenue Phoenix AZ 85007  
5th Floor – 540A Conference Room  
Arizona State Trauma Registry Contacts:  
Mary Benkert 602-542-1245 [Mary.Benkert@azdhs.gov](mailto:Mary.Benkert@azdhs.gov) or  
Rogelio Martinez 602-542-2246 or [Rogelio.Martinez@azdhs.gov](mailto:Rogelio.Martinez@azdhs.gov)**

<b>Attendees</b>	
ADHS– Mary Benkert	Oro Valley Hospital – Rebekah Pope (p)
ADHS – Rogelio Martinez	Phoenix Children’s Hospital– Danelle Alexander (p)
ADHS – Daniel Didier	Phoenix Children’s Hospital – Justin Slotman
Banner Page – Darcie Ruvalcaba (p)	Scottsdale Healthcare Osborn – Jane Burney (p)
Banner Good Samaritan – Angela Minchella (p)	Scottsdale Healthcare Osborn – Karen Helmer (p)
Banner Good Samaritan – Diana Harris (p)	Scottsdale Healthcare Osborn – Barbara Szerlag
Banner Good Samaritan – Susan Lunsford (p)	Sierra Vista Regional Healthcare – Jessica Martinez-Pompa
Banner Good Samaritan – Martha Brion (p)	St. Joseph’s Hospital– David Villa
Banner Good Samaritan – Ashleigh Olson	St. Joseph’s Hospital– Rose Johnson
Helen Kilpatrick – Benson Hospital (p)	St. Joseph’s Hospital– Shawna Hosler
Chandler Regional Medical Center – Lori Wass (p)	Summit Healthcare Regional – Mary Ann Antonini
Copper Queen Community Hospital – Claudia Romo (p)	University of AZ – South Campus – April Bennett
Flagstaff Medical Center– Bill Ashland (p)	University of AZ – UNIVERSITY Campus – Amy Finkel (p)
Flagstaff Medical Center – Sheri Reiff (p)	University of AZ – UNIVERSITY Campus – Carol Bailey
John C Lincoln North Mountain– Sheila Humphries (p)	University of AZ – UNIVERSITY Campus – Terry Burns
John C Lincoln North Mountain– Xan Hummel (p)	West Valley Hospital – Leslie Ryan
John C Lincoln North Mountain – Melissa Moyer	West Valley Hospital – Darlene Rodriguez
John C Lincoln North Mountain – Jennifer Kennedy	Yavapai Regional Medical Center– Donna Quay
La Paz Regional Hospital – Maria Martinez (p)	Yavapai Regional Medical Center – Chris Thompson
Maricopa Medical Center– Lillian Namagembe (p)	
Maricopa Medical Center– Linda Tuck (p)	
Maricopa Medical Center – Tiffany Strever (p)	
Mountain Vista Medical Center – Nicole Schultis	

**A) Minutes from last meeting/ Outstanding Items**

- There were no outstanding items. There were no corrections to the previous meetings minutes.

**B) Lancet Training**

- Feedback from last training:
- Some experienced TRUG members only attended Day 2. In hindsight, they may have benefitted from Day 1 as well since Trauma One changes over time. For future trainings, TRUG suggested that more time be spent on report-writing and more advanced features of Trauma One, such as Chalkboards. It was also suggested that any training materials be sent out before the training.

- Dates for next training  
TRUG proposed October and April as preferred months for the next Lancet training. We will contact Lancet and see what dates we can propose for October. The training may be one or two days; there was not a consensus within TRUG.

**C) ASTR Quarterly Data Submission**

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Quarter Two	April 1 – June 30	October 1 of the same year
Quarter Three	July 1 – September 30	January 2 of the following year
Quarter Four	October 1 – December 31	April 1 of the following year

Quarter 1 2013 data was due on July 1, 2013 (ED/Hospital Arrival Dates Jan – Mar 2013).

**D) Trauma One® Version 4.20 Multi-Site Web-based database**

- We plan to meet with Lancet regarding the Web Registry in the next few weeks. We are hoping to be able to do some testing by December on the new system. David Villa has expressed interest in helping with testing when the time comes. Anyone else that is interested can let Mary know.

**E) ASTR 2013 Data Validation**

- After 2012 data close-out process is complete, I will be validating 2013 data by quarter. Please validate before you submit your data. The reduced validator has been fixed in the record screens. Level IV sites doing the reduced data set can now validate each record while entering it.

**F) 2013 ASTR Data Dictionary -> Word**

- This project is almost complete. Mary is working on the Appendices and will hopefully have a document to publish in the next couple of weeks.

**G) NTDB**

- The 2014 Data Dictionary and change log are posted on the NTDS website. Mary will send out to TRUG for review via E-mail. There are a few new fields (not including TQIP):
- REPORT OF PHYSICAL ABUSE
- INVESTIGATION OF PHYSICAL ABUSE
- CAREGIVER AT DISCHARGE
- TRAUMA CENTER CRITERIA (Currently under Triage Criteria in ASTR)
- VEHICULAR, PEDESTRIAN, OTHER RISK INJURY (Currently under Triage Criteria in ASTR)
- There are also some pick list changes to HOSPITAL DISCHARGE DISPOSITION field
- Mary will review the entire document and compare to the current data dictionary to identify what has changed for 2014.

**H) Rehabilitation Elements**

- Rogelio presented two Rehabilitation Elements as potential data elements for ASTR: FIM Scores at Admission and Discharge. TRUG members said that FIM scores are not always calculated on patients at the trauma site and when they are, the process is highly subjective. TRUG suggested that the FIM scores be collected from the Rehabilitation sites, where the scores would be more objective and accurate. Rogelio will research more and get back to the group.

**I) Inter-rater reliability**

- We are doing another Inter-rater reliability case. It will not be a head trauma. Mary will review the samples the sites had submitted in 2010 for a new case. It was suggested that ADHS do the answer key first. Donna Naduch and Michelle Pomphrey were suggested as coding resources.

**J) ICD-10 classes**

- There is nothing currently scheduled, although we could contact Michelle Pomphrey to see if something could be set up. With the ICD-10 effective date of October 1, 2014 approaching, there should be more classes being organized. Rose thought St. Joe's could possibly host training if she knew for sure that there is enough interest.

**K) AZ-PIERS (EMS database)**

- Hospital Dashboard  
Rogelio described the Hospital Dashboard to the group. It would be impossible to do a demonstration without revealing private personal information. AZ-PIERS is Arizona's FREE pre-hospital data registry that gives its EMS agencies the ability to generate and transmit electronic Patient Care Records (ePCRs) at the scene, in the hospital or at the station. Internet connection IS NOT required. Hospitals can use Dashboard to accept ePCRS generated by the EMS agencies. AZ-PIERS uses ImageTrend's FieldBridge, StateBridge, and Hospital Dashboard applications. Here is the link to the hospital application packet on our website:  
<http://www.azdhs.gov/bems/documents/data/PIERS/az-piers-hospital-application-packet.docx>

**L) Any other questions / items to discuss?**

- None.

**M) 2013 TRUG upcoming meeting schedule**

- Wednesday October 23, 2013 / 9:30 – 11:30 am / ADHS 540-A Conference Room



# Arizona State Trauma Registry Trauma Registry Users Group (TRUG)



**Trauma Registry Users Group Meeting Minutes**  
**Wednesday October 23, 2013 9:30 am – 11:30 am**  
**Location: Arizona Dept. of Health Services**  
**150 North 18th Avenue Phoenix AZ 85007**  
**5th Floor – 540A Conference Room**  
**Arizona State Trauma Registry Contacts:**  
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Banner Good Samaritan – Martha Brion	Scottsdale Healthcare Osborn – Barbara Szerlag
Banner Good Samaritan – Ashleigh Olson	Scottsdale Healthcare Osborn – Cristi Wong, CSTR
Banner Good Samaritan – Kathi Coniam	Scottsdale Healthcare Osborn – Tina Sheppard
Chandler Regional Medical Center – Jennifer Larson	Sierra Vista Regional Healthcare – Jessica Martinez-Pompa (p)
Chandler Regional Medical Center – Lori Wass	St. Joseph’s Hospital– David Villa
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Flagstaff Medical Center – Beth Latrell	St. Joseph’s Hospital– Shawna Hosler
Flagstaff Medical Center – Erzsebet Szabo	St. Joseph’s Hospital – Elisa Flores
John C Lincoln DV– Sheila Humphries (p)	Summit Healthcare Regional – Mary Ann Antonini
John C Lincoln DV - Lori Moxon Kennedy (p)	Summit Healthcare Regional – Bonnie Pastorino
John C Lincoln North Mountain– Xan Hummel (p)	University of AZ – South Campus – April Bennett (p)
John C Lincoln North Mountain – Melissa Moyer	University of AZ – South Campus – Paul Bowlby (p)
John C Lincoln North Mountain – Jennifer Kennedy	University of AZ – UNIVERSITY Campus – Amy Finkel (p)
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Maricopa Medical Center– Lillian Namagembe (p)	West Valley Hospital – Darlene Rodriguez
	Yavapai Regional Medical Center – Chris Thompson

**A) Minutes from last meeting/ Outstanding Items**

- There were no outstanding items. There were no corrections to the previous meetings minutes.

**B) Lancet Training**

- We have contracted with Lancet for 10 hours of WebEx training for this next year. We can do 1-hour, 2-hour, 3-hour sessions, however we want to apportion those 10 hours. WebEx makes it easier for the more rural sites to participate and allows us to

do shorter, more focused trainings. Mary will get some dates from Lancet to see what works best for TRUG. Previously, TRUG had suggested October and April. October is gone but I will focus on early 2014.

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Quarter 2, 2013 data was due on October 1, 2013 (ED/Hospital Arrival Dates Apr – Jun 2013). Please remember to include any records that are updated/added from quarter 1 in 2013 as well.

**D) Trauma One® Version 4.20 Multi-Site Web-based database**

- Rogelio and Mary were given a preview of the new Trauma One Web Registry. It requires either Internet Explorer 9 or later; Firefox 23 or later; or Chrome 25 or later. The screens flow the same way as the current version; however, it has an updated look and feel and the functionality is much improved. For example, it's possible to have multiple modules and patient records open simultaneously and it's easy to move to and from the various modules within the Web version. We hope to begin testing very soon and have the Web Registry up before February, 2014. Also, we have modules that might be implemented which provide a crosswalk from ICD-9 to ICD-10 codes. At some point, we are hoping to have the pre-hospital data fields populated into ASTR from AZ-PIERS. The main focus will be a successful implementation of all sites into the web version of TraumaOne prior to any additional modules.

**E) NTDB Changes - New Fields/ Proposed Changes**

- Mary quickly reviewed the NTDB change log for 2014. TRUG members were in agreement with the proposed changes to ASTR to coincide with NTDB. NTDB is adding the following fields to ASTR for 2014:

Field Number	Field Name	Change Location	Field Type	ASTR
I_20	REPORT OF PHYSICAL ABUSE	New Data Field	Yes/No	Will add to ASTR for both Full and Reduced Data Sets
I_21	INVESTIGATION OF PHYSICAL ABUSE	New Data Field	Yes/No	Will add to ASTR for both Full and Reduced Data Sets
I_22	CAREGIVER AT DISCHARGE	New Data Field	Yes/No	Will add to ASTR for both Full and Reduced Data Sets
P_18	TRAUMA CENTER CRITERIA	New Data Field	Picklist	This already exists in ASTR as Data Element P3_02: Triage Criteria; I will ask Lancet to map the responses to the related NTDB field.
P_19	VEHICULAR, PEDESTRIAN, OTHER RISK INJURY	New Data Field	Picklist	This already exists in ASTR as Data Element P3_02: Triage Criteria; I will ask Lancet to map the responses to the related

				NTDB field.
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There are various textual changes to the NTDB data dictionary. The ASTR data dictionary will be updated to be consistent with these changes.

F) Rehabilitation Elements

- Rogelio is working with Lancet to add 2 data elements to ASTR: an admission FIM score and a discharge FIM score. He is reaching out to rehabilitation facilities; at some point we would like to get rehabilitation data from those sites as a part of ASTR.

G) ICD-10 classes

- Rose at St. Joe's and Cristi at Scottsdale Osborn have offered to host ICD-10 classes next spring at their respective sites. Per Cristi, we are already looking at March or April of 2014 for the earliest availability of dates. A minimum of 20 people are required to sign up in order for them to book a date with the trainers. Each facility will have to pay for each person they send. The cost would be \$300.00 per person. This will cover all trainers, books and materials. Thank you Rose and Cristi, I'm sure TRUG can fill these classes. Let me know if you need my help in communicating with the group.

H) Inter-rater reliability

We began review of the IRR3 project. TRUG members submitted their test records in mid to late September. Here is a summary of the issues/disparities/questions that were discussed:

1. **Race/Ethnicity**

For the IRR project, the correct answer for race is either 'Not Documented' (ND) or Other. The record indicates 'Latino'; however, that is not a race. The ethnicity is 'Hispanic'. In a prior TRUG meeting when Anita was here, race and ethnicity were discussed and it was decided as a group that if the race cannot be determined and the ethnicity is 'Hispanic', the proper response in ASTR for race is 'Other.' Per TRUG members, the guidelines for the collection of this information vary by site and are often set at other levels in their organization. This issue will be revisited because race and ethnicity are used frequently in the analysis and reporting of ASTR and other health data. Proper documentation of these fields is vital.

2. **Zip Code of Residence**

The correct response for the IRR project is 'Not Documented' (ND). The zip code was not found in the record and since Sierra Vista has multiple zip codes, it is not possible from the street address (which is fictional) to determine the correct one. It was mentioned that NTDB encourages registrars to exhaust all means possible to identify a zip code as it is a very important data element; we at TRUG and ADHS share that opinion.

3. **Zip Code of Injury**

The correct response for the IRR project is 'Not Documented' (ND). We know from the record that the injury occurred at home; since we are unable to determine the correct home zip code, the zip of injury is also undetermined. The following discussion ensued:

- a. Can we make assumptions about the zip code of injury when we know the location of injury without the address? For example, if we know the injury occurred at school, can we assume the school is in the same zip code as home and use that zip? Or, if the injury

occurred at Lake Powell, half of which is in another state, can we use the Page zip code since it is the closest city? The consensus of TRUG is that unless we have enough clues in the record to help narrow down the injury location, it is not correct to make these types of assumptions. That being said, the registrars are the experts for their area of the state and sometimes they will have to use their best judgment when entering data into ASTR. The reduced data set does not include the data elements 'street location of injury' or 'injury event details', which would be helpful to describe the location in the absence of a zip code.

**4. Interventions**

Interventions are not part of the ASTR data set (thanks Rose); therefore any responses here will not be evaluated as part of the IRR project.

**5. Toxicology Section**

The correct response for the IRR project is 'Confirmed – No' for both alcohol and drugs. The record indicates that the patient was tested and no alcohol or drugs were found.

A discussion ensued in reference to cases where the patient tests positive for drugs, but it is not clear if the use is legal or illegal. For example, what should be entered if a patient tests positive for opiates, yet there is nothing in the record to indicate whether or not use is legal by prescription or illegal? The current picklist does not contain an appropriate response for this scenario; based on TRUG discussion, the registrar can't assume use is legal in the absence of evidence that it's not. The recommendation of TRUG is to communicate this issue to Melanie Neal at NTDB to see if changes to the picklist and toxicology substance field could be considered. Because this is an NTDB data point, we do not control the validation. Mary will pursue this with Melanie Neal.

6. We will finish the discussion of the IRR project in the January TRUG meeting. In the future, I will try to schedule the IRR at a time when the entire meeting can be dedicated to the IRR discussion. Thanks to all who participated.

I) Any other questions / items to discuss?

1. Discharge Destination Hospital – picklist used to contain more facilities, not just acute care hospitals. It may be beneficial to see where patients are going in addition to acute care. Mary will check and perhaps we can re-visit;
2. ICD-9 crosswalk to AIS 98, no ICD-9 crosswalk to AIS 2005 Per Rose, NTDB controls this and currently AIS 98 is what they are using;
3. I was asked by a TRUG member to clarify the definition for the field 'Complete Trauma Team Arrival'? I did find in minutes from a previous TRUG IRR meeting where this was discussed and the TRUG decision was to use the Trauma surgeon arrival time even if the rest of the "team" has not arrived. TRUG, is this your recollection and do you agree this is what we want to do? If so, I will update the data dictionary be updated to reflect this.
4. A question was raised after the meeting in reference to co-morbid conditions: Should only pre-existing co-morbid conditions be included in ASTR, or can/should newly diagnosed conditions be included? Perhaps we can address this at the next meeting?

J) 2014 proposed TRUG 2014 meeting schedule:

- Wednesday January 22, 2014 / 9:30 – 11:30 am / ADHS 540-A Conference Room
- Wednesday April 23, 2014 / 9:30 – 11:30 am / ADHS 540-A Conference Room
- Wednesday July 23, 2014 / 9:30 – 11:30 am / ADHS 540-A Conference Room
- Wednesday, October 22 2014 / 9:30 – 11:30 am / ADHS 540-A Conference Room