

Florida

Acute Care

Trauma Registry Manual

**2016 Edition**

*January 1, 2016*

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Dictionary Overview

Welcome to the Florida Department of Health Acute Care Trauma Registry Manual Data Dictionary. This manual serves as the requirement for the data elements within the Acute Care Module of the Next Generation Trauma Registry (NGTR).

Dictionary Design

The Florida Acute Care Trauma (FACT) Registry Manual encompasses Florida Trauma Data Standard (FTDS) data elements and data elements from the National Trauma Data Standard (NTDS). At a minimum, acute care hospitals must submit all fields listed in this manual designated as “Required” and “Conditional” when applicable; but may choose to submit all data elements pertinent to trauma patient treatment rendered at their facility. An acute care facility that chooses to participate fully in the Florida Trauma Registry must submit all of the Florida and National data elements listed in the FTDS. All fields not listed in this dictionary are considered “optional” and may be found at [www.floridahealth.gov/certificates-and-registries/trauma-registry](http://www.floridahealth.gov/certificates-and-registries/trauma-registry/index.html). If optional fields are reported, they will not be validated against established business rules listed in the FTDS and NTDS data dictionaries.

Field Contents

A field can be “non-blank” in one of two ways – it can contain a Field Data Value (FDV), or it can have a Common Null Value (CNV). For example, a Field Data Value that might be contained in the field O\_03 Hospital Discharge Date would be “2013-04-05”. But if the patient was not discharged from the hospital (e.g. the patient died in the ED), the field will instead have a Common Null Value of “Not Applicable”.

A field cannot contain a Field Data Value and have a Common Null Value at the same time. This is because the two Common Null Values – (1) *Not Applicable*, and (2) *Not Known/Not Recorded* – are meant to serve as a “reason” for the lack of a Field Data Value in the element.

A field is described as “valued” (or “completed”) when it contains a Field Data Value. A field is described as “non-blank” when it either contains a Field Data Value or has one of the Common Null Values. A field is described as “blank” (or “empty”) when it neither contains a Field Data Value or has a Common Null Value, or is just simply absent from the submission file.

Required Fields

For the purposes of this manual a “required” field can potentially cause a file or record rejection if it is *blank* or omitted– i.e. it does not contain a Field Data Value or have a Common Null Value as outlined in the *Field Contents* section.

The table below lists the required and conditional fields for acute care hospital. Fields marked “required” are to be “non-blank” in an acute care trauma data submission. Fields marked as conditional must be completed, if applicable to the treatment of a trauma patient. All fields not listed in this manual, but exist in the FTDSand the NTDS dictionary are considered optional and may be submitted to the department.

The first column in the table below indicates if the data element is a FTDS or NTDS specific field, the second column is the data element name and the usage column denotes if the field is required or conditional.

|  |  |  |
| --- | --- | --- |
| **Data Element** | **Data Element Name** | **Usage** |
| NTDS | Date of Birth | Required |
| NTDS | Age | Conditional |
| NTDS | Age Units | Conditional |
| FTDS | Medical Record Number | Required |
| FTDS | Event Specific Patient Tracking Number (ESPTN) | Required |
| FTDS | Social Security Number | Required |
| NTDS | Injury Incident Date | Required |
| NTDS | Injury Incident Time | Required |
| NTDS | ICD-9 Primary E-Code | Conditional |
| NTDS | ICD-10 Primary E-Code | Conditional |
| NTDS | Incident Location Zip Code | Required |
| NTDS | Incident County | Conditional |
| NTDS | Transport Mode | Required |
| NTDS | Inter-Facility Transfer | Required |
| NTDS | ED/Hospital Arrival Date | Required |
| NTDS | ED/Hospital Arrival Time | Required |
| NTDS | ED Discharge Disposition | Required |
| NTDS | Signs of Life | Required |
| NTDS | ED Discharge Date | Required |
| NTDS | ED Discharge Time | Required |
| NTDS | Trauma Center Criteria | Conditional |
| NTDS | Vehicular, Pedestrian, Risk Injury | Conditional |
| FTDS | Trauma Alert | Required |
| NTDS | ICD-9 Injury Diagnosis | Conditional |
| NTDS | ICD-10 Injury Diagnosis | Conditional |
| NTDS | Locally Calculated ISS | Required |
| NTDS | Hospital Discharge Date | Required |
| NTDS | Hospital Discharge Time | Required |
| NTDS | Hospital Discharge Disposition | Required |

Reporting Requirements

Reporting Overview

Florida acute care hospitals are required to submit data to the Department. Acute care hospitals must submit data on a quarterly basis. However, data may be submitted more frequently (i.e. daily, weekly, monthly). The submission must be through the web at [www.fltraumaregistry.com](http://www.fltraumaregistry.com). The data file(s) submitted must contain (in total) the data for all trauma cases meeting inclusion criteria which were discharged during that quarter. The Trauma Record Files submitted to the department, each quarter, are imported and stored within the NGTR for analysis.

Inclusion Criteria

Acute care hospitals will report all patients that are considered Trauma Alerts based on Rule 64J-2.001(14), Florida Administrative Code. In addition, patients that are injured as a result of a traumatic event and are transferred to a verified/provisional trauma center to receive a higher level of care, would be included. Injuries from a traumatic event include the following:

**International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM): 800–959.9**

**International Classification of Diseases, Tenth Revision (ICD-10-CM):**

**S00-S99 with 7th character modifiers of A, B, or C ONLY.** (Injuries to specific body parts –

initial encounter)

**T07** (unspecified multiple injuries)

**T14** (injury of unspecified body region)

**T20-T28 with 7th character modifier of A ONLY** (burns by specific body parts – initial encounter)

**T30-T32** (burn by TBSA percentages)

Submission Details

1. All data shall be submitted electronically to the Department at the [www.fltraumaregistry.com](http://www.fltraumaregistry.com) web site.
2. Accounts to submit data are set up for each Florida acute care hospital by the Department.
3. Data verification: Data reported to the NGTR must be verified (checked for completeness and accuracy) by the reporting hospital before submitting to the Department.
4. Data may be submitted on a daily, weekly, monthly, or quarterly basis. Records of patients, sorted by the date of a death or discharge from the hospital center must be validated and submitted to the Department by the final due dates as listed below:

|  |  |  |
| --- | --- | --- |
| **Reporting**  **Quarter** | **Reporting**  **Dates** | **Final Submission**  **Due Dates** |
| **Quarter 1** | January 1- March 31  Discharges | Due July 1 |
| **Quarter 2** | April 1 - June 30  Discharges | Due October 1 |
| **Quarter 3** | July 1 - September 30  Discharges | Due January 1 |
| **Quarter 4** | October 1- December 31  Discharges | Due April 1 |

1. Data submitted to the Department must be a valid record in order to be used in the determination of a hospital’s trauma patient volume. The data dictionary section of this manual details the field requirements of each data element and what values are accepted.
2. Files submitted shall align with the following naming standard: Hospital ID\_Reporting-Period(Q1, Q2, Jan) \_date (MM/DD/YY) (add \_resubmission for files being resubmitted). The NGTR will only allow 50 characters in the file name including spaces, special characters and the .XML extension.
3. Hospitals that use the Department provided registry tool to enter data will have the submission file created and submitted to the registry by the web application. If hospitals choose to export their data from a third party software and upload the data into the registry, the data must conform to the XSD. The Department will only accept data in an XML file format based upon XSD derived from this data dictionary. **Records may not be submitted in another format or medium.**
4. File Acceptance: Must be the appropriate xml schema and contain all required field tags. Files that cannot be recognized as a valid format will not be processed and will not receive a submission report. In this case, the submitting hospital will receive notification that a problem occurred in processing the submission.
5. Record Acceptance: Records that contain Level 1 or Level 2 errors, in the FTDS, will cause that record to be rejected. The hospital will be required to correct these errors and resubmit to the NGTR for that record to be loaded into the database. A record may have up to 5 level 3 or 4 errors before being considered invalid. Notification of flagged records will be returned to the hospital for verification of data and correction and resubmission. Resubmissions must be received by the final submission due date. The acute care facility’s total record count must be at least 90% valid for each quarter.
6. Hospitals that submit a data file will receive a submission report from the NGTR once the file has been processed. Records that are entered through the Web Registry will only be processed once the record has been put into the closed status. A daily process will submit all records that were closed that day. Those records will be submitted together and will be validated against applicable business rules. Upon completion of the validation process, a submission report will be sent to the submitting hospital. This report will outline the error level(s) and the records number(s) for review and correction.
7. The Department may audit (by site visit, desk audit or through an agent) an acute care hospital’s medical records for the purpose of validating reported trauma registry data at any time.

Extension Requests

Extensions to the final submission due dates in the FACT may be granted by the Department for a maximum of 30 days from the final submission due date. A written request signed by the hospital’s chief executive officer or designee must be received by the Department 30 days prior to the final submission due date (scanned image sent via email acceptable). These requests may be mailed to: Bureau of Emergency Medical Oversight, 4052 Bald Cypress Way Bin A-22 Tallahassee, FL 32399 or by email to [Trauma.Registry@flhealth.gov](mailto:Trauma.Registry@flhealth.gov)

Extension requests are only granted for unforeseen factors beyond the control of the reporting facility. These factors must be specified in the written request for the extension along with documentation of efforts undertaken to meet the submission requirements. Staff vacations, maternity leave, and a failure to appropriately plan out the timeframe of a software upgrade are not considered “unforeseen” requests. Extensions must be approved by the Department and will not be granted verbally.

# 

# Registry Conventions

Error Levels

Any errors generated as a result of a failure to meet the condition defined within a business rule will reference the rule id, the data element, the level of the error, and the business rule description.

*Error: <Business Rule Reference> <Data Element> <Level> <Description>*

Where Level is defined as:

* **\* Level 1: Reject – XML format –** any element that does not conform to the rules of the XSD. These errors may be from XML data that cannot be parsed or would otherwise not be legal XML file. Some errors in this Level do not have a Rule ID – for example: illegal tag, commingling of null values and actual data, out of range errors, etc.
* **\* Level 2: Reject –** Inclusion criteria and/or critical to analyses – this level affects the fields needed to determine if the record meets the inclusion criteria for FTDS or are required for critical analyses
* Additional levels are defined for each data element in the Business Rules table
  + **Level 3: Flag – Major Data Error**
  + **Level 4: Flag – Minor Data Error**

Null Values

For any collection of data to be of value and reliably represent what was intended, a strong commitment must be made to ensure the correct documentation of incomplete data. In situations where a field data value is not known or appropriate for the data element, common null values must be used in accordance with the AFTDS.

* **[1]** *Not Applicable*: This null value code applies if, at the time of patient care documentation, the information requested was “Not Applicable” to the patient, the hospitalization or the patient care event. For example, variables documenting EMS care would be “Not Applicable” if a patient self-transports to the hospital.
* **[2]** *Not Known/Not Recorded:* This null value applies if, at the time of patient care documentation, information was “Not Known” (to the patient, family, health care provider) or no value for the element was recorded for the patient. This documents that there was an attempt to obtain information but it was unknown by all parties or the information was missing at the time of documentation. For example, injury date and time may be documented in the hospital patient care report as “Unknown”. Another example, Not Known/Not Recorded should also be coded when documentation was expected, but none was provided (i.e., no EMS run sheet in the hospital record for patient transported by EMS).

**Definitions**

**ACS NTDB National Trauma Data Standard: Data Dictionary 2016 Admissions** **(“NTDS”)** – A manual that is developed by the American College of Surgeons (ACS) in order to create a standardized national trauma database.

**American College of Surgeons (“ACS”)** - Nationally recognized scientific association of surgeons that improve the quality of care for the surgical patient by setting high standards for surgical education and practice.

**Business Rule –** A condition used to identify a data error. The business rule will have an associated Rule ID. The term “edit checks” is used by the NTDS and can be used interchangeably.

**Data Element –** Single category of information reported in a given trauma record that contains field values or other related points of data

**Department** – The Department of Health

**Field Value –** The data entered into a data element

**Florida Acute Care Trauma (FACT) Registry Manual -** A manual that is developed by the Department to act as a subset of the FTDS and NTDS for use by non-trauma center hospitals. This manual is incorporated into Florida Administrative Rule by reference.

**Florida Trauma Registry Manual, Data Dictionary 2016 Edition (“FTDS”)** – A manual that is developed by the Department to act as a supplement to the NTDS. This manual identifies the requirements of the FTDS and state specific administrative components not covered by the NTDS. This manual is incorporated into Florida Administrative Rule by reference.

**Next Generation Trauma Registry (“NGTR”) –** The electronic data collection and reporting system used by the Department to obtain records from provisional/verified trauma centers and acute care hospitals.

**Transfer –** Trauma patient that was transported to/from another hospital/trauma center by EMS, Air Ambulance, or other transport designed for trauma patients.

**Trauma Patient Volume –** The number of trauma patients reported by acute care hospitals to the Trauma Registry and validated by the Department.

**Trauma Patient –** A patient that meets the inclusion criteria of the FTDS.

**Trauma Patient Discharge (“Discharge”) –** The date/time the patient stopped receiving trauma services.This would include the date/time of official discharge, transferred to hospice (in or out of the hospital), transferred to rehabilitation (in or out of hospital), or the date/time the patient is transferred to a service that requires a new hospital account.

**Trauma Record –** A collection of data elements that provide an account of each episode where a trauma patient received trauma services

**Trauma Record File (“File”) –** A trauma record or a combination of trauma records that represent the treatment that was provided to a patient(s) meeting Florida inclusion criteria and submitted to the Department.

**Trauma Service** - Trauma service represents the primary structure for providing care for trauma patients. The service includes personnel and other resources necessary to ensure the appropriate and efficient provision of care.

**Valid Record (“Valid”)** – A trauma record that meets Department standards for timeliness, completeness, and has not exceeded the error threshold for a given record.

**XML Schema Definition (“XSD”) –** A document thatspecifies how to formally describe the elements in an Extensible Markup Language (XML). The XSD is used by NGTR to verify the data in a file. The current XSD is the FLTDS\_2016.XSD Version 1.0 and is incorporated into rule by reference.

Data Dictionary

Demographic Information

|  |  |
| --- | --- |
| D\_07 DATE OF BIRTH | |
| Field Definition | The patient's date of birth. |
| Data Format | [number] |
| XSD Type | xs:date |
| XSD Element | DateOfBirth |
| Multiple Entry | No – A trauma patient may have only one reported date of birth. |
| Accepts Nulls | Yes, common null values |
| Required Field | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| Field Format | Collected as YYYY-MM-DD |
| Field Values | Relevant value for data element |
| Field Constraints | **Minimum Constraint** 1890 **Maximum Constraint** 2030 |
| Additional Info |  |
| Related Fields |  |

|  |  |  |
| --- | --- | --- |
| ***Rule ID*** | ***Level*** | ***Rule Description*** |
| 0601 | 1 | Invalid value |
| 0602 | 1 | Date out of range |
| 0603 | 2 | Field is blank |
| 0605 | 3 | Not Known/Not Recorded, complete variables: Age and Age Units |
| 0609 | 2 | Date of Birth is later than ED/Hospital Arrival Date |
| 0610 | 2 | Date of Birth is later than ED Discharge Date |
| 0611 | 2 | Date of Birth is later than Hospital Discharge Date |
| 0612 | 2 | Date of Birth + 120 years must be less than ED/Hospital Arrival Date |
| 0613 | 2 | Field is Not Applicable |

|  |  |
| --- | --- |
| D\_08 AGE | |
| Field Definition | The patient's age at the time of injury (best approximation). |
| Data Format | [number] |
| XSD Type | xs:integer |
| XSD Element | Age |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Conditional– This element is required if Date of Birth is unknown |
| Field Format |  |
| Field Values | Relevant value for data element |
| Field Constraints | **Minimum Constraint** 0 **Maximum Constraint** 120 |
| Additional Info | * Used to calculate patient age in hours, days, months, or years. * If Date of Birth is “Not Known/Not Recorded”, complete variables: Age and Age Units. * If Date of Birth equals ED/Hospital Arrival Date, then the Age and Age Units variables must be completed. * Must also complete variable: Age Units. |
| Related Fields |  |

|  |  |  |
| --- | --- | --- |
| ***Rule ID*** | ***Level*** | ***Rule Description*** |
| 0701 | 1 | Age is outside the valid range of 0 - 120 |
| 0703 | 2 | Field cannot be blank when (1) Date of Birth equals ED/Hospital Arrival date or (2) Date of Birth is Not Known/Not Recorded |
| 0704 | 3 | Injury Date minus Date of Birth should equal submitted Age |
| 0705 | 4 | Age is greater than expected for the Age Units Specified. Age should not exceed 60 minutes, 24 hours, 30 days, 24 months, or 120 years. Please verify this is correct. |
| 0707 | 2 | Field must be Not Applicable when Age Units is Not Applicable |
| 0708 | 2 | Field must be Not Known/Not Recorded when Age Units is Not Known/Not Recorded |

|  |  |
| --- | --- |
| D\_09 AGE UNITS | |
| Field Definition | The units used to document the patient's age (Hours, Days, Months, Years). |
| Data Format | [number] |
| XSD Type | xs:integer |
| XSD Element | AgeUnits |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Conditional– This element is required if Date of Birth is unknown |
| Field Format |  |
| Field Values | 1. Hours 2. Days 3. Months 4. Years |
| Field Constraints | Enumerated List |
| Additional Info | * Used to calculate patient age in hours, days, months, or years. * If Date of Birth is “Not Known/Not Recorded”, complete variables: Age and Age Units. * If Date of Birth equals ED/Hospital Arrival Date, then the Age and Age Units variables must be completed. * Must also complete variable: Age. |
| Related Fields |  |

|  |  |  |
| --- | --- | --- |
| ***Rule ID*** | ***Level*** | ***Rule Description*** |
| 0801 | 1 | Value is not a valid menu option |
| 0803 | 2 | Field cannot be blank |
| 0805 | 2 | Field must be Not Applicable when Age is Not Applicable |
| 0806 | 2 | Field must be Not Known/Not Recorded when Age is Not Known/Not Recorded |

|  |  |
| --- | --- |
| DF\_02 Event Specific Patient Tracking Number (ESPTN) | |
| Field Definition | Unique identifier for this patient for this event, generated by the first Florida state-licensed agency which renders service to the patient for the event |
| Data Format | [text] |
| XSD Data Type | xs:String |
| XSD Element | ESPTN |
| Multiple Entry | No – A trauma record may have only one ESPTN |
| Accepts Nulls | Partial – A Common Null Value (CNV) of “Not Known/Not Recorded” is valid |
| Required Field | Yes – This element is required in the Florida Acute Care Trauma Registry (FACT) Manual |
| Field Format | 44 characters in the form: XXX\_MMDDYYYY\_LicNum\_PatNum |
| Field Values | The ESPTN is comprised of the following information:  XXX A three character code indicating the type of agency that is creating the EPSTN number: the code is either “EMS” for EMS agency, “HOS” for hospital agency, or “LAW” for law enforcement agency  MM The two-digit month  DD The two-digit day of the month  YYYY The four-digit year  LicNum The Florida state-issued license number of the agency  PatNum The agency-assigned patient number |
| Field Constraints | This field should consist of the three-character agency type (1-3), the first underscore (4), the eight-digit date (5-12), the second underscore (13), a minimum/maximum ten characters for the Florida state-issued license number (padded with leading zeroes, if necessary) (14-23), the third underscore (24), and a minimum/maximum of 20 characters agency-assigned patient number (padded with leading zeroes, if necessary) (25-44). |
| Additional Info | * The state-issued license number should be unique within an agency type, but may not be unique across agency types. Hospitals should use the AHCA assigned file number * The agency-assigned patient number should be unique for that patient within the context of that agency, but may not be unique across multiple events for the same patient within the agency * Use the date the trauma patient arrived at your facility. This could be the ED or Hospital Arrival Date * If the patient arrives at your facility without an ESPTN number, it is the reporting facility’s responsibility to create one. This field is intended to be auto-generated by user action when a prior ESPTN is not documented by EMS or law enforcement agency |
| References |  |

|  |  |  |
| --- | --- | --- |
| Rule ID | Level | Rule Description |
| 50201 | 1 | Invalid value (element must conform to data specification) |
| 50202 | 2 | Field cannot be blank |
| 50203 | 4 | Not Applicable, this field must be valued or Not Known/Not Recorded |
| 50204 | 4 | The “MMDDYYYY” date in the ESPTN should not be earlier than the NTDS I\_01 Injury Incident Date value |
| DF\_03 Social Security Number | | |
| Field Definition | The U.S Government issued Social Security Number for the patient | |
| Data Format | [text] | |
| XSD Data Type | xs:string | |
| XSD Element | PatientSsn | |
| Multiple Entry | No – A trauma patient may have only one reported Social Security Number. | |
| Accepts Nulls | No – Common Null Values (CNVs) are not accepted | |
| Required Field | Yes – This element is required in the Florida Acute Care Trauma Registry (FACT) Manual | |
| Field Format | Eleven characters formatted as “nnn-nn-nnnn” where “n” is a number between 0 and 9. (Note that this element is encrypted by the State.) | |
| Field Values | Relevant value for data element. If the SSN is unknown, use the following that pertain:  000-00-0000 = Infants who are 1 year old or less.  555-55-5555 = Non-Citizens  777-77-7777 = Not Available | |
| Field Constraints |  | |
| Additional Info | Linkage to other data sources used to uniquely track the patient, either for this event, or for multiple events. | |
| References |  | |

|  |  |  |
| --- | --- | --- |
| Rule ID | Level | Rule Description |
| 50301 | 1 | Invalid value (element must conform to data specification) |
| 50302 | 2 | Field cannot be blank |
| 50303 | 2 | Field cannot be Not Applicable |
| 50304 | 2 | Field cannot be Not Known/Not Recorded |
| 50305 | 4 | If the patient’s age is greater than one year, then the *Social Security Number* should not be all zeros |

|  |  |
| --- | --- |
| DF\_07 Medical Record Number | |
| Field Definition | The medical record number or other patient identifier on the transcript of the medical information about the patient. |
| Data Format | [text] |
| XSD Type | xs:AlphaDash |
| XSD Element | MedicalRecNum |
| Multiple Entry | No – A trauma patient may have only one reported Medical Record Number. |
| Accepts Nulls | No – Common Null Values (CNVs) are not accepted |
| Required Field | Yes – This element is required in the Florida Acute Care Trauma Registry (FACT) Manual |
| Field Format | Up to 20 characters. (Note that this element is encrypted by the State.) |
| Field Values | Relevant value for data element. If this number is unknown, a temporary number may be assigned. |
| Field Constraints |  |
| Additional Info | The medical record number is unique to a given patient, but not unique to a particular incident. The other patient identifier will be your internal defined unique tracking number. |
| Related Fields |  |

|  |  |  |
| --- | --- | --- |
| Rule ID | Level | Rule Description |
| 50701 | 1 | Invalid value (element must conform to data specification) |
| 50702 | 2 | Field cannot be blank |
| 50703 | 2 | Not Applicable, field must be valued |
| 50704 | 2 | Not Known/Not Recorded, field must be valued |

INJURY INFORMATION

|  |  |
| --- | --- |
| I\_01 INJURY INCIDENT DATE | |
| Field Definition | The date the injury occurred. |
| Data Format |  |
| XSD Data Type | xs:date |
| XSD Element | IncidentDate |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| Field Format | YYYY-MM-DD |
| Field Values | Relevant value for data element |
| Field Constraints | **Minimum Constraint** 1990 **Maximum Constraint** 2030 |
| Additional Info | Estimates of date of injury should be based upon report by patient, witness, family, or health care provider. Other proxy measures (e.g., 911 call times) should not be used. |
| References |  |

|  |  |  |
| --- | --- | --- |
| Rule ID | Level | Rule Description |

|  |  |  |
| --- | --- | --- |
| 1201 | 1 | Date is not valid |
| 1202 | 1 | Date out of range |
| 1203 | 2 | Field cannot be blank |
| 1204 | 4 | Injury Incident Date is earlier than Date of Birth |
| 1208 | 4 | Injury Incident Date is later than ED/Hospital Arrival Date |
| 1209 | 4 | Injury Incident Date is later than ED Discharge Date |
| 1210 | 4 | Injury Incident Date is later than Hospital Discharge Date |

|  |  |
| --- | --- |
| I\_02 INJURY INCIDENT TIME | |
| Field Definition | The time the injury occurred. |
| Data Format |  |
| XSD Data Type | xs:time |
| XSD Element | IncidentTime |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| Field Format | Collected as HH:MM (HH:MM should be collected as military time.) |
| Field Values | Relevant value for data element |
| Field Constraints | **Minimum Constraint** 00:00 **Maximum Constraint** 23:59 |
| Additional Info | Estimates of time of injury should be based upon report by patient, witness, family, or health care provider. Other proxy measures (e.g., 911 call times) should not be used. |
| References |  |

|  |  |  |
| --- | --- | --- |
| Rule ID | Level | Rule Description |

|  |  |  |
| --- | --- | --- |
| 1301 | 1 | Time is not valid |
| 1302 | 1 | Time out of range |
| 1303 | 2 | Field cannot be blank |
| 1307 | 4 | Injury Incident Time is later than the ED/Hospital Arrival Time |
| 1308 | 4 | Injury Incident Time is later than the ED Discharge Time |
| 1309 | 4 | Injury Incident Time is later than the Hospital Discharge Time |

|  |  |
| --- | --- |
| I\_06 ICD-9 PRIMARY EXTERNAL CAUSE CODE | |
| Field Definition | E-code used to describe the mechanism (or external factor) that caused the injury event. |
| Data Format |  |
| XSD Data Type | xs:string |
| XSD Element | PrimaryECode |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Conditional – This element or ICD-10 Primary E-Code must be completed. |
| Field Format |  |
| Field Values | Relevant ICD-9-CM code value for injury event. |
| Field Constraints |  |
| Additional Info | The Primary E-code should describe the main reason a patient is admitted to the hospital.  ICD-9-CM codes will be accepted for this data element. Activity codes should not be reported in this field. |
| References |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 1701 | 1 | E-Code is not a valid ICD-9-CM code |
| 1702 | 2 | Field cannot be blank (at least one ICD-9 or ICD-10 trauma code must be entered) |
| 1703 | 4 | External Cause Code should not be =(810.0, 811.0, 812.0, 813.0, 814.0, 815.0, 816.0, 817.0, 818.0, 819.0) and Age < 15 |
| 1704 | 2 | Should not be 849.x |
| 1705 | 3 | External Cause Code should not be an activity code. ICD-9 Primary External Cause Code should be within the range of E800-999.9 |

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| --- | --- |
| I\_07 ICD-10 PRIMARY EXTERNAL CAUSE CODE | |
| Field Definition | External Cause Code used to describe the mechanism (or external factor) that caused the injury event. |
| Data Format |  |
| XSD Data Type | xs:string |
| XSD Element | PrimaryECodeIcd10 |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Conditional – This element or ICD-9 Primary E-Code must be completed. |
| Field Format |  |
| Field Values | Relevant ICD-10-CM code value for injury event. |
| Field Constraints |  |
| Additional Info | The Primary E-code should describe the main reason a patient is admitted to the hospital.  ICD-10-CM codes will be accepted for this data element. Activity codes should not be reported in this field. |
| References |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 8901 | 1 | E-Code is not a valid ICD-10-CM code |
| 8902 | 2 | Field cannot be blank (at least one ICD-9 or ICD-10 trauma code must be entered) |
| 8904 | 2 | Should not be Y92.X/Y92.XX/Y92.XXX (where X is A-Z or 0-9) |
| 8905 | 3 | ICD-10 External Cause Code should not be Y93.X/Y93.XX (where X is A-Z or 0-9) |

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| --- | --- |
| I\_12 INCIDENT LOCATION ZIP CODE | |
| Field Definition | The ZIP code of the incident location. |
| Data Format |  |
| XSD Data Type | xs:zip |
| XSD Element | InjuryZip |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| Field Format | 5 or 9 digit code (XXXXX-XXXX). |
| Field Values | Relevant value for data element |
| Field Constraints |  |
| Additional Info | If "Not Applicable" or "Not Recorded/Not Known," complete variable: Incident County. May require adherence to HIPAA regulations. |
| References |  |

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| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 2001 | 1 | Invalid value |
| 2002 | 2 | Field cannot be blank |

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| --- | --- |
| I\_15 INCIDENT COUNTY | |
| Field Definition | The county where the patient was found or to which the unit responded (or best approximation). |
| Data Format |  |
| XSD Data Type | xs:string |
| XSD Element | IncidentCounty |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Conditional – Only completed when Incident Location ZIP code is "Not Applicable" or "Not Recorded/Not Known.” |
| Field Format |  |
| Field Values | Relevant value for data element (three digit FIPS code). |
| Field Constraints |  |
| Additional Info | Used to calculate FIPS code. |
| References |  |

|  |  |  |
| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 2301 | 1 | Invalid value |
| 2303 | 2 | Field cannot be blank when Incident Location Zip Code is Not Applicable or Not Known/Not Recorded |

Pre Hospital Information

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| --- | --- |
| P\_07 TRANSPORT MODE | |
| Field Definition | The mode of transport delivering the patient to your hospital. |
| Data Format |  |
| XSD Data Type | xs:integer |
| XSD Element | TransportMode |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| Field Format |  |
| Field Values | 1. Ground Ambulance  2. Helicopter Ambulance  3. Fixed-wing Ambulance  4. Private/Public Vehicle/Walk-in  5. Police  6. Other |
| Field Constraints |  |
| Additional Info |  |
| References |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 3401 | 1 | Value is not a valid menu option |
| 3402 | 2 | Field cannot be blank |

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| --- | --- |
| P\_17 INTER-FACILITY TRANSFER | |
| Field Definition | Was the patient transferred to your facility from another acute care facility? |
| Data Format |  |
| XSD Data Type | xs:integer |
| XSD Element | InterFacilityTransfer |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| Field Format |  |
| Field Values | 1. Yes 2. No |
| Field Constraints |  |
| Additional Info | Patients transferred from a private doctor’s office, stand-alone ambulatory surgery center, or delivered to your hospital by a non-EMS transport are not considered an inter-facility transfers.  Outlying facilities purporting to provide emergency care services or utilized to stabilize a patient are considered acute care facilities. |
| References |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 4401 | 2 | Field cannot be blank |
| 4402 | 1 | Value is not a valid menu option |
| 4404 | 3 | Field should not be Not Known/Not Recorded |
| 4405 | 2 | Field cannot be Not Applicable |

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| --- | --- |
| P\_18 TRAUMA CENTER CRITERIA | |
| Field Definition | Physiologic and anatomic EMS trauma triage criteria for transport to a trauma center as defined by the Centers for Disease Control and Prevention and the American College of Surgeons-Committee on Trauma. |
| Data Format |  |
| XSD Data Type | xs:integer |
| XSD Element | TraumaCenterCriterion |
| Multiple Entry | Yes, max 11 |
| Accepts Nulls | Yes, common null values |
| Required Field | Conditional |
| Field Format |  |
| Field Values | 1. Glasgow Coma Score <= 13  2. Systolic blood pressure < 90 mmHg  3. Respiratory rate < 10 or > 29 breaths per minute (< 20 in infants aged < 1 year) or need for ventilatory support  4. All penetrating injuries to head, neck, torso, and extremities proximal to elbow or knee  5. Chest wall instability or deformity (e.g., flail chest)  6. Two or more proximal long-bone fractures  7. Crushed, degloved, mangled, or pulseless extremity  8. Amputation proximal to wrist or ankle  9. Pelvic fracture  10. Open or depressed skull fracture  11. Paralysis |
| Field Constraints |  |
| Additional Info | * The null value "Not Applicable" should be used to indicate that the patient did not arrive by EMS. * The null value "Not Applicable" should be used if EMS Run Report indicates patient did not meet any Trauma Center Criteria. * The null value “Not Applicable” should be used if Trauma Alert Type is 7 * The null value "Not Known/Not Recorded" should be used if this information is not indicated, as an identical response choice, on the EMS Run Report or if the EMS Run Report is not available. * Check all that apply. |
| References |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 9501 | 1 | Value is not a valid menu option |
| 9502 | 2 | Field cannot be blank |

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| --- | --- |
| P\_19 VEHICULAR, PEDESTRIAN, RISK INJURY | |
| Field Definition | EMS trauma triage mechanism of injury criteria for transport to a trauma center as defined by the Centers for Disease Control and Prevention and the American College of Surgeons-Committee on Trauma. |
| Data Format |  |
| XSD Data Type | xs:integer |
| XSD Element | VehicularPedestrianOther |
| Multiple Entry | Yes, max 14 |
| Accepts Nulls | Yes, common null values |
| Required Field | Conditional |
| Field Format |  |
| Field Values | 1. Fall adults: > 20 ft. (one story is equal to 10 ft.)  2. Fall children: > 10 ft. or 2-3 times the height of the child  3. Crash intrusion, including roof: > 12 in. occupant site; > 18 in. any site  4. Crash ejection (partial or complete) from automobile  5. Crash death in same passenger compartment  6. Crash vehicle telemetry data (AACN) consistent with high risk injury  7. Auto v. pedestrian/bicyclist thrown, run over, or > 20 MPH impact  8. Motorcycle crash > 20 mph  9. For adults > 65; SBP < 110  10. Patients on anticoagulants and bleeding Disorders  11. Pregnancy > 20 weeks  12. EMS provider judgment  13. Burns  14. Burns with Trauma |
| Field Constraints |  |
| Additional Info | * The null value "Not Applicable" should be used to indicate that the patient did not arrive by EMS. * The null value "Not Applicable" should be used if EMS Run Report indicates patient did not meet any Vehicular, Pedestrian, Other Risk Injury criteria. * The null value “Not Applicable” should be used if Trauma Alert Type is 7 * The null value "Not Known/Not Recorded" should be used if this information is not indicated, as an identical response choice, on the EMS Run Report or if the EMS Run Report is not available. * Check all that apply. |
| References |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |
| 9601 | 1 | Value is not a valid menu option |
| 9602 | 2 | Field cannot be blank |

Emergency Department Information

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| --- | --- |
| ED\_01 ED/HOSPITAL ARRIVAL DATE | |
| Field Definition | The date the patient arrived to the ED/hospital. |
| Data Format | [date] |
| XSD Data Type | xs:date |
| XSD Element | HospitalArrivalDate |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| Field Format | YYYY-MM-DD |
| Field Values | Relevant value for data element. |
| Field Constraints | **Minimum Constraint** 1990 **Maximum Constraint** 2030 |
| Additional Info | If the patient was brought to the ED, enter date patient arrived at ED. If patient was directly admitted to the hospital, enter date patient was admitted to the hospital.  Collected as YYYY-MM-DD. |
| References |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

|  |  |  |
| --- | --- | --- |
| 4501 | 1 | Date is not valid |
| 4502 | 1 | Date out of range |
| 4503 | 2 | Field cannot be blank |
| 4505 | 2 | Field cannot be Not Known/Not Recorded |
| 4509 | 2 | ED/Hospital Arrival Date is later than ED Discharge Date |
| 4510 | 2 | ED/Hospital Arrival Date is later than Hospital Discharge Date |
| 4511 | 3 | ED/Hospital Arrival Date is earlier than Date of Birth |
| 4512 | 3 | ED/Hospital Arrival Date must be after 1993 |
| 4513 | 3 | ED/Hospital Arrival Date minus Injury Incident Date must be less than 30 days |
| 4515 | 2 | Field cannot be Not Applicable |

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| --- | --- |
| ED\_02 ED/HOSPITAL ARRIVAL TIME | |
| Field Definition | The time the patient arrived to the ED/hospital. |
| Data Format | [time] |
| XSD Data Type | xs:time |
| XSD Element | HospitalArrivalTime |
| Multiple Entry | No |
| Accepts Nulls | Yes, common null values |
| Required Field | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| Field Format | HH:MM.  HH:MM should be collected as military time. |
| Field Values | Relevant value for data element. |
| Field Constraints | **Minimum Constraint** 00:00 **Maximum Constraint** 23:59 |
| Additional Info | If the patient was brought to the ED, enter time patient arrived at ED. If patient was directly admitted to the hospital, enter time patient was admitted to the hospital. |
| References |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 4601 | 1 | Time is not valid |
| 4602 | 1 | Time out of range |
| 4603 | 2 | Field cannot be blank |
| 4607 | 4 | ED/Hospital Arrival Time is later than the ED Discharge Time |
| 4608 | 4 | ED/Hospital Arrival Time is later than the Hospital Discharge Time |

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| --- | --- |
| ED\_19 ED DISCHARGE DISPOSITION | |
| **Field Definition** | The disposition of the patient at the time of discharge from the ED. |
| **Data Format** |  |
| **XSD Data Type** | xs:integer |
| **XSD Element** | EdDischargeDisposition |
| **Multiple Entry** | No |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| **Field Format** |  |
| **Field Values** | 1- Floor bed (general admission, non-specialty unit bed)  2- Observation unit (unit that provides < 24 hour stays)  3- Telemetry/step-down unit (less acuity than ICU)  4- Home with services  5- Deceased/Expired  6- Other (jail, institutional care, mental health, etc.)  7- Operating Room  8- Intensive Care Unit (ICU)  9- Home without services  10- Left against medical advice  11- Transferred to another hospital |
| **Field Constraints** |  |
| **Additional Info** | The null value "Not Applicable" is used if the patient is directly admitted to the hospital.  If ED Discharge Disposition is 4, 5, 6, 9, 10, 11, then Hospital Discharge Date, Time, and Disposition should be “Not Applicable”. |
| **References** |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 6101 | 1 | Value is not a valid menu option |
| 6102 | 2 | Field cannot be blank |
| 6104 | 2 | Field cannot be Not Known/Not Recorded |
| 6106 | 2 | Field cannot be Not Applicable when Hospital Discharge Date is Not Applicable |
| 6107 | 2 | Field cannot be Not Applicable when Hospital Discharge Date is Not Known/Not Recorded |
| 6108 | 2 | Field cannot be Not Applicable when Hospital Discharge Disposition is Not Applicable |
| 6109 | 2 | Field cannot be Not Applicable when Hospital Discharge Disposition is Not Known/Not Recorded |

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| --- | --- |
| ED\_20 SIGNS OF LIFE | |
| **Field Definition** | Indication of whether patient arrived at ED/Hospital with signs of life. |
| **Data Format** |  |
| **XSD Data Type** | xs:integer |
| **XSD Element** | DeathInEd |
| **Multiple Entry** | No |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| **Field Format** |  |
|  |
| **Field Values** | 1 Arrived with NO signs of life 2 Arrived with signs of life |
| **Field Constraints** |  |
| **Additional Info** | A patient with no signs of life is defined as having none of the following: organized EKG activity, pupillary responses, spontaneous respiratory attempts or movement, and unassisted blood pressure. This usually implies the patient was brought to the ED with CPR in progress. |
| **References** |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 6201 | 1 | Value is not a valid menu option |
| 6202 | 2 | Field cannot be blank |
| 6206 | 3 | Field should not be Not Known/Not Recorded |
| 6207 | 2 | Field cannot be Not Applicable |

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| --- | --- |
| ED\_21 ED DISCHARGE DATE | |
| **Field Definition** | The date the patient was discharged from the ED. |
| **Data Format** | *[date]* |
| **XSD Data Type** | xs:date |
| **XSD Element** | EdDischargeDate |
| **Multiple Entry** | No |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| **Field Format** | YYYY-MM-DD. |
|  |
| **Field Values** | Relevant value for data element. |
| **Field Constraints** | **Minimum Constraint 1990 Maximum Constraint 2030** |
| **Additional Info** | Used to auto-generate an additional calculated field: Total ED Time: (elapsed time from ED admit to ED discharge). If the patient is directly admitted to the hospital, code as “Not Applicable”. |
|  |
| **References** |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

|  |  |  |
| --- | --- | --- |
| 6301 | 1 | Date is not valid |
| 6302 | 1 | Date out of range |
| 6303 | 2 | Field cannot be blank |
| 6307 | 2 | ED Discharge Date is earlier than ED/Hospital Arrival Date |
| 6308 | 2 | ED Discharge Date is later than Hospital Discharge Date |
| 6309 | 3 | ED Discharge Date is earlier than Date of Birth |
| 6310 | 3 | ED Discharge Date minus ED/Hospital Arrival Date is greater than 365 days. |

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| --- | --- |
| ED\_22 ED DISCHARGE TIME | |
| **Field Definition** | The date the patient was discharged from the ED |
| **Data Format** | *[time]* |
| **XSD Data Type** | xs:time |
| **XSD Element** | EdDischargeTime |
| **Multiple Entry** | No |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| **Field Format** | Collected as HH:MM. HH:MM should be collected as military time. |
|  |
| **Field Values** | Relevant value for data element. |
| **Field Constraints** | **Minimum Constraint 00:00 Maximum Constraint 23:59** |
| **Additional Info** | Used to auto-generate an additional calculated field: Total ED Time (elapsed time from ED admit to ED discharge). If the patient is directly admitted to the hospital, code as “Not Applicable”. |
|  |
| **References** |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 6401 | 1 | Time is not valid |
| 6402 | 1 | Time out of range |
| 6403 | 2 | Field cannot be blank |
| 6407 | 4 | ED Discharge Time is earlier than the ED/Hospital Arrival Time |
| 6408 | 4 | ED Discharge Time is later than the Hospital Discharge Time |

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| --- | --- |
| EDF\_01 Trauma Alert T~~ype~~ | |
| Field Definition | This field is used to capture if a trauma alert was called in accordance with the state trauma scorecard criteria (Rule 64J-2.001, F.A.C~~., and Rule 64J-2.005, F.A.C.~~). |
| Data Format | [combo] single-choice |
| XSD Data Type | xs:nonNegativeInteger |
| XSD Element | TraumaAlertType |
| Multiple Entry | No |
| Accepts Nulls | No – Common Null Values (CNVs) are not accepted |
| Required Field | Yes – This element is required in the Florida Acute Care Trauma (FACT) Manual |
| Field Format | One numeric digit |
| Field Values | See below |
| Field Constraints | From 5- 8 |
| Additional Info | For the purposes of this field, Trauma Center Criteria refers to having at least one Field Data Value into either *Trauma Center Criterion* or *Vehicular, Risk, Pedestrian* fields. |
| References |  |

|  |  |
| --- | --- |
| Field Values | |
| ~~1 Red (single criterion)~~ Retired 2015 | ~~2 Blue (two criteria~~) Retired 2015 |
| ~~3 GCS ≤ 12~~ Retired 2015 | ~~4 Judgment EMT~~ Retired 2015 |
| 5 Judgment Hospital | 6 Local (local criteria) |
| 7 NTA (Not a Trauma Alert) | 8 Trauma Center Criteria |

| Rule ID | Level | Rule Description |
| --- | --- | --- |
| 51301 | 1 | Invalid value (element must conform to data specification) |
| 51302 | 2 | Field cannot be blank |
| 51303 | 2 | Not Applicable, field must be valued |
| 51304 | 2 | Not Known/Not Recorded, field must be valued |
| 51307 | 2 | If Trauma Alert is valued as 8, then either Trauma Center Criterion or Vehicular, Risk, Pedestrian must be valued. |
| 51308 | 2 | If Trauma Alert is valued as 7, then both Trauma Center Criterion and Vehicular, Risk, Pedestrian must be valued as a *Not Applicable.* |

Diagnoses Information

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| --- | --- |
| DG\_02 ICD-9 INJURY DIAGNOSES | |
| **Field Definition** | Diagnoses related to all identified injuries. |
| **Data Format** |  |
| **XSD Data Type** | xs:string |
| **XSD Element** | InjuryDiagnosis |
| **Multiple Entry** | Yes, max 50 |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Conditional - This element is required if ICD-10 Injury Diagnoses is not valued. |
| **Field Format** |  |
|  |
| **Field Values** | Injury diagnoses as defined by ICD-9-CM code range: 800-959.9, except for 905 – 909.9, 910 – 924.9, 930 – 939.9. The maximum number of diagnoses that may be reported for an individual patient is 50 |
| **Field Constraints** | **Minimum Length:** 3 **Maximum Length:** 6 |
| **Additional Info** | * ICD-9-CM codes pertaining to other medical conditions (e.g., CVA, MI, co-morbidities, etc.) may also be included in this field. Used to auto-generate additional calculated fields:   + Abbreviated Injury Scale (six body regions)   + Injury Severity Score. * Business rule 6903 will not be checked if patient is classified as a Florida Trauma Alert as described by *EDF-01 Trauma Alert Type*. |
|  |
| **References** |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 6901 | 1 | Invalid value |
| 6902 | 2 | Field cannot be blank, must either (1) contain a valid ICD-9 code or (2) be Not Applicable if not coding ICD-9 |
| 6903 | 2 | If coding with ICD-9, then at least one diagnosis must be provided and meet inclusion criteria (ICD-9-CM 800 – 959.9, except for 905 – 909.9, 910 – 924.9, 930 – 939.9) |
| 6904 | 4 | Field should not be Not Known/Not Record |

|  |  |
| --- | --- |
| DG\_03 ICD-10 INJURY DIAGNOSES | |
| **Field Definition** | Diagnoses related to all identified injuries. |
| **Data Format** | *[combo] multiple-choice* |
| **XSD Data Type** | xs:string |
| **XSD Element** | DiagnosisIcd10 |
| **Multiple Entry** | Yes, max 50 |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Conditional – This element is required if ICD-9 Injury Diagnoses is not valued. |
| **Field Format** |  |
|  |
| **Field Values** | Injury diagnoses as defined by ICD-10-CM code range S00-S99, T07, T14, T20-T28 and T30-T32 . The maximum number of diagnoses that may be reported for an individual patient is 100. |
| **Field Constraints** | **Minimum Length:** 3 **Maximum Length:** 8 |
| **Additional Info** | * ICD-10-CM codes pertaining to other medical conditions (e.g., CVA, MI, co-morbidities, etc.) may also be included in this field. Used to auto-generate additional calculated fields:   + Abbreviated Injury Scale (six body regions)   + Injury Severity Score * Business rule 8703 will not be checked if patient is classified as a Florida Trauma Alert |
|  |
| **References** |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

|  |  |  |
| --- | --- | --- |
| 8701 | 1 | Invalid value |
| 8702 | 2 | Field cannot be blank, must either (1) contain a valid ICD-10 code or (2) be Not Applicable if not coding ICD-10 |
| 8703 | 2 | If coding with ICD-10, then at least one diagnosis must be provided and meet inclusion criteria |
| 8704 | 4 | Field should not be Not Known/Not Recorded |

# Injury Severity Information

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| --- | --- |
| ISF\_05 LOCALLY CALCULATED ISS | |
| **Field Definition** | The Injury Severity Score (ISS) that reflects the patient's injuries. |
| **Data Format** | *[combo] single-choice* |
| **XSD Data Type** | xs:integer |
| **XSD Element** | IssLocal |
| **Multiple Entry** | No |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Yes – This element is required in AFTDS |
| **Field Format** |  |
|  |
| **Field Values** | Relevant ISS value for the constellation of injuries |
| **Field Constraints** | Minimum Constraint 1 Maximum Constraint 75 |
| **Additional Info** | This field is now a Florida Specific Field. |
| **References** |  |

|  |  |  |
| --- | --- | --- |
| Rule ID | Level | Rule Description |
| 7401 | 1 | Locally calculated ISS is outside the valid range of 1 - 75 |
| 7402 | 3 | Value should be the sum of three squares |
| 7403 | 2 | Field cannot be blank |

# 

# Outcome Information

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| --- | --- |
| O\_03 HOSPITAL DISCHARGE DATE | |
| **Field Definition** | The date the patient was discharged from the hospital. |
| **Data Format** | *[date]* |
| **XSD Data Type** | xs:date |
| **XSD Element** | HospitalDischargeDate |
| **Multiple Entry** | No |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| **Field Format** | YYYY-MM-DD |
|  |
| **Field Values** | Relevant value for data element. |
| **Field Constraints** | **Minimum Constraint 1990 Maximum Constraint 2030** |
| **Additional Info** | The null value "Not Applicable" is used if ED Discharge Disposition = 5 (Deceased/expired). The null value "Not Applicable" is used if ED Discharge Disposition = 4,6,9,10, or 11. |
|  |
| **References** |  |

|  |  |  |
| --- | --- | --- |
| Rule ID | Level | Rule Description |

|  |  |  |
| --- | --- | --- |
| 7701 | 1 | Date is not valid |
| 7702 | 1 | Date out of range |
| 7703 | 2 | Field cannot be blank |
| 7707 | 2 | Hospital Discharge Date is earlier than ED/Hospital Arrival Date |
| 7708 | 2 | Hospital Discharge Date is earlier than ED Discharge Date |
| 7709 | 3 | Hospital Discharge Date is earlier than Date of Birth |
| 7710 | 3 | Hospital Discharge Date minus Injury Incident Date is greater than 365 days |
| 7711 | 3 | Hospital Discharge Date minus ED/Hospital Arrival Date is greater than 365 days |
| 7712 | 2 | Field must be Not Applicable when ED Discharge Disposition = 4,6,9,10, or 11 |
| 7713 | 2 | Field must be Not Applicable when ED Discharge Disposition = 5 (Died) |

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| --- | --- |
| O\_04 HOSPITAL DISCHARGE TIME | |
| **Field Definition** | The time the patient was discharged from the hospital. |
| **Data Format** | *[time]* |
| **XSD Data Type** | xs:time |
| **XSD Element** | HospitalDischargeTime |
| **Multiple Entry** | No |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| **Field Format** | HH:MM. HH:MM should be collected as military time |
|  |
| **Field Values** | Relevant value for data element. |
| **Field Constraints** | **Minimum Constraint 00:00 Maximum Constraint 23:59** |
| **Additional Info** | Used to auto-generate an additional calculated field: Total Length of Hospital Stay (elapsed time from ED/hospital arrival to hospital discharge). The null value "Not Applicable" is used if ED Discharge Disposition = 5 (Deceased/expired). The null value "Not Applicable" is used if ED Discharge Disposition = 4,6,9,10, or 11. |
|  |
| **References** |  |

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| --- | --- | --- |
| Rule ID | Level | Rule Description |

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| --- | --- | --- |
| 7801 | 1 | Time is not valid |
| 7802 | 1 | Time out of range |
| 7803 | 2 | Field cannot be blank |
| 7807 | 4 | Hospital Discharge Time is earlier than the ED/Hospital Arrival Time |
| 7808 | 4 | Hospital Discharge Time is earlier than the ED Discharge Time |
| 7809 | 2 | Field must be Not Applicable when ED Discharge Disposition = 4,6,9,10, or 11 |
| 7810 | 2 | Field must be Not Applicable when ED Discharge Disposition = 5 (Died) |

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| --- | --- |
| O\_05 HOSPITAL DISCHARGE DISPOSITION | |
| **Field Definition** | The time the patient was discharged from the hospital. |
| **Data Format** | *[combo] single-choice* |
| **XSD Data Type** | xs:integer |
| **XSD Element** | HospitalDischargeDisposition |
| **Multiple Entry** | No |
| **Accepts Nulls** | Yes, common null values |
| **Required Field** | Yes – This element is required in the National Trauma Data Standard (NTDS) |
| **Field Format** |  |
|  |
| **Field Values** | 1. Discharged/Transferred to a short-term general hospital for inpatient care 2. Discharged/Transferred to an Intermediate Care Facility (ICF) 3. Discharge/Transferred to home under care of organized home health service 4. Left against medical advice or discontinued care  5. Deceased/Expired  6. Discharged to home or self-care (routine discharge)  7. Discharged/Transferred to Skilled Nursing Facility (SNF) 8. Discharged/ Transferred to hospice care ~~9. RETIRED 2014 Discharged/Transferred to court/law enforcement.~~  10. Discharged/Transferred to court/law enforcement 11. Discharged/Transferred to inpatient rehab or designated unit 12. Discharged/Transferred to Long Term Care Hospital (LTCH) 13. Discharged/Transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital 14. Discharged/Transferred to another type of institution not defined elsewhere |
| **Field Constraints** | **Enumerated List** |
| **Additional Info** | Field value = 6, "home" refers to the patient's current place of residence (e.g., prison, Child Protective Services etc.). Field values based upon UB-04 disposition coding. Disposition to any other non-medical facility should be coded as 6. Disposition to any other medical facility should be coded as 14. The null value "Not Applicable" is used if ED Discharge Disposition = 5 (Deceased/expired). The null value "Not Applicable" is used if ED Discharge Disposition = 4,6,9,10, or 11. |

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| --- | --- | --- |
| ***Rule ID*** | Level | Rule Description |

|  |  |  |
| --- | --- | --- |
| 7901 | 1 | Value is not a valid menu option |
| 7902 | 2 | Field cannot be blank |
| 7903 | 2 | Field must be Not Applicable when ED Discharge Disposition = 5 (Died) |
| 7907 | 2 | Field must be Not Applicable when ED Discharge Disposition = 4,6,9,10 or 11 |
| 7908 | 2 | Field cannot be Not Applicable |
| 7909 | 2 | Field cannot be Not Known/Not Recorded when Hospital Arrival Date and Hospital Discharge Date are not: (1) blank, (2) Not Applicable, or (3) Not Known/Not Recorded |

# Change Log

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Change Date** | **Discharge Year** | **Change Location** | **Field Name** | **Content Change** |
| May-15 | 2016 | Dictionary Design |  | Updated dictionary design section to reflect current acronyms |
| May-15 | 2016 | Field Contents |  | Updated acronyms |
| May-15 | 2016 | Required Fields |  | Updated acronyms and updated based on removed/added fields |
| May-15 | 2016 | Reporting Overview |  | Provided clarification of this section and removed extraneous information |
| May-15 | 2016 | Inclusion Criteria |  | Updated to provide specific guidance on how to determine inclusion in the registry. Clarified definition of an admission and provided a flow chart |
| May-15 | 2016 | Submission Details |  | Refined section to provide clarification |
| May-15 | 2016 | Definitions |  | Added a definition |
| May-15 | 2016 | Data Fields |  | Removed business rules that were dependent on fields that were being removed from the FACT Manual |
| May-15 | 2016 | Demographics | Trauma Registry Number | Removed |
| May-15 | 2016 | Demographics | Medical Record Number | Added |
| May-15 | 2016 | Demographics | Age | Added |
| May-15 | 2016 | Demographics | Age Units | Added |
| May-15 | 2016 | Demographics | ESPTN | Updated with clarifying information |
| May-15 | 2016 | Pre-Hospital Information | EMS Dispatch Date | Removed |
| May-15 | 2016 | Pre-Hospital Information | EMS Dispatch Time | Removed |
| May-15 | 2016 | Pre-Hospital Information | EMS Arrival on Scene Date | Removed |
| May-15 | 2016 | Pre-Hospital Information | EMS Arrival on Scene Time | Removed |
| May-15 | 2016 | Pre-Hospital Information | EMS Departure from Scene Date | Removed |
| May-15 | 2016 | Pre-Hospital Information | EMS Departure from Scene Time | Removed |
| May-15 | 2016 | Pre-Hospital Information | Trauma Center Criteria | Added |
| May-15 | 2016 | Pre-Hospital Information | Vehicular, Pedestrian, Risk Injury | Added |
| May-15 | 2016 | Referring Hospital Information | Referring Hospital ID | Removed |
| May-15 | 2016 | Referring Hospital Information | Referring Hospital Arrival Date | Removed |
| May-15 | 2016 | Referring Hospital Information | Referring Hospital Arrival Time | Removed |
| May-15 | 2016 | Referring Hospital Information | Referring Hospital Discharge Date | Removed |
| May-15 | 2016 | Referring Hospital Information | Referring Hospital Discharge Time | Removed |
| May-15 | 2016 | Emergency Department Information | Initial ED/Hospital Systolic Blood Pressure | Removed |
| May-15 | 2016 | Emergency Department Information | Initial ED/Hospital Pulse Rate | Removed |
| May-15 | 2016 | Emergency Department Information | Initial ED/Hospital Respiratory Rate | Removed |
| May-15 | 2016 | Emergency Department Information | Initial ED/Hospital GCS – Eye | Removed |
| May-15 | 2016 | Emergency Department Information | Initial ED/Hospital GCS – Verbal | Removed |
| May-15 | 2016 | Emergency Department Information | Initial ED/Hospital GCS – Motor | Removed |
| May-15 | 2016 | Emergency Department Information | Initial ED/Hospital GCS Assessment Qualifiers | Removed |
| May-15 | 2016 | Emergency Department Information | Trauma Alert Type | Updated menu choices and supporting business rules |
| August -15 | 2016 | Injury Severity Information | Locally Calculated ISS | Updated field to be a Florida Specific due to removal from NTDS. |
| August -15 | 2016 | Data Fields |  | Updated business rules to match current NTDB standards on various fields |