ARIZONA STATE TRAUMA REGISTRY (ASTR)

TRAUMA PATIENT INCLUSION DEFINITION

(Effective for trauma records with ED/Hospital Arrival Dates Jan. 1, 2012 forward)

1. A patient with injury or suspected injury who is triaged from a scene to a trauma center or ED based upon the responding EMS provider’s trauma triage protocol; OR

   B. **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; OR

2. A patient with injury or suspected injury for whom a trauma team activation occurs; OR

3. A patient with injury who:
   A. Is admitted as a result of the injury OR who dies as a result of the injury AND
   B. Has an ICD-9-CM N-code* within categories 800 through 959 AND
   C. Does not ONLY have:
      a) Late effects of injury or another external cause:
         ICD-9-CM N-code within categories 905 through 909
      b) A superficial injury or contusion:
         ICD-9-CM N-code within categories 910 through 924
      c) Effects of a foreign body entering through an orifice:
         ICD-9-CM N-code within categories 930 through 939
      d) An isolated femoral neck fracture from a same-level fall:
         ICD-9-CM N-code within category 820 AND
         ICD-9-CM E-code within category E885 or E886
      e) An isolated distal extremity fracture from a same-level fall:
         ICD-9-CM N-code within categories 813 through 817 or 823 through 826 AND
         ICD-9-CM E-code within category E885 or E886
      f) An isolated burn:
         ICD-9-CM N-code within categories 940 through 949

*N-code* refers to the nature/diagnosis of injury, as coded according to ICD-9-CM.

**The Inter-facility Transfer criteria were updated for 2012 records forward, per TEPI advisory board recommendation.**

Note: Inclusion criteria changes are effective for trauma records with ED/Hospital Arrival Dates Jan. 1, 2012 forward. Changes to inclusion criteria affect the numbers and types of records submitted to ASTR. Changes should be taken into consideration when comparing multiple years of ASTR data.
2012 Arizona Trauma Registry Inclusion Criteria

Did the EMS provider triage the patient by their trauma triage protocol?

- Yes
- No

Are you a Level III or IV trauma center transporting an injured patient via EMS to another acute care hospital?

- Yes
- No

Was there a trauma team activation*?

- Yes
- No

Was the patient admitted in the hospital (not ED) as a result of the injury?

- Yes
- No

Did the patient die as a result of the injury?

- Yes
- No

Does the patient have an ICD-9-CM N code within categories 800 and 959?

- Yes to ONE or BOTH
- No to BOTH

Question: Is this an isolated case of......

- ...a superficial injury or contusion?
  (ICD-9CM N-code 910-924)

- ... a late effect injury or another external cause?
  (ICD-9CM-N code 905 and 909)

- ... a same level fall resulting in an isolated femoral neck fracture OR distal extremity fracture?
  (ICD-9CM N-code 820 OR 813-817, 823-826 AND E885 or E886)

- ... a foreign body entering an orifice?
  (ICD-9CM N-code 930-939)

- ... an isolated burn?

No to ALL of the isolated case questions

Yes to ONE of the isolated case questions

Patient INCLUDED in the Arizona Trauma Registry

Patient NOT INCLUDED in the Arizona Trauma Registry

*Activation is determined by facility

January 1, 2012 to December 31, 2012